**Class 2 Residential Facility Frequently Asked Questions**

**General FAQ about the Licensing Process**

**What kinds of residential facilities does OMHAS License?**

Residential facilities require **licensure** by the Ohio Department of Mental Health & Addiction Services (OhioMHAS) if they operate a publicly or privately-operated home or facility that falls into one of the following categories.

**Class One** – provides accommodations, supervision, personal care services, and mental health services for one or more unrelated adults with mental illness or one or more unrelated children or adolescents with severe emotional disturbances. Owned/operated by a Behavioral Health Agency.

**Class Two** – provides accommodations, supervision, and personal care services to any of the following:

1. One or two unrelated persons with mental illness;
2. One or two unrelated adults who are receiving residential state supplement payments; or,
3. Three to sixteen unrelated adults.

**Class Three** – provides room and board for five or more unrelated adults with mental illness.

**How can I get a copy of the Residential Facility Rules and Regulations?**

The rules that apply to residential care facilities are in rules 5122-30 and were most recently updated 1/1/18. The rules are located online at <https://mha.ohio.gov/About-us/Regulation/Rules#2308586-licensure-of-residential-facilities-5122-30> . If you

have questions, email Licensure and Certification staff at [LicCert@mha.ohio.gov](mailto:LicCert@mha.ohio.gov).

**Where can I get an application to apply for licensure for a Class Two residential facility?**

Applications are **only** available online and can be accessed here: <https://mha.ohio.gov/Health-Professionals/Licensure-and-Certification/Residential-Programs-non-SUD>. If you have questions, email Licensure and Certification staff at [LicCert@mha.ohio.gov](mailto:LicCert@mha.ohio.gov).

**I have the rules and regulations and I have questions, who do I contact for help?**

If you are currently licensed or in the process of being licensed, contact your assigned Behavioral Health Surveyor. If you are not yet licensed, email Licensure and Certification staff at[**LicCert@mha.ohio.gov**](mailto:LicCert@mha.ohio.gov)**.**

**How can I find out who my Behavioral Health Surveyor is and how to contact him or her?**

Email Licensure and Certification staff at[**LicCert@mha.ohio.gov**](mailto:LicCert@mha.ohio.gov)**.**

**Where can I get training on how to open a Class Two Residential Facility or training on the rule requirements?**

Webinars on the rule requirements are available free of charge online and can be accessed here: <https://mha.ohio.gov/Health-Professionals/Licensure-and-Certification/LC-Webinars-and-Trainings#152678-residential-facilities-non-substance-use-disorder>

A free toolkit for starting your own Class Two Facility ( formerly known as an Adult Care Facility) is available online at <https://mha.ohio.gov/Portals/0/assets/SchoolsAndCommunities/CommunityAndHousing/HousingResources/Business-Toolkit_OhioMHAS_FINAL.pdf> This document is informational only and not to be considered as professional business advice. This document was prepared prior to the rules changes effective on January 1, 2018 and portions of the document may no longer be applicable**.**

OhioMAS staff also provide free quarterly resource meetings for the operators, owners and staff to have a chance to interact with OhioMHAS. These meetings will offer different topics relevant to operating an Residential Facility Class 2 (formerly known as an Adult Care Facility), provide information on resources, best practices, and state policy that impacts the homes and trainings that meet licensure requirements. These meetings are face-to-face in Columbus to accommodate the entire state. Information on the meetings and registration information can be accessed here;

Training and materials from previous Class 2 (Adult) Residential Facility Quarterly Resource meetings can be accessed here: <https://mha.ohio.gov/Schools-and-Communities/Community-and-Housing/Housing-Resources/Training-Learning-Series>

**What is required to be submitted with the application for licensure?**

The application has instructions explaining the documents and documentation that must be submitted. All areas of the application must be completed and include all the requested documentation for your facility.

Information on the required fire inspection, building inspection and other inspections is located here: https://mha.ohio.gov/Portals/0/assets/AboutUs/Regulation/Rules/5122-30-12.pdf

Staff are required to have criminal background record checks. The information for the background checks for staff is located here;

Staff qualifications and training requirements are located here ;

<https://mha.ohio.gov/Portals/0/assets/AboutUs/Regulation/Rules/5122-30-20.pdf>

You are required to have policies and procedures for operating your facility. You are required to submit the following with the application; a disaster plan, a policy regarding the facility's access to the resident's locked storage space, a plan for responding to temperatures in the facility above 81 degrees, to assure the health, safety, and comfort of residents, and a resident rights and grievance procedure. Training on writing these policies is available as a Power Point Presentation and can be accessed here:

<https://mha.ohio.gov/Schools-and-Communities/Community-and-Housing/Housing-Resources/Resources-and-Materials-from-Past-Events#1820252-residential-facility-class-2-resource-meeting--june-2018>

Sample forms are located here: <https://mha.ohio.gov/Health-Professionals/Licensure-and-Certification/Residential-Programs-non-SUD#153797-sample-forms>

The completed application, with the required supporting documents and the $75.00 fee, must be received by OhioMAS and complete before your facility is assigned to a Behavioral Health Surveyor to begin the licensing process. A check or money order for the fee made payable to “Treasurer State of Ohio” must be sent with the application. If you have questions, email Licensure and Certification staff at [LicCert@mha.ohio.gov](mailto:LicCert@mha.ohio.gov).

**What is the process after I send in my application?**

OhioMAS administrative staff in Columbus will review the application and supporting documents. If it is complete you will be assigned a Behavioral Health Surveyor who will contact you to discuss the licensing process.

If the application is not complete, it will be returned to you. You can resubmit the application with the information that was missing or incomplete.

**I am already licensed, will OhioMAS send me an application to renew my license?**

OhioMAS will NOT send out notifications to renew your license, providers are required to go online to access the application here **For renewal of a license, complete materials for an application must be received by the department ninety days prior to the expiration date of the current license**.  Rule 5122-30-04 Licensure Application and Procedures provides information on how to apply for a license and the required documentation needed. If you need help, contact your assigned Behavioral Health Surveyor or email LicCert@mha.ohio.gov.

**When do I need to send in my application to renew my license?**

For renewal of a license, the completed application with the $75.00 fee must be received by OhioMAS **90 days prior to the expiration date of your current license**. Applications and all required documents must be mailed to the address on the application. Faxes or electronic copies of the application and documentation will not be accepted.

Applications are **only** available online and can be accessed here: <https://mha.ohio.gov/Health-Professionals/Licensure-and-Certification/Residential-Programs-non-SUD#12935-spanh5bh-providers-sign-uph5span>.

The rule requirements for licensure application and procedures are located here: <https://mha.ohio.gov/Health-Professionals/Licensure-and-Certification/Residential-Programs-non-SUD#12935-spanh5bh-providers-sign-uph5span>

If you have questions, email Licensure and Certification staff at [LicCert@mha.ohio.gov](mailto:LicCert@mha.ohio.gov).

**I need to send in an Incident Report, how do I do that?**

Licensed residential facilities must track critical care incidents related to health and safety within their facilities. Web Enabled Incident Reporting System (WEIRS) is an online incident reporting system for use by Residential Care Facilities to incidents. You may submit the incident report through the WEIRS system online, via fax, email or mail.

In order to access the system, you will need to select one person from your organization to serve as the “external administrator”, which is the individual who is authorized to assign User Roles (level of access privileges) to other staff. If you operate more than one licensed facility, the External Administrator may register up to eight license numbers for one account. Contact [LicCert@mha.ohio.gov](mailto:LicCert@mha.ohio.gov) to request an account or if you have questions.

If not utilizing WEIRS, incident notification reports may be submitted in one of the following three ways:

* **Email:** [**IncidentReport@mha.ohio.gov**](mailto:IncidentReport@mha.ohio.gov)
* **Fax: (614) 485-9739**
* **Mail: OhioMHAS, 30 East Broad Street, 7th Floor, Columbus, Ohio 43215**

Information on submitting incident reports is located here:

[**https://mha.ohio.gov/Health-Professionals/Licensure-and-Certification/Incident-Reporting**](https://mha.ohio.gov/Health-Professionals/Licensure-and-Certification/Incident-Reporting)

The incident form is located here:[**https://mha.ohio.gov/Portals/0/assets/HealthProfessionals/Licensure%20and%20Certification/IncidentReporting/Residential-Incident-Notification\_Class%202\_3\_0318.pdf?ver=2018-10-23-161401-173**](https://mha.ohio.gov/Portals/0/assets/HealthProfessionals/Licensure%20and%20Certification/IncidentReporting/Residential-Incident-Notification_Class%202_3_0318.pdf?ver=2018-10-23-161401-173)

The rule requirements for incident notification and risk management is located here:

[**http://codes.ohio.gov/oac/5122-30-16**](http://codes.ohio.gov/oac/5122-30-16)

**Site and Safety FAQ:**

**Is a class two facility required to have a fire inspection?**

Yes, regardless of the number of residents.

**Who can conduct the fire inspection?**

The fire inspection must be completed by certified fire inspector from your local fire department or the Ohio Division of State Fire Marshall. A certified fire inspector is an individual who has received approval from the State to conduct a fire inspection. A fireman or firewoman, or other individual employed by a local fire department or other entity who is employed by a local fire department is not qualified to conduct a fire inspection of the facility unless they are certified fire inspector.

**How often do I need a fire inspection?**

You must obtain an approved fire inspection prior to applying for the initial (first) license and within 12 months of the date of previous inspection if you are currently licensed. “Approved” means the inspection was without deficiencies or a certified fire inspector has provided written documentation that all deficiencies have been corrected and the facility is approved.

**Do I have to have a sprinkler system?**

The rule uses the language “automatic fire extinguishing system “, which includes a sprinkler system. The requirement for an automatic fire extinguishing system is dependent upon the type of residents that you are providing care for or plan to provide care for, if you are providing care for non- ambulatory residents you will need this system. "Non-ambulatory" means an individual who is unable to get in and out of bed independently, is unable to walk without physical assistance from another individual or requires a wheelchair. The fire inspector will determine the type of automatic fire extinguishing system that is needed for your specific facility.

Facilities licensed as of 1/1/18 shall have until 1/1/20 to obtain an automatic fire extinguishing system if you are providing care for non-ambulatory residents. Initial applicants for licensure after 1/1/18 must meet the rule requirements prior to licensure and have the sprinkler system if you are planning on providing care for non-ambulatory residents.

**Do I need a Building Inspection or Certificate of Occupancy to get licensed?**

For the initial licensure of your facility, if you are requesting to be licensed for **6 or more household members** you are required to get a building inspection or a copy of the certificate of occupancy for your building. Household members includes residents and any individuals who reside in the facility, such as staff, family members of the owner, or friends of the owner.

If you make any alterations or modifications to the building after licensure you will need a new certificate of occupancy or a certificate of completion. Some cities or towns require certificates of occupancy for other reasons, check with your local building department if you have any questions.

**Can the total number of “household members” exceed the number on the facility’s Certificate of Occupancy?**

**No, your facility cannot exceed the number of household members listed on the occupancy permit.** The facility must be used in accordance with the occupancy permit, this includes the number of “occupants” or people residing in the home. Household members includes residents and any individuals who reside in the facility, such as staff, family members of the owner, or friends of the owner.

**Are non-resident household members living in the facility counted as occupying a “resident bed”?**

Residents and household members must have their own beds and bedrooms. Residents cannot share a room with a household member. You will be asked to specify which bedrooms will be used for residents of the facility.

The maximum number of residents and household members for the facility is based on several things; the occupancy permit, as applicable, and the square footage of common indoor living space, as well as bedroom space. If bedrooms are in the basement or above the second floor, the bedrooms must be approved by the fire inspector.

The application requires you to provide information on the square footage of your facility as well as the space used for residents. OhioMAS Behavioral Health Surveyor staff will determine the maximum number of residents and household members for your facility based on the rule requirements. The license will specify the approved number of household members and residents for your facility.

**Can adults have bedrails installed on their beds?**

Yes, there is nothing in rule that prohibits the proper use of bedrails.

**Staff Requirements FAQ**

**Do the trainings listed in 5122-30-20 Qualifications of Operator and Staff (C) must be conducted “in-person” or can they be completed through other avenues (i.e. video, online, etc.)?**

**Standard First Aid, and CPR must be completed in person. Training in fire and other disaster procedures can be a combination of online and facility specific training, as this training must be specific to the facility disaster plan/procedures. Training online alone or generic fire/disaster procedures trained by an outside training source for this topic is not sufficient to meet the training requirement. The other topics may be completed online or electronically with documentation of the training topic and the training source in the staff record.**

**If a facility is not providing assistance with self-administration of medication (because no current resident requires it), are the staff required to be annually trained in self-administration of medication?**

Class 2 Facilities must assist with self-administration of medication for residents who require it. **Staff who are assisting with self-administration of medication must receive the training. If staff are not assisting with self-administration of medication, then the staff are not required to complete the training.**

**However, if the facility does accept a resident who needs assistance with self-administration of medication or a current resident needs assistance due to a change in health status, then the staff must be trained in the self-assistance of medication prior to providing assistance to the resident.**

**Do staff have to have a TB Test prior to hire?**

Yes, staff are required to have a TB test indicating that they do not have active TB on file prior to hire. If the test shows active TB, the staff cannot be hired. A copy of the results of the TB test must be kept in the staff file.

**Does the staff TB test need to be updated annually?**

No, there is no requirement for staff to complete an annual update of the TB test. However, testing shall be repeated anytime there has been a likelihood of staff exposure to TB.

**What does it mean that staff must be promptly available to provide appropriate and needed assistance to the residents 24 hours per day?**

The facility must have a staffing plan to ensure that staff are available 24 hours per day, on or off premises, to meet an immediate need of a resident without delay. If staff are not on the premises, the residents must know how to and be able to contact staff.

The facility must have a staffing plan for staff coverage that includes emergency situations, vacations, and planned absences, like a medical appointment. The staffing plan of the facility is based on the known needs of the residents, as well as a plan for emergencies. If there are no staff on premises, the provider is responsible for ensuring that the residents can evacuate the facility and know how to contact emergency assistance.

**Do I have to have staff at the facility 24 hours a day 7 day a week?**

Staffing is based on the needs of the residents. Staff are required to be onsite at the facility if a resident is present that needs assistance with walking, bathing, toileting, eating, dressing; requires ongoing supervision per the personal care plan or other documentation, has “as needed” or “PRN” medication, or if a resident needs assistance with self administration of medication. Staff are required to remain at the facility for at least one hour after medication is self administered to ensure that there are no adverse side effects to the medication. The rule requirements for staffing can be accessed here; <https://mha.ohio.gov/Portals/0/assets/Regulation/Rules/04072017/30-21.pdf>

**Resident Requirements FAQ**

**Do providers have to provide a “central locked storage” space in the facility for residents, if the resident requests it?**

**No, however if the facility provides a central locked storage for the resident’s funds or other valuables, the facility must have a policy on when and how the resident can access the locked storage. This must include specific information for your facility, such as can the resident access it at anytime upon request, or are there specific hours each day that the storage can be accessed? The access procedures to the locked central storage must be written in the resident agreement. The resident must have access to the central locked storage each day of the week.**

**Do providers have to provide individual locked storage space for the resident?**

**Yes, the facility is required to provide each adult, upon their request, an individual locked storage space provided by the facility that is freely available within the facility. The provider must have a policy on the provider’s access to the locked storage space and inform the resident of the policy when the resident is admitted. The provider must document that the resident was informed of the policy.**

**What must be in a Personal Care Plan?**

**Each resident, facility staff and the referring agency or person, are required to work together to determine the individualized personal care services to be provided to the resident and the responsibilities of the facility staff to provide the personal care services. The specific personal care services to be provided by the facility staff must be written in a personal care plan completed within 14 days of the resident being admitted to the facility.**

**If no personal care plan is needed, the provider must document in the resident file that the resident is not in need of personal care services. If the resident requires services that the facility does not offer, the facility shall provide for the provision of the services at no additional cost to the resident or transfer the resident to a facility that provides the services.**

**What must be documented in the Personal Care Plan progress notes?**

**The progress notes must include documentation of the personal care services that were provided to the resident and include the resident’s progress. The notes must be dated and include the resident’s name. The notes must be individualized for each resident and include the specific personal care services provided to the resident and progress during the weekly timeframe. If no personal care plan is needed because the resident does not receive personal care services, you must document in the resident file that the resident is not in need of personal care services.**

**How often do I have to write a Personal Care Plan progress note?**

The progress notes for each individual resident receiving personal care services must be completed at least weekly.

**When does the Resident Medical Assessment need to be competed?**

The medical assessment must be completed by qualified medical professional **prior to the date of admission.** The medical assessment must have been completed within twelve months prior to the date of placement in the facility.

**What must be in a Resident Medical Assessment?**

The assessment must include, but not be limited to the following: identifying whether the resident is capable of self-administering medication, and, if assistance is needed, the type of assistance required; a list of current medications, including name, dosage and schedule to take the medications; current medical diagnosis and allergies, if applicable and documentation of any dietary restrictions or special diets.

**Are TB tests required for residents?**

No, TB tests are no longer required as part of the medical assessment.

**Do I have to have ‘In House” Client Rights Advocate?**

Yes, in a class two facility, the resident rights or client rights advocate is a residential facility staff that must be promptly accessible and responsible for implementing the grievance procedure.

Ohio’s Office of the State Long-term Care Ombudsman advocates for people receiving home care, assisted living and nursing home care. Paid and volunteer staff work to resolve complaints about services, help people select a provider and offer information about benefits and consumer rights. They do work with providers, residents, their families and other representatives to resolve problems and concerns, however the responsibility to implement the facility grievance procedure is that of the residential facility staff.