

DCY Rule Comments Implementing HB 315

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The Ohio Council of Behavioral Health & Family Services Providers appreciates the opportunity to comment on the proposed DCY rules implementing House Bill 315, as outlined in Transmittal Letter 54. We have had the opportunity to review the proposed rules, and we support DCY's intent to strengthen safety, coordination, and oversight. Our comments focus on areas where greater clarity would support consistent implementation.

Below are our specific comments on OAC 5180:3-13-65.2.

1. It is our understanding that HB 315 defines ORC 2151.46, which cross references ORC 5103.05, to be residential facilities certified by the Department of Children and Youth. As such, we note that this is the only rule where DCY has included reference to "substance use disorder (SUD) residential facilities" in (A)(1), which by definition are regulated by the OhioMHAS. Since DCY does not hold jurisdiction over SUD residential facilities and the rule title is limited to residential facilities, which is clearly defined in OAC 5180:2-1-01 nor does DCY include any other clearly defined residential settings regulated by other state entities, it is inappropriate to include SUD residential facilities in this rule.

Recommendation: Remove reference to "substance use disorder (SUD) residential facilities" in (A)(1). This creates consistency with the rule title and remaining rules in this package.

2. This rule uses language that is vague and lacks the specificity necessary for consistent application. Paragraph (A)(2)(a)(ii) references the child's "current vulnerability," a term that is undefined and may lead to wide variation in interpretation across counties. Without clear criteria, decisions about initiating placement reviews could be based on subjective judgment, rather than a shared understanding of safety risk.

Similarly, under (A)(2)(c)(i) PCSA or PCPA criteria for observations that would trigger a mandatory review of the residential placement are ambiguous. Specifically, (a), (c), and (f) of this section are poorly differentiated. For example, it is unclear how (a) and (c) differs in substance when both appear to address health and safety concerns of the facility and could also be potentially a "rule violation under (f). This redundancy introduces confusion for PCSA/PCPAs and DCY certified providers alike. Further, the language in (f) referencing "any identified rule violation" lacks boundaries. It is unclear whether this applies only to DCY-enforced rules or includes unrelated OAC requirements, such as those governed by OhioMHAS or the Department of Developmental Disabilities. Without clarification, the rule creates a significant overreach into regulatory jurisdiction areas outside DCY's authority and creating inappropriate enforcement expectations.

There is also no mention of how PCSA/PCPA staff are expected to be trained to apply these criteria, particularly as it relates to "any identified rule violation" or how providers will be engaged and informed of the review process.

Recommendation: Revise the rule to more clearly define terminology for consistency in application and understanding. Specifically, in(A)(2)(a)(ii) define “current vulnerability.” In (A)(2)(c)(i) consolidate (a) and (c) to focus on health and safety concerns of the facility or more clearly differentiate how these two criteria differ. Further in (f), narrow the scope of rule violations to rules under statutory authority of DCY. Stronger guardrails and clearer definitions are essential to ensure fair, appropriate, and non-duplicative application.

Below are our specific comments on OAC 5180:3-13-90.

1. Paragraph (E) states that information will be shared with the “Board of Education,” while paragraph (F) uses the term “school district.” These terms are not interchangeable and may lead to inconsistent application and confusion about the intended recipient. More importantly, referring to the “Board of Education” raises concerns about whether sensitive child information could be disclosed to the full board, which may trigger public records issues or lead to inappropriate sharing of private information. The language in paragraph (F) is more appropriate and should be used consistently.

Additionally, DCY Form 01442 appears to capture the information referenced in both (E) and (F). It is unclear why this information must be delivered through different channels. Consolidating requirements around this form would reduce administrative burden and support more efficient communication.

Recommendation: Revise paragraph (E) to refer to “school district” for clarity and consistency. We also recommend confirming that the 01442 Form is sufficient to meet the documentation expectations in both paragraphs (E) and (F).

2. We are also concerned that paragraph (C) permits up to 60 days for foster caregivers to receive psychological reports. While this language is permissive and includes “as soon as possible” qualification, this is a significant delay that stands out from all other placement types and may leave caregivers without the information they need to safely and effectively support the child placed in their care. Timely access to this information is essential for placement stability and caregiver preparedness.

Recommendation: the 60-day maximum in paragraph (C) should be shortened to ensure that foster caregivers receive behavioral health information in a timely manner.

We appreciate the opportunity to provide feedback on this rule package and support DCY’s work to strengthen care coordination and oversight. As implementation continues, it is important that expectations be clearly defined, aligned across systems, and mindful of the role and capacity of residential providers. We remain committed to collaboration in advancing effective care and safe placements for youth and families. If you would like to discuss our comments further, please contact me at thrasher@theohiocouncil.org.