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3701-17-52 **Residential care facility licensure application and renewal procedures; [revocation](#).**

- (A) Every applicant for a license to operate a residential care facility shall truthfully and fully complete and submit an application to the director not less than sixty days before the proposed opening of the facility. Such application shall be made on a form prescribed and furnished by the director.
- (B) The initial application for a license to operate a residential care facility shall be accompanied by:
 - (1) A statement by the applicable zoning authority of the status of the proposed residential care facility under any applicable zoning ordinances or rules or a statement by the applicant that there is no zoning authority where the proposed residential care facility is to be located;
 - (2) A statement of financial solvency at the time of the initial application and updated as requested by the director, on a form prescribed and furnished by the director, showing that the applicant has the financial ability to staff, equip, and operate the residential care facility in accordance with Chapter 3721. of the Revised Code, and rules 3701-17-50 to 3701-17-68 of the Administrative Code, and that the applicant has sufficient capital or financial reserve to cover not less than three months' operation;
 - (3) A statement of ownership containing the following information:
 - (a) If the operator is an individual or superintendent or administrator of a county home or district home, the individual's name, address, and telephone number. If the operator is an association, corporation, [or](#) partnership, the business activity, address, and telephone number of the entity and the name of every person who has an ownership interest of five per cent or more in the entity; and
 - (b) If the operator does not own the building or buildings or if the operator owns only part of the building or buildings in which the residential care facility is housed, the name of each person who has an ownership interest of five per cent or more in the buildings.
 - (c) The name and address of any residential care facility and any facility described in paragraphs (M)(1) and (M)(3) of rule 3701-17-50 of the Administrative Code in which the operator or administrator, or both, have an ownership interest of five per cent or more or with which the operator or administrator have been affiliated with through ownership or employment in the five years prior to the date of the application;

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- (d) The name, business address and telephone number of the administrator of the residential care facility, if different from the operator; and
 - (e) The name, business address and telephone number of any management firm or business employed to manage the residential care facility.
- (4) Copies of the certificate of occupancy required by paragraph (A) of rule 3701-17-63 of the Administrative Code and the heating inspection report required by paragraph (A) of rule 3701-17-65 of the Administrative Code.

(C) For purposes of this rule, a facility, or part thereof, is considered to "hold itself out" as serving a special population if it:

(1) Advertises, in any medium, care for individuals with any of the following:

- (a) late-stage cognitive impairment with significant ongoing daily living assistance needs;
- (b) cognitive impairments with increased emotional needs or presenting behaviors that cause problems for the resident or other residents, or both; or
- (c) serious mental illness.

(2) Represents to the department or the public, that the facility, or part thereof, provides care for individuals with any of the following:

- (a) late-stage cognitive impairment with significant ongoing daily living assistance needs;
- (b) cognitive impairments with increased emotional needs or presenting behaviors that cause problems for the resident or other residents, or both; or
- (c) serious mental illness.

(3) Admits ten or more individuals or twenty percent of the facility's census, whichever is greater, with any of the following:

- (a) late-stage cognitive impairment with significant ongoing daily living assistance needs;
- (b) cognitive impairments with increased emotional needs or presenting behaviors that cause problems for the resident or other residents, or both; or
- (c) serious mental illness.

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(D) The operator of a residential care facility, or part thereof, that holds itself out as serving a special population, shall submit to the department a written description of the special care provided to such residents on a form prescribed and furnished by the director. The description shall include:

(1) A statement of mission or philosophy that reflects the needs of the special population;

(2) Admission criteria to the residential care facility, or part thereof, including screening criteria;

(3) Transfer and discharge criteria and procedures;

(4) A weekly staffing plan for the facility or part thereof. If for a part of a facility, the staffing plan shall:

(a) State how it differs from the staffing plan for the remainder of the facility; and

(b) Detail the necessary increase in supervision, due to decreased safety awareness or other assessed condition, of residents with cognitive impairments in the secured unit.

(5) A description of activities offered, including frequency and type, how the activities meet the needs of the type of residents in that special care unit. If for a part of a facility, the description shall include how these activities differ from those offered in the remainder of the facility;

(6) A listing of the costs of the services provided by the facility to the resident;

(7) Specialized staff training and continuing education practices;

(8) The process used for assessment and the provision of services, including the method for altering services based on changes in condition;

(9) If necessary, how the facility addresses the behavioral healthcare needs of residents;

(10) The physical environment and design features to support the functioning of residents in the facility or part thereof;

(11) The involvement of families and the availability of family support programs for residents in the facility or part thereof;

(12) Any services or other procedures that are over and above those provided in the remainder of the facility, if part of a facility; and

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(13) Any other information the director may require.

~~(C)~~(E) The operator of a residential care facility shall pay a nonrefundable application fee at the time the operator makes initial application for a license and an annual renewal application and licensing fee ~~of one hundred dollars for each fifty persons or part thereof of the residential care facility's licensed capacity~~required by section 3721.02 of the Revised Code. Payment shall be in the form of a check or money order payable to the "Treasurer, State of Ohio." The annual renewal fee shall be paid during the month of January of each calendar year. Any residential care facility that does not pay its renewal fee in January shall pay, beginning the first day of February, a late fee of one hundred dollars for each week or part thereof that the renewal fee is not paid. If either the renewal fee or the late fee is not paid by the fifteenth day of February, the director may, in accordance with Chapter 119. of the Revised Code, revoke the facility's license.

~~(D)~~(F) The director may request any additional information the director determines to be necessary to assess compliance with the applicable criteria, standards, and requirements established by Chapter 3721. of the Revised Code and rules 3701-17-50 to 3701-17-68 of the Administrative Code. The applicant shall truthfully respond and submit any additional information requested by the director within sixty days of the director's request.

~~(E)~~(G) The director shall issue a license to operate a residential care facility if, after completion of the inspection required by paragraph (A) of rule 3701-17-53 of the Administrative Code and review of the license application, the director determines that the facility meets the requirements of section 3721.07 of the Revised Code. The license shall remain in effect until revoked by the director or voided at the request of the applicant if the annual renewal fee is paid during the month of January of each year.

~~(F)~~(H) The director may ~~deny or revoke a license in accordance with Chapter 119. of the Revised Code for violations of Chapter 3721. of the Revised Code and rules 3701-17-50 to 3701-17-68 of the Administrative Code.~~ issue an order denying or revoking a license in the event the director finds, upon hearing or opportunity afforded pursuant to Chapter 119. of the Revised Code, that any of the following apply to a person, county home, or district home licensed under section 3721.07 of the Revised Code:

(1) Has violated any of the provisions of Chapter 3721. of the Revised Code or of rules 3701-17-50 to 3701-17-68 of the Administrative Code;

(2) Has violated any order issued by the director;

(3) Is not, or any of its principals are not suitable, morally or financially, to operate such an institution;

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(4) Is not furnishing humane, kind, and adequate treatment and care; or

(5) Has had a long-standing pattern of violations of Chapter 3721, of the Revised Code or of rules 3701-17-50 to 3701-17-68 of the Administrative Code that has caused physical, emotional, mental, or psychosocial harm to one or more residents.

(I) Upon the issuance of any order of revocation, the person whose license is revoked, or county home or district home that has its licensed revoked, may appeal in accordance with Chapter 119, of the Revised Code.

(J) Once the director notifies a person, county home, or district home licensed to operate a home that the license may be revoked or issues any order under section 3721.03 of the Revised Code or under this rule, the person, county home, or district home shall not assign or transfer to another person or entity the right to operate that home. This prohibition shall remain in effect until proceedings under Chapter 119, of the Revised Code concerning the order or license revocation have been concluded or the director notifies the person, county home, or district home that the prohibition has been lifted.

(1) If a license is revoked under this section, the former license holder shall not assign or transfer or consent to assignment or transfer of the right to operate the home. Any attempted assignment or transfer to another person or entity is void.

(2) On revocation of a license, the former license holder shall take all necessary steps to cease operation of the home.

~~(G)~~(K) A license to operate a residential care facility is valid only for the premises named in the application. If ownership of a facility is assigned or transferred to a different person, the new owner is responsible and liable for compliance with any notice of proposed action or order issued under section 3721.08 of the Revised Code prior to the effective date of the assignment or transfer.

~~(H)~~(L) An operator who operates one or more residential care facilities in more than one building shall obtain a separate license for each building except if such buildings are on the same lot and constitute a single residential care facility, such facility may be operated under a single license. On or after the effective date of this rule, an operator who operates one or more residential care facilities in more than one building, where the buildings are intersected by a public roadway, shall not be granted a license to operate the buildings as a single residential care facility, unless before the effective date of this rule the buildings were so licensed.

~~(I)~~(M) The operator shall post the license in a conspicuous place in the residential care facility.

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~~(H)~~(N) In determining the number of residents in a residential care facility for the purpose of licensing, the director shall consider all the individuals for whom the facility provides accommodations as one group unless one of the following is the case:

- (1) The facility is seeking licensure as a home for the aging, in which case all the individuals in the part or unit licensed as a nursing home shall be considered as one group and all the individuals in the part or unit licensed as a residential care facility shall be considered as another group;
- (2) The facility maintains, in addition to a residential care facility, a separate and discrete part or unit that provides accommodations to individuals who do not require or receive skilled nursing care and do not receive personal care services from the residential care facility, in which case the individuals in the separate and discrete part or unit shall not be considered in determining the number of residents in the residential care facility if the separate and discrete part or unit is in compliance with the Ohio basic building code established by the board of building standards under Chapters 3781. and 3791. of the Revised Code and the facility permits the director, on request, to inspect the separate and discrete part or unit and speak with the individuals residing there, if they consent, to determine whether the separate and discrete part or unit meets the requirements of section 3721.02 of the Revised Code and this paragraph.
- (3) The facility provides an adult day care program on the same site as the facility that is separate and distinct from the facility except as otherwise permitted in rules 3701-17-50 to 3701-17-68 of the Administrative Code, in which case the participants of the adult day care program shall not be considered in determining the number of residents in the facility.

~~(K)~~(O) The director shall determine the type and number of residents a residential care facility can accommodate which shall be the authorized maximum licensed capacity of the facility. Such determination shall be made on the basis of the physical facilities, personnel of the facility and the services and care needed by the residents to be admitted or retained in the residential care facility, and the permitted occupancy approved by the department of commerce. No operator, administrator, staff member or any other person shall set up beds for resident use in a residential care facility which exceed the authorized maximum licensed capacity. If the residential care facility alters its physical facilities in a manner that affects bed capacity or proposes to move existing beds, the facility shall notify the director, in writing, at least sixty days prior to the date the facility wants to commence filling the new beds or moving existing beds. The residential care facility shall not commence filling the new beds or moving the existing beds until the director notifies the facility, in writing, that the alteration or move complies with the applicable provisions of Chapter 3721. of the Revised Code and rules 3701-17-50 to 3701-17-68 of the Administrative Code.