



Ohio Administrative Code

Rule 5122-41-07 Individual plan of care and services.

Effective: October 1, 2023

(A) PRTF services will involve "active treatment," which means implementation of a professionally developed and supervised individual plan of care described in paragraph (B) of this rule, that is:

(1) Developed and implemented as soon as possible but not later than fourteen days after admission; and,

(2) Designed to achieve the youth's transition from the PRTF at the earliest possible time.

(B) Individual plan of care.

(1) The individual plan of care will be in writing and developed for each youth in order to improve their condition to the extent that PRTF care is no longer necessary.

(2) The plan of care will:

(a) Be based on a diagnostic evaluation that includes examination of the medical, psychological, social, behavioral, and developmental aspects of the youth's situation and reflects the need for PRTF care.

(b) Be developed by a team of professionals specified in paragraph (D) of this rule in consultation with the youth and their parents or caregiver and legal guardians if applicable.

(c) State treatment objectives.

(d) Prescribe an integrated program of therapies, activities, and experiences designed to meet the objectives.

(3) When a PRTF includes youth with intellectual or developmental disabilities in its admission



criteria, the examination will also include an assessment by an occupational therapist to address underlying sensory needs and communication needs.

(C) The plan will be reviewed at least every thirty days, and more often when clinically indicated, by the team specified in this rule and the youth and family to:

(1) Determine that services being provided are or were necessary to be provided in a PRTF; and,

(2) Recommend changes in the plan as indicated by the youth's overall progress in the PRTF.

(D) Team developing and reviewing individual plan of care.

(1) The individual plan of care developed in accordance with this rule will be developed and reviewed by the interdisciplinary team identified in this paragraph. The members of the team will be employed by or provide services to the youth in the PRTF and their family or caregiver.

(2) Based on education and experience, including competence in child psychiatry, the team will be able to:

(a) Assess the youth's immediate and long-range therapeutic needs, developmental priorities, and personal strengths and liabilities;

(b) Assess the potential resources of the youth's family;

(c) Set treatment objectives; and,

(d) Prescribe therapeutic modalities to achieve the plan's objectives.

(3) At a minimum, the team will include one of the following:

(a) A board-eligible or board-certified psychiatrist;

(b) A licensed psychologist and a physician licensed to practice medicine or osteopathy; or,



(c) A physician licensed to practice medicine or osteopathy with specialized training and experience in the diagnosis and treatment of mental illness, and a clinical psychologist who has a master's degree in clinical psychology.

(4) The team will also include one of the following:

(a) An individual with competency in behavioral health who is one of the following: a licensed social worker, an independent social worker, a licensed professional counselor, a professional clinical counselor, a licensed marriage and family therapist, or an independent marriage and family therapist;

(b) A registered nurse, certified nurse practitioner or clinical nurse specialist with specialized training or one year of experience in treating individuals with behavioral health needs, e.g. mental illness or substance use disorder; or,

(c) A licensed psychologist.

(5) When a PRTF includes youth with intellectual or developmental disabilities in its admission criteria, the team will include an occupational therapist with experience in working with youth with intellectual or developmental disabilities.

(E) A PRTF will provide to a youth all of the following treatment and other services:

(1) A physical health examination by a physician or advanced practice registered nurse not later than twenty-four hours after admission; the PRTF will not compel but may accept an examination completed within seventy-two hours prior to admission to meet this standard.

(2) A psychiatric evaluation by a psychiatrist or other qualified independent medical practitioner not later than forty-eight hours after admission; the PRTF will not compel but may accept an examination completed within seventy-two hours prior to admission to meet this standard.

(3) Psychiatric services when clinically indicated. Psychiatric services will be available at all times on site or by telephone.



(4) Nursing services when clinically indicated.

(5) Education services that meet the minimum standards applicable to city, local, or exempted village school districts, community schools, and chartered nonpublic schools as set forth in chapter 3301 of the Administrative Code.

(6) Organized recreational activities.

(7) Transportation to other medical services, including laboratory, dental, vision, physical therapy, occupational therapy, or speech therapy, which the PRTF may provide directly or through a contractor.

(F) In addition to the treatment and other services specified in paragraph (E) of this rule, a PRTF will provide to each youth the following therapeutic services:

(1) A face-to-face consultation, lasting at least fifteen minutes, and occurring not less than once a week with a psychiatrist; other qualified physician; or a prescriber either under the direction of a physician or other practitioner with prescribing authority or practicing under a collaborative agreement;

(2) Individual counseling sessions with a licensed clinician, occurring not less than twice a week, for a total of at least ninety minutes each week;

(3) Group counseling sessions with a licensed clinician, occurring not less than five times a week, for a total of at least five hours each week;

(4) Family therapy or other family interventions in accordance with the youth's individualized plan of care;

(5) Art and music therapeutic services will be available to all youth in accordance with the youth's individualized plan of care;



(6) Medication administration, monitoring, and education as prescribed;

(7) Substance use disorder treatment in accordance with the American society of addiction medicine (ASAM) criteria when clinically indicated and included in the PRTF's admission criteria; and,

(8) Ancillary services based on the youth's clinical needs as indicated in the youth's individualized plan of care, provided seven days a week for at least two hours each day.

At least one therapeutic service specified in this paragraph will be provided on site each day. The provision of all therapeutic services specified in this paragraph will not amount to less than eight hours, total, each week.