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S.B. 239*
134th General Assembly

Bill Analysis

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Version: As Reported by Senate Health

Primary Sponsor: Sen. Blessing

Chenwei Zhang, Attorney

SUMMARY

- Requires professional treatment staff employed by public children services agencies (PCSAs) to meet the same educational qualifications and training requirements as required of PCSA caseworkers in existing law.
- Requires professional treatment staff employed by private child placing agencies (PCPAs) and private noncustodial agencies (PNAs) to also meet the same educational qualifications and training requirements as required of PCSA caseworkers under existing law, except that in the first year of continuous employment:
 - Staff only have to complete certain courses specified by the bill, rather than all of the required courses specified under existing law; and
 - Staff only need to undergo training for the number of hours that are needed to complete the specified courses, instead of the at least 120 hours of in-service training that is required for PCSA caseworkers under existing law for all the courses.
- Requires the Department of Job and Family Services (JFS) to work with PCPAs and PNAs to establish a comprehensive, competency-based professional treatment staff training program for employees of PCPAs and PNAs that meet the bill's training requirements.
- Allows PCPAs, PNAs, or qualified nonprofit organizations to offer the required training, provided that JFS approves it and has not yet established its own training program.

* This analysis was prepared before the report of the Senate Health Committee appeared in the Senate Journal. Note that the legislative history may be incomplete.

DETAILED ANALYSIS

Professional treatment staff qualifications

The bill provides certain requirements for professional treatment staff who work for public children services agencies and private child placing agencies or private noncustodial agencies. “Professional treatment staff” is defined by the bill as a specialized foster home program agency employee or contractor with responsibility for any of the following:

- Providing rehabilitative services to a child placed in a specialized foster home program or to the child’s family;
- Conducting home studies as an assessor for specialized foster homes;
- Providing clinical direction to specialized foster caregivers;
- Supervision of treatment team leaders.¹

The bill maintains the same definition for “specialized foster home” as under existing law regarding the placement of children. Under that definition, a specialized foster home is a medically fragile foster home or a treatment foster home. Under current law, a “medically fragile foster home” provides specialized medical services designed to meet the needs of children with intensive health care needs and a “treatment foster home” incorporates special rehabilitative services to treat the specific needs of the children received in the home and that receives and cares for children who are emotionally or behaviorally disturbed, chemically dependent, have developmental disabilities, or otherwise have exceptional needs.²

Qualifications for staff of public children services agencies

The bill requires professional treatment staff employed by a public children services agency (PCSA) who are not subject to professional licensing requirements for counselors, social workers, and marriage and family therapists to meet the same qualifications and in-service training requirements as PCSA caseworkers under existing law, which is unchanged by the bill.³

Qualifications for staff of private agencies

Training requirements

The bill’s requirements for professional treatment staff employed by a private child placing agency (PCPA) or private noncustodial agency (PNA) who are not subject to the professional licensing requirements for counselors, social workers, and marriage and family therapists are almost identical to that of professional treatment staff employed by a PCSA – they must also meet the same qualifications and in-service training requirements as PCSA

¹ R.C. 5103.57(A).

² R.C. 5103.57(B); R.C. 5103.02(F), (K), and (L), not in the bill.

³ R.C. 5103.58(A); R.C. Chapter 4757 and R.C. 5153.112 and 5153.122, not in the bill.

caseworkers under existing law, except that PCPA and PNA staff have fewer requirements during the first year of continuous employment. First, staff do not have to complete all of the courses that are required for the first year. Rather, they only have to complete the following courses:

- Recognizing, accepting reports of, and preventing child abuse, neglect, and dependency;
- Assessing child safety;
- Assessing risks;
- Providing services to children and their families;
- The importance of and need for accurate data;
- Maintenance of case record information;
- Content on other topics relevant to child abuse, neglect, and dependency, including permanency strategies, concurrent planning, and adoption as an option for unintended pregnancies.

Second, staff only need to undergo training for the number of hours that are needed to complete the above courses, instead of the at least 120 hours of in-service training that is required for PCSA caseworkers under existing law for all the courses.⁴

Who can provide training

The bill requires the Department of Job and Family Services (JFS) to work with PCPAs and PNAs to establish a comprehensive, competency-based professional treatment staff training program for employees of PCPAs and PNAs that meet the bill's training requirements.⁵

Before JFS establishes its training program, PCPA, PNA, or qualified nonprofit organization may offer the required training, provided that JFS approves it. JFS must approve or disapprove a program no later than 60 days after the program is submitted for approval. However, once JFS establishes its own training program, all training must be provided by JFS only, and all previously approved training programs from PCPAs, PNAs, or qualified nonprofit organizations must cease operation.⁶

⁴ R.C. 5103.58(B)(1); R.C. 5153.122, not in the bill.

⁵ R.C. 5103.59.

⁶ R.C. 5103.58(B)(2) to (4).

HISTORY

Action	Date
Introduced	09-30-21
Reported, S. Health	---
