

Rule Summary and Fiscal Analysis

Part A - General Questions

Rule Number: 5101:2-42-07

Rule Type: Amendment

Rule Title/Tagline: Extension of "Agreement for Temporary Custody of Child" (JFS 01645).

Agency Name: Department of Job and Family Services

Division: Division of Social Services

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I. Rule Summary

1. **Is this a five year rule review?** Yes
 - A. **What is the rule's five year review date?** 3/21/2024
2. **Is this rule the result of recent legislation?** No
3. **What statute is this rule being promulgated under?** 119.03
4. **What statute(s) grant rule writing authority?** 5153.166
5. **What statute(s) does the rule implement or amplify?** 5103.15, 5153.16
6. **Does the rule implement a federal law or rule in a manner that is more stringent or burdensome than the federal law or regulation requires?** No
 - A. **If so, what is the citation to the federal law or rule?** Not Applicable
7. **What are the reasons for proposing the rule?**

Five year rule review.
8. **Summarize the rule's content, and if this is an amended rule, also summarize the rule's changes.**

OAC 5101:2-42-07 prescribes the JFS 01645 form to be used by agencies to extend the agreement of temporary custody of a child. Proposed changes to the rule include changes to update material references and minor phrasing changes for clarity.

9. **Does the rule incorporate material by reference? Yes**
10. **If the rule incorporates material by reference and the agency claims the material is exempt pursuant to R.C. 121.75, please explain the basis for the exemption and how an individual can find the referenced material.**

This rule incorporates one or more references to the Ohio Revised Code. this questions is not applicable to any incorporation by reference to the Ohio Revised Code because such reference is exempt from compliance with RC 121.71 to 121.74 pursuant to RC 121.75 (A)(1)(a).

This rule incorporates one or more references to another rule or rules of the Ohio Administrative Code. This question is not applicable to any incorporation by reference to another OAC rule because such reference is exempt from compliance with RC 121.71 to 121.74 pursuant to RC 121.75 (A)(1)(d).

This rule incorporates one or more references to a form or a digital application into which data is entered. This question is not applicable to any incorporation by reference to forms or digital data applications because such reference is exempt from compliance with RC 121.75 to 121.74 pursuant to RC 121.75(B)(4).

11. **If revising or re-filing the rule, please indicate the changes made in the revised or re-filed version of the rule.**

Not Applicable

II. Fiscal Analysis

12. **Please estimate the increase / decrease in the agency's revenues or expenditures in the current biennium due to this rule.**

This will have no impact on revenues or expenditures.

0.00

This will have no impact on revenues or expenditures.

- 13. What are the estimated costs of compliance for all persons and/or organizations directly affected by the rule?**

No new costs.

- 14. Does the rule increase local government costs? (If yes, you must complete an RSFA Part B). No**

- 15. Does the rule regulate environmental protection? (If yes, you must complete an RSFA Part C). No**

- 16. If the rule imposes a regulation fee, explain how the fee directly relates to your agency's cost in regulating the individual or business.**

Not Applicable.

III. Common Sense Initiative (CSI) Questions

- 17. Was this rule filed with the Common Sense Initiative Office? Yes**

- 18. Does this rule have an adverse impact on business? Yes**

- A. Does this rule require a license, permit, or any other prior authorization to engage in or operate a line of business? Yes**

It is required for any private child placing agency to be licensed and follow the requirements set forth by this rule in order to conduct business.

- B. Does this rule impose a criminal penalty, a civil penalty, or another sanction, or create a cause of action, for failure to comply with its terms? Yes**

If the agency were to fail to comply with the requirements set forth in rule the action against the agency would be license forfeiture resulting in closure of business.

- C. Does this rule require specific expenditures or the report of information as a condition of compliance? Yes**

Expenditures related to the agency complying with the requirement of the rule to proceed with a revocation or denial of a foster care certificate.

- D. Is it likely that the rule will directly reduce the revenue or increase the expenses of the lines of business of which it will apply or applies? No**

IV. Regulatory Restriction Requirements under S.B. 9. Note: This section only applies to agencies described in R.C. 121.95(A).

19. Are you adding a new or removing an existing regulatory restriction as defined in R.C. 121.95? Yes

A. How many new regulatory restrictions do you propose adding to this rule? 0

B. How many existing regulatory restrictions do you propose removing from this rule? 3

5101:2-42-07 (C) The PCSA or PCPA shall notify the court of such termination within seven days.

5101:2-42-07 (D) A PCSA or PCPA shall accept the responsibilities as specified on a court-approved JFS 01645, in addition to any further responsibility imposed by law on one who holds temporary custody of a child.

5101:2-42-07 (A) The JFS 01645 must be utilized for an original or additional thirty-day extension of an agreement for temporary custody of a child.

C. If you are not removing existing regulatory restrictions from this rule, please list the rule number(s) from which you are removing restrictions.

D. Please justify the adoption of the new regulatory restriction(s).

Not Applicable

Ohio Department of Job and Family Services
AGREEMENT FOR TEMPORARY CUSTODY OF CHILD

PART I: AGREEMENT FOR TEMPORARY CUSTODY OF CHILD

Case Number: _____

_____ the Parent/Guardian/Custodian of _____,
(full name of parent/guardian/custodian) *(child's name)* *(D.O.B)*
 living at _____,
(street address, city, state)
 have the authority to sign this agreement for
 temporary custody. My relationship to the above-named child is _____. The purpose of my
(custodial role)
 signature is to request _____ to take temporary custody and control of the above-named child
(agency name)
 for placement and planning supportive services for the following reasons: _____

AS THE PARENT/GUARDIAN/CUSTODIAN, I AGREE TO THE FOLLOWING:

1. Be financially responsible for the following support and health care during the term of this agreement: _____
2. Visit with the child as follows: _____
3. Notify the Agency within 24 hours of any changes in address or telephone number.

THE AGENCY AGREES TO: 1) Provide care for the children in an approved substitute care setting and supervise the child. 2) Provide a plan for visitation between the parent/guardian/custodian and the child, consistent with the best interest of the child. 3) Notify the parent/guardian/ custodian in writing of its intention to terminate this agreement.

THE AGENCY WILL: 1) Arrange and consent to all medical services necessary for the child. Parents will be informed of all medical care provided during this agreement. In emergency situations, the agency will arrange for medical care and notify the parent(s) as soon as possible. 2) Arrange for the education of school age children. 3) Gather any needed educational, psychological, psychiatric and social information. 4) Give permission for the child to travel within or outside the State of Ohio as necessary for vacation, school, church and other events in the best interest of the child.

RELEASE OF INFORMATION: The Agency agrees that information regarding this voluntary agreement and information obtained about the child and family will only be released when it is deemed necessary and in the best interest of the child's health, education and welfare.

AGREEMENT PERIOD: This agreement will be effective from _____ to _____ and may be terminated upon a recommended three-day notice from the parent/guardian/custodian or the Agency. If it is necessary for the child to remain in custody longer than the above agreement period, the agency and the parent/guardian/custodian will seek the approval/of the parent/guardian/custodian and of the juvenile court for an extension of the temporary custody agreement. **If the Agency feels continued custody is necessary, despite the parent/guardian/custodian's disagreement, the Agency may file a petition with juvenile court requesting court-ordered custody.**

I, the parent/guardian/custodian, authorize the Agency to assume temporary custody of the child. Signature on this agreement does not in any way mean I am surrendering permanent custody of this child; nor can custody be transferred by the agency to anyone else. I have read this agreement, or it was read to me before I signed it. I was given the opportunity to ask questions concerning this agreement and those questions were fully answered to my satisfaction. I understand, authorize, and agree to the terms of this agreement. I am signing this agreement voluntarily.

Witness	Date	Signature of Parent/Guardian/Custodian	Date
Witness	Date	Signature of Parent/Guardian/Custodian	Date

I, the Agency representative authorized pursuant to the Ohio Revised Code Sections 5103.03 and 5103.15 to accept the temporary custody of children, accept temporary custody of the child(ren) named above, according to the terms of this agreement.

Witness	Date	Signature of Authorized Agency Representative	Date
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PART II: TERMINATION OF AGREEMENT FOR TEMPORARY CUSTODY OF CHILD

Child's Name	Case Number
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My signature ends this agreement for the following reason(s): _____

Witness	Date	Signature of Parent/Guardian/Custodian	Date
Witness	Date	Signature of Parent/Guardian/Custodian	Date
Witness	Date	Signature of Authorized Agency Representative	Date

PART III: AGREEMENT FOR EXTENSION OF TEMPORARY CUSTODY OF CHILD

Original 30-Day Extension Additional 30-Day Extension

I _____, the Parent/Guardian/Custodian of _____,
(full name) (child's name) (D.O.B.)

request _____ to extend the temporary custody and control of the above-named child for continued placement and
(agency name)

planning supportive services for the following reasons: _____

This extension is in the best interest of the child for these reasons: _____

The following significant progress has occurred and is reflected in the attached case plan: _____

AS THE PARENT/GUARDIAN/CUSTODIAN, I AGREE TO THE FOLLOWING:

1. Be financially responsible for the following support and health care during the term of this agreement: _____

2. Visit with the child as follows: _____

3. Notify the Agency within 24 hours of any changes in address or telephone number.

AGREEMENT EXTENSION PERIOD: This is an extension of the agreement for temporary custody, signed on _____, and will be effective from _____ to _____ and may be terminated upon a recommended three-day notice from the parent/guardian/custodian or the Agency.

RELEASE OF INFORMATION: The Agency agrees that information regarding this voluntary agreement and information obtained about the child and family will only be released when it is deemed necessary by the agency and in the best interest of the child's health, education and welfare.

I, the parent/guardian/custodian, authorize the extension of temporary custody of the child named above. Signature on this agreement does not in any way mean I am surrendering permanent custody of this child; nor can custody be transferred by the Agency. I have read this agreement, or it was read to me before I signed it. I was given the opportunity to ask questions concerning this agreement and those questions were fully answered to my satisfaction. I understand, authorize, and agree to the terms of this agreement. I am signing this agreement voluntarily.

My appearance before the court is necessary not necessary for approval of this extension for agreement of temporary custody.

Witness	Date	Signature of Parent/Guardian/Custodian	Date
Witness	Date	Signature of Parent/Guardian/Custodian	Date

I, the Agency representative authorized pursuant to the Ohio Revised Code Sections 5103.03 and 5103.15 to accept the temporary custody of children, request the extension of temporary custody of the child(ren) named above, according to the terms of this agreement.

Witness	Date	Signature of Authorized Agency Representative	Date

In the best interest of this child. the court approves the extension of this agreement for temporary custody. This custody is to terminate no later than:

Signature of Judge	Date