

## **SECTION- VI**

### ***Mission and Program***

- |      |   |            |  |
|------|---|------------|--|
| (x2) | { | VI-A.1(a)  | Mission, Vision and Values   |
|      |   | VI-A.1(b)  | Approval of Mission, Vision and Values                                       |
|      |   | VI-A.1(c)  | Review of Mission, Vision and Values   |
| (x2) | { | VI-A.2(a)  | Multi-Year Strategic Plan  |
|      |   | VI-A.2(b)  | Approval of the Multi-Year Strategic Plan                                    |
|      |   | VI-A.2(c)  | Review of the Multi-Year Strategic Plan                                      |
|      |   | VI-A.2(d)  | Multi-Year Strategic Plan Updates  |
| (x2) |   | VI-A.3.    | Assessment of Need for Facilities and Services                               |
| (x2) |   | VI-A.4.    | Community Plan   |
| (x2) |   | VI-A.5.    | Ongoing Planning Activities Coordinated with Partner Community Organizations |
| (x2) |   | VI-A.6.    | Evaluation of Services and Programs  |
| (x1) |   | VI-A.7.    | Services and Programs Funded and Populations Served                          |
| (x2) |   | VI-A.8.    | Policy and Procedures for Grievances   |
| (x2) | { | VI-A.9(a)  | Monitoring Grievances Received by Contract Agencies                          |
|      |   | VI-A.9(b)  | Annual Report of Grievances  |
| (x2) |   | VI-A.10.   | Privacy Officer  |
| (x2) |   | VI-A.11.   | Security Officer   |
| (x2) |   | VI-A.12.   | Client Rights Officer  |
| (x2) |   | VI-A.13.   | Program to Promote and Protect Client Rights                                 |
| (x2) |   | VI-A.14.   | Notification of Civil Rights Responsibilities                                |
| (x2) |   | VI-A.15.   | Civil Rights Compliance Policy   |
| (x2) |   | VI-A.16.   | Abuse or Neglect of Person Receiving Services                                |
| (x2) |   | VI-A.17.   | Abuse or Neglect of Person Receiving Services from a Residential Facility    |
| (x2) |   | VI-A.18.   | Abuse or Neglect of Person Residing in an Adult Care Facility                |
| (x2) |   | VI-A.19.   | Substantiated Charges of Abuse or Neglect                                    |
| (x2) |   | VI-A.20.   | Major Unusual Incidents/ Reportable Incidents                                |
| (x2) | { | VI-A.21(a) | Preparation of the Annual Report of Funded Programs                          |
|      |   | VI-A.21(b) | Submission of the Annual Report of Funded Programs                           |
|      |   | VI-A.21(c) | Availability of the Annual Report of Funded Programs to the Public           |
| (x2) |   | VI-A.22.   | Community Support System   |

- (x2) VI-A.23. Crisis Situations
- (x2) VI-A.24. Service Provision to Persons with Mental Illness or Severe Mental Disability Residing in Adult Care Facilities
- (x1) VI-A.25. Chief Clinical Officer
- (x2) VI-A.26. Involuntary Commitment
- (x2) VI-A.27. Probate Hearings
- (x2) VI-A.28. Forensic Monitors
- (x2) VI-A.29. Key Constituent Input in Planning and Decision Making
- (x2) VI-A.30(a). External Satisfaction/ Dissatisfaction Measure(s)
- (x2) VI-A.30(b). Review of Results of External Satisfaction/ Dissatisfaction Measure(s)
- (x2) VI-A.31(a). Internal Satisfaction/ Dissatisfaction Measure(s)
- (x2) VI-A.31(b). Review of Results of Internal Satisfaction/ Dissatisfaction Measure(s)
- (x2) VI-A.32. Family and Children First Council and Intersystem Collaboration
- (x2) VI-A.33. Compliance with the Local Family and Children First Council(s)' Children's Service Coordination Plan
- (x2) VI-A.34. Participation on the Child Fatality Review Board
- (x2) VI-A.35. Posted Notification of Rights and Laws

Standards VI-A.1(a) – VI-A.1(b)	Rationale/ Authority	Documentation/ Evidence
<b>VI-A.1(a)</b> The Board has written documentation that defines its mission, vision and values.	<ul style="list-style-type: none"> <li>▪ To clearly articulate the Boards purpose and philosophy, a description of its operations and core priorities.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Written Documentation</li> </ul>
<b>VI-A.1(b)</b> The Governing Board has approved and adopted the statement(s) documenting the Board's mission, vision and values.	<ul style="list-style-type: none"> <li>▪ To clearly articulate the Boards purpose and philosophy, a description of its operations and core priorities.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Governing Board Minutes</li> </ul>

Standards VI-A.1(c) – VI-A.2(d)	Rationale/ Authority	Documentation/ Evidence
<p><b>VI-A.1(c)</b> The Governing Board reviews on a regular basis the statement documenting the Board’s mission, vision and values.</p>	<ul style="list-style-type: none"> <li>▪ To clearly articulate the Boards purpose and philosophy, a description of its operations and core priorities.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Mission Statement</li> <li>▪ Vision Statement</li> <li>▪ Values/Principles Statement</li> <li>▪ Governing Board Minutes</li> </ul>
<p><b>VI-A.2(a)</b> The Board has a multi-year Strategic Plan outlining goals, objectives, priorities and strategies consistent with its mission, vision and values.</p> <p><b>Clarifier:</b> Strategic Plan is being interpreted as any form of written documentation that addresses at minimum the Board’s vision, mission, values, goals, objectives, priorities and strategy.</p>	<ul style="list-style-type: none"> <li>▪ To clearly articulate the Boards purpose and philosophy, a description of its operations and core priorities.</li> <li>▪ To set forth the future oriented goals and directions of the Board and describe how they will be achieved.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Strategic Plan</li> </ul>
<p><b>VI-A.2(b)</b> The Governing Board has approved and adopted the Board’s Strategic Plan.</p>	<ul style="list-style-type: none"> <li>▪ To establish broad future oriented goals and directions for the organization is a primary duty of a Governing Board.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Governing Board Minutes</li> </ul>
<p><b>VI-A.2(c)</b> The Governing Board regularly reviews progress toward achievement of goals, objectives, priorities and strategies of the Strategic Plan.</p>	<ul style="list-style-type: none"> <li>▪ To determine whether the current activities and focus are furthering progress toward stated goals, objectives, priorities and strategies.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Documentation of review of Strategic Plan</li> </ul>
<p><b>VI-A.2(d)</b> The Board should, as necessary, update and revise its Strategic Plan.</p>	<ul style="list-style-type: none"> <li>▪ To determine whether the stated goals, objectives, priorities and strategies are still in line with community needs and available resources.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Documentation of review of Strategic Plan</li> <li>▪ Board’s Previous Strategic Plans</li> </ul>

Standards VI-A.3 – VI-A.6	Rationale/ Authority	Documentation/ Evidence
<p><b>VI-A.3</b> The Board assesses the local needs for community mental health and alcohol/drug services and facilities.</p>	<ul style="list-style-type: none"> <li>▪ ORC 340.03 (A)(1)(a)</li> <li>▪ ORC 340.033 (A)(1)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Needs Assessment Data (prior utilization and input from community)</li> <li>▪ Community Plans</li> <li>▪ Committee and/or Board meeting minutes</li> </ul>
<p><b>VI-A.4</b> The Board prepares and submits its community plan(s).</p>	<ul style="list-style-type: none"> <li>▪ ORC 340.03 (A)(1)(c)</li> <li>▪ ORC 340.033 (A)(3)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Community Plan and Cover Letter</li> </ul>
<p><b>VI-A.5</b> The Board engages in ongoing planning activities coordinated with partner community organizations.</p>	<ul style="list-style-type: none"> <li>▪ ORC 340.03 (A)(1)(b)</li> <li>▪ ORC 340.033 (A)(2)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Community Plan</li> <li>▪ Documentation of Planning Data Collected</li> <li>▪ Needs Assessment Data</li> </ul>
<p><b>VI-A.6</b> The Board evaluates the services and programs it funds.</p>	<ul style="list-style-type: none"> <li>▪ To address programmatic efficiency and effectiveness, the relationship of these impacts to the cost of achieving them, and the outcomes for clients.</li> <li>▪ To strengthen the effectiveness of programs and services and, when necessary, be used to make programmatic changes.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Financial Audits</li> <li>▪ Program Audits</li> <li>▪ Client Right and Incident Reports</li> <li>▪ Outcome Data Reports</li> <li>▪ Performance Improvement Reports</li> <li>▪ Documentation of feedback loop the Board has in place for using evaluation to measure progress toward achieving mission</li> </ul>

Standards VI-A.7 – VI-A.11	Rationale/ Authority	Documentation/ Evidence
<p><b>VI-A.7</b> The Board maintains a listing and description of agencies, programs, and services funded as part of the local system of care and a description of target populations.</p>	<ul style="list-style-type: none"> <li>▪ To reflect in community plans and public relations materials.</li> <li>▪ To be used for planning purposes.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Agency Service Plans</li> <li>▪ Community Plans</li> <li>▪ Board PR Materials</li> </ul>
<p><b>VI-A.8</b> The Board has a policy and procedures to address grievances of client and family members.</p>	<ul style="list-style-type: none"> <li>▪ OAC 5122-26-18</li> <li>▪ OAC 5122:2-1-02</li> <li>▪ ORC 340.03 (A)(11)(j)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Policy and Procedures</li> <li>▪ Records of filed grievances or appeals, as applicable</li> </ul>
<p><b>VI-A.9(a)</b> The Board has provisions stating how it will monitor grievances received by contract agencies. <b>(ADAMH/CMH Boards)</b></p>	<ul style="list-style-type: none"> <li>▪ OAC 5122:2-1-02 (G)(H)(I)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Written Documentation</li> </ul>
<p><b>VI-A.9(b)</b> The Board provides an annual report of grievances to the Department(s).</p>	<ul style="list-style-type: none"> <li>▪ OAC 5122:2-1-02 (G)(H)(I)</li> <li>▪ ODADAS Guidance Manual Q-gr-1</li> </ul>	<ul style="list-style-type: none"> <li>▪ Annual Summary of Grievances submitted to the Department(s)</li> </ul>
<p><b>VI-A.10</b> The Board has a designated Privacy Officer.</p>	<ul style="list-style-type: none"> <li>▪ Health Insurance Portability and Accountability Act (HIPAA) 45 CFR Part 164</li> </ul>	<ul style="list-style-type: none"> <li>▪ Position Description</li> <li>▪ Written Documentation</li> </ul>
<p><b>VI-A.11</b> The Board has a designated Security Officer.</p>	<ul style="list-style-type: none"> <li>▪ Health Insurance Portability and Accountability Act (HIPAA) 45 CFR Part 164</li> </ul>	<ul style="list-style-type: none"> <li>▪ Position Description</li> <li>▪ Written Documentation</li> </ul>

Standards VI-A.12 – VI-A.15	Rationale/ Authority	Documentation/ Evidence
<p><b>VI-A.12</b> The Board has an assigned Client Rights Officer. <b>(ADAMH/ CMH Boards)</b></p>	<ul style="list-style-type: none"> <li>▪ ODMH-MSPA requirement</li> <li>▪ ORC 340.03 (A)(11)(J)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Position Description</li> <li>▪ Cover letter to the State Department</li> <li>▪ Written Documentation</li> </ul>
<p><b>VI-A.13</b> The Board has a program to promote and protect client rights. <b>(ADAMH/ ADAS Boards)</b></p>	<ul style="list-style-type: none"> <li>▪ ODADAS Board Assurances</li> </ul>	<ul style="list-style-type: none"> <li>▪ As communicated and shared by the Board.</li> </ul>
<p><b>VI-A.14</b> The Board complies with Annual Notification of Civil Rights Responsibilities: Designate civil rights coordinator; Designate Section 504 coordinator. <b>(ADAMH/ ADAS Boards)</b></p>	<p>Federal regulations passed on via ODADAS:</p> <ul style="list-style-type: none"> <li>▪ Title VI of the Civil Rights Act of 1964</li> <li>▪ Section 504 of the Rehabilitation Act of 1973, as amended</li> <li>▪ Age Discrimination Act of 1975</li> <li>▪ Omnibus Budget Reconciliation Act of 1981</li> </ul>	<ul style="list-style-type: none"> <li>▪ Position Description</li> </ul>
<p><b>VI-A.15</b> The Board shall have a Civil Rights Compliance Policy to assure that all programs, services and benefits administered, supervised, authorized and/ or participated in by Boards and contracted providers are operated in accordance with nondiscriminatory requirements or on the basis of race, color, sex, creed, age, disability, national origin, religion or inability to pay. <b>(ADAMH/ADAS Boards)</b></p>	<p>Federal regulations passed on via ODADAS:</p> <ul style="list-style-type: none"> <li>▪ Title VI of the Civil Rights Act of 1964</li> <li>▪ Section 504 of the Rehabilitation Act of 1973, as amended</li> <li>▪ Age Discrimination Act of 1975</li> <li>▪ Omnibus Budget Reconciliation Act of 1981</li> </ul>	<ul style="list-style-type: none"> <li>▪ Policy</li> </ul>

Standards VI-A.16 – VI-A.19	Rationale/ Authority	Documentation/ Evidence
<p><b>VI-A.16</b> The Board has policy and procedures for investigating any complaint alleging abuse or neglect of any person receiving services from a community mental health or alcohol/drug agency, or for delegating investigation to another entity.</p>	<ul style="list-style-type: none"> <li>▪ ORC 340.03(A)(2)</li> <li>▪ OAC 3793:2-1-04 (F)(3)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Policy and Procedures</li> </ul>
<p><b>VI-A.17</b> The Board has policy and procedures for investigating any complaint alleging abuse or neglect of any person receiving services from a residential facility licensed under ORC Section 5119.22, or for delegating investigation to another entity. <b>(ADAMH/CMH Boards)</b></p>	<ul style="list-style-type: none"> <li>▪ ORC 340.03 (A)(2)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Policy and Procedures</li> </ul>
<p><b>VI-A.18</b> The Board has policy and procedures for taking action, when it receives a complaint alleging abuse or neglect of an individual with mental illness or severe mental disability that resides in an adult care facility. <b>(ADAMH/CMH Boards)</b></p>	<ul style="list-style-type: none"> <li>▪ ORC 340.05</li> </ul>	<ul style="list-style-type: none"> <li>▪ Policy and Procedures</li> </ul>
<p><b>VI-A.19</b> The Board has policy and procedures for taking action it determines to be necessary to correct the situation if an investigation substantiates charges of abuse or neglect, including notification of appropriate authorities.</p>	<ul style="list-style-type: none"> <li>▪ ORC 340.03 (A)(2)</li> <li>▪ ORC 340.033 (A)(10)(G)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Policy and Procedures</li> </ul>

Standards VI-A.20 – VI-A.21(c)	Rationale/ Authority	Documentation/ Evidence
<p><b>VI-A.20</b> The Board has a process to review Major Unusual Incidents (MUI’s)/ Reportable Incident (RI) information that agencies report.</p>	<ul style="list-style-type: none"> <li>▪ OAC 3793:2-1-04 (F)(1)(2)</li> <li>▪ OAC 5122-26-13</li> </ul>	<ul style="list-style-type: none"> <li>▪ As communicated and shared by the Board</li> <li>▪ Documentation of Major Unusual Incidents/ Reportable Incidents</li> </ul>
<p><b>VI-A.21(a)</b> The Board prepares an annual report of the programs funded by the Board.</p>	<ul style="list-style-type: none"> <li>▪ ORC 340.03 (A)(10)</li> <li>▪ ORC 340.033 (A)(7)</li> <li>▪ To succinctly reflect past year’s progress and accomplishments.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Copy of Annual Report</li> </ul>
<p><b>VI-A.21(b)</b> The Board submits the annual report of the programs funded by the Board to the Department Director(s) and County Commissioners or their equivalent.</p>	<ul style="list-style-type: none"> <li>▪ ORC 340.03(A)(10)</li> <li>▪ ORC 340.033(A)(7)</li> <li>▪ To succinctly reflect past year’s progress and accomplishments.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Copy of Annual Report</li> <li>▪ Verification that report sent to various entities</li> </ul>
<p><b>VI-A.21(c)</b> The Board makes the annual report of the programs funded by the Board available to the public.</p>	<ul style="list-style-type: none"> <li>▪ ORC 340.03 (A)(10)</li> <li>▪ ORC 340.033 (A)(7)</li> <li>▪ To succinctly reflect past year’s progress and accomplishments.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Copy of Annual Report</li> <li>▪ Verification that the report was sent to various entities</li> </ul>

Standards VI-A.22 – VI-A.24	Rationale/ Authority	Documentation/ Evidence
<p><b>VI-A.22</b> The Board establishes, to the extent resources are available; a community support system that provides treatment, prevention, and support services. <b>(ADAMH/CMH Boards)</b></p>	<ul style="list-style-type: none"> <li>▪ ORC 340.03 (A)(11)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Community Plan(s)</li> <li>▪ Contracts</li> </ul>
<p><b>VI-A.23</b> The Board in its community plan(s) or service contracts makes provisions to respond to crisis situations which occur within its service district.</p>	<ul style="list-style-type: none"> <li>▪ ORC 5122.01 (s)</li> <li>▪ ORC 340.03 (A)(11)(d)</li> <li>▪ The Board should recognize its responsibilities to deal with crisis situations and put necessary and appropriate mechanisms in place.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Community Plan(s)</li> <li>▪ Service Contract(s)</li> </ul>
<p><b>VI-A.24</b> The Board has written documentation regarding the delivery of services to persons with mental illness or severe mental disability residing in adult care facilities.  <b>(ADAMH/ CMH Boards)</b></p>	<ul style="list-style-type: none"> <li>▪ ORC 340.03 (A)(16)</li> <li>▪ OAC 5122-31-02</li> </ul>	<ul style="list-style-type: none"> <li>▪ Agency Service Plans</li> <li>▪ Policy and Procedures</li> <li>▪ Written Documentation</li> </ul>

Standards VI-A.25 – VI-A.28	Rationale/ Authority	Documentation/ Evidence
<p><b>VI-A.25</b> The Board designates a Chief Clinical Officer. <b>(ADAMH/CMH Boards)</b></p>	<ul style="list-style-type: none"> <li>▪ ORC 5122.01(K)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Position Description</li> <li>▪ Personnel Records</li> <li>▪ Written Documentation</li> </ul>
<p><b>VI-A.26</b> The Board has procedures in place to meet requirements related to involuntary commitment. <b>(ADAMH/CMH Boards)</b></p>	<ul style="list-style-type: none"> <li>▪ ORC 5122.11</li> <li>▪ ORC 5122.12</li> <li>▪ ORC 340.03 (A)(13)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Procedures</li> <li>▪ Activity of Probate Court (notices, dispositions of hearings) on file</li> </ul>
<p><b>VI-A.27</b> The Board has written documentation to ensure that Board and/ or designated agency staff be present at probate hearings to assist the probate division of the court of common pleas in determining whether there is probable cause for involuntary hospitalization and what if any alternative treatment is available and appropriate. <b>(ADAMH/CMH Boards)</b></p>	<ul style="list-style-type: none"> <li>▪ ORC 340.03 (A)(13)</li> <li>▪ To protect the rights of individuals, explore clinically appropriate options, and represent financial interest of the Board.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Written Documentation</li> </ul>
<p><b>VI-A.28</b> The Board has designated a forensic monitor to monitor forensic clients in the hospital and in the community as defined by the court. <b>(ADAMH/CMH Boards)</b></p>	<ul style="list-style-type: none"> <li>▪ ORC 2945.40</li> </ul>	<ul style="list-style-type: none"> <li>▪ Community Plan</li> <li>▪ Written Documentation</li> <li>▪ Quarterly reports to the Office of Forensic Services on the current status of forensic clients</li> </ul>

Standards VI-A.29 – VI-A.31(b)	Rationale/Authority	Documentation/ Evidence
<p><b>VI-A.29</b> The Board solicits consumer, family member, key informant and community member input that is utilized in planning and decision-making.</p>	<ul style="list-style-type: none"> <li>▪ ORC 340.03(A)(15)</li> <li>▪ ORC 340.033(A)(11)</li> <li>▪ To ensure receipt of the valuable input provided by consumers, family members, key informants and community members.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Satisfaction Surveys and Reports on Data Collected</li> <li>▪ Documentation of meetings with family members and/or consumers</li> <li>▪ Governing Board Roster</li> </ul>
<p><b>VI-A.30(a)</b> The Board has external satisfaction/ dissatisfaction measure(s) in place.</p> <p><b>Clarifier:</b> External satisfaction/ dissatisfaction measures are instruments used to measure satisfaction/dissatisfaction of the overall county behavioral health system.</p>	<ul style="list-style-type: none"> <li>▪ ODADAS Compliance Guidelines Q-sat-(1) – (7)</li> <li>▪ To measure the levels of customer satisfaction</li> </ul>	<ul style="list-style-type: none"> <li>▪ Copy of Satisfaction Tool</li> <li>▪ Description of how the Board measures satisfaction</li> </ul>
<p><b>VI-A.30(b)</b> The Board regularly reviews the results of external satisfaction measures.</p>	<ul style="list-style-type: none"> <li>▪ To ensure that results of satisfaction/ dissatisfaction are evaluated and proper and necessary modifications are made.</li> </ul>	<ul style="list-style-type: none"> <li>▪ As communicated and shared by the Board</li> </ul>
<p><b>VI-A.31(a)</b> The Board has internal satisfaction/ dissatisfaction measures in place.</p> <p><b>Clarifier:</b> Internal satisfaction/ dissatisfaction measures are instruments used to measure satisfaction/ dissatisfaction with the Board’s operations.</p>	<ul style="list-style-type: none"> <li>▪ ODADAS Compliance Guidelines Q-sat-(1) – (7)</li> <li>▪ To measure the levels of provider agency satisfaction.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Copy of Satisfaction Tool(s)</li> <li>▪ Description of how the Board measures satisfaction</li> </ul>
<p><b>VI-A.31(b)</b> The Board regularly reviews the results of internal satisfaction measures.</p>	<ul style="list-style-type: none"> <li>▪ To ensure that results of satisfaction/ dissatisfaction are evaluated, and proper and necessary modifications are made.</li> </ul>	<ul style="list-style-type: none"> <li>▪ As communicated and shared by the Board.</li> </ul>

Standards VI-A.32 – VI-A.35	Rationale/ Authority	Documentation/ Evidence
<p><b>VI-A.32</b> The Board is an active member of Family and Children First Council(s) and participates in intersystem collaboration as defined by its local system.</p>	<ul style="list-style-type: none"> <li>▪ ORC 121.37</li> </ul>	<ul style="list-style-type: none"> <li>▪ Minutes of FCFC Meetings</li> <li>▪ Input from FCFC</li> </ul>
<p><b>VI-A.33</b> The Board ensures that the agencies with which it contracts for services comply with the local Family and Children First Council(s)'Children's Service Coordination Plan.</p>	<ul style="list-style-type: none"> <li>▪ ORC 121.37</li> </ul>	<ul style="list-style-type: none"> <li>▪ Contract(s)</li> </ul>
<p><b>VI-A.34</b> The Board participates in the Child Fatality Review Board(s).</p>	<ul style="list-style-type: none"> <li>▪ ORC 307.621</li> </ul>	<ul style="list-style-type: none"> <li>▪ As communicated and shared by the Board</li> </ul>
<p><b>VI-A.35</b> The Board has notices posted regarding: civil rights, ADA, Federal Labor Laws and Ohio Labor Laws.</p>	<ul style="list-style-type: none"> <li>▪ Title VI of the Civil Rights Act of 1964</li> <li>▪ Americans with Disabilities Act (ADA)</li> <li>▪ OAC 5122-2-1-02</li> </ul>	<ul style="list-style-type: none"> <li>▪ Postings</li> </ul>