



Monthly Parent Meeting
February 1, 2023

1. **Welcome, Good News, and Updates**
 - a. **Good News**
 - b. **General Rich Center Updates**

2. **Upcoming School Calendar/Important Dates**
 - a. **February 8th** – Autism Acceptance Men's Basketball Game.
 - b. **February 16th** – No School for Students/Staff In-Service.
 - c. **February 17th** – Women's Basketball Rich Center Game.
 - d. **February 19th** – No School Students & Staff.
 - e. **February 26th** – Tentative First Night of Rich Center Bowling.
 - f. **March 7th** – PM Conferences.
 - g. **March 8th** – AM Conferences.

3. **Parent Advisory Board Report**
 - a. **Service Hours / Updates**
 - b. **March 7th Parent Meeting / Upcoming Meeting Speakers**
 - c. **Newsletter/Strategic Planning**
 - d. **Additional updates**

4. **Judge Robert Rusu, Mahoning County Probate Court**

5. **Development & Events Report, Jake Ellis**

6. **Questions and Discussion Items**

Next Meeting: March 7, 2024



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PROBATE COURT OF _____ COUNTY, OHIO
_____, JUDGE

GUARDIANSHIP OF _____

CASE NO. _____

GUARDIAN'S REPORT
[R.C. 2111.49 and Sup.R. 66.05(B)(2)]

NOTE: If allotted space is inadequate to respond, write "See Exhibit" in the space and add appropriate exhibit letter sequence, then attach exhibit containing information requested for that space.

1. This is the (circle one) 1st, 2nd, 3rd, 4th, 5th, 6th, or _____, Guardian's Report.
2. Ward's present address: _____
City _____ State _____
Zip Code _____ Telephone Number (____) _____
3. Ward's living arrangements at the above address are best described as:
 - a. His or her own apartment or home (includes assisted living facilities.)
 - b. Private home or apartment of:
 - (1) the ward's guardian
 - (2) a relative of the ward, whose name is _____
and relationship is _____
 - (3) a non-relative whose name is _____
 - c. A foster, group, or boarding home.
 - d. A nursing home.
 - e. A medical facility or state institution.
 - f. Other (describe) _____

g. If c, d, e, or f is checked, complete the following:

 - (1) The name of the home, facility, or institution _____
 - (2) The name of an individual at the home, facility, or institution who has knowledge and is authorized to give information to the court about the ward.
Name _____
Telephone Number (____) _____
4. The ward will be at the address given in Item 2:
 - a. Indefinitely.
 - b. Temporarily. The new address and telephone number is:
 - (1) Unknown. I will provide this information when known.
 - (2) _____
City _____ State _____
Zip Code _____ Telephone Number (____) _____

CASE NO. _____

- 5. Guardian's contact with the ward.
 - a. Approximate number of times the guardian had contact with the ward during the period covered by this report: _____
 - b. The nature of those contacts (phone, personal, or other): _____
 - c. Date the ward was last seen by the guardian: _____

- 6. Have you observed any **major** change in the ward's physical or mental condition during the period covered by this report? Yes No
 If "yes" is checked, briefly describe the changes. _____

- 7. The care given to the ward is Adequate Not Adequate
 If "Not Adequate" is checked, explain. _____

- 8. The guardianship should be Continued Not Continued
 If "Not Continued" is checked, explain. _____

- 9. During the period covered by this report, the ward has has not been seen by a physician. If the ward has been seen, the last date was _____ and for the purpose of _____

- 10. I currently serve as the guardian to ten or more wards and certify to the Court that I am unaware of any circumstances that may disqualify me from serving as guardian for this ward.

- 11. With regard to the continuing education requirement pursuant to Sup.R. 66.07:
 - I have completed the continuing education requirement. (Attach Certificate of Completion if applicable)
 - The continuing education requirement was waived.

Attached is a statement by a licensed physician, a licensed clinical psychologist, a licensed social worker, or a developmental disability team, that has evaluated or examined the ward within three months prior to the date of this report regarding the need for continuing the guardianship. [R.C. 2111.49(A)(1)(I)](Form 17.1)

If an attorney has been consulted on this report:

Date _____

Attorney for Guardian

Guardian's Printed Name

Street

Guardian's Signature

City State Zip Code

Street

Telephone Number (include area code)

City State Zip Code

Attorney Registration No.

Telephone Number (include area code)

(Knowingly giving false information on a Probate document is a criminal offense)
[R.C. 2921.13(A)(11)]

PROBATE COURT OF _____ COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NO. _____

STATEMENT OF EXPERT EVALUATION

[Sup.R. 66 & R.C. 2111.49]

Definition of Incompetent (R.C. 2111.01(D)): "Incompetent" means any person who is so mentally impaired, as a result of a mental or physical illness or disability, or intellectual disability, or as a result of chronic substance abuse, that the person is incapable of taking proper care of the person's self or property or fails to provide for the person's family or other persons for whom the person is charged by law to provide, or any person confined to a correctional institution within this State.

The Statement of Evaluation does not declare the individual competent or incompetent but is evidence to be considered by the Court. The fee for completing this evaluation **WILL NOT** be paid by the Probate Court. Each evaluator should secure payment from the Applicant/Guardian.

1. This Statement of Expert Evaluation is to be filed with or attached to:

A. Guardianship Application: Completed by Licensed Physician or Licensed Clinical Psychologist prior to the filing and attached to the application.

B. Guardian's Report: Completed by Licensed Physician Licensed Clinical Psychologist Licensed Independent Social Worker Licensed Professional Clinical Counselor or Intellectual Disability Team.

The evaluation or examination shall be completed within three months prior to the date of the Report. R.C. 2111.49

C. Application for Emergency Guardian: of the person: a Licensed Physician shall complete the Supplement for Emergency Guardian, form 17.1A with specificity indicating the emergency, and why immediate action is required to prevent significant injury to the person. The Supplement shall be signed, dated, and attached as part of this completed Statement.

2. Statement completed by:

Name & Title/Profession: _____

Business Address: _____

Business Telephone Number: _____

3. Date(s) of evaluation: _____

Place(s) of evaluation: _____

Amount of time spent on evaluation: _____

Length of time the individual has been your patient: _____

PROBATE COURT OF _____ COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NO. _____

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2. Statement completed by:
Name & Title/Profession: _____
Business Address: _____
Business Telephone Number: _____

3. Date(s) of evaluation: _____
Place(s) of evaluation: _____
Amount of time spent on evaluation: _____
Length of time the individual has been your patient: _____

CASE NO. _____

8. Is the individual physically impaired? Yes No If yes: Description _____

9. Are there any special characteristics of the individual which should be considered in evaluating the individual for guardianship: Yes No If yes: Explain _____

10. Are there any indication of abuse, neglect, or exploitation of the individual? Yes No If yes: Explain _____

11. Do you believe the individual is capable of caring for the individual's activities of daily living or making decisions concerning medical treatments, living arrangements and diet? Yes No If no: Explain _____

12. Do you believe this individual is capable of managing the individual's finances and property? Yes No If no: Explain _____

13. Prognosis:
A. Is the condition stabilized? Yes No
B. Is the condition reversible: Yes No

14. In my opinion a guardianship should be:
 Established/Continued
 Denied/Terminated

I certify that I have evaluated the individual on _____, 20_____.

Date: _____

Signature of Evaluator

GUARDIAN'S REPORT ADDENDUM

(Not to be used with initial Application)

It is my opinion, based upon a reasonable degree of medical or psychological certainty that the mental capacity of this ward will not improve.

Date _____

Signature – Licensed Physician/Clinical Psychologist

THE RULES HAVE CHANGED...



STABLE 
ACCOUNT

SAVINGS AND INVESTMENT SOLUTIONS FOR PEOPLE WITH DISABILITIES

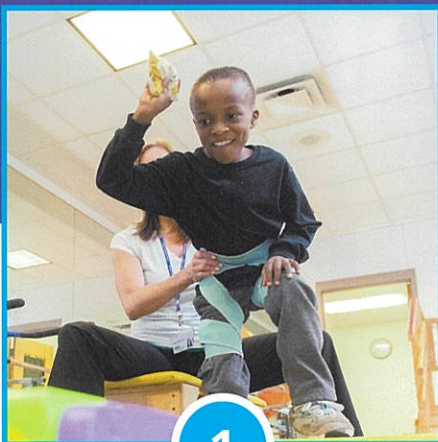
ADMINISTERED BY OHIO TREASURER JOSH MANDEL

THE RULES HAVE CHANGED...

STABLE Accounts are made possible by the Achieving a Better Life Experience (ABLE) Act that allows individuals with disabilities the ability to save and invest up to \$14,000 per year without losing government benefits such as Medicaid or SSI.

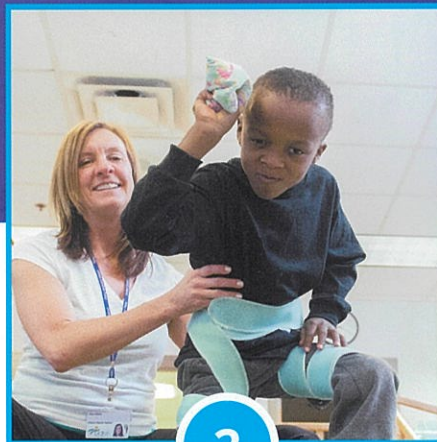
GETTING STARTED...

Go to **stableaccount.com** and follow the steps below:



1 CREATE AN ACCOUNT

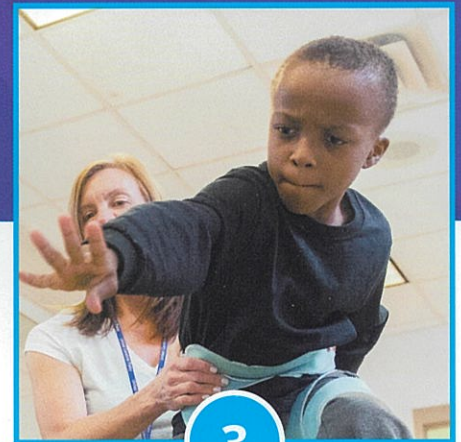
Open your account online at
www.stableaccount.com



2 FUND YOUR ACCOUNT

Deposit up to \$14,000 in your
STABLE account every year

Open an account with
as little as \$50



3 SAVE, INVEST & SPEND

Balances and distributions do not
affect needs-based financial aid
such as Medicaid or SSI

Subject to some limitations

Enroll online at stableaccount.com



ELIGIBILITY

Individuals who developed disabilities before the age of 26 may be eligible to open an account.

Take our **Eligibility Quiz** on stableaccount.com to see if you or someone you know qualifies.

SAVING AND INVESTING

DIVERSE CHOICES

You can put your money in up to five different saving and investment options, including four mutual fund based options and a FDIC-insured savings option.

TAX-FREE EARNINGS

Investment earnings are tax-free when used to pay for qualified expenses.

EASY ONLINE ACCESS

Monitor your investments, make contributions, and request withdrawals all online.

QUALIFIED EXPENSES

Use the money in your STABLE account to pay for disability-related expenses.



Basic Living Expenses



Housing



Transportation



Assistive Technology



Employment Training



Education



Health & Wellness



Financial Management



Legal Fees

THE STABLE CARD

Participants can request their own STABLE Card that can be used to spend STABLE funds and track qualified expenses.



Enroll online at stableaccount.com

OHIO TREASURER'S OFFICE

STABLE Accounts were created by The Ohio Treasurer's Office to offer savings and investment solutions for people with disabilities. The Ohio Treasurer's Office offers STABLE Accounts to all people with disabilities, regardless of their state of residence.

Visit stableaccount.com or call **1-800-439-1653** for more information.

STABLE 
ACCOUNT



OHIO TREASURER
JOSH MANDEL



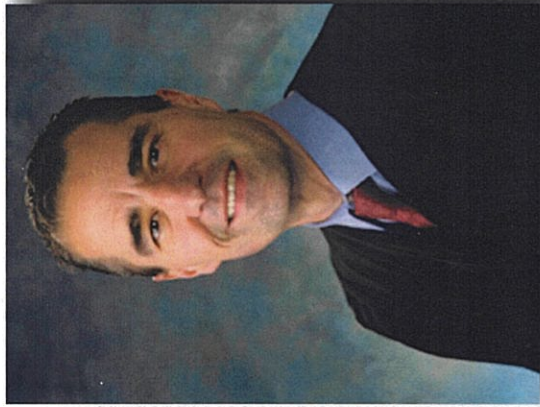
stableaccount.com

DISCLAIMER

STABLE Accounts are not guaranteed or insured by the Ohio Treasurer's Office, the State of Ohio, any state agency or subdivision thereof, or their authorized agents or affiliates. You could lose money by investing in a STABLE Account. Consider investment objectives, risks, charges and expenses before investing. Non-Ohio taxpayers or residents should consider whether their home state plan offers any benefits not available through STABLE Account. Before you open an account, you should carefully read and understand the STABLE Account Plan Disclosure Statement and Participation Agreement.

Like the Boy Scout motto says, "Always be prepared." That is exactly why every adult individual should have these four (4) legal documents as described above. No one knows when they are going to die or if they are going to become incapacitated prior to their death. Please take the time prior to anything happening to you or your loved one, to execute these simple legal documents. By doing so, you will save you and your loved ones a lot of money and a lot of unnecessary frustrations.

As Probate Court Judge, my goal is to serve the public in the most efficient and courteous manner possible. I am providing this brochure to help with any possible questions or concerns you may have while working with the Probate Court. I hope you find this information helpful.



The information in this brochure is provided as a service of the Court and does not constitute legal advice which can only be given to you by an attorney. Many probate and family law matters involve complex and valuable legal rights. You should always speak with an attorney before undertaking any action.

MAHONING COUNTY
PROBATE COURT



HON. ROBERT N. RUSU, JR.

Mahoning County Probate Court
120 Market Street
Youngstown, OH 44503

Phone: 330.740.2310

E-mail:

mcprobate@mahoningcountyoh.gov

Website:

probate.mahoningcountyoh.gov

Hours: Monday-Friday 8:00 a.m.-4:30 p.m.

4 LEGAL DOCUMENTS EVERY ADULT NEEDS



BY
JUDGE
ROBERT N.
RUSU, JR.

Every Ohioan, age 18 or older, should have an estate plan that contains a minimum of four (4) legal documents that would take care of them or their estate upon their death or incompetence.

1 Last Will and Testament

The first document is the one that most people have heard of, a **Last Will and Testament**. This is a document that allows an individual to dispose of their solely owned assets at the time of their death; nominate a guardian of their minor children or adult incompetent children; appoint a personal representative to make sure their debts are paid and that their wishes are followed. When making a **Will**, one must remember that only assets that are individually owned, that have no co-owner or beneficiary designations, will pass according to the directions in the Will. Any asset that is owned by the decedent with a co-owner in survivorship form or with a beneficiary designation, such as a life insurance policy, IRA or annuity, will pass outside the Will and be transferred directly to the co-owner or beneficiary no matter what the Will directs. It is important to remember this information when opening a bank or investment account.

The process of admitting a decedent's Will to the court is called probate. In order for the decedent's Will to be considered valid and assets distributed according to the document, the probate court where the decedent died must validate the Will as authentic, and assure that it meets all statutory requirements. The probate process allows for all interested next of kin of the decedent, creditors and beneficiaries to be notified that the decedent died, what probate assets the decedent owned and a complete accounting of what the personal representative did with the decedent's assets.

The Will only comes into existence at the person's death. The other three legal documents come into use prior to the person's death. These documents are the "Financial Durable Power of Attorney," "Living Will" and "Health Care Power of Attorney." Each one has a very specific use, and will save the maker and their family tremendous amounts of time, frustration and money.

2 Financial Durable Power of Attorney

The "Financial Durable Power of Attorney" is the document that allows you the principal to nominate another person, the agent, to handle your affairs. Things like financial decision making, bill paying, investing and property management, are all things that you can authorize the agent to do for you if you become incapacitated and unable to handle your affairs.

A durable power of attorney or DPOA, allows the maker to nominate an individual that they trust to make all financial decisions for them that they cannot make for themselves. This avoids the need to have the probate court appoint a legal guardian to handle a person's affairs and it also will save the principal time and money since the probate court and attorneys are often not needed. However, be careful on who you appoint, as the agent has access to all of your assets and could dispose of them. There is no oversight of the agent acting under a DPOA like there is with a guardianship.

3 Living Will or Health Care Declaration

The third legal document is called a "Living Will" or "Health Care Declaration." This allows an individual to specify, in very specific terms, what type of medical procedures or lack thereof, should be followed if the individual is terminally ill or permanently unconscious. It usually contains directions from the principal about withholding certain treatment and/or medicines, the principal's wishes regarding organ donations, and their wishes regarding the use or nonuse of water tubes and feeding tubes in certain situations. "Living Wills" are important because if an individual does not have their medical wishes written down, they may not be followed by medical personnel at a later date. In addition, decisions may be made which could put family members at odds over these decisions.

4 Health Care Power of Attorney

The fourth document is a "Health Care Power of Attorney." This document allows you to nominate an individual agent to make all of your medical decisions should something happen to you and you are unable to make those medical decisions for yourself. It allows your agent, to have access to your medical records, hire doctors on your behalf and care for you according to your wishes without the need of a court appointed legal guardian.

This will save you and your family time and money since they will have the ability to make health care decisions on your behalf without the need to seek court involvement.

Costs Associated with a Guardianship....

A guardian is entitled to compensation for their duties performed. Attorneys are compensated for their services to the guardian. The court reviews and sets these fees. There are also fees for filing a guardianship application unless the ward is indigent. In that case, the applicant must file an affidavit of indigency and the court may waive all filing fees.

Terminating Guardianships...

A court order will terminate a guardianship upon the death of a ward, or upon the ward being adjudged competent, and in the case of a minor, upon the ward reaching the age of majority (18). If the ward moves to another county within Ohio, the guardianship may be transferred to the probate court of that county.

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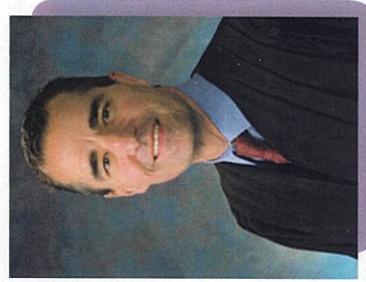
probate.mahoningcountyoh.gov

HOURS:

Monday-Friday 8:00 a.m. - 4:30 p.m.

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Guardianship



JUDGE
ROBERT N.
RUSU, JR.

A guardianship is a relationship where one person has the legal authority and duty to care for another's person or property, due to the other person's minority, incapacity, or disability. The person who is incapacitated, disabled, or a minor is called the "ward". The person who is appointed by the court to be responsible for the ward's person or property is called the "guardian".

Types of Guardianships....

A guardian may be appointed for either an incompetent or minor if the court finds either of the following conditions are met:

INCOMPETENT:

Any person who is so mentally impaired as a result of a mental or physical illness or disability, or mentally handicapped, or as a result of chronic substance abuse, that is incapable of taking proper care of themselves or their property. Any person confined to a correctional institution within this state is under a legal disability and may also be considered incompetent. A guardianship can be created for an incompetent's person and/or estate.

MINOR:

Any person under 18 years of age who has neither a father nor a mother or whose parents are unsuitable to have custody of such minor, or whose interests will be promoted by a guardianship. A guardianship can be created for a minor's person and/or estate.

Choosing a Guardian....

The court appoints the guardian. However, a minor over 14 may nominate a guardian, or a child's parents may nominate a guardian by leaving instructions in a Last Will and Testament or other legal document.. A competent adult may nominate a guardian to serve in the event of future incapacity.

Application Process....

An application for guardianship is filed in the probate court of the county where the proposed ward resides.

A bond may also be required. In the case of a prospective incompetent ward, the application must also include a statement of the ward's mental and physical condition from a treating physician, psychiatrist, or licensed psychologist.

The prospective ward and family members are notified of the impending guardianship and date and time of hearing. In the case of an "incompetent" proceeding, the court's investigator will serve notice of the hearing on the prospective ward. The investigator assists the court in determining whether a guardianship is necessary.

The court holds a hearing to determine if a guardianship is necessary, to find if the guardian is suitable, and to ensure that the guardian understands their duties.

RIGHTS OF THE WARD:

The prospective ward has the right to be present at the hearing, to contest any application for guardianship, to have a record of the hearing taken, to have a friend or family member present at the hearing, and to be represented by an attorney. A prospective incompetent ward has the additional right to present evidence of a less restrictive alternative to guardianship, and, if found to be indigent, to have an attorney and independent expert appointed at court expense.

Supervision of Guardianships....

The probate court is always the superior guardian, and all guardians must obey all orders of the court. The court exercises its supervisory authority through the following legal procedures.

GUARDIANSHIP TRAINING

Unless waived by the court, each guardian must attend training class(es) prior to being appointed.

- **Accountings:** A guardian of the estate must file a written account with the court annually as to the income and expenses of the ward's estate.
- **Reports:** A guardian of an incompetent ward must file a written report annually. The report concerns the status of the ward, their health and location and continued need for the guardianship.
- **Citations:** If a guardian fails to timely file a report, inventory, or accounting, the court may cite a guardian to appear, and they may be fined, have the guardian's fee reduced or removed as guardian.
- **Investigations:** A court investigator will periodically conduct a follow-up investigation. If there are any problems or concerns, they may be identified and corrected.
- **Removal:** If the interests of the ward warrant it, the court may remove a guardian at any time. The guardian must always report a change in address of the ward or guardian.