

Proposed Rule changes: July Board meeting; published in Aug. Newsletter, on web site

1. **CE Pain management:** Board has already adopted this proposed rule:

OAR 338-020-0030 One-time requirement for CE on Pain Management

- (1) After January, 2008, a one-time requirement of 7 points of CE on Pain Management must be completed as part of the 30 points of CE defined in OAR 339-020-0020.
- (2) All currently licensed Occupational Therapists and Occupational Therapy Assistants who renew their license in May, 2010 must complete the one-hour online Oregon Pain Commission class and six additional points of CE on Pain Management. Any classes provided by the Pain Commission will count toward the 7 points. Licensees may use any CE points on Pain Management taken between 2006 and their renewal date in May, 2010.
- (3) All new applicants for Occupational Therapy and Occupational Therapy Assistants must complete the one-time requirement of 7 points of CE on Pain management (including the one online hour offered by the Pain Commission) prior to their next renewal or within two years of license in Oregon, whichever comes later.

2. **Board adopted policy that Supervision statement do not have to be notarized:**

339-010-0035 Statement of Supervision for Occupational Therapy Assistant

- (1) Any person who is licensed as an occupational therapy assistant may assist in the practice of occupational therapy only under the supervision of a licensed occupational therapist.
- (2) Before an occupational therapy assistant assists in the practice of occupational therapy, he/she must file with the Board a ~~signed~~, current statement of supervision of the licensed occupational therapist who will supervise the occupational therapy assistant. ~~The signature of the supervising occupational therapist must be notarized.~~
- (3) An occupational therapy assistant always requires at least general supervision.
- (4) The supervising occupational therapist shall provide closer supervision where professionally appropriate.
- (5) The supervisor, in collaboration with the supervisee, is responsible for setting and evaluating the standard of work performed.

3. **Renewal fees are non-refundable,** adopted by the board as policy in April, 2008

339-010-0023 License Renewals

- (1) Each applicant for license renewal shall submit to the Board on or before May 1 of each year a completed license renewal application, CE log and appropriate renewal fee. **The renewal fees are non-refundable.**
- (2) Failure to submit a renewal application, CE log and appropriate fee by May 1 may result in a civil penalty imposed on the applicant.

4. Changes to proposed rules for adoption on OTs in Education:

339-010-0050 Occupational Therapy Services for Children and Youth in Education and Early Childhood Programs regulated by federal laws

(1) Definitions:

This rule applies to all occupational therapy practitioners who include both occupational therapists and occupational therapy assistants as defined in OAR 339-010-0005. All other rules regarding Occupational Therapy practitioners apply notwithstanding what is found in these rules as they apply to practitioners in the education setting.

(a) “Children and youth” refers to a child or student determined to be eligible for services under IDEA or Section 504. *Part B* under IDEA describes requirements for the provision of special education services for preschool and school-age children and youth, ages 3 through 21 years. *Part C*, or the early intervention program, focuses on services for infants and toddlers with disabilities and their families. Section 504 and the Americans With Disabilities Act (ADA 1990) define a person with a disability as “any person who has a physical or mental impairment that substantially limits one or more major life activities...” and require a public school system to provide needed accommodations or services.

(b) “Service plans” document the program of services and supports necessary to meet a child’s developmental or educational needs under the IDEA. These specify the need for occupational therapy services and include: the individualized family services plan (IFSP) for infants, toddlers and preschoolers; the individualized education plan (IEP) or a Section 504 Plan for school-age youth.

(c) “Educational or developmental goals” are developed collaboratively by a multi-disciplinary early intervention or educational team, which includes an occupational therapist as a related service provider, when areas of occupational performance have been identified.

(d) “Natural environment” refers to the most appropriate setting for the child to develop the skills needed for occupational performance.

(e) “Educational environments” refers to home; community; day care; preschool, or the general and special education settings.

(f) “Evaluation” is the process of gathering information to make decisions about a student’s or child’s strengths and educational or developmental needs.

(g) “Assessments” are the specific methods or measures used to gather data for the evaluation.

(2) The Occupational Therapy Process:

(a) Evaluation: The occupational therapist is responsible for the occupational therapy evaluation.

(A) The occupational therapist selects assessment methods that focus on identifying factors that act as supports or barriers to engagement in occupations. The initial occupational therapy evaluation should include analysis of the child’s ability to access the natural or educational environment for learning.

(B) The occupational therapist must participate in decisions about the need for occupational therapy services, development of functional, measurable goals and determining which educational or developmental goals occupational therapy will support.

(C) The occupational therapist determines the types, frequency and duration of interventions, as well as accommodations and modifications of the environment.

(D) Screening to determine the need for an occupational therapy evaluation does not constitute initiation of occupational therapy services.

(b) Intervention: The occupational therapist may implement occupational therapy services, along a continuum, which may include the following:

(A) Direct intervention is the therapeutic use of occupations and activities with the child present, individually or in groups.

(B) Consultation is collaborative problem solving with parents, teachers, and other professionals involved in a child's program.

(C) The education process is imparting generalized knowledge and information about occupation and activity and does not address an individual child's specific education plan.

(c) Outcomes: The occupational therapist should review the intervention on an ongoing basis and dependent on the child's response, modify as needed.

(3) Delegation of therapeutic activities:

(a) The occupational therapist may instruct others, such as educational or daycare staff, to carry out a specific activity or technique designed to support the child's the performance.

(b) The designated person must be able to demonstrate the technique as instructed, recount the restrictions, safety factors and precautions.

(c) The occupational therapist is responsible for ongoing monitoring of the trained person and modifying the procedures based on outcomes and other changes.

(d) When considering the delegation of techniques the child's health and safety must be maintained at all times.

(4) Documentation:

(a) The occupational therapist must document evaluation, goals, interventions and outcomes if they are not included in the service plan.

(b) Documentation should reflect the child's current status, progress towards goals, response to interventions, and strategies that were promising or ineffective.

(c) The occupational therapist should utilize a method of data collection that allows for concise and accurate recording of intervention and progress.

(d) The occupational therapist is responsible for the analysis of data collected to verify progress and the documentation of their own activities to accomplish the goals.

Guidelines: Resource for interpretation: Occupational Therapy Services for Children and Youth under IDEA, 3rd Edition. 2007, Jackson. Leslie, L. (editor) AOTA, Bethesda, MD

Current Rules on Education:

339-010-0050 Occupational Therapy Services For Children in an Educational Setting

(1) Types of services:

(a) Direct services are services at least once a week regularly scheduled;

(b) Monitoring services (not to be considered as a substitute for direct intervention):

(A) The occupational therapist completes the evaluation and develops the intervention plan but instructs others to carry out the procedures;

(B) The child's health and safety must be maintained;

(C) The person employed by an educational agency must be an adult specifically designated to receive training in providing the ongoing educational programs as designated by the licensed occupational therapist;

(D) The person being trained must be able to demonstrate the procedures correctly without prompting from the occupational therapist;

(E) The person being trained must be able to name the restrictions put on the procedure by the occupational therapist and point out safety factors and precautions without prompting.

(2) Appropriate documentation of services for children with handicap in the educational setting:

(a) The occupational therapist is responsible for deciding the level of occupational therapy services appropriate for the child and these services must be clearly stated;

(b) The occupational therapist is responsible for the occupational therapy evaluation design of the occupational therapy services to be provided and writing the occupational therapy goals and objectives;

(c) It must be defined which occupational therapy services are to be provided by the occupational therapist and which services are part of the child's educational routine;

(d) If an occupational therapist is monitoring a portion of the child's educational program, then that therapist is responsible for frequent and consistent contact with the child. The occupational therapist is also responsible for re-evaluation and assessment on a regular basis;

(e) The occupational therapist is responsible for direct training and supervision of designated adults carrying out the educational programs that are designed by the occupational therapist and defined in the individual plan;

(f) The occupational therapist is responsible for these program outcomes and documentation to accomplish the goals and objective.

Stat. Auth.: ORS 675.230, 675.240, 675.250, 675.300 & 675.310

Stats. Implemented: ORS 675.210(4), 675.240(1) & (2), 675.250(2) & (3), 675.300(1)(a) & 675.320(11) Hist.: OTLB 2-1993(Temp), f. & cert. ef. 7-1-93; OTLB 1-1994, f. & cert. ef. 1-24-94; OTLB 1-1999, f. & cert. ef. 10-27-99; OTLB 1-2005, f. & cert. ef. 8-11-05