

Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board
Occupational Therapy Section
May 11, 2006
Room 1918
8:50 am

Members Present

Martha Cameron, OTR/L
Hector Merced, OTR/L
Rebecca LeBron, OTR/L

Member Absent

Lois Borin, OTR/L

Legal Counsel

P.R. Casey IV, AAG
Steven McGann, AAG

Staff

Lisa Foor, Enforcement Division Supervisor
Jeffrey Rosa, Executive Director
Stephanie Youst, Executive Secretary

Guests

Jackie Chamberlin, OOTA Liaison
Cindy Kief, OTA Advisor
Carole Weiss
Gary Weiss, Public Member

Call to Order

Martha Cameron, acting Chairperson, called the meeting to order at 8:50 a.m.

Approval of Minutes

Action: Hector Merced moved to approve the March 28, 2006 minutes as submitted. Martha Cameron seconded the motion. The motion carried.

Administrative Reports

Renewal Report

- A copy of the renewal report is attached to the minutes for reference.

Continuing Education Report

Action: Hector Merced moved to approve 138 applications for contact hour approval. Rebecca LeBron seconded the motion. The motion carried.

Licensure Report

Action: Hector Merced moved that the Occupational Therapy Section ratify, as submitted, the licenses and limited permits initially issued by the Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board March 28, 2006 through May 10, 2006 to occupational therapists and occupational therapy assistants, pending receipt of any outstanding items and passage of the laws and rules examination, taking into account those licenses subject to discipline, surrender, or non-renewal. Rebecca LeBron seconded the motion. The motion carried.

Occupational Therapist – Examination

Dickey, Darla	Pears, Brian
Hoerder, Roswitha	Soden, Michael

Occupational Therapy Assistant – Examination

Harbin, Cassie	Knapp, Kimberly
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Occupational Therapist – Endorsement

Brunko, Christine	Mariano, Angelove	Quinn, Lesley
Dietrich, Lynn	Otto, Josef	Scott, Sheila
Evans, Allison	Parker, Ricky	Warman, Harold

Occupational Therapy Assistant – Endorsement

Brown, Frances	Crout, Jamie	Perry, Lisa
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Occupational Therapist – Limited Permit

Lee, Diana

Swoboda, Kathleen

Occupational Therapy Assistant – Limited Permit

Boyd, Patricia

Gunnnett, Christina

Sutton, Mindy

Occupational Therapist – Reinstatement

Cook, Sarah

Occupational Therapy Assistant – Reinstatement

Bach, Stan

Occupational Therapist – Restoration

Knee, Patricia

Occupational Therapy Assistant – Restoration

Monreal, Jacqueline

Occupational Therapist – Reinstatement

- Hector Merced reviewed the reinstatement application for Elizabeth Galivn.

Occupational Therapist Assistant – Reinstatement

Action: Hector Merced moved to reinstate Bernadine Dodge as an occupational therapy assistant pending receipt of any outstanding items. Rebecca LeBron seconded the motion. The motion carried.

Occupational Therapist Assistant – Waiver Request

Action: Martha Cameron moved to grant a three month extension for James Ives to complete 10 hours of continuing education. Rebecca LeBron seconded the motion. The motion carried.

- Mr. Ives will have until October 1, 2006 to complete his required continuing education. On or before that date, Mr. Ives is required to provide proof of completing 10 hours of continuing education to the Board for review.

Investigative Report

The Enforcement Division opened two new cases and has not closed any cases since the March 28, 2006 meeting. There are currently seven cases open and two active consent agreements. The Enforcement Division staff conducted three inspections since the last meeting and a total of 13 inspections in 2006.

- No actions have been made because there is not a quorum to vote on enforcement issues. Once an occupational therapy assistant is appointed or the former enforcement division liaison has no prior knowledge of the cases being presented, the Section may vote on enforcement issues.

Correspondence

1. Kristin Domyan: Ms. Domyan asked the Section to clarify the co-signature requirements for occupational therapy documentation. **Action:** Rule 4755-7-01(A)(3) of the Ohio Administrative Code states, “any documentation written by an occupational therapy assistant or limited permit holder for inclusion in the client’s official record shall be co-signed by the supervising occupational therapist.” It is the position of the Occupational Therapy Section that if patient/client documentation includes any type of treatment grid, a single co-signature and date of review on the form is sufficient. Co-signature verifies that the supervisor reviewed the document and agrees with its content. As long as the facility maintains a signature list with each therapist’s full name, license number, signature, and initials, initialing daily notes would be sufficient. It is the position of the Section that for any hand written documentation, the supervising occupational therapist must co-sign each entry into the patient/client medical record with their name, credential, and date. It is the position of the Section that for any electronic documentation, the supervising occupational therapist must co-sign and reference the dates of the entries into the patient/client medical record that they are reviewing with their electronic signature and date.
2. Angela Kerr: Ms. Kerr asked the Section to clarify the use of rehab aides in the provision of occupational therapy services. **Action:** A rehab tech is an unlicensed person in the provision of occupational therapy

services. As stated in rule 4755-7-02 of the Ohio Administrative Code, licensed occupational therapy practitioners may delegate non-treatment tasks to unlicensed personnel. Some examples of allowable delegation include department maintenance, transport of patients, preparation of work area, assisting with patient's personal needs during treatment, assisting in the construction of adaptive equipment and splints, and other clerical or administrative functions. The following all violate the Ohio Occupational Therapy Practice Act: 1) Delegating evaluative procedures; 2) Delegating treatment procedures; 3) Documenting in the client's official record; 4) Acting on behalf of the occupational therapist in any matter related to occupational therapy that requires decision making. Professionals holding a license other than an occupational therapy license are considered unlicensed personnel in the provision of occupational therapy services. Therefore, the occupational therapy practitioner may not delegate the above tasks to professionals such as licensed nurses, physical therapists, physical therapy assistants, speech language pathologists, etc. Pursuant to section 4755.10 (A)(11) of the Revised Code, a licensed occupational therapist may face disciplinary action if he/she delegates the tasks indicated in rule 4755-7-02 (B) of the Ohio Administrative Code to unlicensed personnel.

3. Stacey Chess: Ms. Chess asked the Section to clarify the supervision requirements for occupational therapy assistants. **Action:** When maintaining a separate caseload, a full-time occupational therapist may supervise no more than four full-time limited permit holders and/or occupational therapy assistants. If the occupational therapist is only providing client evaluations and supervision and does not have a separate caseload, the occupational therapist may supervise six full-time limited permit holders and/or occupational therapy assistants. The number of limited permit holders and/or occupational therapy assistants that a part-time occupational therapist may supervise is proportionate to the number of hours worked by the part-time occupational therapist. The Section is currently working with the Ohio Occupational Therapy Association to address this issue as many professionals are raising similar concerns.
4. Sue Spacagna: Ms. Spacagna asked the Section to clarify what is expected of occupational therapy practitioners when the supervising occupational therapist is unexpectedly unable to continue to provide supervision and treatment. **Action:** If, for any reason, the evaluating occupational therapist will no longer be available to provide and supervise the occupational therapy care, the patient must be transferred by that occupational therapist to another occupational therapist. Each occupational therapy practitioner should determine a system that will allow for this transfer of care in situations where an occupational therapist is terminating the patient/therapist relationship. That transfer of care must be documented in the patient's medical record by identifying a new occupational therapist or by transferring to the occupational therapy supervisor for reassignment. The occupational therapist that has accepted the transfer of care is then professionally responsible to supervise all aspects of the occupational therapy program that are delegated to him/her. There is nothing in the Ohio Occupational Therapy Practice Act that addresses occupational therapy practitioners signing notes for clients that have been transferred from one therapist to another. It is the position of the Occupational Therapy Section that occupational therapy assistants may gather and summarize objective information; however, they may not interpret this data. It is the responsibility of the occupational therapist to interpret and make recommendations for the purpose of discharge plan development, as indicated in rule 4755-7-03 of the Ohio Administrative Code. If there is collaboration between the occupational therapy assistant and the occupational therapist, the collaboration must be reflected in the patient documentation. The Section referred Ms. Spacagna to review rule 4755-7-03 of the Ohio Administrative Code.
5. Debra Farley: Ms. Farley asked the Section if unlicensed persons could provide occupational therapy services in Ohio if they held current certification. **Action:** In Ohio, an individual who is certified by the National Board for Certification in Occupational Therapy but does not hold a current Ohio license, may not practice occupational therapy. A certified, but not licensed, individual performing occupational therapy services would be practicing occupational therapy without a license and in violation of section 4755.99 of the Ohio Revised Code. As stated in rule 4755-7-02 of the Ohio Administrative Code, unlicensed individuals may not provide occupational therapy services. Some examples of allowable delegation under the Ohio Occupational Therapy Practice Act include department maintenance, transport of patients, preparation of work area, assisting with patient's personal needs during treatment, assisting in the construction of adaptive equipment and splints, and other clerical or administrative functions. The following all violate the Ohio Occupational Therapy Practice Act: 1) Delegating evaluative procedures; 2) Delegating treatment procedures; 3) Documenting in the client's official record; 4) Acting on behalf of the occupational therapist in any matter related to occupational therapy that requires decision making. Professionals holding a license other than an occupational therapy license are

considered unlicensed personnel in the provision of occupational therapy services. Therefore, the occupational therapy practitioner may not delegate the above tasks to professionals such as licensed nurses, physical therapists, physical therapy assistants, speech language pathologists, etc. Pursuant to section 4755.10 (A)(11) of the Revised Code, a licensed occupational therapist may face disciplinary action if he/she delegates the tasks indicated in rule 4755-7-02 (B) of the Ohio Administrative Code to unlicensed personnel.

6. Brenda Caldwell: Ms. Caldwell asked the Section if providing physical therapy services is within the scope of occupational therapy practice. **Action:** Section 4755.01(A) of the Ohio Revised Code states, "Occupational therapy means the evaluation of learning and performance skills and the analysis, selection, and adaptation of activities for an individual whose abilities to cope with daily living, perform tasks normally performed at this stage of development, and perform vocational tasks are threatened or impaired by developmental deficiencies, the aging process, environmental deprivation, or physical, psychological, or social injury or illness, through specific techniques which include: 1) Planning and implementing activities and programs to improve sensory and motor function at the level of performance normal for the individual's stage of development; 2) Teaching skills, behaviors, and attitudes crucial to the individual's independent productive, and satisfying functioning; 3) Designing, fabricating, applying, recommending, and instructing in the use of selected orthotic or prosthetic devices and other equipment which assists the individual to adapt to his potential or actual impairment; 4) Analyzing, selecting, and adapting activities to maintain the individual's optimal performance of tasks and to prevent further disability; and 5) Administration of topical drugs that have been prescribed by a licensed health professional authorized to prescribe drugs, as defined in section 4729.01 of the Revised Code." Therefore, it is the position of the Occupational Therapy Section that occupational therapy practitioners may use physical agent modalities in the provision of occupational therapy services provided that the therapist documents competency in the modality and is practicing within the occupational therapy scope of practice. The following items all violate the Ohio Occupational Therapy Practice Act: 1) Delegating evaluative procedures; 2) Delegating treatment procedures; 3) Documenting in the client's official record; 4) Acting on behalf of the occupational therapist in any matter related to occupational therapy that requires decision making. An occupational therapy practitioner should never perform the same treatment(s) on a patient/client as a physical therapy practitioner. Professionals holding a license other than an occupational therapy license are considered unlicensed personnel in the provision of occupational therapy services. Therefore, the occupational therapy practitioner may not delegate the above tasks to professionals such as licensed nurses, physical therapists, physical therapy assistants, speech language pathologists, etc. Pursuant to section 4755.10 (A)(11) of the Revised Code, a licensed occupational therapist may face disciplinary action if he/she delegates the tasks indicated in rule 4755-7-02 (B) of the Ohio Administrative Code to unlicensed personnel.
7. Angela Hannah: Ms. Hannah asked the Section to clarify the use of rehab aides in the provision of occupational therapy services. **Action:** Rule 4755-7-02 of the Ohio Administrative Code was revised March 20, 1998 and will be revised effective May 1, 2006. "Task selective", as referenced in the rule, means that the rehabilitation aide would not be able to determine the appropriate occupational therapy treatment for the patient/client. The tasks performed by the rehabilitation aide must be selected and then delegated by the licensed occupational therapist and may not include numbers 1 through 4 listed below. As stated in rule 4755-7-02 of the Ohio Administrative Code, licensed occupational therapy practitioners may delegate non-treatment tasks to unlicensed personnel. Some examples of allowable delegation include department maintenance, transport of patients, preparation of work area, assisting with patient's personal needs during treatment, assisting in the construction of adaptive equipment and splints, and other clerical or administrative functions. The following all violate the Ohio Occupational Therapy Practice Act: 1) Delegating evaluative procedures; 2) Delegating treatment procedures; 3) Documenting in the client's official record; and 4) Acting on behalf of the occupational therapist in any matter related to occupational therapy that requires decision making. Professionals holding a license other than an occupational therapy license are considered unlicensed personnel in the provision of occupational therapy services. Therefore, the occupational therapy practitioner may not delegate the above tasks to professionals such as licensed nurses, physical therapists, physical therapy assistants, speech language pathologists, etc. Pursuant to section 4755.10 (A)(11) of the Revised Code, a licensed occupational therapist may face disciplinary action if he/she delegates the tasks indicated in rule 4755-7-02 (B) of the Ohio Administrative Code to unlicensed personnel. Supervision of rehabilitation aides when assisting with occupational therapy services requires on-site, immediate availability, and on-going involvement of the occupational therapist practitioner. Supervision must ensure consumer protection. The supervising occupational therapist must determine that the occupational therapy assistant possesses current license to

practice occupational therapy prior to allowing him or her to practice. Supervision requires initial directions and periodic inspection of the service delivery and relevant in-service training. The supervising licensed occupational therapist need not be on-site, but must be available for consultation with the occupational therapy assistant at all times. The supervising occupational therapist must provide supervision at least once per week for all occupational therapy assistants who are in their first year of practice. Occupational therapy assistants beyond their first year of practice must be supervised at least once per month. Evidence must be established, either in the client records or in a separate document, that the supervision took place. The patients in your facility who are receiving occupational therapy services are receiving those treatments pursuant to the occupational therapy plan of care that was established by the occupational therapist. In the situation you describe, the physical therapist would be considered an unlicensed individual under the Ohio Occupational Therapy Practice Act. Therefore, the physical therapist may not legally provide occupational therapy services to the patients who are receiving occupational therapy services. A physical therapist must perform a physical therapy evaluation prior to treating a patient. The Section referred Ms. Hannah to rule 4755-7-03 of the Ohio Administrative Code. If there is no occupational therapist available to perform the evaluation, you would be required to wait until the occupational therapist returns from vacation since an occupational therapy assistant may not perform occupational therapy services until the occupational therapist performs an evaluation and develops the treatment plan.

8. Laura DeMart: Ms. DeMart asked the Section to clarify if patient evaluation and referrals for skilled needs are within the scope of occupational therapy practice. **Action:** Section 4755.01(A) of the Ohio Revised Code states, "Occupational therapy means the evaluation of learning and performance skills and the analysis, selection, and adaptation of activities for an individual whose abilities to cope with daily living, perform tasks normally performed at this stage of development, and perform vocational tasks are threatened or impaired by developmental deficiencies, the aging process, environmental deprivation, or physical, psychological, or social injury or illness, through specific techniques which include: 1) Planning and implementing activities and programs to improve sensory and motor function at the level of performance normal for the individual's stage of development; 2) Teaching skills, behaviors, and attitudes crucial to the individual's independent productive, and satisfying functioning; 3) Designing, fabricating, applying, recommending, and instructing in the use of selected orthotic or prosthetic devices and other equipment which assists the individual to adapt to his potential or actual impairment; 4) Analyzing, selecting, and adapting activities to maintain the individual's optimal performance of tasks and to prevent further disability; and 5) Administration of topical drugs that have been prescribed by a licensed health professional authorized to prescribe drugs, as defined in section 4729.01 of the Revised Code." The definition of occupational therapy demonstrates that a licensed occupational therapist may evaluate a patient/client and recommend a plan of care to meet the needs of that individual. Section 4755.01(A) of the Ohio Revised Code states, "Occupational therapy means the evaluation of learning and performance skills and the analysis, selection, and adaptation of activities for an individual whose abilities to cope with daily living, perform tasks normally performed at this stage of development, and perform vocational tasks are threatened or impaired by developmental deficiencies, the aging process, environmental deprivation, or physical, psychological, or social injury or illness, through specific techniques which include: 1) Planning and implementing activities and programs to improve sensory and motor function at the level of performance normal for the individual's stage of development; 2) Teaching skills, behaviors, and attitudes crucial to the individual's independent productive, and satisfying functioning; 3) Designing, fabricating, applying, recommending, and instructing in the use of selected orthotic or prosthetic devices and other equipment which assists the individual to adapt to his potential or actual impairment; 4) Analyzing, selecting, and adapting activities to maintain the individual's optimal performance of tasks and to prevent further disability; and 5) Administration of topical drugs that have been prescribed by a licensed health professional authorized to prescribe drugs, as defined in section 4729.01 of the Revised Code." The definition of occupational therapy demonstrates that a licensed occupational therapist may evaluate a patient/client and recommend a plan of care to meet the needs of that individual.
9. Carol Limbert-Lerch: Ms. Limbert-Lerch asked the Section if an occupational therapy assistant can write phone orders. **Action:** It is the position of the Occupational Therapy Section that occupational therapy services may be initiated by a telephone referral, electronic mail, or verbal order. Individuals other than occupational therapists are not prohibited from receiving verbal orders for occupational therapy. All verbal or telephone orders, prescriptions, or referrals must be followed up in writing with the referring practitioner's signature for inclusion in the patient's official record. A directive or order is initiated by one party and is given directly to a

second party. Although other individuals may assist in the transmission of the information from the first party to the second party, ultimately the occupational therapist is the individual responsible for receiving and accepting the directive or order. It is also the position of the Occupational Therapy Section that occupational therapy assistants may gather and summarize objective information; however, they may not interpret this data. It is the responsibility of the occupational therapist to interpret and make recommendations for the purpose of discharge plan development, as indicated in rule 4755-7-03 of the Ohio Administrative Code. If there is collaboration between the occupational therapy assistant and the occupational therapist, the collaboration must be reflected in the patient documentation. The Section instructed Ms. Limbert-Lerch to review rule 4755-7-03 of the Ohio Administrative Code.

10. Deanna Wampler: Ms. Wampler asked the Section if it is legal to provide private pay occupational therapy services for a patient who had plateaued at the request of the family. **Action:** There is nothing in the Ohio Occupational Therapy Practice Act that would prohibit a therapist from receiving the patient as a private pay client. However, rule 4755-7-06 of the Ohio Administrative Code states “An occupational therapist or occupational therapy assistant shall not exploit persons served professionally by: 1) Accepting individuals for treatment if benefit cannot reasonably be expected to occur. 2) Continuing treatment without reasonable expectation of further benefits. 3) Providing inaccurate information to consumers of occupational therapy services. 4) Charging fees which are excessive. 4) Delegating occupational therapy treatment to unlicensed persons. It is the therapist’s responsibility to inform the patient and family that a plateau has been reached and it is the therapist’s professional opinion that the patient will not further benefit from occupational therapy services. The options for private pay treatment should be presented to the family and they should be given a choice of providers. Patients and their families should come to you, or the occupational therapy provider of their choice, on their own free will and should be able to testify in a court of law to that effect if any issues should arise.
11. Karen Murphy: Ms. Murphy asked the Section if occupational therapy practitioners are required to have a social security number prior to being issued an Ohio occupational therapy license. **Action:** The Section informed Ms. Murphy that a social security number was required prior to a license being issued to a foreign educated occupational therapy candidate. The Section also informed Ms. Murphy that the Executive Director would review the information she had compiled prior to her website going live.
12. Marisa Oplanic: Ms. Oplanic asked the Section to clarify the use of aides in the provision of occupational therapy services. **Action:** As stated in rule 4755-7-02 of the Ohio Administrative Code, licensed occupational therapy practitioners may delegate non-treatment tasks to unlicensed personnel. Some examples of allowable delegation include department maintenance, transport of patients, preparation of work area, assisting with patient’s personal needs during treatment, assisting in the construction of adaptive equipment and splints, and other clerical or administrative functions. Billable procedures, such as therapeutic activities, may not be performed by aides. The following all violate the Ohio Occupational Therapy Practice Act: 1) Delegating evaluative procedures; 2) Delegating treatment procedures; 3) Documenting in the client’s official record; and 4) Acting on behalf of the occupational therapist in any matter related to occupational therapy that requires decision making. Professionals holding a license other than an occupational therapy license are considered unlicensed personnel in the provision of occupational therapy services. Therefore, the occupational therapy practitioner may not delegate the above tasks to professionals such as licensed nurses, physical therapists, physical therapy assistants, speech language pathologists, etc. Pursuant to section 4755.10 (A)(11) of the Revised Code, a licensed occupational therapist may face disciplinary action if he/she delegates the tasks indicated in rule 4755-7-02 (B) of the Ohio Administrative Code to unlicensed personnel. The evaluative process is the overall procedure of determining a client’s occupational therapy needs. The Section recommends that she refer to the AOTA Standards of Practice and the AOTA Practice Framework for specific definitions.
13. Dianne Sanker: Ms. Sanker asked the Section if she would be eligible for continuing education credit for a goodwill wheelchair positioning trip to China. **Action:** After reviewing Ms. Sanker’s request, the Section determined that she is eligible for eight hours of continuing education credit, even though the activity does not fall within a specific continuing education category. The activity does meet the spirit of the law and will contribute to both her professional competency and clinical practice. The Section wishes Ms. Sanker luck on her goodwill trip to China.

Old Business

Use of Aides

- The Section discussed using a survey to find out how aides are currently being used in occupational therapy practice.
- Hector Merced submitted a sample survey and questions for the Section members to review.
- The Section members discussed asking attendees at the OOTA conference to comment on the use of aides.
- The Section tabled further discussion regarding the use of aides until the June 13, 2006 meeting.

Enforcement Division Collaboration Log Draft

- The Section reviewed the draft collaboration log and discussed how it should be used.
- The Section members liked the draft and after discussing how it should be used, decided that a new log would be needed for each day.
- The draft log will be placed on the website for practitioners to use or modify as they see fit.

Draft Standard Response Review

- The Section reviewed the draft standard response regarding patient abandonment and transfer of care.
- The Section made some revisions and approved the new standard response for use.

Joint Board Legislation

- The Section discussed placing language to make changes to the occupational therapy laws into the budget bill.
- The Section also discussed alternate ways to make changes to their laws if the language is not accepted as part of the budget bill, including finding a bill sponsor and approaching the Senate prior to approaching the house.
- Martha Cameron asked the Executive Director to compile a list of important items that the Section needs to be sure is included in any language that the Section proposes.

New Business

2006 Accomplishments

- The Section accomplished the following in Fiscal Year 2006:
 - The Section posted a position paper on the topic of dysphagia.
 - The Section implemented online renewals for the 2006 license renewal period.
 - The Section began a dialogue with the Ohio Department of Education and Ohio Department of Mental Health on issues relating to the practice of occupational therapy.
 - The Section reviewed and revised their rules.
 - Legislation was passed adding an occupational therapy assistant as a Board member.
 - The Board established a listserv to communicate with the licensees in a more timely manner.
 - The Section and Executive Director presented at various educational programs, districts, and conferences around Ohio.
 - The Section updated their standard responses to issues.
 - The Section reviewed the effectiveness of the investigative process.

2007 Goals

- The Section made the following goals for Fiscal Year 2007:
 - Investigate the use of aides as service extenders.
 - Make the Enforcement Division and the investigative process more efficient and effective.
 - Create a “new member” orientation.
 - Review the rules on a regular basis and make updates as necessary.
 - Continue to improve the dialogue between the Board and other state agencies and the occupational therapy community.
 - Increase communication with the licensed occupational therapy practitioners via the newsletter and listserv.
 - Have a retreat to discuss pertinent issues in the practice of occupational therapy.

Rule Changes for 2007

- The Section reviewed the list of rules that are up for review in 2007.
- The Executive Director presented proposed changes to rules 4755-3-13, 4755-5-07, and 4755-7-02.
 - The Section members accepted the proposed changes to rules 4755-3-13 and 4755-5-07.
 - The Section tabled the discussion of the proposed changes to rule 4755-7-02 until the June 13, 2006 meeting.
- The Section members will submit any additional comments regarding the rules at the June 13, 2006 meeting.
- The Section members directed the Executive Director to draft a rule detailing the additional licensure requirements for foreign educated occupational therapists.

OTA Conference/Licensure Forum

- The Section will be presenting a 90 minute session on Friday afternoon of the conference and Jeff Rosa will be part of the town meeting on Saturday afternoon.
- The Section thanked Hector Merced for submitting their proposal.

TOEFL iBT Requirement

- The Section discussed the possibility of requiring passage of the TOEFL iBT as a part of a foreign educated occupational therapists application.
- The Section tabled the discussion until the June 13, 2006 meeting.

Social Security Number Requirement

Action: Hector Merced moved that the Section mandate that every applicant have a social security number prior to a license being issued. Rebecca LeBron seconded the motion. The motion carried.

Executive Director Review

- All Section members need to have their completed reviews to Lois Borin no later than June 13, 2006. The completed Section review must be submitted to Rebecca LeBron on or before August 1, 2006.

Assistant Attorney General's Report

- Steven McGann informed the Section that, effective immediately, he had been reassigned and would no longer be representing the Section. P.R. Casey, IV, AAG was introduced as Mr. McGann's replacement.

OTA Report

- There was no report submitted by the Ohio Occupational Therapy Association.

Preparation for the Next Meeting

- The Section members will prepare and submit their individual performance evaluations for the Executive Director to Lois Borin.
- The Section members will review and comment on any rules that are up for review in 2007.
- The Section will discuss their presentation at the OTA Conference.
- The Executive Director will prepare a section of rules dealing with graduates of non-ACOTE accredited programs.
- The Section will continue their discussion of aides and will present questions for their survey.
- The Executive Director will prepare a list of all of the items that should be contained in any language the Section recommends to revise their laws.
- The Executive Director will update the Section on the appointment of an occupational therapy assistant.

Next Meeting Date

The next meeting date of the Occupational Therapy Section will be Tuesday, June 13, 2006.

Action: Rebecca LeBron moved to adjourn the meeting. Martha Cameron seconded the motion. The motion carried. The meeting adjourned at 2:05 p.m.

Respectfully submitted
Stephanie K. Youst

ABSENT

Lois Borin, OTR/L, Chairperson

Hector Merced, OTR/L, Secretary

Jeffrey M. Rosa, Executive Director

HM:jmr:sky