New Administrative Rule Adopted, Clinic Ownership Responsibility

The OBCE adopted this rule after three public hearings and public comment.

OAR 811-035-0015 (25) Chiropractic physicians holding an ownership interest as described in OAR 811-010-0120 may be held responsible, entirely or in part, for supervised staff (listed below) who provide patient services. This includes a responsibility to render adequate supervision, management and training of ancillary staff or other persons including, but not limited to, chiropractic physicians, student interns, chiropractic assistants and/or others practicing under the licensee’s supervision. Chiropractors with supervised staff may be held responsible, entirely or in part, for undue influence on staff or a restriction of a supervised chiropractic physician from using their own clinical judgment. Effective 1/29/2014

The OBCE also adopted the following policy statement to help clarify the intent of this new rule:

Unprofessional Conduct:
OAR 811-035-0015 (new section) (25) Chiropractic physicians holding an ownership interest as described in OAR 811-010-0120 may be held responsible, entirely or in part, for supervised staff (listed below) who provide patient services. This includes a responsibility to render adequate supervision, management and training of ancillary staff or other persons including, but not limited to, chiropractic physicians, student interns, chiropractic assistants and/or others practicing under the licensee’s supervision. Chiropractors with supervised staff may be held responsible, entirely or in part, for undue influence on staff or a restriction of a supervised chiropractic physician from using their own clinical judgment.

Clinic Ownership Responsibility Rule, Policy and Intent statement:

The purpose of OAR 811-035-0015 (25) is to hold chiropractic clinic owners broadly responsible for the overall conduct of their clinic or clinics. This responsibility is already inherent in ORS 684.100 1) f) A) & B), but more explicitly defined with this rule and policy. For example if the licensee owner’s clinics have engaged in a consistent pattern of excessive treatment, that licensee would be in violation of this and other rules. Clinics that have only ‘on the job’ training, no written policies or procedures, and no process for ensuring patient safety and continuity of care when multiple doctors treat the same patient would be indicators of inadequate supervision. To the extent the licensee owner has fulfilled his/her fiduciary responsibilities for supervising and training a multi clinic practice or an individual clinic, that is an affirmative defense in the event an individual employee commits a violation of law or rule. This rule does not apply to chiropractic colleges as they are not described in OAR 811-010-0120. The Board can address specific questions as they come up: (such as)
Question: Owner doctor advises and orders the employee doctor to follow the OBCE rules and guides per OAR 811-010-0120, and the employee doctor fails due to "poor judgment" or other "human errors", what criteria does the owner doctor need to follow in order to prove that appropriate training has been implemented, and the owner doctor's burden has been met in order to comply with ORS: 811-010-0125?

Answer: Specific actions such as memos, emails, personnel file entries, continuing education, other training, clinic policies communicated; remedial actions, would all be indications that the owner doctor is providing adequate supervision. Whether the owner doctor has met the requirements of the rule would be a situation specific determination.

Question: Are owner doctors not held responsible for independent contractors working in their office but not operating under the owner's license?

Answer: Yes, but only to the extent that they are “…part of their chiropractic practice for the purpose of providing care to patients…” as per OAR 811-010-0130 Other Licensed Health Care Providers