

Oregon OT Licensing Board
PUBLIC MEETING MINUTES – Monday May 2, 2016
Portland State Office Building Room 445, Oregon 97232

The Oregon Occupational Therapy Licensing Board meeting was held Monday, May 2, 2016 at the Portland State Office Building in room 445. The Board members present were: Mashelle Painter, COTA/L Chair; Linda Smith, OTR/L, Vice Chair; Sybil Hedrick Park, OTR/L, CHT, CSCS; Erion Moore II and Juanita Shepherd, public members. Felicia Holgate and Nancy Schuberg, Director's Office. Guests present: Anthony Medina, Budget Analyst; John Terpenton, Legislative Analyst; Kari Hill, OTA; Sheryl Riley, OTR/L, David Douglas School District. Sherri Paru, PT Board Investigator; Erin Haag, Director of the Speech-Language Pathology & Audiology Board.

With a quorum present, Mashelle Painter called the Monday meeting to order at 10:00 a.m.

1. Minutes:

The Board reviewed the minutes of the public meeting of February 1, 2016. A MOTION WAS MADE BY Sybil Hedrick Park AND SECONDED BY Juanita Shepherd TO APPROVE THE PUBLIC MEETING MINUTES. THE MOTION PASSED WITH ALL PRESENT VOTING IN FAVOR.

The Board reviewed the confidential meeting minutes of February 1, 2016. A MOTION WAS MADE BY Linda Smith AND SECONDED BY Sybil Hedrick Park TO APPROVE THE CONFIDENTIAL MEETING MINUTES WITH MINOR AMENDMENTS. THE MOTION PASSED WITH ALL PRESENT VOTING IN FAVOR.

2. Report of the Director:

The Board welcomed Erion Moore II, our newly appointed public member and Kari Hill, guest and future board member candidate.

The Board also welcomed John Terpenton, Legislative Budget Analyst and Anthony Medina, new budget analyst from DAS. They attended to learn more about what the Board is currently working on.

Nancy Schuberg discussed the policy package with Anthony of increasing the allotment for AAG costs, in the event the Board ever had a case go to hearing. The Board is also in touch with the DOJ about a pilot program of charging a fixed monthly amount based on an average amount of AAG charges the Board.

Budget: Monthly reports on revenue and expenditures for January-March were sent to Board members.

2016 Revenues were as follows: Jan: \$2,949.56; Feb: \$4,499; March: \$112,209. Renewals started on March 1st, 2016. The \$50 late fee started on May 2nd. Nancy and Felicia projected revenues of \$300,000 for renewals. The projection for other fees, late fees, licensee lists and applications is \$75,000 for a total of \$375,000 for the biennium.

Usually the OTLB lose 12% of OT's and a little more of OTA's during the renewal period. At the time of the Board meeting 157 licensees had reported they would not renew.

2016 Expenditures: Jan: \$13,524.17; Feb: \$15,640; March: 14,772.45.

2015 – 2017 Budget is for **\$454,683**. This is an “allotment” for spending of **\$18,945** per month, the amount the legislature approved for our spending. The Board cannot spend more than what is approved by the legislature, even if more revenue comes in than projected. The Board monthly expenditures for the last quarter are within the budget and the Board is in good financial position.

In January, we saw personal services decrease due to Felicia going to part-time. In the summer will be a vacation pay off for the current Executive Director. The IT costs for renewals are \$2,250 and AG costs were \$1,120 for Jan and Feb. The board anticipates a large amount in Professional Services in June or July for the shared Accountant. Currently the Mortuary Board is paying his costs and will charge back in June. Charge will be based on the individual Boards FTE and usage.

Board Best practices: Included in the budget are the annual performance progress report. This lists the key performance measures. For the OT Board:

- Issuing licenses within 3 days once we have all documentation.
- 95% Excellent survey ratings – reviewed by the Board annually in the November Board meeting.
- We follow Best Practices – Board members completed survey.
- All discipline cases investigated within 90 days.

License Numbers: As of April 30, there were **1, 897 OT’s** and **462 OTA’s** and for a total of **2,359** licensees. These numbers did not include 157 licensees who already told the Board they were not renewing. This was 150 licensees. There were **30** licenses issued per month.

Board training: There is now a new 3-part training session for new Board members and directors. It is available through ILearn. The curriculum contains 2 online courses and 1 classroom course. All of these must be completed within 6 months of the start date of new board members. Only those who were appointed on or after 1/1/16 are required to complete the curriculum. Both Erion Moore and Nancy Schuberg completed the training in March. Nancy provided notes to the Board members of the content of the training.

2016 Renewal Report Update: As of Sunday, 5/1:

Total reported Not Renewing: 157

OT’s: 1,568; OTA’s: 358 Total: 1,926

Renewal Issues: The Board reviewed all “Yes” to History questions on the renewals. Several had Yes for giving up license in other states that they no longer were using. Several were for medical conditions and the Board asked for current doctor reports to be sent to the Board. Several were current cases and two were for a new DUI.

For any of the renewals that come in after the Board meeting, the Director will check with the Chair and Vice Chair whether to issue the renewal license. All cases will come before the Board for review or ratification at the next meeting.

List of retiring OTs/OTAs being kept for OTA0.

NBCOT conference: Linda and Nancy will attend the NBCOT Conference in May 11-13. NBCOT is paying for travel expenses of the Director and Board member attending.

OTAO Conference dates: October 7 & 8 @ the Monarch Hotel in Clackamas.

Website re-design – the Board is now in the early stages of a new website design that is more mobile phone friendly.

Possible New OTA Program:–Jarret Gilbert, the director of Health Sciences from Clackamas Community College contacted the Board about COTA programs in Oregon, accreditation, and the national exam. He said there is an increased current and projected workforce need in Long Term care and they are looking into the possibility to provide an OTA training program. The OT Board responded and mentioned issues finding fieldwork. Board Chair, Mashelle Painter contacted Jarret to explain the biggest barrier for any program is fieldwork opportunity and they should work together to build capacity if it is needed. Jarret stated they were only conducting research at this time.

Impaired Practitioners Program: The Board was provided the estimated costs of participating in the state-run Impaired Practitioner program. A total annual cost of \$58,300, a quarter of the Board's biennium budget. This is a statewide program and a Board cannot have a separate one.

3. Disciplinary/Investigations/Complaints: In accordance with ORS 192.660 (2)(1), which allows the Board to meet in Executive Session on matters to consider information obtained as part of investigations of licensees.

The following cases were considered:

- **OT 2013 – 06:** Continued with follow up.
- **OT 2013 – 08:** Continued through Nov. 2016.
- **OT 2014 – 09:** Case closed.
- **OT 2015-02:** Continued with follow up.
- **OT 2015 – 05A:** New probationary license with added stipulations signed on 3/3/2016. Added to NBDB and licensee look up. Continued.
- **OT 2015 – 09:** Case closed.
- **OT 2015 – 10:** Continued.
- **OT 2015 – 11:** New Complaint – A MOTION WAS MADE BY Juanita Shepherd AND SECONDED BY Sybil Hedrick Park TO DISMISS CASE.
- **OT 2015 – 12:** New Complaint – A MOTION WAS MADE BY Juanita Shepherd AND SECONDED BY Sybil Hedrick Park TO DISMISS CASE.
- **OT 2016 – 02:** Case Closed.
- **OT 2016 – 03 LEADS.** Case Closed.

- **OT 2016 – 04 LEDS.** Case Closed.

The Executive session was adjourned and the meeting was brought back to public session. All votes were taken in public session.

4. Ratify List of Licensees: A MOTION WAS MADE BY Linda Smith AND SECONDED BY Sybil Hedrick Park TO RATIFY THE LIST OF LICENSEES ISSUED SINCE THE LAST BOARD MEETING. THE MOTION PASSED WITH ALL PRESENT.

Lunch was provided as the Board continued working.

5. AOTA Conference Recap: Linda Smith attended the AOTA Conference in April and gave a presentation on topics including telehealth. The Board will pay a portion of Linda's expenses for attending.

6. CE Audits:

The Board will send a list of licensees to NBCOT to verify certification. Those licenses that are certified will not be a part of the random CE Audit in June by the OTLB.

Audits will run right after renewals and the Board will audit 5% of licensees who are not NBCOT certified.

The Board is discussing with NBCOT about running a customized audit for Oregon licensees who are certified and those earmarked for mandatory audit.

If Board members are NBCOT certified they will not have to submit CE for audit.

7. CE Rule changes:

The Board voted to modify the current CE Rule to remove (3)(b).

3(b) Current licensees who have their second year of NBCOT certification shall obtain a minimum of 15 points of CE from Board approved categories.

It causes a great deal of confusion and the licensees are already providing 12 PDUs annually to the NBCOT.

The Board approved the language to recognize Doctorate student supervision as CE.

A MOTION WAS MADE BY Linda Smith AND SECONDED BY Mashelle Painter TO AMEND CE RULES.

8. New Policy:

New policy to clarify language and common questions that come up when using Aides was adopted by the Board, citing examples of what an aide can and can't do and the aide having the appropriate training.

New policy to clarify an OTA's role in the plan of care, discharge recommendations and discharge notes was also adopted by the Board.

A MOTION WAS MADE BY Sybil Hedrick Park AND SECONDED BY Linda Smith TO ADOPT THE POLICIES ON USE OF AIDES AND COTAS ROLE IN PLAN OF CARE, DISCHARGE RECOMMENDATIONS AND NOTES. THE MOTION PASSED WITH ALL PRESENT VOTING IN FAVOR.

9. Board Business:

Medication Reconciliation in Home Health:

The Board was alerted by OT's in the Home Health field issues surrounding complying with the federal guidelines of medication reconciliation. This is a federal guidelines in Medicare states that if the RN is not going to be present the PT, OT, or Speech therapist may complete the assessment and for Medicare patients, determine eligibility for the Medicare home health benefit including homebound status. This includes a review of all medications that the patient is currently using in order to identify any potential adverse effects and drug reactions, including ineffective drug therapy, side effects, drug interactions, drug therapy and noncompliance with drug therapy.

A few OT's in Home Health at Kaiser are reporting what they are asked to do is beyond their scope of practice. They cited examples of problems looking unprofessional when attempting to provide nursing advice and mediating on the phone, not understanding the RN lingo, the caregiver managing meds is not available during the session, and in certain situations discussion over the medication upsetting the client. Many questions coming up that were not addressed in training or their education.

The Board agreed a review of the patient's medicine was within their scope as long as they are not interpreting the data and not making a clinical judgment. If it's too complex then a nurse needs to be called in. It was suggested that the employer needs to provide more training to OT's.

A question was brought up on how will it impact OTAs in Home Health?

The Board will collaborate with the PT and SLPA Board to respond to questions sent by staff at Kaiser and work to clarify language on the topic.

AOTA believes that reviewing medication information sheets with patients and assessing whether they understand them is an expectation for therapists and is well within the scope. There is a position paper in process by the AOTA. The WA Board is also addressing this issue.

IFSP OT Evaluations:

An OTR, from a school district, explained that 80-90% of the time children transitioning to kindergarten have been assigned for OT services without having been evaluated by an OT. She explained this problem has been coming up in her district for the last 3 years. Cited in ORS, the OTs must always do the evaluation before they can be assigned OT services. The OT reported that there is a lot of confusion on this issue across the country, especially in Oregon. She is not sure if it's due to lack of funding. Over the last few years, education specialists and speech therapists have been adding OT on service plans without involving the OTs. Sometimes OTs find out they have been assigned a child at an eligibility meeting and they have to make on the spot determination in front of parents and the service team. If OT's had an opportunity to look in service log, that could suffice.

This has been a practice for a long time where a team with a variety of disciplines making a determination for a child and putting them on a IFSP for OT services when in most cases an OT

has not been involved in the determination based on the data reviewed and observation. There is no evaluation done. There has been no documentation.

The practice act states that only the OT can make the determination for adding OT services to the IFSP. If the motor team does not have an OT on the team, and the team feels that there is the need for OT services, then an OT MUST be consulted and make the determination for OT services, including frequency and level of service.

The Board will draft a letter stating the regulations. There have been a number of concerns come to the board regarding use of OT in early intervention and in schools.

New Business:

Supervision by OTs of Behavior Analysts Interventionalists:

Providence is asking whether OT's can supervise a Behavior Analyst Interventionalist. Written in the ABA rule Interventionalists can be supervised by Health professionals, including Drs., Nurses, OT's and PT's. ABA has rules in place of the supervision requirements. The Board viewed these as thorough and additional rules by the OTLB are not needed.

Presence Learning – Supervision rule language:

Confusion by Presence Learning whether an OT can supervise an OTA via telehealth. Under the telehealth rule you can provide virtual supervision of the COTA. However, Presence Learning alerted the Board under the supervision rule states it must be “in person at the work site.” The Board will review the language in the rule.

Strategic Planning Session – will be held on July 25th at the Providence Sports Center. Time: 10AM.

2016 Board Meetings: Friday, August 5, Board Meeting. Room 612; Monday, Nov. 7, 2016 @ Pacific.

2017 Meeting dates will be proposed at the August 5th meeting.
The Board adjourned its meeting at 2:34 pm.

Directors, Felicia Holgate & Nancy Schuberg, May 9, 2016