

# OT OUTLOOK

Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board

Occupational Therapy Section

Spring | 2011

## OT School-Based Practice Issues

Occupational therapists and occupational therapy assistants are responsible for informing administrators about staffing issues and licensure rules.

The Occupational Therapy Section is working with the Ohio Department of Education to ensure safe and adequate occupational therapy services for students. The Section has been engaged in numerous meetings with staff from Office for Exceptional Children, and has corresponded in writing to clarify the Ohio Occupational Therapy Practice Act for school based practitioners and administrators. The Section has presented to the Ohio Association of Pupil Services Administrators (OAPSA).

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As most of you should know, the ultimate responsibility for the student lies with the occupational therapist. With this being said, what does this mean for determination of the occupational therapist's caseload?

Every student assigned to an occupational therapy assistant is part of the occupational therapist's caseload. In most cases the Occupational Therapy Section's caseload definition is not the same as the Ohio Department of Education's caseload. The Ohio Department of Education's caseload is defined as the maximum number of students to whom an individual may provide direct services.

Although the Ohio Occupational Therapy Practice does not specifically regulate caseloads levels, the Occupational Therapy Section's defines a caseload as all students for whom the occupational therapist has ultimate responsibility.

Occupational therapists are required to ensure that they accept no more students than they can provide appropriate management for, based on the needs of the students, taking into account the complexity of the population being served. An occupational therapist must not provide/ supervise care for higher number of students that that for which skilled care by a licensed practitioner can be delivered.



Regardless of the staffing challenges, the occupational therapist must ensure that students receive services and is responsible for the student until the care is transferred. An occupational therapy assistant must have a supervising occupational therapist designated prior to providing services. Occupational therapists and occupational therapy assistants are responsible for informing administrators about staffing issues and licensure rules.

For additional information on the OT/OTA roles and responsibilities please review the ***Comparison of Responsibilities of School-Based Occupational Therapy Practitioners Chart*** on the Board website at <http://otptat.ohio.gov> under the Publications link.

## Rules Update

### Code of Ethical Conduct Changes Effective May 1, 2011

The changes to rule 4755-7-08 regarding the occupational therapy code of ethical conduct goes into effect on May 1, 2011. This rule replaces the current rules 4755-7-05: Disclosure of confidential information, 4755-7-06: Exploitation of persons served, 4755-7-07: Use of available resources, and 4755-7-08: Code of ethics. Below is the full text of the new rule.

#### 4755-7-08 Code of Ethical Conduct

##### (A) Operations.

Licensees shall use the provisions contained in paragraphs (A)(1) to (A)(9) of this rule as guidelines for promoting ethical integrity and professionalism. Failure to comply with paragraphs (A)(1) to (A)(9) of this rule may be grounds for disciplinary action pursuant to section 4755.11 of the Revised Code and in accordance with Chapter 119. of the Revised Code.

(1) Licensees shall familiarize themselves with, seek to understand, and comply with the laws and rules governing the practice of occupational therapy.

(2) Licensees shall remain abreast of revisions in the laws and rules governing the practice of occupational therapy and shall inform employers, employees, and colleagues of those revisions.

(3) Licensees shall achieve and continually maintain high standards of competence by doing the following:

(a) Maintain and document competency by participating in professional development, continuing competence, and other educational activities.

(b) Critically examine and keep current with emerging knowledge relevant to the practice of occupational therapy. A licensee shall not perform or

attempt to perform techniques and/or procedures in which the licensee is untrained by education or experience.

(4) An individual shall not practice occupational therapy without a valid license, or without holding student status, including:

(a) Practicing occupational therapy while an individual's license is suspended or revoked.

(b) Practicing occupational therapy with an expired license or when no longer enrolled as a student in an accredited occupational therapy educational program.

(5) Licensees shall ensure that an individual supervised or directed by the licensee possesses a valid license or is a student occupational therapist or student occupational therapy assistant, as those terms are defined in rule 4755-7-01 of the Administrative Code.

(6) Licensees shall not aid, abet, authorize, condone, or allow the practice of occupational therapy by any person not legally authorized to provide services.

(7) An applicant or licensee shall not cheat or assist others in conspiring to cheat on the certification examination references in paragraph (C)(2) of rule 4755-3-01 of the Administrative Code or the state jurisprudence examination.

(8) Licensees shall not permit another person to use an individual's wall certificate, license number, or national provider identifier for any illegal purpose.

(9) Licensees shall report to the

occupational therapy section any unprofessional, incompetent, or illegal behavior of an occupational therapist or occupational therapy assistant of which the licensee has knowledge.

##### (B) Professionalism of licensee.

Professionalism of the licensee includes conforming to the minimal standards of acceptable and prevailing occupational therapy practice, including practicing in a manner that is moral and honorable. Conduct may be considered unethical regardless of whether or not actual injury to a client occurred. Failure to comply with paragraphs (B)(1) to (B)(17) of this rule may be grounds for disciplinary action pursuant to section 4755.11 of the Revised Code and in accordance with Chapter 119. of the Revised Code.

(1) A licensee shall not:

(a) Forge the signature of other practitioners.

(b) Forge a wall certificate or any other proof of current licensure.

(2) An occupational therapy assistant shall not provide occupational therapy services without a supervising occupational therapist.

(3) All occupational therapy documentation, including, but not limited to, evaluations, assessments, intervention plans, treatment notes, discharge summaries, and transfers of care must be in written or electronic format.

(4) A licensee shall not falsify, alter, or

Licensees shall familiarize themselves with, seek to understand, and comply with the laws and rules governing the practice of occupational therapy.

## A licensee shall provide appropriate supervision to individuals for whom the practitioner has supervisory responsibility.

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destroy client records, medical records, or billing records without authorization. The licensee shall maintain accurate client and/or billing records.

(5) A licensee shall not deliver, obtain, or attempt to obtain medications through means of misrepresentation, fraud, forgery, deception, and/or subterfuge.

(6) A licensee shall not initiate, participate in, or encourage the filing of complaints against colleagues that are unwarranted or intended to harm another practitioner.

(7) A licensee shall not practice occupational therapy while the ability to practice is impaired by alcohol, controlled substances, narcotic drugs, physical disability, mental disability, or emotional disability. If a licensee's or applicant's ability to practice is in question, the licensee or applicant shall submit to a physical or mental examination or drug/alcohol screen as requested by the occupational therapy section to determine the applicant's or licensee's qualifications to practice occupational therapy.

(8) A licensee shall preserve, respect, and safeguard confidential information about colleagues, staff, and students, unless otherwise mandated by national, state, or local laws.

(9) A licensee shall exercise sound judgment and act in a trustworthy manner in all aspects of occupational therapy practice. Regardless of practice setting, the occupational therapy practitioner shall maintain the ability to make independent judgments. A licensee shall strive to effect changes that benefit the client.

(10) A licensee shall accurately represent the qualifications, views, contributions, and findings of colleagues and students.

(11) A licensee shall not misrepresent the credential, title, qualifications, education, experience, training, and/or specialty certifications held by the licensee.

(12) An individual licensed by the occupational therapy section has a responsibility to report any organization or entity that holds itself out to deliver

occupational therapy services that places the licensee in a position of compromise with this code of ethical conduct.

(13) A licensee shall provide appropriate supervision to individuals for whom the practitioner has supervisory responsibility.

(14) A licensee shall only seek compensation that is reasonable for the occupational therapy services delivered. A licensee shall never place the licensee's own financial interests above the welfare of the licensee's clients. A licensee, regardless of the practice setting, shall safeguard the public from unethical and unlawful business practices.

(15) A licensee shall adhere to the minimal standards of acceptable prevailing practice. Failure to adhere to minimal standards of practice, whether or not actual injury to a client occurred, includes, but is not limited to:

(a) Documenting or billing for services not actually performed.

(b) Performing techniques/procedures in which the licensee cannot demonstrate and document competency, either by experience or education.

(c) Practicing in a pattern of negligent conduct, which means a continued course of negligent conduct or of negligent conduct in performing the duties of the profession.

(d) Delegating occupational therapy functions or responsibilities to an individual lacking the ability or knowledge to perform the function or responsibility in question.

(e) Failing to ensure that duties assumed by or assigned to other occupational therapy practitioners match credentials, qualifications, experience, and scope of practice.

(16) A licensee shall respect the rights, knowledge, and skills of colleagues and other health care professionals.

(17) A licensee shall not use or participate in the use of any form of communication that contains false, fraudulent, deceptive, or unfair statements or claims.

### **(C) Licensee and client interactions.**

The licensee shall demonstrate concern for the well-being of the client. Failure to comply with paragraphs (C)(1) to (C)(17) of this rule may be grounds for disciplinary action pursuant to section 4755.11 of the Revised Code and in accordance with Chapter 119. of the Revised Code.

(1) A licensee shall adhere to the minimal standards of acceptable prevailing practice. Failure to adhere to minimal standards of practice, whether or not actual injury to a client occurred, includes, but is not limited to:

(a) Failing to assess and evaluate a client's status or establishing an occupational therapy intervention plan prior to commencing treatment/intervention of an individual client.

(b) Providing treatment interventions that are not warranted by the client's condition or continuing treatment beyond the point of reasonable benefit to the client.

(c) Providing substandard care as an occupational therapy assistant by exceeding the authority to perform components of interventions selected by the supervising occupational therapist.

(d) Abandoning the client by inappropriately terminating the practitioner-client relationship by the licensee.

(e) Causing, or permitting another person to cause, physical or emotional injury to the client, or depriving the client of the individual's dignity.

(2) A licensee shall transfer the care of the client, as appropriate, to another health care provider in either of the following events:

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- (a) Elective termination of occupational therapy services by the client; or
- (b) Elective termination of the practitioner-client relationship by the licensee.
- (3) A licensee shall ensure the client's rights to participate fully in the client's care, including the client's right to select the occupational therapy provider, regardless of the practice setting.
- (4) A licensee shall respect the individual's right to refuse professional services or involvement in research or educational activities.
- (5) A licensee shall disclose any professional, personal, financial, business, or volunteer affiliations that may pose a conflict of interest to those with whom the licensee may establish a professional, contractual, or other working relationship.
- (6) A licensee shall not influence a client or the client's family to utilize, purchase, or rent any equipment based on direct or indirect financial interests of the licensee. Recommendations of equipment must be based solely on the therapeutic value of that equipment to the client. A licensee who owns or has a direct financial interest in an equipment or supply company must disclose the financial interest to the client if the licensee sells or rents, or intends to sell or rent, to that client.
- (7) A licensee shall not intentionally or knowingly offer to pay or agree to accept any compensation, directly or indirectly, overtly or covertly, in cash or in kind, to or from any person or entity for receiving or soliciting clients or patronage, regardless of the source of the compensation.
- (8) A licensee shall refer to or consult with other service providers whenever such a referral or consultation would be beneficial to care of the client. The referral or consultation process should be done in collaboration with the client.
- (9) A licensee shall not exploit a client, or the parent/guardian of a minor client, sexually, physically, emotionally, financially, socially, or in any other manner.
- (10) A licensee shall not engage in conduct that constitutes harassment or verbal or physical abuse of, or unlawful discrimination against, clients, the parent/guardian of a minor client, students, and/or colleagues.
- (11) A licensee shall not engage in any sexual relationship or conduct, including dating, with any client, or engage in any conduct that may reasonably be while a practitioner-client relationship exists and for six months immediately following the termination of the practitioners-client relationship. In the case of minors, the practitioner-client relationship extends to the minor's parent or guardian.
  - (a) A licensee shall not intentionally expose or view a completely or partially disrobed client in the course of treatment if the exposure or viewing is not related to the client diagnosis or treatment under current practice standards.
  - (b) A licensee shall not engage in a conversation with a client that is sexually explicit and unrelated to the occupational therapy intervention plan.
- (12) A licensee shall not engage in sexual harassment of clients, the parent/guardian of a minor client, students, and/or colleagues. Sexual harassment includes, but is not limited to, making unwelcome sexual advances, requesting sexual favors, and engaging in other verbal or physical conduct of a sexual nature that results in:
  - (a) Withholding occupational therapy services to a client;
  - (b) Creating an intimidating, hostile, or offensive environment; or
  - (c) Interfering with the client's ability to recover.
- (13) A licensee shall advocate for clients to obtain needed services through available means.
- (14) A licensee shall provide accurate and relevant information to clients about the clients' care and to the public about occupational therapy services.
  - (a) A licensee shall not guarantee the results of any therapy, consultation, or therapeutic procedure. A guarantee of any sort, expressed or implied, oral or written, is contrary to professional ethics.
  - (b) A reasonable statement of prognosis is not improper, but successful results are dependent upon many uncontrollable factors. Hence, any warranty is deceptive and unethical.
- (15) A licensee shall obtain informed consent from the client.
  - (a) A licensee, unless otherwise allowed by law, shall not provide care without disclosing to the client or the client's representative, the benefits, substantial risks, if any, or alternatives to the recommended evaluation or intervention.
  - (b) Information relating to the therapist-client relationship is confidential and may not be communicated to a third party not involved in that client's care without the prior written consent of the client or the client's representative or unless otherwise allowed by law. Information must be disclosed when required by law for the protection of the client or the public.
- (16) A licensee shall safeguard the public from underutilization or overutilization of occupational therapy services.
- (17) A licensee shall respect the rights and dignity of all clients and provide care

**A licensee shall not engage in sexual harassment of clients, the parent/guardian of a minor client, students, and/or colleagues.**

**A licensee shall self report to the Occupational Therapy Section within 30 days of physical/emotional impairments due to chemical use/dependency, convictions, or suspension of membership in OT Associations.**

as described in paragraphs (C)(17)(a), (C)(17)(b), and (C)(17)(c) of this rule.

(a) A licensee shall recognize individual differences with clients and shall respect and be responsive to those differences.

(b) A licensee shall be guided by concern for the physical, psychosocial, and socioeconomic welfare of clients.

(c) A licensee shall recognize and understand the impact of the cultural components of age, economics, gender, geography, race, ethnicity, religious and political factors, marital status, sexual orientation, and disability of all clients.

**(D) Cooperation.**

In accordance with division (A)(19) of section 4755.11 of the Revised Code, licensees shall cooperate with in investigation by the occupational therapy section. Failure to cooperate is conduct detrimental to the best interest of the public and grounds for disciplinary action. Cooperation includes responding fully and promptly to any questions raised by the occupational therapy section and providing copies of the medical records and other documents requested by the occupational therapy section. Failure to comply with paragraphs (D)(1) to (D)(7) of this rule may be grounds for disciplinary action pursuant to section 4755.11 of the Revised Code and in accordance with Chapter 119. of the Revised Code.

(1) A licensee shall respond fully and truthfully to a request for information from the occupational therapy section.

(2) A licensee shall comply with a subpoena issued by the occupational therapy section.

(3) A licensee shall provide information or documents within the time frame specified by the occupational therapy section.

(4) A licensee shall appear and provide information at an interview requested by the occupational therapy section.

(5) A licensee shall not deceive, or

attempt to deceive, the occupational therapy section regarding any matter, including by altering or destroying any record or document.

(6) A licensee shall not interfere with an investigation or disciplinary proceeding by willful misrepresentation of facts before the agency or the occupational therapy section, or by use of threats or harassment against any client or witness to prevent the client or witness from providing evidence in a disciplinary proceeding or any other legal action.

(7) A licensee shall not refuse to provide testimony in an administrative hearing.

**(E) A licensee shall self report to the occupational therapy section, within thirty days, any of the items outlined in paragraphs (E)(1) to (E)(7) of this rule. Failure to comply with paragraphs (E)(1) to (E)(7) of this rule may be grounds for disciplinary action pursuant to section 4755.11 of the Revised Code and in accordance with Chapter 119. of the Revised Code.**

(1) Impairment by physical or mental illness, chemical use, or chemical dependency, that affects the applicant's or licensee's ability to practice with reasonable skill and safety.

(2) Conviction of a felony.

(3) Conviction of a misdemeanor when the act that constituted the misdemeanor occurred during the practice of occupational therapy.

(4) The termination, revocation, suspension of membership by a state or national occupational therapy professional association.

(5) The termination, revocation, suspension, or sanctioning of a credential issued by a state or national occupational therapy credentialing organization.

(6) A positive drug and/or alcohol screening.

(7) A finding of malpractice by a court of competent jurisdiction.

**Elimination of Limited Permits**

Effective May 1, 2011, the Board will no longer issue limited permits. This rule change was made in the best interest of public protection. Individuals must first demonstrate entry level competence in occupational therapy practice prior to being eligible to treat clients, by passage of the NBCOT certification examination. Therefore, individuals seeking licensure in Ohio who graduated from an ACOTE accredited entry-level program are required to take and pass the NBCOT certification examination prior to applying for licensure in the State of Ohio. Individuals may not practice occupational therapy in Ohio until the individual receives a valid license.

## 2010 Rules Changes Highlights

Supervision and Delegation Rules Restructured

### Supervision and Delegation

The Section restructured the supervision and delegation rules in 2010. The revised rules 4755-7-01(Definitions), 4755-7-02(Roles and Responsibilities), 4755-7-03(Delegation), 4755-7-04(Supervision) provides a more logical review of the roles and responsibilities for occupational therapy practitioners and unlicensed personnel.

Rule 4755-7-01 established the definitions for occupational practice, occupational therapist, occupational therapy assistant, students, unlicensed personnel, supervising occupational therapist, and supervising occupational therapy assistant. The Section would like to point out that unlicensed personnel are on-the-job trained individuals who support delivery of OT services by personally assisting OT/OTA/student while one of those is concurrently providing services to the same patient. Unlicensed personnel are to be used as “a second pair of hands” to the occupational therapy practitioner and cannot function independently.

Rule 4755-7-02 defines the roles and responsibilities for occupational therapist, occupational therapy assistants. These roles and responsibility were not change from the previous version of the old rule 4755-7-03.

Rule 4755-7-03 clarifies what can be delegated by the supervision occupational therapist and what factors need to be considered when delegating to an occupational therapy assistant. This rule also clarifies that unlicensed personnel may not perform tasks that are evaluative, task

selective, or recommending in nature. An occupational therapy practitioner cannot delegate to unlicensed personnel initiation, planning, adjustment, modification, or performance of occupational therapy services

Rule 4755-7-04 the Section did not make any changes to the OT-OTA supervision ratio. However, the language was reworded to further clarify the supervision requirements for supervising occupational therapy personnel who do not have direct client treatment responsibilities. This rule states that it is the responsibility both the occupational therapist and occupational therapy assistant to establish evidence that supervision occurred in accordance with requirements of rules.

The Section would like to thank licensees for providing feedback on these rules. The Section would like to remind licensees to visit the Board website periodically to review the updates to the Ohio Occupational Therapy Practice Act.

### Elimination of Pocket Identification Cards

Effective May 1, 2010, the Board no longer issues pocket identification cards. As stated in rule 4755-3-02 (C) of the Ohio Administrative Code, verification of current licensure can be obtained from the Ohio e-license center verification page (<https://license.ohio.gov/lookup>). As a result when you renew your license you will not receive an updated pocket identification card.

### Searching for Expert Witnesses

The Occupational Therapy Section is seeking to establish a pool of expert witnesses/and or peer reviewers. We invite all interested licensees to apply by sending their resume/curriculum vitae, specifying their specialization, years of practice, educational background, any previous experience testifying, and their willingness to function as an expert. Report writing and testifying (public speaking) are all necessary skills. The availability to take on these tasks when the need arises is also a consideration.

The Section’s goal is to have enough qualified licensees to enable us to create a “grid” with expert witness options, organized by specialization. Any licensee accepted as an expert witness/peer reviewer will be notified by the Section. You would be required to enter into a personal service contract with the Board outlining the duties and responsibilities for the expert witness/peer reviewer position.

When an expert is needed in that area of occupational therapy practice, that individual would be contacted by the Board staff member and the materials to be reviewed will be sent to the expert with specific written instructions to be addressed. Experts are retained to conduct independent review, summary, and analysis of various records and documents pertaining to an open case and, if necessary, provide a written report that will be reviewed by the Occupational Therapy Enforcement Review Panel. Other services covered by the contract will include meeting with the counsel for the Board and testifying in an administrative hearing.

All interested parties may fax their qualifying information etc. to the Board at (614) 995-0816.

## Frequently Asked Questions

### *Can Occupational Therapy Assistants upgrade short term goals?*

It is the position of the Occupational Therapy Section that the initial plan, long-term goals, and initial short-term goals must be written by the occupational therapist. The occupational therapist may collaborate with the occupational therapy assistant in the development of these items. Once the initial plan of care and goals are established, the occupational therapy assistant may update short-term goals in collaboration with the occupational therapist. Please review rule 4755-7-03 (B) of the Administrative Code for additional information on the roles and responsibilities of the occupational therapist and occupational therapy assistant.

### *Can Occupational Therapy Assistants complete home assessments?*

A home assessment is an assessment typically performed prior to discharge home from an inpatient or skilled nursing rehabilitation setting. It is primarily performed to determine equipment and environmental needs for the client's safety at home. It is not an evaluation performed within home health services.

A home assessment may be performed by an occupational therapy assistant (OTA) with a current client under an established occupational therapy treatment/intervention plan. The OTA can gather objective information and report observations, with or without the client and/or occupational therapist (OT) present. It is the responsibility of the OT to interpret the data gathered by the OTA and collaborate with the OTA to make recommendations. Any collaboration between the OT

and OTA must be reflected in client documentation.

### *Can an Occupational Therapist treat a family member?*

There is nothing in the Ohio Occupational Therapy Practice Act that prohibits treating a family member.

Pursuant to rule 4755-7-08 (A)(6) of the Ohio Administrative Code, occupational therapy practitioners shall provide accurate information about occupational therapy services.

(c) Occupational therapy practitioners shall disclose any professional, personal, financial, business, or volunteer affiliations that may pose a conflict of interest to those with whom they may establish a professional, contractual, or other working relationship.

However, there may be agency or insurance payer policies regarding treatment and billing for services for a family member that you should clarify prior to providing these services.

## CE Reference Guide

The continuing education reference guide is available 24-7 on the Board website (<http://otptat.ohio.gov>) located under the continuing education link. Occupational Therapy Practitioners can view the guide to verify the appropriate start/end date, and minimum contact hours required for each continuing education reporting period. The Section encourages all licensed occupational therapy practitioners to utilize this resource.

## OT Jurisprudence Examination Deadline to Earn CE Ethics Credit

Historically, licensees tend to wait until the end of the renewal period to submit the jurisprudence examination to the Board office for scoring.

At the July 2009 Section meeting, the Occupational Therapy Section voted to establish a deadline to submit the Jurisprudence Examination for continuing education ethics credit. If licensees choose to take the Ohio Occupational Therapy Jurisprudence Examination for ethics credit, **the examination must be received in the Board office no later than May 1st of the renewal year.** This deadline will enable Board Staff time to process the jurisprudence examinations and notify licensees of the examination results prior to the licensure expiration date.

The Occupational Therapy Section values your feedback.  
 Visit the Board website to complete the Board On-Line Survey.

**Occupational Therapy Section Members**

**Mary Stover, OT, Chair**  
 Columbus, Ohio  
 Term Expires 2012, 2nd Term

**Jean Halpin, OT, Secretary**  
 Westerville, Ohio  
 Term Expires 2011, 1st Term

**Rebecca Finni, OT**  
 Amelia, Ohio  
 Term Expires 2013, 2nd Term

**Kimberly Lawler, OT**  
 Frazeysburg, Ohio  
 Term Expires 2013, 2nd Term

**Nanette Shoemaker, OTA**  
 Miamisburg, Ohio  
 Term Expires 2012, 2nd Term

**2011 Section Meeting Dates**

*May 5*  
*July 21*  
*September 8*  
*November 17*

All Section meetings are open to the public. Meetings are generally held on the 31st Floor of the Vern Riffe Center for Government and the Arts, at 77 South High Street, Columbus, Ohio 43215. Please contact the Board to verify the time and meeting room if you would like to attend. The schedule listed is tentative and subject to change.

**Board Member Appointments**

Have you ever wondered what goes on during an Occupational Therapy Section meeting? Do you ever think that you might be able to contribute to the profession of physical therapy by serving as a member of the regulatory board?

The Governor is responsible for appointing all members of the Board. Members are appointed for three year terms and may serve for up to three consecutive terms. There are approximately seven meetings each year and members are reimbursed for their time and travel expenses.

To be eligible to serve on the Board, each applicant must hold a current Ohio occupational therapist or occupational therapy assistant license and have been actively engaged in or associated with the practice of occupational therapy in Ohio for at least five years immediately preceding the appointment.

If you are interested in submitting your name for consideration by the Governor, please download the application from the Boards and Commissions section of the Governor's website (<http://governor.ohio.gov>).

**Licensee Census**

*As of March 25, 2011*

|                     |      |
|---------------------|------|
| OT                  | 4525 |
| OTA                 | 3048 |
| OT Escrow           | 199  |
| OTA Escrow          | 104  |
| OT Limited Permits  | 3    |
| OTA Limited Permits | 4    |
| PT                  | 7603 |
| PTA                 | 5746 |
| AT                  | 1944 |

**Disciplinary Actions**

Disciplinary Actions are posted on the Board website (<http://otptat.ohio.gov>) after each Section meeting. To view the disciplinary action listing, use the Discipline/Enforcement link in the Information menu. The disciplinary action posting includes the Practitioner name, License Number, Sanction, Basis for Action, and Discipline Date. To view the public records related to the disciplinary action, use the License Lookup/Verification link in the Information menu. The public record is provided in PDF format.