



Ohio Occupational Therapy, Physical Therapy,  
and Athletic Trainers Board

*Occupational Therapy Section*  
*May 14, 2015*  
*9:00 a.m.*

**Members Present**

Beth Ann Ball, OTR/L, Secretary  
Rebecca Finni, OTR/L, Chair  
Mary Beth Lavey, COTA/L (left @ 11:04 am)  
Kimberly Lawler, OTR/L  
Trevor Vessels, Public Member

**Members Absent**

Jean Halpin, OTR/L

**Legal Counsel**

Melissa Wilburn, AAG

**Staff**

Jason Bash, Investigator Assistant  
Diane Moore, Executive Assistant  
Lisa Ratinaud, Enforcement Division Supervisor  
Jeffrey Rosa, Executive Director

**Call to Order**

Rebecca Finni, Section Chair, called the meeting to order at 9:05 a.m.

The Section began the meeting by reading the vision statement.

The Occupational Therapy Section is committed to proactively:

- Provide Education to the Consumers of Occupational Therapy Services;
- Enforce Practice Standards for the Protection of the Consumer of Occupational Therapy Services;
- Regulate the Profession of Occupational Therapy in an Ever-Changing Environment;
- Regulate Ethical and Multicultural Competency in the Practice of Occupational Therapy;
- Regulate the Practice of Occupational Therapy in all Current and Emerging Areas of Service Delivery.

**Approval of Minutes**

**Action:** Rebecca Finni moved that the minutes from the March 5, 2015, meeting be approved as submitted. Kimberly Lawler seconded the motion. The motion carried.

**Executive Director's Report**

- The Executive Director informed the Section that the new clerk started and the two vacant positions have been posted.
- The Executive Director informed the Section that the new strategy for the new licensing project is to pilot three boards (one license type per board). The three boards are: Medical Board (massage therapist), Sanitarian Registration Board (registered sanitarian), and OTPTAT Board (physical therapist). The targeted go live date is August 3, 2015.
- The Executive Director and Executive Assistant will work on the new e-licensing setup and configuration.
- The Board is approaching the close of the fiscal year.
- The Board is in the middle of the occupational therapist renewal.

The formal Executive Director's report is attached to the minutes for reference.

**Action:** Rebecca Finni moved that the Section go into executive session pursuant to section 121.22 (G)(1) of the Ohio Revised Code to discuss personnel matters related to appointment, employment; dismissal; discipline, promotion; demotion; compensation of a public employee. Beth Ann Ball seconded the motion.

The Section Chair called roll:

Beth Ann Ball        Yes  
Rebecca Finni        Yes

Jean Halpin	Absent
Kimberly Lawler	Yes
Mary Beth Lavey	Yes

The Section went into executive session at 9:19 am and came out at 9:45 am. The public member was asked to stay in the room. There was no action taken.

**Discussion of Law and Rule Changes**

The Executive Director informed the Section that Board has identified potential sponsors for the joint board bill.

**Administrative Reports**

**Licensure Report**

**Action:** Rebecca Finni moved that the Occupational Therapy Section ratify, as submitted, the occupational therapist and occupational therapy assistant licenses issued by examination, endorsement, reinstatement, and restoration by the Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board from March 5, 2015, through May 14, 2015, taking into account those licenses subject to discipline, surrender, or non-renewal. Mary Beth Lavey seconded the motion. Kimberly Lawler abstained from voting on the occupational therapy assistant examination application for Christina Parsons. The motion carried.

**Occupational Therapist – Examination**

Allison, Darcy	Baker, Caitlin	Bassi, Margaret
Brignole, Laura	Brown, Kayla	Crall, Sara
Drusbacky ,Jason	Dudley, Chelsea	Duncan, Chad
Duvnjak, Dario	Elber, Rebecca	Flew, Lauren
Grummitt, Beth	Hall, Charles	Hrenko, Traci
Kachele, Kelly	Kelly, Laura	Kronander, Emily
Larsen, Shannon	Legar, Kirk	Maxwell, Holly
McHale, Mary	McKay, Shae	Meer, Kelli
Mesrin, Kyle	Muse, Brittany	O'Donnell, Molly
Pothast, Lisha	Ruggles, Amber	Sandish, Emily
Schaber, Kristin	Stawicki, Suzanne	Thompson, Megan
Tomasch, Jennifer	Weiner, Tova	Weithman, Kaleigh
Widman, Allison	Yoder, Kelsey	Young, Brittany

**Occupational Therapy Assistant – Examination**

Ahmad, Lina	Augustine, Kristin	Beard, Cieraka
Biedenbach, Jaclyn	Bigham, Victor	Blankenbeker, Seth
Blount, Kayla	Bobrowski, Sheri	Bock, Chelsea
Brown, Shannon	Brunetti, Lindsey	Buckalew, Angela
Clark-Little, Stacey	Conley, Amber	Cunningham, Jennifer
Dalessandro, Lindsay	Darby, Carol	DeTample, Jeremy
Dixon, Michelle	Dreslinski, Linda	Dunford, Megan
Flowers, Jennifer	Foltz, Jillian	Fotheringham, Leigh
Franko, Julie	Halcomb, Holly	Hancock, Charisse
Hiser, Angelique	Hoffman, Heather	Hopkins, Holly
Hummell, Jason	Janosik, Lauren	Kagarlitskiy, Shmuel
Kahl, Heather	Kilbane, Meghan	Kumrow, Alexa
Leavitt, Samantha	Lewis, Gina	Little, Amanda
Lopez, Keith	Luzier, Jennifer	Mazarek, Justina
Miller, Susan	Oplinger, Heather	Parsons, Christina
Purvis, Katrina	Rebol, Kaitlin	Robinson, Crystal
Robinson, Lauren	Sargent, Courtney	Simmons, Jennifer
Smith, Terrence	Soderberg, Heather	Stavroff, Nancy
Taylor, Michelle	Taylor, William	Turner, Amber
Valero, Amanda	Vizachero, Brandi	Ward, Deborah
Watkins, Lauren	Wendling, Megan	Wright, Kayli

Zalar, Kenneth

Occupational Therapist – Endorsement

Cain Nimitz, Jamie	Elmore, Prachi	Freve, Erica
Garcia, Kelly	Griffin, Ashley	Gulley, Emily
Humphrey, Aaron	Kukurza, Julie	Layner, Kayla
Nelson, Melany	Schiebellhuth, Jennifer	Schober, Sarah
Sheldon, Leighann	Smetts, Danielle	Smith, Eddwina
Thelen, Tresa	Vietmeier, Lauren	

Occupational Therapy Assistant – Endorsement

Barnes, Jennifer	Cronin, Diana	Huffman, Nicole
Maun, Brittany	Moore, Tawnya	Valenti, Katrina

Occupational Therapist – Reinstatement

Grieshaber, Stacy	Jamiol, Elizabeth	Martin, Dana
Schmitt, Mary Louise		

Occupational Therapy Assistant – Reinstatement

Hunt, Marsha	Williams, Rachel
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Occupational Therapist – Restoration

Ford, Ruth	Green, Diane	Townsend, Tara
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Limited License Agreements

Rebecca Finni reported that the Section received one limited license application and closed one limited license application since the March 5, 2015, meeting. There are currently thirteen limited license applications/agreements being monitored.

Rebecca Finni reported that Kimberly Morstadt complied with all terms and conditions and was released from her limited license agreement.

On behalf of Jean Halpin, Rebecca Finni recommended that, pursuant to rule 4755-3-01 (F) of the Administrative Code, the Section offer a limited license agreement to occupational therapy assistant endorsement applicant #5383669. **Action:** Beth Ann Ball moved that Section grant a limited occupational therapy assistant license agreement to occupational therapy assistant endorsement applicant #5383669. Kimberly Lawler seconded the motion. The motion carried. The Section granted a limited license agreement to Mary Catherine Colliton.

Kimberly Lawler recommended that, the Section accept the limited license agreement for occupational therapist reinstatement case OT-LD-FY15-002. **Action:** Rebecca Finni moved that Section accept the limited occupational therapy assistant license agreement for occupational therapist reinstatement case OT-LD-FY15-002. Beth Ann Ball seconded the motion. Kimberly Lawler abstained from voting. The motion carried. The Section granted a limited license agreement to John A. Gears.

Continuing Education Report

**Action:** Mary Beth Lavey moved that the Section approve 56 applications for contact hour approval. Kimberly Lawler seconded the motion. The motion carried.

Assistant Attorney General’s Report

Melissa Wilburn, AAG, gave a brief report regarding the Attorney General’s Office memorandum, which provided guidance to boards and commissions based on the outcome of the Supreme Court’s decision in FTC vs. North Carolina Dental Board.

### Case Review Liaison Report

Kimberly Lawler reported that the Enforcement Division opened five cases and closed twelve cases since the March 5, 2015, meeting. There are currently fourteen cases open. There are five consent agreements and one adjudication order being monitored.

Kimberly Lawler reported that Deborah Kendig, Kathleen Fox, Melinda Morrison, Jack Griner, Heidi James, and Craig Sabo complied with all terms and conditions and were released from his/her consent agreements.

Kimberly Lawler informed the Section that one of the releases was granted a waiver of the fines due to completing additional continuing education and financial hardship.

### Correspondence

1. **Julie Carpenter, OTR/L:** Ms. Carpenter asked the Section if an occupational therapist can perform dry needling and billing. **Reply:** In accordance with section 4755.04 (A)(3) of the Ohio Revised Code, it is the position of the Occupational Therapy Section that occupational therapy practitioners may use physical agent modalities, such as dry needling in the provision of occupational therapy services provided that the occupational therapy practitioner demonstrates and documents competency in the modality, in accordance with rule 4755-7-08 of the Administrative Code, and is practicing within the occupational therapy scope of practice. If the modality will be administered by an occupational therapy assistant both the supervising occupational therapist and occupational therapy assistant must document and demonstrate competency in the techniques or modality. It is not within the jurisdiction of the Occupational Therapy Section to render billing and reimbursement advice. The Section recommends that you refer to payer policies for any specific billing and reimbursement requirements in your setting. Hospital or facility policies, accrediting bodies, and/or reimbursement agencies may have requirements and guidelines for dry needling, including requiring a physician's referral and/or prescription, which need to be met for accreditation and/or reimbursement of occupational therapy services. You might also contact the Ohio Occupational Therapy Association, or the Reimbursement Department of the American Occupational Therapy Association.
2. **Laurie Murphy, OTR/L:** Ms. Murphy asked the Section questions correspondence regarding documentation and billing for occupational therapy services. **Reply:** The Occupational Therapy Section recognizes the challenges for billing and reimbursement indicated by your situation. However, it is not within the jurisdiction of the Occupational Therapy Section to render billing and reimbursement advice. The Section recommends that you refer to payer policies for any specific billing and reimbursement requirements in your setting. You might also contact the Ohio Occupational Therapy Association, or the Reimbursement Department of the American Occupational Therapy Association. As in any practice setting, appropriate documentation continues to be a requirement. As you described it, the documentation issues appear to be regarding appearance and timeliness with documentation between agencies. The Occupational Therapy Section does not have policy for records format. The Section suggests that you contact your District Information Department and/or legal counsel regarding an appropriate record policy. And, although the Section does not have a policy for records retention, it is the position of the Occupational Therapy Section that the student records, such as IEPs and MFEs, ultimately belong to the school district. If your district administrators have sanctioned only certain formats and procedures, it would be best to communicate your concerns to the appropriate district department. The Section recommends that you contact the Ohio Occupational Therapy Association's pediatrics member support group coordinator concerning questions regarding school-based issues at [www.oota.org](http://www.oota.org). Please refer to the American Occupational Therapy Association's *Guidelines for Documentation of Occupational Therapy* (AOTA, 2008).
3. **Kristy Yurichak, OTR/L:** Ms. Yurichak asked the Section if an occupational therapist can administer and score the Beery-Buktenica Developmental Test of Visual Motor Integration for a school aged child. **Reply:** There is nothing in the Occupational Therapy Practice Act that prohibits an occupational therapist from serving a student beyond the school based practice. This would be considered private practice. As in any practice setting, appropriate documentation continues to be a requirement. Please refer to the American Occupational Therapy Association's *Guidelines for Documentation of Occupational Therapy* (AOTA, 2008). In all of your practice, including the home setting, the provisions of the code of ethical conduct, established in rule 4755-7-08 of the Administrative Code, shall be followed. You may also wish to discuss

your question with your malpractice provider to check with your liability insurance for coverage in this situation.

4. **Rachelle Butler, OTR/L:** Ms. Butler asked the Section if occupational therapist need a physician's order to provide home health services to clients in a nursing home or assisted living facility. **Reply:** Occupational therapists are not required to have a referral and/or prescription to evaluate or treat clients in the State of Ohio. However, hospital or facility policies, accrediting bodies, and/or reimbursement agencies may have other requirements and guidelines, including requiring a physician's referral and/or prescription, which need to be met for accreditation and/or reimbursement of occupational therapy services. The Section recommends that you refer to payer policies for any specific requirements in your setting. You may also wish to discuss your question with your legal counsel or your malpractice provider.
5. **Jessica Moore, OTA/L:** Ms. Moore asked the Section if occupational therapists can treat non-caseload students in small groups and provide interventions in a school based setting. **Reply:** If you are providing service to an entire classroom, a school-wide policy or procedure should be on file for access by parents. Parent permission should be obtained or notification should be sent to parents before including students who are not identified as needing occupational therapy in a group designed as treatment for students who are on caseload. If you are providing a consultative model for a group of students and not direct treatment to an individual, an individual plan of care is not needed. However, if **direct service** is being provided to an individual, whether it is as an identified student under special education, or as an individual student who is being served under RTI, the above rule applies. Direct service requires an evaluation, interpretation of the results and development of a plan of care. The Section recommends contacting Cathy Csanyi, the OT/PT Specialty Consultant with the Ohio Department of Education, Office of Exceptional Children at (419) 747-2806 or via email at [cathy.csanyi@ode.state.oh.us](mailto:cathy.csanyi@ode.state.oh.us) for additional information. The Ohio Occupational Therapy Association's pediatrics member support group may also be able to assist you with your questions regarding school-based practice. You can contact the Ohio Occupational Therapy Association at [www.oota.org](http://www.oota.org).
6. **Heidi Bramson:** Ms. Bramson asked the Section questions regarding the use of physical agent modalities in occupational therapy practice. **Reply:** In accordance with section 4755.04 (A)(3) of the Ohio Revised Code, 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 occupational therapy practitioner demonstrates and documents competency in the modality, in accordance with rule 4755-7-08 of the Administrative Code, and is practicing within the occupational therapy scope of practice. If the modality will be administered by an occupational therapy assistant both the supervising occupational therapist and occupational therapy assistant must document and demonstrate competency in the techniques or modality.
7. **Ruth Ford, OTR/L, OTD:** Dr. Ford asked the Section if occupational therapy assistants can make a splint and bill for it without an occupational therapist in the facility. **Reply:** The Section reviewed your request and Executive Director Rosa's April 24 response. The Section is in agreement with the April 24 response. In accordance with rule 4755-3-05 of the Administrative Code, since your escrowed license was restored prior to April 1, the expiration date remains June 30, 2015.
8. **Kathy Boyarko, PT:** Ms. Boyardo asked the Section if occupational therapy practitioners can remove oxygen tubing from a wall unit to a portable tank prior to transporting a patient. **Reply:** There is nothing in the Ohio Occupational Therapy Practice Acts that prohibits occupational therapy practitioners from administering oxygen, changing oxygen tanks, or making the change between a tank and a concentrator provided that the occupational therapy practitioners received training and demonstrate competence in this activity. Please refer to your facility guidelines regarding administering oxygen as they may be more restrictive than the Ohio Occupational Therapy Practice Act.
9. **Vladimira Krstin, OTR/L:** Ms. Krstin asked the Section questions regarding the frequency of re-evaluations for occupational therapy services. **Reply:** In response to your question, the Occupational Therapy Section does not have specific requirements for frequency of re-evaluation; however, your agency, accrediting bodies, and reimbursement agencies may have other requirements and guidelines that need to be met for reimbursement of occupational therapy services. It appears from your question that in your clinical judgement, you see the need for standardized assessment. Updating the occupational therapy treatment/intervention plan should be done in a timely manner and following your reasoning, may need to

rely on standardized assessment data to determine appropriate service. In accordance with rule 4755-7-08 (B)(15)(a) of the Administrative Code, a licensee shall adhere to the minimal standards of acceptable prevailing practice.

10. **Tracy Kirtley, OTA/L:** Ms. Kirtley asked the Section whether the duties of the hospital community outreach program conflicts with the regulations governing occupational therapy assistant practice. **Reply:** It is the position of the Occupational Therapy Section that screens, or identification of candidates for therapy, may be performed by an occupational therapy assistant. The Section interprets a screen to be only data gathering and non-evaluative in nature. In accordance with rule 4755-7-02 of the Administrative Code, the occupational therapist interprets the data and makes necessary recommendations. All screens must be cosigned by the occupational therapist, and collaboration with the occupational therapist must be documented. There is nothing in the Ohio Occupational Therapy Practice Act prohibiting occupational therapy assistants from administratively coordinating the provisions of services external to the occupational therapy plan of care. In providing services other than occupational therapy, the occupational therapy assistant must make it clear to the client or family that the occupational therapy assistant is acting only in this other capacity. That is, communication must be done in such a way that if the client or family is asked, he/she could clearly testify in a legal proceeding as to the role of the individual who was providing treatment. The facility must also not represent this role as being more skilled due to additional education/credentials than required for that job description. You may also wish to note that your professional liability policy (if you have one) would not cover you while acting in any capacity other than as a licensed occupational therapist occupational therapy assistant. The Section recommend that you check with the facility or corporation policies as they may be more restrictive than the Ohio Occupational Therapy Practice Act. Pursuant to rules 4755-7-04 and 4755-7-10 of the Administrative Code, the OTA, COTA, OTA/L and COTA/L credentials may only be utilized if the occupational therapy assistant is under the supervision of an occupational therapist. The academic degree designation (“AAS in Occupational Therapy Assistant” or “AAS-OTA”) may be utilized at any time for services provided outside of occupational therapy to represent the knowledge and skills acquired as part of that education.
11. **Kristen Alberini, OTA/L:** Ms. Alberini asked the Section questions regarding who is responsible for documenting new information about a client that was not listed on the initial occupational therapy evaluation. **Reply:** The Occupational Therapy Section recognizes the challenges indicated by your situation. Time limitations should not compromise your standards of care. However, the individualized occupational therapy treatment/intervention plan should include client-specific goals, intervention approaches, types of interventions to be used, and outcome measures. The occupational therapy assistant following the treatment/intervention plan is working within the requirements of rule 4755-7-02 of the Administrative Code. The evaluating and/or supervising occupational therapist of record 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. As your question indicates, changes may take place with the client between the times that the supervision takes place. The occupational therapy assistant can gather objective information and report observations, with or without the client and/or occupational therapist present. **It is the responsibility of the occupational therapist to interpret the data gathered by the occupational therapy assistant and collaborate with the occupational therapy assistant to make recommendations.** Changes in client status such as weight bearing should be reflected in the treatment/intervention plan. Any collaboration between the occupational therapist and occupational therapy assistant must be reflected in client documentation. Evidence must be established, either in the client records or in a separate document (e.g.: collaboration log), that the supervision took place.

#### Joint Correspondence

- JB1. **Rob Garrett, PTA:** Mr. Garrett asked the Occupational and Physical Therapy Sections questions regarding occupational therapy assistant and physical therapists assistant documentation. **Reply:** It is the position of the Occupational Therapy Section that the occupational therapy assistant (OTA) can gather objective information and report observations, with or without the 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 for the plan of care. Any collaboration between the OT and OTA must be reflected in client documentation. It is the position of the Physical Therapy Section that physical therapist assistants may gather and summarize objective information; however, they may not interpret this data. It is the

responsibility of the physical therapist to interpret and make recommendations for the purpose of the plan of care. On another topic, the Physical Therapy Section is working to educate physical therapists and physical therapist assistants in the correct credentials to use in professional signatures. Since PT or PTA is the regulatory designation allowing practice, rule 4755-27-07 of the Administrative Code requires that only those letters should immediately follow the person's name. Academic degrees may then follow the regulatory credential. For example, a nametag or signature might read Pat Doe, PT, MS, OCS. "L" should not be used in front of "PT" or "PTA" since no one may use the "PT" or "PTA" credential in Ohio without a valid license.

- JB2.** **Angie Belden, PTA:** Ms. Russell asked the Occupational and Physical Therapy Sections questions regarding cosigning occupational therapy assistant and physical therapist assistant's notes using an electronic documentation system. **Reply:** In accordance with rule 4755-27-07 of the Administrative Code, a handwritten or electronic signature is acceptable by a physical therapist or physical therapist assistant. Should your computer system or program not permit counter-signature by the physical therapist for notes entered by a physical therapist assistant, then you need to make arrangements with your vendor for the computer system to be revised or improved to permit such counter-signature. Should you not electronically be capable of dual signatures, you may enter a separate note within the same documentation system, referencing the date of the note(s) being reviewed with documentation referencing the review, noting agreement, and/or changes needed in the treatment plan or you may produce a hard paper copy that is co-signed by the physical therapist. It is the position of the Occupational Therapy Section that for any electronic documentation, the supervising occupational therapist must co-sign and reference the dates of the entries into the client's medical record. As noted in the Physical Therapy Section's response above, the Occupational Therapy Section agrees that the occupational therapist may make a separate entry, referencing the date of the note(s) that are being reviewed with documentation referencing the review, noting agreement, and/or changes needed in the treatment plan. It would be provident to advocate for a revision to your documentation software to allow for co-signatures as they are required by the Occupational Therapy Practice Act.
- JB3.** **Sue Salamido:** Ms. Salamido asked the Occupational and Physical Therapy Sections whether physical therapists and/or occupational therapists are required to be on the school premises when the range of motion exercises are done by an unlicensed person. **Reply:** No. Just as a home program would be designed for parents to complete at home, when the therapist is not present, school personnel may perform a range of motion program when the therapist is not present, given that the therapist has determined that the unlicensed individual has demonstrated competency and the range of motion is appropriate for the unlicensed personnel to perform on the student/patient. There is nothing in the Occupational Therapy Practice Act that requires the occupational therapist to be present when tasks such as range of motion are performed after ensuring that the unlicensed personnel has been appropriately trained for the performance of the tasks.
- JB4.** **Keely Kent, PT, DPT:** Dr. Kent asked the Occupational and Physical Therapy Sections if occupational therapy assistants and/or physical therapist assistants can treat a Medicaid client in home health setting. **Reply:** Your questions relate to clarification/interpretation of payor policies and not to the Ohio Physical Therapy Practice Act. The Physical Therapy Section recommends that you contact Medicaid or the Ohio Chapter or Reimbursement Department of the American Physical Therapy Association. There is nothing in the Ohio Occupational Therapy Practice Act that prohibits an occupational therapy assistant from treating a Medicaid patient (Home Health Client). As long as the occupational therapy assistant is receiving supervision from an occupational therapist and following the provisions of the Ohio Occupational Therapy Practice Act outlining the roles and responsibilities of the occupational therapy assistant, occupational therapy assistants may provide services to Medicaid patients. Regarding the provision of services under various insurers, it is not within the jurisdiction of the Occupational Therapy Section to render billing and reimbursement advice. The Section recommends that you refer to payer policies for any specific billing and reimbursement requirements in your setting. You might also contact the Ohio Occupational Therapy Association, or the Reimbursement Department of the American Occupational Therapy Association.
- JB5.** **Tom Lopienski, PT:** Mr. Lopienski asked the Occupational and Physical Therapy Sections if occupational and physical therapist should have access to patient laboratory values. **Reply:** There is nothing in the Ohio Occupational Therapy Practice act that specifically addresses needing knowledge of lab values, however, Rule 4755-7-08 (C)(8) of the Ohio Administrative Code states occupational therapy practitioners **should**

consult with other service providers whenever such a consultation would be beneficial to the care of the client. For further specific guidelines regarding this concern, contact the Ohio Occupational Therapy Association (<http://www.oota.org>). You might also contact the American Occupational Therapy Association (<http://www.aota.org>). There is nothing in the Ohio Physical Therapy Practice Act that relates to therapists accessing lab values. The Physical Therapy Section thanks you for contacting us for education of the profession of physical therapy, however the Section recommends you contact the Ohio Chapter of the American Physical Therapy Association for educational information/courses or resources. On another topic, the Physical Therapy Section is working to educate physical therapists and physical therapist assistants in the correct credentials to use in professional signatures. Since PT or PTA is the regulatory designation allowing practice, rule 4755-27-07 of the Administrative Code requires that only those letters should immediately follow the person's name. Academic degrees may then follow the regulatory credential. For example, a nametag or signature might read Pat Doe, PT, MS, OCS.

### **Old Business**

#### **Retreat Planning**

The Section will hold the strategic planning retreat on June 3, 2015. The retreat will be held at the OhioHealth Westerville Medical Campus, 300 Polaris Parkway, 2<sup>nd</sup> Floor Conference Room, Westerville, Ohio. The retreat will begin at 10:00am. The retreat topics are: review strategic plan, review disciplinary guidelines, consultative model, and review standard responses.

### **New Business**

#### **Public Rules Hearing**

The Section held a public rules hearing from 10:19 am to 10:26 am.

**Action:** Rebecca Finni moved that the Executive Director make revisions to proposed rule 4755-7-04 based on the comments received from the Ohio Occupational Therapy Association. Kimberly Lawler seconded the motion. The motion carried.

The Section will draft a standard response to address the new changes to the supervision rules.

### **Open Forum**

There were no items discussed for open forum.

### **Ohio Occupational Therapy Association (OOTA) Report**

There was no formal report.

### **Items for Next Meeting**

- Executive Director's Evaluation

**Next Meeting Date**

The next regular meeting date of the Occupational Therapy Section is scheduled for Thursday, July 23, 2015.

**Adjournment**

There being no further business and no objections, Rebecca Finni adjourned the meeting at 11:17 a.m.

Respectfully submitted,

*Diane Moore*

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Rebecca Finni, OTR/L, Chairperson  
Ohio Occupational Therapy, Physical Therapy,  
and Athletic Trainers Board, OT Section

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Beth Ann Ball, OTR/L, Secretary  
Ohio Occupational Therapy, Physical Therapy,  
and Athletic Trainers Board, OT Section

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Jeffrey M. Rosa, Executive Director  
Ohio Occupational Therapy, Physical Therapy,  
and Athletic Trainers Board

**BB:jmr:dm**