

Chapter Med 19

OCCUPATIONAL THERAPY

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Med 19.01 Authority and purpose. The rules in this chapter are adopted by the medical examining board under the authority of ss. 15.08 (5), 227.11 (2), Stats., and s. 448.05, Stats., to govern the certification and regulation of occupational therapists and occupational therapy assistants.

History: Cr. Register, October, 1989, No. 406, eff. 11-1-89.

Med 19.02 Definitions. As used in this chapter,

(1) "Assessment" means the process of determining the need for, nature of, and estimated time of treatment at different intervals during the treatment, determining needed coordination with or referrals to other disciplines, and documenting these activities.

(2) "Consultation" means a work-centered, problem-solving helping relationship in which knowledge, experience, abilities and skills are shared with other professionals in the process of helping to rehabilitate through the use of occupational therapy.

(3) "Entry-level" means the person has no demonstrated experience in a specific position, such as a new graduate, a person new to the position, or a person in a new setting with no previous experience in that area of practice.

(4) "Evaluation" means documented reporting of the results of the use of structured or standardized evaluative tools and professional observations to determine an individual's functional abilities and deficits.

(5) "Experienced" means demonstrated competence in the performance of duties in a given area of practice.

(6) "Habilitation" means the education, training or support services provided to individuals to assist them in acquiring skills not yet gained or learned. This enables them to learn, practice and refine skills needed for independent living, productive employment and community participation.

(7) "Level I fieldwork" is an integral part of didactic courses and includes varied learning experiences. Students are supervised in observation and assistance with clients during short term contacts.

(8) "Level II fieldwork" is extended fieldwork which emphasizes the application and integration of academically acquired knowledge and

skills in the supervised delivery of occupational therapy services to clients.

(9) "Occupational therapist training program" means an educational program and supervised internship in occupational therapy recognized by the medical examining board and accredited by the committee on allied health education and accreditation of the American medical association and the American occupational therapy association, or a program approved by the world federation of occupational therapy.

(10) "Occupational therapy assistant training program" means an educational program and supervised internship in occupational therapy or other requirements recognized by the medical examining board and approved by the American occupational therapy association or a program approved by the world federation of occupational therapy.

(11) "Prevention" means the fostering of normal development, sustaining and protecting existing functions and abilities, preventing disability or supporting levels of restoration or change to enable individuals to maintain maximum independence.

(12) "Referral" means the practice of requesting occupational therapy services and delegating the responsibility for evaluation and treatment to an occupational therapist.

(13) "Rehabilitation" means the process of treatment and education to restore a person's ability to live and work as normally as possible after a disabling injury or illness.

(14) "Screening" means the review of a person's condition to determine the need for evaluation and treatment.

(15) "Supervision" of an occupational therapy assistant means a process in which an occupational therapy assistant performs duties delegated by an occupational therapist in a joint effort to promote, establish, maintain, and evaluate the occupational therapy assistant's level of performance and service.

History: Cr. Register, October, 1989, No. 406, eff. 11-1-89.

Med 19.03 Applications and credentials. (1) Every applicant for initial certification as an occupational therapist or occupational therapy assistant shall submit:

(a) A completed application form;

(b) Evidence that the applicant is certified as an occupational therapist or occupational therapy assistant by the American occupational therapy certification board; or, that the applicant has completed an occupational therapist training program or an occupational therapy assistant training program as defined in s. Med 19.02;

(c) Written verification from the American occupational therapy certification board that the applicant has passed the examination required by this chapter; and,

(d) A recent passport type photograph of the applicant.

(2) Requests for verification from the American occupational certification board shall be made by the applicant.

(3) An application for certification is not complete until the board has received both a completed application form and verification of passing grades from the American occupational therapy certification board.

History: Cr. Register, October, 1989, No. 406, eff. 11-1-89.

Med 19.035 Biennial renewal outside of established renewal period. Certified occupational therapists and certified occupational therapy assistants may renew their certificates outside of the biennial renewal period provided in s. 448.07, Stats., by making application for renewal, paying the renewal fees specified in s. 440.05, Stats., and by furnishing evidence satisfactory to the board that the applicant has satisfactorily completed the continuing education requirements for the two year period prior to the date of such application.

History: Cr. Register, October, 1989, No. 406, eff. 11-1-89.

Med 19.04 Examinations, panel review of applications. (1) Applicants for certification as an occupational therapist or occupational therapy assistant shall pass the certification examination for occupational therapist or the certification examination for occupational therapy assistant of the American occupational therapy certification board.

(2) The medical examining board designates the occupational therapy examining council as its agent for conducting examinations.

(3) An applicant shall complete an oral examination if the applicant:

(a) Has received inpatient or outpatient care for drug or alcohol abuse;

(b) Has received inpatient or outpatient care for mental illness;

(c) Has been disciplined or had licensure denied by a licensing or regulatory authority in Wisconsin or another jurisdiction;

(d) Has been convicted of a crime the circumstances of which substantially relate to the practice of occupational therapy;

(e) Has not practiced occupational therapy for a period of three years prior to application, unless the applicant has been graduated from a school of occupational therapy within that period. Practice for the purposes of this paragraph includes direct patient treatment and education, occupational therapy instruction in an occupational therapy program recognized by the board, occupational therapy research, and service in administrative positions for health care providers or governmental bodies with responsibility relating to occupational therapy;

(f) Has been found negligent in the practice of occupational therapy or has been a party in a lawsuit in which it was alleged that the applicant has been negligent in the practice of occupational therapy; or,

(g) Was a resident of Wisconsin and eligible for certification as an occupational therapist or occupational therapy assistant on August 1, 1989, but did not apply for certification until after August 1, 1991.

(4) An application filed under s. Med 19.03 shall be reviewed by the occupational therapy examining council to determine whether an applicant is required to complete an oral examination under sub. (3). If the application review panel is not able to reach unanimous agreement on whether an applicant is eligible for certification without completing an

oral examination, the application shall be referred to the Medical Examining Board for a final determination.

(5) All examinations shall be conducted in the English language.

(6) Where both written and oral examinations are required they shall be scored separately and the applicant shall achieve a passing grade on both examinations to qualify for a license.

History: Cr. Register, October, 1989, No. 406, eff. 11-1-89.

Med 19.05 Exemption from written examination for certain occupational therapy assistant applicants. An applicant for certification as an occupational therapy assistant who graduated from an occupational therapy assistant training program prior to 1977 is exempt from the requirements for a written examination in this chapter.

History: Cr. Register, October, 1989, No. 406, eff. 11-1-89.

Med 19.06 Temporary certificate. (1) An applicant for certification may apply to the board for a temporary certificate to practice as an occupational therapist or occupational therapy assistant if the applicant:

(a) Remits the fee specified in s. 440.05 (6), Stats.; and,

(b) Is a graduate of an approved school and is scheduled to take the national certification examination for occupational therapist or occupational therapist assistant or has taken the national certification examination and is awaiting results.

(2) Practice during the period of the temporary certificate shall be in consultation, at least monthly, with an occupational therapist who shall at least once each month endorse the activities of the person holding the temporary certificate.

(3) Except as in sub. (4) a temporary certificate expires 60 days after the completion of the next national certification examination for permanent certification or on the date the board grants or denies an applicant permanent certification, whichever is later.

(4) A temporary certificate expires on the first day of the next regularly scheduled national certification examination for permanent certification if the applicant is required to take, but failed to apply for, the examination.

(5) A temporary certificate may not be renewed.

History: Cr. Register, October, 1989, No. 406, eff. 11-1-89.

Med 19.07 Continuing education. (1) Each holder of a certificate as an occupational therapist shall, at the time of applying for renewal of a certificate of registration under s. 448.07, Stats., certify that he or she has, in the 2 years preceding the renewal due date, completed at least 18 points of acceptable continuing education.

(2) Each holder of a certificate as an occupational therapy assistant shall, at the time of applying for renewal of a certificate of registration under s. 448.07, Stats., certify that he or she has, in the 2 years preceding the renewal due date, completed at least 12 points of acceptable continuing education.

(3) Points shall be accumulated through professional activities related to occupational therapy in 2 of the following categories:

(a) Attendance at university, college or vocational technical adult education courses: 4 points per credit hour.

(b) Attendance at seminars, workshops, or institutes: 1 point per direct hour of contact.

(c) Attendance at educational telephone network courses: 1 point per direct hour of contact.

(d) Attendance at videotaped presentations of educational courses, seminars, workshops, or institutes: 1 point per direct hour of contact.

(e) Attendance at educational sessions at state and national conferences relating to occupational therapy: 1 point per hour of attendance.

(f) Publication or presentations:

1. Authorship of a published book: 16 points.

2. Authorship of a published book chapter or professional journal article: 4 points.

3. Professional presentation: 2 points (per hour of presentation with no additional points for subsequent presentation of same content).

4. Development of alternative media (computer software, video or audio tapes): 4 points.

(g) Research as the principal researcher provided an abstract of the research is retained to prove participation: 12 points.

(h) Ongoing professional development:

1. Student supervision - Level I fieldwork: 1 point for each student supervised.

2. Student supervision - Level II fieldwork: 4 points for each student supervised.

3. In service training (including grand rounds): 1 point per hour attended.

4. Quality assurance studies/peer review: 1 point per study or review.

5. Review of papers and proposals for presentation: 1 point.

(4) Evidence of compliance shall be retained by each certificate holder through the biennium for which credit is required for renewal of registration.

(5) The board may require any certificate holder to submit his or her evidence of compliance for audit by the board at any time during the biennium for which credit is required for renewal of registration.

History: Cr. Register, October, 1989, No. 406, eff. 11-1-89.

Med 19.08 Referral. (1) Evaluation and rehabilitative treatment shall be based on referral from a licensed physician, dentist, psychologist or podiatrist.

(2) An occupational therapist or occupational therapy assistant may accept a referral for the purpose of providing services which include but are not limited to: consultation, habilitation, screening, prevention, and patient education services.

(3) Referrals may be for an individual case or may be programmatic. If programmatic, the patient has met the criteria for admission to the program, and protocol for the treatment program has been established.

(4) Referrals shall be in writing. However, referrals may be accepted orally if they are followed by a written request and signature of the person making the referral within 14 days from the date on which the patient consults with the occupational therapist following referral.

History: Cr. Register, October, 1989, No. 406, eff. 11-1-89.

Med 19.09 Practice by occupational therapy assistants. An occupational therapy assistant may not practice without the supervision of an occupational therapist unless the occupational therapy assistant is providing screening, habilitation, prevention, patient consultation or patient education outside of rehabilitation.

History: Cr. Register, October, 1989, No. 406, eff. 11-1-89.

Med 19.10 Supervision of occupational therapy assistants by occupational therapists. (1) Supervision of an occupational therapy assistant by an occupational therapist shall be either close or general. The supervising occupational therapist shall have responsibility for the outcome of the performed service.

(a) When close supervision is required, the supervising occupational therapist shall have daily, direct contact on the premises with the occupational therapy assistant. The occupational therapist shall provide initial direction in developing the plan of treatment and shall periodically inspect the actual implementation of the plan. The occupational therapist shall counter sign all patient related documents prepared by the occupational therapy assistant.

(b) When general supervision is allowed, the supervising occupational therapist shall have direct contact on the premises with the occupational therapy assistant at least once each month. In the interim between direct contacts, the occupational therapist shall maintain contact with the occupational therapy assistant by telephone, written reports and group conferences. The occupational therapist shall record in writing a specific description of the supervisory activities undertaken for each occupational therapy assistant.

(c) Close supervision is required for all rehabilitative services provided by an entry level occupational therapy assistant. All other occupational therapy services provided by an occupational therapy assistant may be performed under general supervision, if the supervising occupational therapist determines, under the facts of the individual situation, that general supervision is appropriate using established professional guidelines.

(2) In extenuating circumstances, when the supervising occupational therapist is absent from the job, the occupational therapy assistant may
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carry out established programs for 30 calendar days. The occupational therapist must provide up-to-date documentation prior to absence.

History: Cr. Register, October, 1989, No. 406, eff. 11-1-89.