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Sequence Number: 08-21-12
 Rule ID(s): 5304
 File Date: 8/28/12
 Effective Date: 11/26/12

Rulemaking Hearing Rule(s) Filing Form

Rulemaking Hearing Rules are rules filed after and as a result of a rulemaking hearing. T.C.A. § 4-5-205

Agency/Board/Commission:	Board of Occupational Therapy
Division:	
Contact Person:	Jennifer L. Putnam
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Revision Type (check all that apply):

- Amendment
 New
 Repeal

Rule(s) Revised (ALL chapters and rules contained in filing must be listed here. If needed, copy and paste additional tables to accommodate multiple chapters. Please enter only ONE Rule Number/Rule Title per row)

Chapter Number	Chapter Title
1150-02	General Rules Governing The Practice Of Occupational Therapy
Rule Number	Rule Title
1150-02-.04	Qualifications For Licensure
1150-02-.05	Procedures For Licensure
1150-02-.10	Supervision
1150-02-.12	Continued Competence

(Place substance of rules and other info here. Statutory authority must be given for each rule change. For information on formatting rules go to <http://state.tn.us/sos/rules/1360/1360.htm>)

Rule 1150-02-.04 Qualifications for Licensure is amended by adding a new paragraph (3) and renumbering the remaining paragraphs accordingly so that as amended the new paragraph shall read:

- (3) If the date of application for licensure as either an occupational therapist or occupational therapy assistant is more than three (3) years following successful completion of the National Board for Certification in Occupational Therapy Examination and the applicant is not currently practicing in another state and applying for a Tennessee license by reciprocity, the applicant may be subject to additional requirements for licensure to be determined by the Board including, but not limited to the following:
 - (a) Engage in a formalized process of self-assessment through the use of the AOTA professional development tool.
 - (b) Submit documentation that applicant has attended and successfully completed a minimum of ten (10) hours of formal learning related to the occupational therapy service delivery for each year between the original qualification for licensure and actual application for licensure, at least twenty (20) of which must have occurred within the twenty-four (24) months prior to application and must relate to the area of practice in which the applicant intends to practice; or
 - (c) Must have a minimum of two (2) hours of continuing education in the area of ethics; one (1) hour of continuing education in Tennessee jurisprudence and a minimum of two (2) hours of continuing education in the area of documentation. These continuing education hours should be obtained within twenty-four (24) months prior to the application.
 - (d) Upon licensure approval by the Board as either an occupational therapist or occupational therapy assistant, a licensee is required to be supervised during their first twelve (12) months of practice by a licensed occupational therapist in good standing. If the relationship between supervisor and licensee should cease before the expiration of the twelve (12) months, licensee must obtain a new supervisor and notify the Board of the name of the new supervisor within thirty (30) days of obtaining the new supervisor.

Rule 1150-02-.04 Qualifications for Licensure is amended by deleting newly renumbered part (4) (a) 2 in its entirety and substituting instead the following language so that as amended the new part (4) (a) 2 shall read:

2. Submit documentation of current certification from the Hand Therapy Certification Commission; or

Rule 1150-02-.04 Qualifications for Licensure is amended by adding a new part (4) (a) 4 so that as amended the new part (4) (a) 4 shall read:

4. If applicant is seeking certification in the use of physical agent modalities, as provided in paragraph (4) of this rule, the applicant shall present to the Board's administrative office proof of successful completion of didactic and clinical training that has been completed within the two (2) years preceding the submission of the application for certification.

Rule 1150-02-.04 Qualifications for Licensure is amended by deleting part (4) (b) 2 in its entirety and substituting instead the following language so that as amended the new part (4) (b) 2 shall read:

2. Submit documentation of current certification from the Hand Therapy Certification Commission; or

Rule 1150-02-.04 Qualifications for Licensure is amended by adding a new part (4) (b) 4 so that as amended the new part (4) (b) 4 shall read:

4. If an applicant is seeking certification in the use of physical agent modalities, as provided in paragraph (4) of this rule, the applicant shall present to the Board's administrative office proof of successful completion of didactic and clinical training that has been completed within two (2) years preceding the submission of the application for certification.

Authority: T.C.A. §§ 4-5-202, 4-5-204, 63-13-102, 63-13-103, 63-13-202, 63-13-203, 63-13-206, and 63-13-213.

Rule 1150-02-.05 Procedures for Licensure is amended by deleting subparagraph (1)(i) in its entirety and substituting instead the following language so that as amended the new subparagraph (1)(i) shall read:

- (i) Physical agent modality certification. If an applicant is seeking certification in the use of physical agent modalities, as provided in paragraph (4) of Rule 1150-02-.04, the applicant shall present to the Board's administrative office proof of successful completion of didactic and clinical work that has been completed within the two (2) years prior to submission of the application for certification.

Rule 1150-02-.05 Procedures for Licensure is amended by deleting subparagraph (2)(i) in its entirety and substituting instead the following language so that as amended the new subparagraph (2)(i) shall read:

- (i) Physical agent modality certification. If an applicant is seeking certification in the use of physical agent modalities, as provided in paragraph (4) of Rule 1150-02-.04, the applicant shall present to the Board's administrative office proof of successful completion of didactic and clinical work that has been completed within the two (2) years prior to submission of the application for certification.

Authority: T.C.A. §§ 4-5-202, 4-5-204, 63-13-102, 63-13-103, 63-13-202, 63-13-203, 63-13-204, 63-13-206, 63-13-209, and 63-13-213.

Rule 1150-02-.10 Supervision is amended by adding a new paragraph (4) and renumbering the remaining paragraphs accordingly so that as amended the new paragraph (4) shall read:

- (4) Supervision of occupational therapy students and occupational therapy assistant students.
 - (a) Supervision of occupational therapy students and occupational therapy assistant students shall be consistent with the standards of the Accreditation Council for Occupational Therapy Education (ACOTE) for such supervision.

Authority: T.C.A. §§ 4-5-202, 4-5-204, 63-13-102, 63-13-103, 63-13-202, 63-13-203, 63-13-205, 63-13-206, 63-13-207, and 63-13-216.

Rule 1150-02-.12 Continued Competence is amended by deleting subparagraph (11)(s) in its entirety and substituting instead the following language so that as amended the new subparagraph (11)(s) shall read:

<p>1. Level I fieldwork direct supervision OT or OTA (Not one's primary employment role.)</p>	<p>1 Credit per Student Supervised</p>	<p>12 Credits (A licensee may not receive more than 12 Credits for fieldwork supervision total.)</p>	<p>Documentation required, name of student(s), letter of verification from school, dates of fieldwork. Co-supervision is acceptable; maintain dates & times when acting as primary student supervisor. Apply appropriate credits based on time spent supervising.</p>
<p>2. Level II fieldwork direct supervision OT or OTA (Not one's primary employment role.)</p>	<p>1 Credit per each week of supervision, per student supervised</p>	<p>12 Credits (A licensee may not receive more than 12 Credits for fieldwork supervision total.)</p>	<p>Documentation required, name of student(s), letter of verification from school, dated of fieldwork. Co-supervision is acceptable; maintain dates & times when acting as primary student supervisor. Apply appropriate credits based on time spent supervising.</p>

Authority: T.C.A. §§ 4-5-202, 4-5-204, 63-13-204, 63-13-209, 63-13-210, and 63-13-215.

* If a roll-call vote was necessary, the vote by the Agency on these rulemaking hearing rules was as follows:

Board Member	Aye	No	Abstain	Absent	Signature (if required)
Sandra M. Fletchall	X				
Lorry Liotta-Kleinfeld				X	
Quateka Renee Darrington				X	
Jewell Ann Davis	X				
Manoj M. Tendolkar	X				

I certify that this is an accurate and complete copy of rulemaking hearing rules, lawfully promulgated and adopted by the Board of Occupational Therapy on 03/08/2012 and is in compliance with the provisions of T.C.A. § 4-5-222.

I further certify the following:

Notice of Rulemaking Hearing filed with the Department of State on: 12/20/11

Rulemaking Hearing(s) Conducted on: (add more dates). 03/08/12

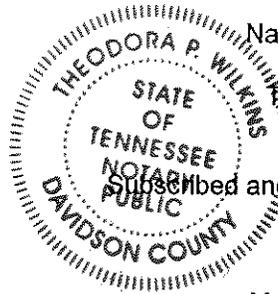
Date: 8/13/12

Signature: Jennifer L. Putnam

Name of Officer: Jennifer L. Putnam

Assistant General Counsel

Title of Officer: Department of Health



Subscribed and sworn to before me on: 8/13/12

Notary Public Signature: Theodora P. Wilkins

My commission expires on: 11/3/15

All rulemaking hearing rules provided for herein have been examined by the Attorney General and Reporter of the State of Tennessee and are approved as to legality pursuant to the provisions of the Administrative Procedures Act, Tennessee Code Annotated, Title 4, Chapter 5.

RE Cooper Jr

Robert E. Cooper, Jr.

Attorney General and Reporter

8-23-12

Date

Department of State Use Only

Filed with the Department of State on: 8/28/12

Effective on: 11/26/12

Tre Hargett by [Signature]

Tre Hargett
Secretary of State

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Public Hearing Comments

One copy of a document containing responses to comments made at the public hearing must accompany the filing pursuant to T.C.A. § 4-5-222. Agencies shall include only their responses to public hearing comments, which can be summarized. No letters of inquiry from parties questioning the rule will be accepted. When no comments are received at the public hearing, the agency need only draft a memorandum stating such and include it with the Rulemaking Hearing Rule filing. Minutes of the meeting will not be accepted. Transcripts are not acceptable.

PUBLIC HEARING COMMENTS

TENNESSEE BOARD OF OCCUPATIONAL THERAPY

March 8, 2012

The rulemaking hearing for the Tennessee Board of Occupational Therapy was held on March 8, 2012 in the Department of Health Conference center's Poplar Room on the First Floor of the Heritage Place Building in MetroCenter, Nashville, Tennessee.

Written comments were received from Marcy Buckner representing The American Occupational Therapy Association, as well as verbal comments from John Williams, representing the Tennessee Occupational Therapy Association.

1. John Williams had requests for revisions as listed below:
 - a. A sentence should be added to Rule 1150-02-.04(3) to clarify that this new rule does not apply to an applicant for a Tennessee license by reciprocity that is currently practicing in another state. The Board noted this to be a valid point as current law requires those seeking reciprocity to show all requirements for licensure have been met. The Board approved this suggestion.
 - b. Rule 1150-02-.04(3)(c). One (1) hour of continuing education in the area of ethics is sufficient rather than 2 hours. The Board stated that individuals who have not practiced for three years or greater, need to be aware of the variety of ethics issues that apply in their profession. The Board did not approve this suggestion.
 - c. Rule 1150-02-.04(3)(c). All the continuing education hours should be obtained within the twenty-four (24) months prior to the application and this should be stated in the rule. The Board approved this suggestion.
 - d. Rule 1150-02-.04(3)(d). The last clause of the second sentence should be revised to read: "licensee must obtain a new supervisor and notify the board of the name of the new supervisor within 30 days of obtaining the new supervisor." The Board approved this revision.
 - e. Rule 1150-02-.04 and Rule 1150-02-.05. TOTA agrees with the new language requiring that the clinical training for PAMS certification should be completed within the 2-year period preceding submission of the application. TOTA recommends that the new language should read "didactic and clinical training" (rather than just "clinical training") to make it clear that both parts of the Board-approved training must occur within that 2-year period. The Board approved this suggestion.
 - f. Rule 1150-02-.10. TOTA believes there is no statutory authority for this proposed rule. If the Board disagrees and decides to adopt this rule, it should simply state: "Supervision of occupational therapy students shall be consistent with the standards of the Accreditation Council for Occupational Therapy Education (ACOTE) for such supervision. The Board agreed to delete the proposed change and approved the revision of this rule to read as TOTA suggested.

2. Marcy Buckner submitted written comments and had requests for revisions as listed below:
- a. AOTA request that the Board clarify Rule 1150-02-.04(3)(a) regarding the documentation requirements necessary to provide that documentation submitted to the Board pertains only to the hours of formal learning or continuing education, and not to the practitioner's self-assessment through the use of the AOTA professional development tool. This tool was created by AOTA with the intention of being utilized by practitioners as a way to reflect on their practice, and was not created as a form of documentation for regulatory boards. The Office of General Counsel responded that it was not the Board's intention to have the self-assessment tool submitted to the Board. The Board confirmed that the documentation was not to be submitted to the Board and that it was only intended to serve as one of the options an applicant may utilize for self assessment when preparing for re-entry into the profession. The Board did not approve this suggestion.
 - b. Rule 1150-02-.04(3)(d) states that upon licensure, the licensee that is reentering the profession is required to be supervised during their first twelve months of practice by an occupational therapist in good standing. AOTA is concerned that this is a burdensome requirement which enforces supervision for licensed professionals far longer than is necessary. In AOTA's Guidelines for Re-Entry into the Field of Occupational Therapy (2010), AOTA suggests that practitioners who have been out of practice more than 3 years complete a minimum of 30 hours of documented supervised practice in occupational therapy within the 12 months prior to anticipated reentry or within 30 days of employment as a practitioner delivering occupational therapy services. AOTA's suggested requirement is much more manageable for practitioners wishing to re-enter the profession, and does not place the burden on employers to provide supervision for 12 months to a licensee that has recently re-entered the profession. AOTA requests the Board revise the re-entry requirement to reflect the 30 hours of documented supervised practice as provided for in AOTA's Guidelines for Re-Entry into the Field of Occupational Therapy (2010). The Board noted that its rules are more stringent as its responsibility is assuring patient care and safety and they do not feel that 30 hours of supervision is sufficient. The Board is not indicating that the employer be placed in a burdensome requirement by supervising in person but wants to ensure there is some form of communication, client-review, in person contact or electronic contact with the person re-entering the field. The Board did not approve this suggestion.
 - c. AOTA is concerned Rule 1150-02-.10(4) would effectively regulate occupational therapy services provided by students and that the Board might not have the needed statutory authority to support the proposed rule. AOTA believes that § 63-13-208(3)-(4) limits the authority of the Board to regulate occupational therapy services provided by occupational therapy students and occupational therapy assistant students and urges to Board to reconsider moving forward with the proposed rule. Further, AOTA would like to express concern with the language in Rule 1150-02-.10(4)(b)(2) which would provide for the supervision of masters-degree level occupational therapy students in Level II fieldwork placements to be supervised by licensed occupational therapy assistants: The rule states that allowing supervision of masters-level occupational therapy students in Level II fieldwork placement by occupational therapy assistants is pursuant to the Accreditation Council for Occupational Therapy Education (ACOTE); however, according to the 2006 ACOTE Standards, B.10.17., masters-degree level occupational therapy students may only be supervised by a licensed or otherwise regulated occupational therapist. AOTA requests that the proposed rule be amended to provide that only an occupational therapist may supervise a masters-degree level occupational therapy student in Level II fieldwork placements. The Board agreed to delete the proposed change and approved to revise the rule to read "Supervision of occupational therapy students shall be consistent with the standards of the Accreditation Council for Occupational Therapy Education (ACOTE) for such supervision."

Regulatory Flexibility Addendum

Pursuant to T.C.A. §§ 4-5-401 through 4-5-404, prior to initiating the rule making process as described in T.C.A. § 4-5-202(a)(3) and T.C.A. § 4-5-202(a), all agencies shall conduct a review of whether a proposed rule or rule affects small businesses.

(If applicable, insert Regulatory Flexibility Addendum here)

Regulatory Flexibility Act Analysis of Impact on Small Businesses

- (1) The proposed rule amendments do not overlap, duplicate, or conflict with other federal, state, and local governmental rules.
- (2) The language of the proposed rule amendments is clear, concise, and lacks ambiguity.
- (3) The proposed rule amendments do not affect small businesses. As such, the rule amendments do not address compliance and/or reporting requirements for small businesses.
- (4) The proposed rule amendments do not affect small businesses. As such, the rule amendments do not establish friendly schedules or deadlines for compliance and/or reporting requirements for small businesses.
- (5) The proposed rule amendments do not affect small businesses. As such, the rule amendments do not consolidate or simplify compliance and/or reporting requirements for small businesses.
- (6) The proposed rule amendments do not affect small businesses. As such, the rule amendments do not establish performance standards for small businesses and do not establish design or operational standards.
- (7) The proposed rule amendments do not create unnecessary entry barriers or other effects that stifle entrepreneurial activity.

STATEMENT OF ECONOMIC IMPACT TO SMALL BUSINESSES

Name of Board, Committee or Council: Tennessee Department of Health, Board of Occupational Therapy.

Rulemaking hearing date: March 8, 2012

Types of small businesses that will be directly affected by the proposed rules:

The proposed rule amendments affect licensed occupational therapists, licensed occupational therapy assistants, doctoral-degree level students, masters-degree level students, occupational therapy assistant students, and applicants for licensure and certification. As such, these rules do not affect small businesses.

Types of small businesses that will bear the cost of the proposed rules:

The proposed rule amendments affect licensed occupational therapists, licensed occupational therapy assistants, doctoral-degree level students, masters-degree level students, occupational therapy assistant students, and applicants for licensure and certification. As such, these rules do not affect small businesses.

Types of small businesses that will directly benefit from the proposed rules:

The proposed rule amendments affect licensed occupational therapists, licensed occupational therapy assistants, doctoral-degree level students, masters-degree level students, occupational therapy assistant students, and applicants for licensure and certification. As such, these rules do not affect small businesses.

Description of how small business will be adversely impacted by the proposed rules:

The proposed rule amendments affect licensed occupational therapists, licensed occupational therapy assistants, doctoral-degree level students, masters-degree level students, occupational therapy assistant students, and applicants for licensure and certification. As such, these rules do not affect small businesses.

Alternatives to the proposed rule that will accomplish the same objectives but are less burdensome, and why they are not being proposed:

The Board of Occupational Therapy does not believe there are less burdensome alternatives to the proposed rule amendments.

Comparison of the proposed rule with federal or state counterparts:

Federal: The Board of Occupational Therapy is not aware of any federal entity that regulates the practice of Occupational Therapy.

State: After reviewing the rules for other states in the southeastern region of the United States, it has been determined that other states either have rules that are consistent with the proposed rule amendments or do not address the specific topics covered by the proposed rule amendments.

Impact on Local Governments

Pursuant to T.C.A. §§ 4-5-220 and 4-5-228 “any rule proposed to be promulgated shall state in a simple declarative sentence, without additional comments on the merits of the policy of the rules or regulation, whether the rule or regulation may have a projected impact on local governments.” (See Public Chapter Number 1070 (<http://state.tn.us/sos/acts/106/pub/pc1070.pdf>) of the 2010 Session of the General Assembly)

These rule amendments are not expected to have an impact on local governments.

Additional Information Required by Joint Government Operations Committee

All agencies, upon filing a rule, must also submit the following pursuant to T.C.A. § 4-5-226(i)(1).

- (A) A brief summary of the rule and a description of all relevant changes in previous regulations effectuated by such rule;

Rule 1150-02-.04 – This rule provides recommendations for applicants seeking to re-enter the field if the date of application for licensure as either an occupational therapist or occupational therapy assistant is more than three (3) years following successful completion of the National Board for Certification in Occupational Therapy Examination. This rule includes the documentation of current certification from the Hand Therapy Certification Commission and proof of successful completion of clinical training that has been completed within the two (2) years preceding the submission of the application for certification. The purpose of this rule is to ensure each applicant is proficient in their practice and maintain and the appropriate level of patient care and safety.

Rule 1150-02-.05 – This rule requires applicants seeking certification in the use of physical agent modalities to provide proof of successful completion of clinical work that has been completed within the two (2) years prior to submission of the application for certification. The purpose of this rule is to ensure each applicant is proficient in their practice and maintain and the appropriate level of patient care and safety.

Rule 1150-02-.10 – The proposed changes to this rule are lacking in sufficient statutory authority under Tenn. Code Ann. § 63-13-208, as the statute limits the authority of the Board to regulate occupational therapy services provided by occupational therapy students and occupational therapy assistant students. The Board agreed to delete the proposed change and approved the revision of this rule to read "Supervision of occupational therapy students shall be consistent with the standards of the Accreditation Council for Occupational Therapy Education (ACOTE) for such supervision."

Rule 1150-02-.12 – This rule includes credit for contact hours for direct supervision of both Level I and Level II fieldwork by an occupational therapist or occupational therapy assistant.

- (B) A citation to and brief description of any federal law or regulation or any state law or regulation mandating promulgation of such rule or establishing guidelines relevant thereto;

Office of the General Counsel is unaware of any federal law or regulation or any state law or regulation mandating promulgation of such rule

- (C) Identification of persons, organizations, corporations or governmental entities most directly affected by this rule, and whether those persons, organizations, corporations or governmental entities urge adoption or rejection of this rule;

Applicants for licensure, The American Occupational Therapy Association (AOTA) and The Tennessee Occupational Therapy Association (TOTA). Both the AOTA and the TOTA expressed their support and rejection of parts of these rules as stated in the public comments section.

- (D) Identification of any opinions of the attorney general and reporter or any judicial ruling that directly relates to the rule;

No Attorney General opinions or judicial rulings directly relate to this rule.

- (E) An estimate of the probable increase or decrease in state and local government revenues and expenditures, if any, resulting from the promulgation of this rule, and assumptions and reasoning upon which the estimate is based. An agency shall not state that the fiscal impact is minimal if the fiscal impact is more than two percent (2%) of the agency's annual budget or five hundred thousand dollars (\$500,000), whichever is less;

The proposed rule amendments would not provide an increase or decrease in state and local government revenues and expenditures.

- (F) Identification of the appropriate agency representative or representatives, possessing substantial knowledge and understanding of the rule;

Jennifer L. Putnam, Assistant General Counsel, Tennessee Department of Health

- (G) Identification of the appropriate agency representative or representatives who will explain the rule at a scheduled meeting of the committees;

Jennifer L. Putnam, Assistant General Counsel, Tennessee Department of Health

- (H) Office address, telephone number, and email address of the agency representative or representatives who will explain the rule at a scheduled meeting of the committees; and

Jennifer L. Putnam, Assistant General Counsel, Tennessee Department of Health, 220 Athens Way, Suite 210, Nashville, TN 37243 (615)741-1611, jennifer.putnam@tn.gov

- (I) Any additional information relevant to the rule proposed for continuation that the committee requests.

(Rule 1150-02-.02, continued)

Authority: T.C.A. §§4-5-202, 4-5-204, 63-13-102, 63-13-103, 63-13-104, 63-13-108, 63-13-202, and 63-13-203. **Administrative History:** Original rule filed March 15, 1996; effective May 29, 1996. Amendment filed March 21, 1996; effective June 4, 1996. Amendment filed February 13, 2002; effective April 29, 2002. Amendment filed March 10, 2005; effective May 24, 2005. Amendment filed April 17, 2007; effective July 1, 2007. References to Board of Occupational and Physical Therapy Examiners has been changed by The Secretary of State to the Applicable entity; Board of Occupational Therapy and/or Board of Physical Therapy pursuant to Public Chapter 115 of the 2007 Session of the Tennessee General Assembly.

1150-02-.03 NECESSITY OF LICENSURE.

- (1) It is unlawful for any person who is not licensed in the manner prescribed in Title 63, Chapter 13 of The Tennessee Code Annotated to represent himself as an occupational therapist or occupational therapy assistant or to hold himself out to the public as being licensed by using a title on signs, mailboxes, address plates, stationery, announcements, telephone listings, calling cards, or other instruments of professional identification.
- (2) Occupational therapy is one of the healing arts and as such the practice is restricted to those persons credentialed by this board. Persons engaging in the practice of occupational therapy without being credentialed or expressly exempted by the laws are in violation of division law, T.C.A. §63-1-123.
- (3) No person shall hold himself out to the public by a title or description of services incorporating the words "occupational therapist" or "occupational therapy assistant", nor shall state or imply that he is licensed unless such person is licensed or expressly exempted pursuant to T.C.A. §§ 63-13-201, et seq. The provisions of these rules do not apply to a person if that person is preparing for the practice of occupational therapy under a qualified supervisor in a training institution approved by the board of occupational therapy
- (4) Teaching or instruction of occupational therapy in an occupational therapy program accredited by the Accreditation Council for Occupational Therapy Education (ACOTE), or in developing programs in the process of receiving accreditation constitutes the practice of occupational therapy and the provision of occupational therapy services to the public requiring licensure.
- (5) Licensee Use of Titles - Any person who possesses a valid, current and active license issued by the Board that has not been suspended or revoked has the right to use the title "Occupational Therapist" or "Occupational Therapy Assistant" as applicable, and to use the acronyms "O.T." or "O.T.A." as applicable, and to practice occupational therapy, as defined in T.C.A. § 63-13-103. Any person to whom this rule applies must use one of the titles authorized by this rule in every "advertisement" [as that term is defined in rule 1150-02-.13 (2) (a)] he or she publishes or the failure to do so will constitute an omission of a material fact which makes the advertisement misleading and deceptive and subjects the licensee to disciplinary action pursuant to T.C.A. § 63-13-209 (a) (1) and (a) (3).

Authority: T.C.A. §§4-5-202, 4-5-204, 63-1-123, 63-1-145, 63-13-102, 63-13-103, 63-13-104, 63-13-108, 63-13-202, 63-13-203, 63-13-204, 63-13-209, 63-13-210, 63-13-211, 63-13-212, and 63-13-216. **Administrative History:** Original rule filed March 15, 1996; effective May 29, 1996. Amendment filed October 11, 2005; effective December 25, 2005. Amendment filed August 18, 2006; effective November 1, 2006. Amendment filed October 21, 2009; effective January 19, 2010.

1150-02-.04 QUALIFICATIONS FOR LICENSURE.

- (1) To qualify for licensure as an occupational therapist, an applicant must:

(Rule 1150-02-.04 continued)

- (a) Be of good moral character;
 - (b) Have successfully completed the academic requirements of an educational program for occupational therapists accredited by the Accreditation Council for Occupational Therapy Education (ACOTE) or its predecessor organization;
 - (c) Have successfully completed the supervised fieldwork experience required by ACOTE; and
 - (d) Pass the National Board for Certification in Occupational Therapy Examination administered by the National Board for Certification in Occupational Therapy; or be eligible for licensure as provided in T.C.A. § 63-13-213.
- (2) To be eligible for licensure as an occupational therapy assistant, an applicant must:
- (a) Be of good moral character;
 - (b) Have successfully completed the academic requirements of an educational program for occupational therapy assistants accredited by the Accreditation Council for Occupational Therapy Education (ACOTE) or its predecessor organization;
 - (c) Have successfully completed the supervised fieldwork experience required by ACOTE; and
 - (d) Pass the National Board for Certification in Occupational Therapy Examination administered by the National Board for Certification in Occupational Therapy; or be eligible for licensure as provided in T.C.A. § 63-13-213.
- (3) If the date of application for licensure as either an occupational therapist or occupational therapy assistant is more than three (3) years following successful completion of the National Board for Certification in Occupational Therapy Examination and the applicant is not currently practicing in another state and applying for a Tennessee license by reciprocity, the applicant may be subject to additional requirements for licensure to be determined by the Board including, but not limited to the following:
- (a) Engage in a formalized process of self-assessment through the use of the AOTA professional development tool.
 - (b) Submit documentation that applicant has attended and successfully completed a minimum of ten (10) hours of formal learning related to the occupational therapy service delivery for each year between the original qualification for licensure and actual application for licensure, at least twenty (20) of which must have occurred within the twenty-four (24) months prior to application and must relate to the area of practice in which the applicant intends to practice; or
 - (c) Must have a minimum of two (2) hours of continuing education in the area of ethics; one (1) hour of continuing education in Tennessee jurisprudence and a minimum of two (2) hours of continuing education in the area of documentation. These continuing education hours should be obtained within twenty-four (24) months prior to the application.
 - (d) Upon licensure approval by the Board as either an occupational therapist or occupational therapy assistant, a licensee is required to be supervised during their first twelve (12) months of practice by a licensed occupational therapist in good standing. If the relationship between supervisor and licensee should cease before the expiration of

(Rule 1150-02-.04 continued)

the twelve (12) months, licensee must obtain a new supervisor and notify the Board of the name of the new supervisor within thirty (30) days of obtaining the new supervisor.

(34) Certification in the use of physical agent modalities

(a) Electrical stimulation certification - To be eligible for certification in electrical stimulation, an applicant must:

1. Meet all qualifications in paragraph (1) or (2) of this rule and all applicable procedures in rule 1150-02-.05; and
- ~~2. Submit documentation of current certification from the American Society of Hand Therapists; or~~
2. Submit documentation of current certification from the Hand Therapy Certification Commission; or
3. Successfully complete Board-approved training that shall consist of a total of twenty-five (25) contact hours of didactic and laboratory experiences which include five (5) treatments on clinical patients to be supervised by licensees who hold certification pursuant to subparagraph (a) or by a physical therapist currently licensed in the United States. The treatments shall be from the following categories, and at least one (1) treatment shall be from each category:
 - (i) Neuromuscular electrical stimulation
 - (ii) Electrical stimulation for pain control
 - (iii) Edema reduction
 - (iv) Iontophoresis
4. If applicant is seeking certification in the use of physical agent modalities, as provided in paragraph (4) of this rule, the applicant shall present to the Board's administrative office proof of successful completion of didactic and clinical training that has been completed within the two (2) years preceding the submission of the application for certification.

(b) Thermal agents certification - To be eligible for certification in the use of thermal agents, an applicant must:

1. Meet all qualifications in paragraph (1) or (2) of this rule and all applicable procedures in rule 1150-02-.05; and
- ~~2. Submit documentation of current certification from the American Society of Hand Therapists; or~~
2. Submit documentation of current certification from the Hand Therapy Certification Commission; or
3. Successfully complete Board-approved training that shall consist of a total of twenty (20) contact hours of didactic and laboratory experiences which include ten (10) treatments on clinical patients to be supervised by licensees who hold certification pursuant to subparagraph (b) or by a physical therapist currently licensed in the United States. Five (5) of the ten (10) treatments shall utilize

(Rule 1150-02-.04 continued)

ultrasound. The treatments shall be from the following categories, and at least one (1) treatment shall be from each category:

- (i) Superficial heating agents
- (ii) Cryotherapy
- (iii) Deep heating agents

4. If applicant is seeking certification in the use of physical agent modalities, as provided in paragraph (4) of this rule, the applicant shall present to the Board's administrative office proof of successful completion of didactic and clinical training that has been completed within the two (2) years preceding the submission of the application for certification.

(c) Training. The continuous supervision of fieldwork students who are training to be certified in the use of physical agent modalities is required at all times. Such supervision shall only be provided by an occupational therapist who is currently licensed in Tennessee and is currently certified in Tennessee in the use of physical agent modalities.

1. Approval of all training courses shall be made by the Board. The required training for electrical stimulation and thermal agents certification may be obtained through:

- (i) Colleges and universities approved for training occupational therapists and occupational therapy assistants by the American Occupational Therapy Association, or physical therapists and physical therapy assistants by the American Physical Therapy Association, or at clinical facilities affiliated with such accredited colleges or universities; or
- (ii) The American Society of Hand Therapists; or
- (iii) Any approved provider offering a Board-approved course.

2. The training for the therapeutic use of electrical stimulation devices shall provide competency in the following areas:

(i) Standards

- (I) The expected outcome or treatments with therapeutic electrical current (TEC) must be consistent with the goals of treatment.
- (II) Treatment of TEC must be safe, administered to the correct area, and be of proper dosage.

(ii) Correct dosage and mode

- (I) Ability to determine the duration and mode of current appropriate to the patient's neurophysiological status while understanding Ohm's law of electricity, physical laws related to the passage of current through various media, as well as impedance.
- (II) Ability to describe normal electrophysiology of nerve and muscle; understanding generation of bioelectrical signals in nerve and

(Rule 1150-02-.04 continued)

- muscle; recruitment of motor units in normal muscle and in response to a variety of external stimuli.
- (III) Ability to describe normal and abnormal tissue responses to external electrical stimuli while understanding the differing responses to varieties of current duration, frequency and intensity of stimulation.
- (iii) Selection of method and equipment
- (I) Ability to identify equipment with the capability of producing the pre-selected duration and mode.
- (II) Ability to describe characteristics of electrotherapeutic equipment and understanding of the therapeutic value of different electrotherapeutic equipment.
- (III) Ability to describe safety regulations governing the use of electrotherapeutic equipment.
- (IV) Ability to describe principles of electrical currents.
- (V) Ability to describe requirements/idiosyncrasies of body areas and pathological conditions with respect to electrotherapeutic treatment.
- (iv) Preparation of treatment
- (I) Ability to prepare the patient for treatment through positioning and adequate instructions
- (II) Ability to explain to the patient the benefits expected of the electrotherapeutic treatment.
- (v) Treatment administration
- (I) Ability to correctly operate equipment and appropriately adjust the intensity and current while understanding rate of stimulator, identification of motor points, and physiological effects desired.
- (II) Ability to adjust the intensity and rate to achieve the optimal response, based on the pertinent evaluative data.
- (vi) Documentation of treatments - Ability to document treatment including immediate and long-term effects of therapeutic electrical current.
3. The training for the therapeutic use of thermal agents shall provide competency in the following areas:
- (i) Standards
- (I) The expected outcome or treatments with thermal agents must be consistent with the goals of treatment.
- (II) Treatment with thermal agents must be safe, administered to the correct area, and be the proper dosage.

(Rule 1150-02-.04 continued)

- (III) Treatment with thermal agents be adequately documented.
- (ii) Instrumentation
 - (I) Ability to describe the physiological effects of thermal agents as well as differentiate tissue responses to the various modes of application.
 - (II) Ability to select the appropriate thermal agent considering the area and conditions being treated.
 - (III) Ability to describe equipment characteristics, indications, and contraindications for treatment, including identifying source and mechanisms of generation of thermal energy and its transmission through air and physical matter.
- (iii) Preparation for treatment
 - (I) Ability to prepare the patient for treatment through positioning and adequate instruction.
 - (II) Ability to explain to the patient the benefits expected of the thermal treatment.
- (iv) Determination of dosage - Ability to determine dosage through determination of target tissue depth, stage of the condition (acute vs. chronic), and application of power/dosage calculation rules as appropriate.
- (v) Treatment administration - Ability to administer treatment through identification of controls, sequence of operation, correct application techniques and application of all safety rules and precautions.
- (vi) Documentation of treatments - Ability to document treatment including immediate and long-term effects of thermal agents.

(45) In determining the qualifications of applicants for licensure as an occupational therapist or as an occupational therapy assistant, only a majority vote of the board of occupational therapy shall be required.

Authority: T.C.A. §§ 4-5-202, 4-5-204, 63-13-102, 63-13-103, ~~63-13-108~~, 63-13-202, 63-13-203, 63-13-206, and 63-13-213. **Administrative History:** Original rule filed March 15, 1996; effective May 29, 1996. Amendment filed July 31, 2000; effective October 14, 2000. Amendments filed March 10, 2005; effective May 24, 2005. Amendment filed October 11, 2005; effective December 25, 2005.

1150-02-.05 PROCEDURES FOR LICENSURE. To become licensed as an occupational therapist or occupational therapy assistant in Tennessee, a person must comply with the following procedures and requirements.

- (1) Occupational Therapist and Occupational Therapy Assistant by Examination
 - (a) An application packet shall be requested from the Board's administrative office.
 - (b) An applicant shall respond truthfully and completely to every question or request for information contained in the application form and submit it along with all documentation and fees required by the form and these rules to the Board's administrative office. It is the intent of these rules that all steps necessary to accomplish the filing of the required

(Rule 1150-02-.05 continued)

documentation be completed prior to filing an application and that all documentation be filed simultaneously.

- (c) Applications will be accepted throughout the year and completed files will ordinarily be processed at the next Board meeting scheduled for the purpose of reviewing files.
- (d) An applicant shall pay the nonrefundable application fee and state regulatory fee as provided in rule 1150-02-.06 when submitting the application.
- (e) An applicant shall submit with his application a "passport" style photograph taken within the preceding 12 months.
- (f) It is the applicant's responsibility to request that a graduate transcript from his degree granting institution, pursuant to T.C.A. §63-13-202, be submitted directly from the school to the Board's administrative office. The institution granting the degree must be accredited by the AOTA at the time the degree was granted. The transcript must show that the degree has been conferred and carry the official seal of the institution and reference the name under which the applicant has applied for certification.
- (g) An applicant shall submit an original letter of recommendation attesting to the applicant's good moral character. The letter cannot be from a relative.
- (h) Examination Verification
 1. It is the responsibility of the applicant to request a copy of his certification examination results from the National Board for Certification in Occupational Therapy Examination be sent directly to the Board's administrative office.
 2. For examinations taken prior to January, 1985, the applicant shall request the National Board for Certification in Occupational Therapy send a verification of certification examination results to the Board of Occupational Therapy. For an examination taken in January, 1985, or later, the applicant shall request that Professional Exam Service send verification of certification examination results to the Board of Occupational Therapy.
- ~~(i) Physical agent modality certification. If an applicant is seeking certification in the use of physical agent modalities, as provided in paragraph (3) of rule 1150-02-.04, the applicant shall cause to have proof of successful training completion be submitted directly from the training provider to the Board's administrative office.~~
- (i) Physical agent modality certification. If an applicant is seeking certification in the use of physical agent modalities, as provided in paragraph (4) of Rule 1150-02-.04, the applicant shall present to the Board's administrative office proof of successful completion of didactic and clinical work that has been completed within the two (2) years prior to submission of the application for certification.
- (j) An applicant shall disclose the circumstances surrounding any of the following:
 1. Conviction of any criminal law violation of any country, state, or municipality, except minor traffic violations.
 2. The denial of licensure application by any other state or the discipline of a license in any state.
 3. Loss or restriction of licensure.

(Rule 1150-02-.05 continued)

4. Any civil suit judgment or civil suit settlement in which the applicant was a party defendant including, without limitations, actions involving malpractice, breach of contract, antitrust activity or any other civil action remedy recognized under the country's or state's statutory, common or case law.
 - (k) The applicant shall cause to be submitted to the Board's administrative office directly from the vendor identified in the Board's licensure application materials, the result of a criminal background check.
 - (l) When necessary, all required documents shall be translated into English. Both translation and original document, certified as to authenticity by the issuing source must be submitted.
 - (m) Personal resumes are not acceptable and will not be reviewed.
 - (n) Application review and licensure decisions shall be governed by Rule 1150-02-07.
 - (o) The burden is on the applicant to prove by a preponderance of the evidence that his course work and supervised field work experience are equivalent to the board's requirements.
 - (p) The initial licensure fee must be received in the Board's administrative office on or before the thirtieth (30th) day from receipt of notification that the fee is due. Failure to comply will result in the application file being closed.
 - (q) A license will be issued after all requirements, including payment of an initial licensure fee pursuant to Rule 1150-02-.06, have been met.
- (2) Occupational Therapist and Occupational Therapy Assistant by Reciprocity
- (a) An application packet shall be requested from the Board's administrative office.
 - (b) An applicant shall respond truthfully and completely to every question or request for information contained in the application form and submit it along with all documentation and fees required by the form and these rules to the Board's administrative office. It is the intent of this rule that all steps necessary to accomplish the filing of the required documentation be completed prior to filing an application and that all documentation be filed simultaneously.
 - (c) An applicant shall submit with his application a "passport" style photograph taken within the preceding twelve (12) months.
 - (d) An applicant shall pay the non-refundable application fee, and state regulatory fee as provided in rule 1150-02-.06 when submitting the application.
 - (e) Applications will be accepted throughout the year and completed files will ordinarily be processed at the next board meeting scheduled for the purpose of reviewing files.
 - (f) It is the applicant's responsibility to request that a graduate transcript from his degree granting institution, pursuant to T.C.A. §63-13-202, be submitted directly from the school to the board's administrative office. The institution granting the degree must be accredited by the AOTA at the time the degree was granted. The transcript must show that the degree has been conferred and carry the official seal of the institution and reference the name under which the applicant has applied for licensure.

(Rule 1150-02-.05 continued)

- (g) It is the applicant's responsibility to request verification of licensure status be submitted directly to the Board's administrative office from all states in which the applicant is or has ever been licensed.
- (h) Examination Verification
 - 1. It is the responsibility of the applicant to request a copy of his certification examination results from the National Board for Certification in Occupational Therapy Examination be sent directly to the Board's administrative office.
 - 2. For examinations taken prior to January, 1985, the applicant shall request the National Board for Certification in Occupational Therapy send a verification of certification examination results to the Board of Occupational Therapy.
 - 3. For examinations taken in January, 1985, or later, the applicant shall request that Professional Exam Service, send a verification of certification examination results to the Board of Occupational Therapy.
- ~~(i) Physical agent modality certification If an applicant is seeking certification in the use of physical agent modalities, as provided in paragraph (3) of rule 1150-02-.04, the applicant shall cause to have proof of successful training completion be submitted directly from the training provider to the Board's administrative office.~~
- (i) Physical agent modality certification. If an applicant is seeking certification in the use of physical agent modalities, as provided in paragraph (4) of Rule 1150-02-.04, the applicant shall present to the Board's administrative office proof of successful completion of didactic and clinical work that has been completed within the two (2) years prior to submission of the application for certification
- (j) An applicant shall disclose the circumstances surrounding any of the following:
 - 1. Conviction of any criminal law violation of any country, state, or municipality, except minor traffic violations.
 - 2. The denial of licensure application by any other state or the discipline of a license in any state.
 - 3. Loss or restriction of licensure.
 - 4. Any civil suit judgment or civil suit settlement in which the applicant was a party defendant including, without limitations, actions involving malpractice, breach of contract, antitrust activity or any other civil action remedy recognized under the country's or state's statutory, common or case law.
- (k) The applicant shall cause to be submitted to the Board's administrative office directly from the vendor identified in the Board's licensure application materials, the result of a criminal background check.
- (l) When necessary, all required documents shall be translated into English. Both translation and the original document, certified as to authenticity by the issuing source, must be submitted.
- (m) Personal resumes are not acceptable and will not be reviewed.

(Rule 1150-02-.05 continued)

- (n) Application review and licensure decisions shall be governed by Rule 1150-02-.07.
- (o) The burden is on the applicant to prove by a preponderance of the evidence that his course work, and experiential qualifications are equivalent to the board's requirements.
- (p) The initial licensure fee must be received in the Board's administrative office on or before the thirtieth (30th) day from receipt of notification that the fee is due. Failure to comply will result in the application file being closed.
- (q) A license will be issued after all requirements, including payment of an initial licensure fee pursuant to Rule 1150-02-.06, have been met.

Authority: T.C.A. §§4-5-202, 4-5-204, 63-13-102, 63-13-103, 63-13-108, 63-13-202, 63-13-203, 63-13-204, 63-13-206, 63-13-209, and 63-13-213. **Administrative History:** Original rule filed March 15, 1996; effective May 29, 1996. Amendment filed July 31, 2000; effective October 14, 2000. Amendments filed March 10 2005; effective May 24, 2005. Amendments filed October 11, 2005; effective December 25, 2005. Amendment filed March 14, 2006; effective May 28, 2006. Amendment filed April 17, 2007; effective July 1, 2007.

1150-02-.06 FEES.

(1) The fees are as follows:

- (a) Application fee - A nonrefundable fee to be paid by all applicants including those seeking licensure by reciprocity. It must be paid each time an application for licensure is filed.
- (b) Endorsement/Verification - A fee paid whenever an individual requests the board endorse him to another state or whenever a request is made to verify a certificate.
- (c) Late Renewal Fee - A nonrefundable fee to be paid when an individual fails to timely renew a certificate.
- (d) Limited Permit Fee - A nonrefundable fee to be paid when an individual requests a limited permit.
- (e) Initial License Fee - To be paid prior to the issuance of the "artistically designed" license.
- (f) Renewal fee - To be paid by all license holders. This fee also applies to individuals who reactivate a retired or lapsed license.
- (g) Duplicate License Fee - To be paid when an individual requests a replacement for a lost or destroyed "artistically designed" license.
- (h) State Regulatory Fee - To be paid by all individuals at the time of application and with all renewal applications.
- (i) Registration fee - A one time fee to be paid by initial license holders for issuance of a certificate of registration from the Division.
- (j) Inactive License Fee - A nonrefundable fee to be paid each time a licensee requests an Inactive License, and every two (2) years thereafter until reactivation is requested.

(2) All fees shall be established, reviewed and changed by the Board, as appropriate.

(Rule 1150-02-.09, continued)

1. Internet Renewals - Individuals may apply for renewal and pay the necessary fees via the Internet. The application to renew can be accessed at:

www.tennesseeanytime.org

2. Paper Renewals - For individuals who have not renewed their license online via the Internet, a renewal application form will be mailed to each individual licensed by the Board to the last address provided to the Board. Failure to receive such notification does not relieve the licensee from the responsibility of meeting all requirements for renewal.

- (c) A license issued pursuant to these rules is renewable by the expiration date indicated on the renewal certificate. To be eligible for renewal, an individual must submit to the Division of Health Related Boards on or before the expiration date all of the following:

1. A completed and signed board renewal application form; and
2. The renewal and state regulatory fees as provided in Rule 1150-02-.06; and
3. A statement attesting to the completion of continued competence requirements, as provided in Rule 1150-02-.12.

- (d) Licensees who fail to comply with the renewal rules or notification received by them concerning failure to timely renew shall have their licenses processed pursuant to rule 1200-10-01-.10.

- (e) Anyone submitting a signed renewal form or letter which is found to be untrue may be subjecting himself to disciplinary action as provided in Rule 1150-02-.15.

(2) Reinstatement of Expired License

- (a) Reinstatement of an expired license may be accomplished upon meeting the following conditions:

1. Payment of all past due renewal and State regulatory fees;
2. Payment of the late renewal fee in Rule 1150-02-.06; and
3. Submitting proof of completion of continued competence requirements, as provided in Rule 1150-02-.12.

- (b) Anyone submitting a signed reinstatement application which is found to be untrue may be subjecting himself to disciplinary action as provided in Rule 1150-02-.15.

(3) Renewal issuance decisions pursuant to this rule may be made administratively or upon review by any Board member or the Board's designee.

Authority: T.C.A. §§4-5-202, 4-5-204, 63-1-107, 63-13-104, 63-13-108, 63-13-204, 63-13-207, 63-13-209, 63-13-210, and 63-13-213. **Administrative History:** Original rule filed March 15, 1996; effective May 29, 1996. Amendment filed July 29, 2002; effective October 12, 2002. Amendment filed March 24, 2005; effective June 7, 2005. Amendment filed October 11, 2005; effective December 25, 2005.

1150-02-.10 SUPERVISION. The Board adopts, as if fully set out herein, and as it may from time to time be amended, the current "Guidelines for Supervision, Roles, and Responsibilities During the Delivery

(Rule 1150-02-.10, continued)

of Occupational Therapy Services" issued by the American Occupational Therapy Association but only to the extent that it agrees with the laws of the state of Tennessee or the rules of the Board. If there are conflicts with state law or rules, the state law or rules govern the matter. Information to acquire a copy may be obtained by contacting either of the following:

American Occupational Therapy Association
4720 Montgomery Lane
Bethesda, MD 20824-1220
Telephone: (301) 652-2682
T.D.D.: (800) 377-8555
Fax: (301) 652-7711
Fax On Request: (800) 701-7735 (for a specific document)
Internet: www.aota.org

Board of Occupational Therapy
227 French Landing, Suite 300
Heritage Place, MetroCenter
Nashville, TN 37243
Telephone: (615) 532-3202 ext. 25135
Telephone: (888) 310-4650 ext. 25135
Fax: (615) 532-5164
Internet: www.state.tn.us/health

- (1) Supervision of an Occupational Therapist on a limited permit must include initial and routine inspection of written evaluations, written treatment plans, patient/client notes and routine evaluation of performance. The supervision must be conducted in person, by a licensed occupational therapist and must be as follows:
 - (a) Routine supervision with direct contact every 2 weeks at the site of treatment, with interim supervision occurring by other methods such as the telephone, conferences, written communication, and E-mail.
 - (b) Supervision must include observation of the individual treatment under a limited permit in order to assure service competency in carrying out evaluation, treatment planning and treatment implementation.
 - (c) The frequency of the face to face collaboration between the person treating under a limited permit and the supervising therapist should exceed direct contact every 2 weeks if the condition of the patient/client, complexity of treatment, evaluation procedures, and proficiencies of the person practicing under the limited permit warrants it.
 - (d) Therapists must maintain documentation of each supervisory visit, and must identify a plan for continued supervision. Records must include, at a minimum, the following information:
 1. Location of visit; a method of identifying clients discussed
 2. Current plan for supervision (daily, weekly, bi-monthly)
 3. Identification of type(s) of interventions observed. These include but are not limited to:
 - (i) Interventions
 - (ii) Training

(Rule 1150-02-.10, continued)

- (iii) Consultations
 - 4. Other supervisory actions. These include but are not limited to:
 - (i) Discussion/recommendation for interventions and/or goals
 - (ii) Discussion/training in documentation
 - (iii) Demonstration/training in intervention techniques
 - (iv) Assessment/re-assessment/discharge
 - (v) Additional Comments
 - 5. An agreement statement signed and dated by both parties, that the supervisory visit did occur and met the needs of the supervisor and supervisee.
 - 6. It is the responsibility of the supervising occupational therapist to provide and the limited permit holder to seek a quality and frequency of supervision that ensures safe and effective occupational therapy service delivery. Both parties (supervisor and supervisee) must keep copies of the supervisory records. Visit records must be maintained for three (3) years, and must be provided to the Board and/or its representative, upon request.
- (e) A co-signature by supervising Occupational Therapist is required on evaluations, treatment plans, and discharge summaries.
- (2) Supervision of an Occupational Therapy Assistant on a limited permit means initial direction and routine inspection of the service delivery and provision of relevant in-service training. The supervising occupational therapist must provide additional supervision, if the patient's required level of care is beyond the level of skill of an entry level Occupational Therapy Assistant on a limited permit. This decision is based on client's level of care, OTA caseload, experience and demonstrated performance competency. Supervision of an Occupational Therapy Assistant on a limited permit must include initial and routine inspection of patient notes and routine evaluation of performance. The supervision must be conducted in person by a licensed occupational therapist and must be as follows:
- (a) The Occupational Therapist shall be responsible for the evaluation of the patient and development of the patient/client treatment plan. The Occupational Therapy Assistant on a limited permit may contribute information from observations and standardized test procedures to the evaluation and the treatment plans.
 - (b) The Occupational Therapy Assistant can implement and coordinate intervention plan under supervision of a licensed Occupational Therapist.
 - (c) The Occupational Therapy Assistant can provide direct services that follow a documented routine and accepted procedure under the supervision of the licensed Occupational Therapist.
 - (d) The Occupational Therapy Assistant can adapt activities, media, environment according to needs of patient/client under supervision of the licensed Occupational Therapist.

(Rule 1150-02-.10, continued)

- (e) Documentation provided by the Occupational Therapy Assistant while on a limited permit must be co-signed by a licensed Occupational Therapist.
- (f) Therapists must maintain documentation of each supervisory visit, and must identify a plan for continued supervision. Records must include, at a minimum, the following information:
 - 1. Location of visit; a method of identifying clients discussed
 - 2. Current plan for supervision (daily, weekly, bi-monthly)
 - 3. Identification of type(s) of interventions observed. These include but are not limited to:
 - (i) Interventions
 - (ii) Training
 - (iii) Consultations
 - 4. Other supervisory actions. These include but are not limited to:
 - (i) Discussion/recommendation for interventions and/or goals
 - (ii) Discussion/training in documentation
 - (iii) Demonstration/training in intervention techniques
 - (iv) Assessment/re-assessment/discharge
 - (v) Additional Comments
 - 5. An agreement statement signed and dated by both parties, that the supervisory visit did occur and met the needs of the supervisor and supervisee.
 - 6. It is the responsibility of the supervising occupational therapist to provide and the limited permit holder to seek a quality and frequency of supervision that ensures safe and effective occupational therapy service delivery. Both parties (supervisor and supervisee) must keep copies of the supervisory records. Visit records must be maintained for three (3) years, and must be provided to the Board and/or its representative, upon request.
- (3) Supervision of an Occupational Therapy Assistant with permanent licensure means initial direction and inspection of the service delivery and provision of relevant in-service training, according to the level of supervision the occupational therapy assistant requires. It is the responsibility of the occupational therapist and the occupational therapy assistant to seek the appropriate quality and frequency of supervision that ensures safe and effective occupational therapy service delivery. This decision is based on client's level of care, OTA caseload, experience and demonstrated performance competency.
 - (a) The frequency of the face to face collaboration between the Occupational Therapy Assistant and the supervising Occupational Therapist should exceed direct contact of once a month if the condition of the patient/client, complexity of treatment, evaluation procedures, and proficiencies of the person practicing warrants it.

(Rule 1150-02-.10, continued)

- (b) The Occupational Therapist shall be responsible for the evaluation of the patient and the development of the patient/client treatment plan. The Occupational Therapy Assistant may contribute information from observations and standardized test procedures to the evaluation and the treatment plans.
- (c) The Occupational Therapy Assistant can implement and coordinate intervention plan under the supervision of the licensed Occupational Therapist.
- (d) The Occupational Therapy Assistant can provide direct services that follow a documented routine and accepted procedure under the supervision of the Occupational Therapist.
- (e) The Occupational Therapy Assistant can adapt activities, media, environment according to the needs to the patient/client, under the supervision of the licensed Occupational Therapist.
- (f) Therapists must maintain documentation of each supervisory visit, and must identify a plan for continued supervision. Records must include, at a minimum, the following information:
 - 1. Location of visit; a method of identifying clients discussed
 - 2. Current plan for supervision (daily, weekly, bi-monthly, monthly, other)
 - 3. Type of supervision provided. These include but are not limited to
 - (i) in person
 - (ii) phone contact
 - (iii) electronic contact
 - 4. Identification of type(s) of interventions observed. These include but are not limited to:
 - (i) Interventions
 - (ii) Training
 - (iii) Consultations
 - 5. Other supervisory actions. These include but are not limited to:
 - (i) Discussion/recommendation for interventions and/or goals
 - (ii) Discussion/training in documentation
 - (iii) Demonstration/training in intervention techniques
 - (iv) Assessment/re-assessment/discharge
 - (v) Additional Comments
 - 6. An agreement statement signed and dated by both parties, that the supervisory visit did occur and met the needs of the supervisor and supervisee.

(Rule 1150-02-.10, continued)

7. It is the responsibility of the supervising occupational therapist to provide and the occupational therapy assistant to seek a quality and frequency of supervision that ensures safe and effective occupational therapy service delivery. Both parties (supervisor and supervisee) must keep copies of the supervisory records. Visit records must be maintained for three (3) years, and must be provided to the Board and/or its representative, upon request.

~~(4) Supervision of an unlicensed person shall be as follows:~~

- ~~(a) There shall be close supervision with daily, direct contact at site of treatment, which demands the physical presence of a licensed physician, Occupational Therapist or Occupational Therapy Assistant, whenever the unlicensed person assists in the practice of Occupational Therapy.~~
- ~~(b) There shall be personal instruction, observation and evaluation by the licensed physician, Occupational Therapist or Occupational Therapy Assistant.~~
- ~~(c) There shall be specific delineation of tasks and responsibilities by the licensed physician, Occupational Therapist or Occupational Therapy Assistant who is responsible for reviewing and interpreting the results of care. The licensed physician, Occupational Therapist or Occupational Therapy Assistant must ensure that the unlicensed person does not perform duties for which he is not trained.~~

~~1. A licensed physician, Occupational Therapist or Occupational Therapy Assistant may delegate to unlicensed persons specific routine tasks associated with nontreatment aspects of occupational therapy services which are neither evaluative, assessive, task selective, or recommending in nature, nor which require decision-making or making occupational therapy entries in official patient records, if the following conditions are met:~~

- ~~(i) The licensed physician, Occupational Therapist or Occupational Therapy Assistant accepts professional responsibility for the performance of that duty by the personnel to whom it is delegated. In the case of duties delegated by a OTA, the licensed physician, Occupational Therapist or Occupational Therapy Assistant who supervises the technician will be responsible; and~~
- ~~(ii) The unlicensed personnel do not perform any duties which require licensure under this act; and~~
- ~~(iii) The licensed physician, Occupational Therapist or Occupational Therapy Assistant ensures that the unlicensed personnel have been appropriately trained for the performance of the tasks.~~

~~2. Tasks which may be delegated may include:~~

- ~~(i) Transporting of patients;~~
- ~~(ii) Preparing or setting up a work area or equipment;~~
- ~~(iii) Routine department maintenance or housekeeping activities;~~
- ~~(iv) Taking care of patients' personal needs during treatments; and~~

(Rule 1150-02-.10, continued)

~~(v) Clerical, secretarial or administrative duties.~~

~~(d) Appropriate records must be maintained to document compliance.~~

~~(e) The intensity of the supervision is determined by the nature of the task to be performed, the needs of the consumer, and the capability of the unlicensed person.~~

(4) Supervision of occupational therapy students and occupational therapy assistant students.

(a) Supervision of occupational therapy students and occupational therapy assistant students shall be consistent with the standards of the Accreditation Council for Occupational Therapy Education (ACOTE) for such supervision.

(5) Supervision parameters

(a) Supervision is a collaborative process that requires both the licensed occupational therapist and the licensed occupational therapy assistant to share responsibility. Appropriate supervision will include consideration given to factors such as level of skill, the establishment of service competency (the ability to use the identified intervention in a safe and effective manner), experience and work setting demands, as well as the complexity and stability of the client population to be treated.

(b) Supervision is an interactive process that requires both the licensed occupational therapist and the licensed occupational therapy assistant or other supervisee to share responsibility for communication between the supervisor and the supervisee. The licensed occupational therapist should provide the supervision and the supervisee should seek it. An outcome of appropriate supervision is to enhance and promote quality services and the professional development of the individuals involved.

(c) Supervision of occupational therapy services provided by a licensed occupational therapy assistant is recommended as follows:

1. Entry level occupational therapy assistants are persons working on initial skill development (less than 1 year of work experience) or who are entering new practice environments or developing new skills (one or more years of experience) and should require close supervision.
2. Intermediate level occupational therapy assistants are persons working on increased skill development, mastery of basic role functions (minimum one - three years of experience or dependent on practice environment or previous experience) and should require routine supervision.
3. Advanced level occupational therapy assistants are persons refining specialized skills (more than 3 years work experience, or the ability to understand complex issues affecting role functions) and should require general supervision.
4. Licensed occupational therapy assistants, regardless of their years of experience, may require closer supervision by the licensed occupational therapist for interventions that are more complex or evaluative in nature and for areas in which service competencies have not been established:
5. Certain occupational therapy assistants may only require minimal supervision when performing non-clinical administrative responsibilities.

(Rule 1150-02-.10, continued)

Authority: T.C.A. §§4-5-202, 4-5-204, 63-13-102, 63-13-103, 63-13-108, 63-13-202, 63-13-203, 63-13-205, 63-13-206, 63-13-207, and 63-13-216. **Administrative History:** Original rule filed March 15, 1996; effective May 29, 1996. Amendment filed September 11, 1998; effective November 25, 1998. Amendment filed July 31, 2000; effective October 14, 2000. Amendment filed April 17, 2007; effective July 1, 2007. References to Board of Occupational and Physical Therapy Examiners has been changed by The Secretary of State to the Applicable entity; Board of Occupational Therapy and/or Board of Physical Therapy pursuant to Public Chapter 115 of the 2007 Session of the Tennessee General Assembly. Amendments filed October 21, 2009; effective January 19, 2010.

1150-02-.11 RETIREMENT AND REACTIVATION OF LICENSE.

- (1) A person who holds a current license and does not intend to practice as a occupational therapist or occupational therapy assistant may apply to convert an active license to inactive ("retired") status. An individual who holds a retired license will not be required to pay the renewal fee.
- (2) A person who holds an active license may apply for retired status in the following manner:
 - (a) Obtain from, complete, and submit to the Board's administrative office an affidavit of retirement form; and
 - (b) Submit any documentation which may be required by the form to the Board's administrative office.
- (3) A licensee whose license has been retired may reenter active status by doing the following:
 - (a) Submit a written request for licensure reactivation to the Board's administrative office; and
 - (b) Pay the licensure renewal fees and state regulatory fee as provided in Rule 1150-02-.06. If retirement reactivation is requested prior to the expiration of one (1) year from the date of retirement, the Board will require payment of the late renewal fee and all past due licensure renewal fees; and
 - (c) Complete the continued competence requirements, as provided in Rule 1150-02-.12.
- (4) Licensees may place their licenses on inactive status by filing the appropriate form with the Board and by paying the biennial Inactive License fee as provided in Rule 1150-02-.06. If the licensee thereafter reengages in active practice in Tennessee, such licensee shall apply for relicensure (reactivation) and shall meet the continued competence education requirements as provided in Rule 1150-02-.12.
- (5) Licensure reactivation applications shall be treated as licensure applications and review and decisions shall be governed by Rule 1150-02-.07.

Authority: T.C.A. §§4-5-202, 4-5-204, 63-1-111, 63-13-104, 63-13-108, 63-13-201, 63-13-202, 63-13-204, 63-13-213, and 63-13-215. **Administrative History:** Original rule filed March 15, 1996; effective May 29, 1996. Amendment filed March 24, 2005; effective June 7, 2005. Amendment filed October 11, 2005; effective December 25, 2005. Amendment filed April 17, 2007; effective July 1, 2007.

1150-02-.12 CONTINUED COMPETENCE. On January 1, 2006 the Board shall begin to notify applicants for licensure renewal of the continued competence requirements as provided in T.C.A. § 63-13-204 (d). The Board shall require each licensed occupational therapist and occupational therapist assistant to participate in a minimum number of activities to promote continued competence for the two (2) calendar years (January 1-December 31) that precede the licensure renewal year (a.k.a. biennium).

(Rule 1150-02-.11, continued)

Beginning January 1, 2008 all applicants for licensure, renewal of licensure, reactivation of licensure, or reinstatement of licensure must attest to having completed continued competence requirements for the two (2) calendar years (January 1-December 31) that precede the licensure renewal, reactivation or reinstatement year.

- (1) The requirements for continued competence activities are defined as planned learning experiences that occur for occupational therapists and occupational therapist assistants. Content of the experiences must relate to a licensee's current or anticipated roles and responsibilities in occupational therapy. Qualified learning experiences may include theoretical or practical content related to the practice of occupational therapy; research; management; or the development, administration, supervision, and teaching of clinical practice or service delivery programs in occupational therapy. The purpose of this requirement is to assist in assuring safe and effective practices in the provision of occupational therapy services to the citizens of Tennessee.
- (2) For applicants approved for initial licensure by examination, successfully completing the requirements of Rules 1150-02-.04, .05, and .08, as applicable, shall be considered proof of sufficient competence to constitute compliance with this rule for the initial period of licensure. The use of physical agent modalities by any licensee requires additional certification pursuant to Rule 1150-02-.04.
- (3) Occupational Therapists and Occupational Therapy Assistants are required to complete twenty-four (24) continued competence credits for the two (2) calendar years (January 1 - December 31) that precede the licensure renewal year.
 - (a) A maximum of four (4) continued competence credits achieved during the two (2) calendar year period that are in excess of the twenty-four (24) credit requirement may be used to partially complete the requirement for the subsequent two (2) calendar year period.
 - (b) The subjects of any continued competence credits used to partially complete the requirement for the subsequent two (2) calendar year period shall not pertain to:
 1. the AOTA Code of Ethics; or
 2. the occupational therapy portions of T.C.A. §§ 63-13-101, et seq., the Tennessee Occupational and Physical Therapy Practice Act; or
 3. Chapter 1150-02, General Rules Governing the Practice of Occupational Therapy.
- (4) Twelve (12) of the required twenty-four (24) continued competence credits must be directly related to the delivery of occupational therapy services.
- (5) One (1) hour of the required twenty-four (24) continued competence credits shall pertain to the AOTA Code of Ethics or other ethics related continued competence activities which have implications for the practice of occupational therapy.
- (6) One (1) hour of the required twenty-four (24) continued competence credits shall pertain to the occupational therapy portions of T.C.A. §§ 63-13-101, et seq., the Tennessee Occupational and Physical Therapy Practice Act, and shall pertain to Chapter 1150-02, General Rules Governing the Practice of Occupational Therapy.

(Rule 1150-02-.12, continued)

- (7) Ten (10) hours of the required twenty-four (24) continued competence credits may pertain to the licensee's current or anticipated professional role or may be directly related to the delivery of occupational therapy services.
- (8) Continued competence credits are awarded pursuant to the Activity Table in paragraph (11).
- (9) Approved Continued Competence Activity Providers
 - (a) American Medical Association (AMA)
 - (b) American Nurses Association (ANA)
 - (c) American Occupational Therapy Association (AOTA) and AOTA approved providers
 - (d) American Physical Therapy Association (APTA)
 - (e) American Speech-Language-Hearing Association (ASHA)
 - (f) International Association of Continuing Education (IACET)
 - (g) Rehabilitation Engineering and Assistive Technology Society of North America (RESNA)
 - (h) Tennessee Occupational Therapy Association (TOTA)
 - (i) State occupational therapy associations
 - (j) State occupational therapy regulatory agencies
 - (k) Accredited colleges and universities
- (10) The Board does not pre-approve continued competence activities. It is the responsibility of the licensed occupational therapist and occupational therapist assistant to use his/her professional judgment in determining whether or not the activities are applicable and appropriate to his/her professional development and meet the standards specified in these rules.
- (11) Activity Table (Per Two [2] Year Cycle)

	Approved Activities	Equivalency	Max.Credits	Documentation
(a)	Volunteer Services to organizations, populations, individuals, that advance the reliance on the use of one's OT skills and experiences. This excludes holding any elected or appointed offices.	5 Hours Equals 1 Credit	12 Credits	Verification letter from organizations. Describe outcomes of volunteer service provided. (See guidelines on the Board's web page at Tennessee.gov/health)

(Rule 1150-02-.12, continued)

	Approved Activities	Equivalency	Max.Credits	Documentation
(b)	Attending workshops, seminars, lectures, professional conferences offered by approved providers such as TOTA, AOTA, AMA, ASHA, APTA, state OT associations and regulatory boards, IACET, or a 3 rd party entity that reviews and approves the course and provider.	1 Hour Equals 1 Credit	24 Credits	Certificates of attendance or letter from sponsor of course.
(c)	Attending workshops, seminars, lectures, professional conferences by other providers.	1 Hour Equals 1 Credit	12 Credits	Certificates of attendance or letter from sponsor.
(d)	Attending employer-provided continuing education.	1 Hour Equals 1 Credit	12 Credits	Attendance records or certificates with name, date of course. (Attending OSHA, CPR & Safety Courses required for maintaining employment are not acceptable.)
(e)	Attaining an OT specialty or board certification (i.e., Certified Hand Therapist.)	10 Credits	20 Credits	Award of certification within the renewal cycle.
(f)	Making professional presentations at state, national or international workshops, seminars, and conferences.	1 Hour Equals 2 Credits	20 Credits	Copy of presentation, or program listing.
(g)	Panel and/or poster presentations for state, national, or international workshops, seminars, and conferences.	1 Presentation Equals 1 Credit	12 Credits	Copy of presentation, or program listing.
(h)	Publication of an OT article in non-peer-reviewed publication (e.g., OT Practice, SIS Quarterly, Advance, Community Newsletters, etc.)	1 Article Equals 5 Credits	20 Credits	Copy of publication.

(Rule 1150-02-.12, continued)

(i)	Publication of article in peer-reviewed professional publication (e.g., journals, book chapter, research paper)	1 Article Equals 10 Credits	20 Credits	Copy of publication.
(j)	Publication of chapter (s) in occupational therapy or related professional textbook.	1 Chapter Equals 10 Credits	20 Credits	Copy of text and original letter from editor.
(k)	Mentoring a licensed OT colleague to improve the skills of the protégé. (Mentor must be currently licensed).	10 Hours Equals 2 Credits	12 Credits	Goals and objectives, analysis of protégé performance. (See guidelines)
(l)	Mentoring other professionals in good standing to improve the skills of the protégé. (Mentor must be currently licensed.)	10 Hours Equals 2 Credits	12 Credits	Goals and objectives, analysis of protégé performance. (See guidelines)
(m)	Mentoring with other professionals in good standing to improve the skills of the protégé. (Protégé must be currently licensed.)	10 Hours Equals 2 Credits	12 Credits	Goals and objectives established in collaboration with the mentor and self-analysis of performance. (See guidelines)
(n)	Reflective occupational therapy practice in collaboration with an advanced licensed OT colleague to improve one's skill level.	10 Hours Equals 2 Credits	12 Credits	Verification of skills obtained. Evaluation experience. Analysis of learning. (See guidelines)
(o)	Guest lecturer, teaching OT related academic course per semester (must not be one's primary role). For one time lecture use presentation value, see subparagraph (f).	1 College Credit Hour Equals 6 Credits	20 Credits	Date, lecture or academic course title, name of institution, original letter from instructor regarding time spent in classroom, and course/lecture goals and objectives.

(Rule 1150-02-.12, continued)

(p)	Independent reading peer-reviewed, role-related professional articles/chapters in textbook, and writing a report describing the implications for improving skills in one's specific role. Current copyright on textbook edition, which should not exceed 5 years at time of licensure renewal. Textbooks required to be read for academic courses or audit courses are not allowed.	5 Articles and / or Chapters Equal 1 Credit	12 Credits	Annotated bibliography and analysis of how articles impacted improving skills in one's role. (See guidelines)
(q)	Providing professional in-service training and/or instruction for occupational therapists, occupational therapy assistants, and related professionals.	1 Hour Equals 1 Credit	12 Credits	In-Service training attendance records, goals, and objectives with verification letter from supervisor.
(r)	Making presentations for local organizations/associations/groups on OT related topic. (e.g., energy conservation, back care and prevention of injury.)	1 Hour Equals 1 Credit	12 Credits	Date and location of presentation, copy of presentation or program listing; organization's contact person.

(Rule 1150-02-.12, continued)

(s)	Level II fieldwork direct supervision OT or OTA (Not one's primary employment role.)	4 Credit per each Week of Supervision Per Student Supervised	12 Credits	Documentation required, name of student(s), letter of verification from school, dates of fieldwork. Co-supervision is acceptable; maintain dates & times when acting as primary student supervisor. Apply appropriate credits based on time spent supervising.
	<u>1. Level I fieldwork direct supervision OT or OTA (Not one's primary employment role.)</u>	<u>1 Credit per Student Supervised</u>	<u>12 Credits (A licensee may not receive more than 12 Credits for fieldwork supervision total.)</u>	<u>Documentation required, name of student(s), letter of verification from school, dates of fieldwork. Co-supervision is acceptable; maintain dates & times when acting as primary student supervisor. Apply appropriate credits based on time spent supervising.</u>
	<u>2. Level II fieldwork direct supervision OT or OTA (Not one's primary employment role.)</u>	<u>1 Credit per each week of supervision, per student supervised</u>	<u>12 Credits (A licensee may not receive more than 12 Credits for fieldwork supervision total.)</u>	<u>Documentation required, name of student(s), letter of verification from school, dated of fieldwork. Co-supervision is acceptable; maintain dates & times when acting as primary student supervisor. Apply appropriate credits based on time spent supervising.</u>
(t)	Professional manuscript review (editing) for journals or textbooks.	5 Hours Equals 1 Credit	12 Credits	Letter from publishing organization, verifying time spent.

(Rule 1150-02-.12, continued)

(u)	Formal academic coursework	1 Credit Hour per Semester Equals 10 Credits	20 Credits	Official transcript from an accredited educational institution.
(v)	Auditing formal academic coursework.	15 Clock Hours Equals 2 Credits	12 Credits	Original letter from instructor regarding time in class or labs at accredited schools. Report by OT/OTA on learning objectives accomplished.
(w)	Professional study group/online study group designed to advance knowledge through active participation.	3 Hours Equals 1 Credit	20 Credits	Group attendance records; study group goals; analysis of goal attainment and learning. (See guidelines)
(x)	Outcomes of self-assessment and professional development plan.	2 Credits for Self- Assessment and Professional Development Plan	2 Credits	Acceptable documents include a completed formal self-assessment and professional development plan describing how goals were met and how they impacted competence and skills.
(y)	Extensive scholarly research activities, or extensive outcome studies (defined as research associated with, e.g., grants, post graduate studies, peer reviewed journals)	10 Credits	20 Credits	Grant funding number, abstract- executive summary and/or copies of the completed research/studies.
(z)	Collaborative or Clinical Research activities	5 Credits	10 Credits	Executive summary and/or copies of the completed research studies or letter of verification from senior researcher or supervisor.
(aa)	Fellowship Training in specific area.	10 Credits (Minimum 12 Weeks)	12 Credits	Certificate awarded from sponsoring organization to include dates and learning objectives.

(Rule 1150-02-.12, continued)

(bb)	Independent learning/study (e.g., CE articles, video, audio, and/or online courses.)	2 Hours Equals 1 Credit	12 Credits	CEUs, certificate of completion and # of contact hours awarded.
(cc)	Interactive online courses.	1 Hour Equals 1 Credit	12 Credits	CEUs, certificate of completion and # of contact hours awarded.
(dd)	External self-study series.	1 Hour Equals 1 Credit	20 Credits	Certificate of completion.
(ee)	Development of instructional materials using alternative media such as: video, audio and/or software programs to advance professional skills of others (not for proprietary use).	5 Credits	12 Credits	Program description and media/software materials available if requested during validation process.

(12) Documentation of compliance.

- (a) Each licensee must retain documentation of completion of all continued competence requirements of this rule for a period of five (5) years from when the requirements were completed. This documentation must be produced for inspection and verification, if requested in writing by the Board during its verification process.
- (b) The licensee must, within forty-five (45) days of receipt of a request from the Board, provide evidence of continued competence activities.
- (c) Any licensee who fails to complete the continued competence activities or who falsely certifies completion of continued competence activities may be subject to disciplinary action pursuant to T.C.A. §§ 63-13-108, 63-13-209, and 63-13-210.

(13) Reinstatement/Reactivation of an Expired, Retired or Inactive License.

- (a) Expired, retired, or inactive for three (3) years or less - An individual whose license has expired, or has been retired or inactive for three (3) years or less shall submit the appropriate application and documentation of continued competence, as provided in paragraph (12), for the two (2) year period that precedes the reinstatement/reactivation year.
- (b) Expired, retired or inactive more than three (3) years
 - 1. An individual whose license has expired, or has been retired or inactive for more than three (3) years shall submit the appropriate application and documentation of continued competence, as provided in paragraph (12), for the two (2) year period that precedes the reinstatement/reactivation year; and
 - 2. The Board may, at its discretion, require additional education, supervised clinical practice, or successful passage of examinations.

(Rule 1150-02-.12, continued)

- (14) The Board, in cases of documented illness, disability, or other undue hardship, may waive the continued competence requirements and/or extend the deadline to complete continued competence requirements. To be considered for a waiver of continued competence requirements, or for an extension of the deadline to complete the continued competence requirements, a licensee must request such in writing with supporting documentation before the end of the two (2) year period in which the continued competence requirements were not met.

Authority: T.C.A. §§ 4-5-202, 4-5-204, 63-13-108, 63-13-204, 63-13-209, 63-13-210, and 63-13-215.

Administrative History: Original rule filed March 24, 2005; effective June 7, 2005. Amendment filed April 17, 2007; effective July 1, 2007.

1150-02-.13 ADVERTISING.

- (1) Policy Statement. The lack of sophistication on the part of many of the public concerning occupational therapy services, the importance of the interests affected by the choice of an occupational therapist and the foreseeable consequences of unrestricted advertising by occupational therapists, require that special care be taken by occupational therapists to avoid misleading the public. The occupational therapist must be mindful that the benefits of advertising depend upon its reliability and accuracy. Since advertising by occupational therapists is calculated and not spontaneous, reasonable regulation designed to foster compliance with appropriate standards serves the public interest without impeding the flow of useful, meaningful, and relevant information to the public.
- (2) Definitions
 - (a) Advertisement. Informational communication to the public in any manner designed to attract public attention to the practice of an occupational therapist who is licensed to practice in Tennessee.
 - (b) Licensee - Any person holding a license to practice occupational therapy in the State of Tennessee. Where applicable this shall include partnerships and/or corporations.
 - (c) Material Fact - Any fact which an ordinary reasonable and prudent person would need to know or rely upon in order to make an informed decision concerning the choice of occupational therapists to serve his or her particular needs.
 - (d) Bait and Switch Advertising - An alluring but insincere offer to sell a product or service which the advertiser in truth does not intend or want to sell. Its purpose is to switch consumers from buying the advertised service or merchandise, in order to sell something else, usually for a higher fee or on a basis more advantageous to the advertiser.
 - (e) Discounted Fee - Shall mean a fee offered or charged by a person for a product or service that is less than the fee the person or organization usually offers or charges for the product or service. Products or services expressly offered free of charge shall not be deemed to be offered at a "discounted fee".
- (3) Advertising Fees and Services
 - (a) Fixed fees. Fixed fees may be advertised for any service. It is presumed unless otherwise stated in the advertisement that a fixed fee for a service shall include the cost of all professional recognized components within generally accepted standards that are required to complete the service.