PRACTICE OF THE FUTURE: IMPLICATIONS OF THE NEW LICENSURE ACT

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Process – Maureen Mulhall

- Time frames
- Process
- Help needed
Process

HB2996

Signed into law August 8, 2013
Effective January 1, 2014
Sunsets January 1, 2024

Rules

Proposed early 2014
Role of ILOTA – Peggy Nelson
Licensure Laws

• AOTA has partnered with state associations for over 25 years to enact state licensure laws
• Licensure laws establish a legally defined scope of practice
• Definition of scope of practice in the state is the most important aspect of professional practice
• Ensures practitioners the ability to provide services in the settings for which they are trained, educated, and qualified
State Association Role in Advocacy

- Partner with AOTA on enacting and updating licensure laws
- Identify current trends with state and national legislation affecting the practice of occupational therapy in Illinois
- Serve as liaison between members and legislative bodies
- Facilitate communication on advocacy topics throughout the state
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Identify Current Trends/Issues

- Member of ASAP list serve
- Receive bi-weekly report on State Health Care Reform Implementation from Chuck Willmarth, Director of State Affairs and Reimbursement & Regulatory Policy for AOTA
- Collaborate with IPTA and ISHA on overlapping issues
- Partner with lobbyist Maureen Mulhall to interpret legislative changes into meaningful information
Serve as Liaison

- Collaborate with IOTPAC for political events
- Participate in special committee meetings (i.e. Early Intervention)
- Attend lobby day events
- Partner with AOTA special interest groups
Facilitate Communication

- Updates on ILOTA website
- Advocacy articles included in Communique Newsletter
- Monthly “News You Can Use” on website
- ILOTA list serve
- ILOTA bulletin boards
- Quarterly ILOTA board meetings
Act vs Rules

Act contains general information
Rules contain more details
Definitions
Definitions

Sec. 2. Definitions. In this Act:

1. "Department" means the Department of Professional Regulation.
2. "Director" means the Director of Professional Regulation.
3. "Board" means the Illinois Occupational Therapy Licensure Board appointed by the Director.
4. "Occupational therapist" means a person initially registered and licensed to practice occupational therapy as defined in this Act, and whose license is in good standing.
5. "Occupational therapy assistant" means a person initially registered and licensed to assist in the practice of occupational therapy under the supervision of a licensed occupational therapist, and to implement the occupational therapy treatment program as established by the licensed occupational therapist.

- (expanded role to include entire treatment program)
(6) "Occupational therapy" means the therapeutic use of purposeful and meaningful occupations or goal-directed activities to evaluate and provide interventions for individuals, groups, and populations who have a disease or disorder, an impairment, an activity limitation, or a participation restriction that interferes with their ability to function independently in their daily life roles, including activities of daily living (ADLs) and instrumental activities of daily living (IADLs). Occupational therapy services are provided for the purpose of habilitation and rehabilitation, and to promote health and wellness.
Occupational therapy may be provided via technology or telecommunication methods, also known as telehealth, however the standard of care shall be the same whether a patient is seen in person, through telehealth, or other method of electronically enabled health care.
Definitions - cont

Occupational therapy practice may include any of the following:

(a) remediation or restoration of performance abilities that are limited due to impairment in biological, physiological, psychological, or neurological processes;

(b) *modification or* adaptation of task, process, or the environment or the teaching of compensatory techniques in order to enhance performance;

(c) disability prevention methods and techniques that facilitate the development or safe application of performance skills; and

(d) health *and wellness* promotion strategies, *including self-management strategies,* and practices that enhance performance abilities.
Definitions- cont

- The licensed occupational therapist or licensed occupational therapy assistant may assume a variety of roles in his or her career including, but not limited to, practitioner, supervisor of professional students and volunteers, researcher, scholar, consultant, administrator, faculty, clinical instructor, fieldwork educator, and educator of consumers, peers, and family.
“Occupational therapy services” means services that may be provided to individuals, groups, and population, when provided to treat an occupational therapy need including the following:

(a) evaluating, developing, improving, sustaining, or restoring skills in activities of daily living, work, or productive activities, including instrumental activities of daily living and play and leisure activities;

(b) evaluating, developing, remediating, or restoring sensorimotor, cognitive, or psychosocial components of performance with considerations for cultural context and activity demands that affect performance;
Definitions - cont

(c) designing, fabricating, applying, or training in the use of assistive technology, *adaptive devices, seating and positioning*, or temporary, orthoses and training in the use of orthoses and prostheses;

(d) adapting environments and processes, including the application of ergonomic principles, to enhance performance and safety in daily life roles;

(e) for the occupational therapist or occupational therapy assistant possessing advanced training, skill, and competency as demonstrated through *criteria* that shall be determined by the Department, applying physical agent modalities as an adjunct to or in preparation for engagement in occupations;
(f) evaluating and providing intervention in collaboration with the client, family, caregiver, or others;
(g) educating the client, family, caregiver, or others in carrying out appropriate nonskilled interventions;
(h) consulting with groups, programs, organizations, or communities to provide population-based services;
(i) **assessing, recommending, and training in techniques to enhance functional mobility, including wheelchair management**;
Definitions- cont

(j) driver rehabilitation and community mobility;

(k) management of feeding, eating, and swallowing to enable or enhance performance of these tasks;

(l) low vision rehabilitation;

(m) lymphedema and wound care management;

(n) pain management; and

(o) care coordination, case management, and transition services.
Referral Requirements
(225 ILCS 75/3.1)  
(Section scheduled to be repealed on January 1, 2014)  
Sec. 3.1. Referrals. A licensed occupational therapist or licensed occupational therapy assistant may consult with, educate, evaluate, and monitor services for individuals, groups and populations concerning occupational therapy needs. Except as indicated in subsections (b) and (c) of this section, implementation of direct occupational therapy treatment to individuals for their specific health care conditions shall be based upon a referral from a licensed physician, dentist, podiatrist, advanced practice nurse who has a written collaborative agreement with a collaborating physician to provide or accept referrals from licensed occupational therapists, physician assistant who has been delegated authority to provide or accept referrals from or to licensed occupational therapists, or optometrist.
Referral

(b) A referral is not required for the purpose of providing consultation, habilitation, screening, education, wellness, prevention, environmental assessments, and work related ergonomic services to individuals, groups, or populations.
(c) Referral from a physician or other health care provider is not required for evaluation or intervention for children and youths if an occupational therapist or occupational therapy assistant provides services in a school-based or educational environment, including the child’s home.
Referral

• An occupational therapist shall refer to a licensed physician, dentist, optometrist, advanced practice nurse, physician assistant, or podiatrist any patient whose medical condition should, at the time of evaluation or treatment, be determined to be beyond the scope of practice of the occupational therapist.

(Source: P.A. 92-297, eff. 1-1-02; 93-461, eff. 8-8-03; 93-962, eff. 8-20-04.)
Aide

- 225 ILCS 75/3.3
- Rules. The Department shall promulgate rules to define and regulate the activities of an aide in occupational therapy.
  (Source: P.A. 92-297, eff. 1-1-02)
• No registry for competence in any service area, IDFPR does not monitor
• Complaint driven, responsibility is on the individual therapist
Words/Initials

- Words or initials you may use with his or her name or place of business.
- You may use the words occupational therapist or licensed occupational therapist
- Letters- O.T., OT/L, OTR/L
- You may use the words occupational therapy assistant or licensed occupational therapy assistant
- Letters- O.T.A., OTA/L, COTA/L
• The Department may refuse to issue or renew, or may revoke, suspend, place on probation, reprimand or take other disciplinary or non-disciplinary action as the Department may deem proper.
  • Engaging in dishonorable, unethical or unprofessional conduct of a character likely to deceive, defraud or harm the public.
  • Professional incompetence or gross neglect
  • Malpractice
Restoration
a) A person seeking restoration of a license that has expired or been placed on inactive status for 5 years or more shall file an application with the Division, on forms supplied by the Division, along with the required fees specified in Section 1315.130 and proof of 12 hours of continuing education in accordance with Section 1315.130 for each year the license was lapsed or inactive up to a maximum of sixty (60) hours. At least 24 of which must have occurred within 24 months prior to the restoration application.
Section 1315.160 Restoration

In addition, the applicant shall also submit one of the following:

1) Sworn evidence of active practice in another jurisdiction. The evidence shall include a statement from the appropriate board or licensing authority in the other jurisdiction that the licensee was authorized to practice during the term of said active practice; or

2) An affidavit attesting to military service as provided in Section 11 of the Act (no fee is required when restoring from a period of military service if application is made within 2 years after termination of the service); or
Section 1315.160 Restoration

3) Verification of successful completion of the Certification Examination of the NBCOT for licensure as a registered occupational therapist or certified occupational therapy assistant within the last 5 years prior to applying for restoration; or

4) Evidence of successful completion of a re-entry program, through an accredited college or university authorized to provide an approved program for occupational therapists or occupational therapy assistants. The re-entry program will be clearly labeled as such and may include courses from an accredited entry level occupational therapy program or occupational therapy assistant program. The certificate of completion or transcript will be submitted to the Division. After receipt of the license, the applicant shall complete 30 hours of supervised work.
Section 1315.160 Restoration

b) A registrant seeking restoration of a license that has been expired for less than 5 years shall have the license restored upon payment of fees required by Section 1315.130. A licensee seeking restoration of a license shall be required to submit proof of the required **12 hours of continuing education in accordance with Section 1315.145 for each year the license was lapsed or inactive up to a maximum of sixty (60) hours. At least 24 of which must have occurred within 24 months prior to the restoration application.**
c) A registrant seeking restoration of a license that has been on inactive status for less than 5 years shall have the license restored upon payment of the current renewal fee. A licensee seeking restoration of a license shall be required to submit proof of 12 hours of continuing education in accordance with Section 1315.145 for each year the license was lapsed or inactive up to a maximum of sixty (60) hours (e.g., certificate of attendance or completion) At least 24 of which must have occurred within 24 months prior to the application for restoration.
d) When the accuracy of any submitted documentation or the relevance or sufficiency of the course work or experience is questioned by the Division or the Board because of lack of information, discrepancies or conflicts in information given or a need for clarification, the applicant seeking licensure shall be requested to:

1) Provide information as may be necessary; and/or

2) Appear for an interview before the Board to explain the relevance or sufficiency, clarify information, or clear up any discrepancies or conflicts in information.
COTA/OTR Collaboration
Section 1315.163 Supervision of an Occupational Therapy Assistant

a) A certified occupational therapy assistant shall practice only under the supervision of a registered occupational therapist. Supervision is a process in which 2 or more persons participate in a joint effort to establish, maintain and elevate a level of performance and shall include the following criteria:

1) To maintain high standards of practice based on professional principles, supervision shall connote the physical presence of the supervisors and the assistant at regularly scheduled supervision sessions.

2) Supervision shall be provided in varying patterns as determined by the demands of the areas of patient/client service and the competency of the individual assistant. Such supervision shall be structured according to the assistant's qualifications, position, level of preparation, depth of experience and the environment within which he/she functions.
3) The supervisors shall be responsible for the standard of work performed by the assistant and shall have knowledge of the patients/clients and the problems being discussed. **Co-signature does not reflect supervision.**

4) A minimum guideline of formal supervision is as follows:

   A) The occupational therapy assistant who has less than one year of work experience or who is entering new practice environments or developing new skills shall receive a minimum of 5% on-site face-to-face supervision from a registered occupational therapist per month. On-site supervision consists of direct, face-to-face collaboration in which the supervisor must be on the premises. The remaining **supervised** work hours must be supervised. shall be a combination of telephone, electronic communication, telecommunication technology or face-to-face consultation.
Section 1315.163 Supervision of an Occupational Therapy Assistant

B) The occupational therapy assistant with more than one year of experience in his/her current practice shall have a minimum of 5% direct supervision from a registered occupational therapist per month. The 5% direct supervision shall consist of 2% direct, face-to-face collaboration. The remaining 3% supervision shall be a combination of telephone, or electronic communication, or telecommunication technology or face-to-face consultation.

b) Record Keeping. It is the responsibility of the occupational therapy assistant to maintain on file at the job site signed documentation reflecting supervision activities. This supervision documentation shall contain the following: date of supervision, means of communication and information discussed and the outcomes of the interaction. Both the supervising occupational therapist and the occupational therapy assistant must sign each entry.
Continuing Education Requirements

Regulation
Rules
Continuing Education Requirement

- Applicant shall provide proof of having met the continuing competency requirements set forth in the rules of the Department.
- The Department shall provide for an orderly process for the reinstatement of licenses that have not been renewed for failure to meet the continuing competency requirements.
- The continuing competency requirements may be waived in cases of extreme hardship as defined by rule.
- The Department shall establish by rule a means for verifying the completion of the continuing competency required by this section.
- This verification may be accomplished through audits of records, by requiring the filing of continuing competency certificates with the department.
- Or by any other means established by the department.
Rules Clarification for CE

- Language clarification for approved providers
- Continue with compatibility with NBCOT
- Clarification of on line learning vs independent study
Section 1315.145 Continuing Education

a) Continuing Education (CE) Hour Requirements

1) Every occupational therapist and occupational therapy assistant shall complete 24 contact hours of CE relevant to the practice of occupational therapy during each pre-renewal period as a condition of renewal. A pre-renewal period is the 24 months preceding December 31 in the year of the renewal. 24 contact hours of CE is equivalent to 12 units of Continued Competency Activities (CCA) (2 contact hours = 1 unit).
Continuing Education

2) In each renewal period one contact hour must be obtained by participation in an ethics course.

3) A CE contact hour equals 50 minutes. After completion of the initial CE hour, credit may be given in one-half hour increments.

4) Courses that are part of the curriculum of an accredited university, college or other educational institution shall be allotted CE credit at the rate of 15 CE hours for each semester hour or 10 CE hours for each quarter hour of school credit awarded. There is no maximum on the amount of hours earned in this manner per renewal period.
Continuing Education

5) A renewal applicant is not required to comply with CE requirements for the first renewal following the original issuance of the license.

6) Individuals licensed in Illinois but residing and practicing in other states must comply with the CE requirements set forth in this Section.

7) CE credit hours used to satisfy the CE requirements of another state may be submitted for approval for fulfillment of the CE requirements of the State of Illinois if they meet the requirements for CE in Illinois.

8) Credit shall not be given for courses taken in Illinois from unapproved sponsors.
Approved Continuing Education

1) All CE activities shall be relevant to the advancement, extension and enhancement of professional clinical skills and scientific knowledge in the practice of occupational therapy or fulfilling the other professional roles of an occupational therapist or occupational therapy assistant, provide experiences that contain scientific integrity, relevant subject matter and course materials, and be developed and presented by persons with education and/or experience in the subject matter of the program.
Approved Continuing Education

2) All CE hours must be earned by verified attendance-at or participation, regardless of the method of delivery, in a program that is offered by an approved CE sponsor who meets the requirements set forth in subsection (c) or by other CE activities set forth in subsection (b). This includes distance learning CE courses. Examples of distance-learning courses include, but are not limited to web-based courses, webinars, moderated teleconferences or audio cassettes/videos of professional presentations offered by approved sponsors.
CE may also be earned from the following activities:

- 3) Additional CE activities
  A  Independent Study
  i) Independent Study Activities includes but is not limited to reading books or journal articles, reviewing professional videos, study groups etc.
  ii) A licensee may earn contact hours spent in an independent study activity with a maximum of 4 contact hours per renewal period.
  ii) Documentation shall include title, author, publisher, time spent, and date of completion. A licensee shall include a statement that describes how the activity relates to a licensee's current or anticipated roles and responsibilities.
CE may also be earned from the following activities:

B) Professional Study group
   i) Participating in a professional study group/online study group designed to advance knowledge through active participation.
   ii) A licensee may earn contact hours spent in a professional study group with a maximum of 6 contact hours per renewal period.
Mentorship /Participation as a Mentor or Mentee

i) Participation in a formalized mentorship agreement with a mentor as defined by a signed contract between the mentor and mentee that outlines specific goals and objectives and designates the plan of activities that are to be met by the mentee.

ii) A licensee may earn contact hours spent in activities directly related to achievement of goals and objectives with a maximum of 8 contact hours per renewal period.

iii) Documentation shall include name of mentor and mentee, copy of signed contract, dates, hours spent in and focus of mentorship activities, and outcomes of mentorship agreement.
Fieldwork Supervision

 Participation as the primary clinical fieldwork educator for Level I/Level II OT or OTA fieldwork students.

 i A licensee, as the primary clinical fieldwork educator for Level I/Level II OT or OTA fieldwork student, may earn 2-1 contact hours per week of supervision for each Level I student supervised. A licensee may earn 6 contact hours for each Level II student supervised. A licensee may earn a maximum of 8-12 contact hours for student supervision per renewal period. It must not be one’s primary role.

 ii Documentation shall include verification provided by the school to the fieldwork educator with the name of student, school, and dates of fieldwork or the signature page of the completed student evaluation form. Evaluation scores and comments should be deleted or blocked out.

 iii If student supervision is provided by more than one licensee, OT or OTA, therapist, the contact hours shall be divided between the supervisors.
Professional writing

—i—First time publication of a professional or non-professional book, chapter, or article. A licensee may earn a maximum per renewal period as follows:
—i)—18 hours as an author of a book;
—ii)—12 hours as an author of a chapter;
—iii)—12 hours as an author of an article in a professional publication;
—iv)—6 hours as an author of an article in a non-professional publication;
—v)—12 hours as an editor of a book.

Documentation shall consist of full reference for publication including: title, author, editor, and date of publication, or copy of acceptance letter if not yet published.
Presentation and Instruction

__i__ First time or significantly revised presentation of an academic course or workshop, seminar, in-service, electronic or Web-based course. Speeches made at luncheons or banquets or any other presentation not within the guidelines of this Part are not eligible for CE credit.

__ii__ A licensee who serves as an instructor, speaker or discussion leader of a CE program will be allowed CE course credit for actual presentation time, plus actual preparation time of up to 2 hours for each hour of presentation. Preparation time shall not be allowed for presentations of the same course and will only be allowed for additional study or research. In no case shall credit for actual time of presentation and preparation be given for more than 12 hours during any renewal period.

__iii__ Documentation shall include a copy of official program/schedule/syllabus, including presentation title, date, hours of presentation, and type of audience, or verification of the presentation signed by the sponsor.
Research

i Development of or participation in a research project or development of an evidence based practice project

ii A licensee may earn credit for hours spent working on a research project, for a maximum of 12 hours per renewal period.

iii Documentation includes verification from the primary investigator indicating the name of the research project or evidence based practice project, dates of participation, major hypotheses or objectives of the project, and licensee's role in the project.
Grants

i. Development of a grant proposal.

ii. A licensee may earn credit for hours working on a grant proposal for a maximum of 12 hours per renewal period.

iii. Documentation includes name of grant proposal, name of grant source, purpose and objectives of the project, and verification from the grant author regarding licensee's role in the development of the grant if not the author.
Professional meetings and activities

_______i Participation in board or committee work with agencies or organizations in professionally related or community based areas programs to promote and enhance the practice of occupational therapy.

_______ii A licensee may earn 2 contact hours per appointment on a committee or board for one year for a maximum of 8 hours per renewal period.

_______iii Documentation includes name of committee or board, name of agency or organization, purpose of service, and description of licensee's role. Participation must be validated by an officer or representative of the organization or committee.
Volunteer Service

i. Provide volunteer services that utilize occupational therapy skills and experiences to enhance and/or better the lives or situations of organizations, populations, communities, or individuals.

ii. A licensee may earn 2 contact hours per 5 hours of volunteer service, for a maximum of 12 hours per renewal period.

iii. Documentation includes name of agency or organization, purpose of service, and description of licensee's role and dates/hours and outcomes of volunteer service. Participation must be validated by an officer or representative of the organization or agency.
Advanced competence recognition/specialty certification

i  Advanced recognition and/or specialty certification from a nationally recognized certifying body or approved provider.

ii  A licensee may earn 12 contact hours for each advanced competence recognition or specialty certification credential earned during a renewal period.

iii  Documentation includes certificate of completion or other documentation that identifies satisfactory completion of requirements for obtaining advanced competence or specialty certification.
AOTA approved post-professional clinical residency or fellowship

1) A licensee may earn 1 contact hours for every 2 hours spent in clinical residency or fellowship for a maximum of 24 hours per renewal period.
Continuing Education Sponsors and Programs

Approved sponsor, as used in this Section, shall mean:

A) American Occupational Therapy Association (AOTA) and its affiliates;

B) Colleges, universities, or community colleges or institutions with occupational therapy or occupational therapy assistant education programs accredited by the Accreditation Council for Occupational Therapy Education;

C) American Occupational Therapy Association (AOTA) approved sponsors;

D) American Physical Therapy Association and the Illinois Physical Therapy Association;
Continuing Education Sponsors and Programs

C) AOTA Approved Providers;

E) American Speech and Hearing Association and the Illinois Speech and Hearing Association;

F) American Medical Association and the Illinois State Medical Society and their affiliates;

G) Regionally Accredited Colleges and Universities;

H) American Society of Hand Therapists;

I) Licensed Hospitals;

J) State Agencies
K)- Any other person, firm, association, corporation, or group that has been approved and authorized by the Division pursuant to subsection (c)(2) upon the recommendation of the Board to coordinate and present CE courses or programs.

2) Entities seeking a license as a CE sponsor pursuant to subsection (c)(1)(F) shall file a sponsor application, along with the required fee set forth in Section 1315.130. (State agencies, State colleges and State universities in Illinois shall be exempt from paying this fee.) The applicant shall certify to the following:

A) That all courses and programs offered by the sponsor for CE credit will comply with the criteria in subsection (c) and all other criteria in this Section. The applicant shall be required to submit a sample 3 hour CE program with course materials, presenter qualifications and course outline for review prior to being approved as a CE sponsor;

B) That the sponsor will be responsible for verifying attendance at each course or program, and provide a certification of attendance as set forth in subsection (c)(7); and

C) That, upon request by the Division, the sponsor will submit evidence necessary to establish compliance with this Section. This evidence shall be required when the Division has reason to believe that there is not full compliance with the statute and this Part and that this information is necessary to ensure compliance.

3) Each sponsor shall submit by December 31 of each odd numbered year a sponsor application along with the renewal fee set forth in Section 1315.130. With the application, the sponsor shall be required to submit to the Division a list of all courses and programs offered in the prerenewal period, which includes a course description and location, date and time the course was offered.
9) All programs given by sponsors approved by the Division under this Rule provide CE’s to occupational therapists and occupational therapy assistants and not to any other professionals. A specific license for other professions must be obtained from the Division.
Section 1315.162 Modalities in Occupational Therapy

Occupational therapy services include the use of physical agent modalities for occupational therapists and occupational therapy assistants who have the training, skill and competency to apply these modalities.

a) Physical agent modalities:
   1) refer to those modalities that produce a response in soft tissue through the use of light, water, temperature, sound, or electricity;
   2) are characterized as adjunctive methods used in conjunction with or in immediate preparation for: patient involvement in purposeful activity; the use of ergonomic principles; the adaptation of environments and processes to enhance functional performance; or the promotion of health and wellness; and
Section 1315.162 Modalities in Occupational Therapy

3) include but are not limited to the following:

A) electrical stimulation;

B) iontophoresis;

C) superficial heating agents;

D) cryotherapy; and

E) deep heating agents
Following is the training required for the use of physical agent modalities used by occupational therapists and occupational therapy assistants.

1) Modalities

A) Modalities using electricity would cover: pain control, edema reduction, and muscle reeducation. Examples include, but are not limited to: biofeedback, NMES/FES, TENS, HVGS, interferential, iontophoresis. The training shall include:

i) a minimum of 12 hours of didactic training in a program defined in this Section that includes demonstration and return demonstration and an examination; and
ii) 5 treatments in each modality supervised by a licensed health care professional trained in the use of the modality.

B) Thermal and mechanical modalities would include superficial and deep heat and cyrotherapy. Examples include, but are not limited to, hot and cold packs, ice massage, fluidotherapy, warm whirlpool, cool whirlpool, ultrasound, phonophoresis, paraffin, contrast baths.
Section 1315.162 Modalities in Occupational Therapy

i) a minimum of 3 hours of didactic training in a program defined in this Section that includes demonstration and return demonstration and an examination. The training session should include the mechanics and precautions of using the modality safely as well as case studies and problem solving on when to use. The ethics, economics, liability, and insurance issues related to using modalities should also be addressed in the educational process.

ii) 5 treatments in each modality supervised by a licensed health care professional trained in the use of the modality.
Section 1315.162 Modalities in Occupational Therapy

2) The didactic training shall be obtained through educational programs, workshops, or seminars offered by a college or university, Illinois Occupational Therapy Association, the American Occupational Therapy Association and its affiliates, Illinois Physical Therapy Association, the American Physical Therapy Association (or its chapters), National Board of Certification of Occupational Therapy (NBCOT), or the Hand Therapy Certification Commission.
Section 1315.162 Modalities in Occupational Therapy

3 The training shall be documented and made available to the Department or Board upon request. Training shall be completed prior to the use of these modalities. Documentation shall include:

A) a transcript or proof of successful completion of the coursework, including the number of educational hours;
B) the name and address of the individual or organization sponsoring the activity;
C) the name and address of the facility at which the activity was presented;
D) a copy of the course, workshop, or seminar description that includes topics covered, learning objectives, credentials of presenters and standards for meeting the objectives;
E) documentation of the 5 clinical treatments that includes date of the treatments, the modality and the name and credentials of the supervisor.
Section 1315.162 Modalities in Occupational Therapy

4) Clinical treatment demonstration shall include the following:
   (a) The ability to evaluate or contribute to the evaluation of the client, and make an appropriate selection of the modality to be utilized;
   (b) A thorough knowledge of the effects of the modality which is to be utilized;
   (c) The ability to explain the precautions, contraindications, and rationale of the specific modality utilized;
Section 1315.162 Modalities in Occupational Therapy

(d) The ability to formulate and justify the occupational therapy intervention plan specifically delineating the adjunctive strategy associated with the use of each modality;

(e) The capability to safely and appropriately administer the modality;

(f) The ability to properly document the parameters of intervention which include the client’s response to treatment and the recommendations for the progression of the intervention process.
Section 1315.162  Modalities in Occupational Therapy

5) Clinical supervisor for the treatment sessions shall:

(a) Be licensed or certified and in good standing in this profession or another profession within the state that permits the use of physical agent modalities;

(b) Supervision should occur with a practitioner at the same or greater professional level;

(c) Have a minimum of one (1) year of clinical experience in the use of physical agent modalities.
Section 1315.162 Modalities in Occupational Therapy

c) Occupational therapists and occupational therapy assistants who, prior to January 1, 2002, have attended training programs and have developed competencies in the use of physical agent modalities may demonstrate competency through proof of one or more of the following:

1) documentation of previous attendance and completion of the required training as stated in subsection (b);

2) documentation of professional experience at the work place through policy and procedures indicating the use of modalities, in-service training, proof of prior use. Such experience shall include at least 20 applications for each modality within the last 3 years;

3) documentation of attendance at educational programs, including post-professional programs, in-service training and specific certifications in the use of modalities; or

4) documentation of certification as a hand therapist from the Hand Therapy Certification Commission.

(Source: Added at 26 Ill. Reg. 18330, effective December 13, 2002)
What Else Can We Do For You?

Please contact the ILOTA office at office@ilota.org if you have any questions or suggestions

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