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To: *Judith Pachter Schulder*
Board Counsel
State Board of Occupational Therapy Education and Licensure

From: *LaVerne Russell, PT, OTR/L*
PA License #: OC000834L

Date: *June 22, 2011*

Subject: *Proposed Continuing Competency Regulations for Occupational Therapist*

Thank you for the opportunity to participate in the OT State Board Meeting on Monday June 13, 2011. I found it enlightening to follow the discussion related to the proposed regulations for OT continued competency. I do have to applaud the Board for considering at least one additional alternative, non-paid activities/consultation, but I still find the choices limiting. After much thought following the meeting I wanted to share my thoughts on the subject ... once again.

When I came to the meeting I felt confident that I would be able to meet the requirements for the proposed regulations without much additional activities but was concerned for many of my fellow OT's. At the end of the meeting on my ride home, however, I began to question my abilities to easily meet the requirements. I can do it but it will require additional time and effort to complete. I also questioned whether that additional work would truly add to my competency. This gave me the impetus to again write you to express my concerns, not as a representative for my company, but as an individual occupational therapist licensed in the state.

Take my case I am currently trained and licensed as an OT and PT which allows me to be exposed to a broad area of therapy. The majority of my clinical and professional activities are related to my employment as the Director of Clinical Operations for a large rehab company that focuses on geriatric care. This position has exposed me to so many facets of the therapy industry and has given me the opportunity to be the most involved, active and current in my profession. I am involved in orienting/training our clinicians, leading our clinical specialists, leading our student program, leading roll-out of clinical initiatives for our regions, providing input in clinical resources, providing reimbursement support, and QI/QA activities, doing clinical workshops and presentations ... just to name a few. I have had the opportunity to be involved in legislative activities surrounding state practice act issues for many states and disciplines which opened a whole new area of knowledge and professional advocacy. Most of my professional presentations and writing are part of my work. For me, maintaining and developing my skills and knowledge is gained by spending a considerable amount of time reading and researching professional journals, articles, and research documents; going to conferences and

continuing education course/workshops ... these are things are required by my position and that are important to me to keep me current and competent. In addition to all of this, I am currently enrolled in a Doctoral Program of Physical Therapy.

Most of the activities that I do to maintain my competence are related to my job duties ... will they count or do I now have to further push myself to find other outside activities that will fall into the required categories? Do I have to take more of an already shrinking personal time to meet these requirements when I feel actively involved and competent? From the narrow interpretations that are in the current regulations many of these activities would be difficult to achieve or would require additional expenditure of effort to meet the requirements.

As part of my reflection, I had the opportunity to discuss this issue with a member, actually the vice-chair, of the Maryland OT State Board. They recently revised their competency requirement and I wanted to know about the process they went through, their discussion and the thought process that went into their discussion. Some of the points she discussed that stood out for me were:

1. As a Board they had to keep reminding themselves that their purpose was to insure that real harm did not come to the consumer but also that they did not put up barriers that would limit the consumers' access to needed care.
2. Continued competence was not meant as a means of policing the professional but rather to provide guidelines and avenues for professional development.
3. There are already systems in place for reporting incompetent therapist through the reporting process/disciplinary process and that is the path that should be used rather than through regulations of continued competency activities.
4. They felt the competency process was an individual choice that each professional should be able to determine what activities they find would enrich them in a positive way. The Board's responsibility was to provide various avenues to achieve this rather than developing policies that would limit the professional.
5. They should not put in place regulations that would require the professionals to go above and beyond their normal professional development process to meet. They did not want to make it more difficult for OT's to maintain their license and practice in their state. The regulations were not meant to be a burden.
6. They treated the licensees as professionals.
7. They put some guidelines in place for each of the activities that they allow but they left it up to the professional to decide what best meets their needs for continued competence whether that is all through educational offerings or a combination of activities.

Maryland's continued competency policy really allows for a variety of activities and for those professionals who prefer to use educational activities as their avenue for achieving competence this is allowed. I have attached the Maryland guidelines for your review. Also, the Vice Chair of the Board has offered to come to meet with the Board to discuss their process should the Board be interested in the additional input.

I expect that the response of the Board will be that all of the same activities that are in the Maryland regulations are in the Pennsylvania regulations they are just grouped differently. I beg to differ, here is why:

1. They allow all credits to be achieved through educational activities.
2. They separate all activities rather than bundling them in 4 to 5 groups. For example, they separate educational workshops from academic courses so in my case I can take credit separately for educational workshops and the academic course that I take as part of my doctoral program. In Pennsylvania because it is bundled under one category I cannot achieve all of my credits from those two areas.
3. They provide a variety of activities but allow the professional to make the decision as to what activities best meets their needs for achieving the required credits for continued competency.

I do not think that there is a long way for the Board to go to make these regulations more easily achievable by clinicians. Some suggestions would be the following:

1. Consider expanding the activities that are allowed following the Maryland guidelines.
2. Consider separating the specific activities rather than staying within the 4 to 5 categories which would allow more choices and flexibility similar to the Maryland regulations
3. Consider allowing credits to be achieved through educational offerings only.

I would urge the Board to consider these changes in an effort to make this process less burdensome for the professionals. There are many professionals such as myself who though it may appear as if it should be easy to achieve the required credits may still have to make additional efforts above and beyond to be in compliance. I think what this may lead to are professionals who will check off the attestation statement for compliance each licensure renewal and take the chance that they are not audited or they may just choose to not renew. In either case how is this protecting the interests of the consumer? It may actually be harmful to the consumer by limiting the availability of professionals to provide the services to meet their healthcare needs.

Lastly I would also urge the Board to consider the offer of the Maryland Board member to attend the next meeting to hear from another Board that has recently addressed this issue. This is an important issue and having as much input as possible would be valuable.

Thank you for allowing me to express my opinions and concerns regarding this issue.

Respectfully submitted,
LaVerne Russell, OTR/L, PT

Title 10
DEPARTMENT OF HEALTH AND MENTAL HYGIENE
Subtitle 46 BOARD OF OCCUPATIONAL THERAPY PRACTICE
Chapter 04 Continuing Competency Requirement

Authority: Health Occupations Article, §§10-205 and 10-311, Annotated Code of Maryland

.01 Scope.

A. This chapter applies to all occupational therapists and occupational therapy assistants seeking to obtain, renew, reactivate, or reinstate licensure in Maryland.

B. The objectives of this chapter are to establish guidelines in order to:

- (1) Maintain professional competency, or improve professional competency, or both; and
- (2) Assure completion of continuing competency requirements for:
 - (a) Licensure;
 - (b) Renewal;
 - (c) Reactivation; or
 - (d) Reinstatement.

.02 Definitions.

A. In this chapter, the following terms have the meanings indicated.

B. Terms Defined.

- (1) "Competence" means an individual's capacity for performance in occupational therapy principles and procedures.
- (2) Competency.
 - (a) "Competency" means the demonstration of the pertinent knowledge of and performance skills in occupational therapy principles and procedures within the practice of occupational therapy and limited occupational therapy.
 - (b) "Competency" includes satisfactory completion of an educational program or experience, specialty certification, continuing education, or all of these.
- (3) Contact Hour.
 - (a) "Contact hour" means 1 hour spent in a continuing competency activity that meets the requirements of the Board and is approved as set forth in this chapter.
 - (b) "Contact hour" does not include orientations, introductions, refreshment breaks, receptions, other social gatherings, and meals which do not include an acceptable educational activity.
- (4) "Contact hour approval request" means a form provided by the Board for the purpose of obtaining Board approval of contact hours.
- (5) "Continuing competency committee" means a committee established and appointed by the Board to evaluate continuing competency programs and activities.
- (6) "Continuing competency requirement compliance report" means a form provided by the Board for the purpose of summarizing completion of continuing competency requirements.
- (7) "Occupational therapy principles" means:
 - (a) The use of therapeutic activities that promote independence in daily life roles;
 - (b) Remediation or restoration of performance abilities that are limited due to impairment in biological, physiological, psychological, or neurological processes;
 - (c) In order to enhance performance, the adaptation of task, process, or the environment, or the teaching of compensatory techniques;

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(d) Methods and techniques for preventing disability that facilitate the development of the safe application of performance skills;

(e) Health promotion strategies and practices that enhance performance abilities; and

(f) Education, instruction, and research in the practice of occupational therapy.

(8) Occupational Therapy Procedures.

(a) "Occupational therapy procedures" means:

(i) 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;

(ii) Developing, remediating, or restoring sensorimotor, perceptual, cognitive, or psychological components of performance;

(iii) Designing, fabricating, applying, or training in the use of assistive technology, splinting, or orthotic devices, including training in the use of prosthetic devices;

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

(v) Applying physical agent modalities as adjuncts to or in preparation for purposeful activity with appropriate training, as specified;

(vi) Promoting safe, functional mobility in daily life tasks;

(vii) Providing intervention in collaboration with the client, the client's family, the client's caregiver, or others;

(viii) Educating the client, the client's family, the client's caregiver, or others in carrying out appropriate nonskilled interventions; and

(ix) Consulting with groups, programs, organizations, and communities to provide population-based services.

(b) "Occupational therapy procedures" do not include the adjustment or manipulation of any of the osseous structures of the body or spine.

(9) Occupational Therapy Role-Related Activities.

(a) "Occupational therapy role-related activities" means activities which are relevant to and that augment a licensee's professional, job-related duties and responsibilities.

(b) "Occupational therapy role-related activities" may include inservices, course work, or workshops relative to:

(i) Health care administration, management, or leadership;

(ii) Other disciplines' clinical practices that relate to occupational therapy principles and procedures;

(iii) Billing and regulatory issues;

(iv) Health care computer programs that provide information to benefit clients or client education; or

(v) Cultural competency.

(c) "Occupational therapy role-related activities" do not include:

(i) Preparation for national or regional standardized tests, such as the Graduate Record Examination;

(ii) Cardiopulmonary resuscitation (CPR);

(iii) Job or facility orientation activities;

(iv) Certificate or degree programs in unrelated fields; or

(v) Foreign language classes for personal use.

(10) "Provider" means a college, university, institution, organization, association, or individual that offers workshops, seminars, conferences, college-level courses, graduate-level courses, telecommunication network courses, or video-taped presentations that maintain or improve professional competency.

.03 Maintaining Records of Contact Hours.

A. A licensee shall retain supporting documents relative to continuing competency requirements for a period of 4 years after the date of renewal for inspection by the Board. These documents may be audited by the Board at any time.

B. A licensee shall retain physical agent modality documentation for the duration of the licensee's professional career in occupational therapy, in accordance with COMAR 10.46.06.

C. At the time of licensure, renewal, reactivation, or reinstatement, a licensee shall attest to completion of the required contact hours during the specified time frame.

D. A licensee's submission of any false statement regarding continuing competency requirements shall result in formal disciplinary action by the Board.

E. A licensee's failure to substantiate contact hours upon request of the Board shall result in formal disciplinary action by the Board.

.04 Licensure and Contact Hour Requirements.**A. Time Frame.**

(1) Licensure Time Frame. A license to practice occupational therapy or limited occupational therapy is valid for 1 year extending from July 1 to June 30 of the next year.

(2) Continuing Competency Time Frame. The period for completing continuing competency requirements for licensure renewal extends from January 1 to December 31 of the year before renewal.

(3) The licensee may not carry over contact hours from one continuing competency time frame to another without written consent from the Board.

B. Requirements Regarding Contact Hours.

(1) The occupational therapist or occupational therapy assistant shall certify a minimum of 12 contact hours of competency activities obtained within the 1-year period preceding the application for licensure, reactivation, or reinstatement.

(2) The 12 contact hours referred to in §B(1) of this regulation shall consist of:

(a) A minimum of 8 contact hours related to occupational therapy principles and procedures; and

(b) A maximum of 4 contact hours through occupational therapy role-related activities.

(3) The occupational therapist or occupational therapy assistant shall provide the necessary documentation to the Board upon request.

C. Exceptions.

(1) Licensed Less Than 1 Year. An occupational therapist or an occupational therapy assistant who becomes licensed between July 1 and June 30, that is, has had a license less than 1 year before renewal, is exempt from continuing competency requirements for the first renewal period.

(2) Requesting Licensure with 3 or More Years Lapse in Practice.

(a) When an applicant applies for licensure, renewal, reactivation, or reinstatement, and meets all requirements for licensure, renewal, reactivation, or reinstatement, but has not graduated from an accredited occupational therapy program or practiced occupational therapy within the past 3 years or more, the Board shall require verification of the applicant's efforts toward maintaining and updating occupational therapy clinical competency.

(b) If an individual has been out of practice for between 3 and 8 years, the individual shall:

(i) Complete a Board-approved self-assessment;

(ii) Complete a Board-approved professional development plan;

(iii) Attend a minimum of 24 contact hours related to occupational therapy principles and procedures within the 24 months preceding application for licensure, renewal, reactivation, or reinstatement;

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(iv) Provide verification of a minimum of 30 hours of observation of service delivery, receipt of mentoring, or a combination of both with an actively licensed occupational therapist within the 24 months preceding application for licensure, renewal, reactivation, or reinstatement; and

(v) Document completion of established goals and activities in occupational therapy with an actively licensed occupational therapist within the 24 months preceding application for licensure renewal, reactivation, or reinstatement.

(c) If an individual has been out of practice for longer than 8 years, the individual shall:

(i) Complete the requirements in §C(2)(b) of this regulation; and

(ii) Provide verification of 6 additional contact hours related to occupational therapy principles and procedures.

(3) Before the deadline to complete continuing competency, a licensee may request an extension to the specified time frame for completing continuing competency requirements by submitting:

(a) A letter of request;

(b) Documentation substantiating the basis of the request, for example, medical documentation; and

(c) A plan for completing the requirement.

.05 Approval of Contact Hour Programs.

A. The Board preapproves contact hours provided by:

(1) The American Occupational Therapy Association (AOTA);

(2) The Maryland Occupational Therapy Association (MOTA); and

(3) AOTA-approved providers.

B. Provider Procedures for Board Approval. A provider offering a program related to occupational therapy principles and procedures who wishes to obtain Board review of contact hours being offered to participants in the provider's programs shall submit to the Board at least 60 days in advance of the program:

(1) A contact hour approval request;

(2) An hour-by-hour agenda of the course;

(3) A course description;

(4) A description of the qualifications of the presenter or speaker, or both;

(5) A sample of the certificate of completion that will be provided to course participants; and

(6) A money order, check, or electronic payment in the amount of the course review fee established by the Board in COMAR 10.46.05.

C. Upon review of the completed application, the Board shall notify the provider as to whether or not the program has been approved, and, if approved, the number of contact hours awarded.

D. A provider shall furnish a certificate of completion to all participants, specifying the following information:

(1) Name of the participant;

(2) Name of the provider;

(3) Dates of the course and completion;

(4) Title and location of the course;

(5) Number of contact hours awarded by the Board; and

(6) Signature of the provider or representative.

E. Licensee Procedures for Board Approval. A licensee participating in a program related to occupational therapy principles and procedures who wishes to obtain Board approval of contact hours not previously reviewed shall submit to the Board the following materials:

(1) A contact hour approval request;

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- (2) An hour-by-hour agenda of the course;
- (3) A course description;
- (4) A description of the presenter's qualifications; and
- (5) A sample of the certificate of completion that will be provided to course participants.

F. Upon review of the completed application, the Board shall notify the licensee as to whether or not the course has been approved, and, if approved, the number of contact hours awarded.

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.06 Continuing Competency Activities.

A. A licensee may accrue contact hours by being involved in a broad variety of programs and activities to maintain professional competency.

B. A minimum of 8 hours is required to be earned through continuing competencies related to occupational therapy principles and procedures.

C. A maximum of 4 hours may be earned through occupational therapy role-related activities.

D. Continuing competency activities that are approved by the Board include activities described in §E of this regulation in which the licensee may participate, present, or complete independently.

E. Continuing Competency Activities—Specific Requirements.

(1) Workshops, Seminars, Conferences.

(a) A licensee may attend workshops, seminars, lectures, or professional conferences and receive 1 contact hour per 1 hour of attendance.

(b) Every year, a licensee may apply a maximum of:

(i) 12 hours toward the continuing competency requirement related to occupational therapy principles and procedures;
and

(ii) 4 hours toward the continuing competency option for role-related activities.

(c) Documentation. The licensee shall provide:

(i) A continuing competency requirement compliance report; and

(ii) A certificate of completion.

(d) Additional Documentation. In addition to the requirements of §E(1)(c) of this regulation, for courses not preapproved, a licensee shall include the following additional documentation:

(i) The date, location, and hour-by-hour agenda of the course;

(ii) A course description;

(iii) A description of the presenter's qualifications; and

(iv) A certificate of completion.

(2) University, College, Adult Education Courses.

(a) A licensee may attend formal academic courses in occupational therapy or related topics at a university or college and receive 4 contact hours per credit hour earned.

(b) Every year, a licensee may apply a maximum of:

(i) 12 hours toward the continuing competency requirement related to occupational therapy principles and procedures;
and

(ii) 4 hours toward the continuing competency option for role-related activities.

(c) Documentation. The licensee shall provide:

(i) A continuing competency requirement compliance report;

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- (ii) An original, official transcript indicating successful completion of the course; and
- (iii) A description of the course from the school catalogue or course syllabus.

(3) Fellowship Training.

(a) A licensee may attend fellowship training in a specific area and receive 12 contact hours (a minimum of 6 full-time weeks).

(b) Every year, a licensee may apply a maximum of:

- (i) 12 hours toward the continuing competency requirement related to occupational therapy principles and procedures;
- (ii) 4 hours toward the continuing competency option for role-related activities.

(c) Documentation. The licensee shall provide:

- (i) A continuing competency requirement compliance report;
- (ii) A certificate awarded from the accredited organization;
- (iii) The dates of attendance; and
- (iv) A description of the training.

(4) Specialty Certification.

(a) A licensee may attain a specialty certification (for example, certified hand therapist) and receive 1 contact hour per 1 hour of education.

(b) Every year, a licensee may apply a maximum of:

- (i) 10 hours toward the continuing competency requirement related to occupational therapy principles and procedures;
- (ii) 4 hours toward the continuing competency option for role-related activities.

(c) Documentation. The licensee shall provide:

- (i) A continuing competency requirement compliance report; and
- (ii) A certificate of completion.

(5) Physical Agent Modalities (PAMS).

(a) A licensee may participate by following the requirements for applying PAMS as set forth in COMAR 10.46.06.

(b) Every year, a licensee may apply a maximum of:

- (i) 12 hours toward the continuing competency requirement related to occupational therapy principles and procedures;
- (ii) 4 hours toward the continuing competency option for role-related activities.

(c) Documentation. The licensee shall provide:

- (i) A continuing competency requirement compliance report;
- (ii) A certificate of completion;
- (iii) An official grade report or transcript;
- (iv) A course syllabus; and
- (v) Written verification from the educator of five patient treatments.

(6) Auditing.

(a) A licensee may audit formal occupational therapy academic course work and receive 4 contact hours per credit hour.

(b) Every year, a licensee may apply a maximum of:

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- and
- (i) 6 hours toward the continuing competency requirement related to occupational therapy principles and procedures;
 - (ii) 4 hours toward the continuing competency option for role-related activities.
- (c) Documentation. The licensee shall provide:
- (i) A continuing competency requirement compliance report;
 - (ii) A letter from the instructor regarding the time spent in the classroom/lab from an accredited college/university;
 - (iii) A report by the licensee on the learning objectives accomplished.
- (7) Internet Learning.
- (a) A licensee may participate in on-line courses and receive 1 contact hour per 1 hour of education.
 - (b) Every year, a licensee may apply a maximum of:
 - (i) 8 hours toward the continuing competency requirement related to occupational therapy principles and procedures;
 - (ii) 4 hours toward the continuing competency option for role-related activities.
 - (c) Documentation. The licensee shall provide:
 - (i) A continuing competency requirement compliance report;
 - (ii) An abstract of the content; and
 - (iii) Verification of course completion from the course provider.
- (8) Informal Self-Study.
- (a) A licensee may participate through journal articles, or other reading opportunities with assessment, text books, video and audio tape, television, VCR, DVD, CD, seminars, workshops, and presentations and receive 1 contact hour per 1 hour of education.
 - (b) Every year, a licensee may apply a maximum of:
 - (i) 6 hours toward the continuing competency requirement related to occupational therapy principles and procedures;
 - (ii) 4 hours toward the continuing competency option for role-related activities.
 - (c) Documentation. The licensee shall provide:
 - (i) A continuing competency requirement compliance report;
 - (ii) An abstract of content from the provider; or
 - (iii) Verification of completion from the course provider.
- (9) In-Service Training.
- (a) A licensee may attend an employer-provided occupational therapy in-service training program on principles, procedures, or occupational therapy related continuing education and receive 1 contact hour per 1 hour of education.
 - (b) Every year, a licensee may apply a maximum of:
 - (i) 6 hours toward the continuing competency requirement related to occupational therapy principles and procedures;
 - (ii) 4 hours toward the continuing competency option for role-related activities.
 - (c) Documentation. The licensee shall provide:
 - (i) A continuing competency requirement compliance report;
 - (ii) The date, location, and hour-by-hour outline or abstract of content from the in-service provider;
- and

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- (iii) The course description;
- (iv) The presenter's qualifications; and
- (v) Verification of participation from the in-service provider.

(10) Mentoring.

(a) A licensee may receive 1 contact hour per 4 hours of:

- (i) Mentoring an occupational therapy colleague to improve the skills of the protege, including the role as disciplinary monitor;
- (ii) Mentoring licensed occupational therapy professionals to improve their clinical skills;
- (iii) Mentoring other health care professionals to improve staff clinical skills;
- (iv) Mentoring management/administrative/academic skills as an occupational therapy professional; or
- (v) Being mentored in a formally structured independent, concentrated, didactic or applied learning experience overseen by a mentor.

(b) Every year, a licensee may apply a maximum of:

- (i) 4 hours toward the continuing competency requirement related to occupational therapy principles and procedures; and
- (ii) 4 hours toward the continuing competency option for role-related activities.

(c) Documentation. The licensee shall provide:

- (i) A continuing competency requirement compliance report; and
- (ii) The goals, objectives, and analysis of performance.

(11) Presentations by Licensee of Occupational Therapy Education Programs, Workshops, Seminars, and In-Services.

(a) A licensee may:

- (i) Make presentations for local organizations, associations, or groups on an occupational therapy related topic;
- (ii) Make professional presentations at state, national, or international workshops, seminars, or conferences; or
- (iii) Provide professional in-service training or instruction for occupational therapists, occupational therapy assistants, or related professionals.

(b) Contact hours are earned at twice the amount of the actual presentation time.

(c) Every year, a licensee may apply a maximum of:

- (i) 8 hours toward the continuing competency requirement related to occupational therapy principles and procedures; and
- (ii) 4 hours toward the continuing competency option for role-related activities.

(d) Documentation. The licensee shall provide:

- (i) A continuing competency requirement compliance report;
- (ii) An hour-by-hour schedule of the presentation; and
- (iii) An announcement of the meeting, or letter of acknowledgement from the professional sponsoring the event, or both.

(e) Presentations of the content are credited only once per renewal cycle.

(12) Development of Instructional Materials.

(a) A licensee may develop instructional materials using alternative media such as video, audio, or software programs to advance professional skills of others (not for proprietary use) and receive 1 contact hour per 3 hours of work.

(b) Every year, a licensee may apply a maximum of:

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- and
- (i) 6 hours toward the continuing competency requirement related to occupational therapy principles and procedures;
 - (ii) 4 hours toward the continuing competency option for role-related activities.
- (c) Documentation. The licensee shall provide:
- (i) A continuing competency requirement compliance report;
 - (ii) A description of the program; and
 - (iii) Media or software materials.

(13) Poster Presentations.

- (a) A licensee may present posters for state, national, or international workshops, seminars, or conferences and receive contact hours at twice the amount of the actual presentation time.
- (b) Every year, a licensee may apply a maximum of:
- (i) 6 hours toward the continuing competency requirement related to occupational therapy principles and procedures;
 - (ii) 4 hours toward the continuing competency option for role-related activities.
- (c) Documentation. The licensee shall provide:
- (i) A continuing competency requirement compliance report; and
 - (ii) A copy of the presentation or program listing.
- (d) Presentations of the content are credited only once per renewal cycle.

and

(14) Academic Guest Lecturer.

- (a) If it is not a licensee's primary role, a licensee may teach one occupational therapy related academic course per semester and receive twice the contact hours per credit hour taught.
- (b) Every year, a licensee may apply a maximum of:
- (i) 8 hours toward the continuing competency requirement related to occupational therapy principles and procedures;
 - (ii) 4 hours toward the continuing competency option for role-related activities.
- (c) Documentation. The licensee shall provide:
- (i) A continuing competency requirement compliance report;
 - (ii) The date and lecture or academic course title;
 - (iii) The name of the institution;
 - (iv) A letter from the instructor regarding the time spent in the classroom;
 - (v) Course or lecture goals and objectives; and
 - (vi) Number of hours actually taught.
- (d) Presentations of the content are credited only once per renewal cycle.

and

(15) Fieldwork Supervision.

- (a) If it is not a licensee's primary role, a licensee may directly supervise the fieldwork of Level I or Level II occupational therapy students and receive 2 contact hours per Level I occupational therapy student or 8 contact hours per Level II occupational therapy student.
- (b) Every year, a licensee may apply a maximum of:
- (i) 8 hours toward the continuing competency requirement related to occupational therapy principles and procedures;

and

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- (ii) 4 hours toward the continuing competency option for role-related activities.
- (c) Documentation. The licensee shall provide:
 - (i) A continuing competency requirement compliance report; and
 - (ii) Verification from each student's college.
- (16) Text Book or Articles Published or Accepted for Publication.
 - (a) A licensee may participate through:
 - (i) Publication of an occupational therapy or related professional textbook;
 - (ii) Professional manuscript published or reviewed (edited) for textbooks;
 - (iii) Publication of chapter or chapters in an occupational therapy or related professional textbook;
 - (iv) Publication of an occupational therapy article in a peer-reviewed publication; or
 - (v) Publication of an occupational therapy article in a nonpeer-reviewed publication.
 - (b) Every year, a licensee may apply a maximum of:
 - (i) 10 contact hours from authorship, editorship, coauthorship, coeditorship, or all of these, of a book for occupational therapists or relating to occupational therapy;
 - (ii) 5 contact hours for authorship or editorship of a chapter of a publication;
 - (iii) 4 contact hours for authorship or editorship of an occupational therapy article or abstract in a peer-reviewed publication; or
 - (iv) 2 contact hours for authorship or editorship of an occupational therapy-related article or abstract in a nonpeer-reviewed publication.
 - (c) Documentation. The licensee shall provide:
 - (i) A continuing competency requirement compliance report; and
 - (ii) A copy of the published work.
- (17) Research Projects.
 - (a) A licensee may participate through extensive scholarly research activities or extensive outcome studies (defined as research associated with, for example, grants, postgraduate studies, or peer-reviewed journals).
 - (b) Every year, a licensee may apply a maximum of:
 - (i) 5 contact hours per research project as approved by the Board toward the continuing competency requirement related to occupational therapy principles and procedures; and
 - (ii) 4 hours toward the continuing competency option for role-related activities.
 - (c) Documentation. The licensee shall provide:
 - (i) A continuing competency requirement compliance report; and
 - (ii) Copies of research proposals and final results of the research to the continuing competency committee for approval and determination of the number of contact hours earned.
- (18) Evaluator.
 - (a) A licensee may participate through quality assurance or program evaluation studies completed and published in a journal or newsletter.
 - (b) Every year, a licensee may apply a maximum of:
 - (i) 2 contact hours per study for quality assurance or program evaluation studies completed and published toward the continuing competency requirement related to occupational therapy principles and procedures; and
 - (ii) 4 hours toward the continuing competency option for role-related activities.
 - (c) Documentation. The licensee shall provide:

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- (i) A continuing competency requirement compliance report; and
- (ii) A copy of the evaluation study to the continuing competency committee for approval and determination of the number of contact hours earned.

(19) Reviewer/Editor.

(a) A licensee may review professional journal articles, papers, textbook chapters, or professional association conference presentations and receive 1/2 contact hour for each paper or proposal reviewed.

(b) Every year, a licensee may apply a maximum of:

(i) 8 contact hours toward the continuing competency requirement related to occupational therapy principles and procedures; and

(ii) 4 hours toward the continuing competency option for role-related activities.

(c) Documentation. The licensee shall provide:

(i) A continuing competency requirement compliance report; and

(ii) Confirmation from the sponsoring journal, publisher, or organization, including the number of reviews completed.

(20) Professional Study Group.

(a) A licensee may participate through professional study groups or online study groups designed to advance knowledge through active participation and receive 1 contact hour per 3 hours of study.

(b) Every year, a licensee may apply a maximum of:

(i) 6 contact hours toward the continuing competency requirement related to occupational therapy principles and procedures; and

(ii) 4 hours toward the continuing competency option for role-related activities.

(c) Documentation. The licensee shall provide:

(i) A continuing competency requirement compliance report;

(ii) Group attendance records;

(iii) Study group goals; and

(iv) Analysis of goal attainment and learning.

(21) Jurisprudence Examination.

(a) A licensee may participate by successfully completing the Board's Jurisprudence Examination and receive 1 contact hour.

(b) Every year, a licensee may apply a maximum of 1 contact hours toward the continuing competency requirement related to occupational therapy principles and procedures.

(c) Documentation. The licensee shall provide:

(i) A continuing competency requirement compliance report; and

(ii) A certificate of completion.

(22) Volunteer Services.

(a) A licensee may volunteer occupational therapy services in areas of the licensee's expertise to community organizations, individuals, and populations, or volunteer on occupational therapy professional and related boards, associations, and committees for setting standards and the promotion of occupational therapy, and receive 1 contact hour per 1 hour of volunteering.

(b) Every year, a licensee may apply a maximum of:

(i) 4 contact hours toward the continuing competency requirement related to occupational therapy principles and procedures; and

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(ii) 4 hours toward the continuing competency option for role-related activities.

(c) Documentation. The licensee shall provide:

(i) A continuing competency requirement compliance report;

(ii) A verification letter from the organization to which services were volunteered; and

(iii) A letter describing outcomes of the volunteer service provided.

(23) Formal Self-Study.

(a) A licensee may participate in formal self-study activities through an independent, concentrated didactic, or applied learning experience, or both. The copyright on the materials used for study may not precede the submission date by more than 5 years.

(b) Every year, a licensee may apply a maximum of:

(i) 8 contact hours toward the continuing competency requirement related to occupational therapy principles and procedures; and

(ii) 4 hours toward the continuing competency option for role-related activities.

(c) Documentation. The licensee shall provide:

(i) A continuing competency requirement compliance report; and

(ii) A certificate of completion or provider-signed summary to include subject area, credentials of supervisor, didactic resources, clinical experience, time frame, and relevance to licensee's professional practice.

.07 Audit of Continuing Competency.

A. At the Board's discretion, the Board shall audit the continuing competency documentation of a number of randomly selected licensees.

B. The Board shall send notification of audit to audited licensees.

C. A licensee is subject to an audit of the licensee's continuing competency documentation by the Board before renewal of licensure.

D. An audited licensee shall successfully complete the requirement of the audit by the specified deadline.

Administrative History

Effective date: July 29, 1985 (12:15 Md. R. 1520)

Regulation .02A amended effective March 27, 1995 (22:6 Md. R. 474)

Regulation .03 amended effective March 27, 1995 (22:6 Md. R. 474)

Regulations .04—.07 repealed and new Regulations .04—.07 adopted effective March 27, 1995 (22:6 Md. R. 474)

Regulations .01—.07 repealed and new Regulations .01—.08 adopted effective October 2, 2000 (27:19 Md. R. 1726)

Chapter revised effective April 21, 2008 (35:8 Md. R. 805)

Regulation .02B amended effective February 21, 2011 (38:4 Md. R. 264)

Regulation .04 amended effective February 21, 2011 (38:4 Md. R. 264)

Regulation .05 amended effective February 21, 2011 (38:4 Md. R. 264)

Regulation .06 amended effective February 21, 2011 (38:4 Md. R. 264)

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Name:	Telephone Number:	Address:	City, State, Zip Code:
Maryland Occupational Therapy License Number:	Original Date of Licensure:	# of Continuing Competency Requirement Hours Required for License Renewal: <input type="checkbox"/> 0 (licensed less than 1 year, as of June 30, 2010) <input type="checkbox"/> 12 (licensed 1 year or more, as of June 30, 2010) <i>8 mandatory hours must be in occupational therapy principles and procedures. (Noted by "M")</i> <i>The remaining 4 hours may be occupational therapy role-related activities. (Noted by "R")</i>	

Line Item No.	Activity Format (see legend below)	Course Title or Brief Description of Activity	Sponsor	Dates Completed	OT Board Pre-Approved Course # (200__-or____)	# of CCR Hours Earned	Verification Documentation	M or R	For Review Use Only		
									# of Hours	OT Related	Qualified Resources
1.											
2.											
3.											
4.											

Total From All Pages:

Legend for Activity Format (COMAR 10.46.04.06):

- | | | |
|--|--------------------------------------|-------------------------------|
| (1) Workshops, Seminars, Conferences | (9) In-Service Training | (17) Research Projects |
| (2) University/College/Adult Education | (10) Mentoring | (18) Evaluator |
| (3) Fellowship Training | (11) Presentations | (19) Reviewer Editor |
| (4) Specialty Certification | (12) Develop Instructional Materials | (20) Professional Study Group |
| (5) Physical Agent Modalities (PAMS) | (13) Poster Presentations | (21) Jurisprudence Exam |
| (6) Auditing | (14) Academic Guest Lecturer | (22) Volunteer Services |
| (7) Internet Learning | (15) Fieldwork Supervision | (23) Formal Self-Study |
| (8) Informal Self-Study | (16) Text Book/Article Publication | |

Reviewer's Initials & Date : _____

Licensees must retain supporting documents for inspection by the Board for 4 years after the date of licensure, renewal or reinstatement. A Reference Guide for audit documentation requirements is available. To maintain your records, complete this Compliance Report. For additional information, please contact the Board office at Spring Grove Hospital Center, 55 Wade Avenue, Bland Bryant Building, 4th Floor, Baltimore, MD 21228, (410) 402-8560 or www.dhnh.state.md.us/botp.

Line Item No.	Activity Format (see legend below)	Course Title or Brief Description of Activity	Sponsor	Dates Completed	OT Board Pre-Approved Course # (200__-or____)	# of CCR Hours Earned	Verification Documentation	M or R	For Review Use Only		
									# of Hours	OT Related	Qualified Resources
4.											
5.											
6.											
7.											
8.											
9.											
10.											