

Wyoming Administrative Rules

# Occupational Therapy Board

Occupational Therapy Board

Chapter 3: Standards of Practice of Occupational Therapy

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## Chapter 3

### Standards of Practice of Occupational Therapy

**Section 1. Authority.** The Board promulgates these Rules according to the authority granted by Wyoming Statute § 33-40-115(b).

**Section 2. Delineation of Roles.**

- (a) An OT currently licensed by the Board:
  - (i) Evaluates the client using the appropriate evaluation tool(s) for condition.
  - (ii) Prepares a custom written program plan and provides treatment as appropriate within the licensee's scope of practice and training.
  - (iii) When applicable, assigns treatment duties based on that program plan to a licensed occupational therapy assistant who has been specifically trained to carry out those duties.
  - (iv) Monitors the occupational therapy assistant's performance.
  - (v) Accepts professional responsibility for the occupational therapy assistant's performance.
- (b) An OTA currently licensed by the board assists in the practice of occupational therapy and performs treatment and delegated assessment commensurate with their education and training.

**Section 3. Supervision of Occupational Therapy Assistants.**

- (a) A licensed OTA may assist in the practice of occupational therapy only under the supervision of an OT. An OT may supervise an OTA in person or virtually through a live video and audio connection.
- (b) The supervising OT shall determine the level of supervision the OTA requires, based on the competency the OTA demonstrates. The supervisory guidelines are as follows:
  - (i) An entry-level OTA is an individual working on initial skill development or entering a new practice area. At this level the OT shall provide close supervision, including weekly meetings and oversight, which could take place in person or virtually with a video and audio component.

(ii) An intermediate-level OTA is an individual working on increased skill development and mastery of basic role functions and demonstrates ability to respond to situations based on previous experience. At this level the OT shall provide routine supervision, including bi-weekly meetings and oversight, which could take place in person or virtually with a video and audio component.

(iii) An advanced-level OTA is an individual refining specialized skills with the ability to understand complex issues affecting role functions. At this level the OT shall provide general supervision, including bimonthly meetings and oversight, which could take place in person or virtually with a video and audio component.

(c) Each supervising OT shall maintain a supervisory plan and shall document the supervision of each OTA using the supervision form provided by the Board. The supervising OT shall include evidence of regular supervision and contact between the supervisor and the assistant and the OT's supervision records may be subject to Board review upon request. The supervising OT shall maintain records related to their supervision for three (3) years. Supervision shall include:

(i) Communicating to the OTA the results of patient or client evaluation and discussing the goals and program plan for the patient or client;

(ii) Providing information, instruction and assistance as needed;

(iii) Annually, or more often if warranted, preparing a written appraisal of the OTA's performance and discussing the appraisal with the OTA;

(iv) Review of the Board's rules and the Wyoming Occupational Therapy Practice Act on an annual basis.

(iv) A supervising OT, after initial record review is performed, may assign the administration of standardized tests, activities of daily living evaluations, or other elements of patient evaluation and re-evaluation that do not require the professional judgment and skill of an OT to an intermediate or advanced OTA. Assignment under this subsection must be consistent with OTA's education and training.

(d) More frequent supervision may be necessary as determined by the OT or the OTA, dependent on the level of expertise displayed by the OTA, the setting and the population characteristics.

(e) A supervisor who is temporarily unable to provide supervision shall arrange for substitute supervision by a licensed OT. The substitute shall provide supervision that is as rigorous and thorough as that provided by the permanent supervisor.

#### **Section 4. Supervision Under a Limited License.**

(a) Individuals licensed under a limited license shall receive daily direction and instruction from a licensee in good standing with the Board, either in person or virtually through a live audio and video connection. The licensed supervisor shall also provide evaluations of the limited licensee's therapy skills.

(b) The limited licensee may provide services outside of the physical presence of the licensed supervisor if the licensed supervisor determines that the limited licensee has demonstrated the competence to do so.

(c) Written documentation of each supervisory session shall be recorded on the supervision form provided by the Board and signed by the licensed supervisor and limited licensee. The limited licensee shall submit the original supervision forms to the Board as part of the application for full licensure.

(d) The supervisor shall notify the Board in writing of termination of supervision.

(e) All treatment documentation must be co-signed by the limited licensee and the licensed supervisor.

#### **Section 5. Telehealth.**

(a) In order to provide occupational therapy services via telehealth to a client in Wyoming, an OT or OTA must hold a current Wyoming license.

(b) When providing occupational therapy services via telehealth, an OT shall determine whether an in-person evaluation and treatment is necessary. If it is determined that an in-person evaluation and treatment is necessary, the OT shall cease telehealth provision of services until an on-site visit is completed and determined that telehealth is appropriate.

(c) The OT is responsible for determining whether any aspect of the provision of services may be conducted via telehealth or must be conducted in person. An OT shall consider at a minimum:

- (i) the complexity of the client's condition;
- (ii) his or her own knowledge skills and abilities;
- (iii) the client's context and environment;
- (iv) the nature and complexity of the intervention;
- (v) the pragmatic requirements of the practice setting; and

(vi) the capacity and quality of the technological interface.

(d) The OT shall obtain informed consent for the delivery of service via telehealth from the client prior to initiation of occupational therapy services via telehealth and maintain documentation in the client's health record.

(e) An OT or OTA providing occupational therapy services via telehealth shall exercise the same standard of care when providing occupational therapy services via telehealth as with any other mode of delivery of occupational therapy services.

(f) An OTA or limited licensee providing occupational therapy services via telehealth may be supervised in person or virtually through a live audio and video connection.

### **Section 6. Physical Agent Modalities.**

(a) An OT or an OTA may use physical agent modalities in conjunction with, or in immediate preparation for, occupational therapy services under the following conditions:

(i) The OT or OTA must complete six (6) hours of post professional education in the appropriate use of physical agent modalities.

(ii) The OT or OTA shall complete five (5) supervised direct administrations of each modality demonstrating the appropriate use of each physical agent modality. The supervisor must be a person licensed to practice as an OT or physical therapist.

(iii) The OT or OTA shall retain documentation that they completed the required five (5) supervised direct administrations of each modality to be used.

(b) Nothing in this section modifies or amends any provision of Section 7 of this chapter.

### **Section 7. Dry Needling.**

(a) Licensed OT may use dry needling techniques on patients. OT who practice dry needling must retain written records of receiving dry needling training and present these records to the Board upon request. Training shall include;

(i) A minimum of twenty-four (24) hours of live, face-to-face post professional instruction in dry needling; and

(ii) Anatomy, training in indications for dry needling,

contraindications for dry needling, potential risks, proper hygiene, proper use and disposal of needles, and appropriate selection of clients.

- (b) OTA or other support personnel may not perform dry needling techniques.

**Section 8. Code of Ethics.**

- (a) It is the professional responsibility of licensees to provide services for clients without regard to race, creed, national origin, gender, disability or religious affiliation;

- (b) The licensee shall be acquainted with applicable local, state, federal laws and institutional rules and shall function accordingly.

- (c) The licensee shall inform employers, employees, and colleagues about those laws and policies that apply to the profession of occupational therapy.

- (d) The licensee shall function with discretion and integrity in relations with colleagues and other professionals and shall be concerned with the quality of their services.

- (e) The licensee shall report illegal, incompetent, or unethical practice to the appropriate authority.

- (f) The licensee shall not disclose privileged information when participating in reviews of peers, programs or systems.

- (g) The licensee who employs or supervises colleagues shall provide appropriate supervision as provided for in Guidelines for Supervision, Roles, and Responsibilities During the Delivery of Occupational Therapy Services as incorporated in Chapter 1 of these rules, state laws, and rules and regulations.

- (h) The licensee shall recognize the contributions of colleagues when disseminating professional information.

- (i) Treatment objectives and the therapeutic process shall be formulated to ensure professional accountability.

- (j) Occupational therapy evaluation services shall be goal-directed in accordance with the overall educational, habilitation, or rehabilitation plan and shall include a system to ensure professional accountability.

- (k) The licensee shall not delegate client care, evaluations, or treatment to fieldwork students when the licensee is not in the facility. The OTA is not allowed to supervise a Level II OT student.

- (l) The licensee shall accurately represent the licensee's competence, education, training and experience.
- (m) The licensee shall only provide services and use techniques for which the licensee is qualified by, and have supporting documentation of, education, training or experience.
- (n) The licensee shall take all reasonable precautions to avoid harm to the client or detriment to the client's property.
- (o) The licensee shall inform subjects involved in education or research activities of the potential outcome of those activities.
- (p) When applicable, the licensee shall establish fees, based on cost analysis, that are commensurate with services rendered.
- (q) The licensee shall accurately record information and report information as required by facility standards and state and federal laws.
- (r) All data recorded in permanent files or records shall be supported by the licensee's observations or by objective measures of data collection.;
- (s) Client's records shall only be divulged as authorized by law or with the client's consent for release of information.
- (t) The licensee shall not delegate to other personnel those client-related services where the clinical skills and expertise of a licensee are required.
- (u) The licensee shall refer clients to other service providers or consult with other service providers when additional knowledge and expertise is required.

**Section 9. Unprofessional Conduct.**

- (a) The failure of a licensee to abide by the ethical standards adopted by the Board shall constitute unprofessional conduct and grounds for disciplinary action.
- (b) The failure of a licensee to meet the requirements of Section 6(a) before using physical agent modalities in their practice shall constitute unprofessional conduct and grounds for disciplinary action.
- (c) The failure of a licensee to meet the requirements of Section 7(a) before using dry needling in their practice shall constitute unprofessional conduct and grounds for disciplinary action.