

GEORGIA STATE BOARD OF OCCUPATIONAL THERAPY
Rules Committee WebEx Meeting Minutes
Tuesday, August 5, 2025 – 3:00 p.m.

The Georgia State Board of Occupational Therapy Rules Committee met via WebEx on Tuesday, August 5, 2025. The following Committee members were present:

Committee Members Present

Robert McClellan, OTR/L, Committee Chair
Betsy McDaniel, OTA, Committee Member
Deborah Hinerfeld, OTR/L, Committee Member

Administrative Staff Present

Adrienne Price, Executive Director
Meagan Doss, Licensing Supervisor

Committee Members Absent

No Committee Members absent.

Attorney General's Office

No Attorney General present.

Visitors Present

Ash
Kristen Neville, State Affairs Manager, American Occupational Therapy Association (AOTA)
Sandra Eskew-Capps, PT, DPT, American Physical Therapy Association-Georgia (APTA-GA)

Administrative Staff Absent

Michelle Hornaday, Board Support Specialist

Call to Order Mr. McClellan called the Committee meeting to order at 3:13 p.m.

OPEN SESSION

Committee Meeting Agenda

Dr. Hinerfeld motioned, Ms. McDaniel seconded, and the Committee voted in favor of the motion to accept the agenda as presented.

Review and Discussion of Board Rules

The Committee purposed to review the rationales for the proposed amendments to the rules and policies discussed to ensure that their recommendations align with the Board's charge to safeguard the public health, safety, and welfare by adopting rules and regulations to carry out the policy.

1. Board Rule 671-2-.02 Supervision Defined

Rule 671-2-.02. Supervision Defined

Supervision as used in the law shall mean personal involvement of the supervisor in the direction, guidance, and delivery of occupational therapy by the supervisee, or individual whose work is being overseen.

- (1) The following factors shall be considered by the supervisor when determining the appropriate frequency, methods, and content of supervision:
 - (a) Complexity of the client needs;
 - (b) Number and diversity of clients;
 - (c) Skills and experience of the occupational therapist and occupational therapy assistant;
 - (d) Type and number of practice settings;
 - (e) Requirements for the practice setting;

- (f) Any other regulatory or administrative requirements.
- (2) A supervising occupational therapist is ultimately responsible and accountable for:
- (a) Maintaining an active, unencumbered license or Compact Privilege in Georgia,
 - (b) All client care provided by the persons supervised, to include but not limited to, occupational therapy services provided by:
 - (i) Occupational therapists and occupational therapy assistants;
 - (ii) Students in occupational therapy and occupational therapy assistant programs; and,
 - (iii) Unlicensed personnel who deliver supportive services to the occupational therapist and the occupational therapy assistant.
- (3) A supervising occupational therapy assistant is always accountable and responsible for the actions of all occupational therapy assistants, student occupational therapy assistants, and unlicensed personnel under their supervision.
- (4) It is the responsibility of the licensed occupational therapist or licensed occupational therapy assistant to ensure that a supervisee does not perform duties for which he or she is not trained and/or licensed. The licensed occupational therapist shall also personally review and interpret the results of any habilitative, or rehabilitative procedures conducted by the supervisee.
- (5) Supervision requires initial direction and periodic inspection of the service delivery by the licensed occupational therapist or occupational therapy assistant to include at a minimum:
- (a) Weekly verbal contact and consultation;
 - (b) Monthly review of patient care documentation;
 - (c) Delineation of tasks and responsibilities;
 - (d) An interactive process between the supervising occupational therapist and the occupational therapy assistant to include but not limited to consultation which may include synchronous communication, related to client assessment, reassessment, intervention plan, intervention implementation, and discontinuation of treatment. Cosigning client documents alone does not meet the minimum level of supervision.
- (6) For applicants required to practice under a limited permit, the supervising occupational therapist shall provide direct supervision, as defined in Rule 671-2-.03.
- (7) Supervision of Students.
- (a) For Level One, capstone, and baccalaureate project occupational therapy students, direct supervision, as defined in Rule 671-2-.03, is required by a qualified professional.

- (b) For Level Two occupational therapy students, direct supervision, as defined in Rule 671-2-.03, is required from a qualified professional in accordance with the Accreditation Council for Occupational Therapy Education (ACOTE) Standards.

Cite as Ga. Comp. R. & Regs. R. 671-2-.02

Authority: O.C.G.A. Secs. [43-28-3](#), [43-28-7](#), [43-28-12](#).

History. Original Rule entitled "Supervision Defined" adopted. F. July 15, 1977; eff. August 4, 1977.

Repealed: New Rule of same title adopted. F. May 24, 1994; eff. June 13, 1994.

The Committee previously tabled discussion of BR 671-2-.02 Supervision Defined to clarify levels of supervision. The proposed amendment developed by the Committee more thoroughly defines supervision which will provide better public protection and clarifies the level of supervision that is needed for each participant in the practice of occupational therapy from licensees, students, and unlicensed personnel. The amendment prohibits/prevents unsafe practices, ensures competent practitioners, removes information asymmetries for consumers, and carries out policy objectives that are expressed in a statute.

The recommended changes ensure that everyone who is participating in the provision of Occupational Therapy has the correct level of supervision and is being monitored and held accountable for service competencies. It clarifies that supervision is a collaboration between the supervisor and the supervisees and assists the supervisor in determining the level of supervision needed in the provision of care. It carries out the policy objectives by explaining the role of the supervisor at any level relative to the minimum level of contact between the supervisor and the supervisee as is dictated by law.

The Board considered multiple variations and determined this version to be the clearest and least restrictive way to accomplish State's policy. The Committee reviewed American Occupational Therapy Association (AOTA), Ohio statutes, and the Georgia State Board of Physical Therapy statutes and rules. Comments and input from stakeholders regarding levels of confusion related to supervision were the impetus for reviewing and amending the rule. The amendment ensures the quality of care and safety of the public by defining how supervision is to be implemented in the provision of occupational therapy as appropriate, while licensees, students, and unlicensed personnel are engaged in the service to the public.

The Committee reviewed the economic impact of the amendment and determined that the amendment impacts everyone equally. In some cases, there is the potential for a positive economic impact in that ultimately the supervised persons will be eligible to obtain a license to practice in this state. It also ensures that quality assurance is occurring in the delivery of care which increases efficiencies and minimizes a relapse in acuity, thereby decreasing cost to the patient and the burden on the healthcare system. The potential negative impact is that supervision may limit access to care in some rural areas; however, it may also offer more opportunities to utilize practitioners qualified to practice through synchronous communication with the supervisor, making any negative impact negligible.

2. Board Rule 671-2-.03. Direct Supervision Defined

Rule 671-2-.03. Direct Supervision Defined

- (1) Direct Supervision as used in the Law shall mean that the supervisor is physically on-site, in-person, and able to respond quickly to the needs of the client or supervisee. It requires specific delineation of task and responsibilities by a licensed Occupational Therapist or Occupational Therapy Assistant to the supervisee.
- (a) It is the responsibility of the licensed occupational therapy practitioner to ensure that the supervisee does not perform duties for which he/she is not trained; and,
- (b) It is ultimately the responsibility of the occupational therapist to personally review and interpret the result of any habilitative or rehabilitative procedures conducted by the supervisee.

- (2) Direct Supervision is required for applicants who are practicing under a limited permit issued by the Board.
- (3) Direct Supervision may decrease over time to supervision, as defined in Rule 671-2-.02, if the supervisor has determined that the supervisee has demonstrated service competency and the supervisee is not subject to paragraph 2 of this rule.

Cite as Ga. Comp. R. & Regs. R. 671-2-.03

Authority: O.C.G.A. Secs. 43-28-3, 43-28-7, 43-28-12.

History: Original Rule entitled "Direct Supervision Defined" adopted. F. July 15, 1977; eff. August 4, 1977.

Repealed: New Rule of same title adopted. F. Jan. 29, 1997; eff. Feb. 18, 1997.

The Committee reviewed BR 671-2-.03. Direct Supervision Defined for the purpose of clarifying what is meant by direct supervision for the safety of the public. The amendment is designed to both prohibit and prevent unsafe practices, as well as ensure competent practitioners and remove information asymmetries for consumers. The amendment also carries out policy objectives that are expressed in a statute as it more clearly defines who requires direct supervision in the provision of occupational therapy service and the factors which characterize what is meant by direct supervision. The language not only defines who requires supervision, but also how long supervision is required as a matter of public protection. In carrying out the policy objectives the language ensures that the person being supervised receives the most appropriate level of supervision to ensure safe, competent practice.

The Committee reviewed the national standards of American Occupational Therapy Association (AOTA), Ohio statutes, and Georgia State Board of Physical Therapy statutes and rules. The Committee also reviewed comments and input from stakeholders regarding levels of confusion related to supervision were the impetus for reviewing and amending the rule.

The Committee reviewed the economic impact of the amendment and determined that the amendment impacts everyone equally. In some cases, there is the potential for a positive economic impact in that ultimately the supervised persons will be eligible to obtain a license to practice in this state. It also ensures that quality assurance is occurring in the delivery of care which increases efficiencies and minimizes a relapse in acuity, thereby decreasing cost to the patient as well as the burden on the healthcare system. The potential negative impact is that supervision may limit access to care in some rural areas; however, it may also offer more opportunities to utilize practitioners qualified to practice through synchronous communication with the supervisor, making this negative impact negligible.

3. Board Rule 671-3-.01 Application. Amended.

Rule 671-3-.01. Application. Amended

- (1) Any occupational therapist or occupational therapy assistant who plans to practice as a licensed occupational therapist or licensed occupational therapy assistant in the State of Georgia shall apply for licensure to the Board, on forms provided by the Board.
- (2)
- (3) Proof of lawful presence in the U.S. must be documented by:
 - (a) submitting an identification document listed as a secure and verifiable document on the list maintained by the Office of the Georgia Attorney General under O.C.G.A. § [50-36-1](#); and,
 - (b) an affidavit of citizenship that complies with the provisions of federal immigration law and O.C.G.A. § [50-36-1\(f\)\(1\)\(B\)](#).

- (4) A transcript providing the area of study and degree conferred must be provided from an accredited educational program in occupational therapy recognized by the board.
 - (5) Satisfactory results from a fingerprint record check report conducted by the Georgia Crime Information Center and the Federal Bureau of Investigation, as determined by the Board. The applicant shall be responsible for all fees associated with the performance of such background.
 - (6) Applicants must provide proof of passing the NBCOT examination for occupational therapists or occupational therapy assistants. Applicants who fail the examination three times or more may be required to demonstrate competency in a manner deemed appropriate by the board.
- If the applicant has been employed in the field of occupational therapy, a verification of employment form must be provided from the employer. If the applicant has not practiced in the field of occupational therapy within five (5) years, the applicant will be required to complete a supervised clinical experience.
- (7)
 - (a) Applicants required to complete a supervised clinical experience must submit Limited Permit Supervised Clinical Practice Agreement Form.
 - (b) Upon completion of the supervised clinical experience, an applicant must cause the supervisor to submit a Supervised Clinical Practice Evaluation Form verifying the 320 hours of clinical experience under the supervision of a licensed occupational therapist, pursuant to Rule 671-3-.06, for Board approval.
 - (8) Applicants for occupational therapy or occupational therapy assistant licensure in Georgia must meet all requirements for licensure as defined within the statute and Board Rules prior to issuance of a license.

Cite as Ga. Comp. R. & Regs. R. 671-3-.01

Authority: O.C.G.A. §§ [43-1-3](#), [43-1-19](#), [43-1-25](#), [43-28-7](#), [43-28-8](#), [43-28-9](#), [43-28-10](#), [43-28-11](#), [50-36-1](#).

History. Original Rule entitled "Application" was filed on July 15, 1977; effective August 4, 1977.

Amended: New title "Application. Amended." F. June 1, 2017; eff. June 21, 2017.

The Committee reviewed BR 671-3-.01 Application. Amended. to clarify and simplify the process for applying for a license. The amendment achieves this purpose by outlining the minimum requirements for licensure, which will ensure competent practitioners by including information concerning educational and exam requirements. The amendment also expands access to care and services enabling the applicant to become licensed quicker if they meet the requirements for licensure. The amendment removes information asymmetries for consumers and carries out policy objectives that are expressed in a statute as an application and license is required to practice in Georgia.

The Committee determined that the amendment ensures each applicant will be able to understand the criteria required to obtain a license to practice in Georgia and provides a pathway to increase the Occupational Therapy workforce. The language ensures that applicants meet the minimum requirements as codified in the statute which aligns to national standards.

The Committee feels this is the least restrictive way to accomplish the state's policy and it serves as public notice to all the requirements. The rule impacts applicants and assists them in navigating the licensure process. It impacts the public by increasing public trust in that the applicant meets the minimum basic requirements to practice in the field of occupational therapy with reasonable skill and safety.

There is a positive economic impact on both applicants and businesses in that applicants can efficiently apply and obtain licensure to join the workforce and serve the public in a more expedient fashion. As the requirements are established by statute and rule, the potential negative economic impact is relevant to the cost of initiating the application process; however, once the applicant achieves licensure and becomes gainfully employed, such costs are negligible.

4. Board Rule 671-3-.08 Renewal of License/Penalties/Continuing Education Requirements. Amended.

Rule 671-3-.08. Renewal of License/Penalties/Continuing Education Requirements. Amended

- (1) A license issued by the Board shall expire on March 31st of even numbered years. The license may be renewed upon submission of the renewal application and payment of the required fee, provided all requirements have been met. Refer to fee schedule.
- (2) A license that is not renewed on or before March 31st of the renewal year shall be deemed lapsed. A licensee may apply for late renewal of a license from April 1st through April 30th of the renewal year upon payment of a late renewal fee, submission of proof of continuing education as established by Board rules and completion of all appropriate forms.
- (3) As of May 1st of the renewal year, the license of an applicant who has not applied for renewal is expired and revoked by operation of law. An application for reinstatement shall be required as provided for in Rule [671-3-.09](#) in order to seek reinstatement of a lapsed license to practice in this State.
- (4) Except as otherwise provided, each licensee is required to complete during each two (2) year renewal period a minimum of twenty-four (24) continuing education (CE) hours prior to the expiration date of the license. The two (2) year renewal period begins April 1st of even numbered years and ends March 31st of even numbered years. Failure to complete continuing education prior to expiration date can result in disciplinary action.

Prior approval of continuing education courses is not required. Acceptable professional continuing

- (5) Education activities shall include activities relevant to occupational therapy practice that can be deemed to update or enhance knowledge and skills required for competent performance beyond entry level occupational therapy. Unacceptable activities include, but are not limited to:
 - (a) Orientation,
 - (b) Meetings for purposes of policy decisions,
 - (c) Non-educational meetings,
 - (d) Annual Compliance training,
 - (e) Cardiopulmonary resuscitation (CPR) courses.

A continuing education hour is defined as actual time spent in instruction or organized learning experiences excluding meals, breaks, welcome/introductions, and business meetings.

- (6)
 - (a) At least twelve (12) hours of the required twenty-four (24) continuing education hours must be on a topic related to direct patient care. This includes occupational therapy assessment, treatment planning, occupational therapy implementation and diagnostic related information. This must include attendance at live presentations such as workshops, seminars, conferences, or formal academic coursework, or real-time, interactive webinars. To qualify as a real-time, interactive webinar, the licensee must have the ability to ask questions, receive an answer, and interact with other attendees at the time the session is taking place. It may not be a pre-recorded session.
 - (b) Each licensee must complete a minimum of two (2) hours of the required twenty-four (24) continuing education hours in the ethics of occupational therapy practice. These hours may be obtained online.
 - (c) A maximum of ten (10) of the required twenty-four (24) can be in "General" continuing education hours may be obtained by Level II fieldwork supervision, published professional writing and instructional presentations, pre-recorded electronic or web-based courses, formal self-study courses, satellite broadcasts, computer learning activities, webinars, or viewing videotapes in a professional setting. These hours may also be related to administration, supervision, documentation, quality assurance and research.

- (7) An individual who is applying for licensure in Georgia for the first time (never having held a Georgia OT or OTA license) and who is licensed during the second year of the biennium renewal period is not required to meet continuing education requirements for that initial renewal period only.
- (8) Each licensee randomly selected for a CE audit must submit to the Board supporting documentation as specified in this rule.
- (9) Persons licensed to practice as an occupational therapist or an occupational therapy assistant, or persons who file an application for reinstatement of licensure, must submit documentation of completed continuing education courses and experiences for renewal or issuance of a license.

(10) Licensees and applicants for reinstatement must register earned CE credits for courses and experiences with an online recording and reporting system approved by the Office of Secretary of State. Licensees and applicants must register with the approved continuing education tracking solution to document CE credits for license renewal and reinstatement.

- (a) The Office of Secretary of State has approved CE Broker, Inc. as the continuing education tracking solution to monitor compliance of licensees with applicable continuing education requirements.
 - (b) Licensees and applicants shall incur no additional costs from CE Broker, Inc. for using this service.
 - (c) Every licensee or applicant subject to the rules of the Georgia State Board of Occupational Therapy shall be deemed to have given such person's consent to the Board and its representatives to access their CE record retained within the approved continuing education tracking solution for the purposes of auditing and verifying completion of the Board's continuing competency requirements.
 - (d) If a licensee or applicant has not registered earned CE credits within the approved continuing education tracking solution, the licensee or applicant may be subject to disciplinary action.
- (11) Procedures for verifying to the Board that the continuing education requirements for licensure renewal have been met:
- (a) Respond appropriately to questions on renewal of license application;
 - (b) Retain original continuing education documentation in personal files to submit to the Board if requested for a continuing education audit;
 - (c) Documentation as specified in this rule must be maintained by the licensee for no less than four (4) years from the beginning date of the two (2) year renewal period during which the hours were taken.
- (12) Documentation of continuing education which the Board deems as acceptable proof of completion includes the following:
- (a) For continuing education courses that include attendance and participation at a live presentation such as a workshop, seminar, conference, formal academic course, or in-service educational program:
 1. A certificate of completion or similar documentation signed by a program official, specifying the course was a live presentation or real interactive webinar, and,

2. A program or course description including sponsor, course title, date(s), program objectives/learning outcomes, content description, and agenda or schedule. A shortened description may be accepted for programs specifically exempted by the Board such as AOTA and GOTA Conferences. If submitting formal academic coursework, a transcript reflecting a passing score in the course and the course syllabus is required,;
- (b) For "General" continuing education as referenced in this rule, if obtained at a conference, seminar, workshop, live presentation, academic course or in-service educational program required documentation is as noted above. All other types of courses must include:
1. Explanation of the relationship of the activity to occupational therapy and your professional growth.
 2. Date(s) and clock hours of the activity;
 3. Other information as may be requested.
- (c) A description of the fieldwork including name and type of facility, name of the fieldwork educator and times spent in direct supervision of the student is required in order to receive credit for serving as the primary clinical fieldwork educator for Level II occupational therapy and occupational therapy assistant fieldwork students.
- (d) For published professional writing, applied research, and instructional presentations, as referenced in this rule, including first time or significantly revised presentations or an academic class session, workshop, seminar, in-service or professional meeting program session:
1. Description of the presentation or research including location, title, date, hours of presentation, general content description, and type of audience; and,
 2. Verification of the presentation, research or formal thank you note signed by the sponsor or program official.
- (e) Documentation of pre-recorded electronic or web-based course, formal self-study courses, satellite broadcasts, computer learning activities or viewing of videotapes in a professional setting must include:
1. Verified instructional time by the course sponsor, a certificate of completion or similar documentation specifying "pre-recorded or web-based" signed by the program official; and,
 2. A program description including sponsor, course title, date(s), program objectives/learning outcomes, and content description
- (f) Continuing education should be documented on the appropriate board form, available on the Board website, upon request by the Board.

The Committee discussed drafting language for BR 671-3-.08 Renewal of License/Penalties/Continuing Education Requirements. Amended. to clarify that CE certificates should include the method of presentation, provide course descriptions, and determine if CE credit should be awarded to licensees providing mentorship services. In considering a request of the Board for the Committee to discuss the possibility of adding mentorship as a category that can be awarded CE credit, the Committee recommended advising the Board of not being in favor of accepting mentorships to satisfy CE requirements beyond level 2 fieldwork.

The Committee determined that it is not feasible for the Board to engage in the process of approving or evaluating the qualifications for mentors for the various practice settings. The Board would not only have to develop the evaluation and approval process to evaluate and approve mentors, but it would also have to develop forms and potentially create an online application process within GOALS which has the potential to be burdensome and expensive to board, board staff, and the Office of Secretary of State in time and finances. In level 2 fieldwork the schools preapprove and ensure the fieldwork supervisor is qualified according to national standards, which alleviates the aforementioned burden and expense. Whereas mentorship has the potential to enhance the competence of the mentor, it is would be difficult to assess their level of increased competency from their mentoring experience. In addition, it has been the longstanding position of the Board to allow the trusted and nationally certified sources of occupational therapy education to develop and provide high-quality professional development and continuing education experiences for licensees.

The amendment will remove information asymmetries regarding renewal cycles and continuing education requirements. The recommendation will aid in prohibiting and preventing unsafe practices and/or fraud. The purpose is to also ensure competent practitioners. The Committee's recommendation will provide for expanding access to care and services as well as expanding the knowledge base. Information asymmetries will be removed for consumers and the amendment will carry out policy objectives that are expressed in a statute.

The amendment ensures the continuing education requirements remain current in the field. The Committee feels the amendment provides clarity and is the least restrictive way to accomplish the policy objectives. The independent support for CE requirements can be found in peer reviewed articles. Additionally, the rule amendment would serve to minimize or eliminate the comments and inquiries received from licensees expressing levels of confusion about the CE required, the period during which they must be taken, and the content that is necessary to enhance knowledge and skills required for competent performance beyond entry level occupational therapy.

There is both positive and negative economic impact to licensed practitioners, CE Providers, and employers in relation to the cost of taking and offering the CE, in the employment of safe and competent practitioners with an active, unencumbered license. The amendment may impact payers and insurers negatively if licensees fail to complete CE which meet the requirements for renewal and/or causes harm to patients which may result in licenses expiring or licensees to become subject to disciplinary action. Failure to follow the rules may also delay licensure for applicants.

5. Board Rule 671-3-.14. Reciprocity

Rule 671-3-.14. Reciprocity

- (1) Pursuant to O.C.G.A. § 43-28-11, the board may waive the examination and grant a license to any applicant who shall present proof of current licensure as an occupational therapist or an occupational therapy assistant in another state, the District of Columbia, or territory of the United States, which requires standards for licensure considered by the board to be equivalent to the requirements for licensure of this article.
- (2) Applicants by reciprocity must submit:
 - (a) An affidavit stating that the applicant is a U.S. citizen or an affidavit stating that the applicant is lawfully present in the U.S. under federal immigration law and O.C.G.A. § 50-36-1(f)(1).

- (b) A secure and verifiable document on the list maintained by the Office of the Georgia Attorney General under O.C.G.A. § 50-36-1;
- (c) A transcript providing the area of study and degree conferred must be provided from an accredited educational program in occupational therapy recognized by the board.
- (d) Satisfactory results from a fingerprint record check report conducted by the Georgia Crime Information Center and the Federal Bureau of Investigation, as determined by the Board. The applicant shall be responsible for all fees associated with the performance of such background.
- (e) Proof of passing an occupational therapy examination which is not administered by the National Certification Board in Occupational Therapy (NBCOT) that is approved in another state, the District of Columbia, or territory of the United States.
- (f) Verification of current licensure, in good standing, from another state, the District of Columbia, or territory of the United States, which requires standards for licensure considered by the board to be equivalent to the requirements in Georgia.
- (g) If the applicant has been employed in the field of occupational therapy, a verification of employment form must be provided from the employer. If the applicant has not practiced in the field of occupational therapy within five (5) years, the applicant will be required to complete a supervised clinical experience.
 - (i) Applicants required to complete a supervised clinical experience must submit Limited Permit Supervised Clinical Practice Agreement Form.
 - (ii) Upon completion of the supervised clinical experience, an applicant must cause the supervisor to submit a Supervised Clinical Practice Evaluation Form verifying the 320 hours of clinical experience under the supervision of a licensed occupational therapist, pursuant to Rule 671-3-.06, for Board approval.

The Committee reviewed BR 671-3-.14. Reciprocity and created the rule to clarify the process of reciprocity in accordance with the Occupational Therapy statute. The amendment serves to prohibit/prevent unsafe practices and/or fraud by ensuring those who have not been certified by NBCOT have taken an entry level examination prior to practicing in the field of occupational therapy.

The amendment helps the Board to evaluate a candidate's suitability and existing knowledge and skills, for licensure. It clarifies what the statutory requirements are for reciprocity in the practice act. The rule restates the statute to ensure that applicants and the public are on notice as to what is required. The Committee determined that independent support for the amendment stems from the confusion verbalized by applicants who submitted a reciprocity application without meeting the qualifications.

There is a negative economic impact for applicants, employers, and administrative staff for those applying by reciprocity without meeting the qualifications, as it prolongs their ability to achieve licensure, become gainfully employed, and provide care to patients. Without the language as presented, an additional burden persists in processing incorrect applications. With the process clearly outlined within the rules, it is less likely that applicants will misunderstand the requirements.

6. Board Rule 671-6-.02 Requirements for Use of Physical Agent Modalities

Rule 671-6-.02. Requirements for Use of Physical Agent Modalities

- (1) Any occupational therapist and occupational therapy assistant who wishes to utilize O.T. techniques involving physical agent modalities, must document, successful completion of a minimum of 90 contact hours of instruction or training approved by the Board which covers:
 - (a) Principles of physics related to specific properties of light, water, temperature, sound, or electricity, as indicated by selected modality;
 - (b) Physiological, Neurophysiological, and Electrophysiological, changes, as indicated, which occur as a result of the application of selected modality;
 - (c) The response of normal and abnormal tissue to the application of the modality;
 - (d) Indications and contra indications related to the selection and application of the modality;
 - (e) The guidelines for treatment or administration of the modality within the philosophical framework of occupational therapy;
 - (f) The guidelines for educating the patient including instructing the patient to the process and possible outcomes of treatment, including risks and benefits;
 - (g) Safety rules and precautions related to the selected modality;
 - (h) Methods of documenting the effectiveness of immediate and long-term effects of treatment; and
 - (i) Characteristics of the equipment including safe operation, adjustment, and care of the equipment.
- (2) No less than 36 contact hours must be directly related to the specific theories and practical application of physical agent modalities.
- (3) Acceptable instruction or training shall include any activity relevant to the practice of physical agent modalities in occupational therapy and may include formal academic education, conferences, workshops, seminars, web-based instructions, and in-service education.
- (4) Each occupational therapist and occupational therapy assistant is responsible for submitting documentation of training. Documentation shall include:
 - (a) Proof of 90 hours of instruction or training. Of the 90 hours required:
 - (1) Occupational therapists shall receive 54 hours towards modalities certification based upon completion of entry level education in occupational therapy.
 - (2) Occupational therapy assistants shall receive 36 hours towards modalities certification based upon completion of entry level education in occupational therapy.
 - (b) The remaining hours may be reported by:
 1. Identification of the specific course or training where the therapist learned content related to each subject area identified in (1)(a-i).
 - 2.

A statement of attendance or a copy of the certificate of completion, that shows the title of program, hours of the program, date the program was taught, the signature of a designated program official, and a brochure or program outline must be provided.

3.

In-service training by attendance at a live presentation offered by a fellow practitioner or supervisor certified in PAMs. In-service training must be recorded in increments greater than or equal to 30 minutes. At no time should these in-services be conducted as part of patient care.

- (c) No more than 12 hours of asynchronous coursework may be submitted to satisfy the 90 hours required for PAMs certification.
 - (d) in accordance with O.C.G.A. Sec. 43-28-8(a)(1), none of the 90 hours required for PAMs certification can be obtained while practicing under a limited permit issued by the Board or supervised clinical hours offered through any provider.
 - (e) Additional documentation may be requested by the Board, if deemed necessary.
- (5) Anyone who holds a Certified Hand Therapy (CHT) credential is considered by the Board to have met the requirements for Physical Agent Modalities (PAM) certification and may be administratively approved upon submission of application.
- (6) Anyone who holds a dual degree of Physical Therapy and Occupational Therapy credentials is considered by the Board to have met the requirements for Physical Agent Modalities (PAMs) certification and may be administratively approved upon submission of application.

Cite as Ga. Comp. R. & Regs. R. 671-6-.02

Authority: O.C.G.A. §§ [43-28-3\(9\)](#), [43-28-7](#), [43-28-8.1](#), [43-28-12](#), [43-1-3](#) and [43-1-25](#).

History. Original Rule entitled "Requirements" adopted. F. Nov. 20, 1991; eff. Dec. 10, 1991.

Amended: F. Jan. 20, 2015; eff. Feb. 9, 2015.

Note: Correction of non-substantive typographical error in sub-paragraph (1)(c), "nor mal" corrected to "normal"; sub-paragraph (4)(a), "w here" corrected to "where", as requested by the Agency. Effective Oct. 11, 2016.

The Committee reviewed BR 671-6-.02 Requirements to clearly define the educational requirements to demonstrate competence for PAMs, as well as clarify the format in which the education must be reported. The amendment will allow more therapists to provide those services and will clarify reporting of educational requirements by detailing the type and amount of educational content required to gain approval to practice modalities. The Committee determined that this amendment is the least restrictive way to provide the information and allows for the expansion of credit hours that can be awarded to OTAs based on their entry level education. It further defines what can be obtained via asynchronous learning.

In accordance with statute [O.C.G.A. § 43-28-8(a)(1)], none of the 90 hours required for PAMs certification can be obtained while practicing under a limited permit issued by the Board or through supervised clinical hours offered through any provider. The Committee determined that the amendment is in the best interest of the applicant and the client for the provider to concentrate on obtaining and ensuring their competency level to become licensed before attempting to achieve PAMs certification. Additionally, it is prohibited according to O.C.G.A. § 43-28-8(a)(1).

There is a positive economic impact on licensees, employers, and the public by improving access to those who are qualified to perform PAMs. Additionally, the amendment will allow employers to offer the service more readily and receive necessary compensation. OTAs can obtain the certification faster, which has the potential to create financial

gain, and to improve upon the clinical outcomes for clients which could ultimately decrease the need for additional care.

Review and Discussion of Board Policies

1. Policy A1 – Policy for Applications for Licensure

POLICY A1

Category: Applications **Policy:** ■
Title: Policy for Applications for Licensure **Procedure:** ■

Statutory Basis: O.C.G.A. §§ 43-28-7; 43-28-8; 43-28-8.1; 43-28-9; 43-28-10; 43-28-11; 43-28-12; 43-28-14

Rule Basis: Chapters 671-3 and 671-6

- Administrative Authority has been granted to the staff to issue licenses and Limited Permits where answers to the conviction question is “No” and the applicant has met all licensure requirements subject to board final approval.
- Staff has been granted Administrative Authority to accept the NBCOT Online Certification Report as a Primary Source Verification of Certification.

***HISTORY:** Policy revised at the February 7, 2014 meeting; Policy revised at the May 15, 2015 meeting; Policy revised at the August 7, 2015 meeting; Policy revised at the February 19, 2016 meeting; Policy revised at the May 13, 2016 meeting. Revised at the February 26, 2021 meeting. Approved by Governor July 13, 2022.*

The Committee discussed amending Policy A1 – Policy for Applications for Licensure and determined it is necessary to amend the policy to remove information that is most relevant to applicants and licensees and address them in the rules instead of in a policy as the purpose of the policies is to provide directives to administrative personnel. The policy amendment provides notice that administrative authority is granted in some instances contingent that the information is aligned to the guidelines established by the Board. The Committee determined that there is a positive economic impact in that the policies give the staff administrative authority to process these matters in accordance with the policy thereby expediting the licensure process and improving efficiency.

2. Policy A5 – Staff Approval of Applications for Licensure and Renewal Related to Criminal Offenses

POLICY A5

Category: Applications **Policy:** ■
Title: Staff Approval of Applications for Licensure and Renewal Related to Criminal Offenses **Procedure:** ■

Statutory Basis: O.C.G.A. §§ 43-1-19(a)(j); 43-28-7; 43-28-8; 43-28-8.1; 43-28-9; 43-28-10; 43-28-11; 43-28-12; 43-28-14

Rule Basis: BR 671-3-.01 through 671-3-12; 671-6-.01 through 671-6-.03

The Board policy below grants administrative authority to staff to review and issue licenses when an application meets all criteria as outlined in the law and board rules. When an application reveals that the applicant has disclosed the existence of criminal conviction(s) staff is granted administrative authority to process the application in accordance with this policy. Any license issued in accordance with this policy shall be ratified by the Board during the next scheduled board meeting.

(1) Initial Applications

- (a) Sexual Offenses
 - i. If an applicant has been convicted of a misdemeanor sex crime, the application shall be referred for presentation before the Board
 - ii. If an applicant has been convicted of a felony sex crime, the application shall be referred for presentation before the Board.
- (b) Violent Felonies. If probation, parole, or supervised release is complete and the applicant has been convicted of no more than one violent felony, refer to the Cognizant for review. If there is no nexus to occupational therapy, the Cognizant may recommend administrative issuance of the license.
- (c) Non-Violent Felonies.
 - i. If probation, parole, or supervised release is complete and the applicant has been convicted of non-violent felonies, refer to the Cognizant for review. If there is no nexus to occupational therapy, the Cognizant may recommend administrative issuance of the license.
 - ii. If the applicant has been convicted of no more than one non-violent felony more than 15 years ago, court documents will be required, and the license can be administratively issued.
- (d) Mixed Felony Convictions. If the applicant has been convicted two or more felonies (both non-violent and violent), the application shall be referred to Legal Services for review and presentation of a recommendation to the Board in accordance with O.C.G.A. 43-1-19(q)(1&2).
- (e) Misdemeanor Convictions. If the applicant has had two (2) non-DUI misdemeanor convictions that occurred more than ten (10) years ago, court documents are required, but the license can be administratively issued.
- (f) Misdemeanor Convictions for DUI. If the applicant has had no more than two (2) misdemeanor DUI convictions, occurring more than 10 years ago, court documents are required, and the license can be administratively issued.

(2) Renewing or Reinstating Applicants

- (a) Applicants for license renewal and reinstatement are subject to the policies for initial applicants as described herein.
- (b) Board staff may administratively reinstate or renew a license when the applicant has convictions if:
 - (i) The applicant previously submitted the same convictions to the Board; and,
 - (ii) The Board previously reviewed those convictions.
- (c) If an applicant for renewal or reinstatement discloses a misdemeanor or felony conviction which occurred while the applicant was reinstated or renewed, then the application will be processed in accordance with the guidelines established in paragraph (1)(a-f) of this policy.

(3) Documentation.

- (a) Board staff will continue to request final disposition, sentence documentation, and/or official letterhead from probation, parole, or supervising officers for applicants and licensees with convictions in accordance with this policy and direction of the Board.
- (b) If information concerning convictions is not readily apparent in the court documents received by staff, staff shall refer the application to the Board. The Board will determine the appropriate course of action.

(4) Failure to Disclose. When an applicant fails to disclose an arrest or conviction, staff may administratively issue the license in accordance with the policies set forth herein if the arrest or conviction occurred:

- a. Over 10 years ago; however, in such cases, a Letter of Concern shall also be sent as a reminder to applicants that they shall disclose all convictions and failure to do so in the future may result in the Board exercising its right to sanction the license.
- b. Less than 10 years ago, the application shall be referred to Legal Services for a Public Consent Order with terms and conditions to include a \$500 fine and 2 hours of ethics in occupational therapy which may not be used to meet CE requirements for license renewal. Fine must be paid within 90 days of the docket date of the order. The referral decision and issuance of the order will be ratified by the Board at the next scheduled meeting.

- (5) **Incarcerated Applicants.** When an applicant is incarcerated, the application shall be presented to the Board for review.
- (6) **Fraudulent Documentation.** When an application is submitted with documentation suspected to be fraudulent, the application may be referred to the Board for review.
- (7) **Other Applications.** Any application which does not fall within the parameters set forth in this policy shall be referred to the Board for review.

HISTORY: Policy adopted at the May 17, 2013 meeting; Amended February 7, 2014.

The amendment to Policy A5 – Staff Approval of Applications for Licensure and Renewal Related to Criminal Offenses is proposed by the Committee in response to a request from the Office of Secretary of State for Boards to align policy and procedure with the most current statutes governing the review of applications with criminal history and/or false information. The Committee determined that there is a positive economic impact in that the policies give the staff administrative authority to process these matters in accordance with the policy thereby expediting the licensure process and improving efficiency to allow applicants and licensees to obtain licensure with little delay.

3. Policy A9 – Limited Permits

POLICY A9

Category: Applications Policy: ■
Title: Limited Permits Procedure: ■

Statutory Basis: O.C.G.A. §§ 43-28-10(c) and 43-28-12
Rule Basis: 671-2-.02, 671-2-.03, 671-3-.06(3), and 671-3-.09

- (1) The Georgia State Board of Occupational Therapy designates a Cognizant Board Member to:
 - (a) Approve all limited permit forms and supervision agreements (Supervised Clinical Experience Agreement Form or Limited Permit Supervised Clinical Practice Agreement Form); or,
 - (b) Refer the limited permit forms and supervision agreements to the full board for consideration during the next regularly scheduled meeting if:
 - 1. The documentation submitted is unclear, misleading, deceptive, false or fraudulent;
 - 2. The supervisor has been sanctioned in the past by the Board; or,
 - 3. The facility, agency, or practice area where the supervised clinical practice is scheduled to take place appears inadequate.
- (2) If the issuance of a limited permit is approved by the Cognizant:
 - (a) A letter stating that all supervision must be in compliance with the statutes and rules indicated within this policy will be sent to the occupational therapist who has been approved as the supervisor; and,
 - (b) A list of persons who received a limited permit based on this policy will be presented to the Board for a vote during a regularly scheduled meeting.

- (3) The license may be administratively issued if the Supervised Clinical Practice Evaluation Forms reflects that the supervisee has satisfied the requirements. If the form states otherwise, Board review is required.

History: Policy adopted at the November 13, 2020 meeting.

The Committee reviewed Policy A9 – Limited Permits to clarify the process for review and issuance of limited permits. They determined their recommendation will ensure competent practitioners by granting the Cognizant the ability to evaluate the supervisor and training that is to be obtained by a candidate for a limited permit. In doing so, the Cognizant can determine if the agreement and plan is being executed in a manner and in an environment that is conducive to increasing competence and safety. The recommendation allows therapists to provide services to clients under a level of supervision, thus improving access to care, and clarifies the factors that are under consideration by the Cognizant between meetings of the Board while carrying out the policy objectives.

Multiple variations were considered with requests from stakeholders to streamline processing of applications and expedite the licensure process. The policy amendment has a positive economic impact for applicants for licensure who require permits, as well as for all stakeholders, by expediting the pathway to licensure and ensuring a minimum level of competence for safe and effective practice.

Dr. Hinerfeld motioned, Ms. McDaniel seconded, and the Committee voted in favor of the motion to refer the Committee recommendations to the full Board.

Adjournment No further business was discussed, and the Committee meeting adjourned at 5:29 p.m.

Minutes recorded by: Adrienne Price, Executive Director
Minutes reviewed and edited by: Meagan Doss, Licensing Supervisor & Adrienne Price, Executive Director
Minutes approved on: August 15, 2025

ROBERT McCLELLAN
COMMITTEE CHAIR

ADRIENNE PRICE
EXECUTIVE DIRECTOR

ROBERT McCLELLAN
BOARD CHAIR