## **AGENDA ITEM 25**

DISCUSSION AND POSSIBLE ACTION ON WHETHER OCCUPATIONAL THERAPISTS WORKING IN PELVIC HEALTH CAN PERFORM INTERNAL (DIGITAL) EXAMINATIONS AND PROVIDE VARIOUS TREATMENTS INCLUDING BUT NOT LIMITED TO, BIOFEEDBACK, USE OF MODALITIES AND EXTERNAL MANUAL THERAPY ON CLIENTS.

#### **Public Comment received via email**

Hi Jody,

I hope this message finds you well! I'm trying to find out some information related to OT scope of practice within California and am hoping you can point me in the right direction...

I am interested in the ability of occupational therapists working in pelvic health to perform internal assessments on clients. I know that states/countries vary on whether or not OTs are allowed to do internal exams and I have believed that California regulations do allow for this. However, I can't find the language on it anywhere in the OT Practice Act or CA Code of Regulations.

Would you happen to be able to point me in the right direction?

Warmly,

C.D.R, OTD, OTR/L

### Oregon OT Licensing Board PUBLIC MEETING MINUTES Friday, November 2, 2018

800 NE Oregon Street / Conf. Room 445 / Portland, OR 97232

The Oregon Occupational Therapy Licensing Board meeting was held Friday, November 2, 2018 at the Portland State Office Building in Conference Room 445. The Board members present were: Linda Smith, OTR/L, Board Chair; Sybil Hedrick Park, OTR/L, CHT, CSCS, Vice Chair; Kari Hill, COTA/L; Erion Moore II and Clyde Jenkins, Public Members, Nancy Schuberg, Executive Director and Rachel Cillo, Licensing Specialist. Guests: Katharine DiSalle, AAG-phoned in.

With a quorum present, Board Chair Linda Smith called the Friday meeting to order at 10:01.

#### 1. Minutes:

The Board reviewed the public minutes of the **JULY 20th** meeting. A MOTION WAS MADE BY Sybil Hedrick Park AND SECONDED BY Kari Hill TO APPROVE THE PUBLIC MEETING MINUTES. THE MOTION PASSED WITH ALL PRESENT VOTING IN FAVOR.

The Board reviewed the confidential meeting minutes of the **JULY 20<sup>th</sup>** meeting. A MOTION WAS MADE BY Sybil Hedrick Park AND SECONDED BY Kari Hill TO APPROVE THE CONFIDENTIAL MEETING MINUTES. THE MOTION PASSED WITH ALL PRESENT VOTING IN FAVOR.

The Board reviewed the public minutes of the SPECIAL board meeting held on **OCTOBER 16<sup>th</sup>**. A MOTION WAS MADE BY Sybil Hedrick Park AND SECONDED BY Kari Hill TO APPROVE THE PUBLIC MEETING MINUTES. THE MOTION PASSED WITH ALL PRESENT VOTING IN FAVOR.

The Board reviewed the confidential minutes of the SPECIAL board meeting held on **OCTOBER 16<sup>th</sup>**. A MOTION WAS MADE BY Sybil Hedrick Park AND SECONDED BY Kari Hill TO APPROVE THE CONFIDENTIAL MEETING MINUTES. THE MOTION PASSED WITH ALL PRESENT VOTING IN FAVOR.

#### 2. Report of the Director:

#### **2017-2019 Budget**:

**Revenues:** June \$11,369; July \$4,550; August \$8,299; September \$12,350. The totals include revenue from fingerprinting. An additional \$40 per new applicant is passed through to the Oregon State Police who runs the background checks. It is paid from Services and Supplies. The Legislature approved an additional \$24,000 in limitation for the additional expense. The total revenue projected in the budget for this biennium, \$379,000, plus \$24,000 (fingerprinting) is \$403,000. The Board's total revenue is \$417,000 with nine months left in the biennium.

**Total Expenditures:** June \$16,946: July \$10,347.89; August \$12,100; September \$11,728. The allotment is what we can spend for the biennium and it is **\$483,425**, or **\$20,142** per month. The budget remains within the allotment.

Expenditures are divided into two categories, Personal Services (payroll) and Services and Supplies:

#### Personal Services:

Expenditures: June \$12,020; July \$12,084; August \$12,100; September \$11,728. Our average spending limitation for personal services is **\$14,294**/mo. The board is within the limitation.

#### Services and Supplies:

For June \$4,926.49; 13<sup>th</sup> month: \$4,317.80; July \$<1,736>; August \$5,382; September \$6,580. The average amount we can spend per month is **\$5,847**. The board is within the limitation.

<u>Legal Costs Tracking</u>: Legal costs were as follows: June \$509.60; July \$2,020.20; August \$1,164.80; September \$746.20. The OT Board has consulted more with the AAG due to increase in number and complexity of recent cases. OTLB is on a biennial flat fee contract with the DOJ and pays a set fee quarterly. However, the total of AAG costs for the 17-19 biennium will be factored in establishing the 19-21 contract amount. Due to the increased usage this biennium and DOJ rising costs the board predicts an increase in the contract for the 19-21 biennium. However, the legal costs fees will be within the limitation.

The OT board is within the 2017-19 budget.

<u>19-21 Budgeting</u>: The Director recapped the budgeting process. The Board submitted the Agency Request Budget (ARB) the end of July to the Chief Financial Office (CFO). The board reviewed the Analyst Report received back from CFO. OTLB submitted four Policy Option Packages in June. The IT increase in limitation to pay for the new database, etc. was approved. The increase in administrative staff from .5 to .75 was approved. The fee increase was not approved. The analyst stated in the report that there was enough ending balance and the board does not need to raise fees. The re-class for 407 directors from PEMC to PEMD level was denied until CHRO approves it first. The request was submitted to CHRO on 10/25/2018 by the 83300 Directors.

#### IT Update:

End-User/Help Desk Support: CTA is fully security cleared and on board.

**Database Replacement Project:** The initial scope of this project was to implement Elite, which at the time, was on an existing state contract. Due to circumstances outside the control of 83300 agencies, the scope of the project changed significantly when DAS changed the status of the contract, no longer allowing new agencies to use it. As a result, the agency must go through a formal procurement process to select any vendor/product. Irrespective of the contract, the Elite vendor had become increasingly unresponsive and the situation had been escalated to high-risk. Had DAS not closed the contract, a recommendation to consider other options would have been made. With the change in scope and need to go through a RFP process, the project will likely last longer than a year. The 83300 Boards have seen three new prospects and are working with DAS IT for security clearance.

<u>License Numbers</u>: As of Thursday, November 1st there were 2,086 OTs; 508 OTA's; a total of 2,594 licensees. There were 135 total licenses issued from July 20, 2018 – November 1, 2018.

**Board Appointments:** The Board has recommended OT Maxwell Perkins to the Governor's office as Linda Smith's replacement. The Senate hearing will be on December 12<sup>th</sup>. Sybil Hedrick Park will become Board Chair and Erion Moore will be the Vice Chair when Linda goes off the Board in mid-June. Sybil will chair the May meeting. The next board member for re-appointment will be Erion Moore in April 2020.

<u>OTAO</u>: The Board recapped the OTAO Conference presentation by AAG Joanna Tucker-Davis. The Board was pleased with her presentation. The Board will post the presentation, create a quiz and give a CE point for passing the quiz.

The Director attended the OTAO board meeting on 10/30/2018 and gave an update on the 19-21 budget, the annual performance report and recent scope of practice questions.

<u>FARB</u>: The Director attended the Federation of Regulatory Boards law conference held in September in Portland. She explained about Chevron Deference and the case law presented the meeting, including consequences of not following public meeting law.

**2019-21 Affirmative Action Plan:** The Board reviewed the first draft of the 19-21 Affirmative Action plan for any initial comments. The final draft will be adopted at the February 1<sup>st</sup> board meeting.

<u>Customer Service Survey results / Annual Performance Progress Report</u>: The Director provided the customer survey report feedback and the Annual Performance Progress Report. The Board's customer service rating for the period for fiscal year 7/17-6/18 is **100%** good or excellent rating based on 163 responses in every category except for availability of information 98% and comparison to other states 99%!!! The Board scored **100%** on our best practice survey and **100%** on discipline cases investigated and 96% of licenses issued within 3 days. The Board met all four of their key performance goals for the fiscal year.

<u>Supervision Audit</u>: The Director reviewed the results of the Supervision Audit. If there was no supervisor listed Board staff verified that the OTA was working out of state.

<u>Discipline Sheet</u>: The Director provided a new reference document for new board members regarding the discipline process.

<u>Change 2019 Board meeting date</u>: The August 2, 2019 meeting date was changed to July 26, 2019.

3. <u>Disciplinary/Investigations/Complaints:</u> In accordance with ORS 192.660 (2) (L) which allows the Board to meet in Executive Session on matters to consider information relating to information obtained as part of complaints and disciplinary investigations.

The following cases were considered:

• <u>OT 2013-08</u>: <u>Continued</u>

• <u>OTA 2016-06:</u> <u>Continued</u> - CE

• <u>OT 2018-02</u>: <u>Continued</u>

• **OT 2018-04**: Continued

• <u>OT 2018-05</u>: <u>Continued</u>

• <u>OTA 2018-06</u>: <u>Continued</u>

• OT 2018-09: Case was closed.

• **OT 2018-10:** Continued

• <u>OT 2018-13</u>: <u>Case was closed</u>

• <u>OT 2018-15</u>: <u>Continued</u>

• <u>OTA 2018-16:</u> <u>Continued</u>

• <u>OT 2018-17</u> <u>Case was closed</u>

• OTA 2018-18 Case was closed

- <u>OT 2018-21</u> <u>Case was closed</u>
- OT 2018-22 Case was closed

Lunch was provided as the Board continued working.

**PUBLIC SESSION:** The Executive session was adjourned and the meeting was brought back to public session. All votes were taken in public session.

#### 4. Motions from Executive Session and Ratify List of Licensees:

**2018-02** A MOTION WAS MADE BY Erion Moore AND SECONDED BY Linda Smith TO suspend the license. THE MOTION PASSED WITH ALL PRESENT VOTING IN FAVOR

**2018-09** A MOTION WAS MADE BY Sybil Hedrick Park AND SECONDED BY Linda Smith TO send a letter of concern and required the Law/Ethics exam. THE MOTION PASSED WITH ALL PRESENT VOTING IN FAVOR

**2018-10** A MOTION WAS MADE BY Kari Hill AND SECONDED BY Clyde Jenkins TO **proceed with the final notice by default.** THE MOTION PASSED WITH ALL PRESENT VOTING IN FAVOR

**2018-13:** A MOTION WAS MADE BY Erion Moore AND SECONDED BY Kari Hill TO **close the case.** THE MOTION PASSED WITH ALL PRESENT VOTING IN FAVOR.

**2018-15:** A MOTION WAS MADE BY Sybil Hedrick Park AND SECONDED BY Kari Hill TO suspend the license and invoke civil penalties. THE MOTION PASSED WITH ALL PRESENT VOTING IN FAVOR.

**2018-16:** A MOTION WAS MADE BY Linda Smith AND SECONDED BY Erion Moore TO **continue the case.** THE MOTION PASSED WITH ALL PRESENT VOTING IN FAVOR.

**2018-17:** A MOTION WAS MADE BY Linda Smith AND SECONDED BY Kari Hill TO **dismiss the case.** THE MOTION PASSED WITH ALL PRESENT VOTING IN FAVOR.

**2018-18:** A MOTION WAS MADE BY Linda Smith AND SECONDED BY Clyde Jenkins TO **approve the application and send a letter of concern.** THE MOTION PASSED WITH ALL PRESENT VOTING IN FAVOR.

**2018-21:** A MOTION WAS MADE BY Kari Hill AND SECONDED BY Linda Smith TO approve the application and send a letter of concern. THE MOTION PASSED WITH ALL PRESENT VOTING IN FAVOR.

**2018-22:** A MOTION WAS MADE BY Sybil Hedrick Park AND SECONDED BY Kari Hill TO **approve the application and send a letter of concern.** THE MOTION PASSED WITH ALL PRESENT VOTING IN FAVOR.

A MOTION WAS MADE BY Sybil Hedrick Park AND SECONDED BY Erion Moore TO **RATIFY THE LIST OF LICENSEES** ISSUED SINCE THE LAST BOARD MEETING. THE MOTION PASSED WITH ALL PRESENT VOTING IN FAVOR.

**5. Pelvic Floor Therapy:** The Board has been considering if Advanced Pelvic Floor Therapy is within the scope of practice for OT's in Oregon. At the May 11<sup>th</sup> meeting, Tracy Arnold, OTR/L gave a presentation to the Board: "Advanced" therapy includes:

"Internal pelvic floor treatment including standardized digital exams of the vagina &/or rectum along with palpation to assess tissue mobility &/or pain in the pelvic floor & surrounding tissues, & treatment interventions to treat pelvic issues including biofeedback, as well as other treatment modalities such as therapeutic exercise, external manual therapy, & myofascial release."

An analysis by the DOJ states that this practice is lawful by OT's in Oregon. The Board confirmed with the PT, Nursing and Medical boards that there is no conflict. The Board highlighted that if any question came up however, a therapist must always be able to show they have the education, training and experience to perform Advanced Pelvic Floor therapy.

A MOTION WAS MADE BY Kari Hill AND SECONDED BY Sybil Hedrick Park TO **allow Advanced Pelvic Floor Therapy.** THE MOTION PASSED WITH ALL PRESENT VOTING IN FAVOR.

**6.** Telehealth rules: The Board had its final motion to amend the telehealth rules OAR 339-010-0006, deleting #6 (a) and (b), per below. Concerns were stemming from the fact that the existing language requires the treating occupational therapist to attempt to ensure that an on-site OT be available in the event an in-person evaluation or interventions were necessary. In some remote rural locations, it is not feasible for the treating OT to ensure that an on-site OT would be available to perform in-person evaluations. AOTA sent a letter in support of the rule amendment. Practitioners in Oregon utilizing telehealth in their practice were polled and agreed with the change.

#### OAR 339 - 010 - 0006 Standards of Practice for Telehealth

- (6) When providing occupational therapy services via telehealth, an occupational therapist shall determine whether an **in- person evaluation** is necessary and make every attempt to ensure that a therapist is available if an on-site visit is required.
- (a) If it is determined **in-person interventions** are necessary, every attempt must be made to ensure that an on-site occupational therapist or occupational therapy assistant shall provide the appropriate interventions.
- (b) The obligation of the occupational therapist to determine whether an in-person re-evaluation or intervention is necessary continues during the course of treatment.

A MOTION WAS MADE BY Linda Smith AND SECONDED BY Sybil Hedrick Park TO amend the telehealth rules. THE MOTION PASSED WITH ALL PRESENT VOTING IN FAVOR

**7. Vision Therapy:** An optometrist in Bend reached out to the OTLB with concerns of OT's doing Vision Therapy. OT Member Sybil Hedrick Park volunteered to contact the OD and provided an update to the Board:

There are two types of vision: Low Vision and Vision Therapy:

<u>Low Vision</u>: For people with degenerative conditions, blind, macular degeneration. Conditions that impair vision. Well established in OTs for decades. AOTA has a Low Vision therapist certification.

<u>Vision Therapy</u>: Any visual compensation or re-mediation (rehabilitative exercises) around neurological conditions, (brain injury, stroke). Can include adaptive or compensatory strategies and or/rehabilitative strategies).

The Board will contact the AOTA and the Oregon Optometry Board regarding the following questions:

- 1) Does AOTA stand firm that OTs should not be doing visual intervention without a referral from an ophthalmologist or optometrist or should that be left up to the states?
- 2) If they leave it to the states, are their ORS's/OAR's that define or bring up Vision Therapy? Vision therapists are not licensed. They are often trained by the overseeing optometrist. Is it defined anywhere in our state what is vision therapy? If there are definitions, do we fit within the definitions?

- 3) Are there ORS's/OAR's around defining optical devices? Needing prescription or not by an optometrist or ophthalmologist?
- **8. Supervision Workgroup:** The Board reviewed new Q and A by category ready for the website: General Requirements, Roles and Responsibilities, PRN, Home Health and Schools.
- **9. Strategic Plan Update:** The Board continues to track the progress of the 2016 Strategic plan goals. The Director is focusing on how to move the board forward with technology. The Director is hopeful the new database will allow for online applications and paying application fees by credit card. The Board would like to make it possible to update OTA supervision electronically via a mobile phone.
- <u>10. December Newsletter</u>: Topics for the December Board newsletter will include the pain management, duty to report, work force data, supervision workgroup and recap the board presentation at the OTAO meeting.

The Board Chair adjourned the meeting at 1:14 pm.

2019 Board meetings: Fridays: Feb. 1; May 3; July 26; Nov. 1

Nancy Schuberg, Director. November 16, 2018



# STATE OF NEVADA BOARD OF OCCUPATIONAL THERAPY

#### NOTICE OF PUBLIC MEETING

July 16, 2022 – 9:00 a.m.
Board of Occupational Therapy
Administrative Office

Administrative Office 6170 Mae Anne Ave. Suite 1 Reno, NV 89523

**ZOOM Access:** 

https://us06web.zoom.us/j/84586117182?pwd=VFRGcFJQdGlUMUwyb0JOOUtJbDdzUT09

Meeting ID: **845 8611 7182**Passcode: **810788**Telephone Audio Only: **(253) 215-8782** 

#### **AGENDA**

The State of Nevada Board of Occupational Therapy may: (a) address agenda items out of sequence, (b) combine agenda items, and (c) pull or remove items from the agenda at any time. The Board may convene in closed session to consider the character, alleged misconduct, professional competence or physical or mental health of a person. (NRS 241.020, NRS 241.030) Action by the Board on an item may be to approve, deny, amend, or table.

- 1. Call to Order, Introduce Board Members, Confirmation of Quorum
- 2. Public comment

No vote may be taken upon a matter raised during a period devoted to public comment until the matter itself has been specifically included on an agenda as an item upon which action may be taken. (NRS 241.020)

- 3. Approval of the Minutes of Board Meeting of May 14, 2022 (for possible action)
- 4. Disciplinary Matters Request for Release from Probation (for possible action)
  - Michel Rantissi, OT License No. 0662; Case No. C20-07 & C20-08

Possible closed session for the Board to consider the character, alleged misconduct, professional competence or physical or mental health of a person (NRS 241.030)

- 5. Consideration of Application for Reinstatement, Practice without Current License (for possible action)
  - Tania Stegen-Hanson OTR, License No. 0417

Possible closed session for the Board to consider the character, alleged misconduct, professional competence or physical or mental health of a person (NRS 241.030)

### **2023 LEGISLATIVE SESSION PLANNING SCHEDULE**

Legislation	Timeline	Implementation
Preparatory Legislation BDR Draft	July - August 2022	Planning Session
License by Reciprocity – Compact States	September - December	Stakeholder / Sponsor Outreach
Miscellaneous Other NRS Updates	January 2023	BDR Presentation
	February – June 2023 Session	Legislative Committees / Presentations
PASS		
Legislative Interim	July 2023 through June 2024	Data System Updates
	Regulation Revisions	Workshops / Hearings
	Planning Session on Next Steps for OT	
	Compact Participation	
FAIL		
Planning Session on Next Steps		

## State of Nevada Board of Occupational Therapy

6170 Mae Anne Ave., Suite 1, Reno, Nevada 89523 Phone (775) 746-4101 / Fax (775) 746-4105 / Website www.nvot.org

#### **AGENDA ITEM 11:** New / Revised Regulations

Proposed new and revised regulations are presented for review and consideration whether to move forward with Workshop and submittal to LCB for drafting.

The regulation is comprised of 2 new sections related to scope of practice.

Sec 1.1 addresses general requirements and defines competence.

Sec 1.2 address specialty practice and sets criteria for maintenance of documentation, requires practice experience, and written consent for pelvic examinations.

The regulation amends NAC 640A.070 continuing education and NAC 640A.350 unprofessional conduct.

NAC 640A.070 would recognize current certification as meeting the requirement for continuing education if certification was renewed within the 24 months of renewal of a license.

NAC 640A.350 would add touching of a patient or client for a sexual purpose as an additional act constituting unprofessional conduct.

#### Background

Senate Bill 196 amended NRS 629 (health care) to restrict a provider of health care from performing pelvic examinations if not within the scope of practice of the provider of heath care. The bill also amended NRS 640A.200 (our law) to add an additional act to "unprofessional conduct": the performance or supervision of the performance of a pelvic examination in violation of Section 1 of NRS 629.

Attachments

**Proposed Regulation Draft** 

#### PROPOSED REGULATION OF

#### THE BOARD OF OCCUPATIONAL THERAPY

#### LCB File No. XXXX-XX

A REGULATION relating to occupational therapy; revising provisions relating to scope of practice; continuing education requirements; and providing other matters properly relating thereto.

**Section 1.** Chapter 640A is hereby amended by adding thereto the provisions set forth as Sections

1.1 and 1.2 to read:

#### Sec. 1.1 NAC 640A.xxx General requirements. (NRS 640A.110)

#### A licensee shall:

- 1. Maintain competence in the practice of occupational therapy and his or her personal scope of practice.
- 2. Report to the Board any unlicensed, unauthorized, unqualified, unethical or unprofessional practice of occupational therapy by another person.
- 3. Protect the public by following infection control guidelines promulgated by the Centers for Disease Control (CDC).

"Competence" defined. Competence is the application of knowledge, skills and behaviors required to function effectively, safely, ethically and legally within the scope of practice of occupational therapy.

#### Sec 1.2 NAC 640A.xxx Specialty Practice (NRS 640A.110).

A licensee shall not engage in specialty practice unless competence has been obtained in the specialty practice area. Competence is obtained through continuing education, practice experience, specialty training or specialty certification.

#### A licensee shall:

- 1. Maintaining documentation of education, practice experience, specialty training or specialty certification.
- 2. Practice at least one-year in a specialty practice setting under the guidance of an established specialty practice occupational therapist.
- 3. Obtain written consent of the patient or client prior to performing a pelvic examination, an internal evaluation or performing any internal therapeutic procedures.
- 4. Shall not engage in touching of a patient or client for a sexual purpose or in any way not necessary for any treatment intervention.

Sec. 2 NAC 640A.070 is hereby amended to read as follows.

#### NAC 640A.070 Continuing education: Generally.

- 1. Except as otherwise provided in subsection 5, *subsection 8* and NAC 640A.101, a person with a standard license shall complete, to the satisfaction of the Board, at least 24 hours of continuing education per biennial renewal cycle.
- 2. If the licensee obtains more than 24 hours of continuing education during a biennial renewal cycle, he or she may carry over a maximum of 10 hours towards completion of his or her requirement for continuing education for the following biennial renewal cycle.
- 3. A licensee must achieve a passing score on the Nevada Occupational Therapy Jurisprudence Examination at least once every 5 years.
- 4. A person may receive credit for fieldwork supervision, the completion of a particular continuing education course or the achievement of a passing score on the Nevada Occupational Therapy Jurisprudence Examination only once during a biennial renewal cycle.
- 5. A person who obtains a standard license within 12 months of graduation from an educational program which is accredited by an agency approved by the Board and which includes a fieldwork program is required to obtain 12 hours of continuing education in order to renew the license for the first time.
- 6. A licensee shall comply with the requirements for continuing education, including, without limitation, submitting to the Board a list of any courses and activities that the licensee completed to satisfy the provisions of this section. The materials described in this subsection must be submitted at the time, as established by the Board, the licensee is required to submit to the Board the application for the renewal of his or her license.
- 7. To ensure compliance with the provisions of this section, the Board will conduct random audits of the continuing education completed by licensees.
- 8. A licensee who holds current certification from the National Board for Certification in Occupational Therapy is deemed to have met the requirements for continuing education pursuant to this section, if the licensee has renewed their certification during the 24 months prior to the date of application for renewal of his or her license with the Board.

#### Senate Bill No. 196

CHAPTER......... AN ACT relating to health care; prohibiting a provider of health care or a person supervised by a provider of health care from performing a pelvic examination under certain circumstances; authorizing the imposition of professional discipline against certain providers of health care who perform or supervise the performance of a prohibited pelvic examination; and providing other matters properly relating thereto.

## Section 1. Chapter 629 of NRS is hereby amended by adding thereto a new section to read as follows:

- 1. A provider of health care shall not:
- (a) Perform or supervise the performance of a pelvic examination that the provider of health care is not appropriately licensed, certified or registered to perform or is not within the scope of practice of the provider of health care.

#### Sec. 11. NRS 640A.200 is hereby amended to read as follows: 640A.200

- 1. The Board may, after notice and a hearing as required by law, suspend, revoke or refuse to issue or renew a license to practice as an occupational therapist or occupational therapy assistant, or may impose conditions upon the use of that license, if the Board determines that the holder of or applicant for the license is guilty of unprofessional conduct which has endangered or is likely to endanger the public health, safety or welfare. The Board may reinstate a revoked license pursuant to the provisions of chapter 622A of NRS upon application by the person to whom the license was issued.
- 2. Notwithstanding the provisions of chapter 622A of NRS, if the Board receives a report pursuant to subsection 5 of NRS 228.420, a disciplinary proceeding regarding the report must be commenced within 30 days after the Board receives the report.
- 3. An order that imposes discipline and the findings of fact and conclusions of law supporting that order are public records.
- 4. As used in this section, "unprofessional conduct" includes:
- (a) The obtaining of a license by fraud or through the misrepresentation or concealment of a material fact;
- (b) The conviction of: (1) A felony or gross misdemeanor relating to the practice of occupational therapy; or (2) Any crime involving moral turpitude;
- (c) The violation of any provision of this chapter or regulation of the Board adopted pursuant to this chapter; [and]

## (d) The performance or supervision of the performance of a pelvic examination in violation of section 1 of this act; and

- (e) The operation of a medical facility, as defined in NRS 449.0151, at any time during which:
- (1) The license of the facility is suspended or revoked; or (2) An act or omission occurs which

results in the suspension or revocation of the license pursuant to NRS 449.160.  $\supseteq$  This paragraph applies to an owner or other principal responsible for the operation of the facility.

#### **Applicable Unprofessional Conduct Sections of Regulations**

NAC 640A.350 Acts constituting unprofessional conduct. (NRS 640A.110, 640A.200) In addition to those acts specified in subsection 4 of NRS 640A.200, the following acts, among others, constitute "unprofessional conduct":

- 16. Misrepresenting or falsifying credentials, including, without limitation, those relating to education, training, experience and areas of **competency**;
- 18. Performing professional services which the occupational therapist knows he or she is not **competent t**o perform.