

1 AN ACT concerning the regulation of professions.

2 Be it enacted by the People of the State of Illinois,
3 represented in the General Assembly:

4 Section 5. The Illinois Occupational Therapy Practice
5 Act is amended by changing Section 2 and adding Sections 3.1
6 and 11.1 as follows:

7 (225 ILCS 75/2) (from Ch. 111, par. 3702)

8 Sec. 2. Definitions. In this Act:

9 (1) "Department" means the Department of Professional
10 Regulation.

11 (2) "Director" means the Director of Professional
12 Regulation.

13 (3) "Board" means the Illinois Occupational Therapy
14 Board appointed by the Director.

15 (4) "Registered Occupational Therapist" means a person
16 licensed to practice occupational therapy as defined in this
17 Act, and whose license is in good standing.

18 (5) "Certified Occupational Therapy Assistant" means a
19 person licensed to assist in the practice of occupational
20 therapy under the supervision of a Registered Occupational
21 Therapist, and to implement the occupational therapy
22 treatment program as established by the Registered
23 Occupational Therapist. Such program may include training in
24 activities of daily living, the use of therapeutic activity
25 including task oriented activity to enhance functional
26 performance, and guidance in the selection and use of
27 adaptive equipment.

28 (6) "Occupational Therapy" means the therapeutic use of
29 purposeful and meaningful occupations or goal-directed
30 activities to evaluate and provide interventions for
31 individuals and populations who have a disease or disorder,

1 an impairment, an activity limitation, or a participation
 2 restriction that interferes with their ability to function
 3 independently in their daily life roles and to promote health
 4 and wellness. Occupational therapy intervention may include
 5 any of the following:

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

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

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

16 (d) health promotion strategies and practices that
 17 enhance performance abilities.

18 The occupational therapist may assume a variety of
 19 roles in his or her career including, but not limited
 20 to, practitioner, supervisor of professional students and
 21 volunteers, researcher, scholar, consultant,
 22 administrator, faculty, clinical instructor, and educator
 23 of consumers, peers, and family. the-evaluation-of
 24 functional-performance-ability--of--persons--impaired--by
 25 physical---illness---or---injury,---emotional---disorder,
 26 congenital--or--developmental--disability,--or--the-aging
 27 process,-and-the-analysis,-selection-and--application--of
 28 occupations---or---goal---directed--activities,-for--the
 29 treatment-or-prevention-of-these-disabilities-to--achieve
 30 optimum---functioning.---Occupational--therapy--services
 31 include,-but-are--not--limited--to--activities--of--daily
 32 living--(ADL);--the-design-fabrication-and-application-or
 33 splints,---administration---and---interpretation---of
 34 standardized---tests---to---identify---dysfunctions,

1 sensory-integrative--and-perceptual-motor-activities, the
 2 use--of--task--oriented--activities,--guidance---in---the
 3 selection--and--use--of--assistive-devices, goal-oriented
 4 activities---directed---toward---enhancing---functional
 5 performance,--pre-occupational--evaluation--and--vocational
 6 training, and consultation in the adaptation of physical
 7 environments--for--the--handicapped.---These services are
 8 provided--to--individuals--or--groups--through--medical, health,
 9 educational, and social systems. An occupational
 10 therapist may evaluate a person but shall obtain a
 11 referral--by--a--physician--before--treatment--is--administered
 12 by--the--occupational--therapist. An occupational therapist
 13 shall---refer---to---a---licensed---physician, dentist, or
 14 podiatrist any patient whose medical condition should, at
 15 the time of evaluation or treatment, be determined to be
 16 beyond---the---scope--of--practice--of--the--occupational
 17 therapist.

18 (7) "Occupational therapy services" means services that
 19 may be provided to individuals and populations including,
 20 without limitation, the following:

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

25 (b) evaluating, developing, improving, or restoring
 26 sensory motor, cognitive, or psychosocial components of
 27 performance;

28 (c) designing, fabricating, applying, or training in
 29 the use of assistive technology or orthotic devices and
 30 training in the use of prosthetic devices;

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

34 (e) applying physical agent modalities as an adjunct

1 to or in preparation for engagement in occupations;

2 (f) evaluating and providing intervention in
3 collaboration with the client, family, caregiver, or
4 others;

5 (g) educating the client, family, caregiver, or
6 others in carrying out appropriate nonskilled
7 interventions; and

8 (h) consulting with groups, programs, organizations,
9 or communities to provide population-based services.

10 (8) "Occupational therapy aid" means an individual
11 who provides supportive services to occupational therapy
12 practitioners but who is not certified by a nationally
13 recognized occupational therapy certifying or licensing
14 body.

15 (Source: P.A. 88-424.)

16 (225 ILCS 75/3.1 new)

17 Sec. 3.1. Referrals. An occupational therapist may enter a
18 case for the purposes of providing consultation, education,
19 and monitoring services and for evaluating an individual for
20 the need for occupational therapy services for non-medical
21 client needs. Implementation of direct occupational therapy
22 to individuals for their specific health care conditions
23 shall be based upon a referral from a licensed physician,
24 dentist, podiatrist, optometrist, or any other qualified
25 licensed health care professional who, within the scope of
26 the professional licensure, is authorized to refer for health
27 care services.

28 (225 ILCS 75/11.1 new)

29 Sec. 11.1. Continuing education requirement. Licensed
30 occupational therapists and certified occupational therapy
31 assistants shall demonstrate continued competency as a
32 requirement for the renewal of their licenses. Continued

1 competency is the ongoing application and integration of
2 knowledge, critical thinking, interpersonal, and psychomotor
3 skills essential to safely and effectively deliver
4 occupational therapy services within the context of a
5 practitioner's role and environment. The indicators of
6 continued competency change over time as various factors,
7 such as a change in role, practice setting, or client
8 population and responsibility, reshape the scope of an
9 occupational therapist's practice. Continued competency
10 includes the demonstration of observable and quantifiable
11 behaviors throughout the occupational therapy process
12 including evaluation, planning, analysis, and modification of
13 interventions, supervision, administration, research, and
14 education. Interpersonal and behavioral characteristics of
15 continued competency include a safe, efficient, and effective
16 service of practice and an ongoing assumption of
17 responsibility for continued professional growth and
18 development.

19 Section 99. Effective date. This Act takes effect on
20 January 1, 2002.