



D.C. Board of Occupational Therapy

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YOUR MAILING ADDRESS

Changing your mailing address? Send your name, mailing address, and license number to:

Board of Occupational Therapy Processing Department
899 N. Capitol Street, NE
First Floor
Washington, DC 20002

★ ★ ★ Government of the District of Columbia
Muriel Bowser, Mayor



Winter 2015

LETTER FROM THE CHAIR

Greetings! Welcome to annual edition of the District of Columbia Board of Occupational Therapy Newsletter. This newsletter remains our primary means of communication with all DC licensed occupational therapists (OTs) and occupational therapy assistants (OTAs).

The Board consists of three (3) Occupational Therapists, one (1) Recreational Therapist, and one (1) public member. We continue to look for a public member. If you have any recommendations please pass them along. All Board members must be residents of the District of Columbia. The public member CANNOT be a healthcare practitioner.

The Board meets at least four times every year. The months we meet are March, June, September, and December. The meeting is usually on the third Monday of the month, at 2:00 pm. Open Session is at 2:30 pm. Public input is always welcomed.

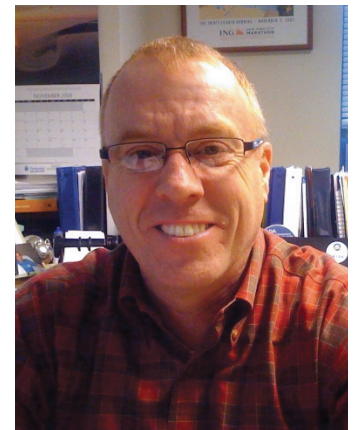
If the need arises we meet at other times. The Board members do go into the office on a regular basis to review any pending applications. No completed application waits more than two weeks for the appropriate Board review and signature.

Make sure to check out the Board of Occupational Therapy website at <http://doh.dc.gov/node/157592>. It has lots of useful information.

The Board amended and created new regulations for Occupational Therapists (OTs) and for Occupational Therapy Assistants (OTAs) respectively. These updates will impact your practice. The amended regulations separate the requirements for the two professions. The OT standards of practice were amended to update and provide clarity. In addition, new OTA practice regulations were created. The amended and new regulations can be found at <http://doh.dc.gov/node/222832>. As a licensee, it is your responsibility to review the regulations governing your profession and become familiar with them.

Please review the regulations in their entirety and give particular attention to the amended and new sections:

(continued on page 2)



Frank E. Gainer, MHS, OTR/L, FAOTA, CMP, CAE

YOUR CURRENT LICENSE WILL EXPIRE ON SEPTEMBER 30, 2015

OT Board Meeting Open Session

The OT Board meets on the
Third Monday of:
March, June, September,
and December

Open Session 2:30 pm

Location: 899 N. Capitol Street, NE
Washington, DC 20002

Contact Mavis Azariah at
(202) 442-4782 or
mavis.azariah@dc.gov

OT TOWN HALL MEETING

Date: Thursday, February 19, 2015
Time: 5:00 pm - 7:00 pm
Speaker: VIRGINIA (GINNY) STOFFEL, PHD, OT, BCMH, FAOTA
PRESIDENT, AMERICAN OCCUPATIONAL THERAPY ASSOCIATION
Place: W. Lester Henry (Tower) Auditorium | Ambulatory Care Building
HOWARD UNIVERSITY HOSPITAL
2041 Georgia Avenue, NW, Washington, DC 20060

Verification of Licensure

Licensing authorities and some health facilities often require a letter of verification of the current or previously held licenses. These letters of verification are sometimes called "letter of good standing." The District will issue this type of verification even though the District license may have expired.

To receive a letter of good standing: If the jurisdiction or institution provides a form, please forward the form, with a check or money order payable to "DC Treasurer" in the amount of \$34.00 to:

DC Board of
Occupational Therapy
899 N. Capitol Street, NE
First Floor
Washington, DC 20002

Be sure to include name and return address where the form is to be sent.

If the jurisdiction or institution does not provide a form, please send a note requesting a letter of verification. The note should include both the name of the person requesting the verification and the name and address of the recipient. Please enclose a check or money order (for \$34.00) payable to "DC Treasurer."

Letter from the Chair (continued from page 1)

Occupational Therapy Regulations:

- Section 6308 – Continuing Education Credits
- Section 6312 – Responsibilities
- Section 6314 – Occupational Therapy Aides
- Section 6315 – Continuing Education Audit
- Section 6317 – Practice of OT by a Student, Graduate, or Person Seeking Licensure, Re-licensure, Reactivation, or Reinstatement

Occupational Therapy Assistants Regulations:

- The entire regulation is new
- Section 7314 – Supervision of Occupational Therapy Assistants

If you have any questions about these regulations, please contact Ms. Azariah Armattoe, Health Licensing Specialist at mavis.azariah@dc.gov.

The Board hosts one Town Hall Meeting a year for all licensees. In 2015, it is scheduled for **Thursday, February 19th at Howard University Hospital** (see notice above). Virginia (Ginny) Stoffel, President of AOTA, will be the featured speaker.

The Board is also responsible for the registration and regulation of Recreational Therapists. We have a biennial gathering with the District's Recreational Therapists. Board member Charles Bond is our representative with the Recreational Therapists. The Board, over the next year, will be working on revising the rules and regulations for Recreational Therapists.

The Board's primary responsibility is to protect the public. The Board takes this responsibility very seriously. If you have a complaint against an Occupational Therapist or Occupational Therapy Assistant, please go online for instructions on how to file a complaint:

<http://doh.dc.gov/service/file-complaint-health%20prof>

Complaints cannot be anonymous. Everyone is entitled to due process.

As always, I appreciate your constructive feedback. Please feel free to e-mail me at fgainer@aota.org.

Thank you.

Frank E. Gainer, MHS, OTR/L, FAOTA, CMP, CAE
Chairperson
DC Board of Occupational Therapy

OT BOARD HOSTS "MEET AND GREET" FOR RECREATIONAL THERAPISTS

District of Columbia Recreational Therapists were recently given the opportunity to meet the OT Board staff and to give their feedback at the 2014 Fall OT Board "Meet and Greet" for Recreational Therapists.

"There are 59 registered Recreational Therapists in the District. If you are practicing as a Recreational Therapist in DC, you need to be registered," said the board's Recreational Therapy Board Member Charles Bond. Practitioners who are not registered can be fined \$500.00 by the OT Board; in such cases the supervisor will be fined also.



OT Board Member
Charles Bond, MS, CTRS, RRT



DC Recreational Therapists came to "meet and greet" OT Board Members and Staff and discuss regulatory issues.



Attendees arrived from St.

Elizabeths Hospital, the Hospital for Sick Children, Washington Home and Community Hospice, Stoddard Baptist Nursing Home, and Transitions HealthCare. "The Board's mission is to protect the public," Board Chairperson Frank Gainer told participants. The attendees spoke with OT Board Members and staff about Chapter 72, the regulations for Recreational Therapy practices. They discussed the registration process and plans to develop a Supervised Practice Letter for Recreational Therapists waiting for their DC registration process to be completed. If an unregistered Recreational Therapist has a Supervised Practice Letter, they can practice for 60 days. One participant said that a Supervised Practice Letter would be a good idea. When she relocated to DC, she said, the facility would not let her work on the floor because her registration process had not yet been completed. Attendees were also asked about the prospect of regulations establishing continuing education requirements for Recreational Therapists. "Send your recommendations to us in writing, via email," Mr. Gainer said.

Board Chair Frank Gainer introduced Board Attorney Panravee Vongjaroenrat, who assists the Board in drafting regulatory language and reviews all charges which appear on applicants' Criminal Background Check, among other duties.

"You are invited to attend the Open Session of the OT Board meetings," Mr. Gainer said. "If you have any questions about any issues, please contact Health Licensing Specialist Mavis Azariah Armattoe at (202) 442-4782."

OCCUPATIONAL THERAPY BOARD MEMBER CHARLES BOND HONORED AT ATRA ANNUAL CONFERENCE

Congratulations to Charles Bond, MS, CTRS, RRT, the OT Board's Recreational Therapist Board member. Mr. Bond was honored, as an ATRA Pathfinder, at the 30th Anniversary Gala Celebration of the American Therapeutic Recreational Association last fall in Oklahoma City. ATRA Pathfinders include individuals who served on past Boards of Directors and Distinguished Fellows of the organization.

SPECIAL MESSAGE FOR OT PRACTITIONERS IN SCHOOL SETTINGS

Practicing in the school setting is exciting, challenging, and offers a great deal of autonomy. While that independence offers flexibility, it also brings with it a set of circumstances that can leave you at risk. Don't lose sight of protecting your license!

The following are some frequently overlooked details that could cost you your license. Keep an eye out!

1. CHECK FOR CONSENT: IDEA requires schools to obtain parent/guardian consent before practitioners are authorized to evaluate. Don't evaluate on blind faith. Special education coordinators are busy, and often, in a rush to meet a deadline, you may be directed to expedite an evaluation with the promise that the authorization is filed. It is the practitioner's responsibility to confirm that consent, whether through accessing student electronic records (SEDS) or obtaining a copy of the consent form. In the event those records are not available, it is the responsibility of the practitioner to obtain consent in writing prior to assessing the student. Don't get caught up in an IDEA blunder!

2. SUPERVISION HAS GUIDELINES: The Board has been seeing more and more situations where OTA's aren't receiving the requisite supervision due to "crazy schedules", "huge caseloads", and logistical barriers. School based practice takes you from school to school, and so too should your supervision 'practice' if you are working with OTA's. What's more, it's your responsibility to make sure that all practice involving students is done so according to the regulations. Did you check your OTA's license before signing off on supervisory documents? Does the OT you are supervising have a 'supervised practice form' filed with the licensing Board?

Again, school based practice offers a tremendous amount of freedom, but with that freedom comes the responsibility to protect yourself, your students, and your job! When supervising OTAs, OTs awaiting their license, and fieldwork students, make sure all of the appropriate documentation is in place, and take the time to get to know your supervisee. It is your responsibility to know their level of skill, their limits, and to communicate a clear plan for supervision.

In general, as a licensed therapist, short cuts, blind trust, and lack of 'due diligence' though convenient, can cost way more than the money or time saved. They can cost you your license! Take the time to do it right!

NBCOT STAFF SPEAK TO OT BOARD

Shaun Conway, OTR, Senior Director of Credentialing Services of NBCOT, and Karthik Mani, Assistant Director of Credentialing Services, visited the Board last September.

Mr. Conway shared a presentation on NBCOT and its operations and the topic of OT licensure nationwide. He told Board members that the purpose of NBCOT's visits to the state boards is to exchange information about NBCOT and to listen to the state boards' questions and concerns.

NBCOT is a not-for-profit credentialing agency.



Shaun Conway, OTR, Senior Director of Credentialing Services and **Karthik Mani**, Assistant Director of Credentialing Services.

MEET BOARD OF OCCUPATIONAL THERAPY EXECUTIVE DIRECTOR ROBIN Y. JENKINS

When did you begin serving as Executive Director of the HRLA Allied and Behavioral Health Boards?

I started with the department in August of 2013.

Please tell us a little about your professional experience and areas of expertise.

I have experience within private associations as well as governmental entities. I have a strong regulatory foundation and a long work history in the regulatory arena.

My areas of expertise include operations management, application processing, board operations, policy development, monitoring and compliance.

What position did you hold prior to accepting the position at HRLA?

Prior to joining the Department of Health, I served as the executive director for the District of Columbia's Higher Education Licensure Commission. I was responsible for all daily operations including governance management, staffing, budgeting, strategic planning, and external communications. I implemented regulations governing all colleges, universities, trade and professional institutions, as well as the compliance, and monitoring programs.

What is your background with regard to working for private associations?

Before joining the District of Columbia government, I served as Senior Policy Associate for the National Association of Social Workers as the regulatory liaison to 56 chapters. I also served as the liaison to the examination test vendor

“I would let licensees know that Board members are not scary people or out to get them. Board staff is here to assist and educate them. A board exists for their protection as consumers of service, too.”

and managed professional credentials and certifications for the organization.

Have you had the opportunity to interact with regulatory professionals outside of the District of Columbia?

I have served on national and international regulatory committees and boards. I am currently a member of the board of directors for the Council on Licensure, Enforcement, and Regulation and the National Association of State Administrators and Supervisors of Private Schools. I am also a faculty member for the Council on Licensure Enforcement and Regulation and the Association of Social Work Boards board member training programs.

What is your educational background?

I have a BS degree from George Mason University, an MSW from Howard University, a certificate in Public Management from George Washington University and a certificate in Nonprofit Management from Georgetown University.

What is your top priority in your new position?

After an opportunity to spend time with each board chairperson as well as observe the boards and board staff in action for a few months I decided to engage my team in developing the priorities. We will first work to develop policies and procedures so that we work smarter. As staff, one aspect of our job is to ensure that board members are provided with all the information and data available to be adequately prepared to carry out their mandated duties in the areas of setting standards, codes of ethics, competencies, and continuing competency requirements for practitioners.

What would you say to someone who is interested in applying to become a Board member?

I would tell them that serving on a board is a public service privilege. I would inform them that citizens of the District of Columbia will have trust and confidence in the board to ensure that there is accessibility to competent, safe, and ethical practitioners.

What message would you like to convey to the licensees of the boards you serve?

I would let licensees know that Board members are not scary people or out to get them. Board staff is here to assist and educate them. A board exists for their protection as consumers of service, too.

Any tips for licensees who may be called to appear before the Board?

Honesty is the best policy.

OT TOWN HALL 2014



Robin Jenkins, Exec. Dir., OT Board



Frank Gainer, Chair, OT Board



Amy Jo Lamb, Vice President of AOTA



The Board of Occupational Therapy sponsored a town hall meeting at the Louis Stokes Health Sciences Library, at Howard University, in February 2014. The program featured keynote speaker **Amy Jo Lamb, OTD, OTR/L, FAOTA**, Vice President of the American Occupational Therapy Association (AOTA). The program was entitled “OT Distinct Value.”

“DOES IT REALLY TAKE TWO PEOPLE TO EXERCISE ONE BODY?”

“Have you gone into a room and the patient thinks you are a PT [physical therapist]?” Ms. Lamb asked attendees. “They might even say ‘I already worked with you today.’ The confusion that patients and policymakers sometimes express about who OTs are—and what OTs do—highlights the need for **OTs to define themselves as a distinct and invaluable group of health care professionals** whose practice allows patients to regain skills that have been affected by chronic or acute health challenges.”

Some patients and policymakers ask why both PT and OT are necessary. “Does it really take two people to exercise one body?”

“We have to make sure we are showing the value of what’s different,” Ms. Lamb said. But that difference eventually becomes apparent. Once patients regain the ability to walk, they soon realize that they want to do much *more* than just walk. They want to fully function—to be able to do the things they did before their illness. This is where OT practice begins. OT allows patients to regain the skills needed function and complete the tasks that they want to do and need to do.

OTs MUST CLARIFY WHO THEY ARE AND WHAT THEY DO

Ms. Lamb told attendees that OTs must position themselves so that people are aware that occupational therapy, physical therapy, speech-language therapy are not the same thing. “We must educate others about the distinct difference of OT so that policymakers, healthcare organizations, and those we serve understand the distinct difference between OT and other therapists,” she said.

“One obstacle we face is the word ‘occupation,’” Ms. Lamb said. She used to be frustrated when people misunderstood the OT profession, and they expressed the mistaken belief that an occupational therapist’s job is to help jobseekers find employment. Ms. Lamb asked participants, “Has anyone said to you, ‘oh, you help people find jobs’?”

But of late, Ms. Lamb says she does not get frustrated—she uses that as a starting point for a conversation on the profession of occupational therapy. “We *do* help people get jobs. We facilitate the ability to seek employment,” she said, “but that is just a piece of what we do.”

(continued on page 5)

Article and photos by Nancy Kofie



OT TOWN HALL 2014



AOTA Vice President Amy Jo Lamb speaks to OT Town Hall attendees.

The importance of OT may not be clear for patients until they realize that PT alone is not sufficient to restore them to full functioning. “The patient in the acute care setting says, ‘I want to be able to walk,’ but once they have regained the ability to walk, they realize they want to do more than just walk.”

Patients want to be able to prepare a meal, to dress themselves, to complete the activities that once were possible in daily life. “That’s the power of OT. Dollars spent on occupational therapy is an investment,” Ms. Lamb said.

PATIENTS NEED TO KNOW THE “WHY” AND SO DO POLICYMAKERS

OT prepares patients to function in the real world, however, often OT patients don’t understand why they are doing a certain exercise. “What occupation can we link to the arm bike? Rolling a cage while selecting Bingo numbers?!” Ms. Lamb joked. “Clients need to know *why* you are having them do something. Exercise on the arm bike can help a patient regain the ability to cook. Patient education is key.” Patients as well as policymakers need to be informed about the evidence that OT is a worthy investment. “We are evidence based. We are going to have to show the value of what we bring to the table,” Ms. Lamb said.

ACCESSIBLE LANGUAGE

The OT should use language that is accessible. While the clinical goal may be to increase range of motion by 10 degrees, the ultimate goal in daily life is to enable the patient to reach for clothes and to put on a jacket. Find out what is important to the patient and convey the long-term value of occupational therapy. Use examples and speak in language they can understand.

AFFORDABLE CARE ACT

“We have been talking about health care reform for 100 years,” Ms. Lamb said, “and soon we will feel the effects of the Affordable Care Act (ACA): Thirty-one million people are being added to the healthcare system.”

UNITED STATES SENATOR DISCOVERS THE VALUE OF OT

For persons who are not OTs, sometimes it takes surviving a personal health crisis, and receiving occupational therapy, for them to truly appreciate the distinct value of OT.

OT Town Hall speaker Amy Lamb told attendees about Senator Mark Kirk who, in January 2012, underwent neurosurgery in Chicago following a stroke. He had two small and dysfunctional pieces of brain tissue removed.

After his stroke, Senator Kirk has expressed his gratitude to the OTs who made it possible for him to return to the Senate and function throughout the day.

The ACA will provide more resources for wellness and prevention. People want to age in place and live independently.

(continued on page 6)



OT TOWN HALL 2014

(continued from page 5)

“There are many goals of reform: To increase the quality of care, to ensure efficiency as well as quality, and to decrease healthcare costs. And, at the end of the day, policymakers mostly want to reduce costs. We [OTs] should talk about the value of what we bring.”

- **OT decreases health care costs.**
- **OTs teach people to self-manage chronic conditions.**
- **OTs help people with medication management.**

“If a patient is not taking his or her medications, that is costly for the health care system. Compliance equals lower costs,” she noted. OTs also teach people to recognize signs and symptoms to better self-manage their conditions. OTs can help with medications management and can also prevent readmissions through home assessments.

Home Assessments Prevent Falls, Hip Fractures, and Costly Readmissions

Working with people before a health care crisis occurs or reoccurs is a key component of both the ACA and OT.

“**The gift we have is wellness and prevention,**” Ms. Lamb said, “and these will be paid for under the ACA.”

Implementation of the ACA will mean that facilities will be held more accountable for preventing repeats. The government will take back funds if a patient is readmitted. Insurance will not pay if patient is readmitted again after six weeks. The cost of a home evaluation (\$250-\$300) will be cheaper than the fines imposed for readmits.

“BECAUSE OF OT, I CAN”

Ms. Lamb encouraged OTs to make it known that **it is occupational therapy which makes functioning in daily life possible.** She shared a video which puts the value of OT in simple terms that anyone can understand. In the video, you hear the voices of patients desiring to do tasks such as gardening, driving, dressing, socializing, bike riding, grocery shopping and baby care, despite the challenges posed by conditions ranging from brain injury, hip replacement, carpal tunnel, and a spinal cord injury or autism. In the film, patients make the connection between their regained skills and the occupational therapy they received.

OT impacts the everyday lives of people, helping them achieve the ability to do the things they need to do, want to do, in everyday life.

CONTINUING EDUCATION (CE) REQUIREMENTS: To obtain a copy of the CE requirements for Occupational Therapists and Occupational Therapy Assistants practicing in the District, visit: <http://doh.dc.gov/node/222832>

DOH SENIOR DEPUTY DIRECTOR RIKIN MEHTA, PHARMD, JD, LLM

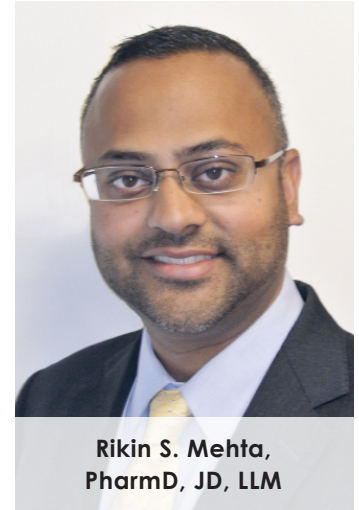
Dr. Rikin Mehta was appointed Senior Deputy Director for the Health Regulation and Licensing Administration for the DC Department of Health on January 13, 2014.

Dr. Mehta (or Rik) comes from the U.S Food and Drug Administration (FDA) where he served as the Deputy Director for the Division of Medical Policy Programs at the Center for Drug Evaluation and Research (CDER), Office of Medical Policy. As the Deputy, Dr. Mehta created and led the Nonprescription drug Safe Use Regulatory Expansion (NSURE) Initiative exploring regulatory methods to alleviate the undertreatment of common conditions or diseases through the use of innovative technologies or other conditions of safe use to expand access to medications.

Dr. Mehta started his FDA career in CDER, Office of Compliance (OC), where he worked primarily on the Agency's unapproved drugs initiative. His responsibilities included ensuring industry compliance for the drug approval process, better patient access to safe and effective medicine. Following this work, Dr. Mehta served on detail as Senior Advisor for Globalization. In that role, he advised a working group that published the Commissioner's Special Report on the Pathway to Global Product Safety and Quality. Dr. Mehta was also involved in creating a new sub-office within CDER's Office of Compliance focused on drug security, integrity and recalls to work on domestic and international policies related to supply chain security and anti-counterfeiting. In this position, he enhanced the programmatic mission for global supply chain security by working on a 6-month tour of duty at the World Health Organization in Geneva, Switzerland to further elements of a global surveillance system for detecting

and reporting counterfeit drugs. Notably, Dr. Mehta served as an FDA technical advisor to INTERPOL and member of their coordination committee for a week-long operation called Operation Pangea IV. This operation involved the coordination of 81 countries and resulted in multiple arrests and the seizure of 2.4 million potentially harmful medicines worth USD 6.3 million worldwide.

Prior to FDA, Dr. Mehta worked as a drug store pharmacist as well as an emergency room/critical care pharmacist at a university hospital. Dr. Mehta received his B.S. in pharmacy from Rutgers University and Pharm.D. from the University of Arkansas for Medical Sciences. He later received a J.D. from Rutgers University School of Law and a Master of Laws in Global Health Law and International Institutions through a joint program with Georgetown University Law Center and the Graduate Institute for International and Development Studies in Geneva, Switzerland. Dr. Mehta is originally from Houston, Texas and lives in the District of Columbia with his wife Reema, son Shailen and his puppy Dexter.



**Rikin S. Mehta,
PharmD, JD, LLM**

PCD LAUNCHES PRESCRIPTION FRAUD REPORTING WEBSITE

The Pharmaceutical Control Division (PCD) has developed and launched a website for 'Prescription Fraud Reporting' for reporting lost, stolen, and fraudulent prescriptions. This method will provide an accessible way for licensed practitioners and pharmacies to notify HRLA of incidents of fraudulent prescriptions. The HRLA website includes **links to documents to report fraudulent prescriptions, tips for safeguarding prescriptions and helpful resources** for prescribers, pharmacists and other health care professionals. This brings us one step closer to tackling a pervasive public health problem. The link can be found on the HRLA/ Pharmaceutical Control Division website at:

<http://doh.dc.gov/pcd>

or you may access it directly at

<http://doh.dc.gov/page/prescription-fraud-reporting>.

Health Regulation and Licensing Administration Senior Deputy Director Dr. Rikin Mehta would like to recognize the efforts of PCD Program Manager Patricia D'Antonio and her pharmaceutical investigator, Mr. Derek Brooks, in researching and launching this webpage.



Above, PCD Investigator Derek V. Brooks, Sr., MSA, CFE, introduces members of the Board and staff to the new Prescription Fraud Reporting website.

SECURETECH360: HRLA TECHNOLOGY UPGRADE



HRLA's SecureTech360 multi-screen smart board will be installed in the 2nd floor Board Room. Above are photos of the unit already completed/installed in 5th Floor Conference Room.

The Health Regulation and Licensing Administration board room will soon get an extensive technology upgrade. Below, SecureTech360 project manager **Danielle Webb**, answers questions about our new multi-media Smart Board:

How will our new SecureTech360 unit differ from the Smart Board we currently have in the board room? What new features and functions will be available?

SecureTech360 will install a wireless integrated system that is tied into the data center. These rooms become part of an enterprise wide solution. Board Room (216) and Room 213 (near the reception area) will have video conferencing, live streaming, recording, and digital play out capabilities on any device, anywhere, anytime.

What will be the dimensions of our new system?

This is a full enterprise solution; there is no one dimension available.

Part of your install will include a 4-panel Video Wall, which is 110" x 110", and a 65" Smart Board.

Our new unit will have a multi-panel screen that will enable Board members to view several types of content on the screen at one time. What is the advantage of this system?

This solution allows you to view multiple content simultaneously. Our smart solution provides anytime, anywhere, any device connectivity for wireless, audio, and end to end video collaborative functions.

SecureTech360 team members have done work in the Board Room and in Room 213. Why are you working in there when the unit will be in the Board room?

The HRLA executive install package includes both the Board Room (216) and Room 213. Both rooms will be upgraded to include Smart Technologies.

The room packages include wireless ceiling mounted mics, speakers and lights that are all also controlled by a mounted panel on the wall. These Smart Conference spaces also have full wifi capabilities, and digital inputs for laptops, desktops, and HDMI devices.

When will the wiring be complete and our SecureTech360 unit be installed?

Your conference rooms are estimated to be completed by the end of January 2015.

Once the installation is complete, will SecureTech360 team members be on-site to help us learn how to use our new system?

YES! After the install our staff will be onsite to provide training to your key staff, and we will also provide one year of maintenance support.

SERVE ON THE BOARD

OTs: Promote quality care in the community, and preserve the high standards of the our profession.

CONSUMERS: A dedicated and mindful member of the general public is needed to serve on the board.

To begin the application process, contact OT Board Chair Frank Gainer by email at: fgainer@aota.org.

Please email your name and contact information.

APPLICANTS MUST BE RESIDENTS OF THE DISTRICT OF COLUMBIA.

BOARD ORDERS

(July 2014 - October 2014)

The Board suspended Ms. Persis Appiagyei's OT license on 8/14/2014 by a reciprocal action to the Maryland Board of Occupational Therapy.

FILING A COMPLAINT WITH THE BOARD

To file a complaint against a licensed Occupational Therapist, simply write a letter that describes your complaint. The letter must be signed, and you should attach copies of any pertinent documents that you may have. The letter must also include your address, so we may contact you as necessary and notify you of any findings. You may fax the complaint to the Board at (202) 724-8677, or mail it to one of the addresses below.

PLEASE NOTE: You can print a complaint form from our website at www.hpla.doh.dc.gov.

You should mail the complaint to:

DC Board of Occupational Therapy
899 N. Capitol Street, NE
First Floor
Washington, DC 20002

If your complaint alleges unlicensed activity:

Supervisory Investigator
899 N. Capitol Street, NE
First Floor
Washington, DC 20002

Please be advised that the health professional licensing boards do not have jurisdiction over fee disputes, except for billing for services that were not provided. If you have a fee dispute with a health professional, you can seek redress through the civil courts.

WHEN YOU MOVE (OR CHANGE YOUR NAME)

Licensees sometimes forget to inform the Board of Occupational Therapy when they move or change names. If we do not have your current address, you may not receive your renewal mailing because we may send it to your former address. ALL NAME AND ADDRESS CHANGES MUST BE SUBMITTED IN WRITING TO OUR OFFICE WITHIN 30 DAYS OF THE CHANGE. Please include your name, address, Social Security number, and license number, if you know it. If you have a name change, you must also enclose a copy of your certificate of marriage, divorce decree, or court order that authorizes the change. Fax your request to (202) 724-8677, or mail your name and/or address change to:

DC Board of Occupational Therapy
Processing Department
Address/Name Change
899 N. Capitol Street, NE
First Floor, Washington, DC 20002

OT Board Members Sworn in for a New Term!



At right:
(1) OT Board Member Tracey E. Ellis, MPH, OTR/L and
(2) OT Board Chairperson Frank E. Gainer, MHS, OTR/L, FAOTA, CMP, CAE,
with former Mayor Vincent Gray and fellow Boards and Commissions appointees.



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Muriel Bowser, Mayor



Contact Information

Address

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Phone number
(202) 442-4782

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Current Members of The District of Columbia Board of Occupational Therapy

Frank E. Gainer, MHS, OTR/L, FAOTA, CMP, CAE
Chairperson

Tracey E. Ellis, MPH, OTR/L
Board Member

Roxanne J. Arneaud, Esq., OTR/L
Board Member

Charles Bond, MS, CTRS, RRT
Recreational Therapist Board Member

Director, Department of Health
LaQuandra Nesbitt, MD, MPH

Senior Deputy Director,
Health Regulation and
Licensing Administration
Rikin S. Mehta, PharmD, JD, LLM

Board Staff

Executive Director
Robin Y. Jenkins
Phone: (202) 442-8336
Email: robin.jenkins2@dc.gov

Health Licensing Specialist
Mavis Azariah Armattoe
Phone: (202) 442-4782
Email: mavis.azariah@dc.gov

Assistant Attorney General
Panravee Vongjaroenrat, Esq.

Investigator
Rebecca Odrick

Newsletter Layout
Nancy Kofie