Office of the Registrar of Regulations,
Legislative Council,
State of Delaware

DEPARTMENT OF STATE

DIVISION OF PROFESSIONAL REGULATION

2000 BOARD OF OCCUPATIONAL THERAPY PRACTICE

Statutory Authority: 24 Delaware Code, Section 2006(a)(1) (24 **Del.C.** §2006(a)(1))
24 **DE Admin. Code** 2000

PROPOSED

PUBLIC NOTICE

2000 Board of Occupational Therapy Practice

Pursuant to 24 **Del.C.** §2006(a)(1), the Delaware Board of Occupational Therapy Practice has proposed revisions to its rules and regulations. The rules pertaining to continuing education are amended to clarify their application. Additionally rules of an administrative nature are changed to reflect current practices.

A public hearing will be held on March 4, 2015 at 4:30 p.m. in the second floor conference room A of the Cannon Building, 861 Silver Lake Boulevard, Dover, Delaware, where members of the public can offer comments on the amendments to the rules and regulations. Anyone wishing to receive a copy of the proposed rules and regulations may obtain a copy from the Delaware Board of Occupational Therapy Practice, 861 Silver Lake Boulevard, Dover, Delaware 19904. Persons wishing to submit written comments may forward these to the Board at the above address in accordance with 29 **Del.C.** §10118(a).

2000 Board of Occupational Therapy Practice

1.0 Supervision/consultation Requirements for Occupational Therapy Assistants

1.1 "**Occupational therapy assistant**" shall mean a person licensed to assist in the practice of occupational therapy under the supervision of an occupational therapist. 24 **Del.C.** §2002(4).

"**Under the supervision of an occupational therapist**" means the interactive process between the licensed occupational therapist and the occupational therapy assistant. It shall be more than a paper review or co-signature. The supervising occupational therapist is responsible for insuring the extent, kind, and quality of the services rendered by the occupational therapy assistant.

The phrase, "Under the supervision of an occupational therapist," as used in the definition of occupational therapist assistant includes, but is not limited to the following requirements:

1.1.1 Communicating to the occupational therapy assistant the results of patient/client evaluation and discussing the goals and program plan for the patient/client;

1.1.2 In accordance with supervision level and applicable health care, educational, professional and institutional regulations, reevaluating the patient/client, reviewing the documentation, modifying the program plan if necessary and co-signing the plan.

1.1.3 Case management;

1.1.4 Determining program termination;

1.1.5 Providing information, instruction and assistance as needed;

1.1.6 Observing the occupational therapy assistant periodically; and

1.1.7 Preparing on a regular basis, but at least annually, a written appraisal of the occupational therapy assistant's performance and discussion of that appraisal with the assistant.

The supervisor may assign to a competent occupational therapy assistant the administration of standardized tests, the performance of activities of daily living evaluations and other elements of patient/client evaluation and reevaluation that do not require the professional judgment and skill of an occupational therapist.

1.2 Supervision for Occupational Therapy Assistants is defined as follows:

1.2.1 Direct Supervision requires the supervising occupational therapist to be on the premises and immediately available to provide aid, direction, and instruction while treatment is performed in any setting including home care. Occupational therapy assistants with experience of less than one (1) full year are required to have direct supervision.

1.2.2 Routine Supervision requires direct contact at least every two (2) weeks at the site of work, with interim supervision occurring by other methods, such as telephonic or written communication.

1.2.3 General Supervision requires at least monthly direct contact, with supervision available as needed by other methods.

1.3 Minimum supervision requirements:

1.3.1 Occupational therapy assistants with experience of less than one (1) full year are required to have direct supervision.

Occupational therapy assistants with experience greater than one (1) full year must be supervised under either direct, routine or general supervision based upon skill and experience in the field as determined by the supervising OT.

1.3.2 Supervising occupational therapists must have at least one (1) year clinical experience after they have received permanent licensure.

1.3.3 An occupational therapist may supervise up to three (3) occupational therapy assistants but never more than two (2) occupational therapy assistants who are under direct supervision at the same time on any given day.

~~1.3.4 Levels of supervision should be determined by the occupational therapist before the individuals enter into a supervisor/supervisee relationship. The chosen level of supervision should be reevaluated regularly for effectiveness.~~

1.3.~~5~~4 Effective July 1, 2009, the supervising occupational therapist shall submit to the Board a completed Verification of Occupational Therapy Assistant Supervision form upon the commencement of supervision.

1.3.~~6~~5 Effective July 1, 2009, the supervising occupational therapist shall immediately advise the Board in writing when he or she is no longer supervising an occupational therapy assistant and shall provide the Board with an updated Verification of Occupational Therapy Assistant Supervision form.

1.3.~~7~~6 Levels of supervision should be determined by the occupational therapist before the individuals enter into a supervisor/supervisee relationship. The chosen level of supervision should be reevaluated regularly for effectiveness.

1.3.~~8~~7 The supervising occupational therapist, in collaboration with the occupational therapy assistant, shall maintain a written supervisory plan specifying the level of supervision and shall document the supervision of each occupational therapy assistant. Levels of supervision should be determined by the occupational therapist before the individuals enter into a supervisor/supervisee relationship. The chosen level of supervision should be reevaluated regularly for effectiveness. This plan shall be reviewed at least every six months or more frequently as demands of service changes.

1.3.~~9~~8 A supervisor who is temporarily unable to provide supervision shall arrange for substitute supervision by an occupational therapist licensed by the Board with at least one (1) year of clinical experience, as defined above, to provide supervision as specified by Rule 1.0 of these rules and regulations.

2 DE Reg. 2040 (5/1/99)

12 DE Reg. 1232 (03/01/09)

13 DE Reg. 1095 (02/01/10)

2.0 Licensure Procedures:

2.1 To apply for an initial license, including relicensure after expiration, an applicant shall submit to the Board:

2.1.1 A completed notarized application on the form approved by the Board;

2.1.2 Verification of a passing score on the NBCOT standardized exam submitted by the exam service or NBCOT;

2.1.2.1 If the date of application for licensure is more than three years following the successful completion of the NBCOT exam, the applicant shall submit proof of twenty (20) hours of continuing education in the two years preceding the application in accordance with Rule 5.0 of these rules and regulations.

2.1.3 Official transcript and proof of successful completion of field work submitted by the school directly to the Board office;

2.1.4 Fee payable to the State of Delaware.

2.2 To apply for a reciprocal license, in addition to the requirements listed in 24 **Del.C.** §2011, an applicant shall submit the following to the Board:

2.2.1 A completed notarized application on the form approved by the Board;

2.2.2 Verification of a passing score on the NBCOT standardized exam submitted by the exam service or NBCOT;

2.2.3 Letter of good standing from any state in which the applicant is or has been licensed (applicants are responsible for forwarding blank verification form to all states where they are now or ever have been licensed);

2.2.4 Fee payable to the State of Delaware.

2.3 Only completed application forms will be accepted. Any information submitted to the Board is subject to verification.

2.4 To apply for renewal, an applicant shall submit:

2.4.1 A completed online renewal application ~~on the form approved by the Board. License renewal may be accomplished online at www.dpr.delaware.gov~~;

2.4.2 Renewal fee payable to the State of Delaware.

2.4.3 Evidence of completion of the required continuing education.

2.5 To apply for inactive status:

A licensee may, upon written request to the Board and payment of the fee established by the Division of Professional Regulation, have his/her license placed on inactive status if he/she is not actively engaged in the practice of occupational therapy in the State. To renew an inactive license, a licensee shall submit an online renewal application and renewal fee payable to the State of Delaware.

2.6 To apply for reactivation of an inactive license, a licensee shall submit:

2.6.1 ~~A letter requesting reactivation~~ A reactivation request form;

~~2.6.2 A completed application for renewal~~

2.6.~~3~~2 Proof of continuing education attained within the past two years (20 contact hours). The twenty (20) hours must be in accordance with Rule 3.0 of these rules and regulations;

2.6.~~4~~3 Fee payable to the State of Delaware.

2.7 To apply for reinstatement of an expired license, an applicant shall submit (within ~~three (3) years~~ one year of the expiration date):

2.7.1 A completed application for renewal;

2.7.2 Proof of continuing education attained within the past ~~two~~ year~~s~~ (~~20~~ 10 contact hours). The ~~twenty (20)~~ ten (10) hours must be in accordance with Rule 3.0 of these rules and regulations;

2.7.3 Licensure and late fee payable to the State of Delaware.

6 DE Reg. 1331 (4/1/03)

9 DE Reg. 1768 (5/1/06)

11 DE Reg. 926 (01/01/08)

13 DE Reg. 1095 (02/01/10)

3.0 Continuing Education

3.1 Continuing Education Content Hours

3.1.1 Continuing education (CE) is required for license renewal and shall be completed by July 31st of each even numbered year. Occupational therapists and occupational therapy assistants are required to complete 20 hours per biennial period. Continuing education must be earned in two (2) or more of the seven (7) categories for continuing education described in Rule 3.5.

3.1.1.1 Proof of continuing education is satisfied with an attestation by the licensee that he or she has satisfied the requirements of Rule 3.0;

3.1.1.2 Attestation ~~may~~ shall be completed electronically ~~if the renewal is accomplished online. In the alternative, paper renewal documents that contain the attestation of completion can be submitted~~;

3.1.1.3 Licensees selected for random audit are required to supplement the attestation with attendance verification as provided in 3.1.2.

3.1.2 Random audits will be performed by the Board to ensure compliance with the CE requirement.

3.1.2.1 The Board will notify licensees ~~within sixty (60) days~~ after July 31 of each biennial renewal period that they have been selected for audit.

3.1.2.2 Licensees selected for random audit shall be required to submit verification within ten (10) business days of ~~receipt~~ the date of notification of selection for audit.

3.1.2.3 Verification shall include such information necessary for the Board to assess whether the course or other activity meets the CE requirements in Section 3.0, which may include, but is not limited to, the information noted for each type of CE as set forth in Rule 3.3.

3.1.2.4 The Board shall review all documentation submitted by licensees pursuant to the continuing education audit. If the Board determines that the licensee has met the continuing education requirements, his or her license shall remain in effect. If the Board determines that the licensee has not met the continuing education requirements, the licensee shall be notified and a hearing may be held pursuant to the Administrative Procedures Act. The hearing will be conducted to determine if there are any extenuating circumstances justifying noncompliance with the continuing education requirements. Unjustified noncompliance with the continuing education requirements set forth in these rules and regulations shall constitute a violation of 24 **Del.C.** §2015(a)(5) and the licensee may be subject to one or more of the disciplinary sanctions set forth in 24 **Del.C**. §2017.

3.1.3 Contact hours shall be prorated for new licensees in accordance with the following schedule:

3.1.3.1 *21 months up to and including 24 months remaining in the licensing cycle requires 20 hours

3.1.3.2 *16 months up to an including 20 months remaining in the licensing cycle requires 15 hours

3.1.3.3 *11 months up to and including 15 months remaining in the licensing cycle requires 10 hours

3.1.3.4 *10 months or less remaining in the licensing cycle - exempt

3.2 Definition of Acceptable Continuing Education Credits:

3.2.1 ~~Activities~~ Continuing education must be earned in two (2) or more of the seven (7) ~~categories~~ activities for continuing education ~~beginning~~ described in Rule 3.~~3~~5.

3.3 Continuing Education Content:

3.3.1 ~~Activities~~ Continuing education must be in a field of health and social services related to occupational therapy, must be related to a licensee's current or anticipated roles and responsibilities in occupational therapy, and must directly or indirectly serve to protect the public by enhancing the licensee's continuing competence.

3.3.2 Approval will be at the discretion of the Board. A licensee or continuing education provider may request prior approval by the Board by submitting an outline of the activity before it is scheduled. The Board pre-approves continuing education ~~activities~~ sponsored or approved by AOTA or offered by AOTA-approved providers as long as the content is not within the exclusion in Rule 3.5.1.1 for courses covering documentation for reimbursement or other business matters.

3.3.3 CE earned in excess of the required credits for the two (2) year period may not be carried over to the next biennial period.

3.4 Definition of Contact Hours:

3.4.1 "**Contact Hour**" means a unit of measure for a continuing education activity. One contact hour equals 60 minutes in a learning activity, excluding meals and breaks."

3.4.2 One (1) academic semester hour shall be equal to fifteen (15) contact hours.

3.4.3 One (1) academic quarter hour shall be equal to ten (10) contact hours.

3.4.4 The preparing of original lectures, seminars, or workshops in occupational therapy or health care subjects shall be granted one (1) contact hour for preparation fro each contact hour of presentation. Credit for preparation shall be give for the first presentation only.

3.5 Continuing Education ~~Activities~~ Categories:

3.5.1 Category 1: Courses: (Classroom or home study/correspondence/online) The maximum credit for course work shall not exceed nineteen (19) hours. Course work involving alternative therapies shall be limited to five (5) hours. Course work by home study, correspondence or online of a non-interactive nature shall be limited to ten (10) hours. Extension courses, refresher courses, workshops, seminars, lectures, conferences, and non patient-specific in-service training qualify under this provision as long as they are presented in a structured educational experience beyond entry-level academic degree level and satisfy the criteria in 3.3.1.

3.5.1.1 Excluded are any job related duties in the workplace such a fire safety, OSHA or CPR. Also excluded are courses covering documentation for reimbursement or other business matters.

3.5.1.2 Documentation for continuing education courses shall include a certificate of completion or similar documentation including name of course, date, author/instructor, sponsoring organization, location, and number of hours attended and amount of continuing education credit earned.

3.5.1.3 Documentation for academic coursework shall include an original official transcript indicating successful completion of the course, date, and a description of the course from the school catalogue or course syllabus.

3.5.1.4 Documentation for other courses in this category shall include information sufficient for the Board to determine whether the course is appropriate for CE credit and the number of hours of the course. This may include, but is not limited to, the forms of documentation cited above.

3.5.2 Category 2: Professional Meetings & Activities: The maximum number of credit hours shall not exceed ten (10) hours. Approved credit includes attendance at: DOTA business meetings, AOTA business meetings, AOTA Representative Assembly meetings. NBCOT meetings, OT Licensure Board meetings and AOTA National Round Table discussions. Credit will be given for participation as an elected or appointed member/officer on a board, committee or council in the field of health and social service related to occupational therapy. Seminars or other training related to management or administration are considered professional activities. Excluded are any job related meetings such a department meetings, supervision of students and business meetings within the work setting.

3.5.2.1 Excluded are any job related meetings such a department meetings, supervision of students and business meetings within the work setting.

3.5.2.2 Documentation includes name of committee or board, name of agency or organization, purpose of services, and description of licensee's role. Participation must be validated by an officer or representative of the organization or committee.

3.5.3 Category 3: Publications: The maximum number of credit hours shall not exceed fifteen (15) hours. These include writing chapters, books, abstracts, book reviews accepted for publication and media/ video for professional development in any venue.

3.5.3.1 Documentation shall include the full reference for publication including title, author, editor and date of publication; or a copy of acceptance letter if not yet published.

3.5.4 Category 4: Presentations: The maximum number of credit hours shall not exceed fifteen (15) hours. This includes workshops and community service organizations presentations that the licensee presents. The preparation of original lectures, seminars, or workshops in occupational therapy or health care subjects shall be granted one (1) hour for preparation for each contact hour of presentation. Credit for preparation shall be given for the first presentation only.

3.5.4.1 Credit will not be given for the presentation of information that the licensee has already been given credit for under another category.

3.5.4.2 Excluded are presentations that are part of a licensee's job duties.

3.5.4.3 Documentation includes a copy of the official program/schedule/syllabus including presentation title, date, hours of presentation, and type of audience or verification of such signed by sponsor.

3.5.5 Category 5: Research/Grants: Credit may be awarded one time for contact hours per study/topic regardless of length of project, not to exceed ten (10) hours. Contact hours accumulated under this category may not be used under the publication category.

3.5.5.1 Documentation for research includes verification from the primary investigator indicating the name of the research project, dates of participation, major hypotheses or objectives of the project, and licensee's role in the project.

3.5.5.2 Documentation for grants includes the name of the grant proposal, name of the grant source, purpose and objectives of the project, and verification from the grant author regarding the licensee's role in the development of the grant if not the grant author.

3.5.6 Category 6: Specialty Certification: Approval for credit hours for specialty certification, requiring successful completion of courses and exams attained during the current licensure period will be at the discretion of the Board. Examples include Certified Hand Therapist (CHT) and Occupational Therapist, Board Certified in Pediatrics (BCP).

3.5.6.1 Documentation includes a certificate of completion or other documentation from the recognized certifying body that identifies satisfactory completion of the requirements for obtaining board certification of specialty certification.

3.5.7 Category 7: Fieldwork Supervision: The maximum number of credit hours shall not exceed ten (10) hours. One CE hour may be awarded for each Level I OT or OTA fieldwork student. One CE hour may be awarded for each week of participation as the primary clinical fieldwork educator for Level II OT or OTA fieldwork students.

3.5.7.1 Documentation shall include verification provided by the school to the fieldwork educator with the name of student, school, and dates of fieldwork or the signature page of the completed student evaluation form. Evaluation scores and comments should be deleted or blocked out.

3.6 The Board may waive or postpone all or part of the continuing education activity requirements of these regulations if an occupational therapist or occupational therapy assistant submits written request for a waiver and provides evidence to the satisfaction of the Board of an illness, injury, financial hardship, family hardship, or other similar extenuating circumstance which precluded the individual's completion of the requirements.

6 DE Reg. 1331 (4/1/03)

9 DE Reg. 1768 (5/1/06)

11 DE Reg. 926 (01/01/08)
13 DE Reg. 1095 (02/01/10)

4.0 Competence to Administer Treatment Modalities

Upon the request of the Board, or a member of the public, the licensee shall produce documentation demonstrating his or her competence to administer a particular treatment modality. Competence may be shown by documented professional education, such as continuing education, in-service training or accredited higher education programs with documented coursework related to the modality in question. Determination of competence is at the discretion of the Board.

13 DE Reg. 1095 (02/01/10)

5.0 Voluntary Treatment Option for Chemically Dependent or Impaired Professionals

5.1 If the report is received by the chairperson of the regulatory Board, that chairperson shall immediately notify the Director of Professional Regulation or his/her designate of the report. If the Director of Professional Regulation receives the report, he/she shall immediately notify the chairperson of the regulatory Board, or that chairperson's designate or designates.

5.2 The chairperson of the regulatory Board or that chairperson's designate or designates shall, within 7 days of receipt of the report, contact the individual in question and inform him/her in writing of the report, provide the individual written information describing the Voluntary Treatment Option, and give him/her the opportunity to enter the Voluntary Treatment Option.

5.3 In order for the individual to participate in the Voluntary Treatment Option, he/she shall agree to submit to a voluntary drug and alcohol screening and evaluation at a specified laboratory or health care facility. This initial evaluation and screen shall take place within 30 days following notification to the professional by the participating Board chairperson or that chairperson's designate(s).

5.4 A regulated professional with chemical dependency or impairment due to addiction to drugs or alcohol may enter into the Voluntary Treatment Option and continue to practice, subject to any limitations on practice the participating Board chairperson or that chairperson's designate or designates or the Director of the Division of Professional Regulation or his/her designate may, in consultation with the treating professional, deem necessary, only if such action will not endanger the public health, welfare or safety, and the regulated professional enters into an agreement with the Director of Professional Regulation or his/her designate and the chairperson of the participating Board or that chairperson's designate for a treatment plan and progresses satisfactorily in such treatment program and complies with all terms of that agreement. Treatment programs may be operated by professional Committees and Associations or other similar professional groups with the approval of the Director of Professional Regulation and the chairperson of the participating Board.

5.5 Failure to cooperate fully with the participating Board chairperson or that chairperson's designate or designates or the Director of the Division of Professional Regulation or his/her designate in regard to the Voluntary Treatment Option or to comply with their requests for evaluations and screens may disqualify the regulated professional from the provisions of the Voluntary Treatment Option, and the participating Board chairperson or that chairperson's designate or designates shall cause to be activated an immediate investigation and institution of disciplinary proceedings, if appropriate, as outlined in subsection 4.8 of this section.

5.6 The Voluntary Treatment Option may require a regulated professional to enter into an agreement which includes, but is not limited to, the following provisions:

5.6.1 Entry of the regulated professional into a treatment program approved by the participating Board. Board approval shall not require that the regulated professional be identified to the Board. Treatment and evaluation functions must be performed by separate agencies to assure an unbiased assessment of the regulated professional's progress.

5.6.2 Consent to the treating professional of the approved treatment program to report on the progress of the regulated professional to the chairperson of the participating Board or to that chairperson's designate or designates or to the Director of the Division of Professional Regulation or his/her designate at such intervals as required by the chairperson of the participating Board or that chairperson's designate or designates or the Director of the Division of Professional Regulation or his/her designate, and such person making such report will not be liable when such reports are made in good faith and without malice.

5.6.3 Consent of the regulated professional, in accordance with applicable law, to the release of any treatment information from anyone within the approved treatment program.

5.6.4 Agreement by the regulated professional to be personally responsible for all costs and charges associated with the Voluntary Treatment Option and treatment program(s). In addition, the Division of Professional Regulation may assess a fee to be paid by the regulated professional to cover administrative costs

associated with the Voluntary Treatment Option. The amount of the fee imposed under this subparagraph shall approximate and reasonably reflect the costs necessary to defray the expenses of the participating Board, as well as the proportional expenses incurred by the Division of Professional Regulation in its services on behalf of the Board in addition to the administrative costs associated with the Voluntary Treatment Option.

5.6.5 Agreement by the regulated professional that failure to satisfactorily progress in such treatment program shall be reported to the participating Board's chairperson or his/her designate or designates or to the Director of the Division of Professional Regulation or his/ her designate by the treating professional who shall be immune from any liability for such reporting made in good faith and without malice.

5.6.6 Compliance by the regulated professional with any terms or restrictions placed on professional practice as outlined in the agreement under the Voluntary Treatment Option.

5.7 The regulated professional's records of participation in the Voluntary Treatment Option will not reflect disciplinary action and shall not be considered public records open to public inspection. However, the participating Board may consider such records in setting a disciplinary sanction in any future matter in which the regulated professional's chemical dependency or impairment is an issue.

5.8 The participating Board's chairperson, his/her designate or designates or the Director of the Division of Professional Regulation or his/her designate may, in consultation with the treating professional at any time during the Voluntary Treatment Option, restrict the practice of a chemically dependent or impaired professional if such action is deemed necessary to protect the public health, welfare or safety.

5.9 If practice is restricted, the regulated professional may apply for unrestricted licensure upon completion of the program.

5.10 Failure to enter into such agreement or to comply with the terms and make satisfactory progress in the treatment program shall disqualify the regulated professional from the provisions of the Voluntary Treatment Option, and the participating Board shall be notified and cause to be activated an immediate investigation and disciplinary proceedings as appropriate.

5.11 Any person who reports pursuant to this section in good faith and without malice shall be immune from any civil, criminal or disciplinary liability arising from such reports, and shall have his/her confidentiality protected if the matter is handled in a nondisciplinary matter.

5.12 Any regulated professional who complies with all of the terms and completes the Voluntary Treatment Option shall have his/her confidentiality protected unless otherwise specified in a participating Board's rules and regulations. In such an instance, the written agreement with the regulated professional shall include the potential for disclosure and specify those to whom such information may be disclosed.

13 DE Reg. 1095 (02/01/10)

6.0 Crimes substantially related to practice of occupational therapy

6.1 Conviction of any of the following crimes, or of the attempt to commit or of a conspiracy to commit or conceal or of solicitation to commit the following crimes, is deemed to be a crime substantially related to the practice of occupational therapy in the State of Delaware without regard to the place of conviction:

6.1.1 Unlawful harm to law enforcement or seeing eye dogs. 7 **Del.C.** §1717

6.1.2 Aggravated menacing. 11 **Del.C.** §602(b)

6.1.3 Reckless endangering. 11 **Del.C.** §604.

6.1.4 Abuse of a pregnant female in the second degree. 11 **Del.C.** §605

6.1.5 Abuse of a pregnant female in the first degree. 11 **Del.C.** §606

6.1.6 Assault in the second degree. 11 **Del.C.** §612

6.1.7 Assault in the first degree. 11 **Del.C.** §613

6.1.8 Felony abuse of a sports official. 11 **Del.C.** §614

6.1.9 Assault by abuse of neglect. 11 **Del.C.** §615

6.1.10 Felony Terroristic threatening. 11 **Del.C.** §621

6.1.11 Unlawful administering drugs. 11 **Del.C.** §625

6.1.12 Unlawful administering controlled substance or counterfeit substance or narcotic drugs. 11 **Del.C.** §626

6.1.13 Vehicular assault in the first degree. 11 **Del.C.** §629

6.1.14 Criminally negligent homicide. 11 **Del.C.** §631

6.1.15 Manslaughter. 11 **Del.C.** §632

6.1.16 Murder by abuse or neglect in the second degree. 11 **Del.C.** §633

6.1.17 Murder by abuse or neglect in the first degree. 11 **Del.C.** §634

6.1.18 Murder in the second degree. 11 **Del.C.** §635
6.1.19 Murder in the first degree. 11 **Del.C.** §636
6.1.20 Sexual harassment. 11 **Del.C.** §763
6.1.21 Unlawful sexual contact in the second degree. 11 **Del.C.** §768
6.1.22 Unlawful sexual contact in the first degree. 11 **Del.C.** §769
6.1.23 Rape in the fourth degree. 11 **Del.C.** §770
6.1.24 Rape in the third degree. 11 **Del.C.** §771
6.1.25 Rape in the second degree. 11 **Del.C.** §772
6.1.26 Rape in the first degree. 11 **Del.C.** §773
6.1.27 Sexual extortion. 11 **Del.C.** §776
6.1.28 Bestiality. 11 **Del.C.** §777
6.1.29 Continuous sexual abuse of a child. 11 **Del.C.** §778
6.1.30 Dangerous crime against a child. 11 **Del.C.** §779
6.1.31 Unlawful imprisonment in the first degree. 11 **Del.C.** §782
6.1.32 Kidnapping in the second degree. 11 **Del.C.** §783
6.1.33 Kidnapping in the first degree. 11 **Del.C.** §783A
6.1.34 Acts constituting coercion. 11 **Del.C.** §791
6.1.35 Burglary in the second degree. 11 **Del.C.** §825
6.1.36 Burglary in the first degree. 11 **Del.C.** §826
6.1.37 Robbery in the second degree. **11 Del.C.** §831
6.1.38 Robbery in the first degree. 11 **Del.C.** §832
6.1.39 Carjacking in the second degree. 11 **Del.C.** §835
6.1.40 Carjacking in the first degree. 11 **Del.C.** §836
6.1.41 Extortion. 11 **Del.C.** §846
6.1.42 Identity theft. 11 **Del.C.** §854
6.1.43 Felony forgery. 11 **Del.C.** §861
6.1.44 Falsifying business records. 11 **Del.C.** §871
6.1.45 Felony unlawful use of a credit card. 11 **Del.C.** §903
6.1.46 Insurance fraud. 11 **Del.C.** §913
6.1.47 Health care fraud. 11 **Del.C.** §913A
6.1.48 Dealing in children. 11 **Del.C.** §1100
6.1.49 Endangering the welfare of a child. 11 **Del.C.** §1102
6.1.50 Endangering the welfare of an incompetent person. 11 **Del.C.** §1105
6.1.51 Unlawfully dealing with a child. 11 **Del.C.** §1106
6.1.52 Sexual exploitation of a child. 11 **Del.C.** §1108
6.1.53 Unlawful dealing in child pornography. 11 **Del.C.** §1109
6.1.54 Possession of child pornography. 11 **Del.C.** §1111
6.1.55 Sexual offenders; prohibitions from school zones. 11 **Del.C.** §1112
6.1.56 Sexual solicitation of a child. 11 **Del.C.** §1112A
6.1.57 Terroristic threatening of public officials or public servants. 11 **Del.C.** §1240
6.1.58 Felony abetting the violation of driver's license restrictions. 11 **Del.C.** §1249
6.1.59 Felony offenses against law enforcement animals. 11 **Del.C.** §1250
6.1.60 Felony hate crimes. 11 **Del.C.** §1304
6.1.61 Felony stalking. 11 **Del.C.** §1312A
6.1.62 Felony cruelty to animals. 11 **Del.C.** §1325
6.1.63 Felony maintaining a dangerous animal. 11 **Del.C.** §1327(a)
6.1.64 Felony violation of privacy. 11 **Del.C.** §1335(a)
6.1.65 Adulteration. 11 **Del.C.** §1339
6.1.66 Promoting prostitution in the second degree. 11 **Del.C.** §1352
6.1.67 Promoting prostitution in the first degree. 11 **Del.C.** §1353
6.1.68 Obscenity. 11 **Del.C.** §1361

6.1.69 Carrying a concealed deadly weapon. 11 **Del.C.** §1442

6.1.70 Felony unlawful dealing with a dangerous weapon. 11 **Del.C.** §1445(a)

6.1.71 Felony possession of a deadly weapon during the commission of a felony. 11 **Del.C.** §1447

6.1.72 Possession of a firearm during a commission of a felony. 11 **Del.C.** §1447A

6.1.73 Possession and purchase of deadly weapons by persons prohibited. 11 **Del.C.** §1448

6.1.74 Felony Possession of a weapon in a Safe School and Recreation Zone. 11 **Del.C.** §1457

6.1.75 Duty to report child abuse or neglect. 16 **Del.C.** §903

6.1.76 Abuse, neglect, mistreatment or financial exploitation of residents or patients in a nursing or similar facility. 16 **Del.C.** §1136

6.1.77 Felony falsification or destruction of records related to maintenance medical treatment. 16 **Del.C.** §2513

6.1.78 Manufacture, delivery or possession with intent to deliver schedule I or II narcotic drugs. 16 **Del.C.** §4751

6.1.79 Manufacture, delivery or possession with intent to deliver Schedule I, II, III, IV, or V non-narcotic drugs. 16 **Del.C.** §4752

6.1.80 Unlawful delivery or noncontrolled substances. 16 **Del.C.** §4752A.

6.1.81 Possession, consumption, or use of controlled substances. 16 **Del.C.** §4753.

6.1.82 Trafficking in marijuana, cocaine, illegal drugs, methamphetamines, L.S.D., or designer drugs. 16 **Del.C.** §4753A

6.1.83 Possession, consumption, or use of non-narcotic controlled substances classified in Schedule I, II, III, IV, or V. 16 **Del.C.** § 4754

6.1.84 Crimes related to controlled substances. 16 **Del.C.** §4756

6.1.85 Distribution of controlled substances to persons under 21 years of age. 16 **Del.C.** §4761

6.1.86 Distribution, delivery or possession of a controlled substance within 1,000 feet of school property. 16 **Del.C.** §4767

6.1.87 Distribution, delivery or possession of a controlled substance within 300 feet of park, recreation area, church, synagogue or other place of worship. 16 **Del.C.** §4768

6.1.88 Felony obtaining benefit under false representation. 31 **Del.C.** §1003

6.1.89 Felony falsification of reports, statements, or documents. 31 **Del.C.** §1004

6.1.90 Kickback schemes and solicitation. 31 **Del.C.** §1005

6.1.91 Conversion of benefit payment. 31 **Del.C.** §1006

6.1.92 Intentional abuse, neglect, mistreatment, or exploitation of an infirm adult. 31 **Del.C.** §3913

6.2 Crimes substantially related to the practice of occupational therapy shall be deemed to include any crimes under any federal law, state law, or valid town, city or county ordinance, that are substantially similar to the crimes identified in this rule.

8 DE Reg. 1449 (04/01/05)

9 DE Reg. 587 (10/01/05)

12 DE Reg. 1232 (03/01/09)

13 DE Reg. 1095 (02/01/10)

18 DE Reg. 532 (01/01/15) (Prop.)