HOUSE BILL REPORT SSB 5018

As Passed House:

April 6, 2011

Title: An act relating to wound care management in occupational therapy.

Brief Description: Including wound care management in occupational therapy.

Sponsors: Senate Committee on Health & Long-Term Care (originally sponsored by Senators Keiser, Conway, Shin, Schoesler, Hobbs, Kline and McAuliffe).

Brief History:

Committee Activity: Health Care & Wellness: 3/9/11, 3/16/11 [DP]; Health & Human Services Appropriations & Oversight: 3/24/11 [DP]. Floor Activity:

Passed House: 4/6/11, 97-0.

Brief Summary of Substitute Bill

• Allows Occupational Therapists to perform wound care management under certain circumstances.

HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

Majority Report: Do pass. Signed by 10 members: Representatives Cody, Chair; Jinkins, Vice Chair; Schmick, Ranking Minority Member; Bailey, Clibborn, Green, Harris, Kelley, Moeller and Van De Wege.

Staff: Jim Morishima (786-7191).

HOUSE COMMITTEE ON HEALTH & HUMAN SERVICES APPROPRIATIONS & OVERSIGHT

Majority Report: Do pass. Signed by 9 members: Representatives Dickerson, Chair; Appleton, Vice Chair; Johnson, Ranking Minority Member; Schmick, Assistant Ranking Minority Member; Cody, Green, Kagi, Pettigrew and Walsh.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

Staff: Amy Skei (786-7109).

Background:

Occupational Therapy.

An Occupational Therapist is a person licensed by the Board of Occupational Therapy Practice (Board) to practice occupational therapy. "Occupational therapy" is the scientifically-based use of purposeful activity that maximizes independence, prevents disability, and maintains the health of individuals who are limited by physical injury or illness, psychosocial dysfunction, developmental or learning disabilities, or the aging process. Examples of the practice of occupational therapy include:

- using specifically-designed activities and exercises to enhance neuro-developmental, cognitive, perceptual motor, sensory integrative, and psychomotor functioning;
- administering and interpreting tests such as manual muscle and sensory integration;
- teaching daily living skills;
- developing pre-vocational skills and play and avocational activities;
- designing, fabricating, or applying selected orthotic and prosthetic devices or selected adaptive equipment; and
- adapting environments for persons with disabilities.

Wound Care.

Statutory provisions relating to occupational therapy make no mention of whether wound care is within the scope of practice of Occupational Therapists or Occupational Therapy Assistants. In 2008 the Board issued an informal opinion stating occupational therapy includes wound care management and considered adopting an interpretive statement on wound care and sharp debridement. In 2010 the Attorney General issued an opinion concluding that sharp debridement is not included in the scope of practice for Occupational Therapists. The Attorney General's opinion did not address the issue of whether wound care in general is within the scope of practice. The Board subsequently determined not to adopt an interpretive statement on wound care and sharp debridement and instead encouraged the Department of Health to work with stakeholders to develop legislation to clarify the issue.

Summary of Bill:

Wound care management is made part of the scope of practice of an Occupational Therapist. An Occupational Therapist may provide wound care management under the referral and direction of a physician or other authorized health care provider. The referring provider must examine the patient prior to the referral.

Appropriation: None.

Fiscal Note: Available for House Bill 1076.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.

Staff Summary of Public Testimony (Health Care & Wellness):

(In support) This bill will enhance the healing process for patients and increase public protection. This bill is a good step forward and reflects current practice in the profession. The bill was worked out over the last several years with many stakeholders and represents a compromise that everyone can live with.

(With concerns) This is a public safety issue. Occupational therapists should be allowed to treat wounds, but this bill allows surgical procedures to be performed with inadequate training. The Legislature should put sideboards on the types of wounds that may be treated by limiting sharp debridement to superficial wounds. Wound care is not a minor procedure, which can result in complications if improperly performed. Not all of the stakeholders were involved in the development of this bill.

(Opposed) None.

Staff Summary of Public Testimony (Health & Human Services Appropriations & Oversight):

(In support) The occupational therapists and physical therapists support the bill without amendments and support it moving forward.

(Opposed) None.

Persons Testifying (Health Care & Wellness): (In support) Senator Keiser, prime sponsor; Mark Gjurasic and Joann Keller-Green, Washington Occupational Therapy Association; and Melissa Johnson, Physical Therapy Association of Washington.

(With concerns) Jim Richards and Stan Flemming, Washington Osteopathic Medical Association.

Persons Testifying (Health & Human Services Appropriations & Oversight): Mark Gjurasic and Joann Keller Green, Washington Occupational Therapy Association; and Melissa Johnson, Physical Therapy Association of Washington.

Persons Signed In To Testify But Not Testifying (Health Care & Wellness): None.

Persons Signed In To Testify But Not Testifying (Health & Human Services Appropriations & Oversight): None.