



## Ohio Administrative Code

### Rule 4755-2-01 Impaired practitioner rules and safe haven program for license holders and applicants.

Effective: December 11, 2022

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#### (A) Definitions

(1) "License holder" applies to the following license types:

(a) Athletic trainers

(b) Occupational therapists

(c) Occupational therapy assistants

(d) Orthotists

(e) Pedorthists

(f) Prosthetists

(g) Prosthetist-orthotists

(h) Physical therapists

(i) Physical therapist assistants

(2) "Board" means the occupational therapy, physical therapy, and athletic trainers board or any individual license-specific section of the board.

(B) For purposes of the rule, an individual license holder who accepts the privilege of practicing in this state is subject to regulation by the board. Through the act of filing an application for licensure or being licensed by the board, the individual has given consent to submit to a mental or physical



examination at the individual's expense when ordered to do so by the board in writing and to have waived all objections to the admissibility of testimony or examination of reports that constitute privileged communications.

(C) If the board receives information by the filing of a complaint with the board or upon its own information that a license holder's ability to practice has fallen below the acceptable and prevailing standards of care because of habitual or excessive use or abuse of drugs or alcohol or other substances, or other medical condition or illness, the board may order the license holder to submit to a mental or physical examination at the license holder's expense conducted by a designee of the board for the purpose of determining if there is an impairment that is posing a threat to the license holder's well-being or the treatment of a patient or client whom the license holder serves.

(D) Failure of the individual license holder to submit to a mental or physical examination order by the board constitutes an admission of the allegations against the license holder, unless the failure is due to circumstances beyond the individual's control.

(E) If the board determines that the individual's ability to practice is impaired, the following actions may be taken:

(1) The board may suspend or place restrictions on the individual's license to practice;

(2) Deny the individual's application for licensure and require the individual to submit to treatment;  
or

(3) Other requirements as a condition for initial, continued, reinstated, or renewed licensure to practice.

(F) The board at its discretion may:

(1) Contract with providers of impaired treatment programs;

(2) Receive and evaluate reports of suspected impairment from any source;



- (3) Intervene in cases of verified impairment;
  - (4) Monitor treatment and rehabilitation of the impairment;
  - (5) Provide post-treatment monitoring and support; or
  - (6) Provide other functions as necessary to carry out the provisions of this rule.
- (G) The board-approved treatment program shall:
- (1) Receive relevant information from the board office and other sources regarding the potential impairment.
  - (2) Report within five business days any license holder:
    - (a) Who refuses to cooperate with an evaluation or investigation;
    - (b) Who refuses to submit to treatment or rehabilitation;
    - (c) Whose impairment is not substantially alleviated through treatment; or
    - (d) Who in the opinion of the evaluators is unable to practice under their license with reasonable skill and safety.
  - (3) Provide confidentiality of non-public information of the review process.
  - (4) Provide an initial report of the nature, severity, and progress of the impairment.
  - (5) Provide periodic reports, at a rate determined by the board concerning the license holder's progress.
  - (6) Provide a final report including the treatment outcome, and a finding as to the license holder's fitness to practice.



(7) Follow any requirements outlined in a formal agreement the license holder, or applicant for licensure has entered into with the board.

(H) Pursuant to division (E) of section 4755.06, division (H) of section 4755.411, division (A)(12) of section 4755.61, and division (A)(8) of section 4779.08 of the Revised Code, as part of the board's impairment or diversion program, the board hereby establishes a confidential, non-disciplinary program for the evaluation and treatment of eligible practitioners who need assistance with a potential or existing impairment due to abuse of or dependency on alcohol or drugs or other medical condition or illness. This program shall be known as the board's safe haven program.

(1) The board may contract with one entity, hereafter referred to as the monitoring organization, to conduct the safe haven program. The monitoring organization shall use licensed mental health and addiction professionals in the program. The monitoring organization shall determine the eligibility for participation in the safe haven program and provide associated services to eligible practitioners.

(2) Eligible practitioners shall include license holders of the board as well as applicants who have applied for a license from the board.

(3) Services provided by the monitoring organization include but are not limited to the following:

(a) Screening and/or evaluation for possible impairment due to abuse of or dependency on alcohol or drugs or other medical condition or illness;

(b) Referral to treatment providers approved by the monitoring organization for the purpose of evaluating and/or treating impairment;

(c) Establishment of individualized monitoring criteria for a duration determined by the monitoring organization to ensure the continuing care and recovery from impairment; and

(d) Case management.

(4) The monitoring organization that contracts with the board to conduct the safe haven program may



receive referrals from any of the following:

- (a) Applicants and license holders;
- (b) Other individuals;
- (c) Employers;
- (d) Professional societies and associations;
- (e) Health care personnel and treatment providers;
- (f) Other entities and organizations; and
- (g) The board.

(5) To participate in the safe haven program, an eligible practitioner must enter into an agreement with the monitoring organization to seek assistance for a potential or existing impairment due to abuse of or dependency on alcohol or drugs or other medical condition or illness. The agreement may specify but is not limited to the following:

- (a) Treatment and therapy plan.
- (b) Support group participation.
- (c) Case management.
- (d) Duration of monitoring. Relapses and other failures to comply with the terms of the agreement may result in a longer period of monitoring. As appropriate, an addendum to the agreement may be initiated by the monitoring organization.
- (e) Random toxicology testing.



(f) Releases for seeking information or records related to the practitioner's impairment, including but not limited to family, peers, health care personnel, employers, and treatment providers.

(g) Grounds for dismissal from participation in the safe haven program for failure to comply with program requirements.

(h) Any required fees associated with participation in the safe haven program, including but not limited to fees for toxicology testing.

(6) The board shall not institute disciplinary action solely based on impairment against a safe haven program participant so long as the participant enters into an agreement with the monitoring organization and complies with the same. The presence of impairment shall not excuse acts or preclude investigation or disciplinary action against a participant for other violations of Chapters 4755 and 4779 of the Revised Code or other provisions or rules adopted under it.

(7) The monitoring organization shall report to the board for further investigation and/or disciplinary action any participant who is unwilling or unable to complete or comply with any part of the safe haven program, including evaluation, treatment, or monitoring.

(8) The monitoring organization shall periodically provide a de-identified report to the board regarding all referrals received for individuals licensed by the board.

(9) All information received and maintained by the monitoring organization shall be held in confidence subject to Section 2317.02 of the Revised Code and in accordance with federal law.