



Oklahoma State Board of Examiners  
for

Long Term Care Administrators

2401 N.W. 23<sup>rd</sup> Street • Suite 62 • Oklahoma City, OK 73107

Tel: (405) 522-1616 • Fax (405) 522-1625

Web site: [www.ok.gov/osbeltca/](http://www.ok.gov/osbeltca/)

**APPLICATION FOR REVIEW AND APPROVAL OF A CONTINUING EDUCATION PROGRAM**

1. Name of sponsoring organization: \_\_\_\_\_
2. Street Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_
3. Contact Person \_\_\_\_\_ Title: \_\_\_\_\_  
Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_
4. Program title: \_\_\_\_\_
5. Number of CEU clock hours requested:  
(60 minutes = 1 clock hour, no fractions permitted): \_\_\_\_\_  
\_\_\_\_\_
6. Date(s)/Locations of the event(s): \_\_\_\_\_  
\_\_\_\_\_
7. Other Requests/Clarifications: \_\_\_\_\_  
\_\_\_\_\_
8. All requests for review by the Board for consideration of awarding CEU credit hours must be submitted with a \$55.00 per credit hour review/approval fee based upon the number of CEU hours requested by the sponsor. This fee is non-refundable, in whole or in part, regardless of the number of hours 'approved' by the Board, as opposed to the number of hours that had been requested by the sponsor.  
  
[NOTE: A check or money order in the amount of the review/approval fee must accompany this Application.] Hours requested in 5. (above) x \$55.00 = \$ \_\_\_\_\_
9. Has this Program been previously approved by the NCERS/NAB?  
 Yes  No If "Yes", program number: \_\_\_\_\_

10. Please enter the code number(s) from the enclosed "Domains of Practice" that best categorizes the subject matter of the Program for which approval is being sought (see enclosure #1): \_\_\_\_\_

---

---

11. How does this Program relate to long term care administration (see enclosure #2)?

---

---

---

12. Attach the specific terminal objectives for the Program, outline the associated content, indicate teaching methods and any instructional media to be utilized (use page 4 of this Application).

13. Attach current bio or vita (limited to one page) for each presenter. Bio or vita for each presenter must be included before the Program can be reviewed by the Board (use page 5 of this Application for each presenter).

14. Attach a detailed time schedule for each Program, showing the breakdown of each day's activities, including starting and ending times.

15. Organizational philosophy and objectives: \_\_\_\_\_

---

---

---

16. Presenter's (Presenters') background in continuing education: \_\_\_\_\_

---

---

---

17. Presenter's (Presenters') background in long term care administration: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

18. Describe long term care administrator involvement in the Program planning: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

19. Specify length of time records kept for Program records retained: \_\_\_\_\_

20. Describe method for recording attendance during the Program (attendance must be monitored throughout the entire day) and attach a copy of the attendance form to be used: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

21. How are evaluations utilized? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

22. Our organization agrees to allow for periodic OSBELTCA monitoring of individual Programs.

23. Attach an example of the "*Certificate of Attendance*" to be issued to attendees.

\_\_\_\_\_  
Name (typed/printed) of individual submitting Application

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**EDUCATIONAL OFFERING: Session Worksheet**

[Attach a copy of this worksheet to each Program application submitted.]

Instructions: provide information to meet criteria for Objectives, Content, Time Frames, Faculty and Teaching Methods

**TITLE OF SESSION:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OBJECTIVES (list in Operational/Behavioral terms):** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CONTENT (topics):** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**TIME FRAME (time frame for topic area):** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FACULTY (list faculty member or presenter for each topic):** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**TEACHING METHOD (describe method(s) used for each topic):** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



## **Enclosure #1 – Domains of Practice**

*These include the Domains of Practice for **NURSING HOME ADMINISTRATORS** as well as **RC/AL ADMINISTRATORS**. OSBELTCA approves CE applicable to administrators of all lines of service; the more applicability to the various domains of practice across the spectrum of these lines of service, the better.*

### **Nursing Home Administration**

#### **Domains of Practice**

##### **10 RESIDENT CENTERED CARE AND QUALITY OF LIFE**

- 10.01 Ensure the development, implementation, and review of resident care policies and procedures.
- 10.02 Ensure that nursing services are planned, implemented, and evaluated to maximize resident quality of life and quality of care.
- 10.03 Ensure that the admission process is planned, implemented, and evaluated to promote communication with residents and realistic expectations.
- 10.04 Ensure that social service programs are planned, implemented, and evaluated to meet resident psychological and social needs and preferences to maximize resident quality of life and quality of care.
- 10.05 Ensure that the food service program and dining experience are planned, implemented, and evaluated to meet the nutritional needs and preferences of residents to maximize resident quality of life and quality of care.
- 10.06 Ensure that medical services are planned, implemented, and evaluated to meet resident medical care needs and preferences to maximize resident quality of life and quality of care.
- 10.07 Ensure that therapeutic recreation/activity programs are planned, implemented, and evaluated to meet the needs, and interests of residents to maximize resident quality of life and quality of care.
- 10.08 Ensure that a health information management program for resident care is planned, implemented, and evaluated to meet documentation requirements to maximize resident quality of life and quality of care.
- 10.09 Ensure that pharmaceutical services is planned, implemented, and evaluated to support medical care for residents to maximize resident quality of life and quality of care.
- 10.10 Ensure that a rehabilitation program is planned, implemented, and evaluated to maximize residents' optimal level of functioning and independence.
- 10.11 Identify, monitor, and ensure that quality indicators and quality assurance programs are utilized to maximize effectiveness in resident care and services and quality of life.
- 10.12 Ensure the integration of Resident Rights and resident individuality with all aspects of resident care and quality of life.
- 10.13 Ensure the integration of stakeholders' perspectives to maximize resident quality of life and quality of care.
- 10.14 Ensure that resident care services comply with federal and state standards and regulations

##### **20 HUMAN RESOURCES**

- 20.01 Facilitate effective communication among management and staff.
- 20.02 Develop, implement, and monitor recruitment, staff development, evaluation, and retention programs to maximize resident quality of life, quality of care, and staff job satisfaction (e.g., recognition programs, staff continuing education, work culture).
- 20.03 Ensure that human resource programs are planned, implemented, and evaluated to address diversity.
- 20.04 Develop, implement, and monitor compensation and benefit programs.
- 20.05 Ensure the development and implementation of employee health and safety programs.
- 20.06 Ensure that human resource management policies and programs are planned, implemented, and evaluated to comply with federal and state standards and regulations.

# Nursing Home Administration

## Domains of Practice

### **30 FINANCE**

- 30.01 Develop annual operating and capital budgets to effectively forecast fiscal requirements.
- 30.02 Manage annual operating and capital budgets to effectively use fiscal resources.
- 30.03 Generate and collect revenue to ensure financial viability of the facility.
- 30.04 Negotiate, interpret, and implement contractual agreements (e.g., organized labor, managed care, vendors, consultative services).
- 30.05 Ensure the integrity of financial audit programs and reporting systems.
- 30.06 Ensure protection of the facility's financial assets (e.g., insurance coverage, risk management).
- 30.07 Ensure that financial practices are planned, implemented, and audited to comply with federal and state standards and regulations.

### **40 ENVIRONMENT**

- 40.01 Ensure that a comprehensive system for maintaining and improving buildings, grounds, and equipment is planned, implemented, and evaluated.
- 40.02 Ensure that the facility provides a clean, attractive, and home-like environment for residents, staff, and visitors.
- 40.03 Ensure the planning, implementation, and evaluation of an environmental safety program that will maintain the health, welfare, and safety of residents, staff, and visitors.
- 40.04 Ensure the planning, implementation, and evaluation of an emergency preparedness program that protects the safety and welfare of residents, visitors, staff, and property.
- 40.05 Ensure that quality assurance programs are implemented to maximize effective environmental services.
- 40.06 Ensure residents are provided with an environment that fosters choice, comfort, and dignity.
- 40.07 Ensure development, implementation, and review of environmental services policies and procedures.
- 40.08 Ensure that facility complies with federal and state standards and regulations (e.g., ADA, OSHA, CMS, Life Safety Code).

### **50 LEADERSHIP AND MANAGEMENT**

- 50.01 Ensure that policies and procedures are developed, implemented, monitored, and evaluated to comply with directives of governance (e.g., owner, board of directors, corporate entity).
- 50.02 Promote and monitor resident's and family's/responsible party's satisfaction with quality of care and quality of life.
- 50.03 Manage the facility's role throughout the entire survey process
- 50.04 Educate stakeholders with regard to interpretation of and compliance with regulatory requirements.
- 50.05 Identify areas of potential legal liability, and develop and implement an administrative intervention or risk management program to minimize or eliminate exposure.
- 50.06 Develop and/or direct the strategic planning process.
- 50.07 Participate in and promote professional development activities.
- 50.08 Develop leadership skills of management team and key staff.
- 50.09 Ensure that information management systems support facility operations.
- 50.10 Ensure sufficient resources (e.g., supplies, medical equipment, technology, trained staff) to provide resident care and to promote quality of life.
- 50.11 Develop and implement comprehensive marketing and public relations strategies.
- 50.12 Foster and maintain relationships between the facility and other community resources (e.g., educational institutions, hospitals, vendors).
- 50.13 Ensure that policies and procedures are developed, implemented, monitored, and evaluated to comply with federal and state standards, regulations, and guidelines (e.g., facility/NHA license, professional responsibility).

# RESIDENTIAL CARE/ASSISTED LIVING (RC/AL) ADMINISTRATION

## DOMAINS OF PRACTICE

### **10 CLIENT/RESIDENT SERVICES MANAGEMENT**

- 10.01 Ensure client/resident service policies and procedures comply with applicable federal, state, and local laws, rules, and regulations.
- 10.02 Ensure client/resident right to make autonomous healthcare decisions
- 10.03 Plan, implement, and evaluate policies and procedures for the protection of client/resident rights and confidentiality.
- 10.04 Coordinate the development and implementation of service plans based on client/resident preferences and assessed needs (e.g., nutritional, medication, psychosocial, medical, physical, socio-economic).
- 10.05 Evaluate and update service plans periodically with client/resident and/or responsible party.
- 10.06 Ensure that medication policies and procedures are compliant with regulations and consistent with client/resident needs and preferences.
- 10.07 Provide transportation assistance for clients/residents.
- 10.08 Provide and coordinate social-recreational services that are consistent with client/resident preferences and abilities.
- 10.09 Plan, implement, and evaluate move-in/move-out criteria.
- 10.10 Manage the establishment and maintenance of client/resident records and documentation systems (e.g., service notes, assessed needs).
- 10.11 Plan, implement, and evaluate systems for oversight of services contracted by clients/residents (e.g., hospice, therapy, home health).
- 10.12 Plan, implement, and evaluate policies and procedures for responses to client/residentspecific incidents, accidents, and/or emergencies.
- 10.13 Plan, implement, and evaluate dining services designed to meet client/resident needs and preferences (e.g. presentation, quality of food, service, training, special diets).
- 10.14 Plan, implement, and evaluate housekeeping services.
- 10.15 Plan, implement, and evaluate laundry and linen services.
- 10.16 Plan, implement, and evaluate principles of hospitality within the assisted living community.

### **20 HUMAN RESOURCES MANAGEMENT**

- 20.01 Ensure human resources policies and practices comply with applicable federal, state, and local laws, rules and regulations.
- 20.02 Ensure that staff embraces assisted living philosophies (e.g., promoting compassion, privacy, choice, independence, dignity, individuality).
- 20.03 Plan, implement, and evaluate recruitment programs (e.g., applications, interviews, reference/criminal background checks).
- 20.04 Ensure that the assisted living community has appropriate staffing consistent with client/resident needs and acuity.
- 20.05 Plan, implement, and evaluate retention and development programs (e.g., pay, benefits, incentives, work schedules, staff recognition, regular performance appraisals, mentoring, team building).
- 20.06 Establish and maintain a safe and positive work environment (e.g., safety training, employee risk management, conflict resolution, diversity training).
- 20.07 Plan, implement, and evaluate staff training programs (e.g., orientation, training, skills enhancement, education) consistent with client/resident needs and preferences
- 20.08 Manage the establishment and maintenance of employee records and documentation systems.
- 20.09 Plan, implement, and evaluate employee disciplinary policies and procedures.

# RESIDENTIAL CARE/ASSISTED LIVING (RC/AL) ADMINISTRATION

## DOMAINS OF PRACTICE

### **30 LEADERSHIP AND GOVERNANCE**

- 30.01 Ensure compliance with applicable federal, state, and local laws, rules, and regulations.
- 30.02 Ensure that client/resident privacy, choice, independence, dignity, and individuality are supported within the assisted living community.
- 30.03 Develop and communicate the mission, vision, and values of the assisted living community to clients/residents, families, staff, and the public.
- 30.04 Ensure ethical practice throughout the assisted living community.
- 30.05 Involve clients/residents, family, and staff in assisted living community decision-making
- 30.06 Develop, implement and evaluate assisted living community's strategic plan in partnership with ownership or governing bodies.
- 30.07 Plan, implement, and evaluate a public relations program.
- 30.08 Plan, implement, and evaluate marketing initiatives to meet organizational goals and objectives.
- 30.09 Develop and maintain positive relations with key stakeholders (e.g., clients/residents, families, staff, regulators, legislators, community organizations, media, referral sources)
- 30.10 Plan, implement, and evaluate programs and procedures to ensure and document informed choice in matters of client/resident risk.
- 30.11 Ensure written agreements between the client/resident and the assisted living community protect the rights and responsibilities of both parties (e.g., moving-out, financial obligations, full disclosure).
- 30.12 Negotiate contracts and agreements with suppliers, vendors, and professionals to legally formalize the delivery of goods and services (e.g., rehabilitation, pharmacy, maintenance, dining).
- 30.13 Plan, implement, and evaluate a quality improvement program.

### **40 PHYSICAL ENVIRONMENT MANAGEMENT**

- 40.01 Ensure that physical environment policies and practices comply with applicable federal, state, and local laws, rules, and regulations (e.g., Occupation Safety and Health Administration [OSHA], Life Safety Code, Americans with Disabilities Act [ADA]).
- 40.02 Establish and maintain a physical environment that meets client/resident needs and preferences consistent with assisted living philosophies (including acuity and mobility/accessibility).
- 40.03 Develop, implement, and evaluate assisted living community fire, emergency, disaster, and client/resident safety/security plans.
- 40.04 Develop, implement and evaluate preventive and daily maintenance plans for all buildings, grounds, equipment and infrastructure.
- 40.05 Develop, implement and periodically evaluate a capital replacement plan regarding all buildings, grounds, furnishings, and equipment.

# RESIDENTIAL CARE/ASSISTED LIVING (RC/AL) ADMINISTRATION

## DOMAINS OF PRACTICE

### **50 FINANCIAL MANAGEMENT**

50.01 Ensure financial management policies and practices comply with applicable federal, state, local laws, rules, and regulations (e.g., IRS, Medicaid, Medicare, Health Insurance Portability and Accountability Act [HIPAA]).

50.02 Ensure financial policies and procedures comply with Generally Accepted Accounting Principles (GAAP) (e.g., accounts receivable and payable, payroll, client/resident funds)

50.03 Develop, implement, and evaluate the assisted living community's budget (e.g., revenues, expense, capital expenditures).

50.04 Develop long-term projections of revenue mix (e.g., private pay, insurance, SSI, Medicaid waivers) and expense in order to ensure continued financial viability of the assisted living community.

50.05 Monitor and comply with the assisted living community's financing obligations (e.g., debt service, mortgage covenants).

50.06 Maintain appropriate insurance coverage to protect the assisted living community.

50.07 Develop and implement a system to periodically monitor and adjust financial performance.

ENCLOSURE #2

## SUBCHAPTER 9. CONTINUING EDUCATION

Section	
490:1-9-1.	General provisions for continuing education programs
490:1-9-2.	Criteria for continuing education programs
490:1-9-3.	Approval of continuing education programs
490:1-9-4.	Continuing education requirements
490:1-9-5.	Auditing of continuing education hours

[Source: Codified 7-1-07]

### 490:1-9-1. General provisions for continuing education programs

- (a) In order to receive Board recognition and continuing education credit, continuing education programs shall be submitted to the Board for approval prior to presentation as indicated under this Chapter.
- (b) All continuing education programs submitted to the Board for its evaluation and possible 'approval' for purposes of granting Oklahoma continuing education credit hours shall be submitted with a \$55.00 per credit hour, non-refundable fee. Approval will be granted only for specific programs for specific dates of presentation. The Board shall waive this fee for programs sponsored by other State or federal agencies. Recurring presentations also require Board approval, but may be considered and approved by the Board based upon a report of program changes from the previously-approved program.
- (c) The Board may withdraw approval for continuing education credit should subsequent information come to its attention that program content differed from that approved.

- (d) Sponsors shall be responsible for obtaining satisfactory documentation of attendance and submission of the attendance records to the Board.
- (e) All programs approved by the National Continuing Education Review Service (NCERS), National Association of Long Term Care Administrator Boards (NAB) that receive a NCERS/NAB approval number will be presumptively accepted by the Board for purposes of meeting Oklahoma's annual continuing education requirements.
- (f) The Board may approve, sponsor and/or conduct its own educational and training programs for continuing education credit if such programs meet the criteria established in this Chapter.
- (g) The Board reserves the right to monitor any and all approved programs.
- (h) Programs that deal specifically with internal affairs of an organization do not qualify for continuing education hours.
- (i) Programs from the Administrator University may qualify for continuing education hours if they meet the criteria outlined in this Chapter and have been so approved by the Board.
- (j) Sponsors, at their discretion, may award partial credit for attendees who they deem have been late, left early, or otherwise not participating in the full activities of the program. The Board approval for a program is for "up to" the number of hours approved and it is the responsibility of the sponsor to judiciously grant credit. This also allows the sponsor to award fewer hours in the event of such unplanned changes to the program such as a scheduled speaker being unable to make his presentation. Failure to protect the integrity of the hours approved on the part of the sponsor could result in future denial of program approval by the Board.

[Source: Added at 24 Ok Reg 1599, eff 7-1-07; Amended at 26 Ok Reg 2700, eff 7-25-09; Amended at 29 Ok Reg 1326, eff 7-1-12]

### 490:1-9-2. Criteria for continuing education programs

- (a) In order for the Board to approve a program for continuing education hours, an application shall be completed by the sponsor and reviewed and approved by the Board.
- (b) Sponsors shall submit their application to the Board at least 30 days in advance of the program, provided however, should the Board fail to meet through lack of a quorum or other circumstance, the application will be reviewed at the next meeting of the Board and if approved, hours will be awarded retroactively.
- (c) The application shall contain documentation that certifies the following criteria are being met:
- (1) The program shall relate to Long Term Care Administration and be designed to promote continued knowledge, skills and attitudes consistent with current standards in long term care administration.
  - (2) The program shall be designed to assist administrators to improve their professional competencies.
  - (3) The program shall be open and available to all long term care administrators in Oklahoma.
  - (4) The facility where the program will be conducted shall provide adequate space to accommodate potential

attendees and have the ability to supply the needed equipment.

(5) The faculty/instructors must have experience in long term care supervision and administration, or have expertise in teaching and instructional methods suitable to the subject presented, or have suitable academic qualifications and experience for the subject presented.

(6) The learning objectives in the program must be reasonable and clearly stated in behavioral terms which define the expected outcomes for participants.

(7) The learning objectives must be consistent with the program content and the mechanism by which learning objectives are shared with participants must be identified.

(8) The teaching methods in the program must be clearly stated, must be appropriate to the subject matter, and must allow suitable time.

(9) Instructional aids and resource materials that will be utilized in the program must be described.

(10) Sponsors should be qualified in the subject matter presented. The Board, in its sole discretion, may approve programs from an accredited educational institution, a professional association and/or trade association, a private educational group, or a state agency, or from another source if the program content is deemed to be of sufficient value to Oklahoma long term care administrators.

(11) The registration fee for a program must be published clearly on promotional material.

(12) Registration fees may be reviewed by the Board.

(13) The sponsor must allow the Board to evaluate the program.

(14) The sponsor must provide an evaluation form, approved by the Board, for each program participant's responses.

(15) Within 15 days after the conclusion of the program, the sponsor must provide to the Board a list of participants and a summary of the evaluations for each program.

(16) The application presented to the Board must state the method to be used in certifying attendance or on-line completion.

(17) To receive full credit, attendees must attend the full program and/or log-in for on-line attendance for the full program. See also 490:1-9-1(j).

(18) Partial credit of a minimum of two clock hours may be earned in a divisible program.

(19) Instructional hours must be based upon clock hours (60 minutes = 1 clock hour).

(20) The agenda must show registration, meal times (not included in credit hours), and a breakdown of the daily educational activities.

(21) The maximum number of hours that can be approved or earned shall be seven clock hours per day.

(22) The target group for programs shall be long term care administrators and other disciplines related to long term care.

[Source: Added at 24 Ok Reg 1599, eff 7-1-07; Amended at 29 Ok Reg 1326, eff 7-1-12]

**490:1-9-3. Approval of continuing education programs**

(a) In order to be approved, continuing education programs shall be appropriately designed for Long Term Care Administrators and shall meet the criteria outlined in this Chapter.

(b) If a program is disapproved, the sponsor shall be notified in writing of the reasons for rejection within ten (10) working days of the Board's decision.

(c) If a program is disapproved, the sponsor has 30 days to appeal in writing. The appeal must include a copy of the original application package and any additional information the sponsor feels is needed for further clarification.

(d) The Board may approve program content or a portion of the program content, even though the same content or a portion of the program content has been previously approved by the Board for the same calendar year.

[Source: Added at 24 Ok Reg 1599, eff 7-1-07; Amended at 26 Ok Reg 2700, eff 7-25-09; Amended at 29 Ok Reg 1326, eff 7-1-12]

**490:1-9-4. Continuing education requirements**

(a) Each licensee shall be responsible for identifying his own continuing education needs, taking the initiative in seeking continuing professional education activities to meet those needs, and integrating new knowledge and skills into his duties.

(b) Individuals who are newly licensed as a nursing home or ICF/MR administrators or certified as Assistant Administrators are required to successfully complete continuing education hours equivalent to a rate of two (2) hours per month, beginning with the month following the month his license/certificate is issued, for each month he holds the license/certificate during the current licensing year. For certified assistant administrators, this is a condition of employment.

(1) Individuals who are newly licensed as RC/AL administrators are required to successfully complete continuing education hours equivalent to a rate of one and one-half (1.5) hours per month, beginning with the month following the month their license is issued, for each month they hold the license during the current licensing year.

(2) Individuals who are newly licensed as RC only administrators are required to successfully complete continuing education hours equivalent to a rate of 1.3 hours per month, rounded up to the next half hour increment (e.g., 1.3 = 1.5; 2.6 = 3), beginning with the month following the month their license is issued, for each month they hold the license during the current licensing year.

(3) Individuals who are newly licensed as Adult Day Care administrators are required to successfully complete continuing education hours equivalent to a rate of one (1) hour per month, beginning with the month following the month their license is issued, for each month they hold the license during the current licensing year.

(c) Licensees holding a nursing home administrator license and Certified Assistant Administrators shall successfully complete twenty-four (24) clock hours of continuing education during each licensing year. For Certified Assistant Administrators this shall be a condition of employment.

- (1) RC/AL administrators shall successfully complete eighteen (18) clock hours of continuing education during each licensing year.
- (2) Residential Care only administrators shall successfully complete sixteen (16) clock hours of continuing education during each licensing year.
- (3) Licensed Adult Day Care Administrators are required to successfully complete twelve (12) clock hours of continuing education during each licensing year.
- (d) Licensees/certificate holders are responsible for maintaining their own continuing education records.
- (e) Carry-over of continuing education hours earned in one licensing year that were in excess of the hours required for that year to a subsequent licensing year is not permitted.
- (f) Licensed administrators who have attended and received credit for previously approved program content shall be denied credit for attending subsequent duplicate programs in the same calendar year.
- (g) A licensee/certificate holder who cannot meet the continuing education requirement due to illness, emergency or hardship may petition the Board, in writing, requesting a waiver of the CEU requirement. Any such waiver request must be received and acted-upon by the Board prior to the end of the licensing period in which the CEU requirement will not be met. The waiver request shall explain why compliance is not possible, and include appropriate documentation. Waiver requests will be evaluated and acted upon by the Board on a case-by-case basis.
- (h) In the event a licensee fails to provide the Board, upon request, with documentation that the continuing education requirements have been met, the licensee will be subject to sanction by the Board, which may include suspension or revocation of his license. This is always considered a reportable offense even on the first offense and will appear as a violation in the Registry.
- (i) A licensee whose license is suspended by the Board for disciplinary reasons is not exempt from the continuing education requirements, and must, therefore, successfully complete the required number of continuing education hours commensurate with his license/certificate type during any licensing year(s) in which his license is under suspension. Licensee shall, upon Board request, furnish documentation that the continuing education requirements have been met. Failure to provide such requested documentation shall subject licensee to sanction by the Board, including further suspension or revocation of his license.

- (j) All CEU hours earned for programs approved by the NCERS/NAB or approved by the Board may be utilized by a licensee for purposes of meeting the annual CEU requirement in the licensing period in which the hours were earned.

[Source: Added at 24 Ok Reg 1599, eff 7-1-07; Amended at 25 Ok Reg 2565, eff 7-11-08; Amended at 26 Ok Reg 2700, eff 7-25-09; Amended at 29 Ok Reg 1326, eff 7-1-12]

#### **490:1-9-5. Auditing of continuing education hours**

- (a) The Board may request continuing education information from sponsors for audit purposes only.
- (b) The Board does not retain any record of continuing education hours completed by individual administrators except as it may otherwise obtain in its performance of the annual CEU compliance audit.
- (c) An annual audit of at least 5% of the total number of each type of administrator will be made to verify compliance with the annual CEU requirement. This percentage may be increased at the Board's discretion.
- (d) Failure of a licensee to provide verification of continuing education hours completed, if requested by the Board, shall result in disciplinary action against the licensee. The minimum penalty for a first time offense is \$50.00 per CEU short and completion of twice the number of CEUs short, due within 120 days. These CEUs cannot be applied to the current year's requirements. This is also a HIPDB (Healthcare Integrity and Protection Data Bank) reportable offense. For a second offense, the penalty will double. Any subsequent offenses shall be referred to the Board for determination of an appropriate penalty which may include suspension or revocation. The Administrator may also request a formal hearing before the Board in lieu of the penalty for either the first or second time offense, in which case a formal complaint shall be drafted and the Board shall have a full range of penalty options available to them, to include suspension and revocation. These automatic penalties for the first and second offense do not require Board approval; however, any variation from this "standard" will require Board approval. A formal complaint and appropriate order will still be drafted by the Board's attorney and the action taken shall be reported to the Board.

[Source: Added at 24 Ok Reg 1599, eff 7-1-07; Amended at 26 Ok Reg 2700, eff 7-25-09; Amended at 29 Ok Reg 1332, eff 7-1-12]