



Oklahoma State Board of Examiners for Long Term Care Administrators

(OSBELTCA)

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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 hours, no fractions permitted)

6. Date(s)/Location(s) 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 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: These fees must be paid in advance of the Board reviewing this request. All fees are payable through our website (we cannot accept cash or checks).

Hours requested (in #5 above) _____ X \$55.00 = \$ _____

9. Has this program been previously approved by NAB/NCERS?

Yes No

If "Yes," program number: _____

10. Please enter the Domain Task Number(s) (See Enclosure #1) from the “Domains of Practice” that best categorizes the subject matter of your program(s) for which approval is being sought:

11. How does/do your program(s) 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 “Educational Worksheet” for each session). You may need to use this page multiple times, one for each session.

13. Attach “Biographical Data Form” for each presenter. You may need to use this page multiple times, one 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, breaks and meals, etc.

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 Program records are maintained/retained: _____

20. Describe your method for recording attendance during the Program (attendance must be monitored throughout each day and each program/session) and attach a copy of any forms you will use:

21. How are evaluations utilized?

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

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

NAME (TYPED) of Individual Submitting Application

Title

(Signature)

Date

EDUCATIONAL OFFERING: Session Worksheet

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

Instructions: Provide information to meet criteria for Objectives, Content, Timeframes, Faculty and Teaching Methods.

TITLE OF SESSION: _____

OBJECTIVES (list in Operational/Behavioral Terms):

CONTENT (topics):

TIMEFRAME (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 applicable for all long-term care administrators. OSBELTCA approves CE applicable to all lines of service; the more applicability to the various domains of practice across the spectrum of these lines of service, the better. These Domains of Practice were taken directly from the NAB/ACHA AIT Manual and it does include “Knowledge” items applicable to each Domain and “Skills” items that are applicable to all of the Domains.

Domain 10 - Customer Care, Support, and Services

10.01 - Establish care recipient service policies and procedures that comply with applicable federal and state laws, rules, and regulations.

This task requires the Administrator to create policies and procedures that follow federal and states laws rules and regulations.

10.02 - Ensure plans of care are evidence- based, established, implemented, updated, and monitored based on care recipient preferences and assessed needs.

This task requires the Administrator to ensure that staff implements a plan of care for each resident, based on the individual’s needs and preferences, under the direction of a physician. This includes a comprehensive assessment of each resident/recipient. The comprehensive assessment should include (but not limited to) assessments for nutrition (to include diet, texture, weight, swallowing), therapy, mobility, fall risk, skin/wound management, medications and contraindications, cognitive abilities, behavior, mental health, etc.

10.03 - Ensure the planning, development, implementation/execution, monitoring, and evaluation of admission/move in process, including pre-admission/pre-move in information, to promote a quality experience for care recipients.

This task requires the Administrator to ensure that the admission process is comprehensive and is resident-centered. This includes obtaining all available documentation at the time of admission to include, but not limited to: power of attorney for health care and financial, resident identification cards, insurance information, doctor and all other orders related to the resident to include hospital/doctors/clinic records pertaining to the residents stay at the facility or services provided by the organization.

10.04 Ensure the planning, development, implementation/execution, monitoring, and evaluation of discharge/move out process to promote a quality experience for care recipients.

This task requires the Administrator to ensure that resident care is appropriate for the level of care they require and that an interdisciplinary team continually monitors the resident’s progress and recommends the best care environment need to maximize the resident’s quality of living.

10.05 - Ensure the planning, development, implementation/execution, monitoring, and evaluation of programs to meet care recipients psychosocial needs and preferences.

This task requires the Administrator to ensure that residents are properly evaluated and cared for based on their psychosocial needs and preferences.

10.06 Ensure the planning, development, implementation/execution, monitoring, and evaluation of care recipient’s activities/recreation to meet social needs and preferences.

This task requires the Administrator to ensure activities, events, and programs are resident centered and designed to meet the needs and preferences of each resident.

10.07 - Ensure the planning, development, implementation/execution, monitoring, and evaluation of a health information management program to meet documentation requirements in compliance with federal and state regulations.

This task requires the Administrator to ensure all resident specific documentation is protected and follows state, federal, and HIPAA regulations.

10.08 - Ensure the planning, development, implementation/execution, monitoring, and evaluation of medication management that supports the needs of the care recipient.

This task requires the Administrator to ensure that doctors' orders are strictly followed and that policies and procedures are in place to assure compliance.

10.09 - Ensure the planning, development, implementation/execution, monitoring, and evaluation of a rehabilitation program to maximize optimal level of functioning and independence for care recipients.

This task requires the Administrator to provide individualized rehabilitative services to recipients that will help them meet their baseline and allow residents to be as independent as possible.

10.10 - Ensure the planning, development, implementation/execution, monitoring, and evaluation of systems for coordination and oversight of contracted services.

This task requires the Administrator to ensure that services are available to meet the needs of each recipient from qualified vendors that meet city, state, and federal requirements.

10.11 - Ensure the planning, development, implementation/execution, monitoring, and evaluation of policies and procedures for responses to care recipient incidents, accidents, and/or emergencies.

This task requires the Administrator to ensure that policies and procedures are written and followed to prevent incidents and accidents and to prepare staff to act appropriately when incidents, accidents, and emergencies occur.

10.12 - Ensure the planning, development, implementation/execution, monitoring, and evaluation of housekeeping and laundry services for care recipients.

This task requires the Administrator to ensure a clean, safe, and sanitary environment.

10.13 - Ensure the planning, development, implementation/execution, monitoring, and evaluation of education intended for care recipients and their support networks.

This task requires the Administrator to ensure that the care recipient and/or their responsible party is informed of their care, condition, and treatment as much as practical.

10.14 - Ensure the planning, development, implementation/execution, monitoring, and evaluation of nutritional needs and preferences of care recipients.

This task requires the Administrator to ensure that the care recipient's nutritional needs are met in accordance with their individualized needs and preferences while simultaneously meeting all physicians prescribed orders.

10.15 - Ensure the planning, development, implementation/execution, monitoring and evaluation of dining experience that meets the needs and preferences of care recipients.

This task requires the Administrator to ensure that dining services are resident-centered and meet the nutritional needs paralleled with the recipient preferences.

10.16 - Ensure care recipients rights and individuality with all aspects of care.

This task requires the Administrator to ensure all staff are trained and follow state and federal guidelines related to resident rights. Attention must be made to issues related to abuse, neglect, misappropriation of resident property and mistreatment of residents.

10.17 - Integrate support network's perspectives to maximize care recipients quality of life and care.

This task requires the Administrator to ensure that measures are taken to review Quality Improvement Measures and to strategize how each team member influences quality measures and how they each help to improve quality based on recipient, responsible party, and team members input. Attention must be made to issues related to meeting the care recipient's individualized needs

10.18 - Ensure transportation options are available for care recipients.

This task requires the Administrator to ensure adequate transportation to recipients. The facility should identify transportation that is available and the costs (if any) for the services and inform recipients and their

responsible parties of availability and cost. The facility/entity must be available to help coordinate transportation services based on the recipients preference and available funding.

10.19 - Ensure the provision of a customer service culture that leads to a quality experience for care recipients.

This task requires the Administrator to promote a resident centered experience that serves each recipient according to their choices and preferences as much as practical.

Knowledge Items related to Domain 10:

- 10K01 Applicable federal and state laws, rules, and regulations
- 10K02 Government programs and entities
- 10K03 Ethical decision-making
- 10K04 Interpersonal relationships, dispute resolution, and group dynamics
- 10K05 Psychosocial aspects of aging
- 10K06 Physiological aspects of aging
- 10K07 Basic principles and concepts of nursing
- 10K08 Basic medical terminology
- 10K09 Basic pharmaceutical terminology
- 10K10 Basic principles and regulations for medication management/administration
- 10K11 Basic principles and concepts of restorative/wellness programs
- 10K12 Basic principles of rehabilitation
- 10K13 Basic principles of acute and chronic diseases
- 10K14 Basic principles of infection control
- 10K15 Basic principles of pain management
- 10K16 Basic principles of fall prevention
- 10K17 Basic principles of elopement prevention
- 10K18 Basic principles of creating a safe environment for care recipients
- 10K19 Basic understanding of mental health issues
- 10K20 Basic understanding of cognitive impairments
- 10K21 Basic principles of behavior management
- 10K22 Basic principles of restraint usage and reduction
- 10K23 Basic elements of a social services program
- 10K24 Basic elements of a therapeutic recreation/activity program
- 10K25 Basic principles of nutrition including specialized diets
- 10K26 Basic principles of dietary sanitation, food storage, handling, preparation, and presentation
- 10K27 Basic principles of hospice and palliative care
- 10K28 Grieving process
- 10K29 Death and dying
- 10K30 Person-centered care concepts
- 10K31 Diversity of care recipients
- 10K32 Care recipients' support network interests, needs, and values
- 10K33 Care recipient Bill of Rights
- 10K34 Resident Assessment Instrument (RAI) and interdisciplinary care plan requirements and process
- 10K35 Care recipient assessment instruments (OASIS) and interdisciplinary care plan requirements and process
- 10K36 Care recipient assessments and care plans other than RAI and OASIS
- 10K37 Admission/move-in, transfer, and discharge/move-out requirements
- 10K38 Bed-hold requirements (NHA only)
- 10K39 Roles, responsibilities, regulation and oversight of contracted providers and services
- 10K40 Services and resources available across the continuum of care (such as community, social, financial, spiritual)
- 10K41 Care recipient specific legal matters (such as power of attorney, guardianship, conservatorship, code status, Advance Directives)

10K42 Activities of Daily Living (ADLs) and Independent Activities of Daily Living (IADLs)
10K43 Role of Medical Director
10K44 Role of healthcare partners and clinical providers
10K45 Medical services, specialties and equipment (such as oxygen, durable medical equipment, podiatry)
10K46 Emergency medical services and techniques (such as CPR, first aid, Heimlich maneuver, AED)
10K47 Center for Medicare and Medicaid Services (CMS) quality indicators and measures
10K48 Quality assurance and performance improvement processes as related to care and services
10K49 Techniques for auditing care recipient services and outcomes
10K50 Signs and symptoms of abuse, neglect, and exploitation
10K51 Mandatory reporting requirements for incidents and adverse events
10K52 Medical record content, format, and documentation requirements
10K53 Confidentiality, disclosure, and safeguarding medical record information requirements
10K54 Transportation options for care recipients
10K55 Environmental services (such as housekeeping and laundry)
10K56 Hospitality services
10K57 Basic technological advances in healthcare

Domain 20 - Human Resources

20.01 - Ensure that human resource management policies and programs comply with federal and state rules and regulations.

This task requires the Administrator to create policies and procedures that follow federal and states laws rules and regulations.

20.02 - Establish the planning, development, implementation, monitoring, and evaluation of recruitment, selection, and retention practices.

This task requires the Administrator to ensure the facility has systems in place that will provide for a consistent, fair, and predictable method of job development, job hiring, job training, employee evaluation, and continuing education. These systems should follow the standards of the Fair Labor Standards Act (FLSA).

20.03 - Establish the planning, development, implementation, monitoring, and evaluation of employee training and development programs.

This task requires the Administrator to have policies and procedures in place to train managers/leaders to follow and design basic and continuing education programs aimed at evaluating individual employee performance and training programs that can meet the basic, continuing, or potential educational needs of the employee.

20.04 - Establish the planning, development, implementation, monitoring, and evaluation of employee evaluation programs.

This task requires the Administrator to ensure that policies and procedures are in place that clearly provide instruction to managers/leaders to regularly monitor employee performance and to timely inform employees of when their performance or adherence to procedures does not meet standards. This should include timely formal evaluations of the employee to communicate areas of poor performance and areas in which the employee meets and exceed facility standards.

20.05 - Establish the planning, development, implementation, monitoring, and evaluation of compensation and benefit programs.

This task requires the Administrator to ensure that policies and procedures are in place for employee compensation and benefits programs. This includes a formal method of informing employees of their employee benefits and compensation.

20.06 - Establish the planning, development, implementation, monitoring, and evaluation of employee health and safety programs.

This task requires the Administrator to ensure that policies and procedures are in place to prevent employee injury and encourage employee wellness. This includes having an effective workers compensation or group retro program and providing a health/wellness program that gives employees the opportunity to attain health, dental, vision, accident, pharmacy, and life insurance programs.

20.07 - Establish the planning, development, implementation, monitoring, and evaluation of employee satisfaction and organizational culture.

This task requires the Administrator to ensure policies and procedures are in place to measure employee satisfaction and that results are taken seriously and considered. This task also requires the Administrator to develop an organizational chart/diagram that will clearly communicate to employees the organization structure.

20.08 - Establish the planning, development, implementation, monitoring, and evaluation of employee disciplinary policies and procedures.

This task requires the Administrator to have policies and procedures in place that will set standards to objectively measure employee performance. When employee performance or behavior does not meet standards, employees are made aware of an allegation, and given an opportunity to give an explanation of their performance or behavior (give their side of the story), offer witnesses or evidence that will support their statement, and/or provide a written statement. The procedure should include that the employee will be made aware if an investigation will be done, if the employee will be suspended pending investigation, and that no discipline will be applied until a thorough investigation is completed.

20.09 - Establish the planning, development, implementation, monitoring, and evaluation of employee grievance policies and procedures.

This task requires the Administrator to have policies and procedures in place to clearly communicate with the employee a formal grievance procedure in which the employee, without fear of retaliation, can communicate areas of frustration, abuse, mistreatment, or concerns with the understanding that a formal response will follow.

20.10 - Establish the planning, development, implementation, monitoring, and evaluation of leadership development programs.

This task requires the Administrator to develop leadership development programs not only for managers and leaders but for all employees. This may be in the form of a formalized program designed by a corporation, outside vendor, or the Administrator.

20.11 - Promote a safe work environment (such as safety training and employee risk management).

This task requires the Administrator to ensure effective policies and procedures are in place to create an awareness of safety throughout the workplace that include reporting accidents, safety monitoring, fire drills, water, gas, and electric shut off valves, and that emergency generators are regularly tested.

20.12 - Promote a positive work environment (using techniques such as conflict resolution, diversity training, and staff recognition programs).

This task requires the Administrator to ensure that policies and procedures are in place to assure that the employees are provided a workplace that allows them to communicate concerns and grievances in a safe environment. It also includes training programs in diversity, conflict resolution, continuing education, and staff recognition programs.

20.13 - Facilitate effective written, oral, and electronic communication among management and employees.

This task requires the Administrator to ensure policies and procedures are in place to direct managers and employees on how to formally and informally communicate with each other. These procedures should include requirements to managers on effective leadership ensuring employees are aware and trained in their respective job duties and tasks. Supervisors should also be held accountable for validating performance and communicating with employees that progress.

20.14 - Ensure employee records and documentation systems are developed and maintained.

This task requires the Administrator to ensure employee records and correspondence are protected and secure from other employees, residents, and unauthorized individuals.

20.15 - Establish a culture that encourages employees to embrace care recipients rights.

This task requires the Administrator to create a culture that ensures that all resident rights are followed. and to develop policies and procedures on reporting violations of resident rights.

Knowledge Items related to Domain 20:

20K01 Applicable federal and state laws, rules, and regulations

20K02 Licensure requirements and scopes of practice

20K03 Service provider staffing requirements

20K04 Employee position qualifications, job analysis, job descriptions

20K05 Employee recruitment, selection, interviewing, reference and background checks

20K06 Employee orientation, training and continuing education requirements, and resources

20K07 Compensation and benefit programs (such as employee assistance programs, insurance, salary, retirement)

20K08 Human resource policies and procedures (such as employee grievance, workplace rules, discipline, absenteeism, turnover, classification, exemption status) 20K09 Diversity training

20K10 Performance evaluation procedures

20K11 Safety and injury prevention training

20K12 OSHA rules and regulations
20K13 Workers compensation rules, regulations, and procedures
20K14 Drug-free workplace programs
20K15 Methods for assessing, monitoring, and enhancing employee satisfaction
20K16 Employee recognition, appreciation, and retention programs
20K17 Leadership development
20K18 Types and methods of communication
20K19 Conflict resolution and team dynamics
20K20 Information technology safeguards related to such issues as data security, social media, e-mail, voicemail, computer software, cell phones, photography, video, texting
20K21 Union/management and labor relations
20K22 Employee record-keeping requirements and procedures
20K23 Mandatory reporting requirements

Domain 30 - Finance

30.01 Ensure that financial management policies, procedures, and practices comply with applicable federal and state regulations.

This task requires the Administrator to create policies and procedures that follow federal and state laws, rules, and regulations, including those specific to NHA, RCAL or HCBS.

30.02 - Develop, implement, and evaluate the service provider's budget.

This task requires the Administrator to have knowledge of the budget process and have systems in place to accurately set budgets based on income, expense, capital improvements, and required tasks of the organization.

30.03 - Oversee the billing and collections process and monitor the accuracy of charges and timely collection of accounts.

This task requires the Administrator to have procedures in place to timely and accurately bill for resident care and services to appropriate parties, insurances, or state and federal agencies as appropriate. Systems should be in place to make sure each recipient knows and understands their bill so that timely payments can be made to the facility.

30.04 - Negotiate, interpret, and implement contractual agreements to optimize financial viability.

This task requires the Administrator to ensure the facility/organization has written agreements and contracts that include duration of contract, liability insurance required and assured for each party, language that includes duties of each party and what steps are required to notify each party of any breach of service and details of how to dissolve agreements for poor service or choice to use another vendor/contractor.

30.05 - Develop, implement, monitor, and evaluate financial policies and procedures that comply with Generally Accepted Accounting Principles (GAAP).

This task requires the Administrator to ensure policies and procedures are in place to direct staff on the steps to accurately perform their duties. Direction must be given for employees in the areas of payroll, accounts receivable, billing, accurate record keeping, internal controls, trust accounts, HIPAA, etc.

30.06 - Monitor and evaluate the integrity of financial reporting systems and audit programs.

This task requires the Administrator to ensure that internal controls are in place to validate systems, audit and verify information, and ensure proper supervision to protect theft. An example way to monitor theft would be to never allow the person who prepares a deposit make the deposit. There should be checks and balances in place to allow for the person making the deposit to check the prepared paperwork by a different individual to ensure no errors were made. Another example would be to have a place where the administrator or designee can access all passwords in case of emergency or to validate access when a person may be unavailable.

30.07 - Establish safeguards for the protection of the service provider's assets (such as insurance coverage, risk management)

This task requires the Administrator to have knowledge and provide leadership in risk management, internal controls, workers compensation, and to prevent unnecessary insurance/legal claims.

30.08 - Develop, implement, monitor, and evaluate systems to improve financial performance.

This task requires the Administrator to use critical thinking to understand financial viability and to respond to the financial needs of the facility/organization.

30.09 - Manage and adjust expenses with fluctuations in census/occupancy/care recipient levels (such as staffing rations).

This task requires the Administrator to have systems in place that will effectively make adjustments in labor, supplies, and resources as needed to ensure continued financial performance.

30.10 - Monitor and address changes in the industry that may affect financial viability.

This task requires the Administrator to stay knowledgeable of the changes of all financial resources to include but not limited to Medicare, Medicaid, insurance companies, and other payor sources. In addition, the Administrator must be knowledgeable of any city, state, and federal changes that may affect the financial performance of the facility/organization and make changes as needed.

Knowledge Items related to Domain 30:

- 30K01 Applicable federal and state laws, rules, and regulations
- 30K02 Operational and capital budgeting and forecasting methods
- 30K03 Financial statements and reporting requirements for not-for-profit and for-profit service providers
- 30K04 Service-related sources of revenue/reimbursement
- 30K05 Reimbursement methods across the continuum of care
- 30K06 Alternative sources of revenue
- 30K07 Integration of clinical and financial systems
- 30K08 Billing, accounts receivable, and collections
- 30K09 Accounts payable procedures and management
- 30K10 Revenue cycle management
- 30K11 Internal controls
- 30K12 Contracts and agreements
- 30K13 Financial analysis (such as ratios, profitability, debt covenants, revenue mix, depreciation, forecasting)
- 30K14 Financial statements (such as income statement, balance sheet, statement of cash flows)
- 30K15 Financial measures (such as operating margin, daily cash on hand, staffing, expense analysis)
- 30K16 Risk management
- 30K17 Insurance coverage (such as property, liability)
- 30K18 Inventory control and management
- 30K19 Payroll procedures and documentation
- 30K20 Purchasing process and supply chain management (such as request for proposals, pricing, ordering, receiving, group purchasing organization [GPO])
- 30K21 Resident trust accounts for personal funds

Domain 40 - Environment

40.01 - Ensure that physical environment policies and practices comply with applicable federal, state, and local laws and regulations.

This task requires the Administrator to create policies and procedures that follow federal and state laws, rules, and regulations, including those specific to NHA, RCAL or HCBS.

40.02 - Ensure the planning, development, implementation, monitoring, and evaluation of a safe and secure environment.

This task requires the Administrator to have policies and procedures in place that ensure the physical plant, systems, equipment, and resources are properly used and appropriate for the facility/organization. It is required that the Administrator understands, promotes, directs, and requires supervision to maintain all equipment and resources and continually validate the physical plant to include (but not limited to) the facility, grounds, equipment, tools, emergency systems, fire systems, sprinklers, etc.

40.03 - Ensure the planning, development, implementation, monitoring, and evaluation of infection control and sanitation.

This task requires the Administrator to have policies and procedures in place to effectively assure that infection control and sanitation are properly planned, implemented, and validated. This would include, but not limited to, training of personnel, assuring proper supplies and resources are available and effective communication through the facility/operation/agency of reporting violations and areas of concern.

40.04 - Ensure the planning, development, implementation, monitoring, and evaluation of emergency and disaster preparedness program, including linkage to outside emergency agencies.

This task requires the Administrator to have specific policies and procedures in place to assure that an effective disaster preparedness program is in place. It is extremely important that the plan includes regular training of staff related to fire drills, emergency shut off valves, fire evacuation routes, where to find flashlights, extension cords, emergency phone, etc. In addition, the plan needs to include regular testing of emergency systems such as sprinklers, fire alarm, systems, emergency generators, and all safety and emergency equipment. It requires having agreements made with outside vendors for equipment testing and maintenance, transportation in the event of an emergency, and transfer agreements with resources that can help provide care and service to relocate residents when necessary. In the event of relocation, provisions for moving resident charts, medications, blankets, food, and other items need to be planned and implemented.

40.05 - Ensure the planning, development, implementation, monitoring, and evaluation of environmental services, housekeeping, and laundry.

This task requires the Administrator to ensure that policies and procedures are in place to provide a comprehensive plan that assures all environmental, housekeeping, and laundry services department meet and/or exceed all local, state, and federal requirements. This task includes infection control, proper temperatures and temperature logs, proper use of chemicals and products used per Safety Data Sheets (SDS), preventative maintenance, systems to validate compliance, etc.

40.06 - Ensure the planning, development, implementation, monitoring, and evaluation of maintenance services for property, plant and all equipment, including preventative maintenance.

This task requires the Administrator to ensure that policies and procedures are in place to provide a comprehensive plan that assures all maintenance services meet or exceed all local, state, and federal requirements. This task includes infection control, proper temperatures and temperature logs, proper use of chemicals and products used per SDS, preventative maintenance, systems to validate compliance, etc.

40.07 - Ensure the planning, development, implementation, monitoring, and evaluation of appropriate HIPAA complaint technology infrastructure.

This task requires the Administrator to ensure HIPAA compliance by developing technology infrastructures, safeguards (e.g., backup systems, external data storage areas, preventative maintenance for computer hardware and software) and ongoing validation surveys.

40.08 – Establish, maintain, and monitor a physical environment that provides clean, safe, and secure home-like surroundings for care recipients, staff, and visitors.

This task requires the Administrator to ensure policies and procedures are in place to create a clean, home-like environment that supports the well-being and safety of all recipients. This task includes creating a resident-centered culture that promotes choice, comfort, and cleanliness.

40.09 – Identify opportunities to enhance the physical environment to meet changing market demands.

This task requires the Administrator to regularly maintain the physical environment of the facility/organization and to evaluate and monitor trends within the market or community to keep the facility/organization current. This task includes creating a chart or schedule for the normal life of equipment and furnishings, using qualified professionals to assess the interior/exterior design of facility/organization, and developing annual and capital budgets to prepare for predicted capital spending.

40.10 – Establish, maintain, and monitor an environment that promotes choice, comfort, and dignity for care recipients.

This task requires the Administrator to ensure policies and procedures are in place to create a clean, home-like environment that supports the well-being and safety of all recipients. This task includes creating a resident-centered culture that promotes choice, comfort, and cleanliness.

40.11 – Assess care recipients' environment for safety, security, and accessibility and make recommendations for referral or modification.

This task requires the Administrator to ensure that each recipient's personal environment and accessibility is individually evaluated and accommodations are made to provide the most independent, comfortable, and safe environment possible.

Knowledge Items related to Domain 40:

40K01 Federal, state and local standards, codes and regulations for building, equipment, maintenance, and grounds

40K02 Environmental principles that promote care recipient rights

40K03 HIPAA compliance

40K04 Community resources, programs and agencies available to meet the care recipients' home needs

40K05 Design principles that create a safe, secure, and home-like atmosphere based on the needs of the individuals served

40K06 Safety and security procedures

40K07 Physical plant security principles

40K08 Preventative and routine maintenance for building, grounds and equipment

40K09 Contracted services for mechanical, electrical, plumbing, laundry and IT systems

40K10 Compliance matters related to provision of contracted services

40K11 Infection control and sanitation regulations/standards of practice

40K12 Pest control programs

40K13 Handling and disposal of potentially hazardous materials

40K14 Disaster and emergency planning, preparedness, and recovery

40K15 Community resources available in the event of emergency or disaster

40K16 The use, storage, and inspection of required emergency equipment

40K17 Policies and procedures for housekeeping, maintenance, and laundry services

40K18 Technology infrastructure

Domain 50 – Management and Leadership

50.01 - Ensure compliance with applicable federal and state laws, rules, and regulations.

This task requires the Administrator to create policies and procedures that follow federal and states, laws, rules, and regulations, including those specific to NHA, RCAL or HCBS.

50.02- Promote ethical practice throughout the organization.

This task requires the Administrator to create policies and procedures to ensure that a system is in place to direct the facility/organization related to ethical topics/situations that arise. This task would include developing an ethics committee or the creation of an ad hoc ethics committee when necessary.

50.03 – Develop, implement, monitor, and evaluate policies and procedures that comply with directives of governing body.

This task requires the Administrator to know and understand the governing body and all directives, policies, and procedures. This task also requires the administrator to recommend changes or additions to policies and procedures and make recommendation to the governing board to change/add policies and procedures when necessary.

50.04 – Develop, communicate, and champion the service provider’s mission, vision, and values to stakeholders.

This task requires the Administrator to develop a process to train stakeholders to communicate the mission, vision, and value of the organization. This includes creating positive and effective ways to not only share the mission, vision, and values of the organization but to create an atmosphere of confidence and execution of the mission, vision, and values.

50.05 – Develop, implement, and evaluate the strategic plan with governing body’s endorsement.

This task requires the Administrator to develop a strategic plan that reflects the facility/organizational values, mission, and policies that will direct the facility/organization to conduct effective business practices with the endorsement of the governing body. The strategic plan must include how the plan will be implemented, validated, and evaluated in a timely manner.

50.06 – Promote and monitor satisfaction of the care recipient’s and their support networks.

This task requires the Administrator to develop a system to monitor resident satisfaction. This can be done by the Administrator being visible through onsite visits with residents and family. This can also be done with satisfaction surveys and mock inspections. The successful administrator will generally perform a combination of onsite visits, surveys, and daily interaction with staff in the form of a stand up meeting.

50.07 - Identify, foster, and maintain positive relationships with key stakeholders.

This task requires the Administrator to determine who key stakeholders are and develop a working relationship/understanding with each of them. This task includes creating an atmosphere of trust and understanding. This should be tempered with providing necessary information to work jointly on projects and systems that benefit the organization. At no time should the impression be given that any key stakeholder is asked to assist in leading the facility/organization.

50.08 – Educate stakeholders on services provided, regulatory requirements, and standards of care.

This task requires the Administrator to develop a strategy to provide instruction and resources to help the stakeholder to understand facility, state, and federal requirements. It is also important for stakeholders to understand facility protocols, standards, and services that are provided to meet residents needs and create a home like environment to ensure resident safety and choice are paramount.

50.09 – Solicit information from appropriate stakeholders for use in decision making.

This task requires the Administrator to set up protocols/standards of practice to use all available input from trusted resources to make effective, fair and timely decisions. The Administrator must have the ability to weigh the situation/circumstance and the time used to make decisions. While the Administrator is accountable for the

decisions he/she will make, it is important for the Administrator to know that sometimes a good decision is better than the best decision when time or the lives of others is a factor.

50.10 – Manage the service provider’s role throughout any survey/inspection process.

This task requires the Administrator to develop a protocol/practice to use for any unannounced survey or inspection. The protocol should include reporting the surveyors’/inspectors’ presence to all key management teams. In addition, the protocol/practice should include providing needed information to surveyors and inspectors, keeping copies of any documents the surveyor/inspector reviews (as known), cooperating with the inspection, being visible, supporting staff throughout the survey/inspection, responding quickly to surveyor/inspector requests, and fire marshal inspection. The Administrator should strive to be ready for a survey any day of the year by training his/her staff to do all that is right year round.

50.11 – Develop and implement an intervention(s) or risk management program(s) to minimize or eliminate exposure.

This task requires the Administrator to develop a risk management program that is designed to prevent problems before they occur. The program should start with the identification of key risk areas and a system or protocol to prevent them. This includes specific protocols to educate staff on reporting incidents, events or situations that occur timely, who to report to, and what steps to take to reduce liability. This program requires effective communication from the Administrator and her/his designees.

50.12 – Identify and respond to areas of potential legal liability.

This task requires the Administrator to create a plan that identifies, responds, and prevents any current or potential legal liability. This includes communicating with staff, residents, and responsible parties when issues arise and proactively responding to concerns before they become a liability. In addition, Administrators should have systems in place to ensure best practices are done and documentation occurs for any change of condition or abnormal action, event or activity. The plan should also clarify when legal representation is necessary and describe the process to retain an attorney.

50.13 – Implement, monitor, and evaluate information management and technology systems to support service providers operations.

This task requires the Administrator to meet all federal, state and community requirements for information management of health records, financial information and HIPAA. Safeguards to employee, patient, resident and client information must be in writing and show evidence of training/competency of all employees. In addition, the Administrator must ensure there is a process in place to protect access to information, secure and track passwords, and to back up and protect all data in the community servers. Attention must also be given to ensure all technology is designed to save employees time and allow more time for patient/resident/client care.

50.14 – Develop, implement, and monitor comprehensive sales, marketing, and public relations strategies.

This task requires the Administrator to develop an effective marketing strategy designed to help the consumer, resident or responsible party, and staff to know about the features, benefits, and amenities of the community/organization. The community/organization should have clear policies, standards, and protocols to build consumer confidence. The Administrator should also have clear policies and procedures on how to communicate emergency and disaster situations within and outside the community. The Administrator must also ensure that a marketing plan reflects and communicates what the community does/stands for/has achieved in the form of writing/action/advertisement/brochure/word of mouth.

50.15 – Ensure that written agreements between the care recipient and the service providers protect the rights and responsibilities of both parties.

This task requires the Administrator to assure that all written agreements reflect the services provided to the resident and meets federal and state guidelines. This may include having legal representatives review the written agreements on a regular basis to ensure they meet the most current regulations at the time and protect the facility/community/resident. In relation to a resident agreement/service plan/ admission/financial agreement/etc., it is always wise to have the agreements reviewed by an attorney. Service provider/vendor agreements should be carefully reviewed by the Administrator, a designated financial person and, when necessary, an attorney.

50.16 – Develop, implement, and evaluate the organization’s quality assurance and performance improvement programs.

This task requires the Administrator to develop an effective QAPI (Quality Assurance and Performance Improvement) program. This includes following CMS guidelines related to QAPI and establishing specific procedures, policies, and systems to perform an effective QAPI program. This also includes ensuring the program is designed to meet the ever-changing needs of the facility/organization.

50.17 – Lead organizational change initiatives.

This task requires the Administrator to demonstrate leadership by carefully assessing the facility needs, strategically developing effective methods to meet these needs, and then communicating the need for change(s) to the individuals affected. All changes should include providing clear and concise purposes related to the change and then to effectively train, validate, and celebrate those who participate in the change.

50.18 – Facilitate effective internal and external communication strategies.

This task requires the Administrator to develop methods of effective communication, internally and externally. The administrator must establish a hierarchy of individuals who communicate with each other via an organizational chart. The chart should be available to residents, families and staff so that it is clear who is responsible and has the authority to provide information. This includes creating clear and concise messages so that all staff are aware of how and what is to be communicated and when the need for assistance in communication is necessary. No employee should ever feel that the total weight of providing information rests on them. Training and strategies should include not only verbal and written communication but also electronic media such as Facebook, blogs, and Twitter.

50.19 – Promote professional development of all team members.

This task requires the Administrator to purposefully assess team members’ training and experience and to facilitate an environment that allows employees opportunities to grow professionally. This would include internal and external opportunities for employees motivated to develop themselves professionally.

Knowledge Items related to Domain 50:

- 50K1 Applicable federal and state laws, rules, regulations, agencies and programs
- 50K2 Code of ethics and standards of practice
- 50K3 Components and purpose of mission, vision and value statements
- 50K4 Stakeholder roles, responsibilities and limitations
- 50K5 Roles and responsibilities of owners and governing bodies
- 50K6 Services available along the healthcare continuum
- 50K7 Provider’s role along the healthcare continuum
- 50K8 Methods for assessing, monitoring and enhancing care recipient satisfaction
- 50K9 Provider’s certifications and licensing requirements
- 50K10 Regulatory survey and inspection processes, including the plan of correction process
- 50K11 Grievance procedures
- 50K12 Procedures for Informal Dispute Resolution (IDR)
- 50K13 Compliance programs
- 50K14 Reportable outcome measurements
- 50K15 Risk management principles and processes
- 50K16 Provider’s legal and criminal scope of liability
- 50K17 Internal investigation protocols and techniques
- 50K18 Strategic business planning
- 50K19 Management information systems
- 50K20 Technology to support operations
- 50K21 Sales and marketing techniques
- 50K22 Public relations, including media relations
- 50K23 Volunteer programs
- 50K24 Elements of contracts and agreements
- 50K25 Care recipient’s rights and responsibilities

50K26 Role of care recipient advocates and advocacy groups
50K27 Mandatory reporting requirements
50K28 Quality assurance and performance improvement techniques and models
50K29 Organizational change management
50K30 Organizational structures
50K31 Leadership and management principles and philosophies (such as planning, organizing, directing, delegating, motivating and evaluating)
50K32 Personality and leadership styles
50K33 Diversity awareness (such as culture, ethnicity, race, sexual orientation, gender, religion and language)
50K34 Workforce planning and education
50K35 HR management theory and principles
50K36 Governmental relations and advocacy
50K37 Functions of all departments and services

The Following are the Necessary Skills and relate to all domains:

S01 Creating and communicating a vision
S02 Communicating effectively
S03 Cultivating effective relationships
S04 Inspiring and motivating
S05 Demonstrating empathy
S06 Group facilitation, consensus building and team building
S07 Delegating, leading, and empowering
S08 Coaching, teaching, counseling and mentoring
S09 Negotiating, collaborating and resolving disputes
S10 Problem solving
S11 Analyzing and interpreting information/data
S12 Informed decision making/critical thinking
S13 Recognizing and ensuring care recipients' holistic needs are being met
S14 Assessing and recognizing safety concerns and needs
S15 Allocating and optimizing resources and programs
S16 Writing and evaluating policies and procedures
S17 Developing and evaluating systems
S18 Protecting and promoting financial viability
S19 Managing regulatory and accreditation surveys, inspections and audits
S20 Prioritizing and managing time
S21 Utilizing technology
S22 Utilizing social media

Enclosure #2

Unofficial excerpt from OAC 490 as relates to the Board's Rules governing Continuing Education requirements

OAC 490

Chapter 1

Subchapter 9

Continuing Education

Section

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

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 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 participated 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 unplanned changes to a program such as a scheduled speaker being unable to make a 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.
- (23) Licensed administrators who are “presenters” of approved CE programs may receive credit one time annually for the clock hour value of the class(es) they present. If the material is presented multiple times, credit is only awarded once per licensure year for the same educational material.
- (24) Licensed administrators who present in Administrators University (AU) or other Board approved entry level training such as RC, RCAL or Adult Day Care initial licensure training, will receive CE credit one time annually for the clock hour value of the material they present.

[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 (commonly referred to as CEUs or continuing education units) 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 administrators shall successfully complete sixteen (16) clock hours of continuing education during each licensing year.

(3) Licensed Adult Day Care Administrators shall 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 clock hour 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 CE 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 considered a reportable offense on the first offense and will appear as a violation in the Registry and NPDB.

(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 CE 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 CE 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; Amended at 31 Ok Reg 2128, eff 9-12-14]

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 CE 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 CE requirement. This percentage may be increased at the Board's discretion. If a license is not renewed by the last day of the current licensing year, an audit to verify compliance with the annual CE requirement shall be conducted prior to reinstatement of the license.

(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 clock hour not completed and completion of twice the number of clock hours not completed, due within 120 days. These clock hours cannot be applied to the current year's requirements. This is also a NPDB (National Practitioners 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 shall be informed in writing prior to the drafting of an order that they may request a formal hearing before the Board in lieu of the "standard" 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; Amended at 31 Ok Reg 2128, eff 9-12-14]*