

Approved \_\_\_\_\_

3-31-1987  
Date

MINUTES OF THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE

The meeting was called to order by Marvin L. Littlejohn at \_\_\_\_\_  
Chairperson

1:30 a.m./p.m. on March 26, 1987 in room 423-S of the Capitol.

All members were present except:

Representative Sader, excused

Committee staff present:

Emalene Correll, Research  
Bill Wolff, Research  
Norman Furse, Revisor  
Sue Hill, Committee Secretary

Conferees appearing before the committee:

Jerry Slaughter, Kansas Medical Society  
Lawrence Buening, General Counsel for Board of Healing Arts  
Don Strole, Ks. Academy of Physician's Assistants  
Harold Riehm, Kansas Association of Osteopathic Medicine  
Lois Scibetta, Ph.D., Executive Director, Kansas Board of Nursing  
Lu Ann Nauman, Kansas State Nurses Association  
Elizabeth Taylor, Kansas Federation of Licensed Practical Nurses  
Richard Funk, Kansas Association of School Boards  
Representative Jack Beauchamp  
Rita Wolf, Department of Health and Environment  
Dr. Lloyd Stone, Professional Counselors Task Force  
Don Strong, Kansas Rehabilitation Counselors Association  
Brook Collison, American Assn./Counselors and Development (Printed testimony only)  
Donna Kater, Executive Secretary/Ks.Association for Counseling/Development  
John Peterson, Ks. Association of Professional Psychologists  
Michael Byington, Masters Level Drama Therapists/Ks.Assn.Blind/Visually Handicapped

Chairman called meeting to order, and began hearings on Senate Bills.

Hearings began on Substitute for SB 35:

Jerry Slaughter, Kansas Medical Society, gave hand-out, see (Attachment No.1), for details. We believe Substitute to SB 35 with the outlined amendments proposed will clarify what has apparently long been a gray area of the law. If after the Board of Healing Arts has had an opportunity to draft rules and regulations on the issue of prescribing, and it is found that problems still exist, perhaps the legislature can address this issue again at a later date. He outlined the amendment proposed, saying they have worked cooperatively with the Physician's Assistants Groups. Detailed changes appear on lines 400,410, 415,423,428. HB 2166 was used as a vehicle for these amendemnts. There has now been a clear definition of "prescribe", which would for the first time provide an understanding for all groups concerned. He noted a key phrase on line 401, "A physician's assistant may not prescribe drugs, as defined in K.S.A. 65-1626 and amendments thereto, but may transmit a prescription order for drugs pursuant to a written protocol as authorized by the responsible physician". He answered questions, i.e., yes, we are working in the framework of compromise; ARPN's have their own statutes; he has not talked with Osteopathic Association.

Lawrence Buening, Board of Healing Arts spoke in support of Substitute for SB 35. Their Board is looking for guidance as they have a lot of unclear laws in regard to Physician's Assistants prescribing drugs. He answered questions, i.e., Our Board has begun to re-develop the renewal forms, so they can be processed over a wider span of time rather than all at once; yes, we agree with Mr. Slaughter's proposed amendment; if this does not go into effect until July 1, we could not be ready to go into an agreement on adjusting the funding that soon, but, we could move forward to adopt rules and regs to increase funding.

CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE,

room 423-S, Statehouse, at 1:30 /a.m./p.m. on March 26, 1987.

Hearings continue on Substitute for SB 35:

Don Strole, representing Kansas Academy of Physician's Assistants, spoke in support of the amendments proposed by Mr. Slaughter. When it was apparent there were differences between several groups, they came together to form a compromise. The word, "prescribe" has been viewed differently by some, and now this definition more clearly defines the term. We feel it is clear and support the amendment. He stated Mr. Gary McIntosh, a practicing Physician's Assistant was present and could answer questions if needed. No questions.

Harold Riehm, Kansas Association of Osteopathic Medicine stated their Association has been made aware of the proposed amendment and they are in agreement with it.

Hearings closed on Substitute for SB 35.

Hearings began on SB 302:

Dr. Lois Scibetta, Executive Director of State Board of Nursing, gave hand-out, (see Attachment No.2), for details. She highlighted proposed legislation in SB 302, i.e., will allow the Board to track "selected" nursing procedures which do not require specialized knowledge and judgments from the biological, physical and behavioral sciences, indicated in lines 0065-0070; and will further allow the Board to enter into contracts, as indicated in lines 0193-0194; and will further allow the Board to accept grant monies and a grant fund will be created. She answered questions, i.e., yes, we have been working closely with Department of Education; auxiliary patient care language in the bill does not, in their intent, exempt personnel in health care facilities. There was a lengthy discussion in regard to the definition of auxiliary patient services.

Lu Ann Nauman, Kansas State Nurses Association gave hand-out, see (Attachment No.3), for details. Their Association has been working with Health Services Medication Task Force subcommittee within the Department of Education attempting to address nursing services in schools. We have taken an active part in drafting amendments on SB 302, line 022, page 4. KSNA supports increased health services in the schools. The proposed amendments to the Nurse Practice Act will allow the Board of Nursing to adopt regulations related to registered nurses assessing and delegating in appropriate circumstances health services to be performed by unlicensed personnel. KSNA supports this legislation. She answered questions, i.e., this will allow a person not licensed to assist in hearing, vision, and dental checks; to have a nurse in each school building would be ideal, but of course in rural areas that cannot be the case; some of this care would allow some children to remain in school.

Elizabeth Taylor, Kansas Federation of Licensed Practical Nurses, states the reasoning behind SB 302 is good, but they have concerns, i.e., setting a precedent in making exemptions in licensed professions. Logistics and budgets restrict having nursing personnel available in all schools, and it is our concern this will spread to other areas where budgets are strained there as well. We did bring this concern to the Senate Committee on SB 302, and language was added in line 123-126 to allow rules and regulations to be specified by the Board. We think this will take care of the matter, but--. She answered questions, i.e., no, I dont think the intent is to replace licensed personnel with unlicensed, but it may start a precedent.

Richard Funk, Kansas Association of School Boards, gave hand-out, (see Attachment No.4) for details. He approves this legislation. There are not registered nurses in every school building, and since school personnel is not allowed to give students prescriptions they bring from home, and the nurses cannot instruct someone else to administer, this legislation offers a compromise that would allow a nurse to then instruct someone to do these services. He urged for support of SB 302. He answered questions in regard to the liability issues connected with this situation.

Hearings closed on SB 302.

CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE,  
room 423-S, Statehouse, at 1:30 /// a.m./p.m. on March 26, 1987.

Hearings began on SB 36.

Rep. Jack Beachamp gave hand-out, (see Attachment No.5) for details. Early in Session, he had requested and drafted HB 2255 on request of District Court Administrator in his district. Consequently the problem of malpractice insurance coverage requirements for inactive physicians serving as coroners was alleviated. He then learned the problem was being addressed in SB 36, however the problems are not fully addressed in SB 36, so he has proposed an amendment (Attachment No.5). This amendment allows inactive physicians serving as coroners to be covered under the Kansas Tort Claims Act.

Lawrence Buening, State Board of Healing Arts, stated this is the result from Interim Study. This will allow a semi-retired, or retired physician to work as coroner and be covered by insurance.

Harold Riehm, Kansas Association of Osteopathic Medicine, spoke to SB 36. He does have questions, however their Association is in support of it. This will enable many physicians who are no longer active full time to be of limited services. He did have questions in regard to, if a physician is classified as exempt, does that preclude that physician from also being classified as inactive. If this is the case, then their Association would have questions about detailed insurance covered for an inactive physician. He answered questions.

Jerry Slaughter, Kansas Medical Society, gave hand-out, see (Attachment No.6), for details. Legislation proposed in SB 36 is an excellent solution to the problem faced by many physicians who would like to remain productive in certain limited activities, but are unable to do so because of the malpractice laws. We urge for favorable consideration with the amendment proposed, i.e., the bill should take effect upon publication in the Kansas Register, rather than July 1, so some physicians could actually apply for and possibly receive an exempt license during this renewal period. He answered questions, i.e., this puts the physician back in the world with others who have to purchase insurance, rather than have to purchase mal-practice insurance at terribly excessive premiums; no this legislation does not take anyone out who is currently licensed; a physician is still liable for their acts, even though they may give services free.

Hearings closed on SB 36.

Hearings began on SB 78:

Rita Wolf, Department of Health and Environment, gave hand-out, (see Attachment No.7), for details. Former Secretary Sabol had recommended registration be the appropriate level of credentialing of professional counselors since the public can be protected by identifying practitioners who are qualified through specific education/training to provide counseling service, however new Secretary Jack Walker recommends that licensure be the appropriate level of credentialing of professional counselors since more than just identification of practitioners who are qualified is needed to protect the public. Restriction of who can provide counseling services that have the same orientation as professional counselors is required. Their Department supports SB 78 as amended, which provides for registration of professional counselors by State Behavioral Sciences Regulatory Board.

Dr. Lloyd Stone, Ph.D., Kansas professional Counselor Licensure Task Force, gave hand-out, see (Attachment No.8), for details. Primary need for SB 78 is that under present law, anyone, regardless of education and/or experience can legally engage in private practice counseling and call themselves a professional counselor. While SB 78 would not prohibit the private practice of counseling by non-prepared persons, it would make it incumbent upon individuals who wish to use the title "Registered Professional Counselor", or "Professional Counselor" to meet criteria described in the bill. While Licensure would offer more protection for the public, registration of private practice professional counselors will be a step in the right direction. The bill contains a six month grand-parenting clause. Senate amended the original bill, making it read registration, rather than licensure. We are supportive of registration as defined in SB 78. If the bill is not passed, we are concerned, he said, that those persons in bordering states who are ineligible to be credentialed in those states may move across the line to practice in Kansas. He urged for support.

CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE,  
room 423-S, Statehouse, at 1:30 a.m./p.m. on March 26, 1987.

Hearings continue on SB 78.

Don E. strong, President-elect of Ks. Rehabilitation Counseling Association gave hand-out, see (Attachment No.9), for details. We feel, he said, it is important for our position on the Kansas Professional Counselor Registration Bill be stated in order to avoid any confusion that may have been created by other statements concerning our organization's view on registration. Registration of Counselors is a major step towards establishing counseling as a profession to be trusted and depended upon by citizens of Kansas. We plan to continue working with other counseling professionals to resolve any differences over criteria in the registration bill to continue to build positive aspects of registration.

Brooke Collison, American Association for Counseling/Development, was unable to give testimony personally, so sent hand-out, see (Attachment No.10), for details.

Donna Kater, Counselor in practice in Wichita, gave hand-out, see (Attachment No.11), for details. The purpose of professional regulation is to ensure the protection of the public. SB 78 will provide some protection by identifying those persons who meet minimum standards of preparation. There are three major ways however, the public remains at risk, i.e., there is no regulation of practice; there is a shortage of mental health services provided by qualified professionals in rural area; encouraging private practice of more qualified mental health providers would protect the public from increasingly higher costs of mental health services. Despite these concerns, she said, their Association supports SB 78. She answered questions, i.e., no we are not going to grandparent all, but those who have minimum qualifications, and if they are registered, are incompetent, or do something unethical, there are measures to handle these problems.

John Peterson, Ks. Association of Professional Psychologists, spoke to SB 78. A great deal of work has gone into this bill and a lot of agreements have been made, and their Association is now in support, he said.

Jerry Slaughter will submit a letter to members in regard to the stand that Kansas Medical Society takes on SB 78.

Elizabeth Taylor, Alcohol and Drug Counselors spoke in opposition to SB 78. They do support the concept of licensing counselors, but are concerned with the term "professional counselors". We think, she said, there should be specifics to outline different scopes of practice. They would prefer terms, i.e., Registered Developmental Counselor, Registered Career Counselor, Registered Educational Counselor, Registered Mental Health Counselor. She answered questions in regard to educational requirements.

Michael Byington, Masters level REgistered Drama Therapist, gave hand-out, see (Attachment No.12), for details. He was in favor of the licensure bill being changed to registration bill, and now is supportive of SB 78. To license counselors would be inconsistent with the Kansas Credentialing Act which this legislature adopted earlier. There are many groups who want to be excluded, so there was not much left to the cocncept of counselor licensure, this registration is clearly the better answer he said.

Hearings closed on sB 78.

Rep. Buehler moved to approve minutes to date, motion seconded by Rep. Cribbs, motion carried.

Meeting adjourned.

GUEST REGISTER

HOUSE

PUBLIC HEALTH AND WELFARE COMMITTEE

Date 3-26-87

NAME	ORGANIZATION	ADDRESS
Elizabeth C. Taylor	KADACA, KFCPN	Topeka
Dr. Luis Schetta	KS BA	900 S.W. Jackson
JERRY SHAWITTEN	Hill	TOPEKA
Dr. Judd Straub	KS Assn. of Phys Assts	Lawrence
Jan Medley	KAPPA	Topeka
Alvin Rice	KBA	Topeka
Ray Hove	SOS / AAS	Topeka
Ed Galloway	KACD	Pittsburg
Ruth Hitchcock	KACD	Wichita
Pat Grimwood	KACD	Salina
Don Strong	K.R.C.A.	Wichita
Lloyd A. Stone	KACES	EMPORIA
Dorina Kater	KACD	Wichita
Richard Funk	KAIB	Topeka
Jack Bunker	Leg	TOPEKA
Dianne Darrett	intern	Emporia
Lou Ann Nauman	Kansas State Nurses Assoc.	Topeka
Ann G. Paden	TCGC #11	"
Jay Hawkes	Ks. Opt. Assoc.	O.P.
Cary Robbins	Ks Opt. Assn	Topeka
KEITH R LANDIS	CHRISTIAN SCIENCE COMMITTEE ON PUBLICATION FOR KANSAS	"
HAROLD RIEHM	Ks Assn Osteopathic Med	"
Jacquie Oakes	Ks. Assn. Counseling & Dev.	Topeka
Nileen Stephens	Kp. Assn. Couns. & Dev.	Topeka
Belva Ott	Planned Parenthood of Ks.	Wichita
Rita Wolf	KDHE	Topeka



# KANSAS MEDICAL SOCIETY

1300 Topeka Avenue · Topeka, Kansas 66612 · (913) 235-2383

March 26, 1987

TO: House Public Health and Welfare Subcommittee  
FROM: Jerry Slaughter *Jerry Slaughter*  
Executive Director  
SUBJECT: Substitute for SB 35

We appreciate the opportunity to offer a few comments on Substitute for SB 35. Specifically, we would like to address the issue of supervision of physician assistants' and prescription authority, a subject which was dealt with in part by the Senate committee.

Late last year the Attorney General rendered an opinion (August 27, 1986) which basically said that physician assistants could issue drug prescriptions. Current law allows physicians to delegate "acts which constitute the practice of medicine and surgery" to physician assistants, and since prescribing is clearly a part of the practice of medicine, the Attorney General reasoned that PAs could prescribe. We do not dispute his literal interpretation of the law.

However, we do not believe the legislature ever intended PAs to prescribe drugs, and the legislative history is unclear and confusing on this point. The overwhelming majority of physicians have believed that PAs were not authorized to prescribe since enactment of their registration laws, and the Attorney General opinion has opened this issue for debate. If nothing is done, PAs will prescribe drugs, a practice we are opposed to. A copy of our position paper adopted unanimously by our Council on February 7, 1987, is enclosed.

The Senate Public Health and Welfare Committee recognized that the Attorney General's Opinion would substantially alter the way in which PAs are utilized as it relates to prescribing drugs. Section 7 of the bill is language adopted by the committee which basically attempts to provide some direction to the Board of Healing Arts to draft appropriate rules and regulations limiting and regulating the prescribing of drugs by PAs. We are generally supportive of the direction taken by the Senate committee, but feel additional clarification is necessary to maintain quality patient care and help create a common understanding of what is appropriate and what is not among affected health professionals.

*PHW  
Attm #1  
3-26-87*

To that end, we have met with the various interested parties in an attempt to find common ground which both protects the public and provides for diverse practice arrangements. We found early on that one of the principal problems with this whole area was the fact that the word "prescribe" is not defined in either the Healing Arts Act or the Pharmacy Act. Consequently, a definition of "prescribe" was developed and has been offered as an amendment to the Pharmacy Act using HB 2166 as a convenient vehicle. The bill is currently awaiting action by the Senate Public Health and Welfare Committee, and a copy of the proposed amendment is attached to this testimony. The definition makes the important distinction between the independent act of prescribing by virtue of one's license, and the act of transmitting or carrying out a prescription order pursuant to the direction of a physician. This is a distinction which has existed in common practice over the years, and it covers situations in which PAs work according to standing orders and written protocols.

It is our long standing belief that prescribing is a distinct act which implies independent judgment, and specific statutory authority to do so. The PAs have told us emphatically that they do not want to independently prescribe, but that they only want to continue to work under written protocols which call for the carrying out or transmitting of a physician's prescription order.

Consequently, we have reached tentative agreement on an amendment to Substitute for SB 35 which specifies that PAs may not prescribe, but that they may transmit prescription orders according to written protocols. A balloon draft of the suggested amendments is attached to this testimony.

With the language at (b) in Section 7 added by the Senate committee, the Board of Healing Arts now has the authority and responsibility to draft rules and regulations which further clarify and delineate the appropriate use of written protocols in various practice settings. These amendments should provide the basis for reasonable regulations governing this aspect of the supervisory relationship between physicians and PAs as it relates to the prescribing of drugs.

There is one other amendment which we would like to suggest. The bill currently takes effect July 1 upon publication in the statute book, but we would recommend that Section 10 be amended to have the bill take effect upon publication in the Kansas Register. We are recommending this principally so that the annual renewal fee for a license may be increased immediately as specified in Section 4, line 271. The fees are being increased to help fund the Board's responsibilities in carrying out its impaired physician responsibility as specified in 1986 HB 2661.

We support Substitute to SB 35 with the amendments outlined above, because we believe it will substantially clarify what has apparently long been a gray area of the law. If after the Board of Healing Arts has had an opportunity to draft rules and regulations on the issue of prescribing, and it is found that problems still exist, the legislature can address this issue again at a later date.

We appreciate the opportunity to appear today, and would be happy to respond to any questions. Thank you.

0380 rules and regulations shall establish the requirements for such  
0381 program of continuing education as soon as possible after the  
0382 effective date of this act. In establishing such requirements the  
0383 state board of healing arts shall consider any existing programs of  
0384 continuing education currently being offered to physicians' as-  
0385 sistants.

0386 (d) A person whose name has been entered on the register of  
0387 physicians' assistants prior to the effective date of this act shall  
0388 not be subject to the provisions of subsection (a) of this section,  
0389 unless such person's name has been removed from the register of  
0390 physicians' assistants pursuant to the provisions of K.S.A. 65-  
0391 2896b and amendments thereto.

0392 Sec. 7. K.S.A. 65-2896e is hereby amended to read as fol-  
0393 lows: 65-2896e. (a) A person whose name has been entered on  
0394 the register of physicians' assistants may perform, only under the  
0395 direction and supervision of a physician, acts which constitute  
0396 the practice of medicine and surgery to the extent and in the  
0397 manner authorized by the physician responsible for the physi-  
0398 cian's assistant and only to the extent such acts are consistent  
0399 with rules and regulations adopted by the board which relate to  
0400 acts performed by a physician's assistant under the responsible

0401 physician's direction and supervision/ Before a physician's as-  
0402 sistant shall perform under the direction and supervision of a  
0403 physician, such physician's assistant shall be identified to the  
0404 patient and others involved in providing the patient services as a  
0405 physician's assistant to the responsible physician. A physician's  
0406 assistant may not perform any act or procedure performed in the  
0407 practice of optometry except as provided in K.S.A. 65-1508 and  
0408 65-2887 and amendments thereto.

0409 (b) The board shall adopt rules and regulations governing  
0410 the ~~prescribing of drugs~~ by physicians' assistants and the re-  
0411 sponsibilities of the responsible physician with respect thereto.  
0412 Such rules and regulations shall establish such conditions and  
0413 limitations on such ~~prescribing of drugs~~ as the board determines  
0414 to be necessary to protect the public health and safety. In  
0415 developing rules and regulations relating to the ~~prescribing of~~  
0416 ~~drugs~~ by physicians' assistants, the board shall take into con-

A physician's assistant may not prescribe drugs, as defined in K.S.A. 65-1626 and amendments thereto, but may transmit a prescription order for drugs pursuant to a written protocol as authorized by the responsible physician.

transmitting of prescription orders for drugs

transmitting of prescription orders for drugs



0417 sideration the amount of training and capabilities of physicians'  
 0418 assistants, the different practice settings in which physicians'  
 0419 assistants and responsible physicians practice, the degree of  
 0420 direction and supervision to be provided by a responsible phy-  
 0421 sician and the needs of the geographic area of the state in which  
 0422 the physician's assistant and the responsible physician practice.  
 0423 In all cases in which a physician's assistant is authorized to  
 0424 ~~prescribe drugs~~ by a responsible physician, a written protocol  
 0425 between the responsible physician and the physician's assistant  
 0426 containing the essential terms of such authorization, shall be in  
 0427 effect. In no case shall the scope of the authority of the physi-  
 0428 cian's assistant to ~~prescribe drugs~~ exceed the normal and cus-  
 0429 tomary practice of the responsible physician in the prescribing  
 0430 of drugs.

transmit prescription orders for drugs

transmit prescription orders for drugs

0431 Sec. 8. K.S.A. 65-2897a is hereby amended to read as fol-  
 0432 lows: 65-2897a. The following words and phrases when used in  
 0433 this act shall for the purpose of this act have the meanings  
 0434 respectively ascribed to them in this section:

0435 (a) "Direction and supervision" means the guidance, direc-  
 0436 tion and coordination of activities of a physician's assistant by his  
 0437 or her such person's responsible physician, whether written or  
 0438 verbal, whether immediate or by prior arrangement, and in  
 0439 accordance with standards established by the board by rules  
 0440 and regulations, which standards shall be designed to ensure  
 0441 adequate direction and supervision by the responsible physician  
 0442 of the physician's assistant. The term "direction and supervi-  
 0443 sion" shall not be construed to mean that the immediate or  
 0444 physical presence of the responsible physician is required dur-  
 0445 ing the performance of the physician's assistant.

0446 (b) "Physician" means any person licensed by the state board  
 0447 of healing arts to practice medicine and surgery.

0448 (c) "Physician's assistant" means a skilled person who is  
 0449 registered in accordance with the provisions of K.S.A. 65-2896a  
 0450 and amendments thereto and who is qualified by academic  
 0451 training to provide patient services under the direction and  
 0452 supervision of a physician who is responsible for the perform-  
 0453 ance of that assistant.

0157 *licensure as a pharmacist.*

0158 ~~(u)~~ (v) "Prescription" means, according to the context, either  
 0159 a prescription order or a prescription medication.

0160 ~~(w)~~ (w) "Prescription medication" means any drug, including  
 0161 label and container according to context, which is dispensed  
 0162 pursuant to a prescription order.

0163 ~~(x)~~ (x) "Prescription-only drug" means any drug required by  
 0164 the federal or state food, drug and cosmetic act to bear on its label  
 0165 the legend "Caution: Federal law prohibits dispensing without  
 0166 prescription."

0167 ~~(y)~~ (y) "Prescription order" means: (1) An order to be filled  
 0168 by a pharmacist for prescription medication issued and signed by  
 0169 a practitioner in the authorized course of professional practice, or  
 0170 (2) an order transmitted to a pharmacist through word of mouth,  
 0171 note, telephone or other means of communication directed by  
 0172 such practitioner.

0173 ~~(z)~~ (z) "Probation" means the practice or operation under a  
 0174 temporary license, registration or permit or a conditional license,  
 0175 registration or permit of a business or profession for which a  
 0176 license, registration or permit is granted by the board under the  
 0177 provisions of the pharmacy act of the state of Kansas requiring  
 0178 certain actions to be accomplished or certain actions not to occur  
 0179 before a regular license, registration or permit is issued.

0180 ~~(aa)~~ (aa) "Retail dealer" means a person selling at retail non-  
 0181 prescription drugs which are prepackaged, fully prepared by the  
 0182 manufacturer or distributor for use by the consumer and labeled  
 0183 in accordance with the requirements of the state and federal  
 0184 food, drug and cosmetic acts. Such nonprescription drugs shall  
 0185 not include: (1) A controlled substance; (2) a drug the label of  
 0186 which is required to bear substantially the statement "Caution:  
 0187 Federal law prohibits dispensing without prescription"; or (3) a  
 0188 drug intended for human use by hypodermic injection.

0189 ~~(bb)~~ (bb) "Secretary" means the executive secretary of the  
 0190 board.

0191 ~~(cc)~~ (cc) "Unprofessional conduct" means:

- 0192 (1) Fraud in securing a registration or permit;  
 0193 (2) intentional adulteration or mislabeling of any drug, med-

(v) "Prescribe" means an independent order by a practitioner authorizing the dispensing of a prescription-only drug, but does not include the act of transmitting a prescription order pursuant to the direction or order of a practitioner.



# KANSAS STATE BOARD OF NURSING

900 SW Jackson, Suite 551-S  
TOPEKA, KANSAS 66601

Telephone 913/296-4929

TO: The Honorable Marvin Littlejohn, Chairman and  
Members of the House Public Health & Welfare Committee

FROM: Dr. Lois Rich Scibetta, Executive Administrator

DATE: March 26, 1987

RE: Senate Bill 302

Thank you Mr. Chairman for the opportunity to respond to SB 302.

What you have before you are changes in the Nurse Practice Act, recommended by the Practice Act Committee of the Board, and our legal counsel.

Most of the changes requested are related to language, and clean-up type material. There are however, some changes in lines 0047-0050 and 0065-0070. These sections refer to procedures in the public schools. It would allow the Board nurse licensees to track "selected" nursing procedures which do not require specialized knowledge and judgments from the biological, physical and behavioral sciences. The Kansas Nurse Practice Act and the Board of Education have supported these changes.

An additional change recommended by our legal counsel will enable the Board to enter into contracts (lines 0193-0194).

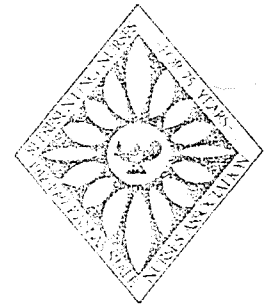
Another section will enable the Board to accept grant monies and will create a grant fund. This section will enable the Board to apply for and receive monies for research. It will allow the Board to initiate appropriate studies related to licensure. These monies might be used to assist in the purchase of equipment.

Thank you for your consideration. The Board of Nursing recommends that SB 302 be reported out favorably for passage.

I will be happy to respond to any questions.

LRS:vmd

PH aW  
atm #2  
3-26-87



For More Information Contact:

Terri Rosselot, J.D., R.N.  
Executive Director  
(913 233-8638)

## SB 302: Nurse Practice Act

Chairmen Littlejohn and members of the House Public Health and Welfare Committee, my name is LuAnn Nauman, R.N., M.S.Ed, and I am registered nurse representing the Kansas State Nurses' Association. I am currently employed by the USD #501 School District in Topeka and am responsible for the provision and supervision of health services in that school district. I have been a school nurse for 18 years and currently serve as the Vice-President of the American School Health Association. In June of 1986 the American Nurses' Association adopted a resolution that encourages state nurses' associations to pursue legislative activities which clarify the role of the school nurse in providing health care services. In 1983 the American Nurses' Association adopted Standards of School Nursing Practice.

In the spirit of that resolution and to uphold the ANA Standards of School Nursing Practice, the Kansas State Nurses' Association has been working with the Health Services Medication Task Force subcommittee within the Kansas Department of Education attempting to address nursing services in the schools. KSNA has actively participated in drafting the amendments beginning on line 0122 Page 4 of S.B. 302. This language and proposed regulatory language for K.S.A. 65-1124 new (k) and (l) is a compromise between the following groups concerned about health services in the school districts: Kansas State Board of Nursing, Kansas State Nurses' Association, Kansas School Nurse Organization, Kansas Association of School Boards, Kansas Department of Education-special education and health services divisions, United School Administrators, and the Kansas Department of Health and Environment-School Nurse Consultant.

PAW #  
attm 3  
3-26-87

SB 302 Testimony  
March 26, 1987  
House Public Health and Welfare Committee

## BACKGROUND

Congress enacted Public Law 94-142, the Education of Handicapped Children Act in November, 1975. This law seeks to guarantee the availability of a free appropriate education for all handicapped students in the least restrictive environment. In order for many of these children to derive optimal benefits from this educational opportunity, special assistance and certain support services are necessary. Consequently, the rules and regulations for P.L. 94-142 specify a number of services which must be available in conjunction with educational programs for handicapped youth: transportation, recreation, counseling, speech pathology, audiology, and psychological services. In addition, provision must be made for early identification and assessment of disabilities including medical services for diagnostic or evaluative purposes. School health services from nurses and other qualified personnel, social work services, and parent counseling and training are also authorized in the rules and regulations as further types of special assistance which must be available for handicapped students.

## CURRENT KANSAS PROFILE AND CONCERNS

There are four areas of screening that are currently mandated in Kansas in the educational setting: Hearing, Vision, Immunizations and Dental.

In the spring of 1986 there was a Board of Nursing Practice Committee meeting where issues related to nursing in the educational setting were discussed. Several nurses around the state had questions regarding medication guidelines and the provision of nursing services without the appropriate manpower in the school setting. The Board of Nursing responded with a letter to Harold Blackburn of the Kansas Department of Education indicating the need to discuss the delivery of nursing services in the education setting by qualified personnel. Dr. Harold Blackburn response is Attachment #1.

A Health Services Medication Task Force was set up to address the issues identified by the Board of Nursing and school nurses. Reviewing other states activities and identification of issues in Kansas were the initial major focus. Statutory and regulatory revisions of the nurse practice act and accreditation requirements for schools providing health services are two of the items agreed upon by the Task Force to address the many issues surrounding health services in the educational setting.

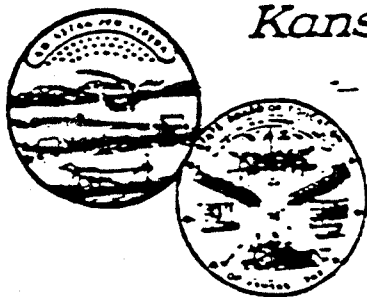
S.B. 302 Testimony  
March 26, 1987  
House Public Health and Welfare Committee

#### LEGISLATIVE RECOMMENDATIONS

KSNA supports increased health services in the schools, health prevention through education for a healthier society. Optimunly, KSNA supports the employment of School Nurses by each school district to provide such services. Recognizing financial restraints and the geography of school districts in Kansas, the presence of a school nurse is not always feasible.

The proposed amendments to the Nurse Practice Act will allow the Board of Nursing to adopt regulations related to registered nurses assessing and delegating in appropriate circumstances health services to be performed by unlicensed personnel. KSNA will support that such delegation will require an initial assessment and ongoing supervision by a licensed health professional to assure that the health services are being delivered in a safe and competent fashion.

Thank you.



# Kansas State Department of Education

Kansas State Education Building

120 East 10th Street Topeka, Kansas 66612-1103

August 29, 1986

Dr. Lois Rich Scibetta  
Executive Administrator  
Kansas State Board of Nursing  
Box 1098  
503 Kansas Avenue, Suite 330  
Topeka, KS 66601

Dear Dr. Scibetta:

Thank you for your letter of August 11, 1986. I appreciate being alerted to the concerns of the Kansas State Board of Nursing. I have similar concerns and interest in the issues that are generally described in your letter. You indicated that the Board of Nursing would like responses to three questions. I am responding as follows:

- (1) **Is the State Department of Education prepared to communicate the concerns of the Board of Nursing to Kansas public schools and certified school nurses?**

Yes. The letter will be discussed at the Council of Superintendents meetings. The Council of Superintendents is a group of about 40 administrators who meet monthly at the Kansas State Department of Education and then go back to their various regions within the state for discussion of pertinent issues. In addition, the letter will be discussed with representatives of United School Administrators and the Kansas Association of School Boards. The appropriate school nurses association leadership also will be advised.

- (2) **Can the State Board of Education provide any assurance to the Board of Nursing that Kansas public schools will avoid or cease unlawful delivery of nursing services?**

Since the public schools are under the control of locally-elected boards of education, the State Board is not at liberty to provide such a sweeping assurance as is proposed in your letter. However, I am sure the State Board of Education will start to work promptly and diligently to identify suitable options to eliminate the concerns in this area.

- (3) **Will the State Department of Education take steps to organize a forum for study of the issues, with an objective to recommend a long term solution for this continuing problem?**

Yes. Meetings to identify the issues and suggest alternative solutions will be scheduled. I am confident these meetings will identify options that can be implemented to solve the problems in this area.

Your letter and my response are being forwarded to the State Board of Education members for their information. Thank you for writing.

Sincerely,

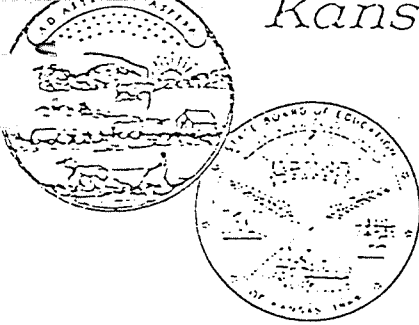
Harold Blackburn  
Commissioner of Education

# Kansas State Department of Education

Kansas State Education Building

120 East 10th Street Topeka, Kansas 66612

Office of the Commissioner



August 29, 1986

Dr. Lois Rich Scibetta  
Executive Administrator  
Kansas State Board of Nursing  
Box 1098  
503 Kansas Avenue, Suite 330  
Topeka, KS 66601

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- (3) Will the State Department of Education take steps to organize a forum for study of the issues, with an objective to recommend a long term solution for this continuing problem?

Yes. Meetings to identify the issues and suggest alternative solutions will be scheduled. I am confident these meetings will identify options that can be implemented to solve the problems in this area.

RECEIVED  
AUG 29 1986



Page 2...  
Dr. Scibetta  
August 29, 1986

Your letter and my response are being forwarded to the State Board of Education members for their information. Thank you for writing.

Sincerely,

A handwritten signature in cursive script, appearing to read "Harold Blackburn".

Harold Blackburn  
Commissioner of Education

rr

KANSAS  
ASSOCIATION



OF  
SCHOOL  
BOARDS



5401 S. W. 7th Avenue Topeka, Kansas 66606  
913-273-3600

TESTIMONY ON S.B. 302  
House Public Health and Welfare

by

Richard Funk, Assistant Executive Director  
Kansas Association of School Boards

March 26, 1987

Mr. Chairman and members of the committee, we appreciate the opportunity to testify today on behalf of the 303 members of the Kansas Association of School Boards. KASB supports the provisions found in S.B. 302. We believe the amendments to the Nurse's Practices Act go a long way to help solve some problems that have arisen in recent years between the practical operations of the schools and the responsibilities of school nurses.

We would ask you to report S.B. 302 favorably for passage. Thank you for your consideration.

PH  
3-26-87  
atm #4

STATE OF KANSAS

JACK E. BEAUCHAMP  
REPRESENTATIVE, FOURTEENTH DISTRICT  
FRANKLIN COUNTY  
ROUTE 3, BOX 61  
OTTAWA, KANSAS 66067  
(913) 242-3540  
STATE CAPITOL, ROOM 174-W  
(913) 296-7676



TOPEKA

HOUSE OF  
REPRESENTATIVES

March 26, 1987

COMMITTEE ASSIGNMENTS

MEMBER: AGRICULTURE AND SMALL BUSINESS  
INSURANCE  
LOCAL GOVERNMENT

Mr. Chairman and Members of the Public Health & Welfare Committee:

Early in the Session, I requested and had drafted HB 2255 on request of District Court Administrator in my district. Consequently, the problem of malpractice insurance coverage requirements for inactive physicians serving as coroners was alleviated. However, after hearings in Insurance Committee, we were informed the problem was being covered in SB 36. I was informed of this after the House of origin bill deadline was passed.

I have since been informed the problems are not fully addressed in SB 36 as it is before you, thus, my reason for appearing before you and offering an amendment.

This amendment allows inactive physicians serving as coroners to be covered under the Kansas Tort Claims Act. To this point, the cost of malpractice insurance for physicians serving as coroners has exceeded the service fees received for services performed.

Representative Jack Beauchamp

*PH&W  
3-26-87  
attn #5*

SENATE BILL No. 36

By Special Committee on Ways and Means

Re Proposal No. 40

12-16

0015 AN ACT concerning the health care provider insurance availa-  
0016 bility act; ~~excluding~~ certain persons licensed to practice the \_\_\_\_\_ relating to professional liability insurance coverage thereof;  
0020 healing arts; ~~creating the designation of exempt license; ex-~~  
0021 ~~cluding persons holding an exempt license from the definition~~  
0022 ~~of health care provider under the health care provider insur-~~  
0023 ~~ance availability act; amending K.S.A. 40-3401 and 65-2852~~ \_\_\_\_\_, 65-2852 and 75-6115  
0024 and K.S.A. 1986 Supp. 65-2809 and repealing the existing  
0025 section sections.

0026 Be it enacted by the Legislature of the State of Kansas:

0027 Section 1. K.S.A. 40-3401 is hereby amended to read as fol-  
0028 lows. 40-3401. As used in this act the following terms shall have  
0029 the meanings respectively ascribed to them herein.

0030 (a) "Applicant" means any health care provider.

0031 (b) "Basic coverage" means a policy of professional liability  
0032 insurance required to be maintained by each health care pro-  
0033 vider pursuant to the provisions of subsection (a) or (b) of K.S.A.  
0034 40-3402 and amendments thereto.

0035 (c) "Commissioner" means the commissioner of insurance.

0036 (d) "Fiscal year" means the year commencing on the effec-  
0037 tive date of this act and each year, commencing on the first day of  
0038 that month, thereafter.

0039 (e) "Fund" means the health care stabilization fund estab-  
0040 lished pursuant to subsection (a) of K.S.A. 40-3403 and amend-  
0041 ments thereto.

0042 (f) "Health care provider" means a person licensed to prac-  
0043 tice any branch of the healing arts by the state board of healing  
0044 arts, a person who holds a temporary permit to practice any  
0045 branch of the healing arts issued by the state board of healing

0100 provider insurance availability act, also includes any director,  
0101 trustee, officer or administrator of a mental health center.

0122 (o) "Mental health clinic" means a mental health clinic li-  
0123 censed by the secretary of social and rehabilitation services  
0124 under K.S.A. 75-3307b and amendments thereto, except that as  
0125 used in the health care provider insurance availability act such  
0126 term, as it relates to insurance coverage under the health care  
0127 provider insurance availability act, also includes any director,  
0128 trustee, officer or administrator of a mental health clinic.

0129 (p) "State institution for the mentally retarded" means Nor-  
0130 ton state hospital, Winfield state hospital and training center,  
0131 Parsons state hospital and training center and the Kansas neuro-  
0132 logical institute.

0133 (q) "State psychiatric hospital" means Larned state hospital,  
0134 Osawatomie state hospital, Rainbow mental health facility and  
0135 Topeka state hospital.

0136 (r) "Person engaged in residency training" means a person  
0137 engaged in a postgraduate training program approved by the  
0138 state board of healing arts who is employed by and is studying at  
0139 the university of Kansas medical center only when such person is  
0140 engaged in medical activities which do not include extracurri-  
0141 cular, extra-institutional medical service for which such person  
0142 receives extra compensation and which have not been approved  
0143 by the dean of the school of medicine and the executive vice-  
0144 chancellor of the university of Kansas medical center.

0145 *Sec. 2. K.S.A. 1986 Supp. 65-2809 is hereby amended to read*  
0146 *as follows: 65-2809. (a) The license shall expire on June 30 each*  
0147 *year and may be renewed annually upon request of the licensee.*  
0148 *The request for renewal shall be on a form provided by the*  
0149 *board and shall be accompanied by the prescribed fee, which*  
0150 *shall be paid not later than the expiration date of the license.*  
0151 *(b) Except as otherwise provided in this section, the board*  
0152 *shall require every licensee in the active practice of the healing*  
0153 *arts within the state to submit evidence of satisfactory comple-*  
0154 *tion of a program of continuing education required by the*  
0155 *board. The requirements for continuing education for licensees*  
0156 *of each branch of the healing arts shall be established by the*

(s) "Professional service" does not include services as a district  
coroner or deputy district coroner appointed pursuant to K.S.A. 19-1026  
and amendments thereto.

0268 prescribed.

0269 Sec. 2 4. K.S.A. 40-3401 is ~~and 65-2852~~ and K.S.A. 1986

0270 ~~Supp. 65-2809~~ are hereby repealed.

0271 Sec. 3 5. This act shall take effect and be in force from and

0272 after its publication in the statute book.

Insert section 4, attached, and renumber sections 4 and 5 as sections 5 and 6

, 65-2852 and 75-6115

Sec. 4. K.S.A. 75-6115 is hereby amended to read as follows: 75-6115. (a) Except as provided by subsection (b):

(1) The Kansas tort claims act shall not be applicable to claims arising from the rendering of or failure to render professional services by a health care provider; and

(2) claims for damages against a health care provider that is a governmental entity or an employee of a governmental entity, arising out of the rendering or failure to render professional services by such health care provider, may be recovered in the same manner as claims for damages against any other health care provider.

(b) The Kansas tort claims act shall apply to claims arising from the rendering of or failure to render professional services as a coroner.

(c) As used in this section:

(1) "Coroner" means a district coroner or deputy coroner appointed pursuant to K.S.A. 19-1026 and amendments thereto.

(2) "Health care provider" shall--have has the meaning provided by K.S.A. 40-3401 and amendments thereto.



# KANSAS MEDICAL SOCIETY

1300 Topeka Avenue · Topeka, Kansas 66612 · (913) 235-2383

March 26, 1987

TO: House Public Health and Welfare Committee

FROM: Jerry Slaughter  
Executive Director *J. Slaughter*

SUBJECT: SB 36; Exempting Certain Health Care Providers  
from the Mandatory Malpractice Insurance Requirement

The Kansas Medical Society appreciates the opportunity to comment on SB 36, which exempts certain licensees of the Board of Healing Arts from the mandatory medical malpractice insurance requirement.

The intent of SB 36 is to allow certain physicians who have retired from active practice to maintain their full license so that they can provide a valuable service in the area of volunteer work, administrative duties, incidental consulting and a variety of other activities which require a license to practice medicine. Currently, with malpractice insurance costs so high, it is not feasible for a physician to maintain an active license even though many of the activities described above require that a licensee have a full license in order to provide such services. It is important to note that SB 36 does not exempt physicians or the organizations they volunteer or work for from liability. The bill merely exempts such licensees from the mandatory insurance, as well as the continuing education requirements as specified by the Board. Physicians affected by this bill may choose to carry insurance purchased on the private market, or have it provided by the organizations that employ them. However, enactment of this legislation would remove the necessity to buy the required primary limits, as well as contribute to the Health Care Stabilization Fund.

The bill accomplishes its purpose by creating an "exempt" license issued by the Board of Healing Arts to physicians who are no longer regularly engaged in the practice of medicine, and who do not hold themselves out to the public as being professionally engaged in the practice of medicine. The bill, obviously, gives the Board the discretion and flexibility to issue exempt licenses based on each individual physician's application.

We would like to suggest one amendment, which was really an oversight and should have been dealt with earlier. We believe the bill should take effect upon publication in the Kansas Register, instead of July 1, so that some physicians could actually apply for and possibly receive an exempt license during this renewal period.

We think this legislation is an excellent solution to the problem faced by many physicians who would like to remain productive in certain limited activities, but are unable to do so because of the malpractice laws. We urge your favorable consideration of SB 36, with the amendment mentioned above. Thank you for the opportunity to appear, and we appreciate your consideration of these comments.

JS:nb

*PNW  
Attn #6  
3-26-87*



KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT

TESTIMONY ON SENATE BILL #78

PRESENTED TO HOUSE PUBLIC HEALTH AND WELFARE COMMITTEE, MARCH 1987

This is the official position taken by the Kansas Department of Health and Environment on S.B. #78 as amended.

Background Information:

In 1984, the Kansas Department of Health and Environment (KDHE) received a credentialing application from the Kansas Mental Health Counselor Association and the Kansas Association for Counseling and Development to be taken through the credentialing review process (K.S.A. 65-5001 et seq.). The credentialing application requests the state of Kansas to license the practice of professional counselors.

The application has been reviewed by a five member technical committee, the Statewide Health Coordinating Council (SHCC) and former KDHE Secretary Barbara Sabol and current KDHE Secretary Jack D. Walker, M.D. The end product of the credentialing review program is a final report by the KDHE Secretary specifying facts and findings on whether the three statutory criteria are met, recommendations on whether a group should be credentialed and if so, what measures are appropriate to protect the public.

The final report specified that the technical committee, SHCC, and KDHE Secretaries found that:

- The applicant has met statutory Criterion 1 of the need for credentialing by demonstrating "that the unregulated practice of professional counselors can harm or endanger the health, safety, or welfare of the public" and that "the potential for such harm is recognizable and not remote."
- The applicant has met statutory Criterion 2 of the need for credentialing by demonstrating that "professional counselors require specialized skills and training," and "they provide the public with the assurance of the initial and continuing ability necessary for the practice of professional counselors."
- The applicant has met statutory Criterion 3 of the need for credentialing by demonstrating that "no other means other than credentialing exists to protect the public from harm by the practice of professional counselors."
- Because all three criteria for the need for credentialing have been met according to the statutes, it is concluded that the need for credentialing of professional counselors does exist in Kansas.

Former Secretary Sabol recommended that registration be the appropriate level of credentialing of professional counselors since the public can be protected by identifying practitioners who are qualified through specific education/training to provide professional counseling service.

PH<sup>W</sup>  
3-26-87  
attm #7

Secretary Walker amended the final report as follows:

- Secretary Jack Walker, M.D. recommends that licensure be the appropriate level of credentialing of professional counselors since more than just identification of practitioners who are qualified is needed to protect the public. Restriction of who can provide counseling services that have the same orientation as professional counselors is required.

Department's Position:

KDHE supports the provisions of Senate Bill #78 as amended which provide for the registration of professional counselors by the State Behavioral Sciences Regulatory Board.

Presented for: Jack D. Walker, M.D., Secretary  
Kansas Department of Health and Environment

HP/X13

Legislative Testimony  
for  
Senate Bill 78  
by  
Lloyd A. Stone, Ph.D.

Members of the Committee on Public Health and Welfare, my name is Lloyd A. Stone and I represent the Kansas Professional Counselor Licensure Task Force which was formed by the Kansas Association for Counseling and Development (KACD), and the Kansas Mental Health Counselors Association (KMHCA). In addition, I am President of the Kansas Association of Counselor Educators and Supervisors (KACES). All three of these professional associations are in support of Senate Bill 78.

This legislation defines the practice of counseling as providing services to individuals, groups, and/or the general public for a fee (private practice). Further, the bill says this service involves counseling, assessment, consultation and referral. Counseling is a process involving the counselor and the client which is designed to assist the client in developing an understanding of their personal strengths and weaknesses and to assist them in making more positive adjustments in life. The primary goal of counseling is to assist individuals or groups to achieve optimal mental health. Persons who qualify for, and are registered by this legislation will be prepared to carry out this function.

The primary need for this legislation is that under present law, anyone, regardless of education and/or experience, can legally engage in private practice counseling and call themselves a professional counselor. While Senate Bill 78 would not prohibit the private practice of counseling by non-prepared persons it would make it incumbent upon individuals who wished to use the title "Registered Professional Counselor" or "Professional Counselor" to meet the criteria described in Senate Bill 78. While licensure would offer more protection for the public, the registration of private practice professional counselors will certainly be a step in the right direction.

PH + W #8  
altm  
3-26-87

This legislation calls for the person seeking registration as a Professional Counselor to have completed 60 graduate hours of study including a graduate degree in counseling. Based upon recommendations from national organizations of professional counselors the person would be required to have coursework in ten prescribed areas, and would have to pass an examination. In addition, the person would need a minimum of three years of supervised experience to become registered. As of this date, eighteen other states have passed legislation similar to Senate Bill 78. Three of these states are our neighbors, Oklahoma, Missouri and Nebraska. The counselor preparation institutions in Kansas have established a core curriculum which would insure consistent, excellent preparation of Professional Counselors. It is apparent, based upon requirements in other states and research that has been done, that persons who meet the requirements of this bill will indeed be competent professional practitioners.

The bill contains a six month grandparenting clause. The purpose of this section is to insure that persons who were trained in the past, and have been practicing as Professional Counselors, will not be denied from continuing to use their title because of this legislation. This is a necessary and important part of the bill and such a section is included in similar legislation in other states.

Senate Bill 78 has been in the process of reaching this point since 1982. We have followed the process as established by the legislature and have reached this point with positive recommendations for Professional Counselor Licensure from the Technical Committee of the Statewide Health Coordinating Council, the Council itself and the Secretary of Health and Environment. As you are aware, the Senate amended the original bill making it Registration instead of Licensure. While we feel Licensure was more appropriate, we are, as of this time, supportive of Registration as defined in Senate Bill 78.

This legislation, contrary to much legislation, provides an opportunity to do something ~~to~~ for the people of Kansas with little or no cost to the taxpayers. This is true since the legislation would be supported by fees. I ask you to keep in mind that eighteen other states have passed similar legislation and that three states which border Kansas are included in the eighteen. If this bill is not passed, I am concerned that those persons in Nebraska, Missouri, and Oklahoma who were ineligible to be credentialed in those states, may move across the line and practice in Kansas. This could only increase the potential harm to the Kansans who might be consumers of these services.

Thank you for this opportunity to testify. I, and those I represent, urge you to act favorably on Senate Bill 78 and to give it your utmost support.

House Public Health and Welfare Committee  
Subject: Kansas Professional Counselor Registration Bill

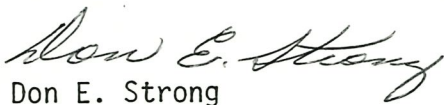
My name is Don E. Strong. I am a vocational rehabilitation counselor and currently president-elect of the Kansas Rehabilitation Counseling Association. I have worked as a counselor for the State of Kansas, Division of Rehabilitation Services for the past twelve years. I have served on the board of Wichita Rehabilitation Association and have acted as a consultant for both the Association for Retarded Citizens and the Association for Children and Adults with Learning Disabilities.

I am confronted daily with individuals who are desperately in need of help. They are in a compromising situation, needing help and dependent upon others for that help. I have seen too often the disabled being exploited, sometimes by individuals calling themselves counselors. Until now, there has been no way to protect the public from individuals whose competency as a counselor may be questionable and whose ethics are unknown.

As President-elect of K.R.C.A., I am representing K.R.C.A. K.R.C.A. represents rehabilitation counselors in Kansas through our Division in the National Rehabilitation Counseling Association, Inc. We feel it is important that our position on the Kansas Professional Counselor Registration Bill, be stated in order to avoid any confusion that may have been created by other statements concerning our organization's view on registration.

K.R.C.A. supports counselor registration. We feel that registration of counselors is a major step towards establishing counseling as a profession to be trusted and depended upon by the citizens of Kansas.

We plan to continue working with other counseling professionals to resolve any differences over criteria in the registration bill that may arise. We want to continue to build on the positive aspects of registration for counselors, and we have no intention of opposing the current Kansas Professional Counselors Registration Bill. It is our opinion that K.R.C.A. can be a positive force in helping to develop counseling as a profession that will provide for the protection and the public welfare of the citizens of Kansas.

  
Don E. Strong

*PHW  
ation #9  
3-26-87*



Serving the counseling,  
guidance and human  
development professions  
since 1952.

# American Association for Counseling and Development

5999 Stevenson Avenue, Alexandria, Virginia 22304 703/823-9800

BROOKE B. COLLISON, Ph.D, NCC  
1723 Harvard  
Wichita, KS 67208  
316-682-4334

Associate Professor  
Counseling and School Psychology  
Wichita State University  
Wichita, KS 67208  
316-689-3326

President-Elect, 1986  
President, 1987  
Past-President, 1988

T E S T I M O N Y

to the

House Committee on Public Health and Welfare

RE: SB 78--An Act Concerning Professional Counselors

March 26, 1987

I am Brooke B. Collison, of 1723 Harvard, Wichita, Kansas. I am pleased to have the opportunity to appear before this Committee as it deliberates the merits of Senate Bill 78. I hope that my comments will be helpful.

I am President-Elect of the American Association for Counseling and Development (AACD). As of January 6, 1987, there were 55,324 members of that Association, 575 of whom live in Kansas. The members of AACD are persons who work in a wide variety of counseling settings which are represented by their membership in one or more of the twelve divisions of the Association. I strongly support the passage of SB 78 which would establish an identified status for professional counselors in Kansas.

I want to assure the members of the Committee that the professional association which I represent, AACD, has in place a number of specific procedures for shaping the professional quality of practitioners in the field. As a professional association, there are standing committees which constantly monitor and revise the code of professional ethics for counselors; other entities are in place to handle ethical violations; and the association has frequently published material in a variety of forms which focus on ethical procedures and practices in counseling.

A second point which I would want to make is that the Association has been in the forefront of efforts to improve the graduate training of counselors across the country. This has been done primarily through two emphases: (1) the Association for Counselor Education and Supervision (ACES), a division within AACD, has developed standards and criteria for counselor training. These standards are also under continual review and

*PH:W  
attm #10  
3-26-87*

revision. (2) The ACES Standards have been implemented by at least one accrediting body--The Council for Accreditation of Counseling and Related Educational Programs (CACREP)--which applies those standards in the accreditation review of graduate programs in counseling. I should comment here that the graduate programs in counseling in Kansas are currently accredited by the standard accrediting agencies which cover colleges of education--the National Council for Accreditation of Teacher Education (NCATE) as well as the State Department of Education and the Kansas Board of Regents. In addition, the universities in Kansas where graduate programs in counselor education are found are all accredited by the appropriate regional accrediting body--the North Central Association of Colleges and Schools.

A third point which I would want to emphasize for the members of the committee is that AACD has been a leader in developing a valid and appropriate examination and credentialing process for professional counselors. The National Board for Certified Counselors (NBCC) grew out of efforts of AACD to establish an additional quality check for professional counselors. NBCC now exists as an independent entity, separate from AACD, thus insuring the autonomy and absence of conflict which must be a part of a credible certifying body. I am pleased, however, to identify myself as a Nationally Certified Counselor (NCC) with certificate number 43 on my office wall. NBCC could well be the examining and certifying group utilized by Kansas when SB 78 is passed.

The points of emphasis are that counselors in Kansas do have professional guidelines and known standards of practice to work from. There is also an assurance that the graduate education programs which train counselors do meet acceptable criteria. Barring severe economic constraints in higher education, that educational quality should continue to improve. In addition, there is a certifying body, NBCC, which is in place for professional counselors.

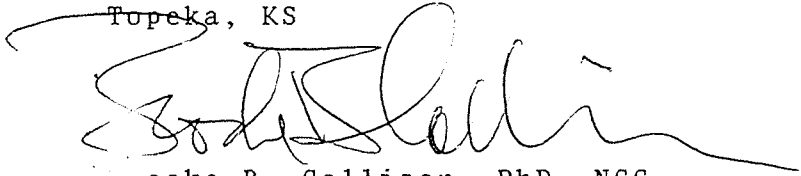
As President-Elect of AACD, I want to make one other comment: There are currently 19 states in the U. S. which have passed counselor credentialing laws, the most recent being Wyoming which passed a credentialing law in February. Three border states-- Missouri, Nebraska, and Oklahoma--have passed counselor credentialing laws in recent years. In addition, there are an additional 19 states where, like Kansas, a similar bill is under consideration. From my position with the Association, I certainly want Kansas to be with those who can say that they have passed a professional counselor credentialing bill and thus have provided an additional and needed degree of protection for the public at large.



Finally, as a Kansas resident and as a faculty member in Counseling and School Psychology, at The Wichita State University, I urge positive consideration of Senate Bill 78. If the American Association for Counseling and Development can be of assistance to you in your deliberations, I will be pleased to do what I can in that regard. I can direct questions to our headquarters in Alexandria, Virginia or to appropriate leaders in the Association whose expertise can be utilized in your behalf.

March 26, 1987

Topeka, KS

A handwritten signature in cursive script, appearing to read 'Brooke B. Collison', written in dark ink. The signature is fluid and extends across the width of the text area below it.

Brooke B. Collison, PhD, NCC  
President Elect, AACD

KANSAS HOUSE OF REPRESENTATIVES

Committee on Public Health and Welfare

March 26, 1987

I am Dr. Donna Kater, a counselor in private practice in Wichita. I am also executive secretary for the Kansas Association for Counseling and Development. KACD has a membership of 550 counselors and is the primary professional association of counselors in the state. I also represent the following divisions of the Kansas Association for Counseling and Development: Kansas Mental Health Counselors Association, Kansas School Counselor Association, Kansas Career Development Association, Kansas College Personnel Association, Kansas Association for Counselor Education and Supervision, and Kansas Association for Specialists in Group Work.

These professional associations are in support of Senate Bill 78. The purpose of professional regulation is to ensure the protection of the public. This act will provide some protection of the public by identifying those persons who meet minimum standards of preparation.

We believe that some measure of public protection is better than none. However, there are three major ways that the public remains at risk:

1. There is no regulation of practice. Consequently there is no protection from the incompetent or unethical practice of counseling so long as the practitioner does not

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use the title of registered professional counselor, registered counselor or professional counselor. Evidence is available that incompetent and unethical practices do, in fact, occur.

2. There continues to be a shortage of mental health services provided by clearly qualified professionals in many rural areas of the state. Professionals who are currently regulated are concentrated in the more heavily populated areas. As a private practice counselor in Wichita, I have clients who are driving from Garden City, Nickerson, Little River and Pratt.

3. Encouraging the private practice of a greater number of qualified mental health providers would protect the public from the increasingly higher costs of mental health services and consequent higher total health care costs.

These three concerns require further consideration by the legislature.

In summary, despite concerns regarding the continuing risk of the public, the professional counseling associations support Senate Bill 78.

TESTIMONY OF MICHAEL J. BYINGTON, M.A., R.D.T.

(MASTERS LEVEL REGISTERED DRAMA THERAPIST

AND REGISTERED KANSAS LOBBYIST FOR

THE KANSAS ASSOCIATION FOR THE BLIND AND VISUALLY IMPAIRED INC.

CONCERNING SENATE BILL 78

When this bill came before the Senate, it was a licensure bill, and I was in opposition to it. I asked the Senate Committee to make the bill a registration bill instead of a licensure bill. The Senate Committee did so, and now I can go on record as supporting the bill. I assume, however, that those who wanted the bill to authorize licensure in the first place will be back before you continuing to push for licensure. I continue to oppose licensure for counselors.

To license counselors would be inconsistent with the Kansas Credentialing Act which this Legislature, in its wisdom, adopted last year. That act defines licensure as carving out an exclusive scope of practice. Counseling as defined in SB 78 can not be considered an exclusive scope of practice. The term and its definitions are too broad. Registration will protect the name of "counseling," however, and will assure the general public that anyone calling themselves a "Counselor" will have achieved certain standards of education. This would appropriately and sufficiently protect the public from harm.

In the Senate hearing, there were many groups who went before the Senate Committee to say, "go ahead and license counselors, but leave my area or practice and me out of it. I counted over fifteen groups wanting such exclusions. When all of these groups would be excluded, there was not much left to the concept of counselor licensure. Thus, registration is clearly the better answer.

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