

Approved 2-10-87
Date

MINUTES OF THE SENATE COMMITTEE ON PUBLIC HEALTH AND WELFARE

The meeting was called to order by SENATOR ROY M. EHRLICH at
Chairperson

10:00 a.m. ~~pm~~ on February 3, 1987 in room 526-S of the Capitol.

All members were present except:

Committee staff present:

Emalene Correll, Legislative Research
Bill Wolff, Legislative Research
Norman Furse, Revisor of Statutes Office
Clarene Wilms, Committee Secretary

Conferees appearing before the committee:

John Pierpont, Coordinator, Children and Youth Advisory Committee
Jan Zander for Bob Williams, Executive Director, Kansas Committee for
Prevention of Child Abuse
Representative Larry Turnquist, written testimony only
Dr. Lloyd Stone, Kansas Association of Counseling and Development
Rita Wolf, Department of Health and Environment
Brooke Collison, President-Elect, American Association for Counseling and
Development
Randy Myers, President-Elect, Kansas College Personnel Association
Harold Hula, President, Kansas Association of Specialists in Group Work
Dr. Jim Stansbury, President, Kansas Mental Health Counselors Association
Glenda Henley, Kansas School Counselors Association
Donna Kater, KACD
Don E. Strong, President-Elect, Kansas Rehabilitation Counselors Association
Stephen Jones, KMAFT, Board of Directors
Elizabeth Taylor, Kansas Alcoholism & Drug Addiction Counselors Association
Gene Johnson, KC ASAP
Richard Maxfield, Ph.D., Chief Psychologist, Diagnostic and Consultation
Service, Menninger Foundation
Michael Byington, Kansas Association for Blind and Visually Impaired
Gary E. Holmes, written testimony presented to Committee
Ronald D. Smith, Legislative Counsel, Kansas Bar Association, written
testimony presented to Committee

Others Attending: see attached list

The chairman presented the minutes of January 26, 27, 28, and 29th for approval and correction. Senator Francisco made the motion to accept the minutes as presented. Senator Hayden seconded the motion and the motion carried.

Chairman Ehrlich announced that he had appointed a subcommittee to look at SB-35. Senator Bond, Senator Francisco and Senator Hayden will form the subcommittee with Senator Bond serving as Chairman.

SB-64 - An Act concerning the family and children trust fund;

John Pierpont appeared in support of SB-64 and presented written testimony. Mr. Pierpont requested two amendments to SB-64. These amendments would include the "purchasing of educational materials" in order that; 4(b) would read "preparing, publishing, purchasing and disseminating educational material dealing with the problems of families and children." No funds were included at the time the Coordinator position was created in the 1986 session of the Legislature. SB-64 would resolve this problem by allowing monies from the family and children trust fund to be used to purchase materials to be disseminated and also provide travel expenses for the Coordinator. (attachment 1)

Senator Morris made the motion to accept the proposed amendments to SB-64 with a second by Senator Hayden. Motion carried.

Unless specifically noted, the individual remarks recorded herein have not been transcribed verbatim. Individual remarks as reported herein have not been submitted to the individuals appearing before the committee for editing or corrections.

CONTINUATION SHEET

MINUTES OF THE SENATE COMMITTEE ON PUBLIC HEALTH AND WELFARE,

room 526-S, Statehouse, at 10:00 a.m./~~pm~~ on February 3, 1987.

Jan Zander presented testimony for Bob Williams and also presented written testimony. Ms. Zander stated that SB-64 would allow the children and youth advisory committee to fund travel expenses for the coordinator and also fund the publishing and dissemination of educational materials. (attachment 2)

Written testimony was presented by Representative Larry F. Turnquist supporting SB-64 stating the need to allow the coordinator travel and other miscellaneous expenses. (attachment 3)

SB-78 - An Act concerning counselors; providing for the licensure of professional counselors and associate counselors by the behavioral sciences regulatory board; establishing the advisory commission on professional counseling; declaring certain acts to be unlawful and providing penalties for violations;

Dr. Lloyd A. Stone testified in support of SB-78 and presented written testimony. Dr. Stone stated that KACD, KMHCA and KACES, all professional organizations were in support of this bill. He further testified that SB-78 has been in the process since 1982, having followed the established procedure set forth 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. Concern was expressed that if this bill was not passed persons in surrounding states who were ineligible to be licensed in those states would move across the line and practice in Kansas. (attachment 4)

Rita Wolf testified stating that former Secretary Sabol recommended that registration be the appropriate level of credentialing of professional counselors. Secretary Jack Walker amended the final report to read "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." (attachment 5)

Brooke B. Collison testified and presented written testimony in support of SB-78. It was further stated that the AACD constantly monitored and revised the code of professional ethics for counselors. This organization has been active with efforts to improve graduate training of counselors across the country and also has been a leader in developing a valid and appropriate examination and credentialing process for professional counselors. (attachment 6)

Randy Myers appeared in support of SB-78 and presented written testimony. Mr. Myers stated that his organization was made up of persons who are involved in some aspect of college personnel work which includes counseling. This bill would not require them to be licensed but they supported the legislation because it was felt it would be of help to the people of Kansas. (attachment 7)

Harold Hula testified and presented written testimony in support of SB-78. Mr. Hula stated that the Kansas Association of Specialists in Group Work, a division of the Kansas Association of Counseling and Development believed licensure of professional counselors in Kansas was long overdue. (attachment 8)

Jim Stansbury testified and presented written testimony in support of SB-78. Mr. Stansbury stated the Kansas Mental Health Counselors Association had been active for a number of years bringing SB-78 to the Legislature. (attachment 9)

Glenda Henley presented written testimony and testified in support of SB-78. Representing the Kansas School Counselors Association, she stated that their organization supported this bill and passage would make it easier for school

CONTINUATION SHEET

MINUTES OF THE SENATE COMMITTEE ON PUBLIC HEALTH AND WELFARE

room 526-S Statehouse, at 10:00 a.m./~~pm~~ on February 3, 1987

counselors to make referrals in certain instances. (attachment 10)

Dr. Donna Kater testified and presented written testimony supporting SB-78. She stated that the licensing of professional counselors would: (a) protect the public from incompetent or unethical practitioners; (2) protect the public from a shortage of mental health services, especially in the rural areas of the state; (3) protects the public from increasingly higher costs of mental health services and consequent higher total health care costs. (attachment 11)

Don E. Strong testified and presented written testimony in support of SB-78. Mr. Strong stated that he had seen the disabled who were dependent on others for help being exploited on occasion and felt that SB-78 would establish a level of competency and a code of ethics for the counseling profession of Kansas. (attachment 12)

Stephen Jones testified and presented written testimony on SB-78. Mr. Jones, representing AAMFT, stated their organization supported this bill but felt that in the best interest of the public the following modifications should be made to the bill. 1) New Section 13, specifically list "full members of the American Association for Marriage and Family Therapy" as one of the professions exempted from the professional counselors licensing act. 2) New Section 2 "marriage and family counseling" will be deleted (not listed) as a specialty. (attachment 13)

Elizabeth Taylor presented written testimony and testified opposing SB-78 from the standpoint that the KADACA did not want to be included in this bill. It was stated that the KADACA has been certifying alcoholism and drug addiction counselors for over 10 years and is the only organized group representing only counselors in the alcoholism and drug addiction field. Ms. Taylor stated that the passage of SB-78 would have a devastating effect on the alcoholism and drug addiction field. It was repeatedly stated that alcoholism and drug addiction were diseases and therefore should be dealt with separately. (attachment 14)

The following conferees were not heard due to the shortage of time: Gene Johnson, (attachment 15); Richard Maxfield, (attachment 16); Michael Byington, (attachment 17). These conferees will be heard during further testimony on SB-78 to be held on Thursday, February 5, 1987, and Friday, February 6, 1987.

Written testimony was presented to the committee by Gary E. Holmes. Mr. Holmes stated that he was opposed to SB-78 because, as he understood the bill, it would prevent professionally trained rehabilitation counselors from being licensed in Kansas. (attachment 18)

Ronald D. Smith presented written testimony to the committee stating that he did not think SB-78 was intended to include attorneys or regulate the practice of law or medicine. (attachment 19)

The meeting adjourned at 11 a.m. with the next meeting scheduled Wednesday, February 4, 1987.

SENATE
PUBLIC HEALTH AND WELFARE COMMITTEE
DATE 2-3-87

(PLEASE PRINT)
NAME AND ADDRESS

ORGANIZATION

Elizabeth C. Taylor
Brooke Celliner
Randy Myers
Harold L. HULA
ROBERT L. KIRCHER
Marvin Kuehn
Lloyd A. Stone
Dennis Kater
Jim Stansbury
Helen Stephens
Theresa Shueck
Pat Grimwood
Ruth Hotala
Gloria J. Henley
Gene Johnson
Ray L. Hany
Frances Kestner
Charles V. Hamm
Jan Zander
Don Strong
Bill Moore
Fannie Hartman
Sydney Kars

Ks Alcohol Drug Addiction Counselors
American Assoc. for Counsel. & Development
Kansas College Personnel Assn.
KAN. ASSOC. FOR SPECIALISTS IN GROUP WORK
KANSAS Association for Counsel. & Development
Kan. Assoc. Coun. & Development
" " " " "
" " " " "
Ks. Mental Health Counselors Assn.
KACD
KANSAS NAKAL
Kansas Assoc. for Coun. & Devel.
KS ASSOCIATION FOR COUNSELING & DEVELOPMENT
KS. Association for Counsel. & Devel.
Ks Community A.S.A.P. Council Assn
SRS / ADAS
KAPTA
KDHE
KCPCA
KPCA
Vocational Rehabilitation Counselor
Kansas Bar Association
Off. of Judicial Admin.



STATE OF KANSAS

CHILDREN AND YOUTH ADVISORY COMMITTEE

SMITH-WILSON BLDG.
2700 W. SIXTH ST.
TOPEKA, KANSAS 66606-1898

(913) 296-4649

KANS-A-N 561-4649

TESTIMONY ON SENATE BILL NO. 64

MR. CHAIRMAN, MEMBERS OF THE COMMITTEE, I AM APPEARING ON BEHALF OF THE CHILDREN AND YOUTH ADVISORY COMMITTEE TO TESTIFY IN REGARD TO SENATE BILL NO. 64.

THE CHILDREN AND YOUTH ADVISORY COMMITTEE SUPPORTS THIS BILL. ACCORDING TO ITS LEGISLATIVE MANDATE (KSA 38-1402), THE ADVISORY COMMITTEE IS TO "ENCOURAGE CITIZEN AND COMMUNITY AWARENESS AS TO THE NEEDS AND PROBLEMS OF CHILDREN" IN KANSAS. AT THE PRESENT TIME, THE ADVISORY COMMITTEE HAS NO FUNDS FOR THIS PURPOSE. SENATE BILL 64 WOULD RESOLVE THIS PROBLEM BY ALLOWING MONIES FROM THE FAMILY AND CHILDREN'S TRUST FUND TO BE USED TO PROVIDE EDUCATIONAL MATERIALS WHICH WOULD DIRECTLY AND SPECIFICALLY ENHANCE CITIZEN AND COMMUNITY AWARENESS OF THE NEEDS AND PROBLEMS OF KANSAS CHILDREN. THE ADVISORY COMMITTEE WOULD LIKE TO RECOMMEND THAT SENATE BILL 64 BE AMENDED TO INCLUDE THE PURCHASING OF EDUCATIONAL MATERIALS SO THAT (4) IN PARAGRAPH (B) WOULD READ "PREPARING, PUBLISHING, PURCHASING, AND DISSEMINATING EDUCATIONAL MATERIAL DEALING WITH THE PROBLEMS OF FAMILIES AND CHILDREN".

O V E R

SPHAW
2-3-87
attachment 1

IN THE 1986 SESSION, THE LEGISLATURE CREATED A COORDINATOR POSITION FOR THE CHILDREN AND YOUTH ADVISORY COMMITTEE. TRUST FUND MONIES ARE USED TO PAY THE COORDINATOR'S SALARY, AND THE STATE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES PROVIDES CLERICAL SUPPORT, OFFICE SPACE, SUPPLIES, ETC. HOWEVER, NO PROVISION HAS BEEN MADE FOR THE COORDINATOR'S TRAVEL EXPENSES. SENATE BILL 64 WILL CORRECT THIS SITUATION BY ALLOWING MONIES FROM THE FAMILY AND CHILDREN'S TRUST FUND TO BE USED TO PAY THE COORDINATOR'S TRAVEL EXPENSES.

THE CHILDREN AND YOUTH ADVISORY COMMITTEE RESPECTFULLY REQUESTS THAT YOU ACT FAVORABLY ON SENATE BILL 64.

JOHN PIERPONT, COORDINATOR
CHILDREN AND YOUTH ADVISORY COMMITTEE
(913)296-4649



**Kansas
Committee
for Prevention
of Child Abuse**

112 West 6th Street, Suite 305
Topeka, Kansas 66603
913-354-7738

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Dennis Weaver

TESTIMONY

Senate Bill No. 64

February 3, 1987

Jan Zander, Coalition Coordinator
Kansas Committee for Prevention of Child Abuse

The Kansas Committee for Prevention of Child Abuse was founded in 1976 as the pilot chapter of the National Committee for Prevention of Child Abuse. We are a statewide non-profit volunteer organization dedicated to the prevention of child abuse. Since our inception we have grown to represent 23 chartered community-based coalitions throughout Kansas.

The Family and Children's Trust Fund was the brainchild of Kansas Committee for Prevention of Child Abuse. It was the first Trust Fund in the nation devoted to child abuse prevention. There are now 38 states with Trust Funds patterned after the Kansas plan.

These proposed amendments to the Family & Children's Trust Fund will further allow the Children and Youth Advisory Committee, who is charged with the responsibility of allocating Trust Fund monies, to carry out their duties as set forth in K.S.A. 38-1402. Currently their ability to encourage citizen and community awareness as to the needs and problems of children are hampered by their inability to fund the publishing and dissemination of educational material.

The funding of travel expenses for the Coordinator of the Children and Youth Advisory Committee is to rectify an oversight last year when the Trust Fund was amended to allow the Children and Youth Advisory Committee to hire a Coordinator.

We encourage the Committee to pass the proposed amendments.

STATE OF KANSAS

LARRY F. TURNQUIST
REPRESENTATIVE, SIXTY-NINTH DISTRICT
SALINE COUNTY
852 S. 10TH
SALINA, KANSAS 67401-4858



TOPEKA

HOUSE OF
REPRESENTATIVES

February 3, 1987

COMMITTEE ASSIGNMENTS
RANKING MINORITY MEMBER: INSURANCE
MEMBER: ADVISORY COMMITTEE ON CHILDREN
AND YOUTH
JOINT COMMITTEE ON ADMINISTRATIVE
RULES AND REGULATIONS
WAYS AND MEANS

Roy

Chairman Erlich and Committee Members,

I want you to know that I support the passage of SB 64 and hope that you will give it your favorable consideration. I have had the opportunity of serving on the Advisory Committee for several years and certainly believe that it is necessary for us to allow the coordinator to be able to use funds for travel and miscellaneous expenses. I am certain that you will find that there is broad support for this technical change in the statute by several of the advocate groups. I would be happy to discuss this change at any time.

LARRY F. TURNQUIST

Larry

SPHAW
2-3-87
attachment 3

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

Senator Ehrlich, 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. 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 licensed 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.

SPH & W
2-3-87
attachment 4

Therefore, the public is not protected. Some of these "counselors" are qualified, some are not. The Kansas consumer of these services deserves better than current law provides. A colleague of mine will speak to you further regarding actual harm to the public as the result of counseling done by unqualified or unethical counselors.

As a taxpayer, one of my concerns is always cost. In this case, one could ask the question, would passage of this legislation have an effect on health care costs? Competition, prevention, and early detection are necessary ingredients to the lowering of health care costs. Licensure of professional counselors provides these ingredients. In addition, it is likely that Kansans in rural areas will save considerably in travel since existing services are predominantly located in urban areas. A 1986 survey of companies employing 10,000 or more people, indicated that 36 percent of these companies were beginning mental health wellness programs for the purpose of reducing mental health care costs. By making counseling more accessible to the public it is our conclusion that the passage of this legislation will not increase health care costs.

This legislation calls for the person seeking Professional Counselor Licensure to have completed 60 graduate hours of study including a graduate degree. 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 examina-

tion. In addition, the person would need a minimum of three years of supervised experience to become fully licensed. As of this date, eighteen other states have passed licensure 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 Licensed 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 successfully, will not be denied from continuing to practice 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.

This licensure legislation is necessary for the protection of the public. Contrary to much legislation, it provides an opportunity to do something for the people of Kansas without cost to the taxpayers. This is true since the legislation would be supported by Licensure 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 licensed 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 as it progresses to the total legislative body.

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT

TESTIMONY ON SENATE BILL #78

PRESENTED TO SENATE PUBLIC HEALTH AND WELFARE COMMITTEE, FEBRUARY, 1987

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

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. Professional counseling specialties include clinical mental health counseling, rehabilitation counseling, career counseling, and marriage and family counseling.

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.

SPH/vw
2-3-87
Attachment 5

Secretary Walker amended the final report as follows:

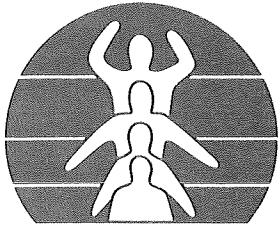
- Secretary Jack Walker, M.D. recommends that licensure be the appropriate level of credentialing of professional counselors since more than just identification of practitioners who are qualified is needed to protect the public. Restriction of who can provide counseling services that have the same orientation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

Department's Position:

KDHE supports the provisions of Senate Bill #78 which provide for the licensure 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



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American Association for Counseling and Development

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

T E S T I M O N Y

to the

Senate Committee on Health and Welfare

RE: SB 78: An Act to License Professional Counselors

February 2, 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 provide for the licensing of professional counselors in Kansas.

I want to assure the members of the Committee that 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

SPN dww
2-3-87
Attachment 6

RE: SB 78: An Act to License Professional Counselors

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 revision. (2) The ACES Standards have been discussed in numerous meetings of the counselor education faculties of the six state institutions which have graduate programs in counselor education. 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

RE: SB 78: An Act to License Professional Counselors

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.

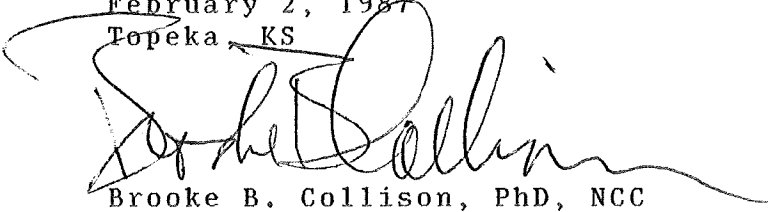
As President-Elect of AACD, I want to make one other comment: There are currently 18 states in the U. S. which have passed counselor licensure laws similar to the one being considered here. In addition, there are 19 states where, like Kansas, a similar bill is under consideration. From my position with the Association, I certainly want Kansas to be with those who can say that they have passed a professional counselor licensing bill and thus have provided an additional degree of protection for the public at large.

RE: SB 78: An Act to License Professional Counselors

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.

February 2, 1987

Topeka, KS



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

Senate Bill 78

I am Randy Myers from Hutchinson. I am President-Elect of the Kansas College Personnel Association. Thank you for the opportunity to testify in favor of Senate Bill 78.

The association I represent is made up of persons who are involved in some aspect of college personnel work, including counseling. This bill would not require that we be licensed, therefore we have nothing personal to gain by its passage. We are supportive of this legislation because we believe it will be of help to the people of Kansas and because it will give us some assurance of credentials when we make outside referrals, thereby providing protection for the public.

My association respectfully requests your active support of this legislation. Thank you.

SPAW
2-3-87
attachment 7

SENATE BILL 78

by

Harold Hula, President
Kansas Association of Specialists
in Group Work (KASGW)

Senator Ehrlich, members of the Committee on Public Health and Welfare. I appreciate the opportunity to appear before you to offer support of the association I represent for Senate Bill 78.

My name is Harold Hula, I am from Topeka, and I am President of the Kansas Association of Specialists in Group Work, a division of the Kansas Association of Counseling and Development. On behalf of this association and its members I want you to know that we are in full support of Senate Bill 78, we believe the licensure of professional counselors in Kansas is long overdue, and we urge you to support this bill with your vote.

Thank you very much for this opportunity and for your support.

SPH/W
2-3-87
Attachment 8

Legislative Testimony

For

SENATE BILL 78

Mr. Chairman, members of the Committee on Public Health and Welfare, my name is Jim Stansbury, and I am currently the President of the Kansas Mental Health Counselors Association (KMHCA). Our association has been involved for over six years in bringing Senate Bill 78 to your attention. In the interest of time I just want to tell you that our association, and its 102 members, many of whom are counselors in private practice, are in full support of this legislation and we urge you to do what is necessary for it to become law. Passage of this bill will go a long way toward improving the mental health care of Kansans whether they live in rural or urban areas. Thank you very much.

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Testimony for
Senate Bill 78

My name is Glenda Henley, I am here to testify on behalf of the Kansas School Counselors Association. Mr. Mike Hickel, from Arkansas City is the President of this association and he has asked that I read the following statement to you.

On behalf of the 188 members of the Kansas School Counselors Association I wish to encourage your support of Senate Bill 78. Passage of this legislation will make it easier for school counselors to make referrals in instances when we do not have the time and/or expertise and will further insure that the referral source is a qualified individual. Our association has supported the development of this legislation and we urge your support for its passage.

Thank you very much for your time and efforts.

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Senate Committee on Public Health and Welfare

Professional Counselors Licensure Bill

February 3, 1987

I am Dr. Donna Kater, a counselor in private practice in Wichita. I am also the executive secretary for the Kansas Association for Counseling and Development and appreciate the opportunity to appear before you on behalf of that association.

The purpose of licensing is to ensure the protection of the public. The licensing of professional counselors provides protection of the health and welfare of the public in three major ways.

Licensing of professional counselors:

1. protects the public from incompetent or unethical practitioners.
2. protects the public from a shortage of mental health services, especially in the rural areas of the state.
3. protects the public from increasingly higher costs of mental health services and the consequent higher total health care costs.

I will briefly present information supporting each of these statements. POINT 1. Licensing of professional counselors will protect the public from incompetent and unethical practitioners by limiting the practice of counseling to qualified professionals and by providing recourse for incompetent or unethical practice. Records from the Behavioral Sciences Regulatory Board and the Office of

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the Attorney General verify the need for such protection. From 1980 through 1985 the Behavioral Sciences Regulatory Board received a total of 70 complaints. Eighteen were against social workers, nineteen were against psychologists and 33 were against non-certified persons. The only thing the Board could do with the complaints against non-certified persons was to forward them to the Office of the Attorney General. The Office of the Attorney General reported between 25 and 35 complaints per year from March, 1981 until May, 1984 against non-certified persons. A letter from the Office of the Attorney General states, "Because the counselor was not licensed by the state in any manner and the client was 16 years of age or older, the client rarely had any legal recourse available beyond hiring a private attorney to file a malpractice action."

Newspaper articles from the Manhattan Mercury from 1983 through February, 1984 illustrate the problem. A 47 year old man was counseling a 17 year old girl with her parents' consent. Riley County court documents charge that on May 25 and June 2, 1982, the "counselor" exhibited pornographic films to the girl; on June 10 and July 20, he furnished her with intoxicating liquor; and on June 22, he furnished her with intoxicating liquor and engaged with her consent in oral copulation.

This so-called "counselor" was charged with misdemeanor sodomy, promoting obscenity, endangering a child, and furnishing intoxicants to a minor. He pleaded no contest to reduced charges of endangering a minor and furnishing

intoxicants to a minor, and was sentenced to one year in jail. He was paroled after serving two months of that sentence.

The charges for which this man was sentenced had to do with the fact that the client was a minor, but not with the fact that the counseling services she received were incompetent and unethical.

In another case, a client's life was the price paid. A mother in Maryland shares the painful story of the suicide of her adult daughter in an effort to protect others from the same price. The daughter began seeing a counselor for symptoms of depression. The daughter discussed her therapy over a period of months with her mother. The mother became concerned that the therapist was not competent and questioned her about her qualifications. She was assured that the therapist was in control of the situation and would refer the daughter if she felt there was a need to do so. The daughter attempted suicide, was hospitalized and then released into the therapist's care. A week later the daughter hanged herself. In 1985 Maryland passed a bill requiring the licensure of counselors.

Those who seek counseling services are often more vulnerable than their usual selves. The client needs assurance of competent and ethical care, especially when counselors often practice in complete independence.

POINT 2. Licensing of professional counselors protects the public from a shortage of mental health services. The licensing of counselors can stimulate work opportunities for

competent mental health professionals in the private sector. The fact that there are six graduate programs in counseling in Kansas strongly indicates that there will be more graduates available for professional practice than from the one doctoral program in psychology and the two or three social work programs. I know of no evidence that shows that a doctorate is necessary for the provision of effective counseling.

These services are needed especially in the rural areas of Kansas. As a private practice counselor in Wichita, I currently have clients driving from Garden City, Nickerson, Little River and Pratt. Increased availability of services can mean lower costs for consumers.

POINT 3. Licensing of professional counselors protects the public from increasingly higher costs of mental health services and the consequent higher total health care costs. A recent study at the National Institute of Mental Health found that the use of mental health services may provide an important vehicle for reduction in general health care costs. The researchers found that the overall health care costs for individuals receiving mental health treatment rose gradually during the three years prior to treatment, and then dropped significantly following treatment entry. Although the total health care costs of mental health services recipients remained higher than those of non-recipients, the former group's skyrocketing health costs were cut significantly following the onset of mental health treatment. This work confirms earlier findings in the same vein.

In summary, licensing of professional counselors protects the public in three major ways: by protecting the public from incompetent or unethical practitioners, by protecting the public from a shortage of mental health services, and by protecting the public from increasingly higher costs of mental health services and consequent higher total health care costs. Thank you for your attention, I will be happy to answer questions or to provide documentation to support my statements.

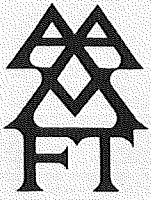
Senate Public Health and Welfare Committee
Senate Bill: 78 - Kansas Professional Counselor Licensure

My name is Don E. Strong. I am a vocational rehabilitation counselor and currently president-elect of the Kansas Rehabilitation Counselor 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. As a counselor working for Rehabilitation Services, my clients consist of individuals who have a handicap; that includes physical, emotional, and mental 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. It is for this reason I support the Kansas Professional Licensure Bill. I believe the public deserves the protection this bill can provide. It can establish a standard level of competency and a code of ethics for the counseling profession of Kansas. A licensure bill can help to establish counseling as a profession to be trusted and depended upon by the citizens of Kansas. As president-elect of KRCA, I feel I can best represent rehabilitation counselors of Kansas by supporting this bill and working with other counseling professionals towards making licensure a reality. The vast majority of counselors represented by KRCA are supportive of the concept of counselor licensure and are deeply interested in making counseling a respected profession.

Don E. Strong

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American Association for Marriage and Family Therapy

CANDYCE S. RUSSELL, Ph.D.
Secretary

Kansas Association for Marriage and Family Therapy

Testimony in support of Senate Bill No. 78, Professional Counselors Licensing Act, before the Senate Committee on Public Health and Welfare, February 3, 1987.

Testifying on behalf of the Kansas Association for Marriage and Family Therapy (KAMFT):

Stephen Jones, M.S.W., Director Family Therapy Training Program
The Menninger Foundation, Topeka, KS
KAMFT Board of Directors

Jim Beer, KAMFT Legislative Project Coordinator, Manhattan, KS.

Honorable members of the Public Health and Welfare Committee, we appreciate having this opportunity to appear before you and to submit our testimony.

Facts about the Kansas Association for Marriage and Family Therapy (KAMFT)

KAMFT is the Kansas division of the American Association for Marriage and Family Therapy (AAMFT), a national organization with more than 12,000 members. AAMFT (founded in 1942) is the leading organization representing the profession of marriage and family therapy. AAMFT offers professional contact and exchange of information, and serves the public interest through the advancement of the ethical practice of marriage and family therapy. AAMFT establishes minimum standards for training and experience and provides voluntary credentialing for its members. KAMFT is the only active organized group in Kansas made up exclusively of marriage and family therapists.

Marriage and family therapists work primarily with couples and with whole families (parents with their children). Competent practice of this profession requires a distinct body of knowledge and a sophisticated level of training.

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The Commission on Accreditation of the American Association of Marriage and Family Therapy was designated the accrediting agency for marriage and family educational and training programs by the U.S. Department of Health, Education, and Welfare in 1978 and was renewed as such in 1985. Kansas State University offers the only accredited training program in Kansas for marriage and family therapists, and is one of only three institutions in the country which offers accredited degrees at both the Master's and Doctoral levels. The Menninger Foundation, Wichita State University, and Friends University also offer training programs.

KAMFT SUPPORTS THE PROFESSIONAL COUNSELORS LICENSING ACT WITH MINOR
MODIFICATION

KAMFT supports this bill in the belief that it will serve to protect the public. State regulation of the various mental health professions assures the consumer seeking mental health services the ability to make informed decisions regarding the choice of a professional practitioner with an appropriate standard of training and experience. Mental health professionals are held accountable to state law and relevant sanctions. Today, with the absence of licensure, anyone (even an individual without any training) can legally call themselves a professional counselor (or marriage and family therapist) and practice that discipline. Clearly this is not in the best interest of the public.

While supporting this legislation, KAMFT believes that it will be in the best interest of the public to make the following modifications to the bill:

1) New Sec. 13

In section (a), specifically list "full members of the American Association for Marriage and Family Therapy" as one of the professions exempted from the professional counselors licensing act.

2) New Sec. 2

In section (i), "marriage and family counseling" will be deleted (not listed) as a specialty.

Rationale: In its present form, this bill would have the effect of having marriage and family therapists regulated by another profession. As marriage and family therapy is a distinct discipline requiring a specialized body of knowledge, it is in the best interest of the public that marriage and family therapists (not professionals from other disciplines) are given the responsibility for rule making, standard setting, and determination of appropriate qualifications for this profession. The above modifications would rectify this situation.

KAMFT has approached the Kansas Association for Counseling and Development (KACD) in order to bring these concerns to their attention. KACD was very receptive to our suggestions. In the spirit of cooperation, KAMFT and KACD have agreed to address these concerns in the following way. KACD has decided to delete the entire section 2, part (i), which would serve to eliminate the objectionable "marriage and family therapy" specialty. KACD is introducing an amendment this morning to this effect. KAMFT, in turn, is introducing an amendment which provides (in new Section 13) an exemption for "full members of the American Association for Marriage and Family Therapy" along with the other professions listed. This amendment has the full support of the KACD.

With the inclusion of these two amendments, KAMFT fully supports this legislation.



KADACA

Kan s Alcoholism and Drug Abuse Counselors Association

February 3, 1987

TO: Senate Public Health and Welfare Committee Members

FROM: Elizabeth E. Taylor, Association Director

RE: Opposition to SB 78

The Kansas Alcoholism and Drug Addiction Counselors Association, which has been certifying alcoholism and drug addiction counselors for over ten years, is the only organized group representing solely counselors in the alcoholism and drug addiction field. The criteria used by KADACA in certifying alcoholism and drug addiction counselors is recognized nationally and accepted for the benefit of reciprocity in 28 states. Under current law, alcoholism and drug addiction counselors voluntarily certify through KADACA; however, legislation is being proposed during the current legislative session to license alcoholism and drug addiction counselors.

The Kansas Alcoholism and Drug Addiction Counselors Association has several important concerns with those proposals found in SB 78.

- o The major concern of KADACA is that alcoholism and drug addiction counselors should not be included in a licensing act such as proposed in SB 78 for several reasons:

- o KADACA has a proven system of voluntary certification which is being offered in a licensure act separate from SB 78.

- o Alcoholism and addiction are a disease and therefore, do not fall under the type of activity referred to in SB 78.

- o KADACA, along with the 27 other reciprocal states utilizing nationally recognized standards in the treatment of the disease and should be regulated under an authority which accepts the qualifications necessary for treating the disease. The current proposal addresses concepts of counseling including development of "understanding of personal strengths and weaknesses, to restructure concepts and feelings, to define goals and to plan actions as these are related to personal, social, emotional, mental and career development and adjustment." These behavioral concepts do not address treatment of disease. Other provisions of the bill, including the educational requirements, neglect the proper experience and education necessary to alcoholism and drug addiction counseling.

- o Further, the bill would prohibit anyone from practicing "counseling" unless licensed as a "professional" counselor or "associate counselor".

- o KADACA also opposes the use of the term "professional counselor. This term is much too vague to allow the public any insight into the training of the counselor. Further it may project into the eyes of some that all others practicing counselors, including alcoholism and drug addiction counselors, are less "professional". If the intent is to protect the public, then the terms used should be clear and concise - they should indicate to the public exactly what education and experience is being afforded.

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TOPEKA, KS. 66601
(913) 233-7145

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o KADACA also opposes the use of the term "associate counselor". Not only is this term equally vague but it also infringes on the KADACA service marking which protects the terms "Associate Alcoholism and Drug Abuse Counselor" and any abbreviation of that term.

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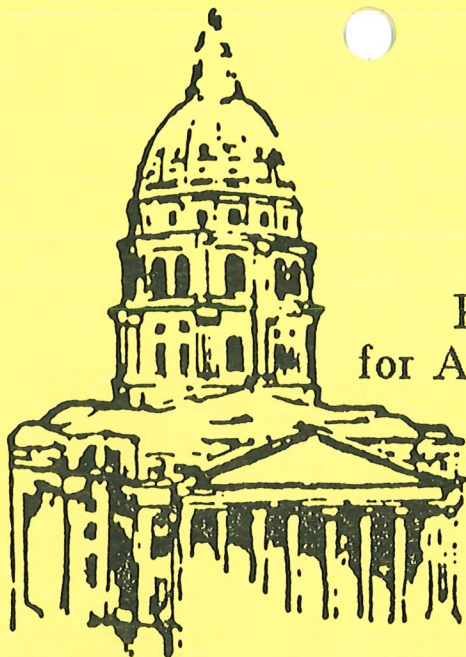
The affect of passage of SB 78 on the alcoholism and drug addiction field is devastating. Under the provisions of SB 78, only a handfull of those counselors who are certified under criteria which is nationally accepted would be able to continue their jobs. ONLY A HANDFULL!

We urge the defeat of SB 78 UNLESS to following provisions are made:

- o the exemption of alcoholism and drug addiction counselors from the provisions of SB 78;
- o the use of a term other than "Professional counselor";
- o the use of a term other than "Associate counselor".

Thank you for the opportunity to present our very grave concerns about a bill that would literally wipe out our profession.

s much too vague to be meaningful and, thus, does not protect the public.



KADACA LEGISLATIVE TOOLS for ALCOHOLISM and DRUG ADDICTION COUNSELOR LICENSURE

January, 1987

Enclosed are the legislative tools which KADACA will be using in the effort to mandate licensure of Alcoholism and Drug Addiction Counselors through legislation. These tools have been developed by the KADACA Ad Hoc Planning and Development Committee over the past several months and are intended to help Alcoholism and Drug Addiction Counselors and other interested parties understand the need for licensure of Alcoholism and Drug Addiction Counselors.

The materials enclosed herein are:

- KADACA Position Paper which describes the need for licensure and its rationale (canary yellow sheets);
- KADACA Prospectus which details the objectives KADACA wishes to achieve through legislation (canary yellow sheets);
- Common questions asked about licensure of Alcoholism and Drug Addiction Counselor licensure and KADACA's answers to these questions (blue sheets);
- "Grandfathering" statement which defines the provisions found in the bill (white sheets);
- Alcoholism and Drug Addiction Counselor Licensure Bill to be introduced into the 1987 Kansas Legislature (white sheets);
- KADACA National Affiliations (white sheets); and
- KADACA Criteria for Certification currently used by those who voluntarily certify (canary yellow sheets).

In your support of the licensure of Alcoholism and Drug Addiction Counselors, KADACA hopes that you will utilize these materials. For further information on the licensure effort, contact Elizabeth E. Taylor, KADACA Association Director, 112 West Sixth Street, P.O. Box 1732, Topeka, KS 66601, 913-233-7145.

NOTE: If you do not know who your legislators are, contact your County Elections Commissioner (telephone number found in the government listings of the telephone directory). They can tell you who your Representatives and Senators are by your address.



KADACA

Position Paper - Alcoholism and Drug Addiction Counselor Licensure

Counselor Credentialing in Kansas has been performed by a voluntary process under the professional association for the past 10 years. The current credentialing system reflects a "state of art" process that has evolved over this time. KADACA is a charter member of the National Association of Alcoholism and Drug Abuse Counselors. The KADACA certification requirements and testing methodology is approved by the Certification Reciprocity Consortium which sets the national standards for Alcoholism and Drug Addiction Counselors based upon the most current research on competency-based credentialing.

It is the position of KADACA that this credential become a mandatory standard for professional competency to practice Alcoholism and Drug Addiction Counseling in the state of Kansas through legislative action. This credentialing would be administered by a Licensure Board representing professionals in the field, other health professionals and the public. Provisions will be made to acknowledge those practicing alcoholism and drug addiction counseling under minimum criteria.

The rationale for such legislative action is as follows:

1. To promote the highest degree of professional care for clients and their families by mandating minimum standards of competency. Currently in Kansas there is no requirement for knowledge, experience, or expertise. Counselors who currently undergo certification do so voluntarily.
2. To insure that practicing counselors are in compliance with state and nationally recognized Code of Ethics and Standards for Professional Conduct.
3. To specify that the credentialing process is specific to the body of knowledge of our field.
4. To insure professional development and growth through licensure renewal requirements of ongoing education.
5. To insure that the credentialing will not entail further incumbrance of public tax dollars.
6. To insure that credentialing would be administered by trained evaluators experienced in recognized methodologies of alcoholism and drug addiction counseling and standardized measurements of competency.

Further the proposed licensure legislation:

- a. Does not require modification or appeal of existing legislation. Promotes public awareness and knowledge of addictive disease and encourages seeking of appropriate professional care and
- b. insures third party payors that services are being rendered by competent treatment professionals, as is done in other states, thereby increasing public access to competent care.



KADACA

KADACA PROSPECTUS - COUNSELOR LICENSURE

Revision Adopted by Committee

December 10, 1986

Below are the objectives for the state licensure of alcoholism and drug addiction counselors as proposed by the Kansas Alcoholism and Drug Addiction Counselors Association. The objectives will be used in assisting the State Revisor in the development of legislative language to be introduced into the 1987 Kansas Legislature.

- The body which will license alcoholism and drug addiction counselors will be a separate agency of the government of the state of Kansas called the "board of alcoholism and drug addiction professionals".
- Purpose. Recognizing that the practice of alcoholism and drug addiction counseling would be a privilege granted by legislative authority and, under licensure would not be a natural right of individuals, it is deemed necessary as a matter of policy in the interest of public health, safety and welfare, to provide laws and provisions covering the granting of that privilege and its subsequent use, control and regulation to the end that the public shall be properly protected against unprofessional, improper, unauthorized and unqualified practice of alcoholism and drug addiction counseling and from unprofessional conduct by persons licensed to practice under this act.
- Specific functions of the board include, but are not limited to:
 - a) Administration of the licensure process;
 - b) Administration of renewal process;
 - c) Administration of ongoing training program for case presentation evaluators;
 - d) Awarding of licensure and renewal to qualified applicants;
 - e) Administration of professional code of ethics;
 - f) Establishment of procedures for periodic review of standards, examinations and revisions where appropriate;
 - g) Development of policies and procedures for handling grievances, revocations and appeals;
 - h) Setting of all fees in licensure/renewal process;
 - i) Preparation of annual budget;
 - j) Negotiations for recognition of licensure and reciprocity agreements with other states and other licensing, accreditation and/or certifying bodies; and
 - k) Hiring of staff to carry out functions of the Board.

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- Composition of the board: The board shall consist of nine members appointed by the governor as follows: Five shall be alcoholism and drug addiction counselors and four shall be representatives of the general public. Each member of the board who is an alcoholism and drug addiction counselor shall be licensed or eligible for licensure under this act. In making these appointments the governor shall make as far as practicable appointments so that the members of the board will be representative of the geographical areas of the state.
- Appointment to the board and term of office of each member of the board shall be three years, except that for members first appointed to the board three shall be appointed for terms of one year, three shall be appointed for terms of two years and three shall be appointed for terms of three years as designated by the governor. Members of the board may be removed for cause. Upon the death, resignation or removal for cause of any member of the board, the governor shall fill such vacancy for the remainder of such member's term. For the initial appointment of the five alcoholism and drug addiction counselor members and for subsequent appointments upon vacancies in such positions, the Kansas Alcoholism and Drug Addiction Counselors Association shall submit to the governor a list of alcoholism and drug addiction counselors containing names of not less than three times the number of persons to be appointed and appointments shall be made after consideration of such list.
- Fees. The Board shall charge and collect in advance fees established such as to maintain self-sufficiency of the Board.
- The Board may develop rules and regulations to direct the duties and powers as described above.
- Nothing in the act shall be construed to prevent qualified members of other professions from doing work of a counseling nature with alcoholics and drug addicts consistent with their training and consistent with any code of ethics of their respective profession so long as they do not hold themselves out to the public as alcoholism and drug addictions counselors as licensed under this act.

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NOTE: Until such time as the proposed licensure of alcoholism and drug addiction counselors is passed, KADACA will maintain certification of alcoholism and drug addiction counselors. Until licensure is achieved, the language above which specifies 'licensed' counselor will refer to the current 'certified' counselor.

----- Statutory language versus Regulations. The basic foundations of the licensure of alcoholism and drug addiction counselor will be put into the proposed bill (statute). All technicalities needed to make the legislative intentions work will be developed by the board under its authority to make rules and regulations. Technical questions such as continuing education hours, requirements for reciprocity, etc. will be considered by the rules and regulations process instead of being written into the legislation.

COMMON QUESTIONS ASKED ABOUT THE LICENSURE OF ALCOHOLISM AND DRUG ADDICTION COUNSELORS

The Kansas Alcoholism and Drug Addiction Counselors Association consists of over 300 Associate, Certified and Senior Certified Alcoholism and Drug Addiction Counselors in Kansas. In July, 1986, the membership strongly affirmed its support of seeking a legislative mandate for the licensure of ALL Alcoholism and Drug Addiction Counselors in Kansas. Below are some common questions asked by the public, counselors, and policy makers on the licensure effort undertaken by KADACA. Legislation will introduced into the 1987 Kansas Legislature in an effort to make this licensure possible.

Who are Alcoholism and Drug Addiction Counselors?

Alcoholism and Drug Addiction Counselors, under current law, can be anyone. Those Alcoholism and Drug Addiction Counselors who voluntarily become credentialed through KADACA show minimum qualifications at three levels of competency. Alcoholism and Drug Addiction Counselors, whether voluntarily certified or not, can be employed in services such as education, intervention, detoxification, outpatient treatment, residential treatment, inpatient treatment, and aftercare treatment. To work in these facilities providing alcoholism and drug addiction counseling to patients and their families currently requires no experience or education in the disease of alcoholism and addiction.

What are the requirements to be an Alcoholism and Drug Addiction Counselor?

Again, there are no requirements for becoming an alcoholism and drug addiction counselor under Kansas law.

What form of credentialing is currently available for Alcoholism and Drug Addiction Counselors?

Alcoholism and Drug Addiction Counselors may credential voluntarily through the Kansas Alcoholism and Drug Addiction Counselors Association. The credentials available are:

Associate Alcoholism and Drug Addiction Counselor which requires a minimum level of experience in the field (1 year) and educational coursework (90 hours) in order to be eligible;

Certified Alcoholism and Drug Addiction Counselors must meet more extensive qualifications. These include three years experience in the field, 270 hours of education coursework, 300 hours of practical experience in 12 defined counseling skills (core functions), and the successful passage of both written and oral examinations.

Senior Certified Alcoholism and Drug Addiction Counselors must have practiced alcoholism and drug addiction counseling for 5 years, demonstrate supervisory skills education and successfully pass the written examination with a greater level of proficiency than accepted for the Certified Counselor.

Why do Alcoholism and Drug Addiction Counselors need to be licensed?

Alcoholism and Drug Addiction Counselors need to be licensed primarily for the protection of the public. With no current requirements of a person practicing alcoholism and drug addiction counseling, addicts and their families have no protection for the services they receive. No ethical, education, experiential standards are guaranteed. At the time counseling services are provided the patient and his family are very dependent on those services for the maintenance of employment, the family and even SURVIVAL. Kansas citizens should be afforded the protection of minimal requirements of the Alcoholism and Drug Addiction Counselors providing these essential services.

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Why not license Alcoholism and Drug Addiction Counselors under an existing board?

For example, why not the Behavioral Sciences Regulatory Board?

The Behavioral Sciences Regulatory Board has been established to regulate professions which are academia-based. National statistics and studies will affirm that the Alcoholism and Drug Addiction profession MUST remain one which is experientially AND educationally based. The devastating effects of alcoholism and drug addiction are so paramount in today's society that they require separate consideration. The state of Kansas shows its belief in this necessity of separation by providing for the division of Alcohol and Drug Abuse Services. Nationally we see the same reaffirmation of the separate nature of services for this affliction.

Why not the SRS/ADAS?

The division of Alcohol and Drug Abuse Services of the department of Social and Rehabilitation Services are, under state law (KSA 65-4106), prohibited from participating in the selection of employees which provide alcoholism and drug addiction services. Further, the KADACA believes that the department which controls the funding for programming should not be allowed to also control the selection of employees for that facility. The KADACA sees a very clear conflict of interest in such a policy.

The Kansas Legislature established the Statewide Health Coordinating Council approximately 10 years ago to review applicant groups seeking licensure by the Kansas Legislature.

Why shouldn't the Alcoholism and Drug Addiction Counselors go through the SHCC process before proposing licensure to the Legislature?

The SHCC process was established to provide a means of receiving and reviewing information about groups seeking licensure. Many of these had not formerly been established and did not have their base of knowledge established as a health care provider. Alcoholism and Drug Addiction Counseling is a nationally established profession with national statistics and studies which already document and verified the information which would be sought by the SHCC. KADACA believes it would be wasteful and inefficient for the state of Kansas to spend the time and money needed for the lengthy and complex SHCC process when the information SHCC would receive is already available.

What would the effects of licensure of Alcoholism and Drug Addiction Counselors be on public health?

The public health of Kansas who receive Alcoholism and Drug Addiction Counseling services would be protected more than it is protected under the current law (where protection is nonexistent). Consumers of Alcoholism and Drug Addiction Counseling services would be assured that those practicing in the field would have to meet at least minimal requirements of education and experience before they could practice as an Alcoholism and Drug Addiction Counselor.

What effect would licensure have on the availability of Alcoholism and Drug Addiction Counselors?

Under the KADACA proposed legislation, availability of Alcoholism and Drug Addiction Counselors would be minimally affected if at all. Currently approximately 1000 are practicing Alcoholism and Drug Addiction Counseling (this estimate provided by SRS/ADAS); however, only 300 Alcoholism and Drug Addiction Counselors are credentialed by KADACA. Under licensure it would no longer be possible for those with little or no education or experience in Alcoholism and Drug Addiction Counseling to provide services of Alcoholism and Drug Addiction Counseling (except as provided by separate licensing authority).

(continued on page 19)

Kansas Alcoholism and Drug Abuse Counselors Association



KADACA

KADACA LICENSURE LEGISLATION GRANDFATHERING PROVISIONS

Grandfathering is provided in the KADACA licensure legislation in two ways:

For currently certified alcoholism and drug addiction counselors:

"Those persons who are certified on the effective date of this act by the Kansas alcoholism and drug addiction counselors association as alcoholism and drug addiction counselors shall be licensed under the provisions of this act as alcoholism and drug addiction counselors."

For currently practicing, but uncertified, alcoholism and drug addiction counselors:

"Those persons who, on the effective date of this act, can demonstrate as determined by the board practice of alcoholism and drug addiction counseling during 3 of the 5 years prior to application shall be licensed under the provisions of this act as alcoholism and drug addiction counselors."

For those practicing other professions:

"Nothing in this act shall be construed to prevent qualified members of other professions from doing work of a counseling nature with alcoholics and drug addicts consistent with their training and consistent with any code of ethics of their respective professions so long as they do not hold themselves out to the public as licensed alcoholism and drug addiction counselors."



TO: KADACA Membership
FROM: Elizabeth E. Taylor, Association Director
RE: A/D Counselor Licensure Bill

The following is a copy of the A/D Counselor Licensure Bill which the KADACA Planning and Development Committee has approved for introduction into the 1987 Kansas Legislature. Please note the following provisions in the bill:

- A/D Counselors will fall under the authority of the state "board of alcoholism and drug addiction professionals" which is set up as a separate agency as defined on page 1 of the bill;
- "Practice of alcoholism and drug addiction counseling" is defined on page 1 of the bill;
- Composition of the board is 9 members, five of which are A/D Counselors and 4 are members of the public as described on page 2 New Section 3 (a) of the bill;
- Term of office is described on page 2 New Section 3 (b);
- Duties of the board are described on page 3 New Section 4;
- Who is eligible for licensure is described on page 4 New Section 5;
- Grandfathering is provided on page 5 New Section 7 (a) for KADACA Certified Counselors, and page 5 New Section 7 (b) for those who are not certified but are practicing as A/D counselors;
- Fees for licensure are described on page 6 New Section 11;
- Exemption for those practicing other licensed professions is described on page 7 New Section 12;
- All provisions from Section 14 on relate to the distribution of the portion of the fee which is deposited to the general fund and used for the corn commission, wheat commission, etc and do not affect A/D licensure. Please disregard this portion of the bill - it is common for all licensure bills.

If you have any questions about the bill or the legislative process, please feel free to contact me, Ron Eisenbarth (Legislative Chair) or Virginia Arnold (KADACA President).

By _____

AN ACT providing for the licensing of alcoholism and drug addiction counselors; establishing the board of alcoholism and drug addiction professionals and providing for the powers, duties and functions thereof; establishing the alcoholism and drug addiction counselors fee fund; declaring certain acts to be unlawful and prescribing penalties for violations; amending K.S.A. 1986 Supp. 75-3170a and repealing the existing section.

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

New Section 1. As used in sections 1 to 13, inclusive, of this act:

(a) "Board" means the board of alcoholism and drug addiction professionals.

(b) "Licensed alcoholism and drug addiction counselor" means a person licensed under the provisions of this act to practice alcoholism and drug addiction counseling.

(c) "Practice of alcoholism and drug addiction counseling" means the activity of counseling individuals and families with problems caused by the effects of the abuse of or addiction to alcohol or drugs, or both, including but not limited to physiological and pharmacological effects, psychological effects including family illnesses and socio-cultural effects. The practice of alcoholism and drug addiction counseling requires a comprehensive knowledge of the diseases of addiction, their development, process and progression and human development and behavior, of family dynamics and interaction, of environmental and socio-cultural aspects of minorities and special groups and of the signs and symptoms of alcoholism and drug addiction. The practice of alcoholism and drug addiction counseling includes the

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use of basic communication skills, the use of analytical skills in evaluation and assessment, case planning, referral skills and treatment through counseling.

New Sec. 2. No person shall hold oneself out to the public or represent oneself by any title or description of services incorporating the words "licensed alcoholism and drug addiction counselor" or any abbreviation of such title authorized by the board, and under such title, description or abbreviation, or any word, letter, signs, figures or devices which indicate that the person using the same is licensed under this act, offer to render or render services to individuals, corporations or the public for a fee, monetary or otherwise, unless such person is a licensed alcoholism and drug addiction counselor.

New Sec. 3. (a) There is hereby created the board of alcoholism and drug addiction professionals. The board shall consist of nine members appointed by the governor as follows: Five shall be alcoholism and drug addiction counselors and four shall be representatives of the general public. Each member of the board who is an alcoholism and drug addiction counselor shall be licensed or eligible for licensure under this act. In making these appointments the governor shall make as far as practicable appointments so that the members of the board will be representative of the geographical areas of the state.

(b) The term of office of each member of the board shall be three years, except that for members first appointed to the board three shall be appointed for terms of one year, three shall be appointed for terms of two years and three shall be appointed for terms of three years as designated by the governor. Members of the board may be removed for cause. Upon the death, resignation or removal for cause of any member of the board, the governor shall fill such vacancy for the remainder of such member's term. For the initial appointment of the five alcoholism and drug addiction counselor members and for subsequent appointments upon vacancies in such positions, the Kansas alcoholism and drug addiction counselors association shall submit to the governor a

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list of alcoholism and drug addiction counselors containing names of not less than three times the number of persons to be appointed and appointments shall be made after consideration of such list.

(c) The board may appoint an executive secretary who shall be in the unclassified service under the Kansas civil service act and shall receive an annual salary fixed by the board, subject to approval by the governor. The board may employ clerical personnel and other assistants, all of whom shall be in the classified service under the Kansas civil service act. The board may make and enter into contracts as necessary for the performance of its powers, duties and functions.

(d) Members of the board attending meetings of such board or attending a subcommittee meeting thereof authorized by such board shall be paid amounts provided in subsection (e) of K.S.A. 75-3223 and amendments thereto.

New Sec. 4. The board shall have the following powers, duties and functions for the purpose of administering the provisions of this act:

(a) Annually publish a list of the names and addresses of all persons who are licensed under this act;

(b) recommend to the appropriate district or county attorney prosecution for violations of this act;

(c) prescribe the form and contents of examinations required for licensure under the provisions of this act;

(d) prescribe and enforce rules and regulations for professional conduct of licensed alcoholism and drug addiction counselors;

(e) enter into contracts necessary for the administration of this act;

(f) adopt an official seal;

(g) appoint an executive secretary and other employees as provided in section 3;

(h) adopt and enforce rules and regulations establishing requirements for the continuing education of persons licensed

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under this act, which rules and regulations shall not require more than 60 clock hours of continuing education every two years; and

(i) adopt such other rules and regulations necessary for the administration of this act.

New Sec. 5. The board shall issue a license as an alcoholism and drug addiction counselor to an applicant who

(a) has graduated from a high school accredited by the appropriate legal accrediting agency or has otherwise attained the equivalent of a high school education;

(b) has at least three years of full-time, paid supervised experience in one or more areas of alcoholism and drug addiction counseling as determined by the board;

(c) has completed 270 clock hours of training programs in alcoholism and drug addiction counseling approved by the board;

(d) has at least 300 hours of supervised practical experience as determined by the board in the following 12 nationally recognized alcoholism and drug addiction counseling core functions: (1) Screening of clients for program admission; (2) intake assessment procedures for program admission; (3) orientation of the client to program requirements; (4) assessment of client for development of a treatment plan; (5) treatment planning for client; (6) counseling; (7) case management; (8) crisis intervention; (9) client education; (10) referral of client for assistance to appropriate individuals or support systems within the community, or both; (11) reports and record keeping; and (12) consultation with other professionals in regard to client treatment and services; and

(e) has completed successfully oral and written examinations as determined by the board.

New Sec. 6. The board may issue a temporary license to practice as a licensed alcoholism and drug addiction counselor under such circumstances as may be specified by rules and regulations of the board. A temporary license shall be effective for a period of time specified by the board but shall not exceed

six months.

New Sec. 7. (a) Those persons who are certified on the effective date of this act by the Kansas alcoholism and drug addiction counselors association as alcoholism and drug addiction counselors shall be licensed under the provisions of this act as alcoholism and drug addiction counselors.

(b) Those persons who, on the effective date of this act, can demonstrate, as determined by the board, the practice of alcoholism and drug addiction counseling during three of the five years prior to application shall be licensed under the provisions of this act as alcoholism and drug addiction counselors.

New Sec. 8. The board may refuse to grant or renew a license or may suspend or revoke a license issued under this act upon proof, after a hearing, that the applicant for a license or the licensee:

(a) Has been convicted of a felony and, after investigation, the board finds that the applicant for a license or the licensee has not been sufficiently rehabilitated to merit the public trust; or

(b) has been found guilty of fraud or deceit in connection with services rendered as a licensed alcoholism and drug addiction counselor or in establishing required qualifications under this act; or

(c) has knowingly aided or abetted a person, not a licensed alcoholism and drug addiction counselor, in representing such person as a licensed alcoholism and drug addiction counselor in this state; or

(d) has committed unprofessional acts as defined by rules and regulations of the board; or

(e) has been negligent or has committed wrongful acts in the performance of the duties of an alcoholism and drug addiction counselor.

New Sec. 9. Proceedings under this act shall be conducted in accordance with the Kansas administrative procedure act. Judicial review and civil enforcement of agency actions under

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this act shall be in accordance with the act for judicial review and civil enforcement of agency actions.

New Sec. 10. (a) All licenses shall be effective on the date issued or renewed by the board and shall expire two years subsequent to the date of issuance or renewal.

(b) Except as otherwise provided in section 8, a license may be renewed by the payment of the renewal fees set forth in section 11 and the execution and submission of a signed statement on a form to be provided by the board attesting that the applicant's license has not been denied, revoked or currently suspended and that the applicant has met the requirements for continuing education established by the board.

New Sec. 11. (a) The following license fees shall be fixed by the board by rules and regulations in accordance with the following limitations:

(1) Application fee for a license as an alcoholism and drug addiction counselor shall be not more than \$75;

(2) examination fee shall be not more than \$100;

(3) license renewal fee shall be not more than \$100;

(4) temporary license fee shall be not more than \$50; and

(5) certified copy of license shall be not more than \$20.

(b) Subject to limitations established under subsection (a), fees shall be fixed under subsection (a) in amounts necessary to cover all expenses of the administration of this act.

(c) The board shall remit all moneys received from fees, charges or penalties to the state treasurer at least monthly. Upon receipt of such remittance, the state treasurer shall deposit the entire amount thereof in the state treasury. Twenty percent of each such deposit shall be credited to the state general fund and the balance shall be credited to the alcoholism and drug addiction counselors fee fund, which fund is hereby established. All expenditures from such fund shall be made in accordance with appropriation acts upon warrants of the director of accounts and reports issued pursuant to vouchers approved by

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the board or a person designated by the board.

New Sec. 12. Nothing in this act shall be construed to prevent qualified members of other professions from doing work of a counseling nature with alcoholics and drug addicts consistent with their training and consistent with any code of ethics of their respective professions so long as they, do not hold themselves out to the public as licensed alcoholism and drug addiction counselors.

New Sec. 13. (a) On and after July 1, 1988, it shall be unlawful for any person to:

(1) Obtain or attempt to obtain a license or renewal thereof by fraudulent representations;

(2) knowingly make a false statement in connection with any application under this act; or

(3) violate any provision of section 2.

(b) Any person convicted of an unlawful act under subsection (a) shall be guilty of a class B misdemeanor.

Sec. 14. K.S.A. 1986 Supp. 75-3170a is hereby amended to read as follows: 75-3170a. (a) The 20% credit to the state general fund required by section 11 and K.S.A. 1-204, 2-2609, 2-3008, 9-1703, 16-609, 16a-2-302, 17-1271, 17-2236, 17-5609, 17-5610, 17-5612, 17-5701, 20-1a02, 20-1a03, 34-102b, 44-324, 44-926, 47-820, 49-420, 55-131, 55-155, 55-609, 55-711, 55-901, 58-3074, 65-6b10, 65-1718, 65-1817a, 65-2011, 65-2418, 65-2855, 65-2911, 65-4610, 66-1,155, 66-1503, 74-715, 74-1108, 74-1405, 74-1503, 74-1609, 74-2704, 74-2902a, 74-3903, 74-5805, 74-7009, 74-7506, 75-1119b, 75-1308 and 75-1509 and K.S.A. 1986 Supp. 65-5413 and 65-5513 and acts amendatory of any of the foregoing including amendments by other sections of this act is to reimburse the state general fund for accounting, auditing, budgeting, legal, payroll, personnel and purchasing services, and any and all other state governmental services, which are performed on behalf of the state agency involved by other state agencies which receive appropriations from the state general fund to provide such services.

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(b) Nothing in this act or in the sections amended by this act or referred to in subsection (a) of this section, shall be deemed to authorize remittances to be made less frequently than is authorized under K.S.A. 75-4215 and amendments thereto.

(c) Notwithstanding any provision of any section referred to in or amended by this act or referred to in subsection (a) of this section, whenever in any fiscal year such 20% credit to the state general fund in relation to any particular fee fund is \$200,000, in that fiscal year the 20% credit no longer shall apply to moneys received from sources applicable to such fee fund and for the remainder of such year the full 100% so received shall be credited to such fee fund, except as otherwise provided in subsection (d) of this section.

(d) Notwithstanding any provision of K.S.A. 2-2609 and 2-3008 and amendments thereto or any provision of any section referred to in subsection (a) of this section, the 20% credit to the state general fund no longer shall apply to moneys received from sources applicable to the Kansas wheat commission fund, the Kansas corn commission fund, the Kansas grain sorghum commission fund and the Kansas soybean commission fund, as specified for each such fund by this subsection, and for the remainder of a fiscal year the full 100% of the moneys so received shall be credited to the appropriate fund of such funds, whenever in any fiscal year:

(1) With respect to the Kansas wheat commission fund, such 20% credit to the state general fund in relation to such fund in that fiscal year is equal to that portion of \$200,000 that bears the same proportion to \$200,000 as the amount credited to the Kansas wheat commission fund during the preceding fiscal year bears to the total of the amounts credited to the Kansas wheat commission fund, the Kansas corn commission fund, the Kansas grain sorghum commission fund and the Kansas soybean commission fund during the preceding fiscal year;

(2) with respect to the Kansas corn commission fund, such 20% credit to the state general fund in relation to such fund in

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that fiscal year is equal to that portion of \$200,000 that bears the same proportion to \$200,000 as the amount credited to the Kansas corn commission fund during the preceding fiscal year bears to the total of the amounts credited to the Kansas wheat commission fund, the Kansas corn commission fund, the Kansas grain sorghum commission fund and the Kansas soybean commission fund during the preceding fiscal year;

(3) with respect to the Kansas grain sorghum commission fund, such 20% credit to the state general fund in relation to such fund in that fiscal year is equal to that portion of \$200,000 that bears the same proportion to \$200,000 as the amount credited to the Kansas grain sorghum commission fund during the preceding fiscal year bears to the total of the amounts credited to the Kansas wheat commission fund, the Kansas corn commission fund, the Kansas grain sorghum commission fund and the Kansas soybean commission fund during the preceding fiscal year; and

(4) with respect to the Kansas soybean commission fund, such 20% credit to the state general fund in relation to such fund in that fiscal year is equal to that portion of \$200,000 that bears the same proportion to \$200,000 as the amount credited to the Kansas soybean commission fund during the preceding fiscal year bears to the total of the amounts credited to the Kansas wheat commission fund, the Kansas corn commission fund, the Kansas grain sorghum commission fund and the Kansas soybean commission fund during the preceding fiscal year.

Sec. 15. K.S.A. 1986 Supp. 75-3170a is hereby repealed.

Sec. 16. This act shall take effect and be in force from and after its publication in the statute book.



KADACA NATIONAL ASSOCIATION AFFILIATIONS

CRC/AODA

The Certification Reciprocity Consortium/Alcohol and Other Drug Abuse functions as a national organization promoting and implementing a process for reciprocity of alcoholism and drug addiction counselor certification to member states. CRC/AODA has developed minimum requirements of education and drug addiction counseling plus a case presentation method (CPM) of oral testing. The CPM evaluates counselor competency based on the findings of the federally approved Birch and Davis Study which further has been validated by the National Institute on Alcohol Abuse and Alcoholism. The significance of this study demonstrates that alcoholism and drug addiction counselors must possess knowledge and skills obtained through experience and competency in specific counselor functions. CRC/AODA's case presentation method of oral testing evaluates counselor competency based on the 12 core counselor functions identified by the Birch and Davis Study. CRC/AODA has further developed and implemented a standardized training of evaluators to maintain consistency in the evaluation of counselor competency. CRC/AODA currently maintains reciprocity in over half of the states in the United States.

NAADAC

Founded in 1972, the National Association of Alcoholism and Drug Abuse Counselors is the only national organization representing more than 22,000 alcoholism and drug addiction counselors in the United States, Canada and the United Kingdom. NAADAC promotes the growth of alcoholism and drug addiction counseling as a profession and serves as an advocate for counselors on issues that affect the profession.

NAADAC and its state and local affiliates are legislative advocates on both state and federal levels. Nationally, NAADAC maintains contact with congressional staffs, supplies expert testimony at congressional hearings and sponsors dialogue with national leaders. NAADAC also acts as a liaison representative to: NIAAA, National Institute on Drug Abuse, the National Commission on Accreditation of Certifying Bodies, CRC/AODA, United States Alcoholism and Drug Abuse Counselors, American Bar Association and the Commission of Youth Alcohol and Drug Problems.

Approved by committee December, 1986

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What effect would licensure have on the cost of alcoholism and drug addiction services?

A common concern of policy makers toward licensing any profession is the cost of providing the service if the provider in fact holds a credential. The licensure of a profession does not automatically mean that the cost of providing the service will increase. In other professions which have become licensed in many states, statistics were gathered over a long period after licensure took effect. These statistics can show that increase fees do not automatically follow the licensure of a profession.

Isn't the public protected already by licensing the program in which the counselor works?

KADACA thinks not. When a program is regulated by the state, the qualifications of the personnel actually providing the service is not usually mandated. In the case of programs regulated by the Alcohol and Drug Abuse Services of the department of Social and Rehabilitation Services, for example, statutory language specifically prohibits the participation in staff selection and qualification.

KADACA believes very strongly that those Alcoholism and Drug Addiction Counselors providing the actually service to alcoholics and addicts MUST meet minimum criteria showing competence.

What criteria would Alcoholism and Drug Addiction Counselors need to meet in order to be licensed as proposed by KADACA?

KADACA supports the maintenance of currently established national criteria for licensure. In the proposed legislation, these criteria are the same as for the Certified Alcoholism and Drug Addiction Counselor as listed above. These include: three years experience in the field of Alcoholism and Drug Addiction Counseling, 270 hours of educational coursework, 300 hours of practical experience in the 12 core counseling functions, and successful passage of both written and oral examination. All of these requirements are currently met by those who voluntarily certify. Further, these criteria are nationally supported. Twenty-eight states follow the same criteria.

The levels of counselor credentialing for the entry level (Associate Alcoholism and Drug Addiction Counselor as defined above) and for the extended level (Senior Alcoholism and Drug Addiction Counselor above) would be maintained by KADACA. Persons practicing at the Associate level would not legally be considered Alcoholism and Drug Addiction Counselors; instead they would be in training or apprenticeship positions until they can meet all minimal criteria for licensure.

Would Alcoholism and Drug Addiction Counselors who are currently practicing be covered by the proposed legislation?

The proposed legislation provides for 'grandfathering' of Alcoholism and Drug Addiction Counselors in two ways: first, any Alcoholism and Drug Addiction Counselor certified by KADACA on the effective date of the legislation would automatically be eligible for licensure. Secondly, any person demonstrating to the satisfaction of the board of alcoholism and drug addiction professionals (which under the proposed legislation would be the licensing body) that they have been practicing Alcoholism and Drug Addiction Counseling for three of the five years prior to application would also be eligible for licensure.

How would other professionals who practice counseling be affected?

Those persons regulated under other legal authority to practice their profession would be able to continue to practice their profession even if such practice includes activities of a counseling nature to alcoholics and addicts so long as they use their professional title and not the title of "Alcoholism and Drug Addiction Counselor".

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What kind of legislative support has been gained for the licensure of Alcoholism and Drug Addiction Counselors?

KADACA is supported in its legislative effort for licensure of Alcoholism and Drug Addiction Counselors by most of the professional associations within the field. At this time, these include the Kansas Association of Alcohol and Drug Program Directors, the Kansas Citizens Advisory Committee, the Kansas Association of Prevention Professionals, the Kansas Coalition of Alcohol and Drug Safety Action Projects and the National Association of Alcoholism and Drug Abuse Counselors. KADACA is continually expanding this base of support.

For additional information about the proposed legislation to license Alcoholism and Drug Addiction Counselors, contact Elizabeth E. Taylor, Director, Kansas Alcoholism and Drug Addiction Counselors Association, P.O. Box 1732, Topeka, KS 66601, 913-233-7145.

Prepared December, 1986



CERTIFICATION CRITERIA

KADACA recognizes three levels of membership. The Certified Alcoholism and Drug Addiction Counselor is the level which KADACA anticipates will become the licensed Alcoholism and Drug Addiction Counselor under the proposed legislation. The Associate Alcoholism and Drug Addiction Counselor (entry level which is not considered "Certified") and the Senior Certified Alcoholism and Drug Addiction Counselor will be levels of recognition maintained by KADACA after licensure is implemented by the state Board of Alcoholism and Drug Addiction Professionals.

Certified Alcoholism and Drug Addiction Counselor - (CADC) must:

1. Meet criteria of Associate Alcoholism and Drug Addiction Counselor (for detail see other side) AND
2. Documentation of three (3) years full-time, paid, supervised counseling experience in the field of alcoholism and drug addiction within the last five (5) years. (Qualifying experience requires a minimum of one (1) year of drug abuse services, if experience is not obtained in a combined alcoholism/drug addiction program); AND
3. Documentation of 270 clock hours of education/training related to alcoholism and drug addiction counseling; AND
4. Documentation of 300 hours of supervised practical experience (supervised practicum) specifically dealing with the twelve core counseling functions. Practicum requirements may be met through work/academic qualifying experience upon approval by the Certification Board. AND
5. Successful execution of the KADACA certification testing by both written and case presentation method, at a proficiency level established by the Certification Board.

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Associate Alcoholism and Drug Addiction Counselor - (AADC)

Applicant must meet at least one of the following criteria:

1. Documentation of high school graduation or G.E.D., plus one year of full-time (2080 hours), paid, supervised counseling experience in the field of alcoholism/drug addiction within the last three (3) years, plus documentation of 90 clock hours of counselor education/training* as approved by the Certification Board.
2. An Associate or higher degree in alcoholism or drug addiction counseling, plus six (6) months of full-time (1040 hours), paid, supervised counseling experience in the field of alcoholism and drug addiction within the last three (3) years.
3. A Bachelor or higher degree in a health related field, plus six (6) months of full-time (1040 hours), paid, supervised counseling experience in the field of alcoholism and drug addiction within the last three (3) years, plus documentation of 90 clock hours of counselor education/training* subject to approved by the Certification Board.

NOTE: Documentation of 1040 hours supervised voluntary clinical service in an alcoholism or drug addiction related service within the last two (2) years may be substituted for the requirement of six (6) months of full-time, paid, supervised counseling experience. Persons granted a six-month work equivalence for college degree or voluntary experience are still obligated to meet the three-year, full-time, paid, supervised counseling experience requirement (as part of the total requirements) in order to advance to the Certified level.

All candidates are subject to evaluation and approval by the Certification Board, which may include a formal screening process.

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*Education/Training Stipulations

1. No more than one third (30) of the total hours may consist of agency inservice education/training conducted by "in-house staff".
2. No more than one third (30) of the total hours may consist of agency inservice education/training conducted by outside resource persons.
3. At least one third (30) of the total hours must be in KADACA approved education/training outside the applicant's work setting.

Documentation of education/training must be submitted to the Education Committee for approval.

Senior Certified Alcoholism and Drug Addiction Counselor - (SCADC) must:

1. Meet the criteria of Certified Alcoholism and Drug Addiction Counselor; AND
2. Documentation of five (5) years of full-time, paid, supervised counseling experience in the field of alcoholism and drug addiction within the last eight (8) years; two (2) of which must include supervisory training; AND
3. Documentation of ninety (90) clock hours in KADACA approved programs within the last two years, 15 of which must include supervisory skills training; AND
4. Successful execution of the KADACA certification testing at an overall proficiency as established by the Certification Board.

1986

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JANUARY 22, 1987

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TOPEKA, KS. 66601
(913) 233-7145

TESTIMONY ON SENATE BILL 78
Before the Senate Public Health & Welfare Committee

Mr. Chairman, and members of the committee, I represent the Kansas Community Alcohol Safety Action Project Coordinator's Association. The 25 members of our association provide the evaluation and supervision of those offenders convicted of D.U.I., or granted diversion from D.U.I., in the state of Kansas. Our evaluation contains the offenders prior traffic record and a history of alcohol or drug use and/or abuse. These reports are submitted to the district attorney, or the sentencing judge, prior to entering a diversion or a sentencing procedure. Under K.S.A. 8-1008, we are required to monitor the offender throughout the term of probation or diversion, notifying the court of any non-compliance on the offenders part to complete the education or treatment process as ordered by the court.

Our organizations are certified by the administrative judge, with the support of the majority of the judges, of each judicial district or by the secretary of the Social and Rehabilitation Services. Those of us who are certified by the secretary of Social Rehabilitation Services receive a certification which allows us to be classified as an out-patient diagnostic and referral agency. In addition, some of our organizations are also licensed as out-patient treatment facilities for those clients who are in need of alcohol and drug out-patient counseling.

Our concern is some of the language in Senate Bill 78 in as such as counseling, assessment and consultation and referral. Although later in the Senate Bill 78 it is pointed out that those people who are functioning as a counselor under a federal, state, county or municipal agency, or public or private educational institution, are exempt. However, a vast majority of our agencies are non-profit organizations who rely on client generated fees, such as the assessment fee established by K.S.A. 8-1008. We also are supplemented by some local liquor tax money from our local government entitites. We do not feel that we are part of any governmental body but are only a non-profit organization supplemental to that body providing a service to the client.

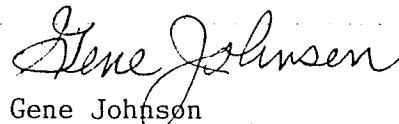
Another concern we have is the educational requirements as set forth in new section four and new section five. Should this legislation become law, over 70% of our membership would fail to qualify under educational standards. Although

the majority of our members do have a college degree of some standing, very few of them would meet the graduate requirement and sixty graduate semester hours.

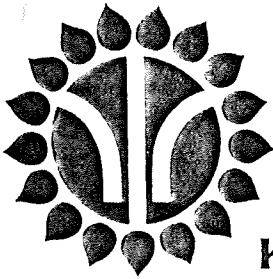
In addition, the majority of the members of our organization are certified by their peers of the Kansas Alcohol and Drug Counselors Association as certified alcohol and drug counselors. Although this is not a license, the certification procedure has been recognized by the secretary of the Social and Rehabilitation Services as the only certification process in the state at this time. We are hopeful that the Kansas Alcohol and Drug Counselors Association are successful in promoting some legislation which would allow the certification and licensing of alcohol and drug counselors.

It might be wise for this committee to take a look at the proposed legislation, which I believe will be introduced sometime this week, by the Kansas Alcohol and Drug Counselors Association.

Thank You



Gene Johnson
Kansas Community Alcohol Safety
Action Project Coordinator's
Association



KANSAS PSYCHOLOGICAL ASSOCIATION

February 3, 1987

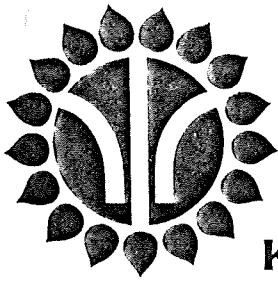
Senator Ehrlich, Members of the Committee:

Thank you for the opportunity to give testimony on Senate Bill 78. I am Richard Maxfield, Ph.D. I am the Chief Psychologist of the Diagnostic and Consultation Service of the Menninger Foundation. I am here today to represent the views of the Kansas Psychological Association.

Let me state from the outset that the Kansas Psychological Association strongly supports the idea of statutory regulation of professions to insure the protection of the public from unqualified or unethical providers. We are aware that this Bill grows out of a need to address the problem that persons with exceedingly variable education and preparation currently circumvent regulation by using the unregulated title Counselor. However, we have serious reservations about Senate Bill 78. Those reservations concern the scope of practice which this Bill would enact and, relatedly, the educational standards which the Bill requires.

In my reading of the Bill the definition of counseling is quite broad and includes the assessment and treatment of mental and emotional states or conditions. Thus, it is my belief that this Bill, if enacted, would allow counselors to diagnose and treat persons suffering from mental disease and illness. I do not believe that professional counselors, as defined by this Bill, are equipped to make accurate diagnoses and prescribe adequate treatment. Thus, consumers of the services of counselors could be ill-served if this Bill becomes law.

In my view the educational standards set forth in the Bill would not adequately prepare a practitioner to provide diagnostic and treatment services. In a nutshell those educational requirements are (1) a graduate degree, not necessarily in counseling; (2) 60 graduate semester hours, not necessarily in counseling; and (3) a list of areas one should have studied found on page 3 of the Bill. I do not believe that such a smattering of courses, taken in no particular sequence and without benefit of an organizing program of studies, adequately prepares one to assist troubled people. Conceivably one could receive a 30-hour Master's, take an additional 30 hours of credit and meet the educational standards set forth in this Bill. That is a far cry from the minimal standards set forth for the independent practice of psychology. Those standards include the earning of a Doctoral Degree from a recognized program in psychology and they require substantial coursework in areas such as: Cognition, biological bases of behavior, cognitive-affective bases of behavior, social bases of behavior, individual differences,



KANSAS PSYCHOLOGICAL ASSOCIATION

Senator Ehrlich, Members of the Committee
February 3, 1987

personality theory, human development and abnormal psychology, many hours in scientific and professional ethics, research, statistics, psychometrics (the theory and practice of evaluation), and history and systems of psychology.

I would also like to note that I believe that there are services which counselors could competently provide to aid clients in their adjustment to work, education, or phase of life difficulties. If this Bill restricted practice to preclude the diagnosis and treatment of mental disorders, I would urge you to support it. If this Bill had educational standards appropriate for the diagnosis and treatment of mental disorders, I would urge you to support. If this Bill required referral from a licensed psychologist or physician to insure adequate diagnosis and treatment planning, I would urge you to support it. However, as the Bill is currently written the public is not protected from the potential from harm by well-meaning but inadequately prepared practitioners. Rather, the public will have the potential for redress only after harm occurs, not unlike shutting the barn door after the horse is gone.

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

I stand in opposition to Senate Bill 78 in its current form. If Counselors wish to be credentialed by the State of Kansas, this is probably a good idea; The proper level of credentialing, however, is that of Registration, not licensure.

Recently, in its wisdom, the Kansas Legislature studied the issue of credentialing in interim study and then re-wrote the Kansas Credentialing Act. This was a good and carefully considered re-working. The act operationally makes Licensure the establishment of an exclusive scope of practice. In other words, no one who fails to be licensed in a legally defined area may practice duties defined within the scope of the licensure for that area. While it is possible to note that the proposed law does not intrude on other areas of practice, and while Senate Bill 78 makes such a notation, if those other areas of practice are not licensed, then they would potentially be precluded from the practice of anything defined as as counseling by a licensing law. Counseling is too general of a term for such restriction.

The Kansas Credentialing Act establishes Registration as an exclusive protection of a term. In other words, if Counselors were Registered, not Licensed, then no one could provide services defined by law as counseling, and call themselves a Counselor. The term "Counselor" would be protected for those who are Registered. This would adequately protect the public from harm. An individual wishing to consult a "Counselor" would know that anyone using that term has satisfied the requirements of a state law. Registration of counselors, however, would not prevent other qualified treatment personnel, such as for example Masters Level Registered Drama Therapists, from practicing their treatment modality. Licensure of Counselors, on the other hand, holds to potential of putting other qualified professionals, who do not happen to be licensed as counselors, out of business.

This is not the intent of credentialing in Kansas. The Kansas Credentialing Act, in fact, provides a level of recognition for individuals who practice human services in areas where state licensure or registration has not been sought or obtained. The act calls this level of credentialing, certification. Certification involves recognition by a Nationally recognized accrediting body established specifically to set qualifications and standards for the practice of specific modalities. If the Kansas Credentialing Act had been intended to allow broad groups, such as counselors, to obtain licensure, thus carving out an exclusive scope of practice, then this act would not have recognized the category of certification.

I will grant that this is all rather confusing. While the national accrediting body for drama therapists, The National Association for

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Drama Therapy, for example, accredits me as a Registered Drama Therapist, I am, from the view of the Kansas Credentialing Act, certified, not registered.

Despite the confusion, however, the Kansas Credentialing Act provides a good structure to protect the public from harm. If guidance from that Act is followed to the letter, then Counselors should be Registered, not Licensed.

Licensure of poorly defined, broad practices, and thus the carving out of exclusive territory for those practices, is not in the best public interest. It is more likely to cause harm than prevent it. Such licensure actually narrows the public's choices of treatment modalities. It would, for example, severely limit peer counseling as this art is currently facilitated through many centers for independent living for the disabled serving Kansas. It could restrict the practices of such modalities as Registered Drama Therapist, Rehabilitation Teacher, Instructor for the Blind, Art Therapist, Dance Therapist, and Music Therapist. These modalities all have certification, as defined in the Kansas Credentialing Act, through accrediting agencies, but do not have licensure or registration in Kansas.

When looking at any licensure bill it is important to ask, "Is the primary purpose of the bill truly to protect the public from harm, or is it simply to make more money for a certain special interest group?" I would encourage this Committee to consider this question with utmost gravity with reference to Senate Bill 78.

P.O.Box 1082
Emporia, KS 66801

The Honorable Roy Ehrlich
Chairperson
Public Health & Welfare Committee
State Capitol
Third Floor
Topeka, KS 66612

30 JAN 87

Subject: Licensing of Professional Counselors

Dear Sir:

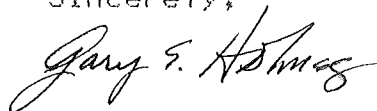
I understand that a hearing will soon be conducted by your committee on the proposed bill to license counselors. As a graduate student in rehabilitation counseling at Emporia State University, I want to say that I am opposed to this bill as written.

As I understand it, this bill would ~~prevent~~ professionally trained rehabilitation counselors from being licensed in Kansas. Although the reasons for this are complex and easily distorted, I encourage you to investigate how other states have handled this issue in such a way as to be fair to all types of counselors.

If I understand correctly, the purpose of licensing counselors is to protect the public. Although this is a worthwhile goal and one which I would gladly support, I do not think the current bill offers any such protection. Because rehabilitation counselors must deal with many different kinds of people with many different disabilities, it seems to me that the training standards endorsed by the national organizations for rehabilitation counselors should be recognized in any licensing bill for counselors.

I have tried to keep informed about this issue of licensing and have always found it extremely complex and confusing. I do not know of any easy way to word such a bill but I do know that what is to be decided may have a lasting impact upon Kansans and upon professional counselors. So I urge you to satisfy yourself that you have all available information at your disposal when this bill or any like it is discussed.

Sincerely,



Gary E. Holmes
(316)342-4768

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The Honorable Roy M. Ehrlich
State Senator
Statehouse, Room 138N
Topeka, KS 66612


re: SB 78; licensing of counselors

Dear Roy:

This bill was assigned to your Public Health & Welfare Committee. In noticing the definitions of "counseling" in Section 2(c), its language is broad enough that it would appear to cover the type and kind of work some attorneys do for their clients, especially when people come to attorneys essentially wanting to discuss options on a variety of personal problems. It would appear to cover physicians as well because I would think the physician must counsel patients and help them adjust to grief, pain, mental anguish, etc. Some attorneys often include "Counselor at Law" on letterheads. We often "refer" clients to mental health professionals, but nevertheless, under SB 78, it would appear to regulate at least part of the practice of law, and our attorneys would have to comply with the licensing requirements.

I don't think SB 78 was intended to include attorneys or regulate the practice of law or medicine. Is it possible to get a small amendment to the definition of "counseling" that SB 78 is not intended to include attorneys engaged in the practice of law? I'll let Jerry Slaughter determine whether similar exceptions are needed for his profession.

Sincerely,


Ronald D. Smith
Legislative Counsel

RDS/s

cc: Jerry Slaughter

*S. P. H. W.
2-3-87
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