

Approved 2-11-87
Date

MINUTES OF THE SENATE COMMITTEE ON PUBLIC HEALTH AND WELFARE

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

10:00 a.m. ~~xxx~~ on February 5, 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:

Lyle Eckhart, Kansas Highway Patrol
James A. Todd, Kansas State Firefighters
Richard Maginot, Chief, Soldier Township Fire Department
Al Dimmitt for James P. Cooney, Jr., Dean of the School of Allied Health at
the University of Kansas Medical Center
Gene Johnson, KCASAP
Jerry Slaughter, Kansas Medical Society
Lloyd Goodwin, Ph.D., Emporia

Others attending: see attached list

SB-87 - An Act concerning emergency medical services; providing for first responder certification; providing for administration of the act; declaring certain acts to be unlawful and classifying crimes and the penalties for violations; providing exceptions from liability for civil damages.

Lyle Eckhart testified supporting SB-87. Written testimony was presented to the committee on February 4, 1987, attachment 11. Mr. Eckhart stated that the Kansas Highway Patrol supports SB-87. This bill creates a new level of training for individuals who are typically first to arrive at the scene of a medical emergency or an accident. First responder certification would fulfill a need, providing life saving care until the ambulance arrives. Mr. Eckhart presented an amendment to SB-87 which would change wording in Section 6 (a) and (d). (attachment 1)

Senator Hayden requested staff furnish information as to responsibility if some voluntary group did not have first responder training and went on the scene and did some things, minimally first responder duties, whether the subdivision of government could be held liable or whether the tort claim would take care of the situation.

Senator Riley stated that he was having a great deal of difficulty understanding the difference between first responder and EMT training and requested staff to furnish the committee, in writing, an outline of the number of hours, what the training is, etc.

James Todd testified that the organization of Kansas State Firefighters supported this bill. Mr. Todd stated that the 45 hour first responder course was easier to fulfil, especially by volunteer firefighters, than the longer EMT training.

Richard Maginot testified and presented written testimony to support SB-87. Mr. Maginot stated that his department was a combination of paid and voluntary personnel. It was further stated that 40-45% of the calls were emergency medical calls. Many volunteers find it difficult to attend training when it requires 120 to 150 hours of training. It was felt that many firefighters who are not EMTs will most likely become first responder certified if this bill is passed. (attachment 2)

CONTINUATION SHEET

MINUTES OF THE SENATE COMMITTEE ON PUBLIC HEALTH AND WELFARE,

room 526-S, Statehouse, at 10:00 a.m.~~xxx~~ on February 5, 1987

Al Dimmitt testified on behalf of James Cooney, Jr., Dean of the School of Allied Health at the University of Kansas Medical Center. Mr. Cooney's written testimony was presented to the committee on February 4, 1987, attachment 10. Mr. Dimmitt stated that it was felt that this bill would encourage the development of increasing numbers and appropriate placements of first responders.

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;

Gene Johnson stated that the 25 members of the Kansas Community Alcohol Safety Project Coordinator's Association provide the evaluation and supervision of those offenders convicted of DUI. Mr. Johnson testified that his organization was certified by the administrative judge with the support of the majority of judges of each judicial district or by the Secretary of SRS. Concern was expressed regarding some of the language in SB-78 such as counseling, assessment and consultation and referral. Mr. Johnson further stated that should SB-78 become law, over 70% of their organization's membership would fail to qualify under the education standards. This group certification procedure is recognized by the Secretary of SRS as the only certification process in the state at this time. Mr. Johnson's written testimony was presented to the committee on February 3, 1987 and appears as attachment 14.

Jerry Slaughter testified and presented written testimony on SB-78. An amendment was suggested which the Kansas Medical Society felt would clarify the distinction by the professional counselors and other traditional health care providers. The concern lies in the areas of diagnosis and treatment of mental illness or disease, a service believed by the Kansas Medical Association to be the practice of medicine. (attachment 3)

Lloyd R. Goodwin, Jr., Ph.D., testified and presented written testimony opposing SB-78 because of the proposed educational criteria for licensure which excludes the way rehabilitation counselors are typically trained. Mr. Goodwin stated that there are two sets of nationally recognized standards to prepare professional counselors, CORE and CACREP. The present legislation includes CACREP and excludes CORE and therefore, is biased and exclusionary. Dr. Goodwin's testimony included some proposed amendments. (attachment 4)

The chairman announced that hearings on SB-78 would continue on Friday, February 6, 1987.

Senator Morris called attention to SB-64 which would authorize certain expenditures by the coordinator of the youth and children advisory committee. Senator Morris stated that the advisory committee was meeting on Monday and that as far as he knew, SB-64 was not controversial. An amendment offered was adopted on February 3, 1987. Senator Morris made the motion to pass SB-64 out of committee. Senator Mulich seconded the motion and the motion carried.

Senator Bond announced the subcommittee dealing with SB-33, SB-34 and SB-35 would meet February 9, 1987, at 10:00 a.m. in room 526-S.

Written testimony by Charles Kunce, PhD. was provided to the committee. In his testimony Dr. Kunce stated that the proponents, in their testimony, repeatedly stated that licensed counselors would be independently providing mental health services and that their definition of counseling could include terminology which could be licensing them to diagnose and treat mental disorders. (attachment 5)

Jeanette C. Scher, R.N. presented written testimony to the committee which supports SB-78, stating she felt it would ensure the identification of

CONTINUATION SHEET

MINUTES OF THE SENATE COMMITTEE ON PUBLIC HEALTH AND WELFARE,
room 526-S, Statehouse, at 10:00 a.m./~~p.m.~~ on February 5, 1987

qualified individual counselors on a referral basis in the sparsley populated areas where counselors are needed. (attachment 6)

James E. Ryabik, presented written testimony to the committee expressing concerns regarding SB-78. These concerns center on the fact that counselors are broadly defining mental health areas and that there were few restrictions and limitations placed on the practices. (attachment 7)

The meeting adjourned at 11 a.m. with the next meeting scheduled Friday, February 6, 1987.

SENATE
PUBLIC HEALTH AND WELFARE COMMITTEE

DATE 2-5-87

(PLEASE PRINT)
NAME AND ADDRESS

ORGANIZATION

Larry Avey

SRS / AAS

John Myers

Ks. Assoc of Prof Psychologists

Ed Redman

James A. Ladd

RS 77A

Richard Maginet

SOLDIER TOWNSHIP FIRE DEPT.

Clyde Eckhart

BEM 3-KHP

Frances Kastner

KAPTA

Sue Henkle

Ks plus Ther Assoc

Harold Riem

KAPM

Gary Robbins

Ks Optometric Assn

Edward Heck

University of Kansas

Belva Ott

Planned Parenthood of Ks, Inc.

JERRY SWANSTEN

Ks MEDICAL SOCIETY

John Peterson

Ks Assn of Prof Psychologists

Clyde Rousley

Ks Assn of Prof Psychologists

EP Moomau

Ks. Highway Patrol

Harold Plaza

KAN. ASSOC. OF SPECIALIST IN GROUP WORK

Laurie Hartman

Kansas Bar Association

Al Dimmitt

Univ. of Kansas Medical Ctr

SENATE
PUBLIC HEALTH AND WELFARE COMMITTEE

DATE 2-5-87

(PLEASE PRINT)
NAME AND ADDRESS

ORGANIZATION

Barbara Remert

KPOA

Marilyn Bradt

KINH

KEITH R LANDIS

CHRISTIAN SCIENCE COMMITTEE
ON PUBLICATION FOR KANSAS

Larry Downing

Bd of Spelling Arts

Charlene Abbott

Bd of Spelling Arts

Elizabeth Taylor

Ks Alco/Dry Add. Counselors

Abert

Eng W/ Beaver

Elizabeth Young

Assn. Com. Mental Health C. Ks

Paul M. Klotz

Assn. CMHCs of Ks, Inc.

Michael J. Byington

Ks. Assn. for the Blind and
Visually Impaired

0083 Upon receipt of each such remittance, the state treasurer shall
0084 deposit the entire amount thereof in the state treasury to the
0085 credit of the state general fund.

0086 (e) If an applicant for a certificate has within two years
0087 preceding the date of the application held a first responder's
0088 certificate, the director may grant a certificate to such applicant
0089 without such applicant completing a course of instruction speci-
0090 fied in subsection (b) if the applicant has passed an examination
0091 prescribed by the director and has paid a registration fee of
0092 \$7.50.

0093 Sec. 5. The director may inquire into the conduct of first
0094 responders. The director may require a first responder certified
0095 under this act to make records regarding services performed and
0096 to furnish such other information as the director may require to
0097 carry out the provisions of this act. A copy of such records shall
0098 be kept in the first responder's files for a period of not less than
0099 three years. The records shall be made available to the director
0100 upon request.

0101 Sec. 6. A first responder may perform any of the following
0102 activities:

Initial scene management

0103 (a) ~~Scene control~~ including, but not limited to, gaining access
0104 to the individual in need of emergency care, appropriate extri-
0105 cation of the individual and lifting and moving the individual;

0106 (b) cardiopulmonary resuscitation and airway management;

0107 (c) control of bleeding;

0108 (d) ~~rigid and air extremity splinting;~~

Extremity splinting excluding

0109 (e) stabilization of the condition of the individual in need of
0110 emergency care;

traction splinting

0111 (f) oxygen therapy;

0112 (g) use of oropharyngeal airways;

0113 (h) use of bag valve masks; and

0114 (i) other techniques of preliminary care a first responder is
0115 trained to provide as approved by the university of Kansas school
0116 of medicine and by the council.

0117 Sec. 7. Nothing in this act shall be construed: (a) To pre-
0118 clude any municipality from licensing or otherwise regulating
0119 first responders operating within its jurisdiction, but any licens-

SPH/W
2-5-87
attachment 1

TESTIMONY ON SENATE BILL NO. 87 offered by Richard Maginot,
Chief, Soldier Township Fire Department

I wish to offer testimony supporting Senate Bill No. 87.
Our Department is a combination of paid and volunteer personnel
serving a community of 12,000 people in northeast Shawnee
County.

We run about 350-400 alarms per year with 40%-45% of
those being emergency medical calls. At the present time,
we have 24 firefighters, 12 of which are Emergency Medical
Technicians. Most of the other firefighters have CPR and/or
First Aid training.

Currently, we try to respond to medical calls with two
EMT's and one firefighter. Upon arriving, the EMT's provide
patient care and the firefighter assists them according to
his level of training. Due to the fact that we are mostly
a volunteer organization, personnel available to answer calls
can vary depending upon the time of day, holidays and other
factors.

We are fortunate in that our community does have full-
time personnel. We always have at least one full-time fire-
fighter/EMT on duty. Many communities do not have this situation
and rely entirely on volunteers.

This puts a burden on those fire departments to try
to train their personnel and certify them. Currently the
only certification levels available to fire departments are
Emergency Medical Technician or higher. Certification as
an EMT requires 120-150 hours of training. Many volunteers
find this impossible to attend and thus are unable to receive
the training needed to enable them to fully function as a
First Responder in a medical situation. Necessary training
includes those areas listed in Section 6 of Senate Bill 87,
such as oxygen therapy, bag valve masks and oropharyngeal
airways. This First Responder Certification is needed to
provide a level of training between an EMT and the First
Aid/CPR training now available.

SPH/W
2-5-87
attachment 2

In our Department, many of the firefighters who are not EMT's will most likely become First Responder Certified if this Bill is passed. This will enable us to provide better care, protect the firefighter from liability and allow us to fully utilize our personnel.

At the same time, this Bill would allow those Departments that do not have the resources or personnel able to take this training to still respond and provide some care according to the level for which they are trained.

One other area which should be addressed concerns insurance. Many Fire Departments are finding it more difficult and more costly to obtain liability insurance. When personnel are trained and certified according to state requirements, this problem is partially alleviated.

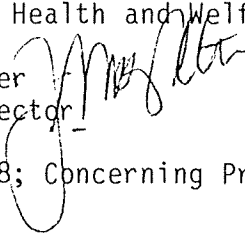
For these reasons, we ask for your support of Senate Bill No. 87. Thank you for the opportunity to testify today. I would be glad to answer any questions you might have to the best of my ability.



KANSAS MEDICAL SOCIETY

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

February 3, 1987

TO: Senate Public Health and Welfare Committee
FROM: Jerry Slaughter 
Executive Director
SUBJECT: Senate Bill 78; Concerning Professional Counselors

The Kansas Medical Society appreciates the opportunity to comment on S.B. 78 which would credential professional counselors.

In general, we do not oppose S.B. 78, but would like to suggest an amendment which we think clarifies the distinction between professional counselors and other, traditional health care providers. Our concern lies in the area of the diagnosis and treatment of mental illness or disease, a service which we believe is clearly the practice of medicine. To that end, we would like to suggest the addition of the following language when professional counselors engage in such services:

New Section 13. Nothing in the professional counselors licensing act shall be construed ...

(f) to authorize a person licensed under the provisions of this act to diagnose or treat mental illness or disease.

We think the addition of this language will make it very clear to physicians and other health professionals in the field that professional counselors are not intended to practice medicine. We urge your adoption of this amendment, and appreciate your consideration of these remarks.

JS:nb

*SPH+W
2-5-87
attachment 3*

Thank you for allowing me to testify here today. I am Dr. Lloyd R. Goodwin, Jr. I am a counselor educator and am primarily associated with the rehabilitation counselor education program at Emporia State University. I am also a member of the Kansas Rehabilitation Counseling Association.

I support the concept of counselor licensure. However, I oppose SB 78 because the proposed educational criteria for licensure excludes the way rehabilitation counselors are typically trained.

There are two sets of nationally recognized standards to prepare professional counselors. The Council on Rehabilitation Education (CORE) accredits rehabilitation counselor education programs. The Council on Accreditation of Counseling and Related Education Programs (CACREP) accredits counselor education programs with the specialty areas of school counseling, community counseling, and student personnel workers. The present counselor licensure proposal only includes one, CACREP and excludes the other, CORE. The profession of rehabilitation counselors whom already meet the highest nationally recognized standards of training (CORE) and certification (Certified Rehabilitation Counselor's; CRC) in the field of counseling would be excluded from practice in Kansas, except when employed in exempted work settings, grandparented, or unless they return to counselor education programs and take approximately 12 more semester hours of postgraduate training to meet these CACREP criteria of 10 specified content areas established only for preparing school counselors, students personnel workers, and community counselors. This is biased and exclusionary. It is for these reasons that I oppose the counselor licensing proposal with its present eligibility criteria set up only for selected counseling groups.

SPHW
2-5-87
attachment 4

I would like to offer two amendments to SB 78 that would modify the proposed criteria for licensure to allow for some flexibility and inclusion of professionally trained counselors from either CORE or CACREP accredited programs.

First Proposed Amendment: Page 3, New Sec. 4, line 0085 to read "board and which includes study in (A) Counseling theory and practice, and (B) Supervised internship or practicum and six of the following areas:" Eliminate lines 0086 and 0095. These changes would make this Bill consistent with the national certification standards already established for generic or general counselors. Also, this amended educational criteria is more in keeping with the criteria of the 18 states that already have counselor licensure laws. There are only 3 of the 18 states that require as many as 60 semester hours of graduate course work. Most states only require a masters degree in counseling or a masters degree and fewer than 45 semester hours of course work. Also, there is only one of the 18 states (Texas) that requires coursework in as many as 10 different content areas which is what SB 78 proposes. Requiring all 10 content areas is simply too exclusionary and favors selected counseling groups. This amendment brings the educational criteria more in line with the rest of the states' counselor licensure criteria.

Second Proposed Amendment: Page 3, Sec. 4, Line 0099 and 0100 to read "every 30 graduate semester hours obtained beyond the 60 hours required for counselor licensure, provided that such hours are clearly related to the field". The reason for this amendment is because the graduate programs in the various types of counseling vary considerably in length. For example, at Emporia State University a person can earn a masters degree in school counseling with 38 semester hours of course work. A masters degree in rehabilitation counseling typically requires 56 hours and many of the recent graduates have

over 60 hours of course work. According to SB 78, in order to subtract 1 year of the required professional experience for every 30 graduate semester hours obtained beyond the masters degree a rehabilitation counseling graduate would have to have approximately 90 hours compared to 68 for the school counseling graduate. This is biased and the amendment places all branches of counseling on an equal basis.

These two amendments would allow for the unique variations in the preparation standards of the various counseling professions and be more inclusive for all professionally trained counselors.

One last comment has to do with the clarification of some testimony on February 3, 1987. It was stated that the majority of rehabilitation counselors support the concept of counselor licensure. I would like to add that although the majority of members of the Kansas Rehabilitation Association who completed a survey on counselor licensure support the concept of counselor licensure; 70% did not support the criteria for licensure in this bill. The main reason the majority of rehabilitation counselors do not support this bill is related to the 10 content areas of proposed coursework and that these areas were derived from CACREP standards and not modified to include the CORE standards for rehabilitation counselors.

I believe the proposed amendments would gain the support of the vast majority of professionally trained rehabilitation counselors and other professionally trained counselors in Kansas. Thank you again for allowing me to testify. I'd be glad to answer any questions.

Lloyd R. Goodwin, Jr., Ph.D., CRC, NCC
Assistant Professor
Division of Counselor Education and
Rehabilitation Programs
Emporia State University

COUNSELOR LICENSURE

Master's Plus Specified Hours

1. Arkansas (36 hours)
2. Alabama (30) "Shall use standards of nationally recognized professional counseling associations as guides..."
3. Mississippi (Master's)
4. Tennessee (NCC) or (60 hrs./ Practicum)
5. South Carolina (Master's)
6. Nebraska (Master's)
7. West Virginia (Master's)
8. Ohio (CORE or CACREP Accredited Master's/45 hours)

Master's Plus Specified Hours Plus Just Practicums/Internships

1. Montana/90 quarter hours/9 quarter hours of Adv. Counseling Practicum
2. Idaho/60 hrs./6 hrs. of Adv. Counseling Practicum
3. N. Carolina/Master's/Supervised Practicum
4. Georgia/Master's/Internship or Practicum

Master's Plus Specified Coursework

1. Oklahoma/(45)/Counseling Theories & Skills
2. Virginia (60)/8 areas (1) Abnormal 2) Techniques & Theories 3) Group 4) Theories of Learning, Behavior, Personality 5) Professional Ethics; Identity 6) Appraisal & Eval. 7) Career 8) Practicum)
3. Florida/Master's/18 hours in Theory & Practice, 1 course in Eval., Research, Appraisal or Testing, 1 Practicum or Internship
4. Missouri/Master's/Techniques & Applications, Research, Professional Affairs and Ethics.
5. Texas (45)/10 CACREP areas (Abnormal vs. Human Growth & Development)
6. Maryland/(60) 1) Theory 2) Techniques 3) Human Growth & Development 4) Group 5) Social & Cultural 6) Career 7) Appraisal 8) Research & Eval. 9) Practicum

Prepared by: Lloyd R. Goodwin, Ph.D.
Division of Counselor Education
and Rehabilitation Programs
Emporia State University
Emporia, KS 66801-5087
(316) 343-1200, ext. 5220

8/11/86



Association of Community

Mental Health Centers of Kansas

835 S.W. Topeka Ave., Suite B/Topeka, Kansas 66612/913 234-4773

Paul M. Klotz, Executive Director

February 4, 1987

The Honorable Roy Erlich
Chairman, Senate Public Health and Welfare Committee
State Capitol Building
Topeka, KS 66612

RE: SB 78

Dear Senator Erlich:

The Association of Community Mental Health Centers of Kansas has reviewed SB 78 and wishes to recommend an amendment to the committee.

Testimony on the part of proponents repeatedly stated that licensed counselors would be independently providing "mental health services." Their definition of "counseling" includes terminology that, in practice, could be licensing them to diagnose and treat mental disorders. However, the content of their formal training found in lines 0086-0096 does not include the academic preparation necessary to diagnose and/or treat mental disorders.

The Association of Community Mental Health Centers of Kansas strongly believes that those who provide human services should be regulated in the interest of public protection. We are equally strong in our belief that legal regulation must give assurance that those being given legal status are not encouraged to independently provide services without adequate training.

To further assure protection of the public, we would recommend that the definition of counseling be amended by adding at the end of line 38, the following:

However, counseling does not include the diagnosis and/or treatment of mental disorders.

I respectfully request you share this written testimony with the members of your committee. I appreciate your consideration.

Sincerely,

Charles Kunce, Ph.D.
Chairman, Professional Standards Committee

CK:DR:ch

Dwight Young
President

Kermit George
President Elect

John Randolph
Vice President

Larry W. Nikkel
Past President

Paul Thomas
Treasurer

Steven J. Solomon
Secretary

Gene Jacks
Bd. Memb. at Large

S PH + W
2-5-87
Attachment 5

PERC

PROGRESSIVE
EVALUATION &
REHABILITATION
CONSULTANTS, INC.

February 2, 1987

TO: Senator Roy M. Ehrlich
SENATE PUBLIC HEALTH & WELFARE COMMITTEE

FROM: Jeanette Scher, RN, COHN

RE: Senate Bill # 78
Page 7
New Section 13-A

I represent PERC, Inc. which is a private rehabilitation company located in Shawnee Mission, Kansas, and Wichita, Kansas. I have practiced in the field of occupational health for 31 years of which the last 11 years have been in the medical rehabilitation field.

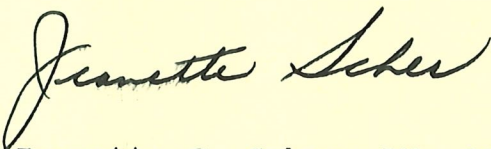
I have attended the hearing on this bill February 3, 1987, and after thorough review with Kansas Nurses Association and counsel, I would like to take the following position.

I am supportive of the bill as presently submitted for it allows counseling professionals to work within the parameters of their licensure in the State of Kansas.

I believe that professional licensure is important and therefore we support the need for the new Section #13 A to be a part of this bill #78. This bill allows the counseling professionals to function within their licensure, as we registered nurses function within our licensure.

I wish to note that PERC, Inc., (Progressive Evaluation and Rehabilitation Consultants, Inc.), refer our clients to the psychological and vocational counselors when appropriate.

This bill would ensure the identification of qualified individual licensed counselors on a referral basis in sparsely populated areas where counselors are needed.



Jeanette C. Scher, RN, COHN
Managing Consultant

SPH/W
2-5-87
attachment 6

James E. Ryabik, Ed.D.
Kelly Psychological Service Center
Fort Hays State University
P.O. Box 462
Hays, Kansas 67601

February 4, 1987

Senator Roy M. Ehrlich
138-N State Capitol
Topeka, Kansas 66612

Dear Senator Ehrlich:

I am writing to express my concern about S.B. 78 which pertains to the practice of counselors in the State of Kansas.

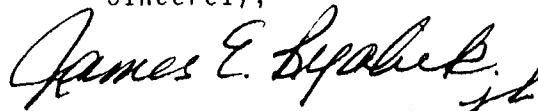
I am not opposed to counselors practicing in the state in that I feel many are competent and qualified to do so in certain areas. I am concerned, however, that the counselors are broadly defining mental health and the people with whom they would be permitted to work in such a manner that there are few restrictions and limitations placed upon their practice.

Licensed psychologists have between 90 and 120 hours beyond their baccalaureate degree in a doctoral training program, in addition to an internship and a two-year, post-doctoral supervised experience requirement before they are allowed to practice in the State of Kansas. It seems to me that 60 hours of training coupled with a poorly defined sequence of training is inadequate to allow someone to practice permitting the diagnoses of emotional problems and the use of tests, in addition to working with all types of patients.

I strongly maintain that persons with only a 60-hour training program should not be permitted to practice independently without supervision. It is also my contention that this level of training was originally intended for people who work in federal, state, county, and municipal agencies with a certain amount of supervision. I recommend strongly that should counselors in the State of Kansas be regulated they be registered, not licensed, with the Behavioral Sciences Regulatory Board.

If I can be of any further assistance with regard to this matter, please feel free to contact me.

Sincerely,



James E. Ryabik, Ed.D.
Director

JER/jh

S P-H+W
2-5-87
attachment 7