

Approved

Thomas F. Walker
Date 4/6/90

MINUTES OF THE HOUSE COMMITTEE ON GOVERNMENTAL ORGANIZATION

The meeting was called to order by Representative Thomas F. Walker at
Chairperson

12:00 a.m./p.m. on Tuesday, April 3, 1990 in room 522-S of the Capitol.

All members were present except:

- | | |
|-----------------------------------|----------------------------------|
| Representative Gjerstad - Excused | Representative McClure - Excused |
| Representative Graeber - Excused | Representative Ramirez - Excused |

Committee staff present:

- Emalene Correll - Legislative Research
- Carolyn Rampey - Legislative Research
- Avis Swartzman - Revisor
- Jackie Breymeyer - Committee Secretary

Conferees appearing before the committee:

- Ron Hein - Kansas Association of Marriage and Family Therapy
- Dr. Charles Romig - Wichita State University
- John P. Murray, Ph.D. - Kansas State University
- Representative Marvin Littlejohn
- Dr. David Rodeheffer - Kansas Psychosocial Association
- Richard Morrissey - Department of Health and Environment
- Mary Ann Gabel - Behavioral Sciences Regulatory Board
- Dr. Candyce Russell - Kansas State University

W.D.

Chairman Walker called the meeting to order.

SB 257 - marriage and family therapists

Emalene Correll, Legislative Research gave background on the bill and went through the sections, explaining the criteria for the registration of marriage and family therapists.

Ron Hein, Kansas Association for Marriage and Family Therapy, appeared in support of the bill. (Attachment 1) Mr. Hein's testimony reflected that all the registered lobbying health care groups are neutral on this bill, based upon the amendments placed on the bill by the Senate Public Health and Welfare Committee, other than the Kansas Medical Society. The Kansas Medical Society supports the bill. The Kansas Psychiatric Association, the Kansas Association for Professional Psychologists, and virtually every other mental health group are now neutral on the proposal. The bill passed the Senate 40-0 and was also reported out of the Senate committee unanimously.

Letters from Friends University and Arthur Mandelbaum were also distributed by Mr. Hein and are labeled (Attachments 2 and 3)

Dr. Charles Romig, Wichita State University, appeared next in support of SB 257. (Attachment 4) He commented on the potential harm to the public that can occur due to the lack of credentialing of marriage and family therapists in the State of Kansas. His primary concern deals with the inability of the public to identify trained marriage and family therapists. There are 97 listing in the Wichita phone book under marriage and family counselors. Most of these offer neither title or credentials. A related area of concern is the lack of accountability by agencies who provide marriage and family therapy services. Dr. Romig's final area of concern involved the inability of a client to take action against an untrained, incompetent, or unethical marriage and family therapist or person claiming to be such other than civil action. Potential clients seeking therapy are at risk because of the inability to distinguish between qualified practitioners and those who are not.

Dr. Romig ended his testimony by stating he hoped the committee would rectify the situation by recommending SB 257 for passage.

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 HOUSE COMMITTEE ON GOVERNMENTAL ORGANIZATION

room 522-S, Statehouse, at 12:00 a.m./p.m. on Tuesday, April 3, 1990

John P. Murray, Ph.D., Kansas State University, spoke next to the bill. There are about 30 universities which provide marriage and family therapy training at either the master or doctoral level, but Kansas State University is one of only two such fully accredited combined master and doctoral programs in the country.

Dr. Candyce S. Russell, Kansas State stated she was well aware of the number of people trained in Kansas who look to other states for employment once they realize Kansas has no mechanism for credentialing their profession. Employers may not be able to hire them because they are not credentialled by the state and therefore unable to receive third party reimbursement for their services. The state is losing those professionals to other states which recognize and credential Marriage and Family Therapy. The state will be suffering a very real "brain drain".

Dr. Murray's and Russell's joint testimony is labeled (Attachment 5)

A few comments on third party reimbursement were made. Someone asked what CHAMPAS was. It is the reimbursement provider for federal employees and those in the armed services. Fort Riley was used as an example.

Representative Marvin Littlejohn, Chairman, House Public Health and Welfare Committee, appeared in opposition to the bill. He distributed an attachment (Attachment 6) which contained a letter from Secretary of Health and Environment Stanley Grant stating the technical committee completed the review of the marriage and family therapists' application and the report was issued to the legislature. Dr. Grant does not intend to reopen the review of the marriage and family therapist application. The attachment also contained a fiscal note, and a submittal of final findings and recommendations on the application seeking to license persons practicing marriage and family therapy.

Representative Littlejohn said he did not favor the bill and did not want to hear it in committee as the deadline was passed. This is why the bill was assigned to Governmental Organization. He does not know how many **of** therapists there are; there might be close to 160.

Dr. David Rodeheffer, Kansas Psychological Association, appeared in opposition to the bill. (Attachment 7) It fails to adequately define the type of training and the code of ethics by which the behavioral sciences board should judge an applicant for registration. As a result, it makes it impossible to define a scope of practice commensurate with its training and educational standards and places too much authority on the behavioral board to define the basis and scope of this practice.

Richard Morrissey, Department of Health and Environment, appeared in opposition the bill. (Attachment 8) Mr. Morrissey went through the definition of credentialing. The Kansas Association of Marriage and Family Therapy submitted a credentialing application to the department in 1987. The end product of the review process was a final report by the Secretary of Health and Environment issued to the legislature on June 9, 1988. The report concluded that all of the statutory criteria had been met. However, there was not a need to license or register marriage and family therapists in order to protect the public from harm. A recommendation was made that the application be denied. Rational for the decision was contained in the final report. The only case of documented harm was due to sexual exploitation of clients by psychotherapists. Credentialing would not reduce the problem of sexual exploitation. This problem is not generated by a lack of specialized training but from ethical or moral failures. Credentialing would not address the issue of harm in this instance. The Secretary did not recommend registering marriage and family therapists to protect the public from sexual exploitation. Some type of action is needed to address this problem. Legislation modeled after initiatives taken in Minnes might be considered to address the problem.

CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON GOVERNMENTAL ORGANIZATION,

room 522-S, Statehouse, at 12:00 a.m./p.m. on Tuesday, April 3, 1990.

Mary Ann Gabel, Executive Director, Behavioral Sciences Regulatory Board, read testimony from Dr. William L. Albott, Vice-Chairman of the Board. (Attachment 9) She went through the sections of the bill and explained each one. Testimony related that a review of the KAMFT Directory indicates a membership count of 161 non-student Kansas residents. Of these members, 78 or 48% are currently regulated by this board under the psychology, social work, registered master level psychology, and professional counselor statutes. Thirteen or 8% of the remaining membership appear to hold either theology degrees or a nursing degree, which leaves only 70 people or 44% of the membership who may seek registration to practice as a marriage and family therapist.

As there was no one else to testify on SB 257, the Chairman declared the hearing closed on the bill. He stated action would not be taken today on the bill.

The Chairman told the committee that one more bill had been assigned to the committee. It is SB 779, concerning the governor's residence advisory commission. He asked the committee members when they would like to meet to hear the bill. Various times were discussed. It was finally decided to meet Thursday at 1:00 p.m.

The meeting was adjourned.

HEIN AND EBERT, CHTD.

ATTORNEYS AT LAW

5845 S.W. 29th, Topeka, Kansas 66614

913/273-1441

Ronald R. Hein

William F. Ebert

HOUSE GOVERNMENTAL ORGANIZATION COMMITTEE

TESTIMONY RE: SB 257

PRESENTED BY RONALD R. HEIN ON BEHALF OF
KANSAS ASSOCIATION OF MARRIAGE AND FAMILY THERAPY

April 3, 1990

Mr. Chairman, members of the committee:

My name is Ron Hein, and I am legislative counsel for the Kansas Association for Marriage and Family Therapy (KAMFT).

Members of the KAMFT have met the strict certification requirements necessary to be certified by the American Association for Marriage and Family Therapy. Such qualifications include a masters or doctorate level degree. Currently, Kansas has no minimum qualifications to practice marriage and family therapy. Under current Kansas law, when a person having marital or family problems, regardless of the degree of crisis involved, contacts a "marriage and family therapist", they do not know if they are getting somebody who has met the minimum qualifications of training, education, and clinical experience as required for the professionals that I represent, or if they are getting somebody who has simply hung up their shingle.

To remedy this, the KAMFT filed an application for credentialing under the credentialing act. After exhaustive hearings, the Technical Committee concluded that Marriage and Family Therapists met all of the statutory criteria in order to be registered, and subsequently recommended such registration. The Secretary of Health and Environment found that all of the statutory criteria for registration had been met, but recommended another form of regulation, specifically implementation of an act called the Minnesota Client Protection Act.

The Minnesota Client Protection Act provides for full licensure of marriage and family therapists, social workers, psychologists, and others, and then sets up additional regulatory provisions for unlicensed individuals. Although the KAMFT has some concerns about the other regulatory provisions of the Minnesota Client Protection Act, we do specifically support the portion that provides for full licensure of marriage and family therapists.

*Attachment /
G.O.
4/3/90*

In his report, the Secretary noted that, in his opinion, the testimony presented to the Technical Committee did not document any harm other than sexual exploitation. He therefor recommended a package of four bills to the Interim Committee on Corrections/Mental Health with regards to regulation of the sexual exploitation issue. Three of those bills were not recommended for introduction by the interim committee, and the one bill that was introduced by the interim committee has not yet been favorably recommended out of the first standing committee of the 1990 Legislature.

We asked for introduction of SB 257 to provide for registration, in compliance with the finding of the Technical Committee in the credentialing process. On the Senate side, we addressed some of the difficulties that our group had documenting harm pursuant to the new statutory amendments of 1986 of the Credentialing Act, as interpreted by the Department of Health and Environment.

One of our first concerns related to our ethical obligation of confidentiality.

Our second concern relates to rulings by the staff of KDHE that we could not submit testimonials to document harm to the patient by being counseled by unlicensed individuals. Because we were prohibited from offering this testimony, sometimes based upon the opinion of KDHE staff, we were unable to document harm to the Secretary's satisfaction.

All of the registered lobbying health care groups are neutral on this bill, based upon the amendments placed on the bill by the Senate Committee on Public Health and Welfare, other than the Kansas Medical Society. The Kansas Medical Society supports the bill. The Kansas Psychiatric Association, the Kansas Association for Professional Psychologists, and virtually every other mental health group are now neutral on this proposal.

This bill passed the Senate 40-0, and was also reported out of Senate Committee unanimously.

I have also attached a copy of a letter which was sent to Sen. Roy Ehrlich and, I understand, other members of the Senate Public Health and Welfare Committee, by Senator Bob Dole, who is endorsing the credentialing of marriage and family therapists, especially as it relates to legislation which he is attempting to enact at the federal level. You will see by that letter that failure to provide for credentialing in Kansas might result in Kansans not being able to benefit from the amendments which he is sponsoring in Congress.

Twenty states currently credential marriage and family therapists, and eight states have credentialed MFTs in the last three years.

Marriage and family therapy is recognized as a separate and distinct profession at the federal level, by the Department of Health and Human Services, and by one of the largest insurance organizations in the nation, CHAMPUS. We strongly urge you to support SB 257, and I appreciate your taking the time to hear our views today. We would be happy to yield for any questions.

United States Senate

WASHINGTON, DC 20510
February 19, 1990

Senator Roy Ehrlich
Chairman, Public Health
and Welfare Committee
Room 138-N
State Capitol
Topeka, Kansas 66612

Dear Roy:

I understand that there is a current proposal before the Kansas legislature to credential marriage and family therapists. As reported to me, this proposal was outlined last year in S.B. 257, and now is being considered again for action in this session. Based upon my knowledge of these professionals, I believe that the establishment of a regulatory program for marriage and family therapists in Kansas would be beneficial to the people of our State. Additionally, credentialing marriage and family therapists in Kansas would be consistent with and complementary to action I am taking in Congress.

I am an original of legislation (S. 1591) to provide Medicare reimbursement to marriage and family therapists who practice in Community Mental Health Centers, a primary and important site of mental health service delivery in Kansas. Marriage and family therapists currently provide services through such Centers. However, different from other mental health professionals, there is no existing mechanism to determine the competence of individual marriage and family therapists. As a result, while a Community Mental Health Center may choose to hire a therapist for incompetence or unethical treatment, neither the consumer nor the State have recourse to take appropriate action in such a case.

In addition, it is possible that Congressional passage of S. 1591 could be applicable only to marriage and family therapists practicing in states which have regulated the profession. Should that be the case, my goal of benefitting the people of Kansas through S. 1591 would be unsuccessful.

I thought you would be interested to know of my efforts and how they relate to matters before you.


Sincerely,

March 30, 1990

Representative Tom Walker
Room 115-B
P.O. Box 72
State Capital
Topeka, Kansas 66612



2100 University
Wichita, KS 67213
(316) 261-5800

Dear Mr. Walker:

This letter is in support of Senate Bill 257 for the registration of Marriage and Family Therapists.

We have forty (40) students enrolled in Friends University's Masters Program in Marriage and Family Therapy and currently are enrolling for our 1990 class. To receive the Masters degree, students must complete forty-five (45) academic hours of graduate study, in addition to five hundred (500) hours of client contact with one hundred (100) hours of supervision. The clinical work is done in our Counseling Center on campus and is under the supervision of four (4) persons who hold Doctorates and who also are approved supervisors in the American Association for Marriage and Family Therapy. The national organization of AAMFT has about sixteen thousand (16,000) members.

The profession of Marriage and Family Therapy is a viable and growing role in Kansas. It is a distinct specialty in the field of psychotherapy with its own high standards for professional practice and ethical conduct.

Graduates of Friends University's program are qualified to be Associate Members of the American Association for Marriage and Family Therapy. To become a full member of AAMFT, one must complete two hundred (200) hours of supervision in marriage and family therapy and one thousand (1,000) client contact hours.

We urge your committee to promote Senate Bill 257 in the interest of professional marriage and family therapy in the State of Kansas.

Respectfully,

J. Phillip Stanberry
J. Phillip Stanberry, Ed.D.
Coordinator, MBFS/t-EAP

Respectfully,

Bruce R. Parmenter
Bruce R. Parmenter, D.Min.
Clinical Director

Attachment 2
G.O. 4/2/90

SENATE BILL No. 257- By Committee on Public Health and Welfare

I am writing in support of the above bill. This bill provides for the registration of Marriage & Family Therapists by the behavioral sciences regulatory board of the State of Kansas.

In this period of time when so many families and marriages are under stress, consumers seek to find competent and skilled professionals from whom they can seek assistance to resolve family conflict and marital distress. Such help requires that professionals with advanced degrees are trained under approved supervision by professionals who themselves have acquired the education, the training, and supervision through accredited programs. The proposed bill is a wise bill which under state regulation and supervision offers the public a way of knowing where and how to acquire the help that is needed- who is registered and eligible to give such help and who is not.

Kansas is a state which offers many educational programs, many facilities in which workshops and training experiences are offered. Registration will encourage professionals to seek the necessary training to practice marriage and family therapy, which demands training and the development of skills in very complex problem areas. Registration indicates which professionals are qualified, which have sought knowledge and experience with supervision, and which have kept up their studies. The Behavioral Sciences Regulatory Board has been invaluable in setting standards and the proposed bill extends the standards to cover those who meet the registration requirements- another step forward to help our society become more stable, safe, and confident in the challenge of marriage and the raising of children.

Arthur Mandelbaum, M.S.W., A.C.S.W., D.Sc.
Licensed Clinical Specialist, State of Kansas
Approved Supervisor, American Assoc. Marriage & Family Therapy
Fellow of American Assoc. Marriage & Family Therapy

Arthur Mandelbaum
1561 Westover Road
Topeka, Kansas 66604
4/2/90

Attachment 3
G.O.
4/3/90

House Governmental Organization Committee

Testimony re: SB 257

Registration of Marriage and Family Therapists

Dr. Charles Romig

The Wichita State University

I would like to thank the committee for your consideration of this legislation and the opportunity to present my opinion on the matter of registration of marriage and family therapists. Before I comment on the bill, I would like to introduce myself. I am an assistant professor in the Counseling and School Psychology Program in the College of Education at the Wichita State University where I have been a faculty member since August, 1985. In 1982, I completed a Ph.D. in marital and family therapy from Purdue University, where I devoted almost four years of doctoral work to learning about families and marriage and family therapy. From 1982 to 1985 I worked as a marriage and family therapist for Catholic Social Services in Champaign, Illinois. I presently teach coursework in marriage and family therapy and am conducting research on families. I believe I have the training and experience to understand the needs of families and the need to provide quality marriage and family therapy services to families.

I am here to comment on the potential harm to the public that can occur due to the lack of credentialing of marriage and family therapists in the state of Kansas. I have three basic areas of concern. My primary concern has to do with the inability of the public to identify trained marriage and family therapists. A major study on mental health services during the period between 1957 and 1976 showed that 40% of clients sought such services specifically for difficulties with their marriages and another 13% for conflict in parent-child and other family relationships. With such significant numbers of requests, it is imperative that consumers of mental health services be able to identify trained professionals who understand the needs of couples and families.

In the yellow pages from the Wichita area phone book and under the heading "Marriage and Family Counselors", there are 97 individuals and/or agencies listed. It is difficult to say how many persons in the Wichita area are actually using that title or are practicing in the field. I can imagine the confusion a client in a state of crisis might have in trying to locate a competent marriage and family therapist if they utilized the yellow pages. In looking at the listings, many

Attachment 4
S.D.
4/3/90

are clinicians licensed in psychology and clinical social work and identify themselves as such. Others simply identify themselves as "board certified", "Kansas certified", or "Ph.D.-Licensed State". I presume that means licensed as a psychologist or clinical social worker, but it is impossible to tell from the listing. Most listings offered neither title or credentials.

It is presumptuous to believe that being licensed in psychology or clinical social work or registered as a master's level psychologist or professional counselor means one is trained in marriage and family therapy. During testimony before the Technical Committee last year, reviewing this application, Dr. Dean Kerkman, then president of the Kansas Psychological Association, stated that being licensed as a psychologist does not necessarily qualify one to do marriage and family therapy. He further stated that additional, specialized training is necessary, and that without disclosure of specific training by the psychologist, the client has no way of knowing if the psychologist is qualified to do marriage and family therapy. I would refer you to the final report of the Technical Committee and the minutes of the hearings to verify these comments.

In my experience as a clinician, I was responsible for hiring and supervising numerous marriage and family therapists from a variety of training backgrounds and found that most believed they were adequately trained when they usually had only one course in marriage and family therapy as part of their graduate training. I have found this also to be true from some of my interactions with clinicians here in Kansas. You may believe that marriage and family therapy is a sub-specialty of psychology and/or social work, and therefore, needs no further regulation. Please note that the federal Department of Health and Human Services recognizes marriage and family therapy as a distinct mental health discipline. The National Institute of Mental Health likewise recognizes marriage and family therapy under clinical training grants, giving marriage and family therapy the same standing as psychiatry, psychology, social work, and nursing. Further, the Technical Committee recognized marriage and family therapy requires specialized skills that are acquired through a formal period of study and training. Please understand me, I do not intend to demean my professional colleagues of other persuasions. My point is that without some objective training and experience standards, it is entirely up to the individual practitioner to decide if he/she is qualified to practice marriage and family therapy. Due to this, nothing prevents anyone from advertising to be a marriage and family therapist and seeing clients, regardless of whether they have any training, or training which does not specifically include marriage and family therapy.

A related area of concern has to do with lack of accountability by agencies who provide marriage and family therapy services. Recently, I received a job announcement for a "family therapist" to work with families with an alcoholic member, some of the most difficult and dysfunctional families. A student of mine inquired about the position and was told that a bachelor's degree was the minimum education requirement for the position. I can assure you that a person with a bachelor's degree, which couldn't be in marriage and family therapy, since no such degree exists, cannot function effectively as a marriage and family therapist. Such an agency, which in this case happens to be tax supported, cannot be held accountable for hiring persons without marriage and family therapy training, because no standards for training and experience exist by which to judge their employment decisions.

The final area of concern involves the inability of a client to take action against an untrained, incompetent, or unethical marriage and family therapist or person claiming to be a marriage and family therapist apart from civil action. The most common complaint in this state made to the Attorney General's office against unregulated mental health clinicians consists of sexual involvement between therapist and client (25-35 complaints each year). Since such therapists are unregulated, if their clients are over age 16, the only recourse the clients have is a civil action against the marriage and family therapist. Even if the action is successful, the clinician could continue practice. Note that these comments are contained in a letter from the Attorney General's office and can be found in the testimony submitted to the Technical Committee. The seriously damaging effects of sexual involvement with clients has been well documented. Such exploitation of clients is perhaps even more a risk when working with couples, since the conflicts and dissatisfactions with their relationship are what bring them into therapy and may make them more vulnerable to the advise of unethical therapists. Registration would hold marriage and family therapists to inform clients of their rights and provide them with information about the means by which they could take action against an unethical or incompetent marriage and family therapist. Presently, this does not have to occur.

In summary, potential clients seeking marriage and family therapy are at risk for harm by virtue of their inability to distinguish between qualified practitioners and those who are not. In addition, agencies who provide marriage and family therapy services have no mandated guidelines for determining who is qualified to provide such services. Finally, no enforceable guidelines exist defining unethical practice among those who call themselves marriage and family therapists and little, if any, recourse is available to those harmed by incompetent or unethical therapists. Nothing prevents such therapists from continuing practice. I would hope this committee would see the wisdom of rectifying this situation by recommending this bill for passage. Thank you.

TESTIMONY

before the

Kansas House of Representatives
Governmental Organization Committee

HEARING

on

SB257 Registration of Marriage and Family Therapists

April 3, 1990, Topeka

By

John P. Murray, Ph.D.
Professor and Department Head

and

Candyce S. Russell, Ph.D.
Professor and Director of
Marriage and Family Therapy

Department of Human Development and Family Studies
Kansas State University
Manhattan, Kansas 66506-1403
Tel. 913-532-5510

Attachment 5
G.O.
4/3/90

Statement by John P. Murray:

Mr. Chairman and Members of the Governmental Organization Committee, I am delighted to have the opportunity to testify in support of the registration of Marriage and Family Therapists in Kansas (SB257).

As Head of the Department of Human Development and Family Studies at Kansas State University, I am very familiar with the training that we provide for Marriage and Family Therapists who are studying for their master or doctoral degrees in this program. Also, I am keenly aware of the need for professionals in the mental health and human services system who can provide this therapy to the families of Kansas.

K-State has an outstanding graduate program in Marriage and Family Therapy. There are about 30 universities which provide marriage and family therapy training at either the master or doctoral level but K-State is one of only two such fully accredited combined master and doctoral programs in the country. We have an important resource to share with Kansans and we need to ensure that we adequately serve our citizens.

Professor Candyce Russell is the Director of Training for our Marriage and Family Therapy program at K-State and is here to speak to the professional issues involved in graduate training and registration.

Statement by Candyce S. Russell:

I appreciate the opportunity to give testimony today on Senate Bill 257. In my role as Director of the Accredited Marriage and Family Therapy Program at K-State, I am aware of the number of people we train who look to other states for employment once they realize Kansas has no mechanism for credentialing their profession. What this means is that, even though our graduates meet rigorous standards of training, employers may not be able to hire them because they are not credentialed by the state

and therefore are unable to receive third party reimbursement for their services. As a result, the state of Kansas is losing some of its best trained persons.

Standards of training for Marriage and Family Therapy are well established. These standards provide the foundation for credentialing laws in twenty-one states. A copy of the standard curriculum in marriage and family therapy is attached to my testimony. Please note that the supervised clinical practicum includes not less than 500 contact hours and provides for live and videotaped supervision of that work.

The state of Kansas is educating highly trained persons to respond to the growing needs of families under stress, but is losing those professionals to other states which recognize and credential Marriage and Family Therapy. If the profession remains uncredentialed, qualified clinicians will continue to leave the state, and Kansas families in need of care will be left with fewer providers and with no way of determining who is qualified to provide marriage and family therapy and who is not. The state will be suffering a very real "brain drain".

As I'm sure you know, this Bill passed 40 to 0 in the Senate. I urge you to give it favorable consideration and to forward it to the floor of the House.

Marital and Family Therapy Standard Curriculum

Areas of Study	Minimum No. Required Courses	Semester Hours	Quarter Hours
I THEORETICAL FOUNDATIONS OF MARITAL AND FAMILY THERAPY	1-3	3-9	4-12
II ASSESSMENT AND TREATMENT IN MARITAL AND FAMILY THERAPY	4-5	12-15	16-20
III HUMAN DEVELOPMENT AND FAMILY STUDIES	2-4	6-12	8-16
IV ETHICS AND PROFESSIONAL STUDIES	1	3	4
V RESEARCH	1	3	4
VI SUPERVISED CLINICAL PRACTICE	12 successive months	9	12
VII ELECTIVE	1	3	4
TOTAL		<u>45</u>	<u>60</u>



State of Kansas

Mike Hayden, Governor

Department of Health and Environment

Office of the Secretary

Stanley C. Grant, Ph.D., Secretary

Landon State Office Bldg., Topeka, KS 66612-1290

(913) 296-1522
FAX (913) 296-6231

January 19, 1990

The Honorable Roy Ehrlich, Chairman
Senate Public Health and Welfare Committee
State Capitol, Room 138-N
Topeka, Kansas 66612

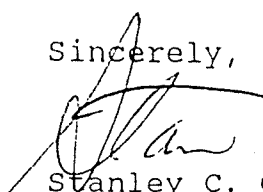
Dear Roy:

The proposed amendments to Senate Bill 257 appear to satisfy the department's previous concerns with the original bill.

As you are aware, the technical committee completed the review of the marriage and family therapists' application and my report as the Secretary was issued to the legislature. I do not intend to reopen the review of the marriage and family therapist application, nor do I think it advisable to entertain recommendations to change my conclusion after the legislature has begun deliberating its action on the issue.

If the department can be of any assistance to the legislature in its deliberations, staff will be happy to do so.

Sincerely,


Stanley C. Grant, Ph.D.
Secretary

cc: Representative Marvin Littlejohn

Attachment 6
S.O.
4/3/90

Charles Konigsberg, Jr., M.D., M.P.H.,
Director of Health
(913) 296-1343

James Power, P.E.,
Director of Environment
(913) 296-1535

Lorne Phillips, Ph.D.,
Director of Information
Systems
(913) 296-1415

Roger Carlson, Ph.D.,
Director of the Kansas Health
and Environmental Laboratory
(913) 296-1619

X

The Honorable Roy Ehrlich, Chairperson
Committee on Public Health and Welfare
Senate Chambers
Third Floor, Statehouse

Dear Senator Ehrlich:

SUBJECT: Fiscal Note for SB 257 by Committee on Public Health and Welfare

In accordance with KSA 75-3715a, the following fiscal note concerning SB 257 is respectfully submitted to your committee.

SB 257 requires the Behavioral Sciences Regulatory Board to serve as the oversight agency with which all currently nonregulated marriage and family counselors would register.

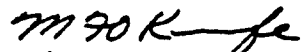
The bill mandates that all marriage and family counselors apply for registration with the Behavioral Sciences Regulatory Board, and be approved by the Board, before they can legally practice in the state. Several currently licensed mental health and medical professions are exempted from the provisions of the act.

The Board is authorized to assess fees for application, examination, and renewal as provided in the bill, and can reject an applicant for failure to comply with the provisions of the act. Prior to July 1, 1990, the Board would issue registration to an applicant upon completion of an examination if the applicant meets the minimum requirements set by the Board.

The bill contains requirements that an applicant must meet to be registered and gives the Board authority establish other criteria through rules and regulations. In addition, the bill sets forth actions which may be taken by the Board should a marriage and family counselor fail to comply with provisions of the act.

The Behavioral Sciences Regulatory Board estimates that enactment of this bill would require \$35,870 in additional other operating expenditures. This amount would be financed by fees charged to an estimated 200 individuals expected to apply for registration.

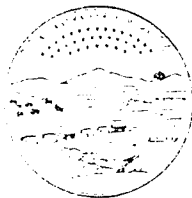
Any receipts or expenditures which would result from the passage of this act would be in addition to amounts included in the FY 1990 Governor's Report on the Budget.


Michael F. O'Keefe
Director of the Budget

6727

cc: Mary Ann Gabel, Behavioral Sciences

STATE OF KANSAS



DEPARTMENT OF HEALTH AND ENVIRONMENT

Forbes Field

Topeka, Kansas 66620-0001

Phone (913) 296-1500

Mike Hayden, *Governor*

Stanley C. Grant, Ph.D., *Secretary*
Gary K. Hulett, Ph.D., *Under Secretary*

June 9, 1988

The Honorable Marvin Littlejohn
Chairman of Public Health and Welfare
State Capitol, Room 425-S
Topeka, Kansas

Dear Representative Littlejohn:

In accordance with the Kansas Credentialing Act (KSA 65-5001, et seq), I submit my final findings and recommendations on the application seeking to license persons practicing marriage and family therapy.

Sincerely,

A handwritten signature in cursive script, appearing to read "Stanley C. Grant".

Stanley C. Grant, PhD
Secretary

SCG:CR:p

Enc.

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT

EXECUTIVE SUMMARY OF THE FINAL REPORT

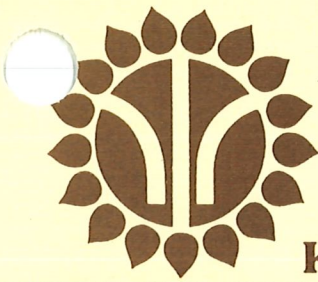
MARRIAGE AND FAMILY THERAPISTS' CREDENTIALING APPLICATION

The Secretary of Health and Environment Recommendations to the Legislature:

I concur with the technical committee that all statutory criteria are met. However, I disagree with the technical committee's conclusion that there is a need to credential marriage and family therapists in order to protect the public from the documented harm. Therefore, I recommend that the application be denied since protection of the public can be improved without credentialing the occupation.

The technical committee found that the only documented case of potential harm was due to sexual exploitation of clients by psychotherapists. Research studies show that sexual exploitation by psychotherapists do occur and that 90 percent of the clients who are sexually exploited sustained some type of damage. The technical committee noted that regulating marriage and family therapists would not reduce the problem of sexual exploitation. I agree with the findings and the conclusion made by the technical committee. However, I conclude that since regulation would not reduce the incidence of sexual exploitation, there is no need to credential marriage and family therapists. It appears that harm caused by sexual exploitation is not generated by a lack of specialized training but from ethical or moral failures. Credentialing protects the public by setting minimum standards of education and training in order to practice. Therefore, credentialing in this case would not address the issue of harm.

I recommend that the legislature consider enacting legislation similar to the Minnesota Client Protection System to offer the public protection from sexual exploitation by psychotherapists. The Minnesota Client Protection System involves: 1) Changing the criminal and civil laws to include the therapists-client sexual relationship; 2) requiring all psychotherapists to distribute a "client bill of rights" to clients prior to treatment; and 3) establishing a board of unlicensed mental health service providers. This system was specifically designed to combat unethical and immoral issues involving psychotherapists and clients. These measures offer protection to the client from sexual exploitation by making the act illegal, providing victims court recourse, educating the public about unethical acts, making available to the public information about the training and certification of unlicensed practitioners, and providing recourse to victims through board sanctions of unlicensed practitioners. The unlicensed mental health service providers board will be able to gather information about marriage and family therapists and other unlicensed mental health providers that is currently not available. This information will formalize state monitoring of the issues while providing a mechanism for determining if other possible actions such as title protection for certain occupational groups is needed.



KANSAS PSYCHOLOGICAL ASSOCIATION

Testimony on SB 257

April 3, 1990

I am Dr. David Rodeheffer and am here today representing the Kansas Psychological Association, its president, Dr. Joseph Weaver and its Board of Governors. We would like to thank-you for an opportunity to comment on SB 257, a registration act for marriage and family therapists.

What profession is being registered?

We are appearing in opposition to this bill because it fails to adequately define the type of training and the code of ethics by which the behavioral sciences board should judge an applicant for registration. If passed, this bill would charge the BSRB to:

1. "...formulate and implement a code of ethics..."
2. "...establish ... continuing education requirements..."
3. "... study and investigate the practice of marriage and family therapy within the state in order to improve the standards imposed for the registration of marriage and family therapists..."
4. "... develop by rule and regulation appropriate techniques, including examinations and other methods, for determining whether applicants for registration and individuals registered are qualified..."
5. decide what programs meet the criteria (unstated) for adequate training. No specific course content and no educational hour requirements are stated. These judgments would all be left up to the BSRB.

Our organization strongly feels that the judgments this bill is asking the board to make goes way beyond the scope of the board's authority and expertise.

Any profession who wishes to be sanctioned by this state should present its credentials to the legislature in order that it you can adequately judge the merits of the application and in order that it is clear what professional title the legislature is sanctioning. This bill fails to accomplish this. If passed, you would be putting your trust

Attachment 7
W.O.

into the BSRB to define what this profession should entail.

What scope of practice is being endorsed?

While not defining exactly what requirements an individual should meet in order to be called a "Marriage and Family Counselor", this bill essentially gives them the authority to diagnose and treat. New Section 2, lines 31 - 33 defines their scope of practice to entail "...assessment and treatment of cognitive, affective or behavioral problems within the context of marital and family systems." What educational and training requirements does this group have to give them expertise to assess and treat cognitive problems? Will they have courses on cognitive development and functioning? Will they have courses on psychopathology and its treatment? This registration act does not answer these issues. How can the legislature endorse such a scope of practice when it does not know what type of education and training persons registered by this act will have? By contrast, both the Psychology licensing act and the registered masters level psychologist registration act, are very specific as to not only the educational hour requirements but the core content areas of those programs.

Will this bill restrict other disciplines?

While this bill would allow other disciplines to practice marriage and family therapy, it is not clear that how it would allow them to present themselves. For example could they list their scope of practice as including marriage and family therapy or would they have to register under this act first? Again, this bill is too vague and fails to address this issue. The underlying issue however, is the question of whether marriage and family therapy is a technique, e.g. the difference between a physician practicing surgery and one not, or is there a defined profession of marriage and family therapy, with a well-defined code of ethics, a well-defined educational and training program and a defined scope of practice based on the educational background?

In summary, our opposition to this bill arises from the fact that it fails to adequately define the basis for this profession. As a result, it makes it impossible to define a scope of practice commensurate with its training and educational standards and places too much authority on the BSRB to define the basis and scope of this practice.

Thank-you for allowing us the time to testify on this bill. I would be glad to answer any questions now or at a later time.



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TESTIMONY PRESENTED TO

THE GOVERNMENTAL ORGANIZATION COMMITTEE

by

THE KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT

Senate Bill 257

In the 1970s the Kansas legislature was confronted with numerous requests from health care occupations to be licensed by the state. The legislature felt that it needed a mechanism to review all pertinent information in order to determine whether the benefits to society outweighed the societal costs of licensing a certain group. Hence, the credentialing review program was established in 1980 through KSA 65-5001 et seq. The statutes placed the responsibility of administering the program with the Kansas Department of Health and Environment.

"Credentialing" is defined as the formal recognition of professional competence through registration, licensure, or other statutory means. The reasons occupations seek credentialing regulations often include a desire to upgrade the status of the occupation, limit those who can practice in a certain field, enhance earning potential, or obtain third-party reimbursement. At the same time, credentialing can have a negative and/or positive impact on the public. For example, it can provide the public some protection against untrained practitioners through assuring an entry level of competency of practitioners and/or increasing the cost of health care. One emphasis of the review process is to determine whether the unregulated occupation creates a harmful situation to the public and whether credentialing would address the harm.

The credentialing review process begins when a health care occupational group seeking to be credentialed by the State of Kansas submits an application to the Secretary of Health and Environment. The application is taken through an extensive review process involving a technical committee and the Secretary.

The technical committee and Secretary must find that the information gathered during the hearings and in the application documented that the nine criteria (KSA 65-5006) are met and that a need for credentialing exists before a recommendation for credentialing can be made. The nine criteria pertain to various issues on

Attachment 8
H.O.
4/3/90

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whether a need for protection from the unregulated occupation exists and what effects credentialing of the occupation would have on the public. If the criteria are found met and a need for credentialing exists, the Secretary must apply the criteria specified in KSA 65-5007 to determine the appropriate level of credentialing (licensure, registration, and/or other statutory means) to protect the public from the documented harm.

The Kansas Association of Marriage and Family Therapy submitted a credentialing application to the department in 1987. A seven-member technical committee consisting of three currently credentialed health care personnel and four consumers conducted three public meetings and two public hearings to review this application. The end product of the review process was a final report by the Secretary of Health and Environment issued to the legislature on June 9, 1988.

In summary, the final report by the Secretary to the legislature concluded that all of the statutory criteria are met. However, there is not a need to license or register marriage and family therapists in order to protect the public from the documented harm. Therefore, a recommendation was made that the application be denied. Rationale for the decision is as follows (refer to attachment for final report).

It was found that the only documented case of harm was due to sexual exploitation of clients by psychotherapists. The technical committee noted that regulations in the form of credentialing would not reduce the problem of sexual exploitation. In addition, harm caused by sexual exploitation is not generated by a lack of specialized training but from ethical or moral failures. Credentialing protects the public through setting minimum standards of education and training in order to practice. Therefore, credentialing would not address the issue of harm in this instance. Hence, the Secretary did not recommend registering marriage and family therapists to protect the public from sexual exploitation.

Some type of action is needed to address the problem of sexual exploitation of clients. Documentation revealed that sexual exploitation is a very real and widespread problem. National studies show that five to seven percent of male psychiatrists, PhD psychologists, and physicians reported having had sexual intercourse with clients while clients were in treatment. Double that number have had erotic contact with clients. Complaints by Kansans to the Attorney General's office about noncredentialed therapists and complaints to the Board of Behavioral Sciences and the Board of Healing Arts about credentialed therapists reveal that the problem is here at home as well. All of the major health professions have declared that sexual intimacy (intercourse or erotic contact) with a client is unethical and is classified as "sexual exploitation." Studies show that 90 percent of the clients involved sexually with therapists sustain some type of damage - ranging from personality negatively affected (34 percent), hospitalization (11 percent), and suicide (one percent).

The Secretary, in the final report, recommended that legislation modeled after initiatives taken in Minnesota be considered to combat the problem of sexual exploitation. The recommended legislative initiative package included: (1) changing the criminal law to make it unlawful for a mental health provider to sexually exploit a client; (2) changing the civil law to allow victims of sexual exploitation to sue for damages received due to incidents; (3) requiring

mental health providers to distribute to clients prior to treatment educational material which includes a statement that sexual intimacy is never appropriate and should be reported; and (4) establishing a regulatory body to oversee the unlicensed/unregistered mental health provider.

These initiatives are preventive in nature, provide consumer education and consumer access to information and correct the currently inadequate recourse avenues available to victims. These initiatives serve the public and address a multiplicity of issues involving sexual exploitation. These initiatives correspond with the statutory provision that recommendations of the Secretary shall be consistent with the policy that the least regulatory means of assuring the protection of the public is preferred. The least regulatory means is statutory regulation such as creation or extension of criminal or civil actions or injunctive remedies. A more restrictive means is registration and the most restrictive means is licensure.

Presented by: Richard Morrissey, Deputy Director
Division of Health
Kansas Department of Health and Environment
April 3, 1990

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TESTIMONY BEFORE THE HOUSE GOVERNMENTAL ORGANIZATION COMMITTEE

S.B. 257

TUESDAY, APRIL 3, 1990

CHAIRMAN WALKER, VICE-CHAIRMAN RAMIREZ, AND COMMITTEE MEMBERS:

I am Dr. William L. Albott, Vice-Chairman of the Behavioral Sciences Regulatory Board appearing before you today on behalf of the board and in opposition to S.B. 257 for reasons I will outline in specific sections of this bill. Overall, the board views this legislation as either problematic, unclear, unmanageable, or not feasible.

New Sec. 3. (e) (page 2, lines 12-16)

Historically the legislature has recognized that any profession seeking recognition and regulation has the burden of self-study to establish minimal entry standards in terms of education and training and to maintain an ongoing process of self-examination to insure that as the knowledge base of the profession grows, the profession will recommend standards to the regulatory agency through the legislative process. The board believes this section relieves the profession of this responsibility and gives it to the board. Such a process is very costly and considering the implication for other regu-

Attachment 9
H.O. 4/3/90

lated groups, sets what the board believes to be a very dangerous precedent that may well preclude the board from carrying out its responsibilities.

New. Sec. 3. (f) (page 2, lines 17-18)

This section mandates the board to formulate and implement a code of ethics. On page 53 of the Application for Credentialing Marriage and Family Therapists, submitted by the Kansas Association for Marriage and Family Therapy (KAMFT) to the Department of Health and Environment on September 7, 1987, the group refers to the American Association for Marriage and Family Therapy (AAMFT) Code of Ethics. The board is confused as to why it would be mandated to formulate and implement a professional code of ethics. Is this an appropriate function or responsibility of the board?

New. Sec. 5. (a)(2) (page 2, lines 30-31)

This section has been amended to significantly reduce the post-graduate supervised experience requirement from two years to 500 hours, which according our calculations constitutes approximately 12.5 weeks. This reduction significantly differs from the requirements stated on page 55 of KAMFT's credentialing application, in which the group proposes "two calendar years of work experience and family therapy under supervision consisting of 1,000 hours of direct clinical contact with couples or families and 200 hours of supervision of that contact work by an approved supervisor."

Each currently regulated profession under the board's jurisdiction is statutorily required to complete a minimum of two years of post-graduate supervised experience. This amendment establishes a requirement that is not consistent with other regulated groups.

New Sec. 5. (a)(3)(A) (page 2, lines 32-35)

This section appears to authorize the board to approve educational institutions, rather than to approve a program of studies within an accredited educational institution. The board is confused, inasmuch as it has been consistently told by the Legislature that it is inappropriate for the board to approve educational institutions.

New Sec. 5. (a)(3)(B) (page 2, lines 35-38)

This section authorizes the board to register applicants who are graduates of accredited educational institutions in a "related field." It is unclear to the board what the legislative intent is for a related field, particularly in light of the exempted professional groups (psychologists, social workers, counselors, nurses, etc.) that are contained in New Sec. 10 (page 4, lines 21-41) and (page 5, lines 1-8.)

New. Sec. 5. (a)(3)(C) (page 2, lines 39-41)

This section authorizes the board to register applicants who have obtained the minimum of a master's degree from an "educational institution in a related field with additional work from an educational program in marriage and family therapy." It appears the educational institution is not required to be accredited, which seems inconsistent with (A) and (B). The Legislative intent of related field is unclear, as well as "additional work". Does additional work mean formal academic course work and if so, how many hours? Or, does additional work mean completion of a continuing education workshop, seminar, etc.?

New Sec. 5. (a)(5), (page 3, line 2)

This section requires applicants to pass an examination approved by the board. On page 56 of KAMFT's credentialing application, the applicant group states, "At present there is no written examination." It is unclear to the board what examination is now being proposed. If the intent is for the board to develop this examination, we must note the task is clearly beyond current resources and from a budgeting point of view, could well be projected to exceed the current total board budget probably for several years.

Sec. 14. (page 6, line 19, 25, 30, 31, 35, 42) and (page 7, line 6, 9, 14, and 20)

The statutory citations in this section refer to the social work statutes. These statutes were assigned new numbers in the K.S.A. 1989 Supplemental and should be changed accordingly.

An article entitled "Accreditation: What Constitutes Appropriate Marriage and Family Therapy Education?" appearing in the July, 1988 Journal of Marital and Family Therapy reported the results of a recent survey of training directors of Marriage and Family Therapy programs and clinical members of AAMFT, in which these groups were asked to identify themselves as to their "profession." Of the training directors, 42% identified their primary profession as being a family therapist, while 58% identified their primary profession as being something other than a family therapist (i.e., psychologist, social worker, etc.). Of the clinical members, 27.3% identified their primary profession as being a family therapist, while 73% identified their primary profession as being something other than a family therapist. The overall view of these two groups indicated that 51.8% believed marriage and family therapy to be a separate discipline, while 48.2% disagreed.

A review of the 1987 KAMFT Directory indicates a membership count of 161 non-student Kansas residents. Of these members, 78 or 48% are currently regulated by this board under the psychology, social work, registered master level psychology, and professional counselor statutes. Thirteen or 8% of the remaining membership appear to hold either theology degrees or a nursing degree, which leaves only 70 people or 44% of the membership who may seek registration to practice as a marriage and family therapist.

Is it then the legislature's intent to regulate a "specialty practice" rather than to regulate a profession and in doing so, would not the legislature then be in the position of establishing a discipline or profession? Are all "specialty practice" groups--hypnotherapists, biofeedback specialists, cognitive therapists, Gestalt therapists, etc.--going to now seek registration? This prospect takes on almost nightmarish qualities.

Thank you for allowing the board an opportunity to express its concerns. I will be happy to attempt to answer any questions you may have.