

Approved: 3-13-00  
Date

## MINUTES OF THE SENATE COMMITTEE ON PUBLIC HEALTH AND WELFARE.

The meeting was called to order by Chairperson Sandy Praeger at 10:00 a.m. on March 7, 2000 in Room 526-S of the Capitol.

All members were present except:

Committee staff present: Norman Furse, Revisor of Statutes  
Lisa Montgomery, Revisor of Statutes  
Hank Avila, Legislative Research Department  
JoAnn Bunten, Committee Secretary

Conferees appearing before the committee:

Shelby Smith, representing the Kansas Chapter, National Association of Social Workers  
A. Elizabeth Cauble, PhD, social work professor, University of Kansas  
Ann Weick, Dean, University of Kansas School of Social Welfare  
Carol Ramirez Albott, social work representative on the Behavioral Sciences Regulatory Board  
Mark Kaufman, Assistant Professor, Department of Social Work, Washburn University  
Nancie Palmer, PhD., Chair, Department of Social Work, Washburn University  
Phyllis Gilmore, Executive Director, Behavioral Sciences Regulatory Board  
Ron Hein, representing Mental Health Credentialing Coalition

Others attending: See attached list

### **Introduction**

The Chair introduced Gordon Hibbard, Chairman of the Behavioral Sciences Regulatory Board, who expressed appreciation to Phyllis Gilmore and her staff at BSRB for their dedication in providing better services to licensees of the Board.

### **Hearing on SB 626 -Board of social work established**

Shelby Smith, representing the Kansas Chapter, National Association of Social Workers, testified before the Committee in support of **SB 626** which would create a new state agency called the Board of Social Work. The bill provides for the power and duties overseeing the licensure of social workers and the related funding to be transferred from the Behavioral Sciences Regulatory Board to the Board of Social Work in FY 2001. Mr. Smith noted that the request for a separate Board for social workers was not a turf battle, not a scope of practice issue, but would be in the best interest in protecting the public as outlined in his written testimony. (Attachment 1)

Other conferees appearing before the Committee and expressing their support for **SB 626** included:

A. Elizabeth Cauble, PhD, social work professor, University of Kansas, who noted that the focus of the eleven-member BSRB was on issues related to the practice of traditional mental health, and that the representation on the Board was disproportional to the number of social work licensees, (Attachment 2); Ann Weick, Dean, University of Kansas School of Social Welfare, felt that the establishment of an independent board is a proposal designed to correct the current imbalance and that it would make possible for social work representatives and a public member to focus exclusively on regulatory issues facing social work, (Attachment 3); Carol Ramirez Albott, social work representative on the Behavioral Sciences Regulatory Board, noted one area of concern she had was that the Board chose to ignore the recommendations of the social work representatives regarding social work applications, (Attachment 4); Mark Kaufman, Assistant Professor, Department of Social Work, Washburn University, pointed out that the proposed legislation is based upon the "Model State Social Work Practice Act" prepared in 1997 by the American Association of State Social Work Boards, (Attachment 5); Nancie Palmer, PhD., Chair, Department of Social Work, Washburn University, felt that the creation of an independent regulatory structure composed primarily of social work practitioners at all levels with the inclusion of public participation would be in keeping with the best practice, policy and protection of citizens of Kansas, (Attachment 6).

CONTINUATION SHEET

MINUTES OF THE SENATE COMMITTEE ON PUBLIC HEALTH AND WELFARE, Room 526-S, Statehouse, at 10:00 a.m. on March 7, 2000.

Written testimony in support of **SB 626** was also provided by Marilyn Page, PhD, Kansas Public Health Association, Inc. (Attachment 7) and Margaret A. Presley, ACSW, Associate Professor, Bethany College Social Work Program, (Attachment 8).

Speaking in opposition to the bill was Phyllis Gilmore, Executive Director, Behavioral Sciences Regulatory Board, who stated that the Board feels the interdisciplinary board is a good model because it is efficient and has made progressive changes over the past few months as evidenced in the 100% change of staff. Ms. Gilmore noted that they believe a common ground can be found on every issue, and that the public is best served by the checks and balances and give and take of the present system than by the creation of another bureaucracy. She further noted that the Board has a working meeting scheduled in April with the SRS chiefs from the entire state for the purpose of developing and enhancing a working policy between the BSRB and SRS. (Attachment 9)

Also speaking in opposition to **SB 626** was Ron Hein, representing the Mental Health Credentialing Coalition. Mr. Hein noted that while opposing the development of a brand new board for social workers, the MHCC and its members are fully aware that there are some complaints which social workers have had in regard to past practices of the BSRB and its staff. Some of those concerns have been addressed and solved by changes in the board membership and changes in the staff. He also pointed out that the new board and staff have solved problems and have eliminated inefficiencies which have occurred in the previous administration of the BSRB. (Attachment 10)

The Committee discussed what complaint and problem issues the BSRB handles and whether there is a fiscal note of the bill.

**Adjournment**

The meeting was adjourned at 11:00 a.m.

The next meeting is scheduled for March 8, 2000.

# SENATE PUBLIC HEALTH AND WELFARE COMMITTEE GUEST LIST

DATE: 3-7-00

NAME	REPRESENTING
Maisha Schrempf	BSRB
Hellen Gilmore	BSRB
Gordon Hubbard	BSRB - Public Member - Pharm
Self	myself
Bob Gordon	KUDSW
Betsy Canale	myself
Mark Kaufman	myself
Stacy Westerland	KS chapter NASW
Sheela Smith	" " "
Valley Finney	Ks. Public Health Assoc.
Ann Munk	Univ. of Kansas School of Soc. Welfare
Tamra Arnold	Univ. of Kansas Pharmacy School
Danielle M Chacecey	Univ. of Kansas Pharmacy School
Jeanne Alpkew	Social Work Prof/Coordinator
Cynthia Dreastin	myself
Stacey Brisson	myself
Ram Dixon	myself
Margaret Thomas	myself
Ron Hein	Mental Health Credentialing Coalition

the SHELBY  
SMITH  
group

Testimony in Support of SB 626

Shelby Smith, Lobbyist

Kansas Chapter, National Association of Social Workers (KNASW)

Senate Public Health and Welfare Committee

March 7, 2000

All fifty states license and regulate social workers. Thirty-eight states, including Missouri, Oklahoma, and Colorado, have an independent regulatory structure for social workers. It is my understanding, in Kansas, there are fifteen regulatory structures, nine of which are independent in their statutory design.

Behavioral Sciences Regulatory Board (BSRB) has existed for twenty years. It was initially designed to include social workers and Ph.D psychologists. This arrangement was satisfactory because the board functioned with a clear distinction between the two professions. **The current eleven member BSRB came into existence only four years ago with two professions becoming newly licensed and additional members added to BSRB.** Since that time, the board has quite naturally focused on the tasks of the newly licensed professions—writing rules and regulation; supporting legislation to add to scope of practice and statutory authority; learning regulatory responsibilities; and a multitude of other tasks.

**Over the last four years the established previous distinction between the professions has been lost as three of the four professions, now on the BSRB board, identify themselves as mental health providers, mostly doing psychotherapy.** This is an unacceptable shift. Social work is not included because it is not exclusively about offering mental health services. The public is served by social workers in a broad array of practice.

For example, social work practices include: performing child abuse investigations; child welfare casework, including various court recommendations work; investigations of adult abuse; health care services in such agencies as hospices, home health, and long term care; juvenile justice casework; elementary and secondary school social work services; early intervention/community based services like Headstart, Healthy Start, teen pregnancy prevention, and domestic violence services. **None of this work is traditional mental health work.** Some of our clientele are highly vulnerable, such as abused children and neglected elderly. The regulatory board and oversight of social workers must take the full practice of a profession into account.

✓ **Our request for a separate Board for Social Workers is not a turf battle. It is not a scope of practice issue. *Instead, it is an issue of protecting the public.* The current BSRB shortchanges the regulatory duties of protecting the public because of the lack of enough social workers on the board to address social work regulatory issues.**

**The social work profession welcomes a thorough regulation of our work.** We recognize the public's right to expect professionalism and specific accountability of social workers. We believe the public will be best served, in regulatory responsibilities, by an independent board focused on the multiple practice of social work. SB 626 is the bill that can make this happen.

**Finally, we are not asking for public monies.** The licensure fees paid by social workers would pay for the social work board. **We are asking you to make efficient use of social work fees and focus them on regulating social workers.**

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Senate Public Health & Welfare  
Date: 3-7-00  
Attachment No. 1



Senate Public Health and Welfare Committee  
Testimony in Support of Senate Bill 626  
A. Elizabeth Cauble, PhD, LMSW  
March 7, 2000

Good morning. I am Dr. Betsy Cauble and am currently a social work professor at Kansas State University. I am also chair of the Professional Standards Committee of the Kansas Chapter of the National Association of Social Workers. More importantly I have been a practicing social worker for approximately twenty-five years in four states. It is because I am deeply concerned about the practice of social work and the vulnerability of the clients we serve that I am here today to speak in favor of Senate Bill 626. This legislation will establish an independent board for social work regulation.

Who among you has not heard a complaint about a social worker who did not act to remove a child from an abusive home, or who removed a child unnecessarily from his home? Can you imagine a client more vulnerable than an abused child? I cannot. It is because of clients like this that the regulation of social work practice is necessary and critical. Twenty-five years ago the State of Kansas recognized the importance of regulation to protect its most vulnerable citizens and passed social work licensure. Today the effectiveness of the regulation has been diluted by the inattention to these most vulnerable clients by the Behavioral Sciences Regulatory Board (BSRB).

Before discussing the current situation, I want to acknowledge the good work that the staff under the leadership of executive director Phyllis Gilmore has done. Social workers across the state have commented about the improved customer service at BSRB since Ms. Gilmore's appointment. The problem that I am discussing today is a result of the structure of the current BSRB.

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Four years ago BSRB was expanded from a seven-member board to an eleven-member board. Since that time the focus of the Board's meetings has been on issues related to the practice of, what I will refer to as, traditional mental health. Because representation on the board is disproportional to the number of licensees, we social workers find ourselves isolated on this composite board. In the past three years, no attention has been given to the multiple practice issues of social work separate from that of mental health (like psychotherapy).

What do I mean by the "multiple practice issues of social work"? I mean the practice of child welfare that includes not only child abuse and neglect investigations, but also the placement of children in foster homes, the screening of potential adoptive parents, and the placement of children with those parents. I mean assessment of whether or not vulnerable adults have been abused in their own homes or in nursing homes. I mean the practice of social work in a school setting, in a homeless shelter, in a battered women's shelter, or on the police response team for domestic violence. None of these settings meet the traditional mental health criteria, yet the clients served are among the most vulnerable of Kansas's citizens.

✓ And, not once in the past three years has the practice of social work in any of these settings been discussed during a BSRB Board meeting. Not once has the issue of child welfare privatization and its impact on the practice of social work been discussed during a BSRB Board Meeting.

This might be interpreted that the BSRB Board is not doing its job and simply telling them to get with it would suffice. Unfortunately it just isn't that simple. For the four non-social work professions, the issues of traditional mental health practice are germane to their primary functions. It is important that they spend time on the critical practice issues of "psychotherapy." Although their input is

valued, their concerns and time constraints make the current structure unworkable for adequate social work regulation.

Time constraints are not limited to the once per month board meeting. Testimony following mine will speak to you about the impossible task of two volunteer board members providing all the necessary services to over 5,000 licensees. Suffice it to say that most of the complaints against social workers brought to the attention of BSRB are related to non-traditional mental health practice issues. When and how will these be addressed?

Social workers asked for licensure twenty-five years ago, because we work by a code of ethics that includes an abiding commitment to do no harm to the populations we serve. We believe that through regulation, minimum practice standards are established and the public has protection. With the current situation at BSRB, I can assure no one that the standards are being maintained. It is critical that for that abused child, that vulnerable adult, that battered woman we establish a regulatory structure that has the time and duty to examine all aspects of social work practice. Please pass Senate Bill 626.

Thank you.

Kansas Senate  
Public Health and Welfare Committee

Testimony re. SB 626

Presented by Ann Weick, Dean  
University of Kansas  
School of Social Welfare  
March 7, 2000

I am pleased to speak in support of SB 626 and its intent to establish an independent board of social work. I have been a university social work educator for 23 years and a dean of a school of social work for 12 of those years. In those capacities, I am well aware of the need for strong educational and professional standards established and overseen by independent bodies. National standards for social work education are set by the Council on Social Work Education. Standards for social work practice are set by the National Association of Social Workers and by state licensing statute. Each is an essential partner in insuring that social workers are prepared for practice and carry out their practice in ways that, at the least, do not bring harm and, at best, help to transform the lives of people they serve.

The Behavioral Sciences Regulatory Board (BSRB) has been the mechanism for insuring that practice standards are met at an acceptable level by all who are licensed. This is a significant public responsibility and an enormously time-consuming task. The problem is that the current structure of the Board seriously hampers social work representatives in carrying out the work of overseeing social work statutory standards for our profession.

There are <sup>11</sup>9 members of the Board, with the following representation:

<u>Group</u>	<u>License Holders</u>	<u>BSRB Members</u>
<b>Marriage and Family Therapists</b>	<b>342</b>	<b>1</b>
<b>Professional Counselors</b>	<b>527</b>	<b>1</b>
<b>Psychologists</b>	<b>1050</b>	<b>3</b>
<b>Social Workers</b>	<b>5308</b>	<b>2</b>
<b>Public Members</b>		<b>4</b>

It is obvious from this information that social workers have grossly disproportionate representation. Licensed social workers represent 70% of all those licensed by the Board. If social workers were to have representation reasonably comparable to the other professions, at a modest estimate of 1 representative for every 500 licensed members, there would need to be 10 social work representatives on BSRB instead of the current two members.

The establishment of an independent board is a proposal designed to correct the current imbalance. It will make it possible for social work representatives and a public member to focus exclusively on regulatory issues facing social work. As a matter of principle, each profession must have the authority to make decisions about whether the standards appropriate for their profession are being met. In the current structure, other professions can and do override these decisions. Establishing an independent social work board will give its members the time and the authority to carry out their mandated responsibilities in a manner which ensures professional accountability and public safety. I strongly urge you to support this bill.

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Attachment No. 3

SENATE PUBLIC HEALTH AND WELFARE COMMITTEE  
SB 626  
March 7, 2000

SENATOR PRAEGER AND MEMBERS OF THE COMMITTEE:

I appreciate the opportunity to testify before you today in support of SB 626.

My name is Carol Ramirez Albott, I have practiced as a social worker in the State of Kansas for the past 29 years, most of which were as a Licensed social worker. From June 1995 until July 1999, I served as one of the two social work representatives on the Behavioral Sciences Regulatory Board.

✓ I would like to address three areas that were the most problematic while serving on the Board. The first area is the disproportionate workload. Because there are in excess of 5,000 licensed social workers regulated by BSRB, there is concurrently a disproportionate and excessive workload that is the responsibility of the social work representatives. Figuring conservatively during the four years I served on the board, I spent a minimum of 882 hours on board business or approximately 20 hours per month. For example, when I joined the board there were 76 pending complaints filed against professionals regulated by BSRB that were in various stages of disposition. Because of the sheer number of social workers, 47 or 61% of these complaints were lodged against social workers. I inherited a caseload of 19 pending cases and the other social work representative had at least those many, if not more. In addition to all the other responsibilities, I spent my evenings and weekends working with the board's investigator and other board staff, investigating and resolving these cases, as well as handling the new complaints as each was filed with the board. By the end of my term, I had five cases left in various stages of completion. However, it took years to resolve many of the complaint cases. If we had had more social workers on the board, these case could have been resolved in a more timely manner, which would have been better both for the public making the complaint, as well as the professional waiting for disposition.

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✓ The second area of concern is maintaining minimum educational and experiential standards of practice, as established by the Legislature. On many occasions, the board chose to ignore the recommendations of the social worker representatives regarding a social work application. While the social worker representatives attempted to maintain standards, the board frequently chose to accept lower standards.

✓ The third concern I have is protection of the public, as I understand the board's mandated Legislative charge to be. During my tenure, it was my impression that the board frequently functioned more as a professional association, rather than a regulatory board; and, that the board was more interested in accommodating the various professions, rather than protecting the public.

In closing, I respectfully request the committee's support for favorable passage of SB 626. I welcome any questions you may have.

**Testimony in Support of SB 626**

Mark Kaufman, LSCSW, LMFT, JD  
Assistant Professor, Department of Social Work  
Washburn University

**Senate Public Health and Welfare Committee**

March 7, 2000

Prior to joining the Department of Social Work faculty at Washburn, I worked as a licensed social worker in Kansas for 12 years in a wide variety of practice settings: a child sexual abuse treatment agency in Kansas City; the Menninger Clinic; and the V.A. Medical Center in Topeka. Previously, I practiced law for 8 years, often working with social workers from various practice settings.

I urge you to support SB 626. An independent social work regulatory board will better serve the needs of tens of thousands of Kansans who annually receive a wide variety of social services from more than 5000 social workers in this state. A regulatory board's passage and enforcement of a complex set of rules and regulations is the process that protects the public and creates the legal accountability for each and every licensee under that regulatory structure.

- In many social work practice settings, social workers must develop a working knowledge of, and an ability to apply, a variety of federal statutes such as the Child Abuse Prevention and Treatment Act, the Indian Child Welfare Act, and the Adoptions and Safe Families Act of 1997. In Kansas, the legal and practice environment for social workers has changed in recent years - e.g., the privatization of child welfare services and the changes in the juvenile justice system - and other changes may be on the way (e.g., the "child in need of care" code).
- The proposed legislation, SB 626, is based upon the "Model State Social Work Practice Act" prepared in 1997 by the American Association of State Social Work Boards. The Association, supported by dues-paying members including the current BSRB, spent two years researching, studying and discussing the best way to protect the public regarding the practice of social work and the regulation of social workers. The proposed SB 626 reflects the Association's conclusion that independent social work regulatory boards are the best way to serve and protect the public.

As a social worker with a legal background, I urge your consideration and support for SB 626.

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Attachment No. 5

Testimony In Support of SB 626

Offered by:

Dr. Nancie Palmer LMSW/ACSW

To:

The Senate Committee on Public Health and Welfare

March 7, 2000

- Thank you Senator Prager and Committee members for the opportunity to come before you and provide testimony concerning SB 626.
- The profession of social work emerged over 100 years ago in response to desperate human need and suffering. An integral part of its evolution as a helping profession is its inclusion of social and political action, particularly in behalf of society's most vulnerable citizens.
- Kansas was one of the first states in the nation to not only recognize licensing of social workers as the essential path to protecting the public, it substantially met this moral and ethical obligation through the licensing of social work practitioners at all levels such as the Baccalaureate, and Masters, and later Clinical Specialist.
- In essence, social work and social work education has taken the responsibility of protecting vulnerable populations and meriting public trust very seriously. Critical to meeting such responsibilities, is the need to adequately and appropriately regulate practitioners.
- There is currently great disparity between the number of social workers in the state (over 5, 000) and the number of social work representation on the BSRB Board of Directors (two on an eleven member board).
- The voices of baccalaureate level social workers, and MSW's in practice, particularly those other than in mental health, have not been heard nor adequately represented. This is a substantial number of social work practitioners through out the state.
- Likewise, the result of this disparity leaves a public more vulnerable and at risk due to a lack of an encompassing and complementary vision of the whole of the social work profession as it practices in Kansas.
- Our Code of Ethics, requires us to practice competently, justly, ethically, and skillfully. Social Work is a complex profession working in complex environments.
- We welcome regulation for it is in keeping with the fundamental purposes and vision of the social work profession.
- SB 626, through the creation of an independent regulatory structure composed primarily of social work practitioners at ALL levels with the inclusion of public participation, is in keeping with best practice and policy, and protection of our citizens.
- I urge your support of this bill.

Senate Public Health & Welfare  
Date: 3-7-00  
Attachment No. 6

**KANSAS  
PUBLIC  
HEALTH  
ASSOCIATION, INC.**

March 3, 2000

**KANSAS PUBLIC HEALTH ASSOCIATION, INC.**

*AFFILIATED WITH THE AMERICAN PUBLIC HEALTH ASSOCIATION*

215 S.E. 8TH AVENUE

TOPEKA, KANSAS 66603-3906

PHONE: 785-233-3103 FAX: 785-233-3439

E-MAIL: kpha@networksplus.net

Dear Sen. Praeger and Senate Public Health and Welfare Members,

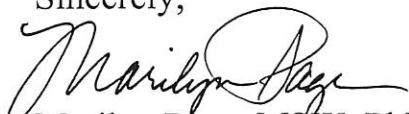
The social work section of the Kansas Public Health Association is strongly in favor of the creation of an independent regulatory body for social work. Social workers in the health field help promote and maintain the physical and psychosocial well-being of patients, promote conditions essential to assure the maximum benefits from short- and long-term care services, are involved with the prevention of physical and mental illness, attend to the social and emotional impact of illness or disability on individuals and families, and promote ethical responses to address the often conflicting value positions held by various parties involved in health care settings. Social workers in the health field are interested in mental health issues; however, we are concerned about other aspects of people's lives.

The present Behavioral Sciences Regulatory Board is not attending to the constituent needs of social workers in our health settings. The Board seems interested only in the mental health therapeutic process. We want a regulatory group that is concerned about standards of health care practice for social work set by our professional organization.

Kansas social workers need a regulatory board that is tuned in to our many and varied fields of work. In terms of health, this body would work for at least the minimum standards that social workers do not harm the health and wellbeing of Kansas citizens. We pay for a regulatory board out of our own membership fees so the state would not incur additional costs.

As the social work section chair of the Kansas Public Health Association, I speak for its member social workers. Please advocate for Senate Bill 626.

Sincerely,

  
Marilyn Page, MSW, PhD

Senate Public Health and Welfare  
Date: 3-7-00  
Attachment No. 7

Testimony on Senate Bill No. 626

Sirs & Madams:

As President on the Kansas Council on Social Work Education (KCSWE), I come to you today in this written testimony in support of SB 626. I apologize for not being able to be present in person. SB 626 is a request for a change in structure in the form of a separate board for Social Workers. This is not a request for more money, as the Social Work licensure fees would allow for a separate board to continue to be self-supporting. It simply is a more equitable and workable way of handling Social Work licensure and having all levels of professional Social Workers represented. Therefore, on behalf of the Social Work education programs throughout the State, the students we educate, the agencies which will employ them, and the constituents they will have as clients, I strongly urge your passage of SB 626.


KCSWE is an organization made up of faculty from all the Social Work Education Programs in the State, both private and public. There are eight schools with undergraduate programs and four with graduate programs. (Newman University is only graduate level.) The organization deals with not only educational issues but also a wide variety of issues that impact the social work profession and thereby our students. The schools in Kansas graduate 250-300 baccalaureate level and slightly fewer masters' level graduates in Social Work each year. The large majority of Licensed Social Workers in the state pass through our various programs. Therefore, we are vitally interested in the licensing processes in the state. The nature of our concerns is outlined below.

As you are well aware, the Behavioral Sciences Regulatory Board (BSRB) has been a multidisciplinary board from its inception. This model was originally functional for all parties concerned. However, this is no longer the case. More professional categories have been added to the list of licensed professionals. Additionally, the numbers of Social Workers has grown tremendously since the inception of the board. These two factors have greatly changed the nature of the Board's functioning, bringing us to the current dysfunctional situation.

The primary concern is the disproportionate representation of Social Workers on the Board. There are two social work members on the Board, as is the case for each of the other professions. This is 18% of the Board membership. However Social Workers are 5200 of the 7200 or 78%, of licensed persons covered by BSRB. This results in a less than equitable situation. In addition, the majority of the Social Workers in the state are baccalaureate level professionals and both of the BSRB positions are masters or above.

The second issue of concern is the workload for the two Social Work members on the Board. Even though there is a large amount of the work done by office staff, decisions and complaints that have to rise to the Board level are totally overwhelming for only two members. Again, this is simply a direct result of the number of licensed Social Workers. Social Workers are a vital part of the network of services to the citizens of the State of Kansas. They continue to be in great demand, with job openings at all educational levels and in a broad spectrum of services going unfilled for some months all across the state. Therefore, it is unlikely that this situation will get any better and will continue to grow worse under the current BSRB structure.

Unlike many problems faced by the Senators and Representatives in the State, there is a solution to this problem and it is before you in SB626. We appreciate your support and urge the passing of this bill. Thank you very much for your attention.

  
Margaret A. Presley, LSCSW, ACSW  
Associate Professor, Bethany College Social Work Program  
President, Kansas Council on Social Work Education





BILL GRAVES  
Governor

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### SENATE TESTIMONY PUBLIC HEALTH AND WELFARE COMMITTEE

March 7, 2000

Madam Chair and Committee Members:

Thank you for the opportunity to testify regarding SB 626. I am Phyllis Gilmore, the Executive Director of the Behavioral Sciences Regulatory Board. I also have my Master of Social Work Degree from Washington University in St. Louis and am licensed by the BSRB as a Specialist in Clinical Social Work. I would also mention that two other of our credentialing staff are social workers, one is also an LSCSW and the other is a BSW.

The BSRB is the licensing board for most of the state's mental health professionals, the doctoral level psychologists, the master level psychologists, the bachelor, master and clinical level social workers, the master level professional counselors, and the master level marriage and family therapists. Additionally, some of the drug and alcohol counselors are registered with us, although most of them are registered with SRS at the present time.

The Board opposes SB 626. However, I should note that the two board members who are social workers were no votes to this opposition. One gave no explanation of his vote and the other gave an explanation of vote stating that he felt the board should be neutral on this issue and should not take a position on the bill. He was not voting in support of the bill.

✓ The Board feels the interdisciplinary board is a good model. It is efficient and has made progressive changes. Some of these changes would be evidenced in the 100% change of staff at the board. The Board was proactive in making these changes and put in many hours related to decisions it felt would best serve the public.

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Attachment No. 9

The Board has become increasingly able to communicate and work together. This is evidenced by the regulations currently being written to implement HB 2213 passed by the legislature last year. There were no changes made to the regulations presented from the social work advisory committee. Changes did occur, but these were from the Attorney General's office and from the Department of Administration. None of these are policy changes, only legal and grammatical type changes.

We would hope that the positives for public protection for the idea of a composite board would far outweigh any negatives to the profession of social work. And in regard to the last point we invite the profession of Social Work to celebrate its own diversity as well as that of the BSRB and come together and dialogue with us over issues of concern. We believe common ground can be found on every issue. Further we believe the public is best served by the checks and balances and give and take of the present system than by the creation of another bureaucracy. One must ask the question how the public would be better served by a separate board over the cooperation required by an interdisciplinary board.

The public members are also very vital to the BSRB. Most agree that they offer an invaluable perspective. The line between a professional association and a regulatory board can become fuzzy. Promoting the profession and promoting public safety can sometimes be at variance and the public members offer important perspective in this regard. The proposed board has just one public member. Four of eleven members are public members on the BSRB. A good question is how would the proposed board benefit the public vs. how it would benefit social work.

**Related to this would be our concern about (b) (1) on page 4 beginning on line 12. We would have strong question as to the wisdom of a regulatory board ever becoming a member of professional association. The integrity of the distinction of a regulatory board from a professional organization must always be clearly maintained.**

We would suggest that a composite board offers a place to work out differences of opinions between professionals. I think the Legislature has seen this happen repeatedly. While it may be somewhat disturbing to the profession, it is very worthwhile to the public.

**Another question to answer is whether the board members represent their respective professions or do they simply bring that perspective and knowledge to the board as they represent the public safety. If it is the latter, the question of representation according to the number of licensees in each discipline becomes moot.**

Some valid questions to ask, however, are:

1. What is the position of the non-clinical social worker as it relates to the board?
2. What is the degree of autonomy of the advisory committee?
3. What is the working relationship between SRS and the BSRB?
4. Is the fee structure of the BSRB fair and equitable to all of the disciplines?
5. Are investigations handled adequately and in a timely manner? Does social work need to consider the idea of a peer review committee?
6. Would different levels of licensure of the BSRB social work board members help the board to better understand the profession.

✓ I would like to tell the committee that we have a working meeting scheduled in April with the SRS Chiefs from the entire state for the purpose of developing and enhancing a working policy between the BSRB and SRS. I would add that this was at the request of the BSRB, although met with great enthusiasm by SRS. We are certainly willing and have even offered to dialogue with other groups who have concerns related to the BSRB. Certainly that offer continues to be open.

Many changes have and are in the process of occurring at the BSRB. Thanks to the request of your Chair, I have already had the opportunity to brief the committee on these changes. I would just comment that I have been awestruck by the appreciation expressed by all of the professions, including social work for these changes. We hear from many social workers who are quite happy with the BSRB and do not see a need for changes. I do not think I need to mention that we get many comments from social workers wondering why this bill has been introduced. I will not belabor this point other than to remind the committee that the representation in this room today is not representative of the all social workers and probably not even the majority of social workers in the state. As in most professions probably the bulk of folks are conscientiously going about their work and not even aware of this meeting today.

It seems that this proposed legislation allows the legislature the opportunity to decide by which type of board the public is better served. It allows the opportunity to reaffirm its support of a composite or interdisciplinary model.

It also seems that some of the friction and disagreement within the social work community itself has been displaced as disagreement with and within the board. Social work is a very diverse profession and even among social workers there is not consensus on many issues including separation from the BSRB.

Thank you for allowing this opportunity speak against SB 626 this morning I will be happy to stand for questions.

# **BSRB Mission Statement**

“The mission of the BSRB, in accordance with the intent of the Kansas Legislature, is to protect and serve the consumers of services offered by BSRB licensees, through the issuance of licenses, resolution of complaints and the creation of appropriate regulations, accomplished through efficiency, fairness and respect to all those involved.”

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**SENATE BILL No. 626**

By Committee on Public Health and Welfare

2-11

9 AN ACT establishing the board of social work; providing for the powers,  
10 duties and functions thereof; amending K.S.A. 65-6302, as amended  
11 by section 11 of chapter 117 of the 1999 Session Laws of Kansas, and  
12 K.S.A. 1999 Supp. 74-7501 and 74-7507 and repealing the existing  
13 sections.

14

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

16 New Section 1. (a) The responsibility for enforcement of the provi-  
17 sions of this act is hereby vested in the board of social work which is  
18 hereby established. The board shall have all of the duties, powers and  
19 authority specifically granted by or necessary for the enforcement of this  
20 act, as well as such other duties, powers and authority as it may be granted  
21 by applicable law.

22 (b) The board shall consist of five members, one of whom shall be a  
23 representative of the public, and four of whom shall be social workers,  
24 who possess the qualifications specified in subsection (c). The board shall  
25 at all times be comprised of one baccalaureate social worker, one master's  
26 social worker and two clinical social workers. The governor shall appoint  
27 the members of the board in accordance with the provisions of this act.

28 (c) (1) Each social worker member of the board shall at all times as  
29 a board member:

30 (A) Be a resident of this state;

31 (B) be currently licensed and in good standing to engage in the prac-  
32 tice of social work in this state;

33 (C) at the time of appointment, have been actively engaged in the  
34 practice of social work, for at least one out of the last five years; and

35 (D) have at least three years of experience in the practice of social  
36 work.

37 (2) The public member of the board shall be a resident of this state  
38 who has attained the age of majority and shall not be or ever have been  
39 a baccalaureate social worker, master's social worker or clinical social  
40 worker, or the spouse thereof, or a person who has ever had any material  
41 financial interest in the provision of social work services or who has en-  
42 gaged in any activity directly related to the practice of social work.

43 (d) Except as provided in subsection (e), members of the board shall



be appointed for a term of four years, except that members of the board who are appointed to fill vacancies which occur prior to the expiration of a former member's full term shall serve the unexpired portion of such term.

(e) The terms of the members of the board shall be staggered. Each member shall serve until a successor is appointed and qualified. Of the members first appointed to the board, two shall be appointed for two-year terms, two shall be appointed for three-year terms and one shall be appointed for a four-year term.

(f) No member of the board shall serve more than two consecutive full terms. The completion of the unexpired portion of a full term shall not constitute a full term for purposes of this section.

(g) Any vacancy which occurs in the membership of the board for any reason, including expiration of term, removal, resignation, death, disability or disqualification shall be filled by the governor in the manner prescribed by subsection (b).

(h) (1) A board member may be removed upon one or more of the following grounds:

(A) The refusal or inability for any reason of a board member to perform the duties as a member of the board in an efficient, responsible and professional manner;

(B) the misuse of office by a member of the board to obtain pecuniary or material gain or advantage personally or for another through such office;

(C) the violation by any member of the laws governing the practice of social work; or

(D) for other just and reasonable causes as determined solely by the board pursuant to applicable law.

(2) Removal of a member of the board shall be in accordance with the administrative procedures act of this state.

(i) (1) The board shall elect from its members a chairperson and such other officers as it deems appropriate and necessary to the conduct of its business. The chairperson shall preside at all meetings of the board and shall be responsible for the performance of all of the duties and functions of the board required or permitted by this act. Each additional officer elected by the board shall perform those duties customarily associated with the position and such other duties assigned from time to time by the board.

(2) Officers elected by the board shall serve terms of one year commencing with the day of their election and ending upon election of their successors and shall serve no more than three consecutive full terms in each office to which they are elected.

(3) The board shall employ an executive director to serve as a full-time employee of the board. The executive director shall be responsible

for the performance of the administrative functions of the board and such other duties as the board may direct.

(j) (1) The board shall meet at least once every three months to transact its business. The board shall meet at such additional times as it may determine. Such additional meetings may be called by the chairperson of the board or by  $\frac{2}{3}$  of the members of the board.

(2) The board shall meet at such place as it may from time to time determine. The place for each meeting shall be determined prior to giving notice of such meeting and shall not be changed after such notice is given without adequate prior notice.

(3) A majority of the members of the board shall constitute a quorum for the conduct of a board meeting and, except where a greater number is required by this act or by any rule and regulation of the board, all actions of the board shall be by a majority of a quorum.

(4) All board meetings and hearings shall be open to the public. The board may, in its discretion and according to law, conduct any portion of its meeting in executive session, closed to the public.

(k) The board may, in its discretion, employ persons in addition to the executive director in such other positions or capacities as it deems necessary to the proper conduct of board business and to the fulfillment of the board's responsibilities as defined by this act.

(l) Members of the board attending meetings of the board or attending a subcommittee meeting thereof authorized by the board shall be paid compensation, subsistence allowances, mileage and other expenses as provided in K.S.A. 75-3223 and amendments thereto.

New Sec. 2. (a) As provided by law the board shall be responsible for the control and regulation of the practice of social work in this state including, but not limited to, the following:

(1) The licensing by examination or by licensure transfer of applicants who are qualified to engage in the practice of social work under the provisions of law;

(2) the renewal of licenses to engage in the practice of social work;

(3) the establishment and enforcement of compliance with professional standards of practice and rules of conduct of social workers engaged in the practice of social work;

(4) the determination and issuance of standards for recognition and approval of degree programs of schools and colleges of social work whose graduate shall be eligible for licensure in this state, and the specification and enforcement of requirements for practical training;

(5) the enforcement of those provisions of law relating to the conduct or competence of social workers practicing in this state, investigate any such activities related to the practice or unauthorized practice of social work and the suspension, revocation or restriction of licenses to engage

1 in the practice of social work;

2 (6) the collection of professional demographic data;

3 (7) the issuance and renewal of licenses of all persons engaged in the  
4 practice of social work; and

5 (8) inspection of any licensed person at all reasonable hours for the  
6 purpose of determining if any provisions of the laws governing the prac-  
7 tice of social work are being violated.

8 (b) The board shall have such other duties, powers and authority as  
9 may be necessary to the enforcement of this act and to the enforcement  
10 of board rules and regulations made pursuant thereto, which shall include,  
11 but not be limited to, the following:

12 (1) The board may join such professional organizations and associa-  
13 tions organized exclusively to promote the improvement of the standards  
14 of the practice of social work for the protection of the health and welfare  
15 of the public and organizations and associations whose activities assist and  
16 facilitate the work of the board.

17 (2) The board may receive and expend funds, in addition to moneys  
18 appropriated to the board, from parties other than the state, if:

19 (A) Such funds are awarded for the pursuit of a specific objective  
20 which the board is authorized to accomplish by law, or which the board  
21 is qualified to accomplish by reason of its jurisdiction or professional  
22 expertise;

23 (B) such funds are expended for the pursuit of the objective for which  
24 they are awarded;

25 (C) activities connected with or occasioned by the expenditures of  
26 such funds do not interfere with the performance of the board's duties  
27 and responsibilities and do not conflict with the exercise of the board's  
28 powers;

29 (D) such funds are kept in a separate account; and

30 (E) periodic reports are made concerning the board's receipt and  
31 expenditure of such funds.

32 (3) The board may establish a bill of rights for clients concerning the  
33 services a client may expect in regard to social work services.

34 (4) Any investigation, inquiry or hearing which the board is empow-  
35 ered to hold or undertake may be held or undertaken by or before any  
36 member or members of the board and the finding or order of such mem-  
37 ber or members shall be deemed to be the order of the board when  
38 approved and confirmed by the board.

39 (5) The board shall report any violation of this act which is deemed  
40 as violative of applicable criminal statutes to the attorney general. The  
41 attorney general shall cause appropriate proceedings to be instituted in  
42 the proper court in a timely manner and to be prosecuted in the manner  
required by law. Nothing in this paragraph shall be construed to require

1 the board to report violations whenever the board believes that public  
2 interest will be adequately served in the circumstances by a suitable writ  
3 ten notice or warning.

4 (6) The board shall have the power to subpoena and to bring before  
5 it any person and to take testimony either orally or by deposition, or both  
6 in the same manner as prescribed in civil cases in the courts of this state  
7 Any member of the board, hearing officer or administrative law judge  
8 shall have power to administer oaths to witnesses at any hearing which  
9 the board is authorized to conduct, and any other oaths authorized in any  
10 act administered by the board.

11 (7) In addition to the fees specifically provided for by law, the board  
12 may assess additional reasonable fees for services rendered to carry out  
13 its duties and responsibilities as required or authorized by law. Such serv-  
14 ices rendered shall include, but not be limited to, the following:

15 (A) Issuance of duplicate certificates or identification cards;

16 (B) mailing lists, or reports of data maintained by the board;

17 (C) copies of any documents;

18 (D) certification of documents;

19 (E) notices of meetings;

20 (F) licensure transfer;

21 (G) examination administration to a licensure applicant;

22 (H) examination materials.

23 (8) The board may adopt such rules and regulations as necessary for  
24 the administration of the powers and duties of the board.

25 New Sec. 3. (a) The board shall remit all moneys received by or for  
26 the board from fees, charges or penalties to the state treasurer at least  
27 monthly. Upon receipt of any such remittance the state treasurer shall  
28 deposit the entire amount thereof in the state treasury. Twenty percent  
29 of such amount shall be credited to the state general fund and the balance  
30 shall be credited to the social work fee fund. All expenditures from the  
31 social work fee fund shall be made in accordance with appropriation acts  
32 upon warrants of the director of accounts and reports issued pursuant to  
33 vouchers approved by the chairperson of the board or by a person or  
34 persons designated by the chairperson.

35 (b) On the effective date of this act, the director of accounts and  
36 reports shall transfer all moneys in the behavioral sciences regulatory  
37 board fee fund which are attributable to fees paid into the fee fund by  
38 social workers licensed by the behavioral sciences regulatory board to the  
39 social work fee fund.

40 New Sec. 4. (a) On July 1, 2000, all of the powers, duties and func-  
41 tions of the behavioral sciences regulatory board which relate to the reg-  
42 ulation of social workers are hereby transferred to and conferred and  
43 imposed upon the board of social work.

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(b) The board of social work shall be the successor in every way to the powers, duties and functions of the behavioral sciences regulatory board which relate to the regulation of social workers, in which the same were vested prior to the effective date of this act, except as otherwise provided by this act. Every act performed in the exercise of such powers, duties and functions by or under the authority of the board of social work shall be deemed to have the same force and effect as if performed by the behavioral sciences regulatory board, in which the same were vested prior to the effective date of this act.

(c) Whenever the behavioral sciences regulatory board, or words of like effect, in regard to the regulation of social workers, are referred to or designated by a statute, contract or other document, such reference or designation shall be deemed to apply to the board of social work.

(d) All rules and regulations of the behavioral sciences regulatory board which relate to the regulation of social workers, shall continue to be effective and shall be deemed to be duly adopted rules and regulations of the board of social work, until revised, amended, revoked or nullified pursuant to law. The board of social work shall review such rules and regulations and shall adopt new rules and regulations, if necessary, pursuant to K.S.A. 77-415 *et seq.*, and amendments thereto.

Sec. 5. K.S.A. 65-6302, as amended by section 11 of chapter 117 of the 1999 Session Laws of Kansas, is hereby amended to read as follows: 65-6302. As used in this act, unless the context clearly requires otherwise, the following words and phrases shall have the meaning ascribed to them in this section:

(a) "Board" means the ~~behavioral sciences regulatory board of social work created by K.S.A. 74-7501~~ *section 1 and amendments thereto.*

(b) "Social work practice" means the professional activity of helping individuals, groups or communities enhance or restore their capacity for physical, social and economic functioning and the professional application of social work values, principles and techniques in areas such as psychotherapy, social service administration, social planning, social work consultation and social work research to one or more of the following ends: Helping people obtain tangible services; counseling with individuals, families and groups; helping communities or groups provide or improve social and health services; and participating in relevant social action. The practice of social work requires knowledge of human development and behavior; of social, economic and cultural institutions and forces; and of the interaction of all these factors. Social work practice includes the teaching of practicum courses in social work and includes the diagnosis and treatment of mental disorders as authorized under K.S.A. 65-6306 and 65-6319, and amendments thereto.

(c) "Psychotherapy" means the use of psychological and social meth-

ods within a professional relationship, to assist the person or persons to achieve a better psychosocial adaptation to acquire greater human realization of psychosocial potential and adaptation; to modify internal and external conditions which affect individuals, groups or communities in respect to behavior, emotions and thinking, in respect to their intrapersonal and inter-personal processes. Forms of psychotherapy include but are not restricted to individual psychotherapy, conjoint marital therapy, family therapy and group psychotherapy.

Sec. 6. K.S.A. 1999 Supp. 74-7501 is hereby amended to read as follows: 74-7501. (a) There is hereby created a behavioral sciences regulatory board consisting of ~~11~~ *nine* members appointed by the governor. The membership of the board shall be as follows: Two members of the board shall be licensed psychologists; ~~two members of the board shall be licensed to engage in the practice of social work~~; one member of the board shall be a professional counselor; one member of the board shall be a marriage and family therapist and one member of the board shall be a ~~registered masters level psychologist who on January 1, 1997, will become~~ a licensed masters level psychologist; and four members of the board shall be from and represent the general public. Each member of the board shall be a citizen of the United States and a resident of this state.

(b) The term of office of each member of the board shall be four years, except that the term of office of the new members appointed pursuant to this act, one member shall be appointed for a term of two years, one member shall be appointed for a term of three years and two members shall be appointed for terms of four years. The governor shall designate the term of office for each member appointed to the board pursuant to this act. No member of the board shall be appointed for more than two successive terms. Upon the expiration of a member's term of office, the governor shall appoint a qualified successor. Each member shall serve until a successor is appointed and qualified. Whenever a vacancy occurs in the membership of the board prior to the expiration of a term of office, the governor shall appoint a qualified successor to fill the unexpired term. The governor may remove any member of the board for misconduct, incompetency or neglect of duty.

(c) The board shall organize annually at its first meeting subsequent to June 30 and shall select from its members a chairperson and a vice-chairperson. Other meetings shall be held as the board designates. A majority of members appointed to the board shall constitute a quorum for the transaction of business.

(d) The board may appoint an executive director who shall be in the unclassified service of 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 of employment with such professional personnel as necessary, in the board's judgment, for the performance of its duties and functions and the execution of its powers.

(e) Members of the behavioral sciences regulatory board attending meetings of the board, or attending a subcommittee meeting thereof authorized by the board, shall be paid compensation, subsistence allowances, mileage and other expenses as provided in K.S.A. 75-3223, and amendments thereto.

Sec. 7. K.S.A. 1999 Supp. 74-7507 is hereby amended to read as follows: 74-7507. The behavioral sciences regulatory board shall have the following powers, duties and functions:

(a) Recommend to the appropriate district or county attorneys prosecution for violations of this act, the licensure of psychologists act of the state of Kansas, the professional counselors licensure act, ~~K.S.A. 65-6301 to 65-6318, inclusive, and amendments thereto~~, K.S.A. 74-5361 to 74-5372, inclusive, and amendments thereto, the marriage and family therapists licensure act or the alcohol and other drug abuse counselor registration act;

(b) compile and publish annually a list of the names and addresses of all persons who are licensed under this act, are licensed under the licensure of psychologists act of the state of Kansas, are licensed under the professional counselors licensure act, ~~are licensed under K.S.A. 65-6301 to 65-6318, inclusive, and amendments thereto~~, are licensed under K.S.A. 74-5361 to 74-5372, inclusive, and amendments thereto, are licensed under the marriage and family therapists licensure act or are registered under the alcohol and other drug abuse counselor registration act;

(c) prescribe the form and contents of examinations required under this act, the licensure of psychologists act of the state of Kansas, the professional counselors licensure act, ~~K.S.A. 65-6301 to 65-6318, inclusive, and amendments thereto~~, K.S.A. 74-5361 to 74-5372, inclusive, and amendments thereto, the marriage and family therapists licensure act or the alcohol and other drug abuse counselor registration act;

(d) enter into contracts necessary to administer this act, the licensure of psychologists act of the state of Kansas, the professional counselors licensure act, ~~K.S.A. 65-6301 to 65-6318, inclusive, and amendments thereto~~, K.S.A. 74-5361 to 74-5372, inclusive, and amendments thereto, the marriage and family therapists licensure act or the alcohol and other drug abuse counselor registration act;

(e) adopt an official seal;

(f) adopt and enforce rules and regulations for professional conduct persons licensed under the licensure of psychologists act of the state

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of Kansas, licensed under the professional counselors licensure act, ~~licensed under K.S.A. 65-6301 to 65-6318, inclusive, and amendments thereto~~, licensed under K.S.A. 74-5361 to 74-5372, inclusive, and amendments thereto, licensed under the marriage and family therapists licensure act or registered under the alcohol and other drug abuse counselor registration act;

(g) adopt and enforce rules and regulations establishing requirements for the continuing education of persons licensed under the licensure of psychologists act of the state of Kansas, licensed under the professional counselors licensure act, ~~licensed under K.S.A. 65-6301 to 65-6318, inclusive, and amendments thereto~~, licensed under K.S.A. 74-5361 to 74-5372, inclusive, and amendments thereto, licensed under the marriage and family therapists licensure act or registered under the alcohol and other drug abuse counselor registration act;

(h) ~~adopt rules and regulations establishing classes of social work specialties which will be recognized for licensure under K.S.A. 65-6301 to 65-6318, inclusive, and amendments thereto;~~

~~(i)~~ (h) adopt rules and regulations establishing procedures for examination of candidates for licensure under the licensure of psychologists act of the state of Kansas, for licensure under the professional counselors licensure act, ~~for licensure under K.S.A. 65-6301 to 65-6318, inclusive, and amendments thereto~~, for licensure under K.S.A. 74-5361 to 74-5372, inclusive, and amendments thereto, for licensure under the marriage and family therapists licensure act, for registration under the alcohol and other drug abuse counselor registration act and for issuance of such certificates and such licenses;

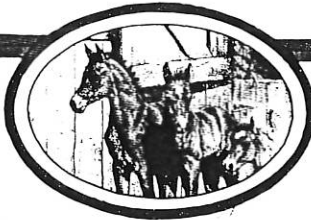
~~(j)~~ (i) adopt rules and regulations as may be necessary for the administration of this act, the licensure of psychologists act of the state of Kansas, the professional counselors licensure act, ~~K.S.A. 65-6301 to 65-6318, inclusive, and amendments thereto~~, K.S.A. 74-5361 to 74-5372, inclusive, and amendments thereto, the marriage and family therapists licensure act and the alcohol and other drug abuse counselor registration act and to carry out the purposes thereof;

~~(k)~~ (j) appoint an executive director and other employees as provided in K.S.A. 74-7501 and amendments thereto; and

~~(l)~~ (k) exercise such other powers and perform such other functions and duties as may be prescribed by law.

Sec. 8. K.S.A. 65-6302, as amended by section 11 of chapter 117 of the 1999 Session Laws of Kansas, and K.S.A. 1999 Supp. 74-7501 and 74-7507 are hereby repealed.

Sec. 9. This act shall take effect and be in force from and after its publication in the statute book.



1-11-10

Dear Phyllis and Board Members.

As I mentioned to you on the phone yesterday - this newsletter was the first time I have felt that the BSEB wanted to be open and have communication with those of us out in the field.

I have many years of being licensed and have often thought it ironic that most of us approached renewal time w/ fear and trepidation rather than a sense of confidence.

I truly hope this newsletter signifies a new era of cooperation on the part of all of us.

Thank you again,

Judith Anderson  
LCSW 1012



**Phyllis Gilmore**

**From:** Dave [dreaden@tortugas.idir.net]  
**Sent:** Tuesday, January 18, 2000 07:45  
**To:** pgilmore@ink.org  
**Subject:** newsletter

Dear Phyllis,

Thank you for Board Talk, it sounded positive, friendly and I really appreciated the lack of BSRB Speak. I look forward to working with all of you. As an LSCSW supervisor, I know I'll be having questions as we go along, and it's good to know I'll be able to understand the answers and talk with people who are indeed helpful and performing a service.

Thanks , again,  
Elaine Creaden, LSCSW  
Lawrence, KS

**Phyllis Gilmore**

**From:** Curtis & Mary Cutting [simcut@webtv.net]  
**Sent:** Friday, January 14, 2000 16:00  
**To:** pgilmore@ink.org  
**Subject:** BSRB

I am just now reading my copy of "Board Talk". Thank you for implementing this bulletin.

I was struck by your statement that the mission of the board "does not necessitate an adversarial relationship" with licensees.

I have been in practice many years, completed my supervision requirements for LCSW and ACSW....Gained my ACSW, but delayed the LCSW process only because I have always practiced in Missouri...Attempted to complete the LCSW only to run into ridiculous roadblocks by the BSRB.

My dissatisfaction with the BSRB has led me to the point where I am considering dropping my licensure with Kansas. I have continued with my licensure at the LMSW level only out of a sense of loyalty to KU. Frankly, I consider the treatment I have received by BSRB to be unprofessional and bordering on "restraint of trade". In my years as a supervisor, I am aware that my experience is not unique. Many of my subordinates have encountered similar problems.

I hope you and your staff will be able to rectify the extreme dysfunction that has existed within the BSRB.

Sincerely, Mary C. Cutting, LCSW, ACSW,LMSW

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# HEIN AND WEIR, CHARTERED

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**Testimony re: SB 626  
Senate Public Health and Welfare Committee  
Presented by Ronald R. Hein  
on behalf of  
MENTAL HEALTH CREDENTIALING COALITION  
March 7, 2000**

Madame Chairman, Members of the Committee:

My name is Ron Hein, and I am legislative counsel for the Mental Health Credentialing Coalition. The Coalition is comprised of the members of the Kansas Association for Marriage and Family Therapy, the Kansas Association of Masters in Psychology, and the Kansas Counseling Association/Kansas Mental Health Counselors Association.

The MHCC opposes SB 626. If this were an issue which impacted only social workers, and did not have an effect on other behavioral science or mental healthcare providers regulated by the Behavioral Sciences Regulatory Board, the MHCC would not be taking a position on this bill. But, SB 626 will have far reaching consequences for all licensees regulated by the BSRB.

The Mental Health Credentialing Coalition was originally constituted as a mechanism to encourage all mental health service providers and licensees of the BSRB to collaborate and cooperate on issues of importance to the clients, agencies, and other persons that all the providers serve. The historical relationship between the various providers has oftentimes been adversarial and has resulted in numerous "turf battles" which, unfortunately, were generally played out before the Kansas Legislature. These turf battles forced legislators to choose between professional groups, while not always knowing whether the legislative action would benefit their constituents and the people to be served by those providers. In short, these turf battles seem to help no one, and possibly hurt some.

As a result of this history, there has been an effort to start a new spirit of collaboration and cooperation. One of the major tenets of the MHCC is that all of the various licensees should be represented on the board itself so all providers will sit down at the same table and come to know and understand each other. Each provider group developing a mutual trust and respect for the integrity and history of each other is a better way of resolving disputes than bringing the disputes directly to the legislature. Over the past three years, the legislature has responded favorably to such an approach, choosing collaboration over turf battles not only with the BSRB licensees, but with other healthcare providers and intra-industry disputes of all types.

At one time, the social workers had a board of their own. Later, the legislature saw value in consolidating various boards and agencies from an administrative perspective. Even later, the legislature saw value in groups working together, not separately. SB 626 would be a step backwards in time. It would discourage people from meeting at the same table as each group

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retreated into their own little world. SB 626 will dramatically impair communication, collaboration, and cooperation with the other groups involved in the behavioral sciences arena.

While opposing the development of a brand new board for social workers, the MHCC and its members are fully aware that there are some complaints which social workers have had with regards to past practices of the BSRB or its staff. Some of those concerns have been addressed and solved by changes in the board membership and changes in the staff. The new board and staff have solved problems and have eliminated inefficiencies which have occurred in the previous administrations of the BSRB.

For example, under the old administration, there had been serious backlog problems. I understand that the backlog has been eliminated by the new board and administration.

The MHCC also understands that there are specific concerns that social workers, as a licensee group, have because of the sheer size of the membership and the nature of their practice and profession. The MHCC believes that these problems can be solved by having the appropriate people sit down at the same table and discuss these problems and possible solutions. Dividing one group off from the BSRB or taking other drastic measures of that nature will not solve those problems, and will create others. For the legislature to head down the road to the type of solution proposed by SB 626 is to begin a process of unraveling all the progress that has been made to date.

When the MHCC first became aware of the existence of this bill, I approached one of the NASW lobbyists about our desire to meet, discuss the concerns, and attempt to reach consensus on possible solutions. The BSRB is the perfect body to perform that function, or to oversee and mediate if the provider groups need assistance coming to agreement. This approach will be far more successful, less traumatic, and less potentially damaging to the people served, and to the public at large. Often times, during turf disputes, the provider groups forget that the BSRB exists not to benefit the providers, but to protect the interests of the public in dealing with those providers. In the same vein, the legislature, when deciding provider disputes, is motivated by the same interest: what is in the best interest of the consumer?

Today, it is well recognized that the multi-disciplinary approach is the best way to serve the public in the behavioral sciences and mental health field. Elimination of a structure that currently exists that facilitates such multi-disciplinary approach to those consumers will ultimately work to the detriment of the public. There are few problems today facing licensees of the BSRB that do not cross lines into jurisdiction of other providers. Cooperation among the BSRB providers will be facilitated by the existence of an all inclusive board, rather than a structure where each licensee is regulated under its own self-contained board.

The MHCC would strongly urge the committee to defeat SB 626, and to encourage the BSRB to review concerns of the NASW that have prompted the introduction of this bill. This should be done with a view towards solving some of the concerns, while, at all times, recognizing that protection of the public should be the ultimate goal.

Thank you very much for permitting me to testify, and I will be happy to yield to questions.

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