

**Behavioral Sciences Regulatory Board
Psychology Advisory Committee
February 9, 2021, 6:00 p.m.
Minutes
DRAFT**

Call to Order at 6:04 p.m.

Advisory Committee Members attending on Zoom: Abby Callis, Carol Crane, Doug Wright, Janine Kesterson, Johnna Norton, Monica Kurylo, and Ric Steele

Staff present: Assistant Attorney Generals – Janet Arndt and Jane Weiler. BSRB Staff - David Fye, Leslie Allen, and Cindy D’Ercole.

Advisory Committee Member Training. Janet Arndt, Assistant Attorney General, provided Advisory Committee Member Training.

Executive Session. Abby Callis motioned, pursuant to K.S.A. 75-4319, I move that the Psychology Advisory Committee recess into executive session for 30 minutes and reconvene the open meeting at 7:50 p.m. The meeting will be reconvened remotely by conference call at 1-877-278-8686, PIN 327072, and at the link to the Board’s YouTube channel as stated in the notice of meeting that was sent to individuals who requested notice and published on the Board’s website: ksbsrb.kansas.gov. The justification is consultation that would be deemed privileged in the attorney-client relationship with the Board’s legal counsel, Assistant Attorneys General Janet Arndt and Jane Weiler. The subjects to be discussed in the executive session concern the Kansas Open Meetings Act during the disaster emergency declaration and pending legislation. Board staff who are included as the client in the executive session are David Fye and Leslie Allen. Johnna Norton seconded. The motion carried.

Review and Approval of Minutes from the Licensed Psychology Advisory Committee Meeting on October 13, 2020. Johnna Norton moved to approve the minutes from the October 13, 2020, advisory committee meeting and Doug Wright seconded the motion. The minutes were approved by voice vote.

Introduction of Executive Director David Fye. David Fye, Executive Director for the Behavioral Sciences Regulatory Board (BSRB), noted that the previous Executive Director, Max Foster, retired from state service on January 8, 2021, and Mr. Fye is serving as the new Executive Director for the BSRB. The Executive Director provided information on his professional background and his interest in serving in this position.

Executive Director Report – The Executive Director noted the bill requested by the BSRB with statutory changes for licensees is HB 2208 and will receive an upcoming hearing in the House Health and Human Services Committee. An identical Senate bill is being requested from the Senate Public Health and Welfare Committee, to allow either committee to work on the bill without having to wait on action for the other chamber. This is also a safety measure, in the event one of the committees would need to have a condensed meeting schedule due to the pandemic. The Executive Director provided an update on the agency’s budget being considered by the Legislature, noting that the House reported the budget favorably with no changes. The Senate Committee on Transparency and Ethics reported the agency’s budget favorably with no changes, and the Senate Ways and Means Committee would be considering the agency’s budget the following day. Members of the advisory committee welcomed the Executive Director and thanked him for serving the agency.

New Business

a. Request to Raise the Limit on Televideo Supervision Allowed During Postdoctoral Experience. Ric Steele, Chair of the Advisory Committee, discussed e-mail requests received by the BSRB, from individuals asking that K.A.R. 102-1-5a be changed concerning the current language that states, in an emergency situation, some post-doc hours may be done over televideo, but not more frequently than one out of four sessions. The

rest of the hours must be done in person. The Chair noted that several other professions have made changes to allow more frequent tele-supervision and some individuals have asked if their current supervision done over televideo will count. Members of the advisory committee asked if any of the executive orders under the disaster declaration would allow flexibility in this area. Assistant Attorney General Jan Arndt clarified that no executive order would allow for this flexibility, but the only way to change this policy would be to change the regulation. The advisory committee recommended revisiting this topic at the next advisory committee meeting.

b. HB 2209/Psypact. The Chair noted HB 2209 had been posted to the Legislature's website. This bill would bring Kansas into a multi-state compact named the Psychology Interjurisdictional Compact, a.k.a. Psypact, which would allow licensed psychologists to practice tele-psychology services in compact states and up to 30 days of in-state practice in compact states. Ms. Arndt provided a summary of the bill, noting that the compact is structured a little differently than other recent multi-state compacts, because the fee for individuals to participate in the compact goes to the Psypact organization, rather than to a state. Ms. Arndt noted that passage of the compact could be a financial issue for the state, because the state is tasked to investigate complaints, and with more individuals practicing in Kansas providing telehealth services, it is anticipated that the number of complaints will increase, and the number of investigative hours needed from the BSRB staff to investigate these complaints is expected to increase, however the funding to support these investigations would be going to Psypact, rather than the BSRB.

Jane Weiler, Assistant Attorney General, noted issues related to coordination of investigations between states under the compact. Cindy D'Ercole, lead investigator for the BSRB, noted jurisdictional issues and concerns whether out-of-state providers would be aware of the rules in Kansas and whether members of the public in Kansas would know how to file a complaint against an out-of-state practitioner. In the discussion, it was noted that licensees tend to support multi-state compacts due to the opportunity to provide services, however the question before the advisory committee is whether the BSRB can provide adequate protections for the public under the compact. It was noted that an individual would not be able to practice under the compact if that practitioner had discipline on their record, so it is anticipated that there will be an increase in the number of individuals appealing discipline to allow them to practice in Psypact. Concerns were also noted whether Kansas would be able to know when individuals were practicing tele-therapy in Kansas. It was noted that Psypact was relatively new, because the compact was not able to function until a certain number of states joined, so there had been very little time to gauge the positive or negative impact of the compact on participating states.

Members of the Advisory Committee asked what options could be done to make their voices heard. It was noted that the advisory committee could make a request or recommendation to the full Board requesting the Board take a position in the form of testimony at the upcoming bill hearing. The Executive Director noted testimony to legislative committees could be proponent testimony, neutral testimony, or opponent testimony. It was also noted that neutral testimony could express concerns, while not coming out specifically in support or against a particular bill. Members of the Advisory Committee recommended that opponent testimony be requested from the full Board, requesting HB 2209 not move forward at this time, due to the Advisory Committee needing more time to review the bill, as well as other concerns including the need to ensure the public can be adequately protected under the compact and other issues noted in the discussion at the advisory committee meeting. No advisory committee member who was present at the time of discussion expressed opposition to the advisory committee's recommendation that opponent testimony be requested by the full Board.

Adjournment. Doug Wright moved to adjourn the meeting. Abbey Callis seconded the motion. The motion carried by voice vote.

**BEHAVIORAL SCIENCES REGULATORY BOARD
LICENSED PSYCHOLOGY ADVISORY COMMITTEE MEETING AGENDA
April 13, 2021**

Due to COVID-19, the Board office is practicing social distancing. The office space does not allow for a meeting while practicing social distancing, therefore, the meeting will be conducted virtually on the Zoom platform.

You may view the meeting here:

https://www.youtube.com/watch?v=Af4t_a5CBXM

To join the meeting by conference call: 877-278-8686

The pin: 327072

If there are any technical issues during the meeting, you may call the Board office at, 785-296-3240.

The Behavioral Sciences Regulatory Board may take items out of order as necessary to accommodate the time restrictions of Board members and visitors. All times and items are subject to change

Tuesday, April 13, 2021

6:00 p.m. Call to order and Roll Call

I. Opening Remarks, Advisory Committee Chair

II. Agenda Approval

III. Review and Approval of Minutes from Advisory Committee Meeting on February 9, 2021

IV. Public Comment – Dr. Elizabeth Muenks, Diversity Committee Chair, Kansas Psychological Association, and Dr. Krithika Malholtra, President, Kansas Psychological Association: Support for Requiring Continuing Education Courses in Diversity, Equity, and Inclusion

V. Executive Director’s Report – David Fye, Executive Director for the Behavioral Sciences Regulatory Board

VI. Old Business

- A. Update on HB 2209 (Psypact)
- B. CE Requirements for Diversity, Equity, and Inclusion
- C. Recommendations for Changes to K.A.R. 102-1-5a(e)(3)(a)

VII. New Business

- A. Retention or Disposal of Practitioner Records in Case of Death of a Provider – Board Requested Advisory Committees Provide Input to be Reported at the Next Full Board Meeting
- B. Review Advisory Committee Terms of Office (2 Year Terms, 4 Term Maximum)

VIII. Adjournment

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102-1-5a. Supervised experience and supervisor qualifications.

(a) Each applicant for licensure as a psychologist shall demonstrate satisfactory completion of two years of supervised experience in the practice of psychology, one year of which may be predoctoral supervised experience and at least one year of which shall be postdoctoral supervised experience, unless the applicant meets the criteria in paragraph (b)(2).

(b) Predoctoral supervised experience.

(1) The year of predoctoral supervised experience shall meet the internship requirements specified in K.A.R. 102- 1-12(b)(11).

(2) This year of predoctoral supervision may be completed on a postdoctoral basis if the applicant completes the predoctoral supervision in the course of successfully completing a program that meets both of the following requirements:

(A) Prepares the applicant to practice in an area of emphasis that is different than the area of emphasis the applicant originally completed at the time the applicant received the doctoral degree; and

(B) substantially complies with the program requirements of K.A.R. 102-1-12.

(c) Postdoctoral supervised experience. The postdoctoral supervised experience shall meet the following requirements:

(1) The supervised experience shall be attained in a public or private setting, institution, or organization that provides the supervisee with contact with other disciplines, the opportunity to utilize a variety of theories, and the opportunity to work with a broad range of populations and techniques.

(2) At least 900 hours per year of supervised experience shall be spent providing clinical psychological services.

(3) At least 180 hours per year of supervised experience shall be spent providing general or nonclinical psychological services.

(4) The supervised clinical experience shall be consistent with the supervisee's educational background and with the area of emphasis in which the applicant intends to offer services to the public. At least one-half of the supervisee's general training experience shall be relevant to the supervisee's emphasis area, which may include clinical psychology, counseling psychology, school psychology, industrial psychology, or organizational psychology.

(d) Supervisor qualifications. Each supervisor of a person who is obtaining the supervised experience required to become licensed as a psychologist shall meet the following criteria:

(1) If providing general training supervision, be a licensed or certified provider of a health-related service at the time the supervision occurred or, if the experience occurs in a state or jurisdiction without a provision for licensing or certifying that health-related profession, have attained the appropriate degree or training in the topic area in which supervision is provided;

(2) if providing supervision for the predoctoral supervised experience, be licensed at the doctoral level in psychology;

(3) if providing supervision for the postdoctoral supervised experience, have at least two years of experience that includes the clinical practice of psychology after the date of licensure at the doctoral level in psychology;

(4) meet at least one of the following conditions:

(i) Be a staff member of the practice setting or have an understanding of the practice setting's organization and administrative policies and procedures; or

(ii) be vested by the agency with authority over the supervisee's professional contacts with each of the supervisee's clients or patients. This authority shall be focused on the supervisee's skills as well as the welfare of those clients or patients whose treatment the supervisor is reviewing;

(5) if the supervisor is not employed by the public or private institution or agency that employs the supervisee, ensure that the scope of the supervisor's own responsibility and authority in that practice setting has been clearly and expressly defined;

(6) not have a familial or harmful dual relationship with the supervisee;

(7) not be under sanction from a disciplinary proceeding, unless this prohibition is waived by the board for good cause shown by the proposed supervisor; and

(8) use forms supplied by the board and submit information that is sufficiently detailed regarding the supervisee's application for psychology licensure to enable the board to evaluate the extent and quality of the supervisee's supervised experience.

(e) Supervised experience requirements.

(1) For predoctoral psychology experience settings, the supervisor shall provide one hour of individual clinical supervision for every 10 hours during which the supervisee has direct patient or client contact.

(2) For postdoctoral supervised experience settings, the supervisor shall provide one hour of individual clinical supervision for every 20 hours during which the supervisee has direct patient or client contact.

(3) The supervisor, in addition to meeting the requirements listed in subsection (d), shall perform the following:

(A) Provide individual supervision by meeting in person with the supervisee. When meeting in person is not practical due to an emergency, geographic distance, or other exigent circumstances, the supervisor may meet with the supervisee by interactive video or other electronic or telephonic means of communication. The supervisor and supervisee may use any electronic or telephonic means of communication that protects the confidentiality of their supervision. The use of these means of communication shall not exceed one out of every four supervisory sessions;

(B) be available to the supervisee at the points of decision making regarding the diagnosis and treatment of clients or patients;

(C) conduct supervision as a process that is distinct from providing personal therapy, didactic instruction, or consultation;

(D) in conjunction with the supervisee, review and evaluate the psychological services delivered and procedures used;

(E) ensure that each client or patient knows that the supervisee is practicing psychology under supervision;

(F) be available to the supervisee for emergency consultation and intervention; and

(G) maintain documentation of the supervision that details each type of the psychological services and procedures in which the supervisee engages and the supervisee's competence in each.

(f) Supervisee requirements. Each person attaining the supervised experience necessary for licensure as a psychologist shall meet the following criteria:

(1) Fully participate in the supervisory process in a responsible manner; and

(2) inform, in writing, each client or patient for whom the supervisee is practicing psychology of the name of and the means to contact the supervisor.
(Authorized by K.S.A. 2005 Supp. 74-7507; implementing K.S.A. 74-5310 and 74-5317; effective Oct. 27, 2000; amended March 10, 2006.)

102-1-15. Continuing education.

(a) Each applicant for renewal of licensure shall have earned 50 continuing education hours in the two years preceding an application for renewal. The required number of continuing education hours shall be prorated for periods of renewal that are less than the full two years, using the ratio of one- third of the continuing education hours for each six months since the date of licensure or most recent renewal. Continuing education hours for each type of continuing education activity as specified below in subsection (d) shall be prorated accordingly for those persons whose periods of renewal are less than the full two years. Each person who is licensed within six months of the current expiration period shall be exempt from the continuing education requirement for that person's first renewal period.

(b) The content of each continuing education activity shall be clearly related to the enhancement of psychology practice, values, skills, or knowledge.

(c) During each two-year renewal cycle and as part of the required continuing education hours, each licensed psychologist shall complete at least three continuing education hours of training on professional ethics and at least six continuing education hours related to diagnosis and treatment of mental disorders. These hours shall be obtained from any of the activities specified in paragraphs (d)(1), (d)(2), (d)(4), and (d)(6) of this regulation.

(d) Acceptable continuing education activities, whether taken within the state or outside the state, shall include the following:

(1) Attendance at workshops, seminars, and presentations that are sponsored, accredited, or conducted by educational institutions, professional associations, or private institutions. These activities shall be sponsored, accredited, or conducted by educational institutions, professional associations, or private institutions that are nationally or regionally accredited for training. Activities conducted by agencies, groups, or individuals that do not meet the requirements of national or regional accreditation shall be acceptable, if the content is clearly related to the enhancement of psychology skills, values, and knowledge. Actual contact hours, excluding breaks and lunch, shall be credited. A maximum of 50 continuing education hours shall be allowed;

(2) the first-time preparation and initial presentation of courses, workshops, or other formal training activities, for which a maximum of 15 continuing education hours shall be allowed;

(3) documented completion of a self-study program. A maximum of 12 continuing education hours shall be allowed;

(4) documented completion of a self-study program with a posttest that is conducted by a continuing education provider as described in paragraph (d)(1). A maximum of 40 continuing education hours shall be allowed;

(5) publication and professional presentation. Fifteen continuing education hours may be claimed for the publication or professional presentation of each scientific or professional paper or book chapter authored by the applicant. A maximum of 45 continuing education hours shall be allowed;

(6) completion of an academic course, for which a maximum of 15 continuing education hours shall be allowed for each academic semester credit hour;

(7) providing supervision as defined in K.A.R. 102-1-1, for which a maximum of 15 continuing education hours shall be allowed;

(8) receiving supervision as defined in K.A.R. 102-1-1, except in connection with any disciplinary action, for which a maximum of 15 continuing education hours shall be allowed;

(9) initial preparation for a specialty board examination, for which a maximum of 25 continuing education hours shall be allowed;

(10) participation in quality care, client or patient diagnosis review conferences, treatment utilization reviews, peer review, case consultation with another licensed psychologist, or other quality assurance committees or activities, for which a maximum of 15 continuing education hours shall be allowed;

(11) participation, including holding office, in any professional organization related to the applicant's professional activities, if the organization's activities are clearly related to the enhancement of psychology or mental health practice, values, skills, or knowledge. A maximum of 12 continuing education hours shall be allowed; and

(12) receiving personal psychotherapy that is provided by a licensed or certified mental health provider and is a part of a designated training program. A maximum of 20 continuing education hours shall be allowed.

(e) Each licensed psychologist shall be responsible for maintaining personal continuing education records. Each licensee shall submit to the board the licensee's personal records of participation in continuing education activities if requested by the board.

(f) In determining whether or not a claimed continuing education activity will be allowed, the licensed psychologist may be required by the board to demonstrate that the content was clearly related to psychology or to verify that psychologist's participation in any claimed or reported activity. If a psychologist fails to comply with this requirement, the claimed credit may be disallowed by the board.

(g) Any applicant who submits continuing education documentation that fails to meet the required 50 continuing education hours may request an extension from the board. The request shall include the applicant's reason for requesting an extension and a plan outlining the manner in which the applicant intends to complete the continuing education requirements. For good cause shown, the applicant may be granted an extension, which shall not exceed six months.

(Authorized by and implementing K.S.A. 74-7507; effective May 1, 1984; amended, T-85-35, Dec. 19, 1984; amended May 1, 1985; amended May 1, 1986; amended May 1, 1987; amended July 24, 1989; amended Oct. 27, 2000; amended July 11, 2003.)

Dr. Steele,

The Kansas Psychological Association (KPA) is writing to encourage the BSRB to consider making diversity/cultural competency CEU's required for psychologists licensed at the LP level. At this time 3 hours of Ethics CEUS and 6 hours of diagnosis and treatment are required and our recommendation is 3 hours of diversity/cultural competency be required as well. Arizona, Connecticut, Maryland, Mississippi, New Jersey, New Mexico, Ohio, Rhode Island and Texas are some of the states that require psychologists to take CEUS focused on diversity and cultural competency. We believe Kansas should join the list, as KPA remains committed to our values of diversity, equity and inclusion and believe the BSRB shares that value. We want to support a specific focus on ensuring our licensed psychologists in the state prioritize continuing educational opportunities around diversity, equity and inclusion. This requirement would help licensed psychologists meet the guidelines APA has outlined for providing psychological services to Ethnic, Linguistic and Culturally Diverse populations:
<https://www.apa.org/pi/oema/resources/policy/provider-guidelines>

Please let us know how we can further advocate for implementation of this requirement. We appreciate your consideration.

Sincerely,

Elizabeth Muenks, PhD

Diversity Committee Chair, Kansas Psychological Association

Krithika Malhotra, PhD

President-Elect, Kansas Psychological Association

Sarah Kirk, PhD, ABPP

Academic and Research Representative, Kansas Psychological Association