

102-4-7a. Professional postgraduate supervised work experience requirement. In order to be approved by the board for licensure as a clinical psychotherapist, the applicant's postgraduate supervised professional experience of master's level psychology shall meet all of the following standards.

(a) Clinical supervision shall be provided throughout the entirety of the postgraduate supervised professional experience at a ratio of one hour of clinical supervision for each 15 hours of direct client contact, specified as follows:

(1) At least 50 hours of one-on-one, individual supervision occurring with the supervisor and supervisee in the same physical space;

(2) at least 100 hours of supervision with one supervisor and no more than six supervisees in the same physical space, except when not practical due to an emergency or other exigent circumstances, at which time person-to-person contact by interactive video or other telephonic means maintaining confidentiality shall be allowed; and

(3) at least two separate clinical supervision sessions per month, at least one of which shall be one-on-one, individual supervision.

(b) The clinical supervisor of a person attaining the postgraduate supervised professional experience required for licensure as a clinical psychotherapist, at the time of providing supervision, shall meet one of the following qualifying provisions:

(1) The clinical supervisor shall be a person licensed as a psychologist.

(2) The clinical supervisor shall be a person who is currently licensed in the state of Kansas as a clinical psychotherapist and, beginning July 1, 2003, who has practiced as a clinical psychotherapist for two years beyond the supervisor's licensure date.

(3) The clinical supervisor shall be a person with qualifications substantially equivalent to the requirements for licensure in the state of Kansas as a clinical psychotherapist with no fewer than two years of experience in the practice of master's level psychology beyond the date of the supervisor's registration, certification, or licensure that is acceptable to the board.

(c) In addition to the requirements of subsection (b), each clinical supervisor shall meet these requirements:

(1) Have professional authority over and responsibility for the supervisee's clinical functioning in the practice of master's level psychology;

(2) not have a dual relationship with the supervisee;

(3) not be under any sanction from a disciplinary proceeding, unless the board waives this prohibition for good cause shown by the proposed supervisor;

(4) have knowledge of and experience with the supervisee's client population;

(5) have knowledge of and experience with the methods of practice that the supervisee employs;

(6) have an understanding of the organization and the administrative policies and procedure of the supervisee's practice setting; and

(7) be a member of the practice setting staff or meet the requirements of subsection (d).

(d) If a qualified clinical supervisor is not available from among staff in the supervisee's practice setting, the supervisee may secure an otherwise qualified clinical supervisor outside the practice setting if all of the following conditions are met:

(1) The supervisor has a sound understanding of the practice setting's mission, policies, and procedures.

(2) The extent of the supervisor's responsibility for the supervisee is clearly defined in terms of client cases to be supervised, role in personnel evaluation within the practice setting, and other aspects of the clinical supervision training plan.

(3) The responsibility for payment for supervision is clearly defined.

(4) If the supervisee pays the supervisor directly for the supervision, the supervisor maintains responsibility to the client and to the practice setting.

(e) Each clinical supervisor shall perform the following duties:

(1) Provide oversight, guidance, and direction of the supervisee's clinical practice of master's level psychology by assessing and evaluating the supervisee's performance;

(2) conduct supervision as a process distinct from personal therapy, didactic instruction, or marriage and family therapy consultation;

(3) provide documentation of supervisory qualifications to the supervisee;

(4) periodically evaluate the supervisee's clinical functioning;

(5) provide supervision in accordance with the clinical supervision training plan;

(6) maintain documentation of supervision in accordance with the clinical supervision training plan;

(7) provide the documentation required by the board when a supervisee completes the postgraduate supervised professional experience. The supervisor shall submit this documentation on a board-approved form and in a manner that will enable the board to evaluate the extent and quality of the supervisee's professional experience and assign credit for that experience;

(8) provide a level of supervision that is commensurate with the education, training, experience, and ability of both the supervisor and the supervisee; and

(9) ensure that each client knows that the supervisee is practicing master's level psychology under supervision.

(f) Each supervisor and supervisee shall develop and co-sign a written clinical supervision training plan on forms provided by the board at the beginning of the supervisory relationship. The supervisee shall submit this plan to the board and shall receive board approval of the plan before any supervised professional experience hours can begin to accrue. This plan shall clearly define and delineate the following items:

(1) The supervisory context;

(2) a summary of the anticipated types of clients and the services to be provided;

(3) the format and schedule of supervision;

(4) a plan for documenting the following information:

(A) The date of each supervisory meeting;

(B) the length of each supervisory meeting;

(C) a designation of each supervisory meeting as an individual or group meeting;

(D) a designation of each supervisory meeting as conducted in the same physical space or otherwise, in the case of emergency; and

(E) an evaluation of the supervisee's progress under clinical supervision;

(5) a plan to notify clients of the following information:

(A) The fact that the supervisee is practicing master's level psychology under supervision;

(B) the limits of client confidentiality within the supervisory process; and

(C) the name, address, and telephone number of the clinical supervisor;

(6) the date on which the parties entered into the clinical supervision training plan and the time frame that the plan is intended to encompass;

(7) an agreement to amend or renegotiate the terms of the clinical supervision training plan, if warranted, including written notification of these changes to the board office, as provided in subsection (h);

(8) the supervisee's informed consent for the supervisor to discuss supervision or performance issues with the supervisee's clients, the supervisee's other clinical or employment supervisors, the board, or any other individual or entity to which either the supervisee or the supervisor is professionally accountable; and

(9) a statement signed by each supervisor and supervisee acknowledging that each person has read and agrees to the postgraduate supervised professional experience requirements set forth in this regulation.

(g) Supervised practicum hours completed in a doctoral program of study that is primarily psychological in content may be approved by the board toward the postgraduate supervised professional experience requirements for licensure as a clinical psychotherapist if the applicant meets both of the following qualifications:

(1) The applicant received a master's degree in psychology or clinical psychology and met the coursework, program, and college or university requirements provided in K.A.R. 102-4-3a before completing the doctoral practicum hours.

(2) The applicant's doctoral-level practicum fully met the requirements provided in subsections (a), (b), (c), and (e).

(h) All changes to the clinical supervision training plan shall be submitted by the supervisee to the board for its approval. The changes shall be submitted no more than 45 days after the date on which the changes took effect. If the supervisee fails to submit the changes to the board within that 45-day period, no supervised hours of practice shall be accrued or credited for any practice, beginning on the date the changes took effect through the date on which the changes to the plan are approved by the board.

(Authorized by K.S.A. 74-7507; implementing K.S.A. 74-5363; effective March 27, 1998; amended Aug. 4, 2000; amended Aug. 13, 2004.)