

Testimony to the Senate Public Health and Welfare Committee

Senate Bill 238 "Reducing certain requirements for licensure by the behavioral sciences regulatory board"

Proponent Testimony with Amended Changes

Chair Hilderbrand and Members of the Committee – Thank you for the opportunity to provide written proponent testimony today in support of **SB 238, with modifications**. My name is Denise Cross, and I am the President and CEO of Cornerstones of Care. For decades, Cornerstones of Care has been providing child welfare and behavioral health services. The organization partners with the Kansas Department for Children and Families to provide Foster Care Case Management, Reunification and Adoption; Family Preservation; Transitional Living; and Functional Family Therapy Services for thousands of Kansas children and their families.

We support the work of the Special Committee on Kansas Mental Health Modernization and Reform to address recruitment, retention, and staffing shortages. The majority of the bill reduces certain requirements for licensure by the behavioral sciences regulatory board; however, it also creates or retains barriers to social workers receiving or providing clinical supervision. Kansas has a lower number of behavioral health care professionals per capita compared to the rest of the U.S

We ask the Committee to eliminate the **350 hours of direct client contact** required during the Master of Social Work (MSW) field internship to become clinically licensed. Kansas is the only state in the nation with this additional requirement. Elimination of the 350 hours would align Kansas with licensing boards across the country who require the Council of Social Work Education standard of 900 hours.

Like other organizations, Cornerstones of Care has provided clinical supervision for those wishing to become licensed, however this has become more of burden for us as we have fewer individuals in our workforce that can provide the supervision. This language would add requirements for licensure at a time of severe behavioral health shortages in Kansas, and when we are trying to increase capacity within the behavioral health/child welfare system. We ask the committee to **not adopt the new "Board Approved Supervisor" mandate.**

Our concern is this requirement upon supervisors could delay the addition of more clinicians in Kansas. SB 238 requires a LSCSW (clinical social worker) to 1) obtain a BSRB "Board Approved Supervisor" status; and 2) a master's level social worker seeking to obtain a clinical license would now need to work with a BSRB "Board-Approved Supervisor" or their current supervisor would need to achieve the BSRB mandated requirements. **Currently, only 17 states have similar requirements as proposed in SB 238.** This provision requires supervisors:

- 1) complete an undefined number of hours of clinical supervision training as defined by regulation,
- 2) submit an application and pay a fee to get the title, and
- 3) pay for at least three hours of continuing education specific to clinical supervision every two years.

With this modification, SB 238 has the opportunity to increase citizens' access to mental health care by increasing access to appropriately trained licensed professionals.

Denise Cross President and Chief Executive Officer