



February 13, 2023

Proponent House Bill 2340: Increasing the membership of the behavioral sciences regulatory board, decreasing the years of practice required for reciprocity licensure of certain professions, extending the license period for temporary licenses, establishing new license categories, providing additional continuing education requirements and requiring that clinical social work supervisors be approved by the board.

Chairwoman Landwehr and Members of House Committee on Health and Human Services:

Thank you for the opportunity to provide information on the current bill and how legislation related licensure standards for the behavioral health workforce can improve capacity to deliver high quality, mental health crisis services in Kansas. I am a Licensed Masters Level Social Worker, and Vice President for Policy & Prevention at Kansas Suicide Prevention Headquarters (KSPHQ) located in Lawrence, KS. We are a suicide prevention resource center and one of four 988 Suicide & Crisis Lifeline call centers operating for Kansas. We provide first line call coverage for the 103 counties in Kansas and backup coverage to Johnson and Sedgwick counties. We are also the only center to provide text and chat crisis counseling for those who contact 988 from Kansas.

My agency has an over 50 year history of providing high quality crisis counseling services to the people of Kansas. Over the years, we have relied on both volunteers and paid staff to deliver these services. Individuals who have been through our program can be found delivering mental health and substance use treatment services across this state. We have a reputation both locally, in Douglas County, and statewide of supplying highly desirable candidates to a variety of mental health and substance use treatment agencies. Hearing that our in-house training and the experience our counselors gain on the phone has prepared our workforce to deliver high quality services is something that happens often and is feedback that I take great pride in receiving.

As the demand for mental health crisis services increases in Kansas it is becoming increasingly important that we are able to develop and keep our workforce in whom we invest significant time and energy. KSPHQ strongly encourages the committee to consider amending the current statute to include **diagnostic impressions** as an activity which can be used in pursuit of a clinical license as a social worker. This change would have a very real impact on increasing the number of clinical level social workers who are available to provide services in Kansas. For my agency it means that we have the opportunity to keep our workforce longer since they will not need to leave our agency to pursue face-to-face therapy work in order to pursue this higher level of licensure. I can attest to the significance of the work our counselors do on the phone and via text message. I feel certain that the ability to rapport with any person who calls, assess safety and current mental status, and provide empathetic, collaborative counseling are the types of skills the state's employers desire in clinical level social workers. I am also here to support other measures in this legislation which remove barriers for social workers seeking and maintaining licensure such as the decrease in the reinstatement fee.



There are a couple of areas of the proposed legislation that in our view create more barriers for increasing our social workforce instead of decreasing them. One is the requirement for BSRB registration for clinical supervisors. It is often quite difficult for social workers, especially those in our rural and frontier counties, to have access to qualified supervision required for pursuing clinical licensure. This is an unnecessary step which will only serve to make fewer supervisors available. We need to be moving in the opposite direction.

I would also encourage the committee to remove the changes to the Continuing Education requirements for social workers. It is, again, our view that increasing mandates on how continued education is acquired instills unnecessary burden on social workers. It is already embedded in the National Association Social Work Code of Ethics that social workers will prioritize being culturally competent to deliver services to all populations with which they will interact. It is unnecessary for the BSRB to be further involved by adding a DEI requirement.

Thank you for the opportunity to share how HB 2340 is poised to make a real difference for workforce shortages in Kansas. I am happy to answer any questions the committee members may have at the appropriate time.

Respectfully submitted,

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