



Newsletter of the Behavioral Sciences Regulatory Board

News from the Executive Director

By Phyllis Gilmore, Executive Director

The board is planning to introduce a bill regarding privileged communication and confidential information to the 2003 legislative session.

One question commonly asked is, "*Why is it desirable to change the law since the one in place appears to work?*" For most practitioners licensed by the BSRB, the current law places confidential relations and communications on the same basis as for attorney and client. There are several reasons why a change in statute would be desirable for the public who receives services from licensees of the BSRB. One reason involves the differences in roles and functions between an "attorney-client" and a "therapist-client". In an "attorney-client" relationship, the "client" consults a lawyer for securing legal advice. Communication is understood primarily in terms of advice given by the lawyer in the course of "representing" the client. The content of the communication focuses around the legal issues being addressed. In contrast, in a "therapist-client" relationship, the client consults a therapist for the assessment and treatment of DSM-IV disorders as well as other problems of living. The content of the communication may involve an extensive history, including questionnaire or test data, and the disclosure of the client's thoughts, feelings, memories, dreams and fantasies. The exchange of information reflects the client's experiences that may or may not reflect actual occurrences or reality. The goals of therapy usually involve a reduction in symptom distress and an improvement in functioning in individuals and families. In contrast, the goals for attorney services involve such actions as defending a client or filing legal actions based upon facts in accordance with the rules of law. In short, the role of the attorney and that of the BSRB licensee involve unrelated relationships and as a consequence, the attorney-client confidential communications law does not "fit" BSRB licensees and clients.

If you would like to read more information about the proposed legislation, there are printed materials available on the website, www.ksbsrb.org, under "legislative" or you can contact the board office and ask to have the materials mailed to you. The board welcomes any questions or comments you may have regarding this issue.

Client Records and Informed Consent

By John G. Randolph, Ph.D., Psychology Representative

Over the last year or so, there have been a number of complaints against licensed psychologists by clients who requested copies of their psychotherapy records and/or psychological assessment reports and were not provided those copies. These complaints were dismissed because there is no statutory or rule and regulation requirement set forth in psychology licensure that mandates such release of records to a client. However, the clients who complained had thought they had a right to copies of their records, and were aggrieved. This is understandable, as many people have been able to obtain copies of records of their medical treatment from their physician provider. Physicians are required to furnish a copy of the record to their patient upon receipt of their signed release, unless the "licensee reasonably determines that the information within the patient record is detrimental to the mental or physical health of the patient..."(K.A.R. 100-22-1).

There is a rule pertaining to psychologist unprofessional conduct, (K.A.R. 102-1-10a(d)(2)), "failing to provide clients or patients with a description of what the client or patient may expect in the way of tests, consultation, reports, fees, billing, and collection," that could be construed to at least encourage psychologists to let clients know up front whether it is their practice to provide a copy of their record if requested (certainly not including raw psychological test data).

Finally, the Kansas Care and Treatment Act For Mentally Ill Persons does include a section pertaining to disclosure of records (K.S.A. 59-2979), which states that the head of any treatment facility may refuse to disclose portions of records if he/she states in writing that such disclosure will be injurious to the welfare of the patient or former patient. This act does govern voluntary outpatient treatment as well as involuntary treatment, and psychologists are included in the definition of "Treatment Facility" (K.S.A. 59-2946(n)).



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CREDENTIALING CORNER

By Jennifer Springer, Credentialing Specialist

Survey Results - The BSRB has been conducting a credentialing survey to evaluate the staff and their work performance while processing renewal applications and new applications. The questions asked on the survey are:

1. Timeliness of notification from the board;
2. Courtesy received by the BSRB staff;
3. Availability of BSRB staff to talk with;
4. Helpfulness shown to you by the BSRB staff in answering questions;
5. Ease of completing your application materials; and,
6. Overall rating of the BSRB.

Below are the results from 610 surveys returned between July 1, 2001 through April 1, 2002.

	<u>Availability</u>		<u>Courtesy</u>		<u>Ease</u>		<u>Helpfulness</u>		<u>Timeliness</u>		<u>Rating</u>	
Excellent	313	51.31%	424	69.51%	441	72.30%	336	55.08%	548	89.84%	443	70.98%
Good	119	19.51%	90	14.75%	137	22.46%	106	17.38%	55	9.02%	151	24.75%
Fair	17	2.79%	3	.49%	26	4.26%	3	.49%	0	0	4	.66%
Poor	3	.49%	1	.16%	4	.66%	3	.49%	5	.82%	3	.49%
N/a	158	25.90%	92	15.08%	2	.33%	162	26.55%	2	.33%	19	3.11%
Total	610		610		610		610		610		610	

Summary:

	<u>Excellent</u>	<u>Good</u>	<u>Fair</u>	<u>Poor</u>	<u>N/A</u>
Total	2495 68.28%	658 18.01%	53 1.45%	19 .52%	435 11.90%

If you have returned a survey, we would like to thank you for taking the time to do so. The credentialing survey has been an important reflection of the commitment from the BSRB staff.



Questions and Answers regarding licensure

Question: If I would like to take a computerized home study course, how do I count the CEU's?

Answer: Most often the institutions inform you of how many CEU's will be awarded. If the computerized home study course has some type of evaluation at the end, such as an examination, then the home study course can be counted as a workshop. Please be sure to review your profession's CEU regulation for how many CEU's can be completed in a workshop. If there is **NOT** any type of evaluation, refer to your profession's CEU regulation for the amount of CEU's that can be done through a home study.

Question: How can I find a clinical supervisor to supervise me for the master's clinical independent license?

Answer: For those licensees who are working toward the master's clinical independent license and can not find a clinical supervisor, the BSRB has composed a list of the clinical licensees. The lists are written by profession and are available with a written request along with a \$5.00 fee. If you are interested in receiving a list, please submit your request in writing along with the \$5.00 fee. Please be sure to review the supervisor qualification's regulation, to be fully aware of who qualifies to supervise you for the clinical license.

Question: How can I receive study guide materials to prepare for my professional examination?

Answer: Each of the testing companies that administer your professional exam have study guides and testing materials for sale. You may also want to try your profession's association to inquire about testing preparation materials available for sale. Test preparation materials may be purchased before you are approved to sit for the exam.

Address of Record

The BSRB has created an "address of record" for each licensee. The address of record will be the address given out to individuals when a licensee's address is requested under the Kansas Open Records Act. The address of record is not a required address. It is up to licensee's to decide if they want their primary mailing address given out when requested by the public, or if they want the address of record to be given out when requested by the public. If you would like to have an address of record on file that is different from your primary mailing address, please complete the enclosed form and return it to the board office or e-mail Leslie at lallen@ink.org.

www.ksbsrb.org

Changes made to our website !!

Some changes have been made to our website to make the information easier to locate.

Some new items include a search engine, public information category, etc. CHECK IT OUT !!

Don't forget you can
renew your license **on-line**.

If you are within 90 days of your renewal date, you may renew your license on-line 24 hours a day.

Survey Questions

We would like to take this time to share with you some of the questions we have received on the credentialing surveys over the past 8 months.

Question: What does the BSRB do for the licensee?

Answer: The Behavioral Sciences Regulatory Board was established to protect the citizens of Kansas. The board office strives to assist individuals seeking licensure in a professional, courteous manner while following Kansas law. The professional associations exist to further a given profession in ways the board office cannot.

Question: Can you give me some information about the setting of fees for private practice and billing insurance companies for reimbursement?

Answer: The BSRB does not regulate setting fees or billing information. These two items are not under the jurisdiction of the Behavioral Sciences Regulatory Board. You may contact your profession's association along with the insurance companies themselves for specific questions about billing.

Question: Can I get a list of CEU's that will be accepted by the BSRB for my license renewal?

Answer: The Board office does not maintain a list of CEU providers. The CEU providers are allowed to request mailing labels of the licensees and mail them information about the programs offered. However, that does not ensure the program offered will be approved by the BSRB.

DID YOU KNOW: BSRB Board Members are working on the following issues:

- * Licensure Mobility
- * Reduction of CEU's required for renewal
- * Privileged Communication and Confidentiality
- * Sanctioning Guidelines

You will be hearing more about these issues in the months to come. If you would like to have any information about the above topics, please contact the board office by telephone or e-mail.

SRS NEWS

The Board has been informed that SRS has improved the child support computer system that enables SRS to locate licensed professionals who have defaulted on child support in the amount of \$10,000.00 or higher. As of March 1, 2002, it is now easier for SRS to track those licensed professionals which may result in the SRS enforcement officers seeking suspension of the professional's license.



State-wide Healthcare Providers Data

You will soon be receiving a questionnaire that will be asking you questions regarding your mental health practice. The data collected from the questionnaire will be compiled for statistical data for the state of Kansas. The data will be utilized to make future statewide healthcare planning decisions and is important in determining the levels of services available to the residents of Kansas. The questionnaire is optional. However, we would greatly appreciate your assistance with this information.

Open Cases Breakdown
April 30, 2002

Profession	Number Of Cases Open	Number of Licensees
LP	11	686
LMLP	02	445
LCP	01	292
LMFT	00	174
LCMFT	01	262
LPC	00	315
LCPC	01	242
LASW	00	54
LBSW	14	2023
LMSW	08	1875
LSCSW	16	1506
RAODAC	00	83
No License	04	0
Total	58	7957

Disciplinary Actions on Website

The members of the board have approved the posting of serious disciplinary actions on its website. The board approved the content and format of the postings at the February 11, 2002 meeting. Serious disciplinary actions, for the purpose of posting, are those actions that limit, suspend, or revoke the license. Not allowing the professional to serve as a supervisor is considered a limitation of the license. A stayed suspension, being supervised, and/or writing a research paper are examples of disciplinary actions that are not considered serious for posting purposes. The Board staff has researched the disciplinary actions taken during the past five years and those that fit the definition have been posted. They can be found by selecting "What's New" at www.ksbsrb.org. The actions are listed as "Ongoing" and "Concluded." "Concluded" actions are those disciplinary actions for which all of the conditions have been satisfied.

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Kansas courts have not determined whether the Care and Treatment Act provision that mandates release of records is applicable to the practice of psychology outside the parameters of that act. It does seem prudent for us to be mindful of the possibility that our clients might eventually see what we write about them.

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