

Testimony to the House Committee on Health and Human Services

House Bill 2208 “Reducing certain requirements for licensure by the behavioral sciences regulatory board”

Proponent Testimony with Amended Changes

Madam Chairwoman and members of the Committee, my name is Tim DeWeese. I am the Director of the Johnson County Mental Health Center, which is a department of Johnson County (KS) Government. We employ more than 320 staff who provide behavioral health services to more than 10,000 county residents annually. Johnson County Mental Health Center began operation in 1962 providing outpatient services in one location. Today, the center provides services in four separate facilities located throughout the county and serves as the local mental health authority coordinating the delivery of publicly funded community-based “safety-net” mental health services. The Mental Health Center is licensed by the State of Kansas as a Community Mental Health Center and has earned a three-year accreditation from the Commission on Accreditation of Rehabilitation Facilities (CARF) International.

I appreciate the opportunity to present testimony in support of this bill, however, while the majority of the bill reduces certain requirements for licensure by the behavioral sciences regulatory board, 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., and shortages are particularly evident in rural areas. Social workers are the largest provider of mental health with our organization and in recent years we have seen a behavioral workforce shortage in Johnson County due to a number of factors.

Johnson County Mental Health Center, as many CMHCs, offers clinical supervision to LMSWs as part of our recruitment strategy, but this is becoming increasingly difficult as we are challenged by a limited number of staff eligible to provide the supervision. We want social work students and LMSW level staff to view the CMHC system as a whole to be a great place to work. To date clinical supervision is one benefit we can offer that makes us attractive, especially since we are not able to pay wages competitive to many other employers within the metropolitan area. These proposed changes would create yet another barrier for us.

Therefore, I would ask the committee to not adopt additional requirements that would add barriers to our mental health workforce. I would respectfully recommend the following changes:

1. Remove the new supervision requirement. HB 2208 as written would add a new supervision requirement not currently required. The Bill would add a layer of cost before a master’s level could receive a clinical license. The bill would require a LSCSW (clinical) to a) obtain “Board Approved Supervisor” status; and b) a master’s level social worker seeking to obtain a clinical license would need to find a “Board-Approved Supervisor” or their supervisor would need to complete requirements.
2. We ask the Committee to eliminate the 350 hours of direct client contact required during the master’s in social work (MSW) field internship to become clinically licensed. Kansas is the only state in the nation with this additional requirement for graduate training – (K.S.A. 65-6306 (C)).

Thank you for the opportunity to appear before the Committee today, and I will stand for questions at the appropriate time.

Tim DeWeese, LMSW
Mental Health Center Director

(913) 826-4022 office
(913) 826-1594 fax
(800) 766-3777 TDD

6000 Lamar Ave. Suite 130
Mission, Kansas 66202

tim.deweese@jocogov.org