

**BEHAVIORAL SCIENCES REGULATORY BOARD
LICENSED PSYCHOLOGY ADVISORY COMMITTEE AGENDA
TUESDAY, FEBRUARY 13, 2024**

The meeting will be conducted virtually on the Zoom platform. Advisory Committee members, BSRB staff, and anyone approved for public comment will utilize the Zoom platform while other remote attendees will be directed to the YouTube broadcast (or the conference call phone number), to ensure a secure and accessible meeting.

You may view the meeting here: <https://youtube.com/live/ftBL79SJbzU?feature=share>

To join the meeting by conference call: 877-278-8686. The pin: 327072

If there are any technical issues during the meeting, you may call the Board office at, 785-296-3240. The Behavioral Sciences Regulatory Board may take items out of order as necessary to accommodate the time restrictions of Board members and visitors. All times and items are subject to change.

Tuesday, February 13, 2024, 6:00 p.m.

- I. Call to order and Roll Call**
- II. Agenda Approval**
- III. Review and Approval of Minutes from Advisory Committee Meeting on December 12, 2023**
- IV. Executive Director's Report**
- V. Update on PSYPACT Commission**
- VI. Old Business**
 - A. Concluding Discussion of Possible Changes to Unprofessional Conduct Regulations**
 - B. Continued Discussion on Continuing Education Regulation and Draft of New Regulation for Documentation of Continuing Education**
- VII. New Business**
 - A. Review of K.A.R. 102-1-12 Educational Requirements**
 - B. Possible Survey for Licensed Psychologists**
 - C. Additional Discussion Topics for FY 2024**
- VIII. Upcoming Meetings: Tuesday, April 9, 2024, from 6pm until 8pm**
- IX. Adjournment**

**BEHAVIORAL SCIENCES REGULATORY BOARD
LICENSED PSYCHOLOGY ADVISORY COMMITTEE MEETING
DECEMBER 12, 2023**

Draft Minutes

- I. Call to Order.** Richard Nobles, Chair of the Advisory Committee, called the meeting to order at 6 p.m.

Committee Members. Richard Nobles, Linda Heitzman-Powell, David Stevens, Mark Goodman, Matthew Guelker, Edward Hunter, Tiffany Johnson, Sara Kirk, Jay Middleton, and Doug Wright were present via Zoom. Abby Callis, Tiffany Hamilton, and Rodney McNeal were absent.

BSRB Staff. David Fye and Leslie Allen were present via Zoom.

- II. Agenda Approval.** Matthew Guelker moved to approve the agenda as written. David Stevens seconded. The motion passed.
- III. Review and Approval of Minutes from Previous Advisory Committee Meeting on August 8, 2023.** David Stevens moved to approve the minutes from October 10, 2023, with an amendment that the date on the header be changed to October 10, 2023, rather than August 8, 2023. Linda Heitzman-Powell seconded. The motion passed.
- IV. Executive Director Report.** David Fye, Executive Director for the Behavioral Sciences Regulatory (BSRB) provided a report on agency operations, actions from recent Board meetings, and legislative updates.
- V. Update on PSYPACT Commission.** The Executive Director provided updates on the interjurisdictional compact for licensed psychologists known as PSYPACT. As of December 2023, there are 96 licensed psychologists providing telehealth services into other compact states under PSYPACT authority who hold a home state license in Kansas and 8 licensed psychologists with a home state license in Kansas who provide a limited number of days of in-person service each year in other compact states under PSYPACT authority. The Executive Director attended the annual meeting for PSYPACT on November 17, 2024. Two proposed rules were voted on and adopted at the annual meeting, clarifying that the authorization to practice under PSYPACT does not provide any authority for other individuals to practice under that authorization. Other action that was taken at the annual meeting was that PSYPACT requested a letter be drafted on behalf of PSYPACT to representatives from the Association of State and Provincial Psychology Boards (ASPPB), who oversees the E-Passport necessary as part of the process to gain authority to practice under PSYPACT. The letter will encourage ASPPB to consider recognizing the Certificate of Professional Qualification in Psychology (CPQ) in evaluating applicant's qualifications for the E-Passport.

VI. Old Business

A. Continued Discussion of Possible Changes Unprofessional Conduct Regulations.

The Advisory Committee reviewed and discussed possible further changes to the unprofessional conduct regulations for the licensed psychology profession in K.A.R. 102-1-10a.

- a. The Advisory Committee recommended creating a new item on discrimination, similar to item (12) for marriage and family therapy profession. Advisory Committee members also recommended including categories listed in the American Psychological Association's Ethical Principles of Psychologists, Principle E, including "*age, gender, gender identity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status.*" Advisory Committee members recommended including other categories listed in the marriage and family therapy unprofessional conduct regulation, which were not already included in the APA's Ethical Principle E, which included "*ethnicity, health status, relationship status, or status in any other marginalized group.*" Advisory Committee members recommended including this language under item (f)(3), using the phrase "engaging in behavior that is abusive, demeaning, or discriminatory to a client, student, or supervisee, based on factors that may include, but are not limited to ..." The Executive Director and the Chair will work on drafting this language, to be reviewed at the next Advisory Committee meeting.
- b. Advisory Committee members discussed possible new regulatory language on the topic of telehealth, which would state "*If engaged in distance-services, failing to fulfill these requirements:*
 - (1) *Informing the client of risks and benefits of distance counseling,*
 - (2) *Disclosing the possibility of technology failure and providing alternative methods of service;*
 - (3) *Detailing emergency procedures to follow when the counselor is unavailable; and*
 - (4) *Taking appropriate steps to encrypt or ensure the security of confidential client information or any activity which protects confidential client information from risk of privacy breach.*"
- c. Advisory Committee members discussed possible new language on social media. The Advisory Committee decided to continue discussion on this topic and possibly other items at the next Advisory Committee meeting.

B. Continued Discussion on Continuing Education Regulations and Draft for New Documentation of Continuing Education Regulations. Due to time constraints this topic was moved to next meeting.

VII. New Business

A. Discussion on the Psychological Clinical Science Accreditation System (PCSAS).

Due to time constraints this topic was moved to next meeting.

VIII. Next Advisory Committee Meeting Date. The next Advisory Committee meeting will be on Tuesday, February 13, 2023, at 6pm over Zoom.

IX. Adjournment. David Stevens moved to Adjourn. Tiffany Johnson seconded. The motion passed.



Commission News

VOL. 4, Issue 4

December 2023

Message from The Chair: Patrick Hyde

I would like to express my sincere thanks and gratitude for all the hard work and dedication the outgoing chair of PSYPACT, Don Meck, has shown over these past years. Under his leadership PSYPACT was formed and grew to include 40 jurisdictions (40 enacted, 39 effective). His leadership as chair will be missed but thankfully his presence will not, since he will continue to serve as the Commissioner for Georgia. Additionally, PSYPACT extends a warm welcome to Vermont which is scheduled to become an active member of PSYPACT in July of 2024. Lastly, PSYPACT looks forward to the continued growth and prosperity of the Commission though the upcoming year as the Commission continues its strategic planning for the future.

Patrick Hyde
Chair, PSYPACT Commission

Executive Director Update: Janet Orwig

As 2023 comes to an end, I want to take this opportunity to say thank you for your assistance in making it a very productive year. A few noteworthy items are listed below.

- We started the year with 33 jurisdictions being enacted and effective and ended the year with 39 effective jurisdictions.
- The first PSYPACT Annual Report was released highlighting the work of the Commission for 2022.
- The Commission has issued over 11,900 APITs (that is up 4,200 at this time last year) and over 600 TAPs.
- APIT and TAP renewals were initiated in October and to date 1300 renewals have been processed.
- The creation of the first ever PSYPACT strategic plan has begun which included surveying authorization holders for feedback.

I want to give a special thank you to Don Meck, Commissioner from Georgia for serving as the first Chair of the PSYPACT Commission and to Teanne Rose, Commissioner from Oklahoma for serving as the first Treasurer for the PSYPACT Commission. Their leadership and knowledge of regulation helped to establish a firm foundation for us to continue to grow in the future. Thank you both so much and as you step down from your roles on the PSYPACT Executive Board, we look forward to continuing to work with you in your role as Commissioner.

As always, thank you all for your hard work and support. We look forward to continuing to work and grow with you in 2024.

Janet P. Orwig, MBA, CAE
PSYPACT Executive Director

Upcoming Meetings

Finance Committee	1/22/24
Compliance Committee	1/31/24
Executive Board	3/05/24

PSYPACT Commissioners

Lori Rall Alabama	Gary Lenkeit Nevada
Heidi Paakkonen Arizona	Deborah Warner New Hampshire
Lisa Fitzgibbons Arkansas	Sean Evers New Jersey
Nate Brown Colorado	Susan Hurt North Carolina
Glenda S. George Commonwealth of the Northern Mariana Islands	Sara Quam North Dakota
Christian Andresen Connecticut	Ronald Ross Ohio
Shauna Slaughter Delaware	Teanne Rose Oklahoma
LaTrice Herndon District of Columbia	Steven Erickson Pennsylvania
Mary Denise O'Brien Florida	Peter Oppenheimer Rhode Island
Don Meck Georgia	Andrea Eaton South Carolina
Dawn Cureton Idaho	Mark Fleming Tennessee
TBD Illinois	Patrick Hyde Texas
Stephen Ross Indiana	Jana Johansen Utah
David Fye Kansas	TBD Vermont
Leslie Jenkins Kentucky	Jaime Hoyle Virginia
Jayne Boulos Maine	Leslie Cohn Washington
Lorraine Smith Maryland	Scott Fields West Virginia
Amy Gumbrecht Michigan	Daniel Schroeder Wisconsin
Robin McLeod Minnesota	JoAnn Reid Wyoming
Pam Groose Missouri	Mariann Burnetti-Atwell ASPPB
Dina Mekic Nebraska	

Staff Contact Information:

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Legislation Updates:

Currently we have 39 effective PSYPACT participating states, soon to be 40. Vermont has a tentative effective date of 7/1/2024. Massachusetts and New York continued to have active PSYPACT legislation, throughout the 4th quarter. We are looking forward to seeing what 2024 brings.

Committee Updates:

Finance: *Teanne Rose, Jaime Hoyle, Heidi Paakkonen*

The Finance Committee met on October 10, 2023, via Zoom. The Committee reviewed the 3rd quarter 2023 financial information and discussed updates on the investment initiatives and audit process/ accounting firm selection. The 2024 PSYPACT Budget draft was also reviewed.

Rules: *Patrick Hyde, Pam Groose, Deborah Warner, Lorraine Smith, Susan Hurt*

The Rules Committee met on October 11, 2023, via Zoom. The Committee reviewed: the legal opinion regarding Home State, a response to inquiries regarding Scope of Practice, Public Comments for Rules 4.13 and 5.13, and discussed a policy for reporting violations made by Authorization Holders.

Executive Board:

Don Meck, Lori Rall, Teanne Rose, Gary Lenkeit, Patrick Hyde, Mariann Burnetti-Atwell

The Executive Board met on October 16, 2023, via Zoom. The Committee reviewed updates from each committee, legal opinion regarding testifying and discussed the IRS Private Letter ruling request. The Committee also reviewed and voted on minutes from the previous meeting.

Requirements: *Gary Lenkeit, Peter Oppenheimer, Teanne Rose, Ron Ross*

The Requirements Review Committee met on November 3, 2023, via Zoom. The committee reviewed survey results from PSYPACT Member Jurisdictions regarding eligibility requirements, and reviewed Policy 2.3 proposed revision.

Public Hearing and Annual Commission Meeting

A Public Hearing and the Annual PSYPACT Commission Meeting was held on November 16 and 17 via zoom. During the public hearing (regarding the addition of Rules 4.13 and 5.13) public comments were heard and the Commission voted to approve the addition of Rules 4.13 and 5.13. Following the public hearing the annual PSYPACT Commission Meeting was held. The Commission reviewed the meeting minutes from the July 2023 meeting, received the Executive Directors Report, received the Executive Board Report, held an election, voted on a bylaw revision, and focused on strategic planning for the future of PSYPACT. Results of the election: Patrick Hyde was elected as the Chair, Heidi Paakkonen was elected Treasurer and Pam Groose was elected Member at Large.

Executive Board Members

Chair - Patrick Hyde

Vice Chair - Lori Rall

Treasurer - Heidi Paakkonen

Member at Large - Gary Lenkeit

Member at Large - Pam Groose

Ex Officio Member - Mariann Burnetti - Atwell



PSYPACT by the Numbers

TELEPSYCHOLOGY

11070 10894

ASPPB
E. Passports
Issued

PSYPACT
APITs
Issued

TEMPORARY PRACTICE

678 611

ASPPB
IPCs Issued

PSYPACT
TAPs Issued

STATE LEVEL BREAKDOWN

State	APITs	TAPs	State	APITs	TAPs
ALABAMA	57	13	NEBRASKA	64	3
ARIZONA	265	28	NEVADA	107	12
ARKANSAS	38	7	NEW HAMPSHIRE	104	4
COLORADO	541	29	NEW JERSEY	704	21
CNMI	1	0	NORTH CAROLINA	460	27
CONNECTICUT	224	14	NORTH DAKOTA	14	0
DELAWARE	124	3	OHIO	425	19
DC	298	15	OKLAHOMA	64	5
FLORIDA	563	28	PENNSYLVANIA	989	37
GEORGIA	447	30	RHODE ISLAND	72	0
IDAHO	32	3	SOUTH CAROLINA	45	4
ILLINOIS	949	39	TENNESSEE	191	13
INDIANA	120	8	TEXAS	858	55
KANSAS	96	8	UTAH	185	28
KENTUCKY	95	7	VIRGINIA	666	42
MAINE	73	3	WASHINGTON	327	22
MARYLAND	845	28	WEST VIRGINIA	47	6
MICHIGAN	149	7	WISCONSIN	103	8
MINNESOTA	281	13	WYOMING	10	1
MISSOURI	261	21			

Active Authorizations as of 12/29/23



Things to Look Forward to in 2024:

- Strategic Planning

Reminder!

Make sure to sign your Conflict of Interest forms!

Addiction Counseling Unprofessional Conduct Regulations

K.A.R. 102-7-11. Unprofessional conduct. Each of the following acts shall be considered unprofessional conduct for ~~a licensed addiction counselor, a licensed clinical addiction counselor~~an individual authorized to practice addiction counseling by the board, or an applicant ~~for an addiction counselor license or a clinical addiction counselor license~~to practice addiction counseling:

(a) Except when the information has been obtained in the context of confidentiality, failing to notify the board, within a reasonable period of time, that the licensee or applicant or any other person regulated by the board or applying for licensure or registration has met any of these conditions:

- (1) Has had a professional license, certificate, permit, registration, certification, or professional membership granted by any jurisdiction, professional association, or professional organization that has been limited, conditioned, qualified, restricted, suspended, revoked, refused, voluntarily surrendered, or allowed to expire in lieu of or during investigatory or disciplinary proceedings;
- (2) has been subject to any other disciplinary action by any credentialing board, professional association, or professional organization;
- (3) has been demoted, terminated, suspended, reassigned, or asked to resign from employment, or has resigned from employment, for some form of misfeasance, malfeasance, or nonfeasance;
- (4) has been substantiated of abuse against a child, an adult, or a resident of a care facility; ~~or~~
- (5) has practiced the licensee's profession in violation of the laws or regulations that regulate the profession; or
- (6) has been convicted of a crime.

(b) knowingly allowing another person to use one's license;

(c) impersonating another person holding a license or registration issued by this or any other board;

(d) having been convicted of a crime resulting from or relating to one's professional practice of addiction counseling;

(e) furthering the licensure application of another person who is known or reasonably believed to be unqualified with respect to character, education, or other relevant eligibility requirements;

(f) knowingly aiding or abetting any individual who is not credentialed by the board to represent that individual as a person who was or is credentialed by the board;

(g) failing to recognize, seek intervention, and otherwise appropriately respond when one's own personal problems, psychosocial distress, or mental health difficulties interfere with or negatively impact professional judgment, professional performance and functioning, or the

ability to act in the client's best interests;

(h) failing or refusing to cooperate in a timely manner with any request from the board for a response, information, or assistance with respect to the board's investigation of any report of an alleged violation filed against oneself or any other applicant or professional who is required to be licensed or registered by the board. Each person taking longer than 30 days to provide the requested response, information, or assistance shall have the burden of demonstrating that the person has acted in a timely manner;

(i) offering to perform or performing services clearly inconsistent or incommensurate with one's training, education, or experience or with accepted professional standards;

(j) engaging in any behavior that is abusive or demeaning to a client, student, or supervisee;

(k) imposing one's personal values, spiritual beliefs, or lifestyle on a client, student, or supervisee;

(l) discriminating against any client, student, directee, or supervisee on the basis of color, race, gender, age, religion, national origin, ~~or~~ disability, gender expression, or sexual orientation;

(m) failing to inform each client of that client's rights as those rights relate to the addiction counseling relationship;

(n) failing to provide each client with a description of the services, fees, and payment expectations, or failing to reasonably comply with that description;

(o) failing to provide each client with a description of the possible effects of the proposed treatment if the treatment is experimental or if there are clear and known risks to the client;

(p) failing to inform each client, student, or supervisee of any financial interests that might accrue to the licensee or applicant if the licensee or applicant refers a client, student, or supervisee to any other service or if the licensee or applicant uses any tests, books, or apparatus;

(q) failing to inform each client that the client can receive services from a public agency if one is employed by that public agency and also offers services privately;

(r) failing to obtain written, informed consent from each client, or the client's legal representative or representatives, before performing any of the following actions:

(1) Electronically recording sessions with that client;

(2) permitting a third-party observation of their activities; or

(3) releasing information concerning a client to a third-~~person~~party, unless required or permitted by law;

(s) failing to exercise due diligence in protecting the information regarding the client from disclosure ~~by other persons~~ in one's work or practice setting, especially in telehealth practice;

(t) engaging in professional activities, including but not limited to, billing practices and advertising, involving dishonesty, fraud, deceit, or misrepresentation;

(u) using alcohol or any illegal drug or misusing any substance that could cause impairment while performing the duties or services of an addiction counselor;

(v) engaging in a harmful dual relationship or exercising undue influence towards one's client, supervisee, or student;

(w) making sexual advances toward or engaging in physical intimacies or sexual activities with either of the following:

- (1) Any person who is a client, supervisee, or student; or
- (2) any person who has a significant relationship with the client and that relationship is known to the licensee;

(x) making sexual advances toward or engaging in physical intimacies or sexual activities with any person who meets either of the following conditions:

- (1) Has been a client within the past 24 months; or
- (2) has had a significant relationship with a current client or a person who has been a client within the past 24 months and that relationship is known to the licensee;

(y) directly or indirectly offering or giving to a third party or soliciting, receiving, or agreeing to receive from a third party any fee or other consideration for referring the client or in connection with performing professional services;

(z) permitting any person to share in the fees for professional services, other than a partner, an employee, an associate in a professional firm, or a consultant authorized to practice addiction counseling or clinical addiction counseling;

(aa) soliciting or assuming professional responsibility for clients of another agency or colleague without attempting to coordinate the continued provision of client services by that agency or colleague;

(bb) making claims of professional superiority that one cannot substantiate;

(cc) guaranteeing that satisfaction or a cure will result from performing or providing any professional service;

(dd) claiming or using any secret or special method of treatment or techniques that one refuses to disclose to the board;

(ee) continuing or ordering tests, procedures, or treatments or using treatment facilities or services not warranted by the client's condition, best interests, or preferences;

(ff) taking credit for work not personally performed, whether by giving inaccurate or misleading information or by failing to disclose accurate or material information;

(gg) if engaged in research, failing to meet these requirements:

(1) Considering carefully the possible consequences for human beings participating in the research;

(2) protecting each participant from unwarranted physical and mental harm;

(3) ascertaining that each participant's consent is voluntary and informed; and

(4) preserving the privacy and protecting the anonymity of each subject of the research within the terms of informed consent;

(hh) making or filing a report that one knows to be false, distorted, erroneous, incomplete, or misleading;

(ii) failing to notify the client promptly if one anticipates terminating or interrupting service to the client;

(jj) failing to seek continuation of service, or abandoning or neglecting a client under or in need of professional care, without making reasonable arrangements for that care;

(kk) abandoning employment under circumstances that seriously impair the delivery of professional care to clients and without providing reasonable notice to the employer;

(ll) failing to terminate addiction counseling services if it is apparent that the relationship no longer serves the client's needs or best interests;

(mm) when supervising, failing to provide accurate and current information, timely evaluations, and constructive consultation;

(nn) when applicable, failing to inform a client that addiction counseling services are provided or delivered under supervision;

(oo) failing to inform a client that addiction counseling services are delivered under supervision as a student or an individual seeking clinical licensure;

(pp) failing to report unprofessional conduct of a licensed addiction counselor, licensed clinical addiction counselor, or any individual licensed by the board;

(qq) intentionally or negligently failing to file a report or record required by state or federal law, willfully impeding or obstructing another person from filing a report or record that is required by state or federal law, or inducing another person to take any of these actions;

(rr) offering to perform or performing any service, procedure, or therapy that, by the accepted standards of addiction counseling practice in the community, would constitute experimentation on human subjects without first obtaining the full, informed, and voluntary written consent of the client or the client's legal representative or representatives;

(ss) practicing addiction counseling after one's license expires;

(tt) using without a license, or continuing to use after a license has expired, any title or abbreviation defined by regulation; ~~and~~

(uu) violating any provision of the addictions counselor licensure act or any implementing regulation; ~~and-~~

(vv) failing to follow appropriate recordkeeping standards as described below:

-(1) each individual authorized to provide addiction counseling must maintain a record for each client that accurately reflects the licensee's contact with the client and the results of the addiction counseling or clinical addiction counseling services provided. Each licensee shall have ultimate responsibility for the content of the licensee's records and the records of those persons under the licensee's supervision. These records may be maintained in a variety of formats, if reasonable steps are taken to maintain the confidentiality, accessibility, and durability of the records. Each record shall be completed in a timely manner and, at a minimum, shall include the following information for each client in sufficient detail to permit planning for continuity of care:

(A) Adequate identifying data;

(B) the date or dates of services that the licensee or the licensee's supervisee provided;

(C) the type or types of services that the licensee or the licensee's supervisee provided;

(D) the initial assessment, conclusions, and recommendations;

(E) the treatment plan; and

(F) the clinical or progress notes from each session.

(2) If a practitioner is the owner or custodian of client records, the practitioner shall retain a complete record for the following time periods, unless otherwise provided by law:

(A) At least six years after the date of termination of one or more contacts with an adult; and

(B) for a client who is a minor on the date of termination of the contact or contacts, at least until the later of the following two dates:

(i) Two years past the date on which the client reaches the age of majority; or

(ii) six years after the date of termination of the contact or contacts with the minor.

(3) If a practitioner is the owner or custodian of the client records, it is the practitioner's responsibility to identify an alternate custodian of their records, in the event they are incapacitated or pass away unexpectedly and there is no other custodian of their records.

(Authorized by K.S.A. 2010 Supp. 74-7507, as amended by L. 2010, ch. 45, §15; implementing L. 2011, ch. 114, §15; effective, T-102-7-1-11, July 1, 2011; effective, T-102-10-27-11, Oct. 27, 2011; effective Jan. 20, 2012.)

Behavior Analyst Unprofessional Conduct Regulations

102-8-11. Unprofessional conduct. Each of the following acts shall be considered unprofessional conduct for a licensed assistant behavior analyst, a licensed behavior analyst, or an applicant for an assistant behavior analyst license or a behavior analyst license:

- (a) Except when the information has been obtained in the context of confidentiality, failing to notify the board, within a reasonable period of time, that the licensee or applicant or any other person regulated by the board or applying for licensure has met any of the following conditions:
 - (1) Has had a professional license, certificate, permit, registration, certification, or professional membership granted by any jurisdiction, professional association, or professional organization that has been limited, conditioned, qualified, restricted, suspended, revoked, refused, voluntarily surrendered, or allowed to expire in lieu of or during investigatory or disciplinary proceedings;
 - (2) has been subject to any other disciplinary action by any credentialing board, professional association, or professional organization;
 - (3) has been demoted, terminated, suspended, reassigned, or asked to resign from employment or has resigned from employment, for some form of misfeasance, malfeasance, or nonfeasance; or
 - (4) has violated any provision of the act or any implementing regulation;

- (b) knowingly allowing another person to use one's license;

- (c) impersonating another person holding a license or registration issued by the board or any other agency;

- (d) having been convicted of a crime resulting from or relating to one's professional practice of applied behavior analysis;

- (e) knowingly aiding or abetting any individual who is not credentialed by the board to represent that individual as a person who was or is licensed by the board;

- (f) failing to recognize, seek intervention, and otherwise appropriately respond when one's own personal problems, psychosocial distress, or mental health difficulties interfere with or negatively impact professional judgment, professional performance and functioning, or the ability to act in the client's best interests;

- (g) failing or refusing to cooperate within 30 days with any request from the board for a response, information, or assistance with respect to the board's investigation of any report of an alleged violation filed against oneself or any other applicant or professional who is required to be licensed by the board. Each person taking longer than 30 days to provide the requested response, information, or assistance shall have the burden of demonstrating that the person has acted in a timely manner;

(h) offering to perform or performing services clearly inconsistent or incommensurate with one's training, education, or experience or with accepted professional standards;

(i) engaging in any behavior that is abusive or demeaning to a client, student, or supervisee;

(j) discriminating against any client, student, directee, or supervisee on the basis of age, gender, race, culture, ethnicity, national origin, religion, sexual orientation, disability, language, or socioeconomic status;

(k) failing to advise and explain to each client, in understandable language, the respective rights, responsibilities, and duties involved in the licensee's professional relationship with the client;

(l) failing to provide each client, in understandable language, with a description of the services, fees, and payment expectations or failing to reasonably comply with that description;

(m) failing to provide each client, in understandable language, with a description of the possible effects of the proposed treatment if the treatment is experimental or if there are clear and known risks to the client;

(n) failing to inform each client, student, or supervisee of any financial interests that might accrue to licensee or applicant if the licensee or applicant refers a client, student, or supervisee to any other service or if the licensee or applicant uses any tests, books, or apparatus;

(o) failing to inform each client that the client can receive services from a public agency if one is employed by that public agency and also offers services privately;

(p) failing to provide copies of reports or records to a licensed healthcare provider authorized by the client following the licensee's receipt of a formal written request, unless the release of that information is restricted or exempted by law or by this article of the board's regulations, or the disclosure of the information would be injurious to the welfare of the client;

(q) failing to obtain written, informed consent from each client, or the client's legal representative or representatives, before performing any of the following actions:

(1) Electronically recording sessions with the client;

(2) permitting a third-party observation of the licensee's provision of applied behavior analysis services to the client; or

(3) releasing information concerning a client to a third person, unless required or permitted by law;

(r) failing to exercise due diligence in protecting the information regarding the client from disclosure by other persons in one's work or practice setting;

(s) engaging in professional activities, including billing practices and advertising, involving dishonesty, fraud, deceit, or misrepresentation;

(t) revealing information, a confidence, or a secret of any client, or failing to protect the confidences, secrets, or information contained in a client's records, unless at least one of the following conditions is met:

(1) Disclosure is required or permitted by law;

(2) failure to disclose the information presents a serious danger to the health or safety of an individual or the public;

(3) the licensee is a party to a civil, criminal, or disciplinary investigation or action arising from the practice of applied behavior analysis, in which case disclosure shall be limited to that action; or

(4) payment for services is needed;

(u) using alcohol or any illegal drug or misusing any substance that could cause impairment while performing the duties or services of a licensee;

(v) engaging in a harmful dual relationship or exercising undue influence;

(w) making sexual advances toward or engaging in physical intimacies or sexual activities with any of the following:

(1) Any person who is a client, supervisee, or student; or

(2) any person who has a significant relationship with the client and that relationship is known to the licensee;

(x) making sexual advances toward or engaging in physical intimacies or sexual activities with any person who meets either of the following conditions:

(1) Has been a client within the past 24 months; or

(2) has had a significant relationship with a current client or a person who has been a client within the past 24 months and that relationship is known to the licensee;

(y) directly or indirectly offering or giving to a third party or soliciting, receiving, or agreeing to receive from a third party any fee or other consideration for referring the client or in connection with performing professional services;

(z) permitting any person to share in the fees for professional services, other than a partner, an employee, an associate in a professional firm, or a consultant authorized to practice applied behavior analysis;

(aa) actively soliciting any clients of another agency or colleague without attempting to coordinate the continued provision of client services by that agency or colleague; or assuming professional responsibility for any clients of another agency or colleague without attempting to coordinate services for continuity of care. ~~the continued provision of client services by that~~

~~agency or colleague;~~

(bb) making claims of professional superiority that one cannot substantiate;

(cc) guaranteeing that satisfaction or a cure will result from performing or providing any professional service;

(dd) claiming or using any secret or special method of treatment or techniques that one refuses to disclose to the board;

(ee) continuing or ordering tests, procedures, or treatments or using treatment facilities or services not warranted by the client's condition, best interests, or preferences;

(ff) taking credit for work not personally performed, whether by giving inaccurate or misleading information or by failing to disclose accurate or material information;

(gg) if engaged in research, failing to meet the following requirements:

(1) Considering carefully the possible consequences for human beings participating in the research;

(2) protecting each participant from unwarranted physical and mental harm;

(3) ascertaining that each participant's consent is voluntary and informed; and

(4) preserving the privacy and protecting the anonymity of each subject of the research within the terms of informed consent;

(hh) making or filing a report that one knows to be false, distorted, erroneous, incomplete, or misleading;

(ii) failing to notify the client promptly if one anticipates terminating or interrupting service to the client;

(jj) failing to seek continuation of service, or abandoning or neglecting a client under or in need of professional care, without making reasonable arrangements for that care;

(kk) abandoning employment under circumstances that seriously impair the delivery of professional care to clients and without providing reasonable notice to the employer;

(ll) failing to terminate applied behavior analysis services if it is apparent that the relationship no longer serves the client's needs or best interests;

(mm) when supervising, failing to provide accurate and current information, timely evaluations, and constructive consultation;

(nn) when applicable, failing to inform a client that applied behavior analysis services are provided or delivered under supervision;

(oo) failing to report unprofessional conduct of a licensed assistant behavior analyst, a licensed behavior analyst, or any other individual licensed by the board;

(pp) intentionally or negligently failing to file a report or record required by state or federal law, willfully impeding or obstructing another person from filing a report or record that is required by state or federal law, or inducing another person to take any of these actions;

(qq) offering to perform or performing any service, procedure, treatment, or therapy that, by the accepted standards of applied behavior analysis practice in the community, would constitute experimentation on human subjects without first obtaining the full, informed, and voluntary written consent of the client or the client's legal representative or representatives;

(rr) practicing applied behavior analysis after one's license expires; and

(ss) using without a license, or continuing to use after a license has expired, any title or abbreviation defined by regulation.

(ss) directly soliciting testimonials from current clients or stakeholders for use in advertisements to obtain new clients.

(tt) failing to provide each client with a description of the proposed treatment procedures anticipated outcomes and possible risks to the client.

(uu) deriving or soliciting any form of substantial personal monetary profit or substantial personal gain as a result of their professional relationship with clients or relevant parties.

(vv) when entering a relationship with a third party, failure to clarify the nature of the relationship with each party and assess any potential conflicts.

(ww) failure to actively engage in professional development activities to maintain and further professional competence.

(xx) taking on more supervisees and trainees than allows for effective supervision.

(yy) when supervising and training, failing to incorporate and address topics related to diversity.

(zz) when supervising and training, failing to ensure that supervisees and trainees are competent to perform delegated tasks.

(aaa) failure to follow appropriate standard for recordkeeping, as described below:

(1)-Each licensed assistant behavior analyst and each licensed behavior analyst shall maintain a record for each client that accurately reflects the licensee's contact with the client and the client's progress.

Each licensee shall have ultimate responsibility for the content of the licensee's records and the records of those persons under the licensee's supervision. These records may be maintained in a variety of formats, if reasonable steps are taken to maintain the confidentiality, accessibility, and durability of the records. Each record shall be completed in a timely manner and, at a minimum, shall include the following information for each client in sufficient detail to permit planning for continuity of care:

(A) Adequate identifying data;

(B) the date or dates of services that the licensee or the licensee's supervisee provided;

(C) the type or types of services that the licensee or the licensee's supervisee provided;

(D) the initial assessment, conclusions, and recommendations;

(E) the treatment plan; and

(F) the clinical or progress notes from each session.

(2) If a licensee is the owner or custodian of client records, the licensee shall retain a complete record for the following time periods, unless otherwise provided by law:

(A) For an adult, at least six years after the date of termination of one or more contacts; and

(B) for a client who is a minor on the date of termination of the contact or contacts, at least until the later of the following two dates:

(i) Two years past the date on which the client reaches the age of 18; or

(ii) six years after the date of termination of the contact or contacts with the minor.

(Authorized by K.S.A. 2015 Supp. 65-7505; implementing K.S.A. 2015 Supp. 65-7504 and 65-7505; effective, T-102-6-29-16, June 29, 2016; effective Nov. 14, 2016.)

Licensed Psychology Unprofessional Conduct Regulations

K.A.R. 102-1-10a. Unprofessional conduct. Each of the following shall be considered unprofessional conduct:

(a) Practicing psychology in an incompetent manner, which shall include the following acts:

- (1) Misrepresenting professional competency by offering to perform services that are inconsistent with the licensee's education, training, or experience;
- (2) performing professional services that are inconsistent with the licensee's education, training, or experience; and
- (3) without just cause, failing to provide psychological services that the licensee is required to provide under the terms of a contract;

(b) practicing with impaired judgment or objectivity, which shall include the following acts:

- (1) Using alcohol or other substances to the extent that it impairs the psychologist's ability to competently engage in the practice of psychology; and
- (2) failing to recognize, seek intervention, and make arrangements for the care of clients if one's own personal problems, emotional distress, or mental health difficulties interfere with or negatively impact professional judgment, professional performance and functioning, or the ability to act in the client's best interests;

(c) engaging in harmful dual relationships, which shall include the following acts:

- (1) Making sexual advances toward or engaging in physical intimacies or sexual activities with either of the following:
 - (A) Any person who is a client, supervisee, or student; or
 - (B) any person that the licensee knows who has a significant relationship with the client, supervisee, or student;
- (2) failing to inform the client or patient of any financial interests that might accrue to the licensed psychologist for referral to any other service or for the sale, promotion, or use of any tests, books, electronic media, or apparatus; and
- (3) exercising undue influence over any client;

(d) making sexual advances toward or engaging in physical intimacies or sexual activities with, or exercising undue influence over any person who, within the past 24 months, has been a client;

(e) failing to obtain informed consent, which shall include the following acts:

- (1) Failing to obtain and document, in a timely manner, informed consent from the client or legally authorized representative for clinical psychological services before the provision of any of these services except in an emergency situation. This informed consent shall include a description of the possible effects of treatment or procedures when there are known risks to the client or patient;
- (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; ~~and~~
- (3) failing to inform clients or patients when a proposed treatment or procedure is experimental; and

(4) failing to inform the client of the limit of a professional relationship and the requirements imposed by other parties.

(f) ignoring client welfare, which shall include the following acts:

- (1) Failing to provide copies of reports or records to a licensed healthcare provider authorized by the client following the licensee's receipt of a formal written request, unless the release of that information is restricted or exempted by law or by these regulations, or the disclosure of the information would be injurious to the welfare of the client;
- (2) failing to inform the client or patient that the client or patient is entitled to the same services from a public agency if the licensed psychologist is employed by that public agency and also offers services privately;
- (3) engaging in behavior that is abusive or demeaning to a client, student, or supervisee;
- (4) soliciting or agreeing to provide services to prospective clients or patients who are already receiving mental health services elsewhere without openly discussing issues of disruption of continuity of care with the prospective client or patient, or with other legally authorized persons who represent the client or patient, and when appropriate, consulting with the other service provider about the likely effect of a change of providers on the client's general welfare;
- (5) failing to take each of the following steps before termination for whatever reason, unless precluded by the patient's or client's relocation or noncompliance with the treatment regimen:
 - (A) Discuss the patient's or client's views and needs;
 - (B) provide appropriate pretermination counseling;
 - (C) suggest alternative service providers, as appropriate; and
 - (D) take other reasonable steps to facilitate the transfer of responsibility to another provider if the patient or client needs one immediately;
- (6) failing to arrange for another psychologist or other appropriately trained mental health professional to be available to handle clinical emergencies if the psychologist anticipates being unavailable for a significant amount of time;
- (7) failing to be available for the timely handling of clinical emergencies after having agreed to provide coverage for another psychologist;
- (8) failing to terminate a professional relationship if it becomes reasonably clear that the patient or client no longer needs the service, is not benefiting from continued service, or is being harmed by continued service;
- (9) failing to delegate to employees, supervisees, and research assistants only those responsibilities that these persons can reasonably be expected to perform competently on the basis of their education, training, or experience, either independently or with the level of supervision being provided;
- (10) failing to provide training and supervision to employees or supervisees and to take reasonable steps to see that these persons perform services responsibly, competently, and ethically; and
- (11) continuing to use or order tests, procedures, or treatment, or to use treatment facilities or services not warranted by the client's or patient's condition;

(g) failing to protect confidentiality or privacy, which ~~shall~~may include, but is not limited to, the following acts:

- (1) Failing to inform each client, supervisee, or student of the limits of client confidentiality, the purposes for which the information may be obtained, and the manner in which it may be used;

(2) revealing any information regarding a client or failing to protect information contained in a client's records, unless at least one of these conditions is met:

(A) Disclosure is required or permitted by law;

(B) failure to disclose the information presents a clear and present danger to the health and safety of an individual or the public;

(C) the psychologist is a party to a civil, criminal, or disciplinary investigation or action arising from the practice of psychology, in which case disclosure shall be limited to that action; or

(D) the patient has signed a written release that authorizes the psychologist to release information to a specific person or persons identified in the release; ~~and/or~~

(3) failing to obtain written, informed consent from each client or the client's legal representative or representatives or from any other participant before performing either of the following actions:

(A) Electronically recording sessions with the client, or other participants, including audio and video recordings; or

(B) permitting third-party observation of the activities of the client or participant;

(h) misrepresenting the services offered or provided, which shall include the following acts:

(1) Failing to inform a client if services are provided or delivered under supervision;

(2) making claims of professional superiority that cannot be substantiated;

(3) guaranteeing that satisfaction or a cure will result from the performance of professional services;

(4) knowingly engaging in fraudulent or misleading advertising; and

(5) taking credit for work not personally performed;

(i) engaging in improprieties with respect to fees and billing statements, which shall include the following acts:

(1) Exploiting clients or payers with respect to fees;

(2) misrepresenting one's fees;

(3) failing to inform a patient or client who fails to pay for services as agreed that collection procedures may be implemented, including the possibility that a collection agency may be used or legal measures may be taken; and

(4) filing claims for services that were not rendered;

(j) improperly using assessment procedures, which shall include the following acts:

(1) Basing assessment, intervention, or recommendations on test results and instruments that are inappropriate to the current purpose or to the patient characteristics;

(2) failing to identify situations in which particular assessment techniques or norms may not be applicable or failing to make adjustments in administration or interpretation because of relevant factors, including gender, age, race, and other pertinent factors;

(3) failing to indicate significant limitations to the accuracy of the assessment findings;

(4) failing to inform individuals or groups at the outset of an assessment that the psychologist is precluded by law or by organizational role from providing information about results and conclusions of the assessment;

(5) endorsing, filing, or submitting psychological assessments, recommendations, reports, or diagnostic statements on the basis of information and techniques that are insufficient to substantiate those findings;

(6) releasing raw test results or raw data either to persons who are not qualified by virtue of education, training, or supervision to use that information or in a manner that is inappropriate to the needs of the patient or client; and

(7) allowing, endorsing, or supporting persons who are not qualified by virtue of education, training, or supervision to administer or interpret psychological assessment techniques;

(k) violating applicable law, which shall include the following acts:

(1) Impersonating another person holding a license issued by this or any other board;

(2) claiming or using any method of treatment or diagnostic technique that the licensed psychologist refuses to divulge to the board;

(3) refusing to cooperate in a timely manner with the board's investigation of complaints lodged against an applicant or a psychologist licensed by the board. Any psychologist taking longer than 30 days to provide requested information shall have the burden of demonstrating that the psychologist has acted in a timely manner; and

(4) being convicted of a crime resulting from or relating to the licensee's professional practice of psychology;

(l) aiding an illegal practice, which shall include the following acts:

(1) Knowingly allowing another person to use one's license;

(2) knowingly aiding or abetting anyone who is not ~~credentialed~~ authorized to practice by the board to represent that individual as a person credentialed by the board;

(3) furthering the licensure or registration application of another person who is known or reasonably believed to be unqualified in respect to character, education, or other relevant eligibility requirements;

(4) making a materially false statement or failing to disclose a material fact in an application for licensure or renewal of licensure; and

(5) failing to notify the board, within a reasonable period of time, that any of the following conditions apply to the psychologist or that the psychologist has knowledge, not obtained in the context of confidentiality, that any of the following conditions apply to another professional regulated by the board:

(A) A licensee has had a license, certificate, permit, registration, or other certificate, registration, or license in psychology or in the field of behavioral sciences, granted by any state or jurisdiction, that has been limited, restricted, suspended, or revoked;

(B) a licensee has been subject to disciplinary action by a licensing or certifying authority or professional association;

(C) a licensee has been terminated or suspended from employment for some form of misfeasance, malfeasance, or nonfeasance;

(D) a licensee has been convicted of a felony; or

(E) a licensee has practiced in violation of the laws or regulations regulating the profession;

A psychologist taking longer than 30 days to notify the board shall have the burden of demonstrating that the psychologist acted within a reasonable period of time;

(m) ~~failing to maintain and retain records as outlined in K.A.R. 102-1-20~~ failing to exercise professional conduct regarding recordkeeping by committing any of the following acts:

(1) failing to maintain a record for each client or patient that accurately reflects the licensee's contact with the client or patient and the results of the psychological service provided. Each

licensee shall have ultimate responsibility for the content of the licensee's records and the records of those persons under the licensee's supervision. The record may be maintained in a variety of media, if reasonable steps are taken to maintain confidentiality, accessibility, and durability. Each record shall be completed in a timely manner and shall include the following information for each client or patient who is a recipient of clinical psychological services:

(A) Adequate identifying data;

(B) the date or dates of services the licensee or the licensee's supervisee provided;

(C) the type or types of services the licensee or the licensee's supervisee provided;

(D) initial assessment, conclusions, and recommendations;

(E) a plan for service delivery or case disposition;

(F) clinical notes of each session; and

(G) sufficient detail to permit planning for continuity that would enable another psychologist to take over the delivery of services.

(2) If a licensee is the owner or custodian of client or patient records, failing to retain a complete record for the following time periods, unless otherwise provided by law:

(A) At least five years after the date of termination of one or more contacts with an adult; and

(B) for a client or patient who is a minor on the date of termination of the contact or contacts, at least until the later of the following two dates:

(i) Two years past the age of majority; or

(ii) five years after the date of termination of the contact or contacts with the minor; and

(3) If a licensee is the owner or custodian of client or patient records, failing to identify a repository for client records, should the psychologist become incapacitated or unable to access their records.

(n) improperly engaging in research with human subjects, which shall include the following acts:

(1) Failing to consider carefully the possible consequences for human beings participating in the research;

(2) failing to protect each participant from unwarranted physical and mental harm;

(3) failing to ascertain that the consent of the participant or the participant's representative, and assent of a minor participant, is voluntary and informed; and

(4) failing to preserve the privacy and protect the anonymity of the subjects within the terms of informed consent;

(o) engaging in improprieties with respect to forensic practice, which shall include the following acts:

(1) When conducting a forensic examination, failing to inform the examinee of the purpose of the examination and the difference between a forensic examination and a therapeutic relationship, and informing them of the scope of the assessment procedures;

(2) in the course of giving expert testimony in a legal proceeding, performing a psychological assessment in a biased, nonobjective, or unfair manner or without adequate substantiation of the findings;

(3) failing to conduct forensic examinations in conformance with established scientific and professional standards; and

(4) if a prior professional relationship with a party to legal proceeding precludes objectivity, failing to report this prior relationship and to clarify in both written report and actual testimony the possible impact of this prior relationship on the resulting conclusions and recommendations;

and

(p) engaging in improprieties with respect to supervision, which shall include the following acts:

(1) Failing to provide supervision in compliance with subsection (d) of K.A.R. 102-1-5a;

(2) failing to provide supervision to a person working towards licensure as a clinical psychotherapist in compliance with KAR 102-4-7a; and

(3) failing to provide regular, periodic, written supervisory feedback to the supervisee.

(Authorized by and implementing K.S.A. 2000 74-7507 and K.S.A. 74-5324; effective Jan. 4, 2002; amended Jan. 9, 2004.)

Marriage and Family Therapy Unprofessional Conduct Regulations

K.A.R. 102-5-12. Unprofessional conduct. (a) Any license may be suspended, limited, conditioned, qualified, restricted, revoked, not issued, or not renewed upon a finding by the board that unprofessional conduct has occurred.

(b) Any of the following acts by either a marriage and family therapy licensee or a marriage and family therapy licensure applicant shall constitute unprofessional conduct:

(1) Obtaining or attempting to obtain a license or registration for oneself or another by engaging in fraud, bribery, deceit, misrepresentation, or by concealing a material fact;

(2) except when the information has been obtained in the context of confidentiality, failing to notify the board, within a reasonable period of time, that the licensee or applicant or any other person regulated by the board or applying for licensure or registration has met any of these conditions:

(A) Has had a professional license, certificate, permit, registration, certification, or professional membership granted by any jurisdiction, professional association, or professional organization that has been limited, conditioned, qualified, restricted, suspended, revoked, refused, voluntarily surrendered, or allowed to expire in lieu of or during investigatory or disciplinary proceedings;

(B) has been subject to any other disciplinary action by any credentialing board, professional association, or professional organization;

(C) has been demoted, terminated, suspended, reassigned, or asked to resign from employment, or has resigned from employment, for some form of misfeasance, malfeasance, or nonfeasance;

(D) has been convicted of a crime; or

(E) has practiced the licensee's or registrant's profession in violation of the laws or regulations that regulate the profession;

(3) knowingly allowing another person to use one's license or registration;

(4) impersonating another person holding a license or registration issued by this or any other board;

(5) having been convicted of a crime resulting from or relating to one's professional practice of marriage and family therapy;

(6) furthering the licensure or registration application of another person who is known or reasonably believed to be unqualified with respect to character, education, or other relevant eligibility requirements;

(7) knowingly aiding or abetting any individual who is not credentialed by the board to represent that individual as a person who was or is credentialed by the board;

(8) failing to recognize, seek intervention, and otherwise appropriately respond when one's own personal problems, psychosocial distress, or mental health difficulties interfere with or negatively impact professional judgment, professional performance and functioning, or the ability to act in the client's best interests;

(9) failing or refusing to cooperate in a timely manner with any request from the board for a response, information, or assistance with respect to the board's investigation of any report of an alleged violation filed against oneself or any other applicant or professional who is required to be licensed or registered by the board. Any person taking longer than 30 days to provide the requested response, information, or assistance shall have the burden of demonstrating that the person has acted in a timely manner;

(10) offering to perform or performing services clearly inconsistent or incommensurate with one's training, education, or experience or with accepted professional standards;

(11) treating any client, student, or supervisee in a cruel manner;

(12) discriminating against any client, student, or supervisee on the basis of color, race, age, gender, gender identity, religion, ethnicity, national origin, ~~or~~ disability, health status, sexual orientation, relationship status, socioeconomic status, or status in any other marginalized group;

(13) failing to advise and explain to each client the respective rights, responsibilities, and duties involved in the marriage and family therapy relationship;

(14) failing to provide each client with a description of what the client can expect in the way of services, consultation, reports, fees, billing, therapeutic regimen, or schedule, or failing to reasonably comply with that description;

(15) failing to provide each client with a description of the possible effects of the proposed treatment when the treatment is experimental or when there are clear and known risks to the client;

(16) failing to inform each client, student, or supervisee of any financial interests that might accrue to the licensee or applicant if the licensee or applicant refers a client, student, or supervisee to any other service or if the licensee or applicant uses any tests, books, or apparatus;

(17) failing to inform each client that the client is entitled to the same services from a public agency if one is employed by that public agency and also offers services privately;

(18) failing to inform each client, student, or supervisee of the limits of client confidentiality, the purposes for which the information is obtained, and the manner in which the information may be used;

(19) revealing information, a confidence, or secret of any client, or failing to protect the confidences, secrets, or information contained in a client's records, except when at least one of these conditions is met:

(A) Disclosure is required or permitted by law;

(B) failure to disclose the information presents a clear and present danger to the health or safety of an individual or the public;

(C) the licensee or applicant is a party to a civil, criminal, or disciplinary investigation or action arising from the practice of marriage and family therapy, in which case disclosure is limited to that action; or

(D) the criteria provided by K.S.A. 65-6410, and amendments thereto, are met;

(20) failing to obtain written, informed consent from each client, or the client's legal representative or representatives, before performing any of these actions:

(A) Electronically recording sessions with that client;

(B) permitting a third-party observation of their activities; or

(C) releasing information concerning a client to a third person, except as required or permitted by law;

(21) failing to protect the confidences of, secrets of, or information concerning other persons when providing a client with access to that client's records;

(22) failing to exercise due diligence in protecting the information regarding and the confidences and secrets of the client from disclosure by other persons in one's work or practice setting;

(23) engaging in professional activities, including billing practices and advertising, involving dishonesty, fraud, deceit, or misrepresentation;

(24) using alcohol or illegally using any controlled substance while performing the duties or services of a marriage and family therapist;

(25) making sexual advances toward or engaging in physical intimacies or sexual activities with one's client, student, or supervisee;

(26) making sexual advances toward, engaging in physical intimacies or sexual activities with, or exercising undue influence over any person who ~~has ever, within the past 24 months, has~~ been one's client;

(27) exercising undue influence over any client, student, or supervisee, including promoting sales of services or goods, in a manner that will exploit the client, student, or supervisee for the financial gain, personal gratification, or advantage of oneself or a third party;

(28) directly or indirectly offering or giving to a third party or soliciting, receiving, or agreeing to receive from a third party any fee or other consideration for referring the client or in connection

with performing professional services;

(29) permitting any person to share in the fees for professional services, other than a partner, an employee, an associate in a professional firm, or a consultant authorized to practice marriage and family therapy;

(30) soliciting or assuming professional responsibility for clients of another agency or colleague without attempting to coordinate the continued provision of client services by that agency or colleague;

(31) making claims of professional superiority that one cannot substantiate;

(32) guaranteeing that satisfaction or a cure will result from performing or providing any professional service;

(33) claiming or using any secret or special method of treatment or techniques that one refuses to disclose to the board;

(34) continuing or ordering tests, procedures, or treatments or using treatment facilities or services not warranted by the client's condition, best interests, or preferences;

(35) taking credit for work not personally performed, whether by giving inaccurate or misleading information or by failing to disclose accurate or material information;

(36) if engaged in research, failing to fulfill these requirements:

(A) Consider carefully the possible consequences for human beings participating in the research;

(B) protect each participant from unwarranted physical and mental harm;

(C) ascertain that each participant's consent is voluntary and informed; and

(D) preserve the privacy and protect the anonymity of each subject of the research within the terms of informed consent;

(37) making or filing a report that one knows to be false, distorted, erroneous, incomplete, or misleading;

(38) failing to notify the client promptly when one anticipates terminating or interrupting service to the client;

(39) failing to seek continuation of service, or abandoning or neglecting a client under or in need of professional care, without making reasonable arrangements for that care;

(40) abandoning employment under circumstances that seriously impair the delivery of professional care to clients and without providing reasonable notice to the employer;

- (41) failing to terminate marriage and family therapy services when it is apparent that the relationship no longer serves the client's needs or best interests;
- (42) supervising in a negligent manner anyone for whom one has supervisory responsibility;
- (43) when applicable, failing to inform a client that marriage and family therapy services are provided or delivered under supervision;
- (44) engaging in a dual relationship with a client, student, or supervisee;
- (45) failing to inform the proper authorities as required by K.S.A. 38-2223, and amendments thereto, that one knows or has reason to believe that a client has been involved in harming or has harmed a child, whether by physical, mental, or emotional abuse or neglect or by sexual abuse;
- (46) failing to inform the proper authorities as required by K.S.A. 39-1402, and amendments thereto, that one knows or has reason to believe that any of the following circumstances apply to a resident, as defined by K.S.A. 39-1401(a) and amendments thereto:
- (A) Has been or is being abused, neglected, or exploited;
 - (B) is in a condition that resulted from abuse, neglect, or exploitation; or
 - (C) needs protective services;
- (47) failing to inform the proper authorities as required by K.S.A. 39-1431, and amendments thereto, that one knows or has reason to believe that any of the following circumstances apply to an adult, as defined in K.S.A. 39-1430 and amendments thereto:
- (A) Is being or has been abused, neglected, or exploited;
 - (B) is in a condition that is the result of abuse, neglect, or exploitation; or
 - (C) needs protective services;
- (48) intentionally or negligently failing to file a report or record required by state or federal law, willfully impeding or obstructing another person from filing a report or record that is required by state or federal law, or inducing another person to take any of these actions;
- (49) offering to perform or performing any service, procedure, or therapy that, by the accepted standards of marriage and family therapy practice in the community, would constitute experimentation on human subjects without first obtaining the full, informed, and voluntary written consent of the client or the client's legal representative or representatives;
- (50) practicing marriage and family therapy in an incompetent manner;
- (51) practicing marriage and family therapy after one's license expires;
- (52) using without a license or continuing to use after a license has expired any title or abbreviation prescribed by law to be used solely by persons who currently hold that type or class

of license; or

(53) violating any provision of this act or any regulation adopted under the act;

(54) practicing inappropriate boundaries with clients with regards to the use of social media, including but not limited to, using a personal profile to connect or communicate with clients on any social media platform;

(55) disclosing confidential information through public social media; or

(56) failure to follow appropriate standards or recordkeeping, as described below:

-(A) Content of marriage and family therapy or clinical marriage and family therapy records. Each licensed marriage and family therapist or clinical marriage and family therapist shall maintain a record for each client or client system that accurately reflects the licensee's contact with the client or client system and the results of the marriage and family therapy or clinical marriage and family therapy services provided. Each licensee shall have ultimate responsibility for the content of the licensee's records and the records of those persons under the licensee's supervision. These records may be maintained in a variety of media, if reasonable steps are taken to maintain confidentiality, accessibility, and durability. Each record shall be completed in a timely manner and shall include the following information for each client or client system:

(1) Adequate identifying data;

(2) the date or dates of services that the licensee or the licensee's supervisee provided;

(3) the type or types of services that the licensee or the licensee's supervisee provided;

(4) the initial assessment, conclusions, and recommendations;

(5) a plan for service delivery or case disposition;

(6) the clinical notes from each session; and

(7) sufficient detail to permit planning for continuity that would enable another marriage and family therapist or clinical marriage and family therapist to take over the delivery of services.

(B) Retention of records. If a licensee is the owner or custodian of client or client system records, the licensee shall retain a complete record for the following time periods, unless otherwise provided by law:

(1) At least six years after the date of termination of one or more contacts with an adult; and

(2) for a client who is a minor on the date of termination of the contact or contacts, at least until the later of the following two dates:

(i) Two years past the date on which the client reaches the age of majority; or

(ii) six years after the date of termination of the contact or contacts with the minor.

(Authorized by K.S.A. 65-6408 and K.S.A. 2007 Supp. 74-7507; implementing K.S.A. 65-6408; effective March 29, 1993; amended Dec. 19, 1997; amended July 11, 2003; amended Jan. 9, 2004; amended Aug. 8, 2008.)

Master's Level Psychology Unprofessional Conduct Regulations

K.A.R. 102-4-12. Unprofessional conduct. (a) Any license may be suspended, limited, conditioned, qualified, restricted, revoked, not issued, or not renewed upon a finding that unprofessional conduct has occurred.

(b) Any of the following acts by a licensed master's level psychologist, a licensed clinical psychotherapist, or an applicant for licensure at the master's level of psychology shall constitute unprofessional conduct:

(1) Obtaining or attempting to obtain a license or registration for oneself or another by means of fraud, bribery, deceit, misrepresentation, or concealment of a material fact;

(2) except when such information has been obtained in the context of confidentiality, failing to notify the board, within a reasonable period of time, that any person regulated by the board or applying for a license or registration, including oneself, has met any of the following conditions:

(A) Had a professional license, certificate, permit, registration, certification, or professional membership granted by any jurisdiction, professional association, or professional organization that has been limited, conditioned, qualified, restricted, suspended, revoked, refused, voluntarily surrendered, or allowed to expire in lieu of or during investigatory or disciplinary proceedings;

(B) has been subject to any other disciplinary action by any credentialing board, professional association, or professional organization;

(C) has been demoted, terminated, suspended, reassigned, or asked to resign from employment, or has resigned from employment, for some form of misfeasance, malfeasance, or nonfeasance;

(D) has been convicted of a crime; or

(E) has practiced the licensee's or registrant's profession in violation of the laws or regulations regulating the profession;

(3) knowingly allowing another person to use one's license or registration;

(4) impersonating another person holding a license or registration issued by this or any other board;

(5) having been convicted of a crime resulting from or relating to the licensee's practice of master's level psychology;

(6) furthering the licensure or registration application of another person who is known or reasonably believed to be unqualified with respect to character, education, or other relevant eligibility requirements;

(7) knowingly aiding or abetting anyone who is not credentialed by the board to represent that individual as a person who is ~~credentialed~~ authorized to practice by the board;

(8) failing to recognize, seek intervention, and otherwise appropriately respond when one's own personal problems, psychosocial distress, or mental health difficulties interfere with or negatively impact professional judgment, professional performance and functioning, or the ability to act in the client's best interests;

(9) failing or refusing to cooperate in a timely manner with any request from the board for a response, information, or assistance with respect to the board's investigation of any report of an alleged violation filed against oneself or any other applicant or professional who is required to be licensed or registered by the board. Any person taking longer than 30 days to provide the

requested response, information, or assistance shall have the burden of demonstrating that the person has acted in a timely manner;

(10) offering to perform or performing services clearly inconsistent or incommensurate with one's training, education, or experience or with accepted professional standards, including, but not limited to, telehealth practice;

(11) treating any client, student, or supervisee in a cruel manner;

(12) discriminating against any client, student, or supervisee on the basis of color, race, gender, religion, national origin, or disability;

(13) failing to advise and explain to each client the respective rights, responsibilities, and duties involved in the professional relationship;

(14) failing to provide each client with a description of what the client can expect in the way of services, consultation, reports, fees, billing, therapeutic regimen, ~~or~~ schedule, the availability of and limitations of telehealth services, as well as the availability of after-hours crisis resources, or failing to reasonably comply with the description;

(15) failing to provide each client with a description of the possible effects of the proposed treatment when the treatment is experimental or when there are clear and known risks to the client;

(16) failing to inform each client, supervisee, or student of any financial interests that might accrue to the master's level psychologist or clinical psychotherapist from referral to any other service or from the use of any tests, books, or apparatus;

(17) failing to inform each client that the client is entitled to the same services from a public agency if one is employed by that public agency and also offers services privately;

(18) failing to provide each client or the client's legal representative with access to the client's records following the receipt of a formal written request, unless the release of this information is restricted or exempted by law, or when the disclosure of this information is precluded for a sufficiently compelling reason;

(19) failing to inform each client, supervisee, or student of the limits of client confidentiality, the purposes for which the information is obtained, and the manner in which the information may be used;

(20) revealing information, a confidence, or secret of any client, or failing to protect the confidences, secrets, or information contained in a client's records, except when at least one of these conditions is met:

(A) Disclosure is required or permitted by law;

(B) failure to disclose the information presents a clear and present danger to the health or safety of an individual or the public; or

(C) the master's level psychologist or clinical psychotherapist is a party to a civil, criminal, or disciplinary investigation or action arising from the practice of psychology, in which case disclosure is limited to that action;

(21) failing to obtain written, informed consent from each client, or the client's legal representative or representatives, before performing any of the following actions:

(A) Electronically recording sessions with that client;

(B) permitting a third-party observation of their activities; or

(C) releasing information concerning a client to a third person, except as required or permitted by

law;

- (22) failing to protect ~~the confidences of confidential information, secrets of, or information~~ concerning other persons when providing ~~a client with~~ access to that client's records;
- (23) failing to exercise due diligence in protecting the information regarding and the confidences ~~and secrets~~ of the client from disclosure by other persons in one's work or practice setting;
- (24) engaging in professional activities, including but not limited to, billing practices and advertising, involving dishonesty, fraud, deceit, or misrepresentation;
- (25) using alcohol or illegally using any controlled substance while performing the duties or services of a master's level psychologist or clinical psychotherapist;
- (26) making sexual advances toward or engaging in physical intimacies or sexual activities with one's client, supervisee, or student;
- (27) making sexual advances toward, engaging in physical intimacies or sexual activities with, or exercising undue influence over any person who, within the past 24 months, has been one's client, student, or supervisee;
- (28) exercising undue influence over any client, supervisee, or student, including promoting sales of services or goods, in a manner that will exploit the client, student, or supervisee for the financial gain, personal gratification, or advantage of oneself or a third party;
- (29) directly or indirectly offering or giving to a third party or soliciting, receiving, or agreeing to receive from a third party any fee or other consideration for the referral of the client or in connection with the performance of psychological or other professional services;
- (30) directly receiving or agreeing to receive a fee or any other consideration from a client or from any third party for or in connection with the performance of psychological services, other than from an authorized employer in an employment situation as specified in this act;
- (31) soliciting or assuming professional responsibility for clients of another agency or colleague without attempting to coordinate continuity of client services with that agency or colleague;
- (32) making claims of professional superiority that one cannot substantiate;
- (33) guaranteeing that satisfaction or a cure will result from the performance of psychological services;
- (34) claiming or using any secret or special method of treatment or techniques that one refuses to disclose to the board;
- (35) continuing or ordering tests, procedures, or treatments or using treatment facilities or services not warranted by the condition, best interests, or preferences of the client;
- (36) failing to maintain a record for each client that conforms to the following minimal requirements:
 - (A) Contains adequate identification of the client;
 - (B) indicates the client's initial reason for seeking the master's level psychologist's or clinical psychotherapist's services;
 - (C) contains pertinent and significant information concerning the client's condition;
 - (D) summarizes the intervention, treatment, tests, procedures, and services that were obtained, performed, ordered, or recommended and the findings and results of each;
 - (E) documents the client's progress during the course of intervention or treatment provided by the master's level psychologist or clinical psychotherapist;
 - (F) is legible;

- (G) contains only those terms and abbreviations that are comprehensible to similar professional practitioners;
- (H) indicates the date, ~~and~~ nature, and method of delivery of any professional service that was provided; and
- (I) describes the manner and process by which the professional relationship terminated;
- (37) taking credit for work not personally performed, whether by giving inaccurate or misleading information or by failing to disclose accurate or material information;
- (38) if engaged in research, failing to fulfill these requirements:
- (A) Consider carefully the possible consequences for human beings participating in the research;
- (B) protect each participant from unwarranted physical and mental harm;
- (C) ascertain that the consent of each participant is voluntary and informed; and
- (D) preserve the privacy and protect the anonymity of each subject of the research within the terms of informed consent;
- (39) making or filing a report that one knows to be false, distorted, erroneous, incomplete, or misleading;
- (40) failing to notify the client promptly when termination or interruption of service to the client is anticipated;
- (41) failing to seek continuation of service, or abandoning or neglecting a client under or in need of professional care, without making reasonable arrangements for that care;
- (42) abandoning employment under circumstances that seriously impair the delivery of professional care to clients and without providing reasonable notice to the employer;
- (43) failing to terminate the master's level psychology or clinical psychotherapy services when it is apparent that the relationship no longer serves the client's needs or best interests;
- (44) if the master's level psychologist or clinical psychotherapist is the owner or custodian of client records, failing to retain those records for at least two years after the date of termination of the professional relationship, unless otherwise provided by law;
- (45) supervising in an unprofessional or potentially harmful negligent manner anyone for whom one has supervisory responsibility;
- (46) failing to inform a client if master's level psychology or clinical psychotherapy services are provided or delivered under supervision;
- (47) engaging in a dual relationship with a client, student, or supervisee;
- (48) failing to inform the proper authorities as required by K.S.A. 38-2223, and amendments thereto, that one knows or has reason to believe that a client has been involved in harming or has harmed a child, whether by physical, mental, or emotional abuse or neglect or by sexual abuse;
- (49) failing to inform the proper authorities as required by K.S.A. 39-1402, and amendments thereto, that one knows or has reason to believe that any of the following circumstances apply to a resident, as defined by K.S.A. 39-1401(a) and amendments thereto:
- (A) Has been or is being abused, neglected, or exploited;
- (B) is in a condition that is the result of abuse, neglect, or exploitation; or
- (C) is in need of protective services;
- (50) failing to inform the proper authorities as required by K.S.A. 39-1431, and amendments thereto, that one knows or has reason to believe that any of the following circumstances apply to an adult, as defined in K.S.A. 39-1430 and amendments thereto:

- (A) Is being or has been abused, neglected, or exploited;
- (B) is in a condition that is the result of abuse, neglect, or exploitation; or
- (C) is in need of protective services;
- (51) ~~intentionally or negligently~~ failing to file a report or record required by state or federal law, willfully impeding or obstructing the filing of a report or record required by state or federal law, or inducing another person to take any of those actions;
- (52) offering to perform or performing any service, procedure, or therapy that, by the accepted standards of professional practice in the community, would constitute experimentation on human subjects without first obtaining the full, informed, and voluntary written consent of the client or the client's legal representative or representatives;
- (53) practicing master's level psychology or clinical psychotherapy in an incompetent manner;
- (54) practicing as a master's level psychologist or clinical psychotherapist after one's license expires;
- (55) using without a license, or continuing to use after the expiration of a license, any title or abbreviation prescribed by law for use solely by persons currently holding that type or class of license;
- (56) offering to provide or providing services in an employment situation other than that which is permitted by K.S.A. 74-5362, and amendments thereto, as an independent, contract, or private provider of psychological services;
- (57) practicing without adequate direction from a person authorized in K.S.A. 74-5362 and amendments thereto; and
- (58) violating any provision of this act or any regulation adopted under the act. (Authorized by K.S.A. 2007 Supp. 74-7507; implementing K.S.A. 74-5362 and K.S.A. 2007 Supp. 74-5369; effective Dec. 19, 1997; amended Jan. 9, 2004; amended Aug. 8, 2008.)

Professional Counseling Unprofessional Conduct Regulations

K.A.R. 102-3-12a. Unprofessional conduct. (a) Any license may be suspended, limited, conditioned, qualified, restricted, revoked, not issued, or not renewed upon a finding of unprofessional conduct.

(b) Any of the following acts by a licensed professional counselor, a licensed clinical professional counselor, or an applicant for a professional counselor license or a clinical professional counselor license shall constitute unprofessional conduct:

(1) Obtaining or attempting to obtain a license or registration for oneself or another by means of fraud, bribery, deceit, misrepresentation, or concealment of a material fact;

(2) except when the information has been obtained in the context of confidentiality, failing to notify the board, within a reasonable period of time, that any of the following circumstances apply to any person regulated by the board or applying for a license or registration, including oneself:

(A) Had a professional license, certificate, permit, registration, certification, or professional membership granted by any jurisdiction, professional association, or professional organization that has been limited, conditioned, qualified, restricted, suspended, revoked, refused, voluntarily surrendered, or allowed to expire in lieu of or during investigatory or disciplinary proceedings;

(B) has been subject to any other disciplinary action by any credentialing board, professional association, or professional organization;

(C) has been demoted, terminated, suspended, reassigned, or asked to resign from employment, or has resigned from employment, for some form of misfeasance, malfeasance, or nonfeasance;

(D) has been convicted of a crime; or

(E) has practiced the licensee's or registrant's profession in violation of the laws or regulations regulating the profession;

(3) knowingly allowing another person to use one's license or registration;

(4) impersonating another person holding a license or registration issued by this or any other board;

(5) having been convicted of a crime resulting from or relating to the licensee's professional practice of professional counseling or clinical professional counseling;

(6) furthering the licensure or registration application of another person who is known or reasonably believed to be unqualified with respect to character, education, or other relevant eligibility requirements;

(7) knowingly aiding or abetting any individual who is not credentialed by the board to represent that individual as a person who is credentialed by the board;

(8) failing to recognize, seek intervention, and otherwise appropriately respond when one's own personal problems, psychosocial distress, or mental health difficulties interfere with or negatively impact professional judgment, professional performance and functioning, or the ability to act in the client's best interests;

(9) failing or refusing to cooperate in a timely manner with any request from the board for a response, information, or assistance with respect to the board's investigation of any report of an alleged violation filed against oneself or any other applicant or professional who is required to be licensed or registered by the board. Any person taking longer than 30 days to provide the requested response, information, or assistance shall have the burden of demonstrating that the person has acted in a timely manner;

(10) offering to perform or performing professional counseling, assessments, consultations, or referrals clearly inconsistent or incommensurate with one's training, education or experience or with accepted professional standards;

(11) treating any client, student, directee, or supervisee in an cruel-unprofessional or unethical manner;

(12) discriminating against any client, student, directee, or supervisee on the basis of color, race, gender, religion, national origin, or disability age, culture, disability, ethnicity, race, religion/spirituality, gender, gender identity, sexual orientation, marital/partnership status, language preference, socioeconomic status, immigration status, or any basis proscribed by law;

(13) failing to advise and explain to each client the respective rights, responsibilities, and duties involved in the professional counseling relationship;

(14) failing to provide each client with a description of what the client can expect in the way of services, consultation, reports, fees, billing, and therapeutic regimen or schedule, or failing to reasonably comply with the description;

(15) failing to provide each client with a description of the possible effects of the proposed treatment when the treatment is experimental or when there are clear and known risks to the client;

(16) failing to inform each client, student, directee, or supervisee of any financial interests that might accrue to the professional counselor or clinical professional counselor from a referral to any other service or from using any tests, books, or apparatus;

(17) failing to inform each client that the client is entitled to the same services from a public agency if the professional counselor or clinical professional counselor is employed by that public agency and also offers services privately;

(18) failing to inform each client, student, directee, or supervisee of the limits of client confidentiality, the purposes for which the information is obtained, and the manner in which the information may be used;

(19) revealing information, a confidence, or a secret of any client, or failing to protect the confidences, secrets, or information contained in a client's records, except when at least one of these conditions is met:

(A) Disclosure is required or permitted by law;

(B) failure to disclose the information presents a clear and present danger to the health or safety of an individual or the public; or

(C) the professional counselor or clinical professional counselor is a party to a civil, criminal, or disciplinary investigation or action arising from the practice of professional counseling or clinical professional counseling, in which case disclosure is limited to that action;

(20) failing to obtain written, informed consent from each client, or the client's legal representative or representatives, before performing any of these actions:

(A) Electronically recording sessions with that client;

(B) permitting a third-party observation of their activities; or

(C) releasing information concerning a client to a third person, except as required or permitted by law;

(21) failing to protect confidences of, secrets of, or information concerning other persons when providing a client with access to that client's records;

(22) failing to exercise due diligence in protecting the information regarding and the confidences and secrets of the client from disclosure by other persons in one's work or practice setting;

(23) engaging in professional activities, including but not limited to, billing practices and advertising, involving dishonesty, fraud, deceit, or misrepresentation;

(24) ~~using alcohol or illegally using a controlled substance~~ being under the influence of any substance that impairs professional judgment while performing the duties or services of a professional counselor or clinical professional counselor;

(25) making sexual advances toward or engaging in physical intimacies or sexual activities with one's ~~client~~, active student, directee, or supervisee;

(26) making sexual advances toward, engaging in physical intimacies or sexual activities with, or exercising undue influence over any person who is one's active client or, within the past 24-60 months, has been one's client;

(27) exercising undue influence over any client, student, directee, or supervisee, including promoting sales of services or goods, in a manner that will exploit the client, student, directee, or

supervisee for the financial gain, personal gratification, or advantage of oneself or a third party;

(28) directly or indirectly offering or giving to a third party or soliciting, receiving, or agreeing to receive from a third party any fee or other consideration for the referral of the client or in connection with performing professional counselor or clinical professional counselor services;

(29) permitting any person to share in the fees for professional services, other than a partner, employee, associate in a professional firm, or consultant authorized to practice as a professional counselor or clinical professional counselor;

(30) soliciting or assuming professional responsibility for clients of another agency or colleague without attempting to coordinate continuity of client services with that agency or colleague;

(31) making claims of professional superiority that one cannot substantiate;

(32) guaranteeing that satisfaction or a cure will result from the performance of professional services;

(33) claiming or using any ~~secret or special method of~~ untested or experimental treatment or techniques that one refuses to disclose to the board;

(34) ~~continuing requesting, providing,~~ or ordering ~~testsassessments~~, procedures, or treatments or using treatment facilities or services not warranted by the condition, best interests, or preferences of the client;

(35) failing to maintain a record for each client that conforms to the following minimal requirements:

(A) Contains adequate identification of the client;

(B) indicates the client's initial reason for seeking the services of the professional counselor or clinical professional counselor;

(C) contains pertinent and significant information concerning the client's condition;

(D) summarizes the interventions, treatments, ~~testsassessments~~, procedures, and services that were obtained, performed, ordered, requested, or recommended and the findings and results of each;

(E) documents the client's progress during the course of intervention or treatment provided by the professional counselor;

(F) is legible;

(G) contains only those terms and abbreviations that are comprehensible to similar professional practitioners;

(H) indicates the date and nature of any professional service that was provided; and

(I) describes the manner and process by which the professional counseling or clinical professional counseling relationship terminated;

(36) taking credit for work not personally performed, whether by giving inaccurate or misleading information or failing to disclose accurate or material information;

(37) if engaged in research, failing to fulfill these requirements:

(A) Consider carefully the possible consequences for human beings participating in the research;

(B) protect each participant from unwarranted physical and mental harm;

(C) ascertain that the consent of each participant is voluntary and informed; and

(D) preserve the privacy and protect the anonymity of each subject of the research within the terms of informed consent, while ensuring privacy and informed consent;

(38) making or filing a report that one knows to be false, distorted, erroneous, incomplete, or misleading;

(39) failing to notify the client promptly when termination or interruption of service to the client is anticipated;

(40) failing to seek continuation of service, or abandoning or neglecting a client under or in need of professional care, without making reasonable arrangements for that care;

(41) abandoning employment under circumstances that seriously impair the delivery of professional care to clients and without providing reasonable notice to the employer;

(42) failing to terminate the professional counseling or clinical professional counseling services when it is apparent that the relationship no longer serves the client's needs or best interests;

(43) if the professional counselor or clinical professional counselor is the owner or custodian of client records, failing to retain these records for at least five years after the date of termination of the professional relationship, unless otherwise provided by law. Timeframes for record retention for adults and minors should be consistent with state law;

(44) supervising or directing in a harmful or negligent manner anyone for whom one has supervisory or directory responsibility due to their position as a supervisee or student;

(45) failing to inform a client if professional counseling services are provided or delivered under supervision or direction;

(46) engaging in a dual relationship with a client, student, or supervisee;

(47) failing to inform the proper authorities as provided in K.S.A. 38-2223, and amendments thereto, that one knows or has reason to believe that a client has been involved in harming or has harmed a child, whether by physical, mental, or emotional abuse or neglect or by sexual abuse;

(48) failing to inform the proper authorities as required by K.S.A. 39-1402, and amendments thereto, that one knows or has reason to believe that any of the following circumstances apply to a resident, as defined by K.S.A. 39-1401(a) and amendments thereto:

(A) Has been or is being abused, neglected, or exploited;

(B) is in a condition that is the result of abuse, neglect, or exploitation; or

(C) is in need of protective services;

(49) failing to inform the proper authorities as required by K.S.A. 39-1431, and amendments thereto, that one knows or has reason to believe that any of the following circumstances apply to an adult, as defined in K.S.A. 39-1430 and amendments thereto:

(A) Is being or has been abused, neglected, or exploited;

(B) is in a condition that is the result of abuse, neglect, or exploitation; or

(C) is in need of protective services;

(50) intentionally or negligently failing to file a report or record required by state or federal law, willfully impeding or obstructing the filing of a report or record required by state or federal law, or inducing another person to take any of those actions;

(51) offering to perform or performing any service, procedure, assessment, or therapy that, by the accepted standards of professional counseling or clinical professional counseling practice in the community, would constitute experimentation on human subjects without first obtaining the full, informed, and voluntary written consent of the client or the client's legal representative or representatives;

(52) practicing professional counseling or clinical professional counseling in an incompetent manner;

(53) practicing professional counseling or clinical professional counseling after one's license expires;

(54) using without a license, or continuing to use after the expiration of a license, any title or abbreviation prescribed by law for use solely by persons currently holding that type or class of license;

~~(55) diagnosing or treating any client who a professional counselor practicing under direction or a clinical professional counselor has reason to believe is suffering from a mental illness or disease, as opposed to a mental disorder; or~~

~~(56) violating any provision of this act or any regulation adopted under it;:-~~

(56) practicing inappropriate boundaries with clients with regards to use of social media, including but not limited to, using a personal profile to connect or communicate with clients on any social media platform, or accessing a client's social media pages without previous consent;

(57) disclosing confidential information through public social media; and

(58) If engaged in distance-counseling, failing to fulfill these requirements:

(A) Informing the client -of risks and benefits of distance counseling, (B) Disclosing the possibility of technology failure and providing alternative methods of service,

(C) Detailing emergency procedures to follow when the counselor is unavailable, and

(D) Taking appropriate steps to encrypt or ensure the security of confidential client information or any activity which protects confidential client information from risk of privacy breach.

(Authorized by K.S.A. 2007 Supp. 65-5809 and 74-7507; implementing K.S.A. 2007 Supp. 65-5809; effective Dec. 19, 1997; amended July 19, 2002; amended Jan. 9, 2004; amended Aug. 8, 2008.)

Social Work Unprofessional Conduct Regulations

K.A.R. 102-2-7. Unprofessional conduct. Any of the following acts by a licensee or an applicant for a social work license shall constitute unprofessional conduct:

(a) Obtaining or attempting to obtain a license for oneself or another by means of fraud, bribery, deceit, misrepresentation, or concealment of a material fact;

(b) except when the information has been obtained in the context of a confidential relationship, failing to notify the board, within a reasonable period of time, that any of the following conditions apply to any person regulated by the board or applying for a license or registration, including oneself:

(1) Had a professional license, certificate, permit, registration, certification, or professional membership granted by any jurisdiction, professional association, or professional organization that has been limited, conditioned, qualified, restricted, suspended, revoked, refused, voluntarily surrendered, or allowed to expire in lieu of or during investigatory or disciplinary proceedings;

(2) has been subject to any other disciplinary action by any credentialing board, professional association, or professional organization;

(3) has been demoted, terminated, suspended, reassigned, or asked to resign from employment, or has resigned from employment, for some form of misfeasance, malfeasance, or nonfeasance;

(4) has been convicted of a felony; or

(5) has practiced the licensee's or registrant's profession in violation of the laws or regulations regulating the profession;

(c) knowingly allowing another individual to use one's license;

(d) impersonating another individual holding a license or registration issued by this or any other board;

(e) having been convicted of a crime resulting from or relating to the licensee's professional practice of social work;

(f) furthering the licensure or registration application of another person who is known to be unqualified with respect to character, education, or other relevant eligibility requirements;

(g) knowingly aiding or abetting anyone who is not credentialed by the board to represent that individual as a person who is credentialed by the board;

(h) failing to recognize, seek intervention, and otherwise appropriately respond when one's own personal problems, psychosocial distress, or mental health difficulties interfere with or negatively impact professional judgment, professional performance and functioning, or the ability to act in the client's best interests;

(i) failing or refusing to cooperate in a timely manner with any request from the board for a response, information that is not obtained in the context of a confidential relationship, or assistance with respect to the board's investigation of any report of an alleged violation filed against oneself or any other applicant or professional who is required to be licensed or registered by the board. Each person taking longer than 30 days to provide the requested response, information, or assistance shall have the burden of demonstrating that the person acted in a timely manner;

(j) offering to perform or performing services clearly inconsistent or incommensurate with one's training, education, and experience and with accepted professional standards for social work;

(k) treating any client, student, or supervisee in a cruel manner;

(l) discriminating against any client, student, or supervisee on the basis of ~~color, race, gender, religion, national origin, or disability~~race, ethnicity, national origin, color, sex, sexual orientation, gender identity and expression, age, marital status, political belief, religion, immigration status, and mental or physical disability;

(m) failing to advise and explain to each client the respective rights, responsibilities, and duties involved in the social work relationship;

(n) failing to provide each client with a description of what the client can expect in the way of services, consultation, reports, fees, billing, therapeutic regimen, or schedule, or failing to reasonably comply with these descriptions;

(o) failing to provide each client with a description of the possible effects of the proposed treatment when there are clear and known risks to the client;

(p) failing to inform each client or supervisee of any financial interests that might accrue to the licensee from referral to any other service or from the use of any tests, books, or apparatus;

(q) failing to inform each client that the client is entitled to the same services from a public agency if the licensee is employed by that public agency and also offers services privately;

(r) failing to inform each client, supervisee, or student of the limits of client confidentiality, the purposes for which information is obtained, and the manner in which the information may be used;

(s) revealing information, a confidence, or secret of any client, or failing to protect the confidences, secrets, or information contained in a client's records, except when at least one of these conditions is met:

(1) Disclosure is required or permitted by law;

(2) failure to disclose the information presents a clear and present danger to the health or safety

of an individual or the public; or

(3) the licensee is a party to a civil, criminal, or disciplinary investigation or action arising from the practice of social work, in which case disclosure is limited to that action;

(t) failing to obtain written, informed consent from each client, or the client's legal representative or representatives, before performing any of these actions:

(1) Electronically recording sessions with that client;

(2) permitting a third-party observation of their activities; or

(3) releasing information concerning a client to a third party, except as required or permitted by law;

(u) failing to protect the confidences of, secrets of, or information concerning other persons when providing a client with access to that client's records;

(v) failing to exercise due diligence in protecting information regarding and the confidences and secrets of the client from disclosure by other persons in one's work or practice setting;

(w) engaging in professional activities, including but not limited to, billing practices and advertising, involving dishonesty, fraud, deceit, or misrepresentation;

(x) using alcohol or illegally using any controlled substance while performing the duties or services of a licensee;

(y) making sexual advances toward, including but not limited to sexual harassment, or engaging in physical intimacies or sexual activities with one's client, supervisee, or student;

(z) making sexual advances toward, including but not limited to sexual harassment, engaging in physical intimacies or sexual activities with, or exercising undue influence over any person who, within the past 24 months, has been one's client. If such conduct occurs with a former client after 24 months, it is the responsibility of the practitioner to demonstrate that the former client was not being exploited, coerced, or manipulated intentionally or unintentionally;

(aa) exercising undue influence over any client, supervisee, or student, including promoting sales of services or goods, in a manner that will exploit the client, supervisee, or student for the financial gain, personal gratification, or advantage of oneself or a third party;

(bb) directly or indirectly offering or giving to a third party or soliciting, receiving, or agreeing to receive from a third party any fee or other consideration for the referral of the client or patient or in connection with the performance of professional services;

(cc) permitting any person to share in the fees for professional services, other than a partner, employee, an associate in a professional firm, or a consultant authorized to practice social work;

(dd) soliciting or assuming professional responsibility for clients of another agency or colleague without informing and attempting to coordinate continuity of client services with that agency or colleague;

(ee) making claims of professional superiority that one cannot substantiate;

(ff) guaranteeing that satisfaction or a cure will result from the performance of professional services;

(gg) claiming or using any secret or special method of treatment or techniques that one refuses to divulge to the board;

(hh) continuing or ordering tests, procedures, or treatments or using treatment facilities or services not warranted by the condition, best interests, or preferences of the client;

(ii) if the social worker is the owner of the records, failing to maintain for each client a record that conforms to the following minimal standards:

(1) Contains adequate identification of the client;

(2) indicates the client's initial reason for seeking the licensee's services;

(3) contains pertinent and significant information concerning the client's condition;

(4) summarizes the intervention, treatment, tests, procedures, and services that were obtained, performed, ordered, or recommended and the findings and results of each;

(5) documents the client's progress during the course of intervention or treatment provided by the licensee;

(6) is legible;

(7) contains only those terms and abbreviations that are comprehensible to similar professional practitioners;

(8) indicates the date and nature of any professional service that was provided; and

(9) describes the manner and process by which the professional relationship terminated;

(jj) taking credit for work not performed personally, whether by giving inaccurate or misleading information or by failing to disclose accurate or material information;

(kk) if engaged in research, failing to fulfill these requirements:

(1) Consider carefully the possible consequences for human beings participating in the research;

(2) protect each participant from unwarranted physical and mental harm;

(3) ascertain that the consent of each participant is voluntary and informed; and

(4) preserve the privacy and protect the anonymity of each subject of the research within the terms of informed consent;

(ll) making or filing a report that one knows to be distorted, erroneous, incomplete, or misleading;

(mm) failing to notify the client promptly when termination or interruption of service to the

client is anticipated;

(nn) failing to seek continuation of service, or abandoning or neglecting a client under or in need of professional care, without making reasonable arrangements for that care;

(oo) abandoning employment under circumstances that seriously impair the delivery of professional care to clients and without providing reasonable notice to the employer;

(pp) failing to terminate the social work services when it is apparent that the relationship no longer serves the client's needs or best interests;

(qq) if the licensee is the owner or custodian of client records, failing to retain those records for at least two years after the date of termination of the professional relationship, unless otherwise provided by law;

(rr) failing to exercise adequate supervision over anyone with whom the licensee has a supervisory or directory relationship;

(ss) failing to inform a client if social work services are provided or delivered under supervision or direction;

(tt) engaging in a dual relationship with a client, supervisee, or student;

(uu) failing to inform the proper authorities in accordance with K.S.A. 38-2223, and amendments thereto, that one knows or has reason to believe that a client has been involved in harming or has harmed a child, whether by physical, mental, or emotional abuse or neglect or by sexual abuse;

(vv) failing to inform the proper authorities in accordance with K.S.A. 39-1402, and amendments thereto, that one knows or has reason to believe that any of the following circumstances apply to a resident, as defined by K.S.A. 39-1401 and amendments thereto:

- (1) Has been or is being abused, neglected, or exploited;
- (2) is in a condition that is the result of abuse, neglect, or exploitation; or
- (3) is in need of protective services;

(ww) failing to inform the proper authorities in accordance with K.S.A. 39-1431, and amendments thereto, that one knows or has reason to believe that any of the following circumstances apply to an adult, as defined in K.S.A. 39-1430 and amendments thereto:

- (1) Is being or has been abused, neglected, or exploited;
- (2) is in a condition that is the result of abuse, neglect, or exploitation; or
- (3) is in need of protective services;

(xx) practicing social work in an incompetent manner;

(yy) practicing social work after one's license expires;

(zz) using without a license, or continuing to use after the expiration of a license, any title or abbreviation prescribed by the board for use only by persons currently holding that type or class of license;

(aaa) violating any provision of K.S.A. 65-6301 et seq., and amendments thereto, or any regulation adopted under that act;

(bbb) except as permitted by K.S.A. 65-6319 and amendments thereto, providing or offering to provide direction or supervision over individuals performing diagnoses and treatment of mental disorders;

(ccc) except as permitted by K.S.A. 65-6306 and K.S.A. 65-6319 and amendments thereto, engaging in the diagnosis and treatment of mental disorders;~~or~~

(ddd) engaging in independent private practice if not authorized by law;~~or~~

(eee) practicing inappropriate boundaries with clients with regards to use of social media, including but not limited to, using a personal profile to connect or communicate with clients on any social media platform;

(fff) disclosing confidential information through social media; or

(ggg) If engaged in distance-counseling, failing to fulfill these requirements:

(1) Informing the client of risks and benefits of distance counseling,

(2) Disclosing the possibility of technology failure and providing alternative methods of service,

(3) Detailing emergency procedures to follow when the counselor is unavailable, and

(4) Taking appropriate steps to encrypt or ensure the security of confidential client information or any activity which protects confidential client information from risk of privacy breach.

(Authorized by and implementing K.S.A. 2007 Supp. 65-6311 and K.S.A. 2007 Supp. 74-7507; effective May 1, 1982; amended, T-85-36, Dec. 19, 1984; amended May 1, 1985; amended, T-86-39, Dec. 11, 1985; amended May 1, 1986; amended May 1, 1987; amended May 1, 1988; amended Feb. 25, 1991; amended Aug. 4, 2000; amended Jan. 9, 2004; amended Dec. 19, 2008.)

102-1-15. Continuing education. (a) Each applicant for renewal of licensure shall have earned **50 continuing education hours** in the two years preceding an application for renewal. The required number of continuing education hours shall be prorated for periods of renewal that are less than the full two years, using the ratio of one-third of the continuing education hours for each six months since the date of licensure or most recent renewal. Continuing education hours for each type of continuing education activity as specified below in subsection (d) shall be prorated accordingly for those persons whose periods of renewal are less than the full two years. Each person who is licensed within six months of the current expiration period shall be exempt from the continuing education requirement for that person's first renewal period.

(b) The content of each continuing education activity shall be clearly related to the enhancement of psychology practice, values, skills, or knowledge.

(c) During each two-year renewal cycle and as part of the required continuing education hours, each licensed psychologist shall complete at least three continuing education hours of training on professional ethics and at least six continuing education hours related to diagnosis and treatment of mental disorders. These hours shall be obtained from any of the activities specified in paragraphs (d)(1), (d)(2), (d)(4), and (d)(6) of this regulation.

(d) Acceptable continuing education activities, whether taken within the state or outside the state, shall include the following:

(1) Attendance at workshops, seminars, and presentations that are sponsored, accredited, or conducted by educational institutions, professional associations, or private institutions. These activities shall be sponsored, accredited, or conducted by educational institutions, professional associations, or private institutions that are nationally or regionally accredited for training. Activities conducted by agencies, groups, or individuals that do not meet the requirements of national or regional accreditation shall be acceptable, if the content is clearly related to the enhancement of psychology skills, values, and knowledge. Actual contact hours, excluding breaks and lunch, shall be credited. A maximum of 50 continuing education hours shall be allowed;

(2) the first-time preparation and initial presentation of courses, workshops, or other formal training activities, for which a maximum of 15 continuing education hours shall be allowed;

(3) documented completion of a self-study program. A maximum of 12 continuing education hours shall be allowed;

(4) documented completion of a self-study program with a posttest that is conducted by a continuing education provider as described in paragraph (d)(1). A maximum of 40 continuing education hours shall be allowed;

(5) publication and professional presentation. Fifteen continuing education hours may be claimed for the publication or professional presentation of each scientific or professional paper or book chapter authored by the applicant. A maximum of 45 continuing education hours shall be allowed;

(6) completion of an academic course, for which a maximum of 15 continuing education hours shall be allowed for each academic semester credit hour;

(7) providing supervision as defined in K.A.R. 102-1-1, for which a maximum of 15 continuing education hours shall be allowed;

(8) receiving supervision as defined in K.A.R. 102-1-1, except in connection with any disciplinary action, for which a maximum of 15 continuing education hours shall be allowed;

(9) initial preparation for a specialty board examination, for which a maximum of 25 continuing education hours shall be allowed;

(10) participation in quality care, client or patient diagnosis review conferences, treatment utilization reviews, peer review, case consultation with another licensed psychologist, or other quality assurance committees or activities, for which a maximum of 15 continuing education hours shall be allowed;

(11) participation, including holding office, in any professional organization related to the applicant's professional activities, if the organization's activities are clearly related to the enhancement of psychology or mental health practice, values, skills, or knowledge. A maximum of 12 continuing education hours shall be allowed; and

(12) receiving personal psychotherapy that is provided by a licensed or certified mental health provider and is a part of a designated training program. A maximum of 20 continuing education hours shall be allowed.

(e) Each licensed psychologist shall be responsible for maintaining personal continuing education records. Each licensee shall submit to the board the licensee's personal records of participation in continuing education activities if requested by the board.

(f) In determining whether or not a claimed continuing education activity will be allowed, the licensed psychologist may be required by the board to demonstrate that the content was clearly related to psychology or to verify that psychologist's participation in any claimed or reported activity. If a psychologist fails to comply with this requirement, the claimed credit may be disallowed by the board.

(g) Any applicant who submits continuing education documentation that fails to meet the required 50 continuing education hours may request an extension from the board. The request shall include the applicant's reason for requesting an extension and a plan outlining the manner in which the applicant intends to complete the continuing education requirements. For good cause shown, the applicant may be granted an extension, which shall not exceed six months. (Authorized by and implementing K.S.A. 74-7507; effective May 1, 1984; amended, T-85-35, Dec. 19, 1984; amended May 1, 1985; amended May 1, 1986; amended May 1, 1987; amended July 24, 1989; amended Oct. 27, 2000; amended July 11, 2003.)

102-1-15a. Documentation of continuing education. Each of the following forms of documentation shall be accepted as proof that a licensee has completed the continuing education activity:

- (a) A signed statement from the provider of a seminar, institute, conference, workshop, or course indicating that the licensee attended the program;
- (b) a copy of an academic course syllabus and verification that the licensee presented the course or a copy of a letter from the presentation sponsor or a copy of the brochure announcing the licensee as the presenter, the agenda of the presentation, and verification that the licensee presented the seminar, institute, conference, workshop, or course;
- (c) a copy of a self-study program or the full bibliographic information about the book including page numbers and summary on how the information can apply to **their practice**. **Our regs don't say the CEUs have to apply to the LP's practice.**
For each video recording, audio recording, computerized interactive learning module, or telecast that the licensee utilized for continuing education purposes, a written statement from the licensee specifying the media format, content title, presenter or sponsor, content description, length, and activity date. A certificate of completion is required for all courses;
- (d); a copy of an article or book chapter written by the licensee and verification of publication or written presentation at a professional meeting;
- (e) An official transcript or other written proof indicating the licensee's passing grade for an academic course or a statement signed by the instructor indicating

the number of actual contact hours that the licensee attended for an audited academic course;

(f) written, signed verification from the university practicum or intern instructor or other official training director for whom the licensee supervised undergraduate or graduate students or a written. A signed verification including the dates of supervision, from the postgraduate supervisee for whom the licensee provided supervision;

(g) if receiving non-disciplinary supervision, a written, signed verification including the dates of supervision from the licensee who provided supervision;

(h) a signed letter from a professional organization or certifying entity outlining the licensee's participation in that professional organization or credentialing board;

(i) a signed statement of attendance from the provider of the institute, symposium, workshop, or seminar and a bill of services. (Authorized by K.S.A. 2023 Supp. 74-7507; implementing K.S.A. 74-5318; effective P-

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Scott Schwab

Kansas Secretary of State

Agency 102

Behavioral Sciences Regulatory Board

Article 1.—Certification of Psychologists

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102-1-12. Educational requirements. (a) Definitions.

(1) "Core faculty member" means an individual who is part of the program's teaching staff and who meets the following conditions:

(A) Is an individual whose education, training, and experience are consistent with the individual's role within the program and are consistent with the published description of the goals, philosophy, and educational purpose of the program;

(B) is an individual whose primary professional employment is at the institution in which the program is housed; and

(C) is an individual who is identified with the program and is centrally involved in program development, decision making, and student training as demonstrated by consistent inclusion of the individual's name in public and departmental documents.

(2) "In residence," when used to describe a student, means that the student is present at the physical location of the institution for the purpose of completing coursework during which the student and one or more core faculty members are in physical proximity and face-to-face contact.

(3) "Primary professional employment" means a minimum of 20 hours per week of instruction, research, any other service to the institution in the course of employment, and the related administrative work.

(b) A graduate applicant for psychology licensure shall be deemed to have received a doctoral degree based on a program of studies in content primarily psychological as set forth in K.S.A. 74-5310, and amendments thereto, or the substantial equivalent of this program in both subject matter and extent of training, if at the time the applicant graduated from the program, this doctoral degree program was accredited by the American psychological association. If the applicant began the program after March 10, 2006, the accredited program shall require that at least 24 semester credit hours in the substantive areas identified in paragraph (b)(13)(C), or the equivalent number of quarter or trimester credit hours, be completed while the applicant is in residence. If not so accredited, the doctoral degree program from which the applicant was granted the degree shall meet all of the following criteria:

(1) The doctoral program is offered by an institution of higher education that is regionally accredited by an accrediting agency substantially equivalent to those agencies that accredit the universities in Kansas.

(2) The program offers doctoral education and training in psychology, one goal of which is to prepare students for the practice of psychology.

(3) The program stands as a recognized, coherent organizational entity within a university or college.

(4) There is a clear administrative authority with primary responsibility within the program for the substantive content areas as set forth in paragraph (b)(13) and for the emphasis areas of psychology.

(5) The program is an established, organized, and comprehensive sequence of study designed by administrators who are responsible for the program to provide an integrated educational experience in psychology.

(6) There is an identifiable, full-time, professional faculty whose members hold earned graduate degrees in psychology, and the person responsible for directing the program is licensed or academically eligible at the doctoral level to engage in the practice of psychology.

(7) The ratio of students to core faculty members does not exceed 15 students to one core faculty member.

(8) The student's major advisor is a member of the psychology faculty.

(9) The program has an identifiable body of students who are matriculated in the program for a degree.

(10) The program publicly states an explicit philosophy of training by which it intends to prepare students for the practice of psychology. The program's philosophy,

educational model, and curriculum plan shall be substantially consistent with the mission and goals of the program's sponsor institution and shall be consistent with the following principles of the discipline:

(A) Psychological practice is based on the science of psychology, which, in turn, is influenced by the professional practice of psychology.

(B) Training for practice is sequential, cumulative, graded in complexity, and designed to prepare students for further organized training.

(11) The program, except for industrial and organizational psychology programs, requires an internship that meets the following requirements:

(A) Consists of at least 1,800 hours over one year of full-time training or two consecutive years of half-time training;

(B) accepts as interns only applicants enrolled in a doctoral program as defined in this subsection or in a program that meets the requirements of paragraph (b)(2) of K.A.R. 102-1-5a;

(C) has a clearly designated doctoral-level staff psychologist who is responsible for the integrity and quality of the training program. This person shall be licensed, certified, or registered in the jurisdiction in which the program exists to engage in the practice of psychology and shall be present at the training facility for a minimum of 20 hours per week;

(D) provides training and supervision in a wide range of professional activities, including diagnosis, remediation techniques, interdisciplinary relationships, and consultation, and provides experience with a population of clients or patients presenting a diverse set of problems and backgrounds;

(E) is taken after the completion of all graduate courses other than those designated for writing the dissertation, including both the required graduate coursework emphasizing the practice of psychology and the preinternship training requirements;

(F) provides the intern or resident with a minimum of four hours of general training supervision for every 40 hours of training experience. At least one hour of individual clinical supervision shall be provided for every 10 hours during which the supervisee has direct patient or client contact;

(G) provides the majority of supervision by licensed, doctoral-level psychologists;

(H) exists as a distinct and organized program that is clearly recognizable within an institution or agency, as well as in pertinent public, official documents issued by the institution or agency, and that is clearly recognizable as a training program for

psychologists;

(I) identifies interns as being in training and not as staff members;

(J) has a training staff that consists of at least two doctoral-level psychologists who serve on a full-time basis as individual clinical supervisors and who are licensed, certified, or registered as psychologists in the jurisdiction in which the program exists;

(K) is an integrated and formally organized training experience, not an after-the-fact tabulation of experience; and

(L) provides at least two hours per week in didactic activities, including case conferences, seminars, in-service training, and grand rounds.

(12) Before awarding the doctoral degree, the program requires each student to complete a minimum of three full-time academic years of graduate study, or the equivalent, and to complete an internship that meets the requirements of paragraph (b)(11). At least two of the three academic training years, or the equivalent, shall be completed at the institution from which the doctoral degree is granted, and at least two consecutive semesters, or the equivalent number of quarters or trimesters, shall be completed while the student is in residence at the same institution. The program's coursework shall also include the skill courses appropriate for the applicant's major or area of emphasis.

(13) The program has and implements a clear and coherent curriculum plan that provides the means whereby all students can acquire and demonstrate substantial understanding of and competency in the current body of knowledge in the following three substantive areas:

(A) The breadth of scientific psychology, its history of thought and development, its research methods, and its applications. Each student shall have completed a one-semester course consisting of three semester credit hours, or the equivalent number of quarter or trimester credit hours, in each of the following six areas:

(i) Biological aspects of behavior, including clinical neuropsychology and the biological foundations of psychopathology;

(ii) cognitive and affective aspects of behavior, including theories of perception, human learning and memory, cognitive development, and theories and research in human learning;

(iii) social aspects of behavior, including social psychology, advanced social psychology, and social psychology theories, research, and clinical applications;

(iv) the history and systems of psychology, including the history of psychology and

theories of personality;

(v) psychological measurement, including an introduction to mathematical methods in psychology, educational measurement methods in psychological research, and research methods in clinical psychology; and

(vi) research methodology and techniques of data analysis, including statistical methods in psychology, research design in education, multivariate analysis, and multivariate statistical methods;

(B) the scientific, methodological, and theoretical foundations of practice. Each student shall have completed a one-semester course consisting of three semester credit hours, or the equivalent number of quarter or trimester credit hours, in each of the following four areas:

(i) Individual differences in behavior, including the basis and nature of individuality, intelligence and cognition, and cross-cultural counseling;

(ii) human development, including advanced child behavior and development, behavioral analysis of child development, the psychology of the adult personality, gerontology, and counseling with adults;

(iii) dysfunctional behavior or psychopathology, including advanced psychopathology; and

(iv) professional, ethical, legal, and quality assurance principles and standards, including professional, legal, and ethical problems in clinical psychology and legal, ethical, and professional issues in counseling; and

(C) the methods of diagnosing or defining problems through psychological assessment and measurement and the strategies and techniques of therapeutic intervention or remediation. A minimum of 24 semester credit hours in this substantive area, or the equivalent number of quarter or trimester credit hours, shall be completed by the student while the student is in residence and shall be distributed between the following two areas:

(i) Nine semester credit hours in assessment, or the equivalent number of quarter or trimester credit hours. Assessment courses shall include theories and methods of assessment and diagnosis, including intelligence testing, behavioral and personality assessment in children, theory and construction of personality tests, and techniques of psychodiagnostic assessment; and

(ii) 15 semester credit hours, or the equivalent number of quarter or trimester credit hours, in techniques of therapeutic interventions and effective therapeutic intervention, consultation, and supervision, including counseling and interviewing

skills, theories of group counseling, psychological clinical services, psychotherapy, group therapeutic techniques, and psychotherapy with families.

(14) The program requires at least 90 semester credit hours, or the equivalent number of quarter or trimester credit hours, of formal graduate study in the psychology program. At least 60 of these semester credit hours, or the equivalent number of quarter or trimester credit hours, shall be distributed among the content areas specified in paragraph (b)(13).

(15) At least 60 semester credit hours of the coursework for the doctoral program, or the equivalent number of quarter or trimester hours, are clearly designated on the transcript as graduate-level courses in the program, exclusive of practicum, internship, and dissertation credits. The number of credits received through extension programs shall not exceed 10 semester credit hours or the equivalent number of quarter or trimester credit hours. The number of postdoctoral credit hours from a regionally accredited university or college taken to meet licensure requirements shall not exceed 10 semester credit hours or the equivalent number of quarter or trimester credit hours.

(16) When the program has an applied emphasis, which may include clinical psychology, counseling psychology, or school psychology, the training shall also include a minimum of at least two semesters of a coordinated practicum. The practicum in the application of skills related to the areas of emphasis shall be performed in a setting that is preapproved by the appropriate administrative authorities of the program.

(17) The program advertises in official documents, including course catalogues and announcements, the program standards and descriptions and the admission requirements of the program.

(18) The program has admission requirements that are, in part or in full, based on objective, standardized achievement tests and measures.

(19) The program includes an ongoing, objective review and evaluation of student learning and progress, and the program reports this evaluation in the official transcript.

(20) The program includes a comprehensive examination or an equivalent assessment approved by the board of the applicant's knowledge and progress within the training program, and the program requires that the applicant pass this requirement before awarding the doctoral degree.


(21) As a part of the graduation requirements, each student is required to initiate, prepare, conduct, and report original research or an equivalent project as determined by the program. This original research or equivalent project shall not be substituted for


successful completion of the comprehensive examination required under paragraph (b)(20).

(22) The institution offering the graduate program has a library and equipment and resources available that are adequate for the size of the student body and the scope of the program offered, including suitable scientific and practicum facilities. (Authorized by K.S.A. 2007 Supp. 74-7507; implementing K.S.A. 74-5310; effective May 1, 1982; amended May 1, 1984; amended, T-85-35, Dec. 19, 1984; amended May 1, 1985; amended May 1, 1986; amended May 1, 1987; amended Dec. 18, 1998; amended Oct. 27, 2000; amended March 10, 2006; amended, T-102-4-24-07, April 24, 2007; amended April 11, 2008.)

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