



DONNELLY COLLEGE

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March 14, 2025

Janelle Martin, Nursing Education Compliance Officer
Kansas State Board of Nursing
900 SW Jackson St., Suite 1051
Topeka, KS 66612

Dear Ms. Martin,

Based on the KSBN visit report and recommendations, as well as faculty, staff and student feedback, Donnelly College has officially decided not to admit new students to the ADN 2025 summer program. Prospective students will be notified today of this decision through the letter attached. Donnelly College will inform the public by posting a notification on our website, college catalog, and any other admissions communications.

Sincerely yours,

Monsignor Stuart Swetland
President Donnelly College

KSBN LMHT Task Force

KSBN Education Committee members:

Ruth Burkhart

LMHT Task Force Members:

Kathleen Kottas KottasK@bartonccc.edu

Christina Rudacille crudacil@jccc.edu

Laura Sooby Laura.sooby@wichita.edu

Laura Mallett lmallett@neosho.edu

Deshaun Linson dlinson@wsutech.edu

Taylor Ziegler tziegler@cambermh.org

Debbie Brinkley (OSH) debbi.brinkley@osh.ks.gov

Teams Meeting: March 4, 2025

Agenda

1. LMHT exam and current blueprint
2. LMHT regulations – curriculum section (Kan. Admin. Regs. § 60-6-101); draft updates to LMHT regs developed in 2024
3. To consider

. LMHT regs were developed 50 years ago for a very specific purpose related to state hospitals. There are now less state institutions, only one providing the program recently, only Camber MH with a graduate in the last 2 years.

. Is a licensed LMHT program what is needed, or would a certificate program be better? Who could help the Task Force determine this?

. Would a two-tiered LMHT program, entry level certificate and advanced LMHT license, be helpful to encourage MHT training and provide an alternative to a 2 year degree program?

Current Curriculum Regs:

(2) The curriculum shall be organized to cover both theoretical instruction and clinical instruction. The curriculum for mental health technician courses shall consist of a minimum of 300 hours of theoretical instruction and 300 hours of clinical instruction. By July 1, 1978, the curriculum shall consist of a minimum of 450 hours of theoretical instruction and 450 hours of clinical instruction. In academic institutions, one semester hour of credit shall be equal to 15 hours of theoretical instruction or 45 hours of clinical instruction.

(3) The curriculum shall also include the following two courses, which shall be of a theoretical nature. Each course shall consist of 45 hours of instruction.

(A) Human growth and development. This course shall include aspects of growth and development from the prenatal period through senescence.

(B) Behavioral science. This course shall include human needs, group processes, family dynamics, and social, economic, and cultural factors of behavior.

(4) The curriculum shall also include the following two courses, which shall include both theoretical and clinical instruction.

(A) Basic nursing concepts. This course shall include bed making, personal hygiene, administration and effect of medications, feeding, asepsis, elimination, recognition of illness, vital signs, basic nutrition, special care of patients, first aid and emergency nursing, assisting with physical examinations, and admission and discharge of patients.

(B) Psychiatric therapeutic treatment. This course shall include interpersonal relationships, psychopathology and classifications, coping mechanisms, communication skills, therapeutic modalities, and special reporting and recording techniques.

Kan. Admin. Regs. § 60-6-101

LMHT Task Force

Meeting Minutes

Members present: Janelle Martin, KSBN /Education Compliance Director; Ruth Burkhart, KSBN/ Task Force Lead Member; Patty Palmietto, Task Force member; Sara Flora/WSU; Kathleen Kottas/Barton CC; DeShaun Linson/WSU Tech; Laura Mallett/Neosho CC; Taylor Ziegler/Camber MH
Members absent: Sherry Cole, OSH (Osawatomie State Hospital)

Date: 03/06/25 @ 3:00 – 4:00 pm

Place: Teams Meeting

Topic	Discussion	Action Taken
Introductions & Agenda Review . Agenda emailed, attached to minutes	Expanded clarity regarding mission of the LMHT task force <ol style="list-style-type: none">1. LMHT exam and current blueprint2. LMHT regulations – curriculum section (Kan. Admin. Regs. § 60-6-101); draft updates to LMHT regs developed in 20243. To consider<ul style="list-style-type: none">. LMHT regs were developed 50 years ago for a very specific purpose related to state hospitals. There are now less state institutions, only one providing the program recently, only Camber MH with a graduate in the last 2 years.. Is a licensed LMHT program what is needed, or would a certificate program be better? Who could help the Task Force determine this?. Would a two-tiered LMHT program, entry level certificate and advanced LMHT license, be helpful to encourage MHT training and provide an alternative to a 2 year degree program?	Introductions . Meeting agenda reviewed, no questions

<p>History of LMHT training program in Kansas</p> <p>Janelle Martin</p>	<ul style="list-style-type: none"> . Janelle pointed out that Barton CC tried to partner with Larned State Hospital several years ago for an LMHT training program – not successful with enough applicants . It has been (3) years since OSH held an LMHT program class . Original OSH curriculum was 250 didactic hours, 250 clinical hours . Currently there are about 30 LMHT licensees in KS 	<p>Discussed after presentation</p>
<p>History of 2024 LMHT task force work</p> <p>Janelle Martin</p>	<p>Please see attached draft of KSBN LMHT regulations, developed by 2024 LMHT taskforce?</p> <ul style="list-style-type: none"> . Question considered was how to give MHT curriculum college credit for transfer without requiring a college degree . LMHT →LPN bridge LMHT courses are college credit . Options to an LMHT license with KSBN or state approved training program (certificate?) . Kathleen Kottas, Barton CC, provided additional information on BCC partnership with Larned State Hospital for LMHT training program 	<p>Janelle will sent notes from 2024 KSBN LMHT sub-committee meetings to Ruth to distribute via email with today's meeting minutes</p> <p>Janelle clarified that KDADs is in charge of certificate programs, but unknown if KDADs would manage LMHT certificate if that would be offered</p>
<p>Review of Market Needs in Kansas for LMHT</p> <p>Patty Palmietto</p>	<p>In Kansas City metro area there are 17 positions open for mental health techs (BHT, MHT, LMHT)</p> <ul style="list-style-type: none"> . Employers with open positions include Santiago Recovery Center, Truman inpatient, Children's Mercy Hospital, Swope Parkway . Taylor Ziegler – Camber KVC residential units are staffed with techs (LMHT), requires a license due to staffing pattern . Sara Flora – WSU & DeShaun Linson – provided justification for both an LMHT certificate and LMHT license to meet market needs in their areas. New state psychiatric hospital is being built in south Wichita, in proximity to WSU – LMHT is a viable staffing option for new hospital 	<p>Discussed – confirmed that there is a need for the LMHT, though extent of need unknown</p> <p>What level of tech training/certificate versus licensing do Kansas mental health facilities need?</p> <p><u>Agreed that task force needs feedback from additional mental health facilities which employee techs</u></p> <p>Question: What level of education and licensure do additional facilities across Kansas accept for hire.</p> <p><u>Assignments</u></p> <ul style="list-style-type: none"> . Laura Mallett – Parson's State Hospital . Ruth – AdventHealth SMMC & Cottonwood Springs . Patty – Research Medical Center Psychiatric and University Health (formerly Truman)

<p>LMHT Curriculum discussion</p> <p>. Current KSBN regulations require 40 Cr hours & 400 clock hours</p>	<p>. WSU & WSU Tech first to apply to offer LMHT training programs outside of state hospital system, in 2024</p> <p>. WSU Tech has curriculum tier options for two levels – certificate and LMHT. Would offer a certificate if approved by KSBN (DeShaun Linson)</p> <p>. WSU – 40 Cr hours with 34 Cr LMHT core (3 semesters)</p> <p>. BHT option- lower tier</p> <p>. LMHT – upper tier</p>	<p><u>Confirmed that WSU & WSU Tech can offer programs for both an MHT certificate and for LMHT</u></p> <p><u>Need information from additional employers of MHTs in Kansas for further discussion</u></p>
LMHT Programs in Other States	<p>. California - LMHT training similar to LPN training with MHT focus</p> <p>. Colorado – (2) LMHT training programs; allow license by endorsement which KS does not allow</p> <p>. Arkansas used to have LMHT licensing, now provide a certification program</p>	Before determining if LMHT license by endorsement should be done in KS, need further discussion regarding license or certification or both is best for KS
LMHT License – exam revision	<p>Need further discussion</p> <p>Janelle reported feedback from Carol Moreland, KSBN exec director, that no one providing LMHT education can see the licensing exam</p>	Not ready to discuss exam revision yet – will need to determine best option for KS
LMHT license renewal – (30) CNEs	Needs further discussion	Not ready to discuss license renewal yet – will need to determine best option for KS
Next Meeting/Follow-up	<p>No meeting planned before 3/25/25 KSBN Education Committee Meeting</p> <p>Ruth will send minutes and additional information before 3/25/25 KSBN Committee Meeting</p>	<p>Janelle will email 2024 LMHT Task Force Report to Ruth to send to members with meeting minutes.</p> <p>Laura Mallett and Patty Palmietto will send information gained from other employers of MHTs, along with her information from other employers, and send with meeting minutes.</p>

Respectfully submitted,

Dr. Ruth Burkhardt, DNP, MSN, MA, RN-BC, LPCC

KSBN LMHT Task Force

Follow-up with MHT Employers

Patty Palmietto - Research Psych and Truman Behavioral

So interestingly enough, the physicians do not seem to have a preference for licensed or just trained. They say that most of that resides with the inpatient directors, and they do see that they like to have the licensed personnel, but do not usually find them. Interesting to note, they were unaware that Kansas even had an LMHT program and said that they would still hire anyone with extra training in mental health/DCI or advanced psych knowledge for BHT or MHT.

No one is opposed to LMHT; however, most train their own whether they come in certified or not. The residential side seems to have the most interest as it takes a little more effort and training. One of the questions most often asked from the 7 I spoke with was "is there a big enough pool for LMHT and would there be enough people becoming certified to make a difference since most state hospitals are where they go.

I asked about a certificate add on for LPN and they said they would probably not pay them more, and if they were short staffed, the LPN (certificate or not) would be floated to the floors for regular nursing. Most were optimistic that if there were credit hours allotted to the LMHT then it would be good, but that was also just a stop gap while they finished nursing school.

That is not something I disagree with, but it did get me thinking about maybe doing an LMHT and LPN like a 1 + 1. It would at least keep a pool of LMHT workers in the mix and also boost our LPN pool down the road. It may be something that initially attracts people to LMHT just like the CNA and CMA. Just thoughts.

Laura Mallett - Parson State Hospital

I spoke with Kristine in HR at the hospital, and she stated that they have been having classes on MHDDT internally. She said they quit using LMHT's due to no classes in the area but interested in using them. Their last LMHT retired a few years back.

Ruth Burkhart - Cottonwood Springs (from former employee and current clinical faculty)

Cottonwood hires for PCA – Patient Care Assistants

Requirements: at least 21 y/o, high school diploma

She knows of no psychiatric facilities requiring the LMHT to hire into an MHT role. She believes this is based in:

- . Significant staffing shortages at psychiatric facilities – most do their own on-the-job training. They already have to do restraint education and de-escalation training, so add the MHT training to the orientation and onboarding requirements
- . Financial hardship to pay more for the LMHT, which would be needed if licensing was a generally accepted standard

. The level of education requirements for the LMHT in Kansas has created a desire to choose the LPN instead for the higher salary and more job options

Ruth Burkhardt – AdventHealth Shawnee Mission Medical Center (from long-time Psychiatric RN)

. SMMC hires two levels of mental health techs, BHA (Behavioral Health Assistant) and BCA (Behavioral Care Assistant)

. BHA – college degree in psychology, sociology, social work. Open/close groups as well as BCA duties. The BHA is paid more due to having a degree in a relevant area

. BCA – experience in psych or a psych tech degree from a community college. Assist with admissions, do rounds, sit with 1:1s

MINUTES / FEEDBACK FOR LMHT REGULATIONS

To: KSBN Education Committee members

From: LMHT Sub-committee (Education Committee request)

Date: 5/7/2024 and 5/21/2024

Attendees: Patty Palmietto, Megan Kelly – Donnelly College
Christina Rudacille – JCCC
DeShaun Linson, Tessa Brock – WSU Tech
Pam Covault – Neosho CCC
Kathy Kottas – Barton CC
Debbie Bailey, Sherie Cole (5/21), Susan Lynch (5/21) – OSH
Taylor Ziegler (5/7), Rystal Waldman (5/21) – CAMBER Mental Health
Laura Sooby – WSU (5/21 only)

NOTES: 5/7/24

CNA – 6 credit hours

CMA – 5 credit hours

EMT – 12 credit hours

LMHT – current regs define by clock hours – 450 theory and 450 clinical; current programs offer no college credit for any of the content; if clock hours translated to credit hours for college credit it would be **40** credit hours.

PN programs – min. of 15 credit hours of nursing courses per KNPA; program is a Certificate C program with KBOR which requires min. of 45 credit hours which includes support courses and nursing courses

ADN programs – min. of 30 credit hours of nursing courses per KNPA; for AAS degree it requires min. of 60 credit hours

- OSH states that currently the state pays LMHT's about \$1-2 less an hour than LPNs but right now that is because there is a "bonus differential" that will be going away
- CAMBER just completed a program cycle with 1 graduate – putting program on hold for now; OSH has not had graduates since 2021; number of LMHTs down to less than 30
- KC and Wichita have several agencies and hospitals that could be used for the clinical portion.
- LMHTs currently not used in very many settings – primarily state hospitals – what is the need?
- For schools that are HLC accredited, the program would need to be at least a Cert B program with a min. of 30 Cr hrs (30-44)
- Seemed that the idea of having academic-clinical partnerships would be a good idea (school provide the theory and work with clinical sites for do all of the clinical hours required)
- A change in the number of hours required would take a regulatory change which would most likely be a minimum of a year to implement (sometime in 2025) and then programs would

MINUTES / FEEDBACK FOR LMHT REGULATIONS

still have to be approved before admitting students. Most programs would be 6-9 mo in length.

- KDADS and WSU working on a Behavioral Health Tech certificate program??? Working on the last 2 years – need more information
- If BHT certificate developed would there be a need for LMHT program? Is a certificate program more in line with needs?
- What about LMHT exam? Has not been updated in 6 years.
- School representatives from KC area and Wichita say they have many behavioral health/mental health institutions; Wichita has a new mental health facility that is being built.
 - Wichita area agencies have expressed support for use of LMHTs if they are available
 - Most facilities indicated they hire LPNs – most have no special training prior to hire

NOTES: 5/21/2024 - all attendees were asked to come to the second meeting prepared to say what they thought should happen with the LMHT program / LMHT regulations

- Reminder given before discussion started that KSA 65-4206 states that the LMHT program must be half theory hours and half clinical hours. This means that all of the discussion about how it might work as a certificate program with college credit.
- Follow-up with KDADS about work on a BH tech program: there has been work on the BH side to have a certified mental health role that is similar to the certification KDADS provides to peer support workers. What WSU wants to do is not meant to be a clinical role or pre-nursing role. Still a lot of work to be done but the idea is the program would offer college or HS credit to start on a BH career like social work, counseling, psychology or a direct care role in a state hospital setting.
- School feedback:
 - Statute not the issue – it is the number of hours in regulation
 - Partnership seems to be key to success – school could provide theory hours and MH facilities/state hospitals could partner for clinical
 - KBOR would also have requirements and may not approve a program that does not have licensure? License is only good in KS.
 - Some schools have requirements on number of students that would have to apply to have a class. So, unless there are enough students applying for the LMHT program then it may not be helping the shortage of MH workers
 - HLC may be an issue for schools
 - Via Christi BH uses “tech” – role is an extension of nursing but they do not pass meds (more like CNA for BH)
 - Many looking at LMHT as a “pipeline” to PN but the number of required hours make it less appealing
 - Concerns are: 1) KBOR and 2) enough people

MINUTES / FEEDBACK FOR LMHT REGULATIONS

- Barton CC had a program for one year that graduated 3 students – none tested and all went on to nursing school – LMHT may not be the best route. Certificate program (rather than licensure) may be more productive and on target
- Most MH facilities using CNA and LPNs – possible that an LPN with a micro-cert in MH would be quicker and be more on target
- One person with many years of experience in BH stated they had never met an LMHT – not many people outside of the state hospitals know about LMHTs – state hospitals were the impetus for the LMHT program originally in the 1970's – not many changes since then
- OSH
 - Are basically using LPNs but the turnover is very high; also many agency nurses still working there
 - Only 3 LMHTs on units and 2 of them are in nursing school
 - CNAs used as “techs” – currently 36% are agency techs
- CAMBER – just had 2 people go through LMHT program – only one completed and tested
 - Cost of small program is high – have decided to “pause” program
- There are currently two schools that have submitted letters of intent to provide an LMHT program under the current regs.

PROs	CONs
<ul style="list-style-type: none"> ● Need MH workers 	<ul style="list-style-type: none"> ●
<ul style="list-style-type: none"> ● Current programs in place with 2 more asking for approval with current regs 	<ul style="list-style-type: none"> ● Current programs are not able to offer the classes due to staffing issues or cost
	<ul style="list-style-type: none"> ● License only good in Kansas – not transferable to other states
	<ul style="list-style-type: none"> ● Too many clock hours for the compensation currently given to LMHTs