

Maine DHHS Office of Behavioral Health

**2019 GUIDELINES
for
MENTAL HEALTH
REHABILITATION
TECHNICIAN/COMMUNITY
(MHRT/C)
Certification**

Current as of February 26, 2021



Produced by the Maine Department of Health and Human Services, Office of Behavioral Health (OBH) in collaboration with the University of Southern Maine, Edmund S. Muskie School of Public Service, Institute for Public Sector Innovation, Center for Learning.



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I. Introduction

A. What is the MHRT/C certificate?

The Mental Health Rehabilitation Technician/Community (MHRT/C) Certificate meets the MaineCare “other qualified mental health professional” requirement for providing specific services to adults. Those services include community integration, intensive case management, assertive community treatment, skills development, day support services and family psycho-education as outlined in Chapter II, Sections 17 and 65 of the *MaineCare Benefits Manual*.

B. History of the Program

The MHRT Certification was first established by the Department of Health & Human Services (DHSS) in 1992, so that individuals in DHSS-funded positions, who provided community support services to adults living with mental illness, would have the training they needed to provide quality services. The program has undergone many updates and revisions since the beginning.

The most recent initiative to update the MHRT/C certification program started in 2014. A group of stakeholders comprised of behavioral healthcare providers, academics, consumers, state and community partners, convened to review and assess the program’s relevance and effectiveness in the current behavioral health landscape. An advisory committee, along with sub-committees, were formed and tasked to redesign the program. They revised the MHRT/C knowledge competencies, improved access to certification and created a Code of Conduct. The Code of Conduct and the new knowledge competencies were approved by DHHS’ Office of Behavioral Health (OBH) in 2017.

The competencies were separated into broad subject area domains rather than courses and became effective September 1, 2019. OBH added the Code of Conduct into its contracts with agencies providing MHRT I and MHRT/C services in July 2018.

II. MHRT/C Knowledge Competency Domains

The MHRT/C certification program is a competency-based program with established educational standards for community based mental health workers. Much has changed over time in the behavioral health field including the complexity of this community-based position, as well as the qualifications of the individuals seeking to fill these roles.

The following eight domains encompass the essential knowledge competencies and skills for Maine’s adult behavioral health workforce. Each domain is comprised of a set of unique competencies that are grounded in, and guided by, the fundamental components of recovery and reflect the values of consumer choice and empowerment, integrated care, respect, advocacy, responsibility, and hope. Applicants of the MHRT/C certification will have various academic, non-academic, and work-related options to satisfy these competency requirements. Domains 1, 2 and 3 are priority domains.

The domains were developed with the recognition that recovery is non-linear and unique to each individual's life stage and development. Each of these domains addresses the importance of a holistic, strengths-based and person-centered approach toward recovery across the lifespan and guides training and academic work toward the development of the following categories of knowledge:

Domain 1: Behavioral, Psychological, and Rehabilitation Intervention Models*

Establish rapport, communicate effectively and respectfully, and work collaboratively with consumers regarding their care to support recovery, with awareness of changing needs across the lifespan

1. Describe common factors of effective helping strategies when working with consumers, e.g., therapeutic relationship, empowerment, consumer choice, and respect for the consumer.
2. Explain the concept of community inclusion and the use of natural supports to enhance recovery.
3. Relate human development theory, including the interaction of social, psychosocial development across the lifespan.
4. Demonstrate active listening skills, basic interviewing skills, and demonstrate respect for the consumer at all times.
5. Demonstrate a collaborative, person-centered, recovery-oriented, shared decision-making approach to working with consumers. Identify strengths and challenges and how to incorporate natural supports into individualized treatment plans.
6. Define the treatment complexities for co-occurring disorders and addictions within vulnerable populations.
7. Be aware of common strengths-based assessments, including instruments that identify or screen for co-occurring disorders and/or trauma history, and tools that evaluate the level of care needs.
8. Demonstrate general knowledge of the current diagnostic manual and be able to name basic diagnostic categories.
9. Give examples of evidence-based models and approaches that integrate treatment and rehabilitation.
10. Identify community resources to assist in the recovery process for individuals who have co-occurring mental health and substance use disorders.
11. Recognize the consumer's development and life stage, and where they are in relation to the Stages of Change Model, in order to develop individualized treatment plans.
12. Illustrate an understanding of crisis planning, advance directives, crisis intervention strategies, and use of a warm line.

* Priority Domain

Domain 2: Community Integration and Inclusion*

Perform a thorough psychosocial assessment to inform a collaborative, person-centered and outcome-focused plan of care and use of systemic and natural supports to facilitate an individual's progress toward their goals

1. Demonstrate an understanding of the role of the case manager within community settings and how the community mental health system in Maine supports community inclusion.
2. Describe community inclusion as a process of assisting an individual to move towards greater community inclusion and personal well-being.
3. Identify resources and options in mental health, substance abuse, behavioral health, employment services, crisis services, natural supports, law enforcement and mental health courts available to a consumer and demonstrate understanding of how to provide linkages to these services.
4. Describe how basic interviewing and assessment techniques such as Motivational Interviewing and psychosocial assessments, can support a consumer's coping skills.
5. Illustrate the documentation process and each of its components, including the following: a) a person-centered treatment plan with specific goals/measures/target dates; b) written notes that track progress and inform the dynamic treatment process; and c) a treatment plan review to support progress in goal areas that help individuals live safe, healthy and independent lives.
6. Recall the history of peer support and consumer-directed services in Maine and nationally, including the Intentional Peer Support (IPS) Model.

Domain 3: Ethics and Professional Conduct*

Demonstrate a standard of professionalism and integrity in practice, and confront and resolve ethical challenges by seeking appropriate collaboration and consultation

1. Explain ethics and how to conduct practice within the context of a professional code of ethics. Give examples of inappropriate behavior. Define appropriate contexts for dual relationships and how to set and maintain clear, professional, and culturally sensitive boundaries.
2. Describe the evolution of HIPAA and what constitutes protected health information, including communication requirements within the context of health information technology.
3. Describe what it means to be an effective contributing member of an interdisciplinary team.
4. Model appropriate professional behavior at all times, apply ethical guidelines and demonstrate the effective use of supervision.
5. Explain how to secure informed consent from a consumer.
6. Explain a provider's ethical responsibility to empower consumers.

* Priority Domain

7. Identify a number of strategies, consistent with professional practice, to empower consumers.
8. Summarize the importance of evaluating the effectiveness of personal practice.
9. Describe how individuals working in the behavioral health field practice self-care. Utilize supervision effectively to prevent compassion fatigue and vicarious traumatization.
10. Practice using a supervisory relationship to resolve ethical challenges.
11. Define confidentiality requirements and how to communicate these policies to staff, consumers, families, guardians, and others.
12. Maintain sound documentation that reflects an adherence to individualized, person-centered care.
13. Collaborate and interact effectively with community members and other professionals.
14. Relate the intersection of ethics with state and federal laws.

Domain 4: Trauma and Resiliency

Interact with consumers from a trauma-informed perspective with knowledge of the appropriate and available community resources

1. Describe the prevalence and impact of various types and contexts of trauma, e.g., domestic violence, physical and sexual abuse, sexual assault, exposure to combat, and other life-threatening events.
2. Recognize the impact of trauma on behavior, functioning, and other health-related conditions and symptoms. Please give examples.
3. Demonstrate a sensitivity to the behavioral health issues, including substance use disorders, affecting survivors of trauma and the stages of recovery they will experience.
4. Characterize the importance of working from a trauma-informed perspective and describe techniques of trauma-informed care, as well as the effects of vicarious traumatization.
5. Summarize the effects of trauma on survivors, including intergenerational trauma, inter-familial trauma, experience of trauma at various life stages, and experience of trauma specific to special populations and cultural contexts, e.g., veterans, refugees, immigrants.
6. Recall the Adverse Childhood Experiences (ACE) Study and its correlation with trauma.
7. Describe evidence-based treatment approaches for trauma-related conditions, e.g., Seeking Safety, TREM, EMDR, and DBT.
8. Identify and refer survivors of trauma to specialized support resources in the community to assist in the recovery process.

Domain 5: Policy Knowledge

Awareness of relevant regulations and how to support a consumer in effective self-advocacy within the existing health and human services system

1. Demonstrate familiarity with the AMHI Consent Decree requirements and their impact on adult mental health services in Maine.
2. Explain Maine's Rights of Recipients of Mental Health Services.
3. Demonstrate an understanding of federal and state disability laws, including the Americans with Disabilities Act, Section 504 of the Rehabilitation Act, and Maine statutes regarding accessibility for those who are deaf or hard of hearing.
4. Demonstrate an understanding of federal and state civil rights laws, including the Civil Rights Act of 1964, the Maine Human Rights Act, and communication access policies for non-English speaking consumers.
5. Demonstrate an understanding of the provider's role as a mandated reporter of abuse and neglect for both adults and children and delineate the procedure to report.
6. Assist the consumer to develop self-advocacy skills.
7. Identify advocacy organizations that address consumer rights, i.e. Disability Rights Maine.
8. Give examples of federal and state benefit and entitlement programs, needs-based social welfare and work incentive programs, including eligibility, reporting and review requirements, and ways in which consumers can access these programs.
9. Engage with the consumer and advocate on their behalf to ensure policies are appropriately followed. Refer the consumer to an appropriate advocacy organization when there are errors in policy application.

Domain 6: Mind-Body Connection

Assist consumers in accessing whole health, integrated care, which will address chronic health conditions, mental health and substance use disorders, medication needs, stress, and other factors affecting wellness

1. Describe the interdependent relationship between mental illness and physical health and give examples.
2. Describe the value and importance of integrated care.
3. Recognize the spectrum of substance use disorders, including the psychological signs and symptoms, as well as common behavioral addictions.
4. Explain the role of medication in symptom management, including the potential for psychiatric and physical side effects of any medication.
5. Explain the case manager's role in the person-centered planning process and how to identify and refer to appropriate wellness promotion programs and community, peer, and web-based healthcare resources.
6. Describe the benefits of shared care planning and ways to incorporate an individual's needs and preferences in goal-setting.
7. Relate the significant impact of smoking on individual health, particularly those with serious mental illness, and identify evidence-based cessation resources.
8. Have an understanding of the etiology, progression, and treatment of common co-morbid conditions.

9. Define various social contexts and risk factors affecting consumers with comorbid conditions, and the impact on the consumer's overall health and well-being.
10. Discuss a variety of treatment interventions and settings for common co-occurring conditions.
11. Identify strategies to assist consumers in developing personal-care skills such as managing stress, assessing triggers, and monitoring medications.
12. Give examples of community and web-based resources that support wellness and recovery
13. Describe the Behavioral Health Homes (BHH) model and other models that promote the integration of physical and behavioral health services and the potential benefits of integrated care services and supports to consumers.

Domain 7: Cultural Competency

Provide timely relevant services that are respectful of the culture of the consumer, their family and community

1. Describe how various contexts of culture, group, and family membership impact an individual's beliefs and behavior and their behavioral health care needs and interventions.
2. Describe the importance of being culturally sensitive and responsive with populations that originate from a culture different than your own.
3. Use respectful and effective communication with consumers from a variety of cultural and social backgrounds and life stages.
4. Develop culturally-sensitive treatment plans that are responsive to cultural contexts, family and group memberships, and the particular life stage of the consumer.
5. Demonstrate how to employ interpreter services for non-English speaking and hearing impaired consumers in a timely and appropriate manner.
6. Identify and refer consumer to pertinent support resources in the community that facilitate consumer access and recovery within the context of social, cultural, family, and other group memberships.
7. Demonstrate cultural humility and self-reflection, including acknowledgement of the limitations of one's own cultural perspective.

Domain 8: Vocational Support

Assist consumer to engage in goal-directed employment activity with the understanding of the relationship between meaningful work and overall well-being, and utilization of appropriate community resources

1. Acknowledge the importance of work as part of self-concept/identity, and describe its role in mental health treatment and recovery.
2. Understand that the paths to mental health recovery and employment are both varied and non-linear, give examples of successful employment outcomes for consumers of behavioral healthcare.

3. Recognize and describe common myths and misconceptions regarding individuals with psychiatric disabilities and their ability to be successful in the workplace.
4. Understand the role of the MHRT/C in supporting a consumer to pursue a vocational goal, the importance of ongoing support in maintaining successful employment, and how it is reflected in the individual's plan of care.
5. Engage the consumer in meaningful, ongoing conversations about finding work and/or the possibility of work in the future, including job seeking/retention strategies.
6. Be able to practice engagement and motivation techniques to encourage and empower consumers to make progress along the employment continuum.
7. Identify and know how to access resources for consumer advocacy related to employment, including the use of natural supports to help individuals obtain and maintain a job.
8. Identify and refer consumers to support and employment advocacy services that will reduce or eliminate perceived barriers to continued successful employment.
9. Give examples of career development resources, including career exploration and labor market information available in the community.
10. Discover the diverse services and roles of people involved in the employment support system for consumers with psychiatric disabilities, and explain how the MHRT/C collaborates with others in the employment support system without duplicating the roles of these providers.
11. Identify online and local resources to access federal and state regulations and policy relating to employment.
12. Give examples of current and evolving research regarding evidence-based practices in employment of consumers with psychiatric disabilities, including Individual Placement Support.
13. Demonstrate awareness of reasonable accommodation and disclosure of disability in the context of mental health and employment.
14. Identify federal and state disability benefits, the availability of work incentives, and how to consult with Community Work Incentives Coordinators.
15. Describe the role of the Department of Labor, Division of Vocational Rehabilitation as partners, how to refer, and collaborate around work goals.

III. How to Become Certified

There are several ways an individual can earn the MHRT/C certificate. The more relevant education and/or experience an applicant has, the shorter their route to full certification. In order to qualify for a full or provisional MHRT/C under the 2019 Guidelines an applicant must complete one of the following requirements:

1. Hold a degree or certificate from an approved academic program that qualifies for Full MHRT/C certification. (For a list of approved programs, see Appendix A.)

Ways 2 through 4 below qualify for Provisional MHRT/C certification.

2. Hold a four-year related degree or higher and
 - a) Complete *Maine's Mental Health System 101* online module
(For a list of related degrees, please see Appendix B.)
3. Hold a two-year related degree, **or** have 30 related academic credits and
 - a. Complete *Maine's Mental Health System 101* online module
 - b. Satisfy at least 1 priority competency domain, plus 1 other domain
4. Hold an unrelated degree **or** high school diploma **or** its equivalent and
 - a. Have a minimum of one-year full-time direct service work in the behavioral health field
 - b. Complete *Maine's Mental Health System 101* online module
 - c. Satisfy the 3 priority competency domains, plus 1 other domain

A Glossary of Terms can be found in Appendix D.

Information on the online Module, *Maine's Mental Health System 101: An Introduction to Our Services, Values and Roles* can be found in Section 5.

Please see Section X on How to Apply. The Application can be found in Appendix D.

NOTE: Recent Graduates

Individuals who graduated prior to September 1, 2019 from a program that met Full MHRT/C certification under the previous 2008 Guidelines who have not yet applied for MHRT/C certification have until December 31, 2020 to apply and receive Full MHRT/C certification. Applications received after this date must meet the current 2019 MHRT/C requirements.

IV. Options to Satisfy the Knowledge Competencies Requirements

1. Academic Coursework

Several colleges and universities across Maine have realigned their courses, certificates and degree programs to meet the MHRT/C requirements. For a list of approved courses, please see Appendix A.

2. Prior Learning Assessment

Most colleges and universities offer Prior Learning Assessment credit, with their own process to review your prior learning and life experiences in order to award you college credit. Please see the CFL website (See Section XI for the link) for more information.

3. Non-Academic Training

A domain requirement can be satisfied by completing non-academic training. The number of hours in the Domain subject area needed depends on your level of relevant education as follows:

- Master, Bachelor, Associate degree, or 30 college credits in a related field: 24 hours of training
- All others: 30 hours of training

For a list of qualifying related fields, please see Appendix B.

The training must cover the knowledge competencies in the Domain. Please see Section II for a detailed list of the knowledge competencies under each Domain.

The Department is presently developing standard non-academic curriculum for the eight domains and will be made available upon completion.

4. Credit for Work Experience

An individual can use relevant adult mental health work experience to receive credit for a domain. This option can be used for up to four Domains. Priority Domains 1 & 3 cannot be met through Credit for Work Experience. Credit for Work Experience can be used for Domain 2 only by applicants who hold a related Bachelor or Master Degree. The length of consecutive work experience needed per Domain is as follows:

- Applicant has a related degree or has 30 credits in a related field: 6 months of related work experience
- All others: 1 year of related work experience

(For a list of related degrees, please see Appendix B.)

The work experience must be documented by the individual's clinical supervisor who provided direct supervision to the individual for the time period to be used for credit. The clinical supervisor completes the Credit for Work Experience form (found in Appendix F) for the Domain to be credited. The clinical supervisor must also provide a separate document with examples of how the applicant's work experience has met the knowledge competencies for that Domain. Once completed, the form and document should be given to the applicant to submit as part of their application for certification. If the applicant changed clinical supervisors during the time period to be used, the form and documentation must be signed by **both** clinical supervisors.

Accepted clinical supervisor credentials are:

- CCS
- LCPC
- LCPC-CC
- LCSW
- LMFT
- LMSW-CC
- LMSW
- MD/DO Psychiatrist
- Psy.D/Ph.D
- Psychologist

In the rare case where an individual does not have a clinical supervisor, the administrative supervisor may complete the Credit for Work Experience Form and separate document with examples. In these cases, the form must also be signed by the employer's HR office documenting that the individual does not have a clinical supervisor.

V. **Maine's Mental Health System 101 course**

Maine's Mental Health System 101: An Introduction to Our History, Services, Values, and Roles is a free, hour-long, web-based course to learn about the role of the MHRT/C. This training is designed for individuals who are interested in a case management position working with the adult mental health population in Maine. It will also be useful for those who may be relocating from another state and have not covered these foundational topics in their academic programs or training.

MHRT/C applicants who have **not** completed an approved program that leads to full MHRT/C certification **are required** to complete this one-hour training as part of their application for certification.

This introductory module includes:

- A history of Maine's mental health system
- Information on Maine's mental health services, resources, and roles
- An explanation about the importance of a trauma-informed practice
- Ethical issues and considerations in case management work
- The practice of consumer centered planning and choice

Those who do not take this training to qualify for MHRT/C certification may use this training one-time for 1 hour of continuing education credit.

To take this training go to <http://mhrt.trainingserver5.org/>. You will need to register and create a password.

VI. **Two Certification Levels**

1. **Provisional Certification**

There is one Provisional MHRT/C Certification under the 2019 Guidelines. Those who have not taken an approved academic program that meets Full MHRT/C certification (See Appendix A) may qualify for Provisional MHRT/C certification. All applicants for Provisional MHRT/C certification must complete the online course *Maine's Mental Health System 101: An Introduction to Our History, Services, Values, and Roles* prior to applying. For more information on this course, please see Section V.

The requirements to obtain a Provisional certificate are dependent on your educational and/or work experience backgrounds. Please see Section III to determine your pathway or use the interactive process on the Center for Learning Website. The website address can be found in Section XI.

The Provisional certificate is valid for two years from the effective date of issue. The Provisional certificate can be issued one time only. The Provisional certificate holder must complete the remaining knowledge competency domains to obtain Full MHRT/C certification within this two year time period. For ways to meet a domain, please see Section IV.

If the Provisional certificate expires, the individual may not reapply for a second Provisional certificate. At that point, the individual must complete the remaining knowledge competency domains and before applying for Full MHRT/C certification.

2. Full Certification

Once all the knowledge competency domains have been met or the individual has completed an approved academic program leading to Full MHRT/C certification, they may apply for a Full MHRT/C certificate. The Full MHRT/C certificate is valid for two years from the effective date of issue. In order to keep a Full MHRT/C certificate valid, the certificate holder must complete 18 hours of continuing education, including four hours of Ethics. Please see Section VII for more details and the consequences for failing to complete the required continuing education.

The effective date of the Provisional or Full MHRT/C is the date CFL receives all necessary documentation.

VII. Certificate Renewal

1. Lapsed certificate

During 2020

Anyone with a Full MHRT/C (or II, III or IV) certificate **without an expiration date**, who contacts CFL between 1/1/20 and 12/31/20 to update their information, will be issued a new certificate effective the date CFL receives their updated contact information. The expiration date will be one year later to the end of the month. The certificate will not be backdated under any circumstance. *Between January 1, 2020 and the date the lapsed certificate holder updates their information, the MHRT/C certificate is invalid and their agency CANNOT be reimbursed for MHRT/C services the individual has performed.* Once issued, the individual must complete the normal continuing education requirements within this one year period in order to renew their certificate.

Beginning January 1, 2021:

For those who earned their certificate under the 2008 Guidelines (certificate effective date is on or after 1/1/09) and fail to update their contact information by 12/31/20,

must demonstrate that they meet the Domain 2 knowledge competencies and complete *Maine's Mental Health System 101* online training in order to be reinstated.

For those who earned their certificate prior to the 2008 Guidelines (MHRT II, MHRT III, MHRT IV or an MHRT/C with an effective date prior to 1/1/09) and fail to update their contact information by 12/31/20, that individual must reapply anew and meet the current MHRT/C requirements.

2. Continuing Education

Continuing education (CE) is required to renew a Full MHRT/C certificate every two years. The CE must address one or more of the MHRT/C knowledge competencies. **Eighteen hours of continuing education is required, with a minimum of four hours in Domain 3: Ethics and Professional Conduct.** Please see Section II for a detailed list of the knowledge competencies.

A CE hour is 60 minutes of actual instructional time.

The CE must take place during the time period listed between the Effective and Expiration dates on the Full MHRT/C certificate. Training completed prior to this time period does not apply.

This educational training can be met through an academic course, a non-academic training, workshop, conference; it can be face-to-face or online*, or an agency-sponsored in-service learning session.

*—Maximum 12 hours online

What qualifies as Continuing Education?

- ✓ A face-to-face workshop, class, conference, or seminar presented by a qualified trainer with experience and knowledge of the particular MHRT/C competencies being presented.
- ✓ An in-service training (developed and delivered internally) with an interactive component, presented and documented by a trainer of record (college degree, certification and/or license preferred).*
- ✓ An online course or webinar related to the MHRT/C competencies with a detailed certificate of completion. A maximum of 12 hours (of the 18) may be taken online.
- ✓ A college course addressing a competency domain (1 academic credit = 10 CE hours). Applicant must include a copy of the official transcript.
- ✓ A pre-approved MHRT/C non-academic course (a course may be used for CE one time only).
- ✓ Independent study, pre-recorded program, audio or video. A maximum of 3 hours (of the 18) may be completed this way. This option is not applicable to the Ethics requirement. Please submit: Document title, length, and hyperlinks when available.

- ✓ Preparation and presentation of a course, workshop or in-service that addresses the MHRT/C competencies, for the first time it is presented only.*

*—The Office of Behavioral Health (OBH) will request documentation for review on a periodic basis to ensure ongoing quality training. Therefore, it is strongly suggested that agencies maintain documentation for all in-service programs. The documentation should include a program description, trainer qualifications, and a sample certificate of completion with the number of training hours.

Ineligible Training Topics for CE Credit:

The topics below, while useful, do not address the knowledge competency domains identified for the MHRT/C certification. Instruction on the use of treatment modalities in opposition to a recovery-based philosophy may not be used to fulfill the 18-hour requirement (e.g., use of restraints, involuntary commitment, forced medication, etc.). Similarly, training used to qualify for the MHRT I may not be used.

- Agency-specific training (i.e. sexual harassment in the workplace), Staff Meetings or Retreats, or Routine Coaching, Training, or Supervision
- CPR/first aid, fire safety, disaster training
- CRMA
- Driver's Education (including for transport vehicles)
- Hazardous/Materials handling (MSDS)
- Infection/Bloodborne Pathogens
- MHSS (Mental Health Support Specialist)
- Training not in the scope of the MHRT/C practice
- Training on computer software

How to submit continuing education training for recertification:

No sooner than 90 days prior to the expiration date on their MHRT/C certificate, the certificate holder will complete and submit a Renewal Application (See Appendix G) with documentation of the CE. Documentation should include a copy of the certificate of completion with the program title, trainer's name, date of training, and number of hours. For online courses you may need to request a certificate of completion. CFL will not maintain copies of CE documentation.

Please see the Center for Learning Website (link is in Section XI) for helpful hints and CE resources.

3. Expired certificate

A current certificate with an expiration date is required to provide MHRT/C-related services. If a certificate holder lets their certificate expire, they can no longer perform MHRT/C-related services. Once their certificate expires, their agency cannot be reimbursed for MHRT/C-related services provided by that certificate holder.

In these cases, once the individual submits documentation of 18 hours of continuing education completed in the two years prior to renewal application date, they will receive a new certificate effective the date the paperwork is received. It will be valid for two years from this new date. ***There will be no backdating of these certificates.***

Example: The applicant's certificate expired on 1/31/20. They submit their CE documentation late on 4/1/20. Any training completed prior to 4/1/18 will not be accepted as it is not within the two year period prior to submitting the documentation. Once approved, the new certificate is effective for the period 4/1/20 to 3/31/22.

VIII. Extensions

In extenuating circumstances, an applicant may apply to the CFL for an extension to the Provisional MHRT/C Certification. Extensions will be considered on a case-by-case basis. The extension will be granted only if the applicant has experienced a hardship or extraordinary circumstance that prevented the completion of requirements. Examples of extraordinary circumstances or hardships include: a death or serious illness in the family, active military duty deployment, or a personal circumstance that necessitated a leave of absence from employment. The applicant must submit evidence of good faith efforts to complete the outstanding MHRT/C knowledge competency domain requirements such as transcripts, workshop certificates, proof of course enrollment for the upcoming semester, and/or Credit for Work Experience form(s) for some of the uncompleted knowledge competency domains. They must also provide a plan on how and when they will meet the remaining knowledge competency domains.

Individuals requesting extensions must submit their request in writing at least one month prior to the expiration date on their Provisional MHRT/C certificate and must provide the information requested above. Individuals can only submit a request for one extension. Requests submitted after a Provisional MHRT/C certificate has expired will not be considered.

Individuals holding a Full MHRT/C certificate are ***ineligible*** for an extension. Individuals holding a Full MHRT/C must meet the CE requirements to renew their certificate. Extensions will not be considered for failure to meet these requirements. Please see Section VII-2 for the consequences for failing to complete the required CE in the two year period.

IX. Appeal Process

In the event that an applicant has applied to CFL for MHRT/C Certification and is not satisfied with the results of the assessment of their credentials, the applicant may appeal in writing to the Manager of CFL for a review of the initial decision. The CFL Manager will review the decision and respond to the applicant in writing within 30 days.

If the applicant is not satisfied with the decision of the Manager of CFL, they may appeal to the DHHS-OBH Employment and Workforce Development Manager. The OBH Employment and Workforce Development Manager will consult with a panel consisting of representatives of the OBH team and will respond in writing within 30 days. This decision will be final.

X. How to Apply

Visit www.cfl-muskie.org to determine the documentation you need to upload with your online application. Or, submit the application form found in Appendix D with supporting documentation to the CFL by email or mail. Please see the application form for the required documentation which depends on your educational and work experience background. Submit your complete paperwork (application and supporting documentation) ***only once*** by ***one*** method. Whenever an individual submits paperwork towards MHRT/C certification to CFL, they must also include an application form even if the applicant's contact information remains unchanged since their last submission.

Applications for MHRT/C Certifications are reviewed by CFL in the order they are received. Applicants will receive a written response from CFL within three weeks after the complete application is received. Please note that material sent to CFL becomes the property of CFL and may not be returned to the applicant. Do not submit original documents if you want to keep them. Submit legible copies instead.

Supporting Documentation

Academic Courses: In order to earn credit for academic courses or completed degree, the applicant must submit an original or legible copy of an original ***official*** transcript from the college or university where the course or degree was completed. Official transcripts typically bear the seal and/or Registrar's signature. Only courses with a passing grade will be considered. Course descriptions may be requested by CFL in some cases. Please note that the following items are *not* considered acceptable forms of documentation for academic MHRT/C credit: Grade printouts or course registrations, unofficial transcripts, and letters from professors.

Internships: Individuals who have earned at least three academic credits for human-services-related internships or practicums may be eligible for MHRT/C Domain credit. Internships and practicums must be directly related to the MHRT/C Domain that the applicant wants approved. In addition to the official transcript, the applicant must submit written documentation from the academic or field advisor describing the academic experience and how it relates to the knowledge competencies in the Domain to be credited.

Non-Academic Training: Applicants completing non-academic training must submit legible copies of their training certificates showing the name of the training, the trainer, date completed and number of hours completed. If the applicant did not complete a non-

academic training that used DHHS' standard curriculum for that Domain, they may be required to submit a copy of the training description in order for CFL to determine how the training relates to the Domain to be credited.

Credit for Work Experience: Applicants seeking to use Credit for Work Experience (see Section I-V3), should submit the necessary Credit for Work Experience form with documentation from their clinical supervisor. If they do not have a clinical supervisor, it may be completed by their administrative supervisor. In these cases, it must also be signed by their HR office attesting that the individual does not have a clinical supervisor.

Change in Applicant's Name: If the applicant's name has changed and some documents have their old name, please include documentation of the applicant's name change. Accepted documentation is a legible copy of one of the following: Marriage License, Divorce Settlement or Court Legal Name Change Petition.

Certificates will be issued as a PDF document sent to the email address listed on the application form. If the applicant does not have an email address, a paper copy will be mailed to the mailing address on the application.

The effective date of the Provisional or Full MHRT/C is the date CFL receives all necessary documentation.

Please allow up to three weeks for an application to be reviewed and a response sent.

XI. CFL Contact Information

Mailing Address:	USM Muskie School The Center for Learning Re: MHRT/Community Certification 12 East Chestnut St. Augusta, ME 04330
For <i>Guideline</i> Clarification:	207-626-5280 or 207-626-5086 or email <i>below</i>
For Status Information on Application:	207-626-5280 or email <i>below</i>
CFL Fax Number:	207-626-5022
CFL TTY (Deaf Teletype Phone):	207-626-5282
CFL E-mail Address For All Questions:	cfl-muskie@maine.edu <i>This email forwards to <u>all</u> CFL staff.</i>
Appeals: <i>Manager of CFL</i>	Muskie School of Public Service Att: Manager, Center for Learning Re: MHRT/Community Certification 12 East Chestnut St. Augusta, ME 04330
<i>DHHS-Office of Behavioral Health's Employment and Workforce Development Manager</i>	DHHS Office of Behavioral Health Attn: Employment and Workforce Development Manager 41 Anthony Avenue SHS 11 Augusta, ME 04333-0011
CFL Website	http://www.cfl-muskie.org

XII. FAQ's

New Certification Requirements

Q: Existing MHRT/C holders must contact CFL before a new certificate will be issued, correct? Meaning certificates are not automatically issued?

A: That is correct, certificates are not automatically reissued. An individual must update their contact information with the CFL prior to the end of 2019 in order for a certificate to be reissued without a lapse in their certification. In the past, certificate holders were under no obligation to keep their contact information current. As such, CFL has no way to send out a new certificate until the individual updates their contact information. Certificate holders should send their updated personal (home) contact information to: updatemhrtccontactinfo@cfl-muskie.org. Please remember that as of 1/1/20, only a current Provisional or Full MHRT/C with an expiration date is valid for these services.

Q: What if an individual with an existing MHRT/C certificate without an expiration date fails to update their contact information prior to 1/1/20?

A: The certificate holder no longer holds a valid certificate. Only a current Provisional or Full MHRT/C with an expiration date will be valid for these services as of January 1, 2020. Please see Section VII-3 Lapsed certificate for what you must complete to get your certificate reinstated. The older your original lapsed certificate, the more work you will need to do to get your certificate reinstated.

Q. I have a current Provisional MHRT/C Level B certificate. Do I continue under the 2009 requirements, or may I move over to the new requirements?

A. We recommend that Provisional Level B certificate holders continue on your current path under the 2009 requirements. Please note that the 2009 non-academic courses are no longer available. If you want to use Credit for Work experience (formerly waiver), please contact our office for the appropriate form for each course.

Q: I graduated from a program approved for Full MHRT/C under the 2008 Guidelines, but I failed to apply prior to these new guidelines going into effect. May I still apply?

A: Individuals who graduated prior to 9/1/19 in a program that met Full MHRT/C under the 2008 Guidelines have until 12/31/20 to apply under the previous guidelines. As of 1/1/21, all new applicants must meet the current 2019 requirements.

Q. I have an MHRT/CSP. Am I affected by the changes in the MHRT/C requirements?

A. No, these changes only affect the MHRT/C

Q: If a domain is met through a number of different courses at an academic institution, does that mean that in order for someone to meet a domain that they may need multiple courses?

A: In cases where an institution spreads the knowledge competencies for a single domain over multiple courses, yes. See Appendix A for approved programs and courses.

Continuing Education Requirements

Q. I completed 18 hours of continuing education in the past. May I use that to meet the new recertification requirements?

A. No, continuing education must take place during the two-year period on your Full MHRT/C certificate for it to be accepted.

Q. When can I start working on continuing education?

A. As soon as you have a Full MHRT/C certificate with an expiration date.

Q. May I use a college course towards the continuing education requirement?

A. Yes, as long as the course is relevant to the new knowledge competencies and is completed during the two-year period on your certificate. 1 college course credit is equivalent to 10 hours of continuing education training. Please remember, you still need to meet four (4) hours of ethics as part of the 18 hours of continuing education.

Q. I'm in the middle of completing an MSW (or other relevant) degree. If I complete it during my recertification period, may I use that in substitution for the continuing education requirement?

A. We will accept one or more of the courses you complete in that time period towards your relevant degree (See Appendix B for a list of relevant degrees) for continuing education as long as the course is relevant to the new knowledge competencies. Please remember, you still need to meet four (4) hours of ethics as part of the 18 hours of continuing education.

Q. Do we need prior approval for a training to ensure that it falls within one of the domains and will count toward the continuing education requirement?

A. No, but if you have any question about a training's applicability, please feel free to contact us.

Q. I have a license that requires continuing education. May I count that training towards the MHRT/C?

A. Yes, you may count the continuing education towards both your license and the MHRT/C, aka "double-dip," provided the training is related to one or more of the MHRT/C knowledge competencies.

Q. I failed to complete the required continuing education in the two year period on my certificate. Now what do I do?

A. Please see Section VII-2 Expired certificate for the consequences of failing to complete the required continuing education and what to do to get your certificate reinstated.

For Additional FAQs please see the Center for Learning Website. The link is in Section XI.

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Appendix A: Approved Academic Programs and Courses

Appendices

The Center for Learning reviews programs and courses on a continuous basis. As programs and courses are approved, they will be added to this Appendix.

This Appendix was last added to on: **December 10, 2020**

Section 1: Approved Academic Programs for Full MHRT/C certification

Institution	Program
Central Maine Community College	AAS/Human Services
Eastern Maine Community College	AAS/Human Services
Husson University	BS/Psychology – MHRT Track
Kennebec Valley Community College	MHRT/C certificate program
Southern Maine Community College	AAS/Behavioral Health & Human Services (Fall 2020)
University of Maine	BASW – MHRT Track 7 Course Counseling Minor through UM-Machias
University of Maine at Augusta	BS/Mental Health & Human Services – MHRT Track Stand-alone MHRT/C certificate program
University of Maine at Farmington	BS/Psychology – MHRT Track BS/Rehabilitation Services – MHRT Track
University of Maine at Fort Kent	BS/Behavioral Sciences AS/Human Services – Mental Health concentration online Behavioral Health MHRT/C concentration academic option certificate online Behavioral Health MHRT/C concentration non-credit option certificate online
University of Maine at Machias	7 Course Counseling Minor Stand-alone MHRT certification program
University of Maine at Presque Isle	Bachelor of Social Work Certificate Option #1: Social Work-blended model for non-Social Work majors) Certificate Option #2: Psychology-based model (for non-Social Work majors)
University of New England	Mental Health Rehabilitation (MHR) Minor Bachelor of Social Work Master of Social Work
University of Southern Maine	MS/Rehabilitation Counseling – MHRT Track Bachelor of Arts Social Work Master of Social Work

Appendix A: Approved Academic Programs and Courses

University of Southern Maine, Lewiston-Auburn College	BA/Social & Behavioral Sciences – MHRT Track
Washington County Community College	AAS/Human Services – MHRT Track
York County Community College	AAS/Behavioral Health Studies Community Mental Health Certificate (Stand-alone certificate program)

Section 2: Approved Courses

You must take the course or course combination listed at the specific institution for it to meet the domain. Courses with an asterisk (*) are offered online.

Domain 1: Behavioral, Psychological, and Rehabilitation Intervention Models

Institution	Course ID	Course Name
Husson	PY 335	Behavioral, Psychological & Rehabilitation Intervention Models
KVCC	MHT 204	Behavioral, Psychological, and Rehabilitation Intervention Models*
UMA	HUS 218, HUS 232, & HUS 335	Three course combo-must complete all three: Community Mental Health, Crisis Intervention AND Addiction: Diversity and Rehabilitation
UMFK	PSY 332 & PSY 270	Two course combo-must complete both: Substance Abuse Counseling AND Case Management
UNE	PSY 236 & PSY 250	Two course combo-must complete both: Mental Health & Society AND Lifespan Development
UNE	PSY 250, PSY 375, & PSY 410	Three course combo-must complete all three: Lifespan Development, Trauma & Health, AND Theories of Counseling
YCCC	HUS 101, PSY 244, & Either PSY 230 or PSY 234	Three course combo-must complete the first two and your choice of <u>one</u> of the last two: Introduction to Human Services, Psychosocial Rehabilitation AND EITHER Abnormal Psychology OR Trauma & Recovery

Appendix A: Approved Academic Programs and Courses

Domain 2: Community Integration and Inclusion

Institution	Course ID	Course Name
CMCC	HUS 155 & PSY 151	Two course combo-must complete both: Case Management* AND Interviewing and Counseling*
EMCC	HUS 101, HUS 110, & HUS 240	Three course combo-must complete all three: Community Mental Health, Interviewing & Counseling, AND Case Management
Husson	MH 200	Community Integration and Inclusion
KVCC	MHT 225	Community Integration and Inclusion*
SMCC	BHHS 110 & BHHS 270	Two course combo-must complete both: Psychosocial Rehabilitation, AND Case Management
UMA	HUS 212	Case Management
UMA	HUS 218	Community Mental Health
UMF	PSY 235, PSY 305/377, & PSY 455	Three course combo-must complete all three: Introduction to Counseling, Ethics and Professional Responsibilities, AND Crisis Intervention and Stabilization
UMF	REH 310 & Either REH 110 or REH 395	Two course combo-must complete first course and your choice of either of the other two: Casework, AND EITHER Introduction to Disability Studies OR Practicum in Rehabilitation and Human Services
UMFK	PSY 221 & PSY 270	Two course combo-must complete both: Psychosocial Rehabilitation AND Case Management
UMPI	PSY 374 & PSY 380	Two course combo-must complete both: Vocational Aspects of Disabilities AND Counseling
UNE	PSY 236	Mental Health and Society
USM-LAC	SBS 346 & SBS 348	Two course combo-must complete both: Introduction to Social Services Responding to Mental Health Crisis in the Community
WCCC	HUS 212	Case Management
YCCC	HUS 101	Introduction to Human Services

Domain 3: Ethics and Professional Conduct

Institution	Course ID	Course Name
CMCC	HUS 112 & HUS 155	Two course combo-must complete both: Introduction to Community Mental Health* AND Case Management*
		Two course combo-must complete both:

Appendix A: Approved Academic Programs and Courses

EMCC	HUS 201 & HUS 240	Community Mental Health AND Case Management
Husson	PY 113	Ethics and Professional Conduct
KVCC	MHT 230	Ethics and Professional Conduct*
SMCC	BHSS 270	Case Management
UMaine	MHR 300	Case Management
UMA	HUS 218 & HUS 232	Two course combo-must complete both: Community Mental Health AND Crisis Intervention
UMF	PSY 305/377	Ethics and Professional Responsibilities
UMF	REH 310 & REH 395	Two course combo-must complete both: Casework AND Practicum in Rehabilitation and Human Services
UMFK	SOC 110	Intro. to Human Services & Community Mental Health
UMM	PSY 328	Case Management
UMPI	SWK 202	Ethics in the Helping Professions
UMPI	PSY 374 & PSY 380	Two course combo-must complete both: Vocational Aspects of Disabilities AND Counseling
UNE	PSY 236	Mental Health and Society
UNE	PSY 410	Theories of Counseling
WCCC	HUS 101 & HUS 212	Two course combo-must complete both: Introduction to Human Services AND Case Management
YCCC	HUS 101 & either PSY 232 or PSY 244	Two course combo-take first and your choice of <u>one</u> of the other two: Introduction to Human Services AND EITHER Introduction to Counseling OR Psychosocial Rehabilitation

Domain 4: Trauma and Resiliency

Institution	Course ID	Course Name
CMCC	PSY 212	Abuse, Trauma, and Recovery*
EMCC	HUS 210	Sexual Abuse, Trauma, and Recovery
Husson	PY 447	Trauma and Resiliency
KVCC	MHT 205	Trauma and Resiliency*
SMCC	BHHS 105	Crisis Intervention
SMCC	BHHS 264	Trauma & Recovery
UMaine	CHF 452	Violence in the Family
UMaine	MHR 305	Trauma, Crisis, & Recovery

Appendix A: Approved Academic Programs and Courses

UMA	HUS 232 & Choice of 1: HUS 218, HUS 230, HUS 233, or HUS 309	Two course combo-must complete first course and your choice of one other: Crisis Intervention AND choice of: Community Mental Health, Interviewing Skills for Human Services, Trauma: Recognition and Intervention, OR Counseling in Human Services
UMA	HUS 233 & Choice of 1: HUS 134, HUS 230, HUS 232, or HUS 335	Two course combo-must complete first course and your choice of one other: Trauma: Recognition & Intervention AND choice of: Cultural Competency for Helping Profession, Interviewing Skills for Human Services, Crisis Intervention OR Addiction: Diversity and Rehabilitation
UMF	PSY 209, & PSY 455	Two course combo-must complete both: Abnormal Psychology, AND Crisis Intervention and Stabilization
UMF	REH 420	Trauma and Resiliency
UMFK	PSY 232	Trauma and Resiliency
UMM	PSY 336	Trauma, Crisis, & Recovery
UMPI	SWK 381	Crisis Intervention
UMPI	PSY 235, PSY 382, & PSY 380	Three course combo-must complete ALL three: Abnormal Psychology, Substance Abuse Counseling, AND Counseling
UNE	PSY 375	Trauma and Health
UNE	PSY 236 & Either: PSY 205 OR PSY 410	Two course combo-must complete first and choice of one of the other two: Mental Health and Society AND EITHER Abnormal Psychology OR Theories of Counseling
USM-LAC	SBS 411 & either SBS 346 OR SBS 348	Two course combo-take first and your choice of <u>one</u> of the other two: Counseling and Psychotherapy AND EITHER Introduction to Social Services OR Responding to Mental Health Crisis in the Community
WCCC	HUS 235	Trauma & Recovery
YCCC	PSY 234 & PSY 244	Two course combo-must complete both: Trauma & Recovery AND Psychosocial Rehabilitation

Domain 5: Policy Knowledge

Institution	Course ID	Course Name
CMCC	PSY 202	Developmental Disabilities & Psychosocial Rehabilitation*
Husson	MH 200	Policy Knowledge
KVCC	MHT 201	Policy Knowledge*
UMaine	MHR 200	Behavioral & Community Mental Health Services

Appendix A: Approved Academic Programs and Courses

UMA	HUS 218	Community Mental Health
UMF	PSY 235, PSY 305/377, & PSY 455	Three course combo-must complete all three: Introduction to Counseling & Personality, Ethics and Professional Responsibilities, AND Crisis Intervention and Stabilization
UMM	PSY 211	Behavioral & Community Mental Health Services
UMPI	SWK 300	Social Welfare and Policy Issues
UMPI	PSY 374	Vocational Aspects of Disabilities
UNE	PSY 236 & Choice of 1: PSY 205, PSY 410, OR SOC 240	Two course combo-must complete first and choice of one other: Mental Health and Society and one of the following: Abnormal Psychology, Theories of Counseling, OR Race, Class and Gender
USM-LAC	SBS 315 & SBS 346	Two course combo-must complete both: Social Psychology of Disability AND Introduction to Social Services
WCCC	HUS 212 & HUS 218	Two course combo-must complete both: Case Management AND Community Mental Health
YCCC	HUS 101, PSY 244 & Choice of 1: PSY 210, PSY 232, or SOC 210	Three course combo-Must complete first two and your choice of one of the remaining three: Introduction to Human Services, Psychosocial Rehabilitation AND <u>one</u> of the following three: Psychology Across the Lifespan Introduction to Counseling Social Problems

Domain 6: Mind-Body Connection

Institution	Course ID	Course Name
Husson	MH 202	Mind-Body Connection
KVCC	MHT 105	Mind-Body Connection*
UMaine	SWK 361 & SWK 380	Two course combo-must complete both: Generalist Social Work Practice I AND Biological Person & the Environment
UMaine	MHR 300	Case Management
UMA	HUS 218	Community Mental Health
UMF	PSY 209, PSY 235, & PSY 455	Three course combo-must complete all three: Abnormal Psychology Introduction to Counseling & Personality, AND Crisis Intervention and Stabilization

Appendix A: Approved Academic Programs and Courses

UMF	REH 249, REH 310 & Either: REH 200 or REH 380	Three course combo-Must complete first two and your choice of one of the remaining two: Psychosocial Rehabilitation, Casework AND EITHER: Counseling and the Helping Relationship OR Seminar in Professional Practice
UMM	PSY 238	Case Management
UNE	PSY 236	Mental Health and Society
UNE	PSY 375 & PSY 410	Two course combo-must complete both: Trauma and Health AND Theories of Counseling
USM-LAC	SBS 303 & SBS 346	Two course combo-must complete both: Abnormal Psychology AND Introduction to Social Services
WCCC	HUS 125, HUS 212, & HUS 218	Three course combo-Must complete all three: Introduction to Human Services, Case Management, AND Community Mental Health

Domain 7: Cultural Competency

Institution	Course ID	Course Name
CMCC	SOC 200	Issues in Diversity*
EMCC	HUS 140	Understanding Diversity in Human Services
Husson	PY 322	Cultural Competency
KVCC	MHT 130	Diversity and Culture*
UMaine	MHR 310	Counseling Diverse Populations
UMA	HUS 232 & Either: HUS 218 or HUS 335	Two course combo-take first and your choice of <u>one</u> of the other two: Crisis Intervention AND EITHER Community Mental Health OR Addiction: Diversity and Rehabilitation
UMF	PSY 235, PSY 305/377, & PSY 455	Three course combo-must complete all three: Introduction to Counseling & Personality, Ethics and Professional Responsibilities, AND Crisis Intervention and Stabilization
UMF	REH 110, REH 120 & Choice of 1: REH 249, REH 305, or REH 310	Three course combo-Must complete first two and your choice of one of the remaining three: Introduction to Disability Studies, Introduction to Social Services, AND <u>one</u> of the following 3: Psychosocial Rehabilitation, Group Process in Human Services OR Casework

Appendix A: Approved Academic Programs and Courses

UMFK	SOC 100, PSY 270 & Either: SOC 110 or PSY 344	Three course combo-Must complete first two and your choice of one of the remaining two: Introduction to Sociology, Case Management AND EITHER: Intro to Human Services and Community Mental Health OR Crisis Identification and Intervention
UMM	PSY 313	Counseling Diverse Populations
UMPI	SWK 305	Ethnicity and Multiculturalism
UMPI	PSY 374 & PSY 380	Two course combo-must complete both: Vocational Aspects of Disabilities AND Counseling
UNE	SOC 240 & PSY 375	Two course combo-must complete both: Race, Class and Gender AND Trauma and Health
UNE	PSY 250 & Either PSY 236 OR PSY 375	Two course combo-must complete first and choice of one of the other two: Lifespan Development AND EITHER Mental Health and Society OR Trauma and Health
UNE	PSY 236 & either SOC 240 OR PSY 410	Two course combo-must complete first and choice of one of the other two: Mental Health and Society AND EITHER Race, Class and Gender OR Theories of Counseling
WCCC	HUS 212 & Either HUS 101 or HUS 102	Must Complete the first course and either of the other two: Case Management AND EITHER Introduction to Human Services OR Topics in Health & Aging
YCCC	PSY 232	Introduction to Counseling

Domain 8: Vocational Support

Institution	Course ID	Course Name
CMCC	PSY 204	Vocational Aspects of Disability and Counseling*
EMCC	HUS 250	Vocational Aspects of Disabilities
Husson	MH 203	Vocational Support
KVCC	MHT 227	Vocational Supports*
SMCC	BHHS 110	Psychosocial Rehabilitation
UMaine	SWK 497	Mental Health and Work
UMaine	MHR 210	Vocational Aspects of Disability & Psychiatric Rehabilitation
UMA	HUS 236 & Either: HUS 212 or HUS 218	Two course combo-take first and your choice of <u>one</u> of the other two: Foundations of Vocational Rehabilitation AND EITHER Case Management OR Community Mental Health
UMF	PSY 237	Career Counseling
UMF	REH 270	Vocational Counseling & Placement

Appendix A: Approved Academic Programs and Courses

UMFK	PSY 246	Vocational Aspects of Disability
UMM	PSY 316	Vocational Aspects of Disability & Psychiatric Rehabilitation
UMPI	PSY 374	Vocational Aspects of Disability*
UNE	PSY 236	Mental Health and Society
USM-LAC	SBS 315	Social Psychology of Disability
WCCC	HUS 120	Vocational Aspects of Disability
YCCC	PSY 244 & Either HUS 101 or SOC 210	Must Complete the first course and either of the other two: Psychosocial Rehabilitation AND EITHER Introduction to Human Services OR Social Problems

Appendix B: List of Related Degrees

Below is the list of related degree majors. The associate, bachelor, or master degree must have been earned at a regionally accredited institution of higher learning (see further below).

Art Therapy	Occupational Therapy
Behavioral Health	Physical Therapy
Behavioral Health & Human Services	Psychiatric Rehabilitation
Behavioral Science	Psychology
Communication Science & Disorders	Psychosocial Rehabilitation
Community Health	Public Health
Community Health Education	Rehabilitation Sciences
Community Mental Health	Rehabilitation Services
Counseling	Special Education
Criminology	Speech/Hearing Sciences
Health & Human Services	Speech-Language Pathology
Human Development	Social & Behavioral Science
Human Development & Family Studies	Social Rehabilitation
Human Services	Social Science
Mental Health	Social Services
Mental Health & Human Services	Social Work
Movement Therapy	Sociology
Music Therapy	Therapeutic Recreation
Nursing	

The Regional Accreditation boards are:

New England Association of Schools & Colleges: <https://cihe.neasc.org/>

Middle States Commission on Higher Education: <http://www.msche.org/>

(North Central) Higher Learning Commission: <https://www.hlcommission.org/>

Northwest Commission on Colleges & Universities: <http://www.nwccu.org/>

Southern Association of Colleges & Schools Commission on Colleges:

<http://www.sacscoc.org/>

Western Association of Schools and Colleges:

Junior (Associate Degree programs): <http://www.accjc.org/>

Senior (Bachelor & above programs): <https://www.wascsenior.org/>

Council of Social Work Education: <https://www.cswe.org/>

Appendix C: Approved Non-Academic Trainers and the Courses They Teach

This Appendix was last added to on: **February 26, 2021**

Individuals interested in taking a non-academic course must apply directly through the trainer.

Domain 1: Behavioral, Psychological, and Rehabilitation Intervention Models:

Domain 1 instructors are approved to train the standard Non-Academic Curriculum through January 1, 2023

Instructor:	Agency	Email
Dr. Pamela J. Boivin	Riverside Training & Education Center	RiversideTec@gmail.com
Kristin Caffier	SequelCare of Maine	kjc428@yahoo.com
Catherine Chichester	Co-Occurring Collaborative Serving Maine	cchichester@ccsme.org
Cathleen Dunlap	Paramount Behavioral Services	cathleen.dunlap@paramountbehavioral.com
Amber Elliott	Alternative Wellness Services & The Opportunity Alliance	amberelliott@awsmaine.com or Amber.Elliott@opportunityalliance.org
Vickie Fisher	Maine Behavioral Health Organization	vfisher@mainebehavioralhealth.org
Aaron Fortin	Graham Behavioral Services	afortin@gbsmaine.com
Mary Gagnon	Health Affiliates Maine	mary.gagnon@healthaffiliatesmaine.com
Melissa Gattine	Maine Behavioral Healthcare	gattim@mainebehavioralhealthcare.org
Kristianna Hall	Gateway Community Services	krista.hall@gatewaycommunityservice.org
Linnea Hofmeister	Maine Behavioral Health Organization	lhofmeister@mainebehavioralhealth.org
Mark Kavanaugh	Kennebec Valley Community College	mkavanaugh@kvcc.me.edu
Jessica Lachance	Tri-County Mental Health Services	jlachance@tcmhs.org
Debra McIntyre	Independent Instructor	Bnd.mcintyre@gmail.com
Christopher Morse	The Northern Lighthouse	csmorse77@gmail.com
Deanne Ochoa-Durrell	Assistance Plus	dochoa-durrell@assistanceplus.com
Georgana Prudhomme	Kennebec Behavioral Health	gprudhomme@kbhmaine.org
Chad White	Maine Behavioral Health Organization	cwhite@mainebehavioralhealth.org

Domain 2: Community Integration and Inclusion:

Domain 2 instructors are approved to train the standard Non-Academic Curriculum through July 1, 2023

Instructor:	Agency	Email
Julia Abernethy	Maine Behavioral Healthcare	jabernethy@mainebehavioralhealthcare.org
Dr. Pamela J. Boivin	Riverside Training & Education Center	RiversideTec@gmail.com
Marylena Chaisson	Health Affiliates Maine	Marylena.Chaisson@healthaffiliatesmaine.com
Catherine Chichester	Co-Occurring Collaborative Serving Maine	cchichester@ccsme.org
Danielle Cowette	Northern Light Health	dcowette@northernlight.org
Cathleen Dunlap	Paramount Behavioral Services	cathleen.dunlap@paramountbehavioral.com

Appendix C: Approved Non-Academic Trainers and the Courses They Teach

Amber Elliott	Alternative Wellness Services & The Opportunity Alliance	amberelliott@awsmaine.com or Amber.Elliott@opportunityalliance.org
Vickie Fisher	Maine Behavioral Health Organization	vfisher@mainebehavioralhealth.org
Aaron Fortin	Graham Behavioral Services	afortin@gbsmaine.com
Mary Gagnon	Health Affiliates Maine	mary.gagnon@healthaffiliatesmaine.com
Kristianna Hall	Gateway Community Services	krista.hall@gatewaycommunityservice.org
Linnea Hofmeister	Maine Behavioral Health Organization	lhofmeister@mainebehavioralhealth.org
Emily Hunnefeld	MAS Community Health	ehunnefeld@mashomecare.com
Mark Kavanaugh	Kennebec Valley Community College	mkavanaugh@kvcc.me.edu
Jessica Lachance	Tri-County Mental Health Services	jlachance@tcmhs.org
Tamera Longfellow	Northern Light Health	tlongfellow@northernlight.org
Debra McIntyre	Independent Instructor	Bnd.mcintyre@gmail.com
Steven Nesky	Sweetser	SNesky@sweetser.org
Deanne Ochoa-Durrell	Assistance Plus	dochoa-durrell@assistanceplus.com
Chad White	Maine Behavioral Health Organization	cwhite@mainebehavioralhealth.org
Jason White	PREP Group	jwhite@prepgroup.info

Domain 3

Domain 3 instructors are approved to train the standard Non-Academic Curriculum through January 1, 2024.

Instructor:	Agency	Email
Dr. Pamela J. Boivin	Riverside Training & Education Center	RiversideTec@gmail.com
Marylena Chaisson	Health Affiliates Maine	Marylena.Chaisson@healthaffiliatesmaine.com
Catherine Chichester	Co-Occurring Collaborative Serving Maine	cchichester@ccsme.org
Cathleen Dunlap	Paramount Behavioral Services	cathleen.dunlap@paramountbehavioral.com
Amber Elliott	Alternative Wellness Services & The Opportunity Alliance	amberelliott@awsmaine.com or Amber.Elliott@opportunityalliance.org
Vickie Fisher	Maine Behavioral Health Organization	vfisher@mainebehavioralhealth.org
Aaron Fortin	Graham Behavioral Services	afortin@gbsmaine.com
Mary Gagnon	Health Affiliates Maine	mary.gagnon@healthaffiliatesmaine.com
Kristianna Hall	Gateway Community Services	krista.hall@gatewaycommunityservice.org
Linnea Hofmeister	Maine Behavioral Health Organization	lhofmeister@mainebehavioralhealth.org
Mark Kavanaugh	Kennebec Valley Community College	mkavanaugh@kvcc.me.edu
Jessica Lachance	Tri-County Mental Health Services	jlachance@tcmhs.org
Thomas Lusth	Break of Day Mental Health Group	thomasl@breakofdaymhg.com
Debra McIntyre	Independent Instructor	Bnd.mcintyre@gmail.com
Bethany Mitchell	Northern Light Health	bjmitchell@northernlight.org
Steven Nesky	Sweetser	SNesky@sweetser.org
Deanne Ochoa-Durrell	Assistance Plus	dochoa-durrell@assistanceplus.com
Georgana Prudhomme	Kennebec Behavioral Health	gprudhomme@kbhmaine.org
Chad White	Maine Behavioral Health Organization	cwhite@mainebehavioralhealth.org
Jason White	PREP Group	jwhite@prepgroup.info

Appendix C: Approved Non-Academic Trainers and the Courses They Teach

Domains 4, 5, & 7: To be announced in the future.

Domain 6: Mind-Body Connection:

Domain 6 instructors are approved to train the standard Non-Academic Curriculum through July 1, 2024

Instructor:	Agency	Email
Julia Abernethy	Maine Behavioral Healthcare	jabernethy@mainebehavioralhealthcare.org
Dr. Pamela J. Boivin	Riverside Training & Education Center	RiversideTec@gmail.com
Marylena Chaisson	Health Affiliates Maine	Marylena.Chaisson@healthaffiliatesmaine.com
Catherine Chichester	Co-Occurring Collaborative Serving Maine	cchichester@ccsme.org
Cathleen Dunlap	Paramount Behavioral Services	cathleen.dunlap@paramountbehavioral.com
Amber Elliott	Alternative Wellness Services & The Opportunity Alliance	amberelliott@awsmaine.com or Amber.Elliott@opportunityalliance.org
Aaron Fortin	Graham Behavioral Services	afortin@gbsmaine.com
Mary Gagnon	Health Affiliates Maine	mary.gagnon@healthaffiliatesmaine.com
Kristianna Hall	Gateway Community Services	krista.hall@gatewaycommunityservice.org
Linnea Hofmeister	Maine Behavioral Health Organization	lhofmeister@mainebehavioralhealth.org
Emily Hunnefeld	MAS Community Health	ehunnefeld@mashomecare.com
Mark Kavanaugh	Kennebec Valley Community College	mkavanaugh@kvcc.me.edu
Jessica Lachance	Tri-County Mental Health Services	jlachance@tcmhs.org
Debra McIntyre	Independent Instructor	Bnd.mcintyre@gmail.com
Deanne Ochoa-Durrell	Assistance Plus	dochoa-durrell@assistanceplus.com
Georgana Prudhomme	Kennebec Behavioral Health	gprudhomme@kbhmaine.org
Ericka Roy	R&K Wellness & Mental Health	ericka.roy@wellnessrk.com
Noreen Sprague	Helping Hands Counseling	nsprague61@outlook.com
Chad White	Maine Behavioral Health Organization	cwhite@mainebehavioralhealth.org
Jason White	PREP Group	jwhite@prepgroup.info
Margaret Zall	The Opportunity Alliance	margaret.zall@opportunityalliance.org

Domain 8: Vocational Support:

Domain 8 instructors are approved to train the standard Non-Academic Curriculum through July 1, 2023

Instructor:	Agency	Email
Julia Abernethy	Maine Behavioral Healthcare	jabernethy@mainebehavioralhealthcare.org
Dr. Pamela J. Boivin	Riverside Training & Education Center	RiversideTec@gmail.com
Marylena Chaisson	Health Affiliates Maine	Marylena.Chaisson@healthaffiliatesmaine.com
Catherine Chichester	Co-Occurring Collaborative Serving Maine	cchichester@ccsme.org
Cathleen Dunlap	Paramount Behavioral Services	cathleen.dunlap@paramountbehavioral.com

Appendix C: Approved Non-Academic Trainers and the Courses They Teach

Amber Elliott	Alternative Wellness Services & The Opportunity Alliance	amberelliott@awsmaine.com or Amber.Elliott@opportunityalliance.org
Kristianna Hall	Gateway Community Services	krista.hall@gatewaycommunityservice.org
Emily Hunnefeld	MAS Community Health	ehunnefeld@mashomecare.com
Mark Kavanaugh	Kennebec Valley Community College	mkavanaugh@kvcc.me.edu
Jessica Lachance	Tri-County Mental Health Services	jlachance@tcmhs.org
Debra McIntyre	Independent Instructor	Bnd.mcintyre@gmail.com
Christine McKenzie	CBT Counseling	cbt@christinemckenzie.org
Heidi Patrie	Maine Medical Center	patrih@mmc.org
Chad White	Maine Behavioral Health Organization	cwhite@mainebehavioralhealth.org
Jason White	PREP Group	jwhite@prepgroup.info

Other Approved Non-Academic Trainings:

Domain 8: Vocational Support

Agency/Company:	Course(s) approved:
Syntiro http://www.syntiro.org/	ACRE Employment Specialist Certificate
Virginia Commonwealth University https://vcurrtc.org/training/courses.cfm	Supported Competitive Employment for Individuals with Mental Illness
Virginia Commonwealth University https://vcurrtc.org/training/courses.cfm	Supported Employment Web-based Certificate Series

Appendix D: Application Form

APPLICATION FOR MHRT/COMMUNITY CERTIFICATION

This form may be copied. To apply online go to www.cfl-muskie.org

Please complete the form below. A Glossary of Terms is on the next page.

I. Personal Information

Today's Date: _____

First Name: _____ Last Name: _____

Home Address: _____

City: _____ State: _____ Zip: Code: _____

Email Address: _____ Daytime Phone: () _____

II. Employment Information (ONLY if employed in the Behavioral Health field)

Current Work Place: _____ Work Telephone: () _____

Position/Title: _____

III. Check the box below that matches what you are applying for (Check only one box):

1. Full MHRT/C
2. Provisional MHRT/C*
3. Materials Review Only (I do not want a certificate issued at this time.)

***A Glossary of Terms can be found on the next page.**

IV. Submit one or more of the following documentation with your application form:

- Original or legible copies of *official* transcript(s) if you have completed college course work
- Copies of training certificates if you have completed non-academic training(s)
- Credit for Work Experience Forms if you are using work experience to meet one or more domains.
- *—If you are applying for Provisional certification, in addition to one or more of the above, please complete *Maine's Mental Health System 101* (MH101). This free online training is required for Provisional certification. Link to MH101: <http://mhrt.trainingserver5.org/>

V. This is the only page of the application form that you need to submit with the rest of your documentation above. Upload, email or send all information in one packet to:

MHRT/Community Request
The Center for Learning
12 East Chestnut St.
Augusta, ME 04330

Phone: (207) 626-5280
Fax: (207) 626-5022
TTY: (207) 626-5282
CFL E-Mail: cfl-muskie@maine.edu

Appendix D: Application Form

Glossary of Terms for MHRT/C Pathways:

Competency domain: One of the eight domains that encompass the essential knowledge competencies and skills for Maine’s adult behavioral health workforce. Each competency domain is comprised of a set of unique competencies that are grounded in, and guided by, the fundamental components of recovery and reflect the values of consumer choice and empowerment, integrated care, respect, advocacy, responsibility, and hope.

Continuing education: The required training and professional development to renew full MHRT/C certification every two years. Eighteen hours of continuing education must be completed to satisfy the renewal requirement, including a minimum of four hours in Ethics.

Credit based on work experience: Supervised and documented work experience that demonstrates knowledge and skill in a particular domain. Must be written by a clinical supervisor (or administrative supervisor with documentation), cover consecutive months of employment, and can be used to satisfy only one domain.

Full MHRT/C certification: Valid for two years; renewable with 18 hours continuing education; four of the 18 hours must be in ethics

Maine’s Mental Health System 101 (MH 101): An approximately one-hour web-based training course that provides an overview of the history, resources, roles, and values of Maine’s mental health system; optional for certification applicants in Pathway A, mandatory for all other applicants

Other Certifications: May include Certified Professional Rehabilitation Practitioner (CPRP), Certified Intentional Peer Support Specialist (CIPPS), MHRT 1, Certified Alcohol & Drug Counselor (CADC), or other, reviewed on a case by case basis

PLA (Prior Learning Assessment): Offered by many colleges and universities, a PLA can translate knowledge gained from experience into academic credit

Pre-approved program: Certain colleges and universities in Maine offer degree and certificate programs which are pre-approved by the CFL to qualify for full MHRT/C certification upon completion. For a complete listing, please see Appendix A of the MHRT/C Guidelines.

Priority Domains: Competency domains that must be completed to earn Provisional MHRT/C certification. They include the first three domains: 1) Behavioral, Psychological, and Rehabilitation Intervention Models; 2) Community Integration and Inclusion; and 3) Ethics and Professional Conduct

Provisional MHRT/C certification: Valid for two years; applicant must satisfy all eight competency domains in order to earn to full certification

Related degree: Degrees in allied areas such as criminology, special education, health & human services, human development, mental health, nursing, occupational/physical therapy, psychology, rehabilitation, social work, sociology, other therapies, and more

Related field: Direct service experience in the behavioral health field working with adults or transition-age youth with mental illness and/or substance use disorders. Applicants may substitute the requirement for direct service experience as a case manager.

Appendix E: Relevant Work Experience Verification Form (for those without a Relevant Degree)

Please submit this form to your HR Office for verification of your relevant work experience.

Name of Applicant: _____

Agency & Address: _____

Directions for HR Office:

The above individual is applying for MHRT/Community certification. As part of the application process, they must provide documentation of at least one year of full time relevant direct service work experience. Relevant direct service work experience should be in the behavioral health field working with individuals with mental illness and/or substance use disorders. Applicants may substitute the requirement for direct service experience with 12 months of full-time experience as a case manager.

Please verify that the individual has met this work experience requirement. If the individual has less than one year of full time experience, you may also list this as the individual may combine experience from multiple jobs to meet this requirement for MHRT/C certification.

Applicant's Current Job Title: _____

Dates of Employment: _____

(Check one) **Full Time:** _____ **Part Time:** _____ **Hours per week if PT:** _____

HR Contact (Print): _____ **Phone:** _____

Email: _____

HR Signature: _____ **Date:** _____

Notes:

This form is to be returned to the applicant, who will submit it with their MHRT/C application.

Appendix E: Relevant Work Experience Verification Form (for those without a Relevant Degree)

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Appendix F: Credit for Work Experience Forms

CREDIT FOR WORK EXPERIENCE FORM FOR DOMAIN 2: COMMUNITY INTEGRATION & INCLUSION

Only applicants with a qualifying bachelor or master degree may use Credit for Work Experience for Domain 2.

Name of Applicant: _____

Name of Clinical Supervisor*: _____

The Clinical Supervisor must have provided direct clinical supervision to the applicant during the time frame referenced in this request and must be a Master's level clinician. Acceptable credentials include LCPC, LCSW, APRN, Psychologist, MD/DO, and Psychiatrist. For a complete listing of acceptable credentials, please refer to the MHRT/C Procedural Guidelines.*

Dates of Supervision (start & end): _____

Please note that each request for work credit must have its own specified and distinct time frame. No overlapping of dates and domains is permitted.

By initialing each knowledge competency for this MHRT/C requirement below the Clinical Supervisor* attests that the applicant has a high level of competence in them. **Please attach a document summarizing the work the applicant has performed under supervision that relates directly to these competencies for this course. Please give specific examples of how the applicant has demonstrated these competencies in their work. Clinical supervisor must sign each additional page.**

____ Demonstrate an understanding of the role of the case manager within community settings and how the community mental health system in Maine supports community inclusion.

____ Describe community inclusion as a process of assisting an individual to move towards greater community inclusion and personal well-being.

____ Identify resources and options in mental health, substance abuse, behavioral health, employment services, crisis services, natural supports, law enforcement and mental health courts available to a consumer and demonstrate understanding of how to provide linkages to these services.

____ Describe how basic interviewing and assessment techniques such as Motivational Interviewing and psychosocial assessments, can support a consumer's coping skills.

____ Illustrate the documentation process and each of its components, including the following: a) a person-centered treatment plan with specific goals/measures/target dates; b) written notes that track progress and inform the dynamic treatment process; and c) a treatment plan review to support progress in goal areas that help individuals live safe, healthy and independent lives.

____ Recall the history of peer support and consumer-directed services in Maine and nationally, including the Intentional Peer Support (IPS) Model.

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Appendix F: Credit for Work Experience Forms

- I have enclosed a document summarizing how the applicant has met these knowledge competencies in their work. (Please check when completed.)

By signing below, I confirm that I provided direct clinical* supervision to the applicant during the time referenced in this request. I have discussed the knowledge competencies for this domain with this individual and attest that this individual has acquired the competencies for the domain to be credited as listed in the Procedural Guidelines for MHRT/C.

Signature of Clinical Supervisor*

License Type & Number

Date

Signature of Administrative Supervisor

Date

Signature of HR Office Confirming No Clinical Supervision

Date

If no Clinical Supervisor, this form must be signed by BOTH the Administrative Supervisor and the HR Office to attest that there is no clinical supervision.

Please sign, date, and return to applicant. Applicant must submit this form as part of their application. ***Only applicants with a qualifying bachelor or master degree may use Credit for Work Experience for Domain 2.*** For complete requirements regarding credit for work requests, please refer to the *Guidelines for MHRT/C Certification*.

Appendix F: Credit for Work Experience Forms

CREDIT FOR WORK EXPERIENCE FORM FOR DOMAIN 4: TRAUMA AND RESILIENCY

Name of Applicant: _____

Name of Clinical Supervisor*: _____

The Clinical Supervisor must have provided direct clinical supervision to the applicant during the time frame referenced in this waiver request and must be a Master's level clinician. Acceptable credentials include LCPC, LCSW, APRN, Psychologist, MD/DO, and Psychiatrist. For a complete listing of acceptable credentials, please refer to the Guidelines for MHRT/C Certification.*

Dates of Supervision (start & end): _____

Please note that each waiver request must have its own specified and distinct time frame. No overlapping of dates and domains is permitted.

By initialing **each** knowledge competency for this MHRT/C requirement below the Clinical Supervisor* attests that the applicant has a high level of competence in them. **Please attach a document summarizing the work the applicant has performed under supervision that relates directly to these competencies for this course. Please give specific examples of how the applicant has demonstrated these competencies in their work. Clinical supervisor must sign each additional page.**

_____ Describe the prevalence and impact of various types and contexts of trauma, e.g., domestic violence, physical and sexual abuse, sexual assault, exposure to combat, and other life-threatening events.

_____ Recognize the impact of trauma on behavior, functioning, and other health-related conditions and symptoms. Please give examples.

_____ Demonstrate a sensitivity to the behavioral health issues, including substance use disorders, affecting survivors of trauma and the stages of recovery they will experience.

_____ Characterize the importance of working from a trauma-informed perspective and describe techniques of trauma-informed care, as well as the effects of vicarious traumatization.

_____ Summarize the effects of trauma on survivors, including intergenerational trauma, inter-familial trauma, experience of trauma at various life stages, and experience of trauma specific to special populations and cultural contexts, e.g., veterans, refugees, immigrants.

_____ Recall the Adverse Childhood Experiences (ACE) Study and its correlation with trauma.

Continued Next Page

*—or administrative supervisor if applicant does not have clinical supervision

Appendix F: Credit for Work Experience Forms

CREDIT FOR WORK EXPERIENCE FORM FOR DOMAIN 4: TRAUMA AND RESILIENCY

_____ Describe evidence-based treatment approaches for trauma-related conditions, e.g., Seeking Safety, TREM, EMDR, and DBT.

_____ Identify and refer survivors of trauma to specialized support resources in the community to assist in the recovery process.

I have enclosed a document summarizing how the applicant has met these knowledge competencies in their work. (Please check when completed.)

I confirm that I provided direct clinical supervision to the applicant during the time referenced in this waiver request. I have discussed these elements with this individual and attest that this individual has acquired the competencies for the course to be waived as listed in the Procedural Guidelines for MHRT/C.

Signature of Clinical Supervisor*

License Type & Number

Date

Signature of Administrative Supervisor

Date

Signature of HR Office Confirming No Clinical Supervision

Date

If no Clinical Supervisor, this form must be signed by BOTH the Administrative Supervisor and the HR Office to attest that there is no clinical supervision.

Please sign, date, and return to applicant. Applicant must submit this form as part of their application. For complete requirements regarding waiver requests, please refer to the *Guidelines for MHRT/C Certification*.

*—or administrative supervisor if applicant does not have clinical supervision

Appendix F: Credit for Work Experience Forms

CREDIT FOR WORK EXPERIENCE FORM FOR DOMAIN 5: POLICY KNOWLEDGE

Name of Applicant: _____

Name of Clinical Supervisor*: _____

The Clinical Supervisor must have provided direct clinical supervision to the applicant during the time frame referenced in this waiver request and must be a Master's level clinician. Acceptable credentials include LCPC, LCSW, APRN, Psychologist, MD/DO, and Psychiatrist. For a complete listing of acceptable credentials, please refer to the Guidelines for MHRT/C Certification.*

Dates of Supervision (start & end): _____

Please note that each waiver request must have its own specified and distinct time frame. No overlapping of dates and domains is permitted.

By initialing each knowledge competency for this MHRT/C requirement below the Clinical Supervisor* attests that the applicant has a high level of competence in them. **Please attach a document summarizing the work the applicant has performed under supervision that relates directly to these competencies for this course. Please give specific examples of how the applicant has demonstrated these competencies in their work. Clinical supervisor must sign each additional page.**

_____ Demonstrate familiarity with the AMHI Consent Decree requirements and their impact on adult mental health services in Maine.

_____ Explain Maine's Rights of Recipients of Mental Health Services.

_____ Demonstrate an understanding of federal and state disability laws, including the Americans with Disabilities Act, Section 504 of the Rehabilitation Act, and Maine statutes regarding accessibility for those who are deaf or hard of hearing.

_____ Demonstrate an understanding of federal and state civil rights laws, including the Civil Rights Act of 1964, the Maine Human Rights Act, and communication access policies for non-English speaking consumers.

_____ Demonstrate an understanding of the provider's role as a mandated reporter of abuse and neglect for both adults and children and delineate the procedure to report.

_____ Assist the consumer to develop self-advocacy skills.

Continued Next Page

*—or administrative supervisor if applicant does not have clinical supervision

Appendix F: Credit for Work Experience Forms

CREDIT FOR WORK EXPERIENCE FORM FOR DOMAIN 5: POLICY KNOWLEDGE

- ____ Identify advocacy organizations that address consumer rights, i.e. Disability Rights Maine.
- ____ Give examples of federal and state benefit and entitlement programs, needs-based social welfare and work incentive programs, including eligibility, reporting and review requirements, and ways in which consumers can access these programs.
- ____ Engage with the consumer and advocate on their behalf to ensure policies are appropriately followed. Refer the consumer to an appropriate advocacy organization when there are errors in policy application.

I have enclosed a document summarizing how the applicant has met these knowledge competencies in their work. (Please check when completed.)

I confirm that I provided direct clinical supervision to the applicant during the time referenced in this waiver request. I have discussed these elements with this individual and attest that this individual has acquired the competencies for the course to be waived as listed in the Procedural Guidelines for MHRT/C.

Signature of Clinical Supervisor*

License Type & Number

Date

Signature of Administrative Supervisor

Date

Signature of HR Office Confirming No Clinical Supervision

Date

If no Clinical Supervisor, this form must be signed by BOTH the Administrative Supervisor and the HR Office to attest that there is no clinical supervision.

Please sign, date, and return to applicant. Applicant must submit this form as part of their application. For complete requirements regarding waiver requests, please refer to the *Guidelines for MHRT/C Certification*.

*—or administrative supervisor if applicant does not have clinical supervision

Appendix F: Credit for Work Experience Forms

CREDIT FOR WORK EXPERIENCE FORM FOR DOMAIN 6: MIND-BODY CONNECTION

Name of Applicant: _____

Name of Clinical Supervisor*: _____

The Clinical Supervisor must have provided direct clinical supervision to the applicant during the time frame referenced in this waiver request and must be a Master's level clinician. Acceptable credentials include LCPC, LCSW, APRN, Psychologist, MD/DO, and Psychiatrist. For a complete listing of acceptable credentials, please refer to the Guidelines for MHRT/C Certification.*

Dates of Supervision (start & end): _____

Please note that each waiver request must have its own specified and distinct time frame. No overlapping of dates and domains is permitted.

By initialing each knowledge competency for this MHRT/C requirement below the Clinical Supervisor* attests that the applicant has a high level of competence in them. **Please attach a document summarizing the work the applicant has performed under supervision that relates directly to these competencies for this course. Please give specific examples of how the applicant has demonstrated these competencies in their work. Clinical supervisor must sign each additional page.**

____ Describe the interdependent relationship between mental illness and physical health and give examples.

____ Describe the value and importance of integrated care.

____ Recognize the spectrum of substance use disorders, including the psychological signs and symptoms, as well as common behavioral addictions.

____ Explain the role of medication in symptom management, including the potential for psychiatric and physical side effects of any medication.

____ Explain the case manager's role in the person-centered planning process and how to identify and refer to appropriate wellness promotion programs and community, peer, and web-based healthcare resources.

____ Describe the benefits of shared care planning and ways to incorporate an individual's needs and preferences in goal-setting.

____ Relate the significant impact of smoking on individual health, particularly those with serious mental illness, and identify evidence-based cessation resources.

____ Have an understanding of the etiology, progression, and treatment of common co-morbid conditions.

Continued Next Page

*—or administrative supervisor if applicant does not have clinical supervision

Appendix F: Credit for Work Experience Forms

CREDIT FOR WORK EXPERIENCE FORM FOR DOMAIN 6: MIND-BODY CONNECTION

- _____ Define various social contexts and risk factors affecting consumers with comorbid conditions, and the impact on the consumer's overall health and well-being.
- _____ Discuss a variety of treatment interventions and settings for common co-occurring conditions.
- _____ Identify strategies to assist consumers in developing personal-care skills such as managing stress, assessing triggers, and monitoring medications.
- _____ Give examples of community and web-based resources that support wellness and recovery.
- _____ Describe the Behavioral Health Homes (BHH) model and other models that promote the integration of physical and behavioral health services and the potential benefits of integrated care services and supports to consumers

I have enclosed a document summarizing how the applicant has met these knowledge competencies in their work. (Please check when completed.)

I confirm that I provided direct clinical supervision to the applicant during the time referenced in this waiver request. I have discussed these elements with this individual and attest that this individual has acquired the competencies for the course to be waived as listed in the Procedural Guidelines for MHRT/C.

Signature of Clinical Supervisor*

License Type & Number

Date

Signature of Administrative Supervisor

Date

Signature of HR Office Confirming No Clinical Supervision

Date

If no Clinical Supervisor, this form must be signed by BOTH the Administrative Supervisor and the HR Office to attest that there is no clinical supervision.

Please sign, date, and return to applicant. Applicant must submit this form as part of their application. For complete requirements regarding waiver requests, please refer to the *Guidelines for MHRT/C Certification*.

*—or administrative supervisor if applicant does not have clinical supervision

Appendix F: Credit for Work Experience Forms

CREDIT FOR WORK EXPERIENCE FORM FOR DOMAIN 7: CULTURAL COMPETENCY

Name of Applicant: _____

Name of Clinical Supervisor*: _____

The Clinical Supervisor must have provided direct clinical supervision to the applicant during the time frame referenced in this waiver request and must be a Master's level clinician. Acceptable credentials include LCPC, LCSW, APRN, Psychologist, MD/DO, and Psychiatrist. For a complete listing of acceptable credentials, please refer to the Guidelines for MHRT/C Certification.*

Dates of Supervision (start & end): _____

Please note that each waiver request must have its own specified and distinct time frame. No overlapping of dates and domains is permitted.

By initialing **each** knowledge competency for this MHRT/C requirement below the Clinical Supervisor* attests that the applicant has a high level of competence in them. **Please attach a document summarizing the work the applicant has performed under supervision that relates directly to these competencies for this course. Please give specific examples of how the applicant has demonstrated these competencies in their work. Clinical supervisor must sign each additional page.**

_____ Describe how various contexts of culture, group, and family membership impact an individual's beliefs and behavior and their behavioral health care needs and interventions.

_____ Describe the importance of being culturally sensitive and responsive with populations that originate from a culture different than your own.

_____ Use respectful and effective communication with consumers from a variety of cultural and social backgrounds and life stages.

_____ Develop culturally-sensitive treatment plans that are responsive to cultural contexts, family and group memberships, and the particular life stage of the consumer.

_____ Demonstrate how to employ interpreter services for non-English speaking and hearing impaired consumers in a timely and appropriate manner.

_____ Identify and refer consumer to pertinent support resources in the community that facilitate consumer access and recovery within the context of social, cultural, family, and other group memberships.

Continued Next Page

*—or administrative supervisor if applicant does not have clinical supervision

Appendix F: Credit for Work Experience Forms

CREDIT FOR WORK EXPERIENCE FORM FOR DOMAIN 7: CULTURAL COMPETENCY

_____ Demonstrate cultural humility and self-reflection, including acknowledgement of the limitations of one's own cultural perspective.

I have enclosed a document summarizing how the applicant has met these knowledge competencies in their work. (Please check when completed.)

I confirm that I provided direct clinical supervision to the applicant during the time referenced in this waiver request. I have discussed these elements with this individual and attest that this individual has acquired the competencies for the course to be waived as listed in the Procedural Guidelines for MHRT/C.

Signature of Clinical Supervisor*

License Type & Number

Date

Signature of Administrative Supervisor

Date

Signature of HR Office Confirming No Clinical Supervision

Date

If no Clinical Supervisor, this form must be signed by BOTH the Administrative Supervisor and the HR Office to attest that there is no clinical supervision.

Please sign, date, and return to applicant. Applicant must submit this form as part of their application. For complete requirements regarding waiver requests, please refer to the *Guidelines for MHRT/C Certification*.

*—or administrative supervisor if applicant does not have clinical supervision

Appendix F: Credit for Work Experience Forms

CREDIT FOR WORK EXPERIENCE FORM FOR DOMAIN 8: VOCATIONAL SUPPORT

Name of Applicant: _____

Name of Clinical Supervisor*: _____

The Clinical Supervisor must have provided direct clinical supervision to the applicant during the time frame referenced in this waiver request and must be a Master's level clinician. Acceptable credentials include LCPC, LCSW, APRN, Psychologist, MD/DO, and Psychiatrist. For a complete listing of acceptable credentials, please refer to the Guidelines for MHRT/C Certification.*

Dates of Supervision (start & end): _____

Please note that each waiver request must have its own specified and distinct time frame. No overlapping of dates and domains is permitted.

By initialing each knowledge competency for this MHRT/C requirement below the Clinical Supervisor* attests that the applicant has a high level of competence in them. **Please attach a document summarizing the work the applicant has performed under supervision that relates directly to these competencies for this course. Please give specific examples of how the applicant has demonstrated these competencies in their work. Clinical supervisor must sign each additional page.**

____ Acknowledge the importance of work as part of self-concept/identity, and describe its role in mental health treatment and recovery.

____ Understand that the paths to mental health recovery and employment are both varied and non-linear, give examples of successful employment outcomes for consumers of behavioral healthcare.

____ Recognize and describe common myths and misconceptions regarding individuals with psychiatric disabilities and their ability to be successful in the workplace.

____ Understand the role of the MHRT/C in supporting a consumer to pursue a vocational goal, the importance of ongoing support in maintaining successful employment, and how it is reflected in the individual's plan of care.

____ Engage the consumer in meaningful, ongoing conversations about finding work and/or the possibility of work in the future, including job seeking/retention strategies.

____ Be able to practice engagement and motivation techniques to encourage and empower consumers to make progress along the employment continuum.

____ Identify and know how to access resources for consumer advocacy related to employment, including the use of natural supports to help individuals obtain and maintain a job.

____ Identify and refer consumers to support and employment advocacy services that will reduce or eliminate perceived barriers to continued successful employment.

Continued Next Page

*—or administrative supervisor if applicant does not have clinical supervision

Appendix F: Credit for Work Experience Forms

CREDIT FOR WORK EXPERIENCE FORM FOR DOMAIN 8: VOCATIONAL SUPPORT

- ____ Give examples of career development resources, including career exploration and labor market information available in the community.
- ____ Discover the diverse services and roles of people involved in the employment support system for consumers with psychiatric disabilities, and explain how the MHRT/C collaborates with others in the employment support system without duplicating the roles of these providers.
- ____ Identify online and local resources to access federal and state regulations and policy relating to employment.
- ____ Give examples of current and evolving research regarding evidence-based practices in employment of consumers with psychiatric disabilities, including Individual Placement Support.
- ____ Demonstrate awareness of reasonable accommodation and disclosure of disability in the context of mental health and employment.
- ____ Identify federal and state disability benefits, the availability of work incentives, and how to consult with Community Work Incentives Coordinators
- ____ Describe the role of the Department of Labor, Division of Vocational Rehabilitation as partners, how to refer, and collaborate around work goals.

I have enclosed a document summarizing how the applicant has met these knowledge competencies in their work. (Please check when completed.)

I confirm that I provided direct clinical supervision to the applicant during the time referenced in this waiver request. I have discussed these elements with this individual and attest that this individual has acquired the competencies for the course to be waived as listed in the Procedural Guidelines for MHRT/C.

Signature of Clinical Supervisor*

License Type & Number

Date

Signature of Administrative Supervisor

Date

Signature of HR Office Confirming No Clinical Supervision

Date

If no Clinical Supervisor, this form must be signed by BOTH the Administrative Supervisor and the HR Office to attest that there is no clinical supervision. Please sign, date, and return to applicant. Applicant must submit this form as part of their application. For complete requirements regarding waiver requests, please refer to the *Guidelines for MHRT/C Certification*.

*—or administrative supervisor if applicant does not have clinical supervision

Appendix G: MHRT/C CERTIFICATE **RENEWAL** APPLICATION

Name: _____ Certificate No.: _____

Address: _____

Telephone: _____

Email: _____

Current Employer: _____

Employer Address: _____

Employer Telephone: _____

A minimum of 18 hours continuing education (CE) is required in order to renew your certificate. At least four (4) of the 18 hours must be in ethics. Training must be completed during the two-year period indicated on your certificate, and apply to at least one (not all) of the MHRT/C competencies.

Please list the training titles below, and indicate which Domain the hours address. Send this form with a certificate of completion with the program title, trainer’s name, date of training, and number of hours. Please use additional sheets as necessary.

<u>Training Title</u>	<u># of Hours</u>	<u>Domain #</u>	<u>Online?</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

UPLOAD, EMAIL, OR SUBMIT THIS APPLICATION AND ALL SUPPORTING INFORMATION IN ONE ENVELOPE NO SOONER THAN 90 DAYS PRIOR TO YOUR EXPIRATION DATE TO:

MHRT/Community Renewal The Center for Learning 12 East Chestnut St. Augusta, ME 04330	Phone: (207) 626-5280 Fax: (207) 626-5022 TTY: (207) 626-5282 CFL E-Mail: cfl-muskie@maine.edu
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