# TRAINER and CURRICULUM STANDARDS FOR NON-ACADEMIC MENTAL HEALTH REHABILITATION TECHNICIAN/COMMUNITY (MHRT/C) CERTIFICATION

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INTRODUCTION

These Non-Academic Mental Health Rehabilitation Technician/Community (MHRT/C) Trainer and Curriculum Standards were initially developed in September 2003. At that time, an advisory committee shared its expertise on MHRT-C topic areas and made recommendations regarding these Standards.

As part of the Office of Adult Mental Health Services’ ongoing quality improvement efforts, these Standards have been updated. Please note the following changes:

- **As of January 1, 2009, the Vocational Aspects of Disability course will be required for all individuals seeking MHRT/C certification.** At that time, Group Process will no longer be accepted as a course that meets MHRT/C requirements. Hence, this document includes updated competencies, learning objectives, and trainer qualifications for the MHRT/C Vocational Aspects of Disability course requirement. The Vocational Aspects of Disability course competencies were developed based on feedback provided by stakeholders in December 2007.

- **The competencies for Group Process have been eliminated from this document.**

- **As of July 1, 2009, only courses taught by approved trainers, and based on approved curricula, will be eligible for MHRT/C certification credit.** Please see page 3 of these Standards for core trainer requirements and pages 4-6 for course-specific trainer requirements. Regarding curricula, see page 7 for core curriculum standards and pages 8-20 for course-specific curricula requirements.
REVIEW / APPROVAL PROCESS FOR TRAINERS AND CURRICULA

All non-academic trainers must undergo the approval process outlined in this document.

Applications for teaching and course curricula submitted for approval should be sent to the Muskie School’s Center for Learning, 45 Commerce Drive, Suite 11, Augusta, ME 04330. Allow 60-90 days for review. Representatives from the Center for Learning are available for consultation and guidance toward meeting non-academic course competency requirements.

Material submitted for approval should include a trainer application form (found on page 21), as well as documentation of any relevant education, work experience, and training qualifications (i.e. resume or curriculum vitae, official academic transcript, list of courses taught, documentation of professional development, and three written references). Please also be sure to submit documentation pertaining to the required trainer qualifications for the specific course(s) you are requesting to teach. Course-specific requirements are listed on pages 4-6.

In addition, please include a full curriculum reflecting all of the core curriculum standards listed on page 7. Course curricula will be reviewed to determine if the required MHRT/C learning objectives and competencies are met. Please refer to pages 8-20 for a listing of required learning objectives and competencies for each MHRT/C course.

The materials submitted will be reviewed by representatives from the Department of Health and Human Services, Office of Adult Mental Health Services (DHHS-OAMHS) and the Muskie School’s Center for Learning.

The Muskie School’s Center for Learning will post a listing of approved trainers on its website.

ONGOING QUALITY ASSURANCE EFFORTS

The Office of Adult Mental Health Services is committed to ongoing quality assurance in their workforce development initiatives so that mental health practitioners are up-to-date on best practices and have the knowledge needed to provide quality services.

These quality assurance initiatives will likely include periodic updates in curriculum and trainer requirements, as well as ongoing program and trainer evaluations. Trainers should anticipate periodic requests for information, such as student evaluations, classroom materials, and documentation of trainer’s professional development.
NON-ACADEMIC MHRT/C
CORE TRAINER QUALIFICATIONS
AND RATING SYSTEM

Individuals who apply to become trainers of non-academic MHRT/C courses will be evaluated according to the following criteria:

Relevant work experience
The applicant needs at least 5 years experience in the mental health field working in an agency licensed by DHHS-OAMHS. Those applying to become a trainer are required to attach a resume detailing their work experience. This work should be directly related to the content area of the course for which approval is sought.  

Relevant academic and professional development
The applicant’s academic and professional expertise must reflect emerging needs and best practices and be closely related to the non-academic MHRT/C course to be taught. The applicant must provide documentation, such as certificates and official transcripts or diplomas.

Teaching/training experiences
The applicant should supply a list of courses taught, evaluation summaries, and documentation of relevant training and education.

Written references
The applicant must provide references from three professionals with direct knowledge of the applicant’s training and content expertise. These recommendations should show the applicant’s ability to balance theory/application; model professional behavior/ethics; support DHHS-OAMHS mission/values; understand adult learners and participants with special considerations; and knowledge of the content area of the course(s) to be taught.

Minimum Score: 70 points

Note: A team application of trainers will be considered for approval.
### NON-ACADEMIC MHRT/C TRAINER QUALIFICATIONS FOR SPECIFIC COURSES

TRainers must meet all requirements for the specific course they teach.

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| 1. **Introduction to Community Mental Health** | a) Work experience in direct service community mental health.  
   b) Documentation of the completion of the MHRT/C *Introduction to Community Mental Health* course in an academic setting or as a workshop or its equivalent.  
   c) The professional licensure or certification that is generally accepted in the area of community mental health, or their work should have been supervised by a licensed mental health professional as defined in the *2008 Procedural Guidelines for MHRT/C Certification*. (Examples include L.C.S.W., L.C.P.C., Psy.D). |
| 2. **Psychosocial Rehabilitation**         | a) Work experience in direct service community mental health.  
   b) The professional licensure or certification that is generally accepted in the area of psychosocial rehabilitation such as the Certified Psychiatric Rehabilitation Practitioner (CPRP) of the US Psychiatric Rehabilitation Association (USPRA), or their work should have been supervised by a licensed or certified mental health professional as defined in the *2008 Procedural Guidelines for MHRT/C Certification*. (Examples include L.C.S.W., L.C.P.C., Psy.D). |
| 3. **Interviewing and Counseling**         | a) Hold the professional licensure or certification that is generally accepted in the area of interviewing and counseling, or their work should have been supervised by a licensed mental health professional as defined in the *2008 Procedural Guidelines for MHRT/C Certification*. (Examples include L.C.S.W., L.C.P.C., Psy.D). |
| 4. **Crisis Identification and Resolution** | a) Knowledge of the Maine mental health system.  
   b) Direct work experience in crisis services.  
   c) Clinical background in risk assessment (knowledge of major mental illness, trauma, dual diagnosis, etc).  
   d) The professional licensure or certification that is generally accepted in the area of crisis services, or their work should have been supervised by a licensed mental health professional as defined in the *2008 Procedural Guidelines for MHRT/C Certification*. (Examples include L.C.S.W., L.C.P.C., Psy.D). |
5. Cultural Competence/Diversity

The applicant must have:
   a) Awareness of class/ethnic differences and other diversity issues.
   b) Direct experience with cultures other than his/her own.

6. Vocational Aspects of Disability

The applicant must:
   a) Meet All of the following requirements:
      • Demonstrate experience in integrated employment and/or community living support for
        individuals with disabilities, as defined by a minimum of two years of employment or
        other directly related experience in the field; and
      • Have a minimum of an Associate’s degree (a Bachelor’s degree is strongly preferred) in
        a human services related field, such as Rehabilitation, Special Education, Human
        Development, Social Work); and
      • Have documented experience in providing staff development.

   OR

   b) Be a currently active Maine Employment Curriculum (MEC) trainer.

7. Substance Abuse with a Dual Diagnosis Component

The applicant must have:
   a) Demonstrated and significant work experience in integrated treatment modalities, or in both
      the mental health and substance abuse fields.
   b) Awareness of empowerment and recovery models for both substance abuse and mental
      health populations.
   c) A combination of training and experience in trauma-informed assessment and treatment
      modalities.
   d) The professional licensure or certification that is generally accepted in the area of substance
      abuse and mental health fields, or their work should have been supervised by a licensed
      mental health professional as defined in the 2008 Procedural Guidelines for MHRT/C
      Certification. (Examples include L.C.S.W., L.C.P.C., Psy.D).

8. Sexual Abuse, Trauma, & Recovery

The applicant must have:
   a) Demonstrated and significant work experience in trauma services.
   b) Awareness of empowerment and recovery models.
   c) Combination of training and experience in trauma-informed services.
   d) Familiarity with trauma services and resources in Maine.
9. Case Management

The applicant must have:
   a) Demonstrated and significant work experience with case management, particularly in collaborative planning and consumer empowerment.
   b) The professional licensure or certification that is generally accepted in the area of case management, or their work should have been supervised by a licensed mental health professional as defined in the 2008 Procedural Guidelines for MHRT/C Certification. (Examples include L.C.S.W., L.C.P.C., Psy.D).

10. Mental Health & Aging

The applicant must have:
   a) Awareness of healthy aging as part of developmental lifespan.
   b) Knowledge of and experience in resources for older adults.
   c) The professional licensure or certification that is generally accepted in the area of aging, or their work should have been supervised by a licensed mental health professional as defined in the 2008 Procedural Guidelines for MHRT/C Certification. (Examples include L.C.S.W., L.C.P.C., Psy.D).
The applicant will provide a full curriculum for every course in which approval is sought. The curriculum must include learning objectives and an application to teach a course (an application form can be found on page 21). The non-academic MHRT/C curriculum must meet the minimum requirement of a 30-hour course and should include the following:

1. **Communication**
   Level of language and concepts should be appropriate for adult learners with a range of learning styles.

2. **Best Practice**
   Content and handouts are up-to-date and reflect best practice, including cultural competency/diversity and community inclusion.

3. **Instructional Approach**
   In order to meet the needs of adult learners, the overall course should be arranged in a logical sequence and include a balance of presentation and group interaction.

4. **Evaluation**
   In order to assess participant reaction and knowledge acquisition, evaluation tools must be utilized.

5. **Learning Objectives**
   Learning objectives must match MHRT/C competencies.

6. **Values**
   Course content should reflect the values of ethical practice including confidentiality and the concepts of consumer choice, recovery, empowerment, and dignity.

7. **Sources**
   Course content should properly cite all sources used.

**Core MHRT/C Knowledge Competencies:**

1. Understands importance of community inclusion and use of natural supports
2. Identifies and respects consumer choice
3. Sensitive to gender differences and differing sexual orientations
4. Understands ethics and conducts practice in a professional manner
5. Knowledge of confidentiality requirements
6. Interacts effectively with community members and other professionals
7. Understands strategies that empower consumers
INTRODUCTION TO COMMUNITY MENTAL HEALTH

* NOTE: This course covers most topics at an introductory level. Many of these topics will be covered in depth in other MHRT/C courses.

LEARNING OBJECTIVES:

Upon completion of the course, the participant will be able to:

1. Identify basic helping theories and techniques including empathic understanding, reflection, clarification of ideas, joining, use of natural supports, and basic interviewing techniques.
2. Recognize the stigma experienced by consumers of mental health services and its impact on recovery; and demonstrate the ability to challenge this stigma.
3. Define policies including Maine laws concerning Rights of Recipients of Mental Health Services, Americans with Disabilities Act (ADA) requirements, and AMHI Consent Decree.
4. Summarize the medical aspects of mental illness, including its etiology, psychotropic medications, negative and positive symptoms of Schizophrenia, interaction of co-occurring medical issues, and the Five Axes descriptions in the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV).
5. Describe in general terms trauma and its relationship to major mental illness.
6. Demonstrate a commitment to professional competence including ethical practices, confidentiality, interdisciplinary teamwork, and burnout prevention.

COMPETENCIES:

1. Understands family theory, developmental theory, human development across lifespan, counseling theories, and crisis theory
2. Knowledgeable about collaborative planning with individuals with psychiatric disabilities: goal setting, skill assessment and training, linking with supports in the community
3. Understands Maine’s laws regarding rights of mental health recipients
4. Knowledge of Americans with Disabilities Act (ADA)
5. Understands benefit and entitlement programs for mental health recipients
6. Knowledgeable about etiology, progression, and treatment of major disabling conditions
Introduction to Community Mental Health

COMPETENCIES (continued):

7. Understands interaction of co-occurring medical issues
8. Understands role of medication in symptom management
9. Understands basic social service resources and entitlements for mental health recipients
10. Knowledge of community provider system
11. Aware of the need to act as a contributing member of an interdisciplinary team
12. Knowledge of confidentiality requirements
13. Interacts effectively with community members and other professionals
LEARNING OBJECTIVES:

Upon completion of the course, the participant will be able to:

1. Discuss history and practices of psychosocial rehabilitation (PSR) including the following:
   a. Introduction of PSR in the 1980s and how it represented a change in focus for persons with mental illness.
   b. Recovery movement and how it has changed PSR in the last five to ten years.
   c. Person-centered movement in Mental Retardation and how it contributes to PSR.
   d. Strength-based approaches and how they inform PSR practice.

2. Describe assessment of readiness including in the following:
   a. Understanding how emotional, intellectual, and motor competence affects goal attainment.
   b. How to establish goals and task analysis.

3. Identify literature on PSR including:
   a. US Psychiatric Rehabilitation Services (USPRA), formerly called IAPSRS: (no date). The Core Principles of PSR.

4. Recognize the dignity of risk and the right to failure including the following:
   a. Understanding why failure teaches more than success.
   b. Understanding of how to conduct risk assessments.
   c. How individual choice is the cornerstone of the empowerment process.

COMPETENCIES:

1. Aware of outcome-based research regarding individuals with psychiatric disabilities
2. Understands effective psychosocial rehabilitation interventions to help individuals with psychiatric disabilities function successfully in the community
3. Knowledgeable about collaborative planning with individuals with psychiatric disabilities: goal setting, skill assessment and training, linking with supports in the community
4. Identifies and respects consumer choice
5. Knowledge of generic community resources including available natural supports
6. Understands strategies that empower consumers
LEARNING OBJECTIVES:

Upon completion of the course, the participant will be able to:

1. Adhere to confidentiality policy and practice.
2. Classify and utilize levels of care in Maine's mental health services.
3. Recognize the need for individualized assessment and basic strategies.
4. Demonstrate Motivational Interviewing skills.
5. Set professional boundaries with clients.
6. Discuss effective utilization of supervision.
7. Apply effective coping skills for worker stress and burnout.
8. Identify counseling theories.

COMPETENCIES:

1. Understands family theory, developmental theory, human development across lifespan, counseling theories, and crisis theory
2. Aware of prevalence and common effects of trauma
3. Aware of screening and assessment strategies for trauma
4. Aware of stages of recovery for survivors of trauma
5. Knowledgeable about etiology, progression, and treatment of major disabling conditions
6. Understands role of medication in symptom management
7. Understands ethics and conducts practice in a professional manner
8. Aware of the need to evaluate effectiveness of personal practice
9. Understands effective use of supervision
CRISIS IDENTIFICATION AND RESOLUTION

LEARNING OBJECTIVES:
Upon completion of the course, the participant will be able to:

1. Explain emergency assessments (risk assessments/locus/suicidality).
2. Specify Maine’s statutes related to the emergency involuntary commitment process and protective custody.
3. Identify federal regulations, including the Emergency Medical Treatment and Labor Act (EMTALA).
4. Apply and integrate crisis theory.
5. Emphasize teamwork (medical professionals, law enforcement).
6. Recognize the needs of special populations and some important intervention considerations for: people who are deaf; people with developmental disabilities; elders; immigrants; refugees).
7. Describe Maine’s crisis system.
9. Discuss crisis plans / advanced directives.

COMPETENCIES:

1. Understands family theory, developmental theory, human development across life span, counseling theories, and crisis theory
2. Aware of prevalence and common effects of trauma
3. Aware of the prevalence of co-occurring disorders and common related effects (substance abuse and mental health)
4. Aware of screening and assessment strategies for co-occurring disorders (substance abuse and mental health)
5. Identifies risk factors (i.e. suicide) for individuals with psychiatric disabilities and takes appropriate action
6. Understands the role of medication in symptom management
7. Aware of the need to act as a contributing member of an interdisciplinary team
8. Knowledge of confidentiality requirements
9. Aware of the need to evaluate effectiveness of personal practice
10. Understands the effective use of supervision
LEARNING OBJECTIVES:

Upon completion of the course, the participant will be able to:

1. Respond to and respect culturally diverse populations.
2. Give examples of “What Culture Is.”
3. Describe how culture affects behavior.
4. Recognize the nature of cross-cultural barriers.
5. Build and create cultural bridges.
6. Assess how to work effectively with cultural intermediaries.
7. Utilize interpreters effectively.
8. Recognize the richness of the American multi-cultural experience.
9. Express a knowledge of and sensitivity to gender issues, sexual orientation, mental illness, and other issues as related to cultural competence.

COMPETENCIES:

1. Demonstrates cross-cultural awareness and sensitivity
2. Communicates effectively across cultures
3. Sensitive to gender differences and differing sexual orientations
4. Knowledgeable about changing treatment needs for adults in transition
LEARNING OBJECTIVES:

Upon completion of the course, the participant will be able to:

1. Explain the relationship between meaningful work and mental health recovery.

2. Recognize the ten fundamental components of recovery, including the importance of self-direction, empowerment and choice for individuals with psychiatric disabilities.

3. Explain the non-linear nature of mental health recovery.

4. Describe the role of the MHRT/C in supporting an individual pursuing a vocational goal. Explain how this role coordinates with (but does not duplicate) the employment support system including job developers, job coaches and community work incentives coordinators.

5. Engage consistently in interactions that provide strengths-based support, e.g. fostering hope, identifying and building on talents, interests, resiliencies, and coping abilities.

6. Demonstrate skills in engagement and motivation techniques to assist individuals with psychiatric disabilities in pursuing employment.

7. Provide examples of resources available to individuals with psychiatric disabilities for ongoing support in the employment system.

8. Demonstrate skills in identifying and collaborating with service providers who are involved in the employment support system.

9. Be aware of common misconceptions regarding individuals with psychiatric disabilities and their ability to be successful in the workplace; be able to relay research data and other facts that challenge those misconceptions.

10. Read and understand research literature on an ongoing basis in order to maintain a current understanding of evidence-based practices in competitive and supported employment. Also read and understand existing literature on Vocational Aspects of Disability, including the following:


Vocational Aspects of Disability

COMPETENCIES:

1. Has working knowledge of the National Consensus Statement on Mental Health Recovery and the ten fundamental components of recovery as they relate to employment

2. Understands that research shows that most people with psychiatric disabilities want to pursue employment opportunities; and that a consumer can be successful in competitive employment regardless of diagnosis, symptoms, disability status, prior hospitalizations, or co-occurring substance abuse

3. Familiarity with resources and roles of people involved in the employment support system for consumers with psychiatric disabilities, including job developers, job coaches and community work incentives coordinators

4. Understands the role of a MHRT/C in supporting an individual pursuing a vocational goal

5. Knowledgeable about the current and evolving research regarding evidence-based practices in employment of individuals with psychiatric disabilities, including supported employment

6. Working knowledge of engagement and motivation techniques to assist consumers in pursuing employment
LEARNING OBJECTIVES:

Upon completion of the course, the participant will be able to:

1. Describe and work from a trauma-informed perspective.
2. Explain 12-Step programs and how individual groups may vary in perspective.
3. Summarize various models of assessments.
4. Demonstrate Motivational Interviewing skills.
5. Utilize a comparative analysis of the variety in treatment approaches.
6. Define characteristics of recovery including the following:
   a. recidivism and relapse
   b. recreation in recovery
   c. resources to assist in recovery
   d. experiences of spirituality
7. Classify and compare etiology and epidemiology.
8. Recognize burnout and self-care in the substance abuse field.

COMPETENCIES:

1. Aware of the prevalence of co-occurring disorders and common related effects (substance abuse and mental health)
2. Aware of screening and assessment strategies for co-occurring disorders (substance abuse and mental health)
3. Aware of the stages of recovery for individuals who have co-occurring disorders
4. Knowledgeable about resources to assist in the recovery process for individuals who experience co-occurring disorders
5. Aware of the need to evaluate effectiveness of personal practice
6. Understands effective use of supervision
MHRT/C Course Objectives and Competencies

**SEXUAL ABUSE, TRAUMA, AND RECOVERY**

*Definition of Trauma:* From the August 2001 *BDS Plan for Improving Behavioral Health Services for Persons with Histories of Trauma:* "Psychological Trauma, as addressed by the department, refers to interpersonal violence in the form of sexual abuse, physical abuse, severe neglect, and/or witnessing of such violence."

**LEARNING OBJECTIVES:**

Upon completion of the course, the participant will be able to:

1. Discuss vicarious traumatization and its impact on mental health workers.

2. Summarize the diagnosis of Post Traumatic Stress Disorder (PTSD) and Disassociative Identity Disorder, and other common diagnoses associated with trauma survivors.

3. Encourage and employ relationship building, i.e. interpersonal techniques, rapport building, coaching, and counseling skills.

4. Identify common misconceptions regarding sexual abuse.

5. Describe the relationship between trauma and substance abuse.

6. Explain the sociology of sexual trauma.

**COMPETENCIES:**

1. Aware of the prevalence and common effects of trauma

2. Aware of screening and assessment strategies for trauma

3. Aware of stages of recovery for survivors of trauma

4. Knowledgeable about resources to assist in the trauma recovery process

5. Aware of the need to evaluate effectiveness of personal practice

6. Understands effective use of supervision
LEARNING OBJECTIVES:

Upon completion of the course, the participant will be able to:

1. Describe the role of a case manager.
2. Conduct a comprehensive assessment.
3. Develop a collaborative service plan, with goals and action steps, that promotes participation by individuals with psychiatric disabilities and their natural supports.
4. Explain the documentation process.
5. Define the reflective practice of case management.
6. Summarize the steps in monitoring service delivery.
7. Provide examples of how to develop resources and work collaboratively with providers, family/significant others, and community supports.
8. Describe a strengths-based approach in case management.
9. Demonstrate competency in collaboration and advocacy, including skills for working with providers.
10. Promote and exhibit relationship-building skills, i.e. interpersonal techniques, rapport building, coaching, and counseling skills.
11. Discuss DHHS-OAMHS’ policies for case management in general terms.

COMPETENCIES:

1. Understands importance of community inclusion and use of natural supports
2. Understands Maine’s laws regarding rights of mental health recipients
3. Understands benefit and entitlement programs for mental health recipients
4. Understands interaction of co-occurring medical issues
5. Knowledgeable about changing treatment needs for adults in transition
COMPETENCIES (continued):

6. Understands basic social service resources and entitlements for mental health recipients

7. Knowledge of the community provider system

8. Knowledge of generic community resources, including available natural supports

9. Understands ethics and conducts practice in a professional manner

10. Aware of the need to act as a contributing member of an interdisciplinary team

11. Knowledge of confidentiality requirements

12. Aware of the need to evaluate effectiveness of personal practice

13. Understands effective use of supervision

14. Interacts effectively with community members and other professionals

15. Understands strategies that empower consumers
MENTAL HEALTH AND AGING

LEARNING OBJECTIVES:

Upon completion of the course, the participant will be able to:

1. Provide examples of various aspects of aging as a developmental process including the following:
   - physical
   - cognitive
   - psychological and emotional
   - cultural / social
   - behavioral
   - environmental

2. Explain how the aging process impacts mental illness.

3. Identify and evaluate current intervention strategies, including resources and mental health services for older adults.

4. Describe how aging impacts communication skills, including interviewing skills.

5. Summarize various types of mistreatment of older adults.

6. Discuss the roles of families and caregivers, including the stresses of older adult caregiving.

COMPETENCIES:

1. Knowledge of Americans with Disabilities Act (ADA)

2. Understands benefit and entitlement programs for mental health recipients

3. Understands interaction of co-occurring medical issues

4. Knowledgeable about changing treatment needs for adults in transition

5. Knowledge of community provider system

6. Knowledge of generic community resources including available natural supports
Application for Teaching Non-Academic Courses for MHRT/C Credit

Directions: Please refer to the DHHS-OAMHS Standards for Non-Academic MHRT/C Courses for further details and answer all questions. You may complete #3 and #5 on a separate sheet of paper.

1. Name ___________________________ Phone: __________________________
Address ___________________________ E-mail:__________________________

2. Include the name(s) of MHRT/C course(s) you teach or propose to teach. Please attach course description, curricula, syllabus, and learning objectives for each. Include examples of course evaluations.

   __________________________________________________________________________
   __________________________________________________________________________

3. Briefly describe your professional training, education, experience and other qualifications that have prepared you to teach each of these courses. Please attach a resume that describes professional positions held and education attained in chronological order with relevant transcripts, diplomas, and certificates.

4. List any professional licenses, certification, or other credentials you currently hold:

   License / certificate:            Issued by:            Expiration date:
   __________________________________________________________________________
   __________________________________________________________________________

5. Describe any teaching experience or training that has prepared you to instruct these non-academic MHRT/C courses. Attach any relevant diplomas, transcripts, or certificates related to the field of education and training.

6. Please list your 3 most recent trainings and attach evaluation summaries for each.

7. Please provide 3 written references from professionals with direct knowledge of your training and content expertise.

Please submit to:
Jacinda Dionne
USM-Muskie School, Center for Learning
45 Commerce Dr., Suite 11
Augusta, ME 04330
Maine Department of Health and Human Services
Caring..Responsive..Well-Managed..We are DHHS.