**Logo, company name

Description automatically generated Lakeshore Regional Entity**

SEDW Professional Staff Credentialing

**WSA Case ID(s)**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_       **Staff Name:**

**CMHSP**:  **Provider Agency:**

**Date of Hire (provide proof):** **Date of Termination (Provide proof):**

| **SEDW Professional Staff Qualifications Review** | | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **SERVICE PROVIDED** (please indicate which professional staff by checking box, if applicable) | **Child Mental Health Professional or Evidence of Supervision** | **SED-W 24 hr. Child Specific Annual training** (calendar year or Fiscal year) | **Evidence of 3-day new facilitator training** | **Evidence of 2 MDHHS trainings a year** | **Current License, Certification, Registration, or degree** | **Criminal background prior to hire** | **Criminal background check ongoing** | **Registered Art Therapist (ATR)** | **Certified by the National Council for Therapeutic Recreation (NCTRC)** | **Board Certified National Music Therapy Registry (MT-BC)** | **Completed MDHHS training curriculum** |
| \*Wraparound Coordinator  Homebased/Clinical Therapist |  |  |  |  |  |  |  |  |  |  |  |
| Family Training  Non-Family Training |  |  |  |  |  |  |  |  |  |  |  |
| \*\*Family Support and Training |  |  |  |  |  |  |  |  |  |  |  |
| Occupational Therapist  Physical Therapist  Other assessor or evaluator (LP, LLP, LPC, LMSW)  Speech Language Pathologist  RN/LPN  Other (please specify): |  |  |  |  |  |  |  |  |  |  |  |
| Recreation Therapeutic Specialist |  |  |  |  |  |  |  |  |  |  |  |
| Art Therapist |  |  |  |  |  |  |  |  |  |  |  |
| Music Therapist |  |  |  |  |  |  |  |  |  |  |  |
| Dietician  MD/Psychiatrist |  |  |  |  |  |  |  |  |  |  |  |

\*Wraparound Coordinator: must have 3 days new facilitator training and 2 MDHHS trainings/year; Wraparound Supervisor must have 2 MDHHS trainings/year, including 1 supervisor training.

\*\*Support partner must complete the MDHHS statewide training Curriculum and be provided regular supervision and team consultation by the treating professionals.

Child Mental Health Professional (CMHP) - Individual with specialized training and one year of experience in the examination, evaluation, and treatment of minors and their families and who is a physician, psychologist, licensed or limited-licensed master’s social worker, licensed or limited-licensed professional counselor, or registered nurse; or an individual with at least a bachelor’s degree in a mental health-related field from an accredited school who is trained and has three years supervised experience in the examination, evaluation, and treatment of minors and their families; or an individual with at least a master’s degree in a mental health-related field from an accredited school who is trained and has one year of experience in the examination, evaluation and treatment of minors and their families. For the BHT/ABA services individuals must be a BCBA or BCaBA or Psychologist working within their scope of practice with extensive knowledge and training on behavior analysis and BCBA certified by 9/30/2020.