

Mental Health Rehab Worker Qualifications

Employee Name: _____

According to MN Statute 256B.0623, Subd. 5 a “Mental Health Rehabilitation Worker” means a staff person working under the direction of a mental health practitioner or mental health professional and under the clinical supervision of a mental health professional in the implementation of rehabilitative mental health services as identified in the recipient’s individual treatment plan who: *Check the appropriate categories below and complete any additional documentation.*

Bolded qualifications are completed after a Mental Health Rehabilitation Worker has been hired.

- Is at least 21 years of age
- Has a high school diploma or equivalent
- Has successfully completed 30 hours of training during the two years immediately prior to the date of hire, or **before provision of direct services** in all of the following areas: recovery from mental illness, mental health de-escalation techniques, recipient rights, recipient-centered individual treatment planning, behavioral terminology, mental illness, co-occurring mental health illness and substance abuse, psychotropic medications and side effects, functional assessment, local community resources, adult vulnerability, recipient confidentiality; and
- Meets the qualifications in paragraph (b)
 - Paragraph b: In addition to the requirements above a mental health rehabilitation worker must also meet the qualifications in clause 1, 2 or 3 (see below)
 - 1. Has an associates of arts degree, two years of full-time postsecondary education, or a total of 15 semester hours or 23 quarter hours in behavioral sciences or related fields; is a registered nurse; or within the previous ten years has:
 - Three years of personal life experience with serious mental illness;
 - Three years of life experience as a primary caregiver to an adult with a serious mental illness, traumatic brain injury, substance use disorder, or developmental disability; or
 - 2,000 hours of supervised work experience in the delivery of mental health services to adults with a serious mental illness, traumatic brain injury, substance use disorder, or developmental disability
 - 2.
 - 1. Is fluent in the non-English language or competent in the culture of the ethnic group to which at least 20 percent of the mental health rehabilitation worker’s clients belong;
 - 2. **Receives during the first 2,000 hours of work, monthly documented individual clinical supervision by a mental health professional;**
 - 3. **Has 18 hours of documented field supervision by a mental health professional or mental health practitioner during the first 160 hours of contact work with recipients, and at least six hours of field supervision quarterly during the following year;**
 - 4. **Has review and cosignature of charting of recipient contacts during field supervision by a mental health professional or mental health practitioner; and**
 - 5. **Has 15 hours of additional continuing education on mental health topics during the first year of employment and 15 hours during every additional year of employment; or**



3. For providers of crisis residential services, intensive residential treatment services, partial hospitalization, and day treatment services:

Satisfies paragraph b, clause 2 items 2 to 4; and

Has 40 hours of additional continuing education on mental health topics during the first year of employment

*A Mental Health Rehabilitation Worker who solely acts and is scheduled as overnight staff is not required to comply with paragraph b as listed above. According to MN Statute MN Statute 256B.0623, subd. 5., paragraph (c).

**According to MN Statute 256B.0623, subd. 5, paragraph (d) "behavioral sciences or related fields" means an education from an accredited college or university and includes but is not limited to social work, psychology, sociology, community counseling, family social science, child development, child psychology, community mental health, addiction counseling, counseling and guidance, special education, and other fields as approved by the commissioner.

Additional Documentation: (Complete only applicable documentation, based on the qualifications selected on the previous page and above)

Education: _____ (list program(s))

Transcript Received: Yes No

Non-English Language: _____ (list language(s))

How does the individual meet this: _____

Hours Completed:

2,000 Hours completed (Verification of hours attached)

Reviewed By: _____

Title: _____

Date: _____