

**Indiana Family and Social Services Administration
Division of Mental Health and Addiction**

Habilitation Services Provider Certification

*Please fill out every section. Put N/A if a section is not applicable to you.

Agencies

Name:

Date:

Yes No

CMHC that is certified by the Division of Mental Health and Addiction (DMHA).

Yes No

Approved accreditation by a nationally recognized accrediting body. Please circle all that apply: AAAHC, COA, URAC, CARF, ACA, JCAHO, or NCQA

Individual Providers

Name:

Date:

The agency's individual(s) or an individual provider must meet the following requirements:

Yes No

At least 21 years of age; attach copy of picture identification card

High school diploma or equivalent; attach copy of diploma or equivalent

Name of school or agency where completed:

Date of completion:

Three years paid or personal experience with children with SED/youth with serious mental illness

Dates of experience:

Type of experience:

ATTACH RESUME

Completion of DMHA approved training program on the following topics:

Introduction to System of Care values and philosophy –

Date completed:

Name of Training:

Name of person or agency that provided training:

Participation on a Child and Family Team or Training on same subject–

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Name of Training or Facilitator observed:

Name of person or agency that provided training:

- Individual agrees to participate in child-family team meetings for all participants assigned to him/her.

- State and local criminal background screens
Attach copy of screen

- State and local Child Protective Services registry screens
Attach copy of screen

- Drug screen
Attach copy of screen

Please submit this form and copies of required documentation to the CA-PRTF Team at DMHA. Agencies are expected to maintain documentation of employee's qualifications on site and have copies available when DMHA staff complete audits.

DMHA is responsible for verifying individual or agency meets the above qualifications with checks at least every 2 years or at time of re-accreditation.