Mississippi Department of Mental Health

Edwin C. LeGrand III – Executive Director

DMH Case Management Professional Standards & Requirements

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Available through:

Mississippi Department of Mental Health
Division of Professional Licensure & Certification

IMPORTANT:
This credential is for qualified individuals who are currently employed in Mississippi's "state mental health system," as defined in this document. Please review the DMH Case Management Professional credentialing requirements in this document before submitting an application.

DMH The Mississippi Department of Mental Health
Supporting a better tomorrow today

DMH Case Management Professional Standards & Requirements

General inquiries pertaining to DMH professional credentialing and/or application assistance needs should be directed to the Mississippi Department of Mental Health (DMH) Division of Professional Licensure and Certification (PLACE).

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DMH Case Management Professional
Standards & Requirements

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ABOUT THE MISSISSIPPI DEPARTMENT OF MENTAL HEALTH

The Mississippi Department of Mental Health (DMH) administers the public mental health service delivery system in Mississippi. DMH was created in 1974 by an act of the Mississippi Legislature, Regular Session. The statute placed mental health, alcohol/drug abuse, and intellectual/developmental disabilities programs into one agency. The Mississippi Department of Mental Health is governed by the Mississippi State Board of Mental Health, a nine-member board whose members are appointed by the Governor and confirmed by the State Senate.

More information about DMH can be found on the DMH website at www.dmh.ms.gov or by contacting DMH; contact information is located inside the document cover.

***DMH Mission** - Supporting a better tomorrow by making a difference in the lives of Mississippians with mental illness, substance abuse problems and intellectual/developmental disabilities one person at a time.*

ABOUT THE DMH CASE MANAGEMENT PROFESSIONAL CREDENTIAL

Statutory authority for the certification of DMH Case Management Professionals was granted in 1996 by the Mississippi Legislature.

Section 41-4-7 of the *Mississippi Code of 1972, Annotated* authorizes the Mississippi State Board of Mental Health (through DMH) "to certify/license case managers, mental health therapists, mental retardation (i.e., intellectual/developmental disabilities) therapists," and others as deemed appropriate by the Board. In 1997, authority was expanded to include the certification/licensure of "mental health/retardation (i.e., intellectual/developmental disabilities) program administrators" and "addiction counselors."

DMH professional credentials are designed primarily for individuals who are not already professionally credentialed and who are employed in Mississippi's state mental health system.

Employment in Mississippi's "state mental health system," as defined in this document, is a mandatory requirement to apply for and hold a DMH professional credential.

The DMH Case Management Professional credentialing program is designed to promote the provision of quality case management services in Mississippi's "state mental health system."

Full certification attests to an individual's:

- Educational background;
- Relevant work experience;

- Demonstration of mastery of basic knowledge pertinent to the field of state mental health system case management service provision;
- Continued participation in relevant educational activities, through the continuing education (CE) renewal requirement; and,
- Agreement to adhere to the *DMH Principles of Ethical and Professional Conduct.*

DMH CASE MANAGEMENT PROFESSIONAL CERTIFICATION LEVELS

The DMH Case Management Professional Credentialing Program has three (3) levels of certification:

Provisionally Certified Case Management Professional (PCCMP)

- The Provisionally Certified Case Management Professional (PCCMP) credential is a temporary and nonrenewable credential.

- Provisional Certification (PCCMP) allows qualified individuals who do not meet the requirements to apply directly for full certification (CCMP) to become temporarily credentialed while pursuing full certification.

- Provisional certification is valid for up to two years (24 consecutive months) from the date of issuance; this time frame is referred to as the "Provisional Certification Period."

- Once an individual obtains the PCCMP credential, he/she progresses (upgrades) to full certification as a CCMP by successfully completing the upgrade requirements.

Certified Case Management Professional (CCMP)

- The Certified Case Management Professional (CCMP) credential is full certification. *(This credential was formerly known as CCMP-I.)*

- Full certification (CCMP) is renewable every four years, as long as renewal requirements are met.

- Individuals initially meeting the requirements for CCMP, as outlined in Chapter Three, should apply directly for this level of credential, thereby skipping provisional certification. Otherwise, an individual applies for PCCMP and then later, once upgrade requirements are met, applies for CCMP.

Certified Case Management Professional-II (CCMP-II)

The Certified Case Management Professional-II (CCMP-II) credential is full certification. *This level of credentialing was discontinued effective January 2009;* ***it is no longer available to new applicants.*** *Individuals who obtained the CCMP-II credential prior to discontinuance may continue to renew it as long as renewal requirements are met.*

PROFESSIONAL TITLES

Recognized professional titles within the DMH Case Management Professional credentialing program are:

1) DMH "Provisionally Certified Case Management Professional" or the abbreviation "PCCMP";

2) DMH "Certified Case Management Professional" or the abbreviations "CCMP" or "CCMP-I"; and,

3) DMH "Certified Case Management Professional-II" or the abbreviation "CCMP-II" *(no longer offered to new applicants).*

STATE MENTAL HEALTH SYSTEM

DMH professional credentials are valid only in Mississippi's "state mental health system."

For the purposes of DMH professional credentialing, **the "state mental health system" is defined as:**

- Programs funded and/or certified by the Mississippi Department of Mental Health and/or

- Programs certified/licensed by the Mississippi State Department of Health that are operated by the "state mental health system" (i.e., Mississippi Department of Mental Health).

Only individuals currently employed in the "state mental health system," as defined in this document (above), are eligible to apply for and hold a DMH professional credential.

UPDATES

This document is updated and revised periodically. It is the applicant/certified individual's (or other interested person's) responsibility to ensure that he/she has the most current version of this document. Affected persons must comply with, and are responsible for, provisions contained in the most current version, including utilization of current application and related forms.

NONDISCRIMINATION

The Mississippi Department of Mental Health does not discriminate because of race, color, creed, gender, religion, national origin, age, disability, or political affiliation. The Department of Mental Health promotes nondiscriminatory practices and procedures in all phases of state service administration, as well as in programs funded and/or certified/operated by the Department of Mental Health.

AMERICANS WITH DISABILITIES ACT

The Mississippi Department of Mental Health complies with all aspects of the Americans with Disabilities Act. If requested, special accommodations to aid in the completion of forms or related credentialing matters will be provided.

APPLICATION BOOKLETS

This document and the corresponding application forms are available online. Interested individuals should download a copy from the DMH website. Individuals who need a print copy should contact the Division of PLACE.

www.dmh.ms.gov

APPLICATION TIME LIMITS

Applications will remain open for two years from date of receipt. During that time, applicants have the opportunity to rectify any deficiencies. Once this time period has passed, incomplete applications, applications containing unresolved deficiencies, and applications which did not result in a credential being awarded will be void and destroyed. Various timelines relating to upgrade and renewal are covered more fully in the relevant sections of this document.

Be sure to make copies of all application forms (except the sealed materials) before submitting the application. DMH will not return forms to you or anyone else once your application has been submitted.

JURISDICTIONAL LIMITATIONS

This program is limited to the issuance of professional credentialing through the DMH Case Management Professional credentialing program. Actions of the Division of Professional Licensure and Certification, the Professional Licensure and Certification Review Board, the Department of Mental Health and the State Board of Mental Health should not in any way be construed as a recommendation for or against personnel action.

It is not the intent of DMH to monitor members of other appropriately-regulated professional credentials in Mississippi. Holding a DMH professional credential does not exempt an individual from any other professional certification/licensure required by state law.

FINAL INTERPRETATION

The Mississippi Department of Mental Health is responsible for the final interpretation of all matters pertaining to DMH professional credentialing, including (but not limited to) all provisions contained within this document. This interpretation will be considered binding on all applicants and DMH-credentialed individuals (unless otherwise preempted by the Mississippi State Board of Mental Health).

Any provisions or situations not expressly covered in this document will be handled on a case-by-case basis at the discretion of DMH, the Division of PLACE, the PLACE Review Board and, if appropriate, the State Board of Mental Health.

DIVISION OF PROFESSIONAL LICENSURE & CERTIFICATION (PLACE)

The Mississippi Department of Mental Health (DMH), Division of Professional Licensure and Certification (PLACE) is responsible for the development and implementation of DMH professional credentialing programs. Major duties of the Division include (but are not limited to):

- Promulgates standards and requirements pertaining to DMH professional credentialing;
- Administers DMH professional credentialing programs;
- Processes applications for DMH professional credentialing and related forms, paperwork and fees;
- Assists the public with information pertaining to DMH professional credentialing;
- Maintains a registry of individuals holding a DMH professional credential and provides verification of DMH professional credentials, as appropriate;
- Regulates the use of DMH professional credentialing titles; and,
- Facilitates Professional Licensure and Certification (PLACE) Review Board meetings and related matters.

PLACE REVIEW BOARD

Composition and Appointment

- The Professional Licensure and Certification (PLACE) Review Board is comprised of seven members.
- The term of office is five years; Review Board members may hold consecutive terms.
- Appointments are made by the DMH Executive Director. Attempts are made to ensure adequate representation among disciplines and programmatic types. Review Board members must hold a DMH professional credential in good standing, and at least one Review Board member must also be a DMH Central Office staff representative.
- A Chairperson is chosen by the Review Board from among its members. The Chairperson's term of office is one year. Other Review Board member functions and responsibilities may be assigned by the Review Board or Division, as needed.

Purpose and Powers

- The Review Board reviews applications for DMH professional credentialing and makes recommendations to the DMH Executive Director regarding the awarding of certification.
- The Review Board has the authority to deny applications for DMH professional certification; hold applications pending the submission of additional information; investigate complaints; conduct disciplinary hearings; and impose sanctions, if necessary.

- The Review Board receives and renders decisions regarding special requests pertaining to DMH professional credentialing. The Review Board may stipulate that special request claims be notarized and require supporting evidence to substantiate the request.
- Review Board decisions regarding either the denial of professional certification or disciplinary action may be appealed.
- The Review Board assists the Division of PLACE in developing applicable DMH professional credentialing standards and requirements and engages in continued study of best practices pertaining to DMH professional credentialing with a view of improving standards as needed.
- The Review Board will exercise such powers pertaining to DMH professional credentialing, as provided for in this document.
- The Review Board, in conjunction with the Division of PLACE, may periodically develop and promulgate additional professional standards and requirements and administrative policies and procedures (to work in concert with this document) as it deems necessary for the execution and enforcement of applicable state law and this *Standards & Requirements* document.
- Review Board members are individually exempt from civil liability as a result of any action taken by the Review Board.
- General submissions/requests to the Review Board should be submitted to the PLACE Review Board in writing c/o the Mississippi Department of Mental Health, Division of PLACE (or via email to the Division of PLACE); contact information is located inside the document cover.

Meetings

- Review Board meetings are held at least quarterly at a time and place determined by the Review Board, and at such other times as requested by the Division. Meetings may be called by the Division or Chairperson with 10 days advance notice. The 10-day notice requirement may be waived by agreement of a majority of the Review Board.
- Meeting quorum is a majority of the Review Board members present. If quorum is not present, the meeting will be adjourned until a date designated by the Chairperson or Division of PLACE staff.
- The Review Board only reviews complete applications.
- A Review Board meeting calendar, along with corresponding application deadlines, will be posted on the DMH website and will be provided to state mental health system program Staff Development Officers (SDOs) on an annual basis.
- The Division reserves the right to cancel or reschedule Review Board meetings without prior notice.

Removal of Review Board members

- A Review Board member may be removed from office if found to be in violation of any of the standards contained in this document.
- A Review Board member may be removed from office if his/her certification or licensure is no longer in good standing.

- A Review Board member must be disqualified from any business on which he/she may not make an objective evaluation or decision.
- A Review Board member subject to disciplinary action, as defined in this document, must disqualify himself/herself from any business until the complaint is resolved.
- Action by either the DMH Executive Director or a majority of the Review Board members, with Executive Director approval, is necessary to remove a Review Board member from office.

DMH EXECUTIVE DIRECTOR

The DMH Executive Director, or designee, reviews and approves/disapproves Review Board recommendations to award DMH professional credentials to individual applicants.

The DMH Executive Director, or designee, reviews and makes decisions regarding Review Board actions relating to the denial of a DMH professional credential (if appealed by the applicant/certified individual) and/or the imposition of sanctions (if appealed by the certified individual).

The DMH Executive Director, or designee, reserves the right to amend or repeal any standard or requirement contained in this document (or adopt a new standard or requirement), with appropriate prior notice. In this event, the DMH Division of PLACE will send notification of the directed change(s) to the last known address of each registered DMH-credentialed individual. The promulgated change(s) will be effective whether received by the person entitled to notice or not. Notice will also be given to state mental health system program directors or staff development officers. Change(s) made under this provision will be incorporated into the existing *Standards & Requirements* document in a timely manner.

STATE BOARD OF MENTAL HEALTH

During the administrative appeal process, an applicant/certified individual may appeal the decision of the DMH Executive Director to the State Board of Mental Health.

During the disciplinary appeal process, a certified individual may appeal the decision of the DMH Executive Director to the State Board of Mental Health.

The State Board of Mental Health, as the authorized entity under applicable state law to promulgate state mental health system credentialing programs, reserves the right to amend or repeal any standard or requirement contained within this document (or adopt a new standard or requirement) without prior notice. In this event, the DMH Division of PLACE will send notification of the directed change(s) to the last known address of each registered DMH-credentialed individual. The promulgated change(s) will be effective whether received by the person entitled to notification or not. Notice will also be given to state mental health system program directors or staff development officers. Change(s) made under this provision will be incorporated into the existing *Standards & Requirements* document in a timely manner.

PROVISIONALLY CERTIFIED CASE MANAGEMENT PROFESSIONAL REQUIREMENTS

PCCMP:

In order to be eligible to apply for the **DMH Provisionally Certified Case Management Professional credential (PCCMP), an individual must meet ALL of the requirements listed below:**

- **Employment Requirement;**
- **Education Requirement;**
- **Ethics Requirement; AND,**
- **Criminal Background Checks Requirement.**

The Employment, Education, Ethics and Criminal Background Checks requirements are outlined in the "Certification Requirements - Categories & Descriptions" section of this chapter.

PCCMP UPGRADE REQUIREMENTS

Once an individual is awarded the DMH Provisionally Certified Case Management Professional credential (PCCMP), he/she must complete the following two (2) requirements in order to upgrade to full certification as a CCMP:

- **Experience Requirement; AND,**
- **Exam/Training Requirement.**

The Experience and Exam/Training requirements are outlined in the "Certification Requirements - Categories & Descriptions" section of this chapter.

A PCCMP must complete these upgrade requirements by the end of his/her two-year Provisional Certification Period.

PCCMP upgrade timelines are covered in Chapter Six.

CERTIFIED CASE MANAGEMENT PROFESSIONAL REQUIREMENTS

NOTICE:

Individuals initially meeting the requirements for CCMP, as outlined in this chapter, should apply directly for this level of credential, thereby skipping provisional certification (PCCMP). Otherwise, an individual applies for PCCMP and then later, once upgrade requirements are met, applies for CCMP.

CCMP:

In order to be eligible to apply for the **DMH Certified Case Management Professional credential (CCMP), an individual must meet ALL of the requirements listed below:**

- **Employment Requirement;**
- **Education Requirement;**
- **Ethics Requirement;**
- **Criminal Background Checks Requirement;**
- **Experience Requirement; AND,**
- **Exam/Training Requirement.**

The Employment, Education, Ethics, Criminal Background Checks, Experience and Exam/Training requirements are outlined in the "Certification Requirements - Categories & Descriptions" section of this chapter.

CERTIFICATION REQUIREMENTS - CATEGORIES & DESCRIPTIONS

Employment Requirement

- The applicant must be currently employed at a Mississippi "state mental health system" program.
- The applicant must have responsibility for providing (or supervising) case management services.
- Employment refers to paid, not volunteer, work.

Education Requirement

- The applicant must have at least a Bachelor's degree in a mental health-, intellectual/developmental disabilities- or human services/behavioral health-related field from an approved educational institution. *If submitting a Master's degree or higher, the relevant degree must be comprised of a minimum of 30 semester hours or its equivalent.*

- **The following degree types are considered appropriate for the DMH Case Management Professional credential:** Counseling/Guidance, Social Work, Special Education, Psychology, Family and Consumer Studies, Child and Family Studies, Recreation/Leisure Studies, Nursing, Marriage and Family Studies, Rehabilitative Services/Vocational Rehabilitation, Human Developmental Psychology, Gerontology, Early Childhood Development, Sociology, Criminal Justice and other mental health- and/or intellectual disability-related fields.

- **For applicants with atypical degrees:** If the applicant's Bachelor's degree type is not listed above, successful completion of at least five (5) courses from the following areas will be considered: psychology, early childhood development, chemical dependency studies, sociology, abnormal psychology, gerontology, developmental psychology, communications, child and/or adolescent psychology, social welfare, human growth and development, human behavior, professional ethics, and/or cultural sensitivity. All or part of these courses may either be completed as part of the degree program of study or completed outside of (as add-on courses to) the degree program of study (i.e., without earning an additional degree). The requirement to hold a Bachelor's degree is not waived. Courses under this provision must be at least three (3) semester hours or the equivalent. Courses completed by applicants which are not part of the degree program of study will be evaluated during application review to determine applicability; only degrees/courses completed at an approved educational institution are considered.

- Evidence of successful degree/course completion will be designated on the official submitted transcript(s), as part of the application packet. The PLACE Review Board may also request course catalog descriptions or other documentation to verify successful course completion.

If you are applying to upgrade from PCCMP to CCMP, a new transcript is not necessary. *However, if you are applying directly for CCMP, skipping PCCMP, an official transcript is required as part of the application process.*

Experience Requirement

This requirement is only applicable to individuals applying for full certification - CCMP.

- **There is no work experience requirement to apply for provisional certification.**

- **For individuals applying for full certification (CCMP),** a minimum of one full year (12 months or its full-time equivalent) of supervised case management experience at a Mississippi state mental health system program is required. This experience may either be the provision or supervision of case management services.

- The experience requirement is based on a full-time 40-hour work week; individuals with part-time experience must report an amount of experience which is equivalent to a 40-hour work week; the Review Board will make decisions regarding part-time work on a case-by-case basis.

- Employment refers to paid, not volunteer work.

- The designated Director of Case Management Services at a state mental health system program should verify the work experience. *At his/her discretion, the state mental health system program executive director may designate an additional master's level program employee to verify the required case management experience in the event that the Director of Case Management Services is not available.*

- All submitted work experience must be submitted on the appropriate form prescribed by the Division as part of the application packet.

Exam/Training Requirement

This requirement is only applicable to individuals applying for full certification - CCMP.

There are two (2) options to satisfy the Exam/Training requirement for full certification; the individual must have completed only ONE of these two options:

Option One:

- Successful completion of DMH Case Management Orientation, a case management training and exam previously offered through DMH. Individuals who have successfully completed DMH Case Management Orientation may count it to fulfill the Exam/Training requirement.

- Individuals utilizing this option must provide acceptable documentation to show proof of successful completion. It is the individual's responsibility to provide this proof at the time of CCMP application.

Option Two:

- Successful completion of a case management-related web-based training component, as prescribed by DMH.

- The web-based training component is a customized collection of e-learning courses (and corresponding exams) designed to address basic knowledge and practical information pertinent to a case manager in the state mental heath system. DMH establishes the specific content.

- **At the time of provisional certification award, individuals will receive registration information.**

- Participants will comply with the rules of the web-based training process, as prescribed by the web-based training administrator. DMH may prescribe appropriate, non-excessive fees for the web-based training to cover administrative costs; these fees are subject to change.

- Proficiency for successful completion will be 80% for each individual exam in the customized collection of courses.

- If utilizing this option, no documentation is necessary to show proof of completion; the Division of PLACE maintains this documentation. *Individuals who complete the web-based training component through another venue may be able to count it to satisfy the Exam/Training requirement; in this instance, the individual must provide satisfactory proof of successful completion;* ***this situation will be handled on a case-by-case basis and is subject to Review Board approval.***

Ethics Requirement

All applicants must read and abide by the *DMH Principles of Ethical and Professional Conduct* located in Chapter Nine. It is the applicant's responsibility to read these principles before signing and submitting the application. The applicant should keep a reference copy.

Criminal Background Checks

As part of the application process, the Division of PLACE ensures that state mental health system employers have conducted background checks on individuals applying for DMH professional credentials. No one will be credentialed without proof of criminal background checks.

PCCMP (PROVISIONAL CERTIFICATION) APPLICATION PACKET

To apply for **temporary certification as a PCCMP**, an individual should submit an **application packet** which contains the following:

- **PCCMP Application Form**;
- **PCCMP Verification of Employment Form**;
- **Official Transcript**; and,
- **Application Fee - $30.00 fee**, payable by check or money order to the "Mississippi Department of Mental Health."

CCMP (FULL CERTIFICATION) APPLICATION PACKET

To apply for **full certification as a CCMP**, an individual should submit an **application packet** which, at a minimum, contains the following:

- **CCMP Application Form**;
- **CCMP Verification of Employment Form**; and,
- **CCMP Verification of Work Experience Form.**

Depending on the CCMP applicant's situation, the following additional CCMP application component(s) may also be required:

- **Official Transcript**

> ***If upgrading from PCCMP, no additional transcript is required.***

- **Application Fee - $30.00 fee**, payable by check or money order to the "Mississippi Department of Mental Health"

> ***If upgrading from PCCMP, no application fee is required.*** *Only individuals applying directly for CCMP pay the application fee.* ***This is a ONE TIME fee; do not pay the application fee twice.***

- **DMH Case Management Orientation Certificate/Record (if applicable)** – If the CCMP applicant is utilizing DMH Case Management Orientation to satisfy the Exam/Training requirement, a copy of the certificate/record documenting successful completion must be included in the CCMP application packet; **submission of this information is the applicant's responsibility.**

- ***Web-based Training Record (if applicable)*** - If the CCMP applicant is utilizing the web-based training component to satisfy the Exam/Training requirement and he/she completed this training through DMH, no documentation is necessary; the Division maintains this information. *However, individuals who complete the web-based training component through a venue other than DMH may be able to count it to satisfy the Exam/Training requirement; in this instance, the individual must provide satisfactory proof of successful completion, which is subject to Review Board Approval.*

Application Forms are located online at the DMH website, as an addendum to this document.

www.dmh.ms.gov

Individuals needing a print copy should contact the Division.

Before completing the Application Forms and submitting your application packet, read all Application Directions below as well as the instructions on each Application Form.

GENERAL APPLICATION GUIDELINES

General Directions

- Applicants should read all directions and application materials before beginning the application process. Each application form has specific directions which must be followed.

- Certain application forms must bear original signatures, as indicated on the form. Copies or faxes are not accepted.

- With the exception of the official transcript, all application materials must be submitted together in one application packet.

- The official transcript must be submitted in a sealed college/university envelope and document that the educational requirement has been met.

- The official transcript can either be included in the application packet or sent to the DMH Division of PLACE directly from the college/university. This is the only application piece which may be submitted separately.

- All submission deadlines reflect the date received by the DMH Division of PLACE, not postmarked dates.

- The PLACE Review Board only considers complete applications; all application deficiencies must be resolved. Each scheduled Review Board meeting has a corresponding deadline date by which complete application materials must be received. Review Board meetings may be cancelled without prior notice.

- Only forms prescribed by the Division of PLACE may be utilized to apply for certification.

- Application forms may be changed without prior notice. The most current version should be utilized.

- Once submitted, all application materials become the property of DMH. Application materials will not be returned; the applicant should keep a copy of the application materials, except those under seal. Superfluous or unnecessary application materials will be destroyed.

Application Time Limits

- Incomplete applications (including unresolved applications held pending by the Review Board for additional information), will be held for two years from the date of receipt; after two years, these applications will be void and destroyed.

- **When a PCCMP needs to upgrade to full certification, he/she must submit a new application for CCMP; no new application fee is required.**

- The upgrade application may be submitted as soon as the PCCMP meets the requirements to upgrade, but the absolute deadline to submit an upgrade application is the last working day of the month following the PCCMP's expiration date. (The PCCMP expiration date is located on the PCCMP's initial credential award letter and on the PCCMP's issued certificate.) For example, if a PCCMP credential expires in October of a given year, the CCMP upgrade application must be received by the Division by the last working day of November of that same year.

- If a PCCMP has not met the requirements to upgrade and wants to continue in the program, he/she must submit an extension request to the PLACE Review Board by the same time frame as the upgrade application would be due. Extension approval is at the discretion of the Review Board.

- **Failure to submit the upgrade application (or an extension request) by the prescribed deadline results in automatic default from the program. PCCMPs are expected to keep track of the date by which they must upgrade.**

Official Transcript

- Only official transcript(s) which show that the education requirement has been met are necessary.
- All references to college credit hours are for semester hours. Quarter hours submitted will be converted to semester hours using the standard formula (Number of Quarter Hours X .66 = Semester Hour Equivalent).
- All references to graduate degrees require at least 30 semester hours (or equivalent).
- Degrees/coursework must be completed at an approved educational institution.
- Official transcripts submitted to show proof of degree completion must illustrate that the degree has been awarded/conferred.
- If the applicant holds another DMH professional credential and has already submitted an official transcript to the DMH Division of PLACE, he/she should note this information on the application form. **As long as the Division of PLACE still has this information on file, a new transcript is not necessary.**

Verification of Employment/Criminal Background Checks

- The required form to verify an applicant's state mental health system employment includes a Background Check section. Personnel Officers must indicate whether or not criminal background checks have been conducted for each applicant, as appropriate to the applicant's position and professional responsibilities. The form will not be accepted unless the Background Check section is satisfactorily completed – no exceptions. With specific areas of interest being conviction of a crime or conviction of a felony relating to the abuse or mistreatment of other individuals, the verification of background checks should include: Convictions under the Vulnerable Adults Act; Child Abuse Registry; Sex Offense Record; Criminal Record; Motor Vehicle Registry; and, others, as appropriate to the applicant's position and professional responsibilities.

- The Verification of Employment Form must clearly show that the individual is currently employed at a Mississippi state mental health system program. If an applicant is unsure if he/she works at a program meeting the "state mental health system" definition, as outlined in this document, he/she should consult with the program's personnel office.

Verification of Work Experience

- PCCMP applications do not include documentation of completed work experience.
- CCMP applicants must document appropriate work experience. The prescribed form must be completed by the designated state mental health system Director of Case

Management Services. A record of each designated "Director of Case Management Services" is maintained by the Division of PLACE. *At his/her discretion, the state mental health system program executive director may designate an additional master's level program employee to verify the required case management experience, in the event that the Director of Case Management Services is not available.*

- The Director of Case Management Services is not permitted to complete his/her own Verification of Experience Form. In this instance, the program executive director (or other master's level program employee designated by the program executive director to verify case management experience) may verify the work experience.
- A qualified supervisor should not be a member of the individual's immediate family.
- CCMPs only need to report one year of full-time relevant work experience; a lifetime of work experience is not necessary. Volunteer work does not count.
- If relevant work experience is accrued under more than one supervisor, a separate Verification of Experience Form must be submitted for each position.
- Due to the confidential nature of the submitted Verification of Experience Form, information completed by the supervisor will not be shared with the applicant – no exceptions.

Verification of Exam/Training Requirement

- If the CCMP applicant is utilizing DMH Case Management Orientation to satisfy the Exam/Training requirement, a copy of the certificate/record documenting successful completion must be included in the CCMP application packet; **submission of this information is the applicant's responsibility.**

- ***Web-based Training Record (if applicable)*** - If the CCMP applicant is utilizing the web-based training component to satisfy the Exam/Training requirement and he/she completed this training through DMH, no documentation is necessary; the Division maintains this information. *(Individuals who complete the web-based training component through a venue other than DMH may be able to count it to satisfy the Exam/Training requirement; in this instance, the individual must provide satisfactory proof of successful completion, which is subject to Review Board Approval.)*

APPLICATION PHASE

- Individual submits a complete application packet.

- The Division of PLACE reviews application packets for completeness. Applicants are notified of any deficiencies and given an opportunity to correct the problem(s).

- Complete applications are forwarded to the PLACE Review Board. The Review Board reviews all applications, evaluates materials against established criteria and makes recommendations to the DMH Executive Director. Applicants are notified in writing if more information is needed.

  Each regularly-scheduled PLACE Review Board meeting has a corresponding deadline for receipt of complete application materials. Review Board meetings may be cancelled without prior notice.

  A Review Board meeting calendar will be posted on the DMH website and provided to program Staff Development Officers (SDOs) on an annual basis.

  To obtain a copy of the PLACE Review Board meeting calendar, visit the DMH website, contact the Division of PLACE or contact your program SDO.

- The Executive Director reviews the PLACE Review Board recommendations and approves or disapproves each application for professional credentialing.

- Each applicant is subsequently notified in writing of the status of his/her application. The possible outcomes are:

  1) **Approval** - Individual is awarded the credential.
  2) **Hold Pending** - The Review Board may request additional information from the applicant before rendering a decision/recommendation.
  3) **Denial** - The Review Board may deny initial, upgrade, or renewal applications for credentialing for the following reasons, including, but not limited to: lack of appropriate employment; failure to pay required fees; lack of appropriate educational degrees/coursework; lack of appropriate experience; failure to complete successfully upgrade requirements; failure to acquire necessary continuing education hours; unacceptable practice of the applicant; violation of the *DMH Principles of Ethical and Professional Conduct*; conviction of a crime which is a felony under federal or state law; and/or, declaration of mental incompetence by the court.

CERTIFICATION PHASE

Provisional Certification (PCCMP)

Once credentialed, the PCCMP will receive a credential award letter, followed by a temporary, provisional certificate. The credential award letter will outline:

- The length of Provisional Certification, including the PCCMP expiration date; Provisional certification is not renewable.
- The requirements the PCCMP must complete in order to upgrade to full certification; these requirements are outlined in Chapter Three.

Individuals who have been awarded provisional certification are expected to abide by the professional responsibility provisions in Chapter Nine.

Full Certification (CCMP)

Once credentialed, the CCMP will receive a credential award letter, followed by a full certificate. The credential award letter will outline:

- The length of certification, including the CCMP expiration date; the CCMP's expiration date is made to coincide with the DMH Case Management Professional four-year renewal deadline. CCMPs renew every four years by the renewal deadline. Full certification timelines are addressed in Chapter Six.

- The CCMP renewal requirements; renewal requirements are outlined in Chapter Seven.

Individuals who have been awarded full certification are expected to abide by the professional responsibility provisions in Chapter Nine.

CERTIFICATE ISSUANCE

Professional Identification

Individuals who make successful application for provisional certification will be awarded a time-limited, provisional certificate attesting to the title of "Provisionally Certified Case Management Professional" (PCCMP).

Individuals who make successful application for certification will be awarded a full certificate attesting to the title of "Certified Case Management Professional" (CCMP). CCMP is renewable every four years.

Certificates

Wall certificates issued by the DMH remain the property of DMH and must be surrendered upon request.

DMH intends that each individual hold only one certificate per professional title. DMH does not provide multiple original wall certificates.

Certificates issued by the DMH reflecting credentialing as a PCCMP are valid for up to a maximum two-year (24 consecutive months) Provisional Certification Period. The issuance and expiration dates are printed on the certificate. **Dates of provisional issuance and expiration vary from person to person.**

An individual's provisional certificate automatically becomes invalid once he/she has successfully upgraded to full certification; the individual will receive a new certificate as a CCMP.

Certificates issued by DMH reflecting credentialing as a CCMP are valid for a maximum four–year Certification Period established by the Division. The issuance date is indicated on the certificate. Full certification timelines are addressed in Chapter Six. Full certificates are renewable.

Individuals holding a DMH professional credential who are currently practicing in the state mental health system should maintain a copy of proof of certification in their personnel file.

Upon separation from state mental health system employment, the credentialed individual should notify the Division accordingly, as outlined in Chapter Nine. Unless the separating individual is reemployed with another state mental health system program or requests and receives an appropriate credential status change, the certificate is invalid.

Replacement Certificates

Only individuals in good standing who are currently employed in the state mental health system (or in Inactive Status) may request a replacement certificate. Upon written (or email) request, an individual may be allowed one replacement certificate at no charge for any of the following reasons:

- Printing Error;
- Damaged/Destroyed;
- Lost;
- Never received; or,
- Legal Name Change – (*If the request is due to a legal name change, along with the request, the individual should submit a copy of legal documentation of the name change. The request should indicate the new name as it should appear on the replacement certificate. Name changes reported at the time of a new application do not have to be accompanied by a request or a copy of the legal documentation.)*

If an individual makes more than one request for a replacement certificate, the Division reserves the right to impose the certificate replacement fee.

Once the new replacement certificate is issued, the previous certificate immediately becomes invalid. Possession and utilization of two certificates for fraudulent purposes is grounds for disciplinary action, including possible loss of credentialing.

ADMINISTRATIVE APPEAL

The terms of administrative appeal are only applicable to the application process.

An applicant aggrieved by a decision regarding the initial, upgrade or renewal application for professional certification has the right to appeal to the DMH Executive Director. The applicant must notify the Division and provide any supplemental application information within 30 calendar days of the mailing of the application review results.

The DMH Executive Director will review the application and supplemental information, if provided, and notify the applicant of the results of this review within 30 days.

An applicant aggrieved by the DMH Executive Director's final decision may then appeal to the State Board of Mental Health. Appeals to the State Board of Mental Health must be made within 30 calendar days of the mailing of the DMH Executive Director's final decision; the appeal must be made and conducted in accordance with established Board policy.

PCCMP CERTIFICATION - UPGRADE INFORMATION & TIMELINES

- The PCCMP credential is a temporary, nonrenewable certification. It is valid for up to two years or 24 consecutive months from the date of issuance. This two-year period is referred to as the PCCMP's "Provisional Certification Period."

- The Provisional Certification Period begins on the day the PCCMP credential is issued and lasts for a maximum of up to two years or 24 consecutive months.

- Once an individual is awarded the PCCMP credential, he/she will receive notification of the credentialing award, along with upgrade instructions. ***(The upgrade instructions will include registration information for the case management-related web-based training component as covered in Chapter Three).***

- DURING the 24-month Provisional Certification Period, a PCCMP must complete ALL requirements to upgrade to full certification (CCMP). **Upgrade Requirements are covered in Chapter Three.**

- It is the PCCMP's responsibility to complete all upgrade requirements.

- PCCMPs who complete the upgrade requirements may upgrade to full certification (CCMP) prior to the end of the two-year Provisional Certification Period.

- A PCCMP who does not complete all requirements to upgrade to full certification (CCMP) by the end of his/her PCCMP expiration date will default from the DMH Case Management Professional credentialing program. Default means the credential is expired, and the individual no longer holds the credential.

- In rare and extenuating circumstances, the PLACE Review Board MAY grant an extension of an individual's Provisional Certification Period.

NOTICE:

Individuals upgrading from PCCMP to CCMP must submit an application for CCMP. Upgrade from PCCMP to CCMP is not an automatic process initiated by the Division of PLACE.

- **A PCCMP should submit a CCMP application packet as soon as all upgrade requirements are met, but no later than the last working day of the month following the PCCMP expiration date.** For example, if a PCCMP credential expires in October of a given year, the CCMP upgrade application must be received by the Division by the last working day of November of that same year.

- The PCCMP expiration date is located on both the PCCMP award letter and the PCCMP original certificate. It is the PCCMP's responsibility to keep track of his/her PCCMP expiration date and corresponding CCMP upgrade application deadline.

- **The Division does not notify individuals when their PCCMP credential is expiring and the CCMP upgrade application is due.**

- Unless an extension for more time has been granted, individuals who fail to submit a CCMP (upgrade) application within established timelines will be considered to have defaulted from the program, meaning their PCCMP credential is expired. This will be an automatic action by the Division of PLACE; no default notification will be sent.

- Except in rare and extenuating circumstances, as determined on a case-by-case basis by the Review Board, an individual may not hold provisional certification more than twice. An exception to this rule may be when the individual's provisional certification expiration (default) occurred due to an individual's separation from state mental health system employment rather than a failure to meet upgrade requirements. The burden of proof falls on the PCCMP.

CCMP – CERTIFICATION LENGTH & TIMELINES

- The CCMP (and CCMP-II) credential is renewable, as long as renewal requirements are met.

- The CCMP's certification begins on the day the certification is issued. This date is located on both the credential award letter and the original CCMP certificate.

- CCMPs (and CCMP-IIs) are on a four-year certification cycle. Upon achieving full certification, a CCMP's expiration date is made to coincide with the DMH Case Management Professional renewal deadline.

- CCMPs (and CCMP-IIs) interested in maintaining the credential renew every four years by the renewal deadline.

- **Specific renewal information is covered in Chapter Seven.**

RENEWAL GENERAL INFORMATION

- Renewal is only applicable to individuals holding full certification (CCMPs and CCMP-IIs).
- Provisionally-certified individuals (PCCMPs) **DO NOT** renew.
- Individuals holding CCMP and CCMP-II are required to renew **every four (4) years** on a certification schedule established by the Division.

RENEWAL DEADLINE

- **The renewal deadline is September 30th** (or closest prior working day) of each four-year certification period.
- **Renewal deadlines will be every four years** - September 30, 2011, September 30, 2015, September 30, 2019, etc.*
- Qualified individuals will renew their certification on or before the established renewal deadline in order to maintain Current or Inactive Status.
- Individuals who fail to renew by the established deadline will have their credential automatically changed to Lapsed Status. Lapsed Status means the credential is expired, and the individual no longer holds the credential.

**Prior to January 1, 2011, the DMH Case Management Professional credentialing program was organized by two-year certification periods.*

RENEWAL REQUIREMENTS

Employment Requirement

Renewing individuals must either continue to be employed in the "state mental health system" or hold Inactive Status.

An individual who is no longer employed in the state mental health system at the time of renewal no longer meets the employment criteria for DMH professional credentialing. Unless the individual holds Inactive Status, he/she may make a request to change his/her certification status category. Certificate status information is located in Chapter Nine.

Continuing Education (CE) Requirement

A minimum of 40 successfully completed continuing education (CE) hours (10 hours per year) is required for renewal.

Continuing education hours or college course work counted for renewal must have been successfully completed **during the current four-year certification period**. Renewal periods run from October 1st to September 30th of the appropriate four-year cycle.

CEs earned outside of the current four-year certification period will not be counted; CEs may not be carried over from one renewal cycle to the next.

One continuing education hour is equal to 50 - 60 consecutive minutes in an appropriate CE activity.

Of the 40-hour CE renewal requirement, the following stipulations are included:

1) 32 of the 40 required hours must be behavioral health-related; individuals may count up to eight (8) hours in non-behavioral health-related areas, such as technology or administrative-types of training, which they or their programs deem important or necessary for continued professional enhancement.

2) Up to 12 of the required 40 hours may be obtained by presenting applicable (behavioral health-related) training events.

3) At least two (2) of the required 40 hours **must be** in the area of cultural competency.

4) At least two (2) of the required 40 hours **must be** in the area of ethics.

5) One three-semester hour (or equivalent) behavioral-health related college course from an approved educational institution, taken during the appropriate certification time period, will be accepted to fulfill the entire continuing education requirement.

6) Courses claimed for continuing education hours must be beyond the course work necessary to meet the educational requirement for DMH professional credentialing.

7) **During the individual's first renewal cycle only**, the CE renewal requirement may be prorated, if necessary. Renewing individuals for whom it is their FIRST renewal cycle are required to report one behavioral health-related CE hour per month of credentialing, beginning with the month of full certification issuance and ending with the renewal deadline month (September 30th). *For example, an individual who first obtained his/her CCMP credential in the month of January of a renewal year (which ends September 30th) would be required to report nine (9) CE hours.* This provision is only applicable to the individual's first renewal cycle.

8) DMH allows for the pre-approval of various conferences and workshops/educational activities, etc., for DMH professional credentialing continuing education hours.

> *Case Management Professionals desiring information on activities which have received CE pre-approval may contact the DMH Division of Professional Development or visit the DMH website for further information.*

9) For continuing education activities which have not been through the CE pre-approval process, the continuing education activities will be subject to the approval of the Division at the time of renewal.

10) Opportunities for CE accrual include, but are not limited to: training provided through the certified individual's place of employment (including DMH-required training as indicated in the *DMH Operational Standards for Mental Health, Intellectual/Developmental Disabilities, and Substance Abuse Community Service Providers*), DMH-sponsored training opportunities, and/or conferences/workshops approved by the Division through the DMH Division of Professional Development.

11) Continuing education activities should be presented by a qualified presenter and contain clearly-outlined learning objectives. Meetings, regular work activities, staffing sessions, breaks, social activities, etc., do not count towards fulfilling the CE requirement.

12) Any activity completed for the purpose of achieving the Case Management Professional certification (such as Case Management Orientation or the web-based Exam/Training component) is not eligible for CE credit.

Reporting the Continuing Education Requirement

Documentation of successful completion of continuing education hours (e.g., training records, staff development printouts, official college transcripts, conference certificates, etc.) should be housed with the Staff Development Officer (SDO) at the individual's current place of employment. The renewing individual should also keep a copy.

As part of the renewal process, each renewing individual is asked to attest to the fact that he/she has obtained the required number of appropriate continuing education hours.

Unless randomly-selected for audit, renewing individuals in Current Status do not submit CE documentation to the Division of PLACE. *Individuals in Inactive Status must report CE activities at the time of renewal.*

For DMH credentialing purposes only, CE documentation should be maintained for six months following the conclusion of the given renewal year.

RENEWAL APPLICATION

Prior to the renewal deadline, the Division will send a renewal notice to each certified individual's self-reported home and/or email address. The Division will also notify Staff Development Officers (SDOs) of the upcoming renewal deadline.

In addition to the general renewal directions found in this document, the renewal notice will include specific, current instructions on how to renew. Specific directions in the current year's renewal packet, along with specific directions provided on each renewal form, must be followed.

Each person who wishes to renew his/her certification must submit a renewal application packet to the Division by the established deadline which includes all required forms and fees.

Failure to receive a renewal notice does not relieve the individual from the renewal requirement. Individuals should keep their addresses/contact information updated with the Division.

RENEWAL AUDIT

Following the conclusion of each renewal period, the Division of PLACE reserves the right to audit randomly-selected renewed individuals to determine compliance with the continuing education requirement. The audit process will include a three (3) percent sample of randomly-selected renewed individuals.

If an individual is randomly selected for audit, both the individual and the program SDO will be notified. Along with the notification, the Division will provide detailed instructions for audit procedures.

If randomly selected for audit, the renewed individual (in conjunction with the program SDO) will be required to submit to the Division documentation to validate successful completion of the renewal continuing education requirement. (Examples of sufficient documentation would include, but are not limited to: training records, staff development printouts verified by the SDO, conference certificates, and official college transcripts). This documentation must be submitted within a deadline prescribed by the Division.

In the case of noncompliance, the audited individual will have up to six months to comply, during which time the credential will be placed in Suspended Status (covered more fully in Chapter 10); the individual will be unable to practice with his/her credential during the period of suspension. Failure to comply within six months will result in the automatic loss of credentialing.

SPECIAL REQUESTS DURING RENEWAL

Inactive Status Request: An individual who is not employed in the state mental health system at the time of renewal may want to request Inactive Status. Individuals must initiate this request by the established renewal deadline and submit all required renewal forms, materials and fees.

Retired Status Request: An individual who has retired from state mental health system employment at the time of renewal may want to request Retired Status. Individuals must do so by the renewal deadline.

Relinquished Status Request: An individual who no longer wants to hold the credential may request Relinquished Status. Individuals must do so by the renewal deadline.

Certification status information is covered more fully in Chapter Nine. *In addition to the information in Chapter Nine, instructions on making special requests at the time of renewal will also be included in the current renewal packet; interested individuals should contact the Division of PLACE for assistance.*

CERTIFICATE RENEWAL

Each individual who successfully renews his/her Current CCMP/CCMP-II credential may continue to use the title of "Certified Case Management Professional" and practice as such for the next four-year certification period.

Each individual who successfully renews his/her Inactive CCMP/CCMP-II credential may continue to use the appropriate title behind his/her name; however, he/she must not practice as a Certified Case Management Professional during the next four-year certification period (until he/she returns to Current Status).

The terms of administrative appeal are applicable to the renewal process.

CERTIFICATE EXPIRATION

Renewal Deadline

- The renewal application packet and fee are due on or before September 30th (or closest prior working day, as prescribed in the current renewal notice) of the given renewal year.

- Any certified individual wishing to request Inactive, Retired or Relinquished Status at the time of renewal must submit the request so that the Division receives it by the established renewal deadline. Otherwise, without proper renewal, the individual's credential will automatically be changed to Lapsed Status.

- Unless successfully renewed, an individual's certificate ceases to be valid after September 30th at the end of the certification period.

- Any certified individual for whom the Division has not received a renewal application packet (or a special request) by September 30th will be expired; his/her certification status will automatically be changed to Lapsed Status.

"Late Renewal"

- Between October 1st and October 31st (or closest prior working days, as determined by the Division), professional certification which has lapsed due to failure to renew may be rectified upon submission of all required renewal forms, materials, and payment in full of the Renewal Fee PLUS payment of a Late Renewal Fee.

- All problems with renewal applications (or special requests submitted at the time of renewal) must be resolved by October 31st (or closest prior working day, as determined by the Division).

- Incomplete renewal applications or renewal applications with unresolved deficiencies received by the renewal deadline may be maintained on file through October 31st (or closest prior working day) to allow individuals an opportunity to resolve problem(s). After October 31st (or closest prior working day, as determined by the Division), these credentials are expired and automatically changed to Lapsed Status if the deficiencies were not satisfactorily resolved by this date - no exceptions.

- The certification of any individual who has not successfully completed either renewal or a special request by October 31st (or closest prior working day, as determined by the Division) is expired. The status of any such individual's credential will automatically be changed to Lapsed Status.

Beginning November 1st

On and after November 1st, an individual who failed to renew or successfully make a status change remains in Lapsed Status and will not be allowed to renew.

Following the conclusion of renewal season, each state mental health system program will be provided a list of program employees whose credentials lapsed.

FEE SCHEDULE

- **Application Fee:** **$30.00**

  *This fee is due with the submission of an initial application packet; this is a **ONE-TIME** fee.*

IMPORTANT:

Individuals who paid the application fee when applying for PCCMP DO NOT PAY this fee again when applying to upgrade to CCMP.

Individuals applying directly for CCMP (thus skipping PCCMP) must pay this one-time fee.

- **Web-based Exam/Training Fee:** **As prescribed by DMH**

  DMH may prescribe appropriate, non-excessive fees for the web-based training component to cover administrative costs; this fee is subject to change.

- **Renewal Fee:** **$40.00** *(subject to change at renewal)*

  This fee is due with the submission of the renewal packet; this fee is subject to change at the time of renewal and is reflected in the current renewal notice.

- **Late Renewal Fee:** **$25.00**

  In addition to the renewal fee, this additional fee is assessed when an individual has allowed his/her certification to lapse after the prescribed renewal deadline but wishes to renew during a brief "late renewal" time period.

- **Certificate Replacement Fee:** **$15.00**

  If an individual makes more than one request for a replacement certificate, the Division reserves the right to impose the certificate replacement fee. Refer to Chapter Five for more information.

- **Reinstatement Fee:** **$30.00**

  This fee is assessed when an individual makes a request to reinstate his/her certification.

- **Mailing Label Fee:** **$35.00**

  This fee is due with the request for mailing labels. This fee is applicable per category of professional credentialing. Mailing label requests will be processed within 14 working days of receipt; the Division reserves the right to refuse any request for mailing labels.

- **Returned Check Fee:** **$25.00**

  This fee may be imposed by the Division for any check returned due to insufficient funds. Once a return check fee is imposed, remittance to correct the problem will only be accepted via money order.

GENERAL FEE PROVISIONS

- All fees pertaining to DMH professional credentialing are nonrefundable and nontransferable.
- If an application or other credentialing fee is submitted in error, it will not be refunded.
- Fees are subject to change, with appropriate prior notice.
- Fees are not prorated.
- Fees must be paid in full by check or money order made payable to the Mississippi Department of Mental Health. **Cash is not accepted.**
- Fees are subject to deposit upon receipt; checks are not held for deposit.
- No application, renewal application, etc., is considered complete without the required fees.
- Processing of an application, renewal application, etc., will cease immediately upon return of a check due to insufficient funds.
- An individual or program whose check has been returned due to insufficient funds may remedy the situation by paying the appropriate fee PLUS the Returned Check Fee by money order only (by a deadline prescribed by the Division).
- Employers may pay multiple employees' credentialing fees with one check. The check and associated applications/renewal applications, etc., must be submitted together - no exceptions. The employer must clearly identify and match each person and purpose the check covers with the corresponding check. Otherwise, the Division reserves the right to return the fee/materials to the program.

SCOPE OF PRACTICE

- DMH professional credentials are valid only in Mississippi's "state mental health system." DMH Case Management Professionals may only use the title if actively employed in the state mental health system *(or in Inactive Status).*

- Provisionally Certified Case Management Professionals and Certified Case Management Professionals are certified to provide or supervise case management services involving application of the principles, methods and procedures of case management service provision within Mississippi's state mental health system.

- The principles, methods and procedures of case management service provision provided by Provisionally Certified Case Management Professionals and Certified Case Management Professionals are expected to be in compliance with the *DMH Operational Standards for Mental Health, Intellectual/Developmental Disabilities, and Substance Abuse Community Service Providers.*

- DMH Case Management Professionals should only practice within the boundaries of their credential(s) held.

- This certification does not qualify an individual to provide services outside this scope of practice or in private practice. Practicing beyond the scope of practice may lead to sanctions as described in Chapter 10.

- A person issued a certificate by the Department of Mental Health may use the title appropriate to his/her category of professional certification while in the employ of a state mental health system program *(or while in Inactive Status).*

- Professional identification is directly affected by employment. DMH-credentialed individuals who experience a change in or separation from state mental health system employment are expected to follow the relevant guidelines below.

REPORTING CHANGES IN VITAL INFORMATION

Credentialed individuals are required to notify the Division within 14 working days of a change in legal name, address or employment.

Name Change

Each credentialed individual should ensure that his/her current wall certificate bears his/her current legal name. An individual whose legal name has changed is expected to request a new certificate reflecting the new name. Once the new certificate is generated, the previous certificate is invalid.

To request a name change, the individual should submit a written/email request for a name change, along with a copy of legal documentation of the name change. The request should indicate the new name as it should appear on the replacement certificate. Name changes reported at the time of a new application (i.e., upgrade or renewal application) do not have to be accompanied by a request or copy of the legal documentation.

Only individuals in good standing who are currently employed in the state mental health system *(or in Inactive Status)* may request a replacement certificate.

Address Change

An individual whose email address, mailing address and/or telephone number has changed is expected to contact the Division with the new information.

Employment Change

Upon separation of the credentialed individual from state mental health system employment, the individual's DMH professional credential will become null and void unless he/she provides notification of reemployment in the state mental health system or requests and receives an appropriate credential status change according to the procedures established by the Division, as covered in the "Separation From State Mental Health System Employment" section below.

Notification of a change in **place** of employment (**not job title**) must be submitted in writing/email to the Division of PLACE by either the credentialed individual **OR** the place of employment from which the credentialed individual is separating.

An individual who is either leaving state mental health system employment or changing to a new state mental health system program should follow the requirements under "Separation From State Mental Health System Employment" below.

SEPARATION FROM STATE MENTAL HEALTH SYSTEM EMPLOYMENT

It is the credentialed individual's responsibility to keep track of his/her employment situation (and the potential for notification of separation of employment via the separating employer), accordingly.

Once the Division receives written/email notification of separation from employment (as outlined above), the Division will allow the individual a period of **up to 45 calendar days from the date of notification** to pursue one of the following options:

1) **If the individual has become employed with a new "state mental health system" program**, the individual should update his/her employment information with the Division by submitting a new Verification of Employment Form from the new place of employment.

2) **If the individual IS NO LONGER EMPLOYED in the "state mental heath system,"** the individual may request with the Division a status change for his/her credential. Status change options include:

- Request Relinquished Status (available to provisional and full certification);
- Request Extended Status (available only to provisional certification);
- Request Inactive Status (available only to full certification); and,
- Request Retired Status (available only to full certification).

More information on credentialing statuses and how to obtain a status change is listed under the "Credential Status Change Requests," "Provisional Certification Status Categories" and "Full Certification Status Categories" sections below.

During this 45-day period, unless employed in a state mental health system program and in good standing, individuals in this situation are not allowed to practice.

At the end of the 45-day period, if no appropriate action is taken by the credentialed individual to either: 1) update his/her employment or 2) request an appropriate status change, the credential will expire and be changed to either Lapsed or Defaulted Status, as appropriate; this is an automatic process – no notification by the Division will be made. Lapsed and Defaulted Status mean the credential is expired, and the individual no longer holds the credential.

Status change requests initiated by the credentialed individual are subject to Review Board approval.

If a DMH-credentialed individual has a question about what to do if he/she has left state mental health system employment, the individual should contact the Division for assistance at the earliest indication of such separation.

DMH-credentialed individuals must be aware that notification of separation of employment may come from either the separating employer OR the credentialed individual. The Division **does not** notify a certified individual when a separating employer has made this notification. **The certified individual is held to the 45-day time frame, regardless of whether the notification of employment separation came from the certified individual or the separating employer.**

CREDENTIAL STATUS CHANGE REQUESTS

Credentialed individuals needing to make a status change request should submit the request in writing (or via email) to the Division of PLACE, along with any pertinent supporting information. Applicable credentialing timelines must be met. Individuals needing assistance regarding status change requests should contact the Division for assistance. Contact information is located inside the document cover. **Status change requests initiated by the credentialed individual are subject to Review Board approval.**

PROVISIONAL CERTIFICATION STATUS CATEGORIES

The following status categories are applicable to individuals holding the Provisionally Certified Case Management Professional credential (PCCMP).

Current Status

An individual holding provisional certification which is in good standing (including timely submission of all forms, fees, changes of information, etc.) and without sanctions will be considered to be in Current Status. An individual whose credential is in Current Status is able to practice within the scope of practice of this credentialing program and the ethical standards/principles.

In order to maintain Current Status, a PCCMP is expected to notify the Division in writing (or via email) within 14 working days of a change in vital information such as name, address, employment, etc.

The name of a person whose credential is in Current Status will appear on any list produced by the Division if he/she is Current at the time the list is produced.

Extended Status

Extended Status – General Information:

- Extended status will only be granted to a PCCMP who is in good standing at the time of the request.

- To obtain an extension, the individual should submit a written/email request to the Division of PLACE. The Division will subsequently present the request to the Review Board. In the request, the PCCMP should specifically request Extended Status, provide an explanation as to why the extension is needed and indicate a specific time period for the extension. Any documentation which supports the request should also be submitted. The Review Board may verify the circumstances surrounding the request.

- An individual on Extended Status is expected to comply with the terms of the extension as granted by the Review Board. Failure to do so may result in Defaulted Status.

Extended Status – Individual needs more time to upgrade:

- Due to extenuating circumstances, the Review Board may grant Extended Status to an individual who is unable to complete all requirements to upgrade to full certification within the required two year (24 consecutive months) time limit. An extension is intended to allow a PCCMP additional time to complete the upgrade requirements. An individual granted Extended Status who is currently employed in the state mental health system is allowed to practice as a PCCMP and is expected to complete all requirements of provisional certification by the approved deadline for the extension.

Extended Status – Individual has left State Mental Health System Employment:

- The Review Board may also grant Extended Status to a PCCMP who has temporarily left employment in a state mental health system program. An individual granted an extension due to having left state mental health system employment may neither practice as a PCCMP nor register for any Case Management Professional certification activities for upgrade. An individual on Extended Status for this reason would need to submit a written/email request to be returned to Current Status, along with a new Verification of Employment Form from the individual's new place of employment.

- Upon returning to Current Status, the individual will again be allowed to practice as a PCCMP and will be able to register for and attend Case Management certification activities required for upgrade. An individual who was previously in Extended Status and who has been returned to Current Status is expected to complete all requirements of provisional certification by the approved extension deadline.

Defaulted Status

Defaulted Status means the individual's provisional credential has expired and is no longer valid. A PCCMP may default for the following reasons including, but not limited to:

- Failure to complete all upgrade requirements during the two-year, 24 consecutive month Provisional Certification Period;
- Failure to submit an upgrade application so that it is received by the Division within established timelines;
- Failure to submit a request for Extended Status, or other status change request, so that it is received within established timelines;
- Review Board's determination of failure to submit a satisfactory request for Extended (or other) Status;
- Failure to comply with the terms of an extension granted by the Review Board; and/or,
- Separation from employment in the state mental health system without appropriate change in status category.

Upon defaulting from the Case Management Professional certification program, the individual immediately ceases to hold provisional certification (PCCMP).

Defaulting from the program immediately overrides any other status category held by a provisionally-certified individual.

To return to Current Status, an individual in Defaulted Status would be required to repeat the application process meeting all current requirements, including any specific requirements determined necessary by the Review Board.

Except in rare and extenuating circumstances, as determined on a case-by-case basis by the Review Board, a PCCMP who has defaulted twice will not be allowed to reapply for this credentialing program a third time.

Relinquished Status

A provisionally-certified individual who determines that he/she no longer needs/wants to hold and maintain professional certification may submit a written/email request to the Review Board requesting Relinquished Status. The Review Board may verify the circumstances surrounding the request. Once approved for Relinquished Status, the individual no longer holds the credential. The individual's certificate is null and void.

To return to Current Status, a provisional individual in Relinquished Status would be required to repeat the application process, meeting all current requirements, including any specific requirements determined necessary by the Review Board.

FULL CERTIFICATION STATUS CATEGORIES

The following status categories are applicable to individuals holding full certification as a Certified Case Management Professional (CCMP).

Current Status

An individual holding certification which is in good standing (including timely submission of all forms, fees, changes of information, etc.) and without sanctions will be considered to be in Current Status. An individual whose credential is in Current Status is able to practice within the scope of practice of this credentialing program and the ethical standards/principles.

In order to maintain Current Status, a CCMP is expected to notify the Division in writing (or via email) within 14 working days of a change in vital information such as name, address, employment, etc.

The name of a person whose credential is in Current Status will appear on any list produced by the Division if he/she is Current at the time the list is produced.

Inactive Status

The Review Board may grant Inactive Status to a fully-certified individual who is leaving employment in the state mental health system and who wishes to maintain the credential.

Inactive Status will only be granted to a fully-certified individual who is in good standing (Current Status) at the time of the request. In order to pursue Inactive Status, the certified individual must submit a written/email request to the Division of PLACE. The Division will present the request to the Review Board.

In the request, the fully-certified individual should request Inactive Status, provide an explanation as to why the status change is needed and indicate a specific time period for the inactivity. Documentation which supports the request may be submitted along with the request. The Review Board may verify the circumstances surrounding the request.

Individuals granted Inactive Status must meet renewal requirements, including payment of required fees and completion of required continuing education requirements. Otherwise, the certified individual's credential will lapse.

An individual in Inactive Status is allowed to continue to use the professional title behind his/her name, but is not allowed to practice.

A person in Inactive Status may be returned to Current Status upon submission of a written/email request, along with an appropriate Verification of Employment Form reflecting current employment within the state mental health system.

Lapsed Status

Lapsed Status means the fully-certified individual's credential has expired and is no longer valid. A fully-certified individual's credential may lapse for any of the following reasons, including but not limited to:

- Failure to renew professional certification according to established timelines;
- Failure to make a special request, according to established timelines and obtain an appropriate certification status;
- Review Board's determination of failure to submit a satisfactory request for a status change;
- Failure to comply with the terms of the status change request approved by the Review Board; and/or,
- Separation from state mental health system employment without appropriate status change.

Lapsing from the program immediately overrides any other status category held by a fully-certified individual. Upon lapsing, the individual immediately ceases to hold certification.

Retired Status

The Review Board may grant Retired Status to an individual who has retired and is no longer employed in the state mental health system. Retired status is intended for individuals who have ceased working because they have either reached the age of retirement or have accumulated the number of work years to retire.

In order to pursue Retired Status, the individual (upon retirement) must submit a written/email request to the Division of PLACE. The Division will present the request to the Review Board. In the request, the individual should request Retired Status and indicate the date of retirement. The Review Board may verify the circumstances surrounding the request. The individual granted Retired Status is no longer required to meet renewal requirements/fees and is permitted to keep his/her certificate.

Relinquished Status

A fully-certified individual who determines that he/she no longer needs/wants to hold and maintain professional certification may submit a written/email request to the Review Board requesting Relinquished Status. The Review Board may verify the circumstances surrounding the request. Once approved for Relinquished Status, the individual no longer holds the credential. The individual's certificate is null and void.

CERTIFICATION REINSTATEMENT

A Case Management Professional whose full certification has expired within the past three years, as determined by the Division's records (Relinquished, Retired or Lapsed Status) and who expired in good standing, may reactivate his/her certification by requesting reinstatement, paying the reinstatement fee, paying past renewal fees (including late charges) and submitting documentation of continuing education credit as determined by the Division or Review Board. Reinstatement of certification is determined on a case-by-case basis, at the discretion of the Division and the Review Board. Individuals interested in reinstatement should contact the Division for additional information. Fees are subject to change. Reinstatement is not available to provisionally-certified individuals.

During a renewal year, an individual desiring reinstatement must wait six months before applying for reinstatement.

Beyond three years, post-expiration, total reapplication is required.

CREDENTIAL VERIFICATION & REPORTING

Upon request, the Division reports specific information about DMH-credentialed individuals. The fields of information which may be shared with individuals making inquiry are:

- Name;
- Type of certification;
- Certificate number;
- Date of issuance;
- Date of expiration;
- Credential status; and,
- Whether or not formal disciplinary action has been taken against the individual.

During renewal season, the Division reserves the right to hold such verification requests until all credentialing records are up-to-date, post renewal.

DMH PRINCIPLES OF ETHICAL AND PROFESSIONAL CONDUCT

All applicants, Provisionally Certified Case Management Professionals and Certified Case Management Professionals shall comply with ethical standards/principles ,as established by the PLACE Review Board and the Department of Mental Health.

A. Introduction

The State Legislature granted Statutory Authority for Mississippi Department of Mental Health certification/licensure programs in 1996. As a result, the Division of Professional Licensure and Certification was created to develop and implement the programs. Having been amended by the State Legislature in 1997, Section 41-4-7 of the *Mississippi Code of 1972, Annotated* currently includes a provision authorizing the State Board of Mental Health to certify/license case managers, mental health therapists, mental retardation [IDD] therapists, mental health/retardation [IDD] administrators, addiction counselors and others as deemed appropriate by the State Board of Mental Health. The Mississippi Department of Mental Health (DMH) Division of Professional Licensure and Certification (PLACE) Review Board serves as the governing body for the everyday professional conduct of DMH-credentialed individuals. Individuals credentialed through the DMH may identify with different professional associations and are often certified by other groups with promulgated codes of ethics.

The safety, health, welfare and best interest of the individuals and families receiving services, and the public at large, are the primary guiding principles for appropriate professional conduct of all individuals holding a DMH professional certification. Individuals holding a DMH professional certification should adhere to all parts of the *DMH Principles of Ethical and Professional Conduct* listed below.

Applicable federal and state laws, the principles, program policies and any other pertinent rules must be observed when conducting business as a DMH-credentialed professional. Alleged violations of the principles may be subject to disciplinary action if the Review Board finds that a person is guilty of any violation of the principles. Information on disciplinary action is covered in Chapter 10.

The *DMH Principles of Ethical and Professional Conduct* herein referred to as "the principles," provide a minimal ethical standard for the professional behavior of all individuals credentialed through DMH. The principles provide a level of expectation for ethical practice from all who hold a DMH credential. In addition, the principles provide an enforceable standard for all DMH-credentialed individuals and facilitate an avenue for recourse in case of a perceived ethical violation. While the principles cannot guarantee ethical practice by all DMH-credentialed individuals or resolve all issues, the intent of the principles is to provide guidelines for individuals who, in good faith, seek to make reliable ethical judgments. Six general principles of ethical and professional conduct follow.

B. Principle I: Competence

1) Individuals holding a current credential from the Mississippi Department of Mental Health (DMH) must be employed by a program that receives funding from or is certified or operated by the DMH.
2) Individuals who hold a DMH professional credential must notify the Division of Professional Licensure and Certification upon any change affecting credential status, especially a change in employment.
3) Individuals holding a DMH professional credential must represent themselves as competent only within the boundaries of their education, training, license, certification, supervised experience or other relevant professional experience.
4) Individuals holding a DMH professional credential must provide services only within the boundaries of their education, training, license, certification, supervised experience or other relevant professional experience. Services provided must be based on the most current information and knowledge available within the scope of services of the DMH.
5) Individuals who hold another professional credential shall abide by all principles contained herein.
6) The principles do not alleviate the individual's responsibility to other ethical, programmatic or professional guidelines. Rather, the principles must be adhered to in addition to other applicable ethical, programmatic and professional criteria.
7) Individuals holding a DMH professional credential must comply with all applicable sections of the *DMH Operational Standards for Mental Health, Intellectual/Developmental Disabilities, and Substance Abuse Community Service Providers*, as appropriate (including, but not limited to, the *Operational Standards'* sections pertaining to confidentiality and the rights of individuals receiving services).

C. Principle II: Confidentiality

1) Individuals holding a credential from DMH have an obligation to respect the confidentiality rights of the individuals with whom they work and must take reasonable precautions to preserve confidentiality.
2) Members of a treatment team or those collaborating on the care of an individual shall maintain confidentiality within the parameters of the treatment setting.
3) Confidential information may only be disclosed with appropriate valid consent from the individual receiving services or a person legally authorized to consent on behalf of the individual.
4) All information collected for the purpose of service delivery must be kept confidential and released only when authorized by redisclosure consent or state (or federal) law.
5) Individuals involved in family, couples, marital or group counseling must be informed of their individual right to confidentiality.
6) DMH-credentialed individuals must preserve the confidentiality of information shared by others, as well as agency policy concerning the disclosure of confidential information and must explain such policy to the individual receiving services.

7) When consulting with colleagues, DMH-credentialed individuals do not share confidential information that could lead to the identification of an individual who is receiving services with whom they have a confidential relationship unless they have obtained the prior consent of the person. Information may only be shared to the extent necessary to achieve the purposes of consultation.
8) Permission for the use of electronic recording of interviews must be secured, prior to the interview, from the individual receiving services or a person legally authorized to consent on behalf of the individual receiving services.
9) Confidentiality may be waived if disclosure is necessary to prevent serious, foreseeable, and imminent harm to oneself or other identifiable person or when laws or regulations require disclosure without an individual's consent.
10) The confidentiality privilege for the individual receiving services is waived if the individual brings charges against a DMH-credentialed individual.
11) Confidentiality may be waived in compliance with appropriate statutes.
12) In all instances, individuals who hold a credential from the DMH should disclose the least amount of confidential information necessary to achieve the desired purpose.

D. Principle III: Respect for People's Rights and Dignity

1) Individuals who hold a credential from DMH have a primary responsibility to the individual to whom they provide services. The respect of the fundamental rights, dignity and worth of all people is of the utmost importance.
2) DMH-credentialed individuals must be aware of and accept the cultural, individual and role differences that occur in the service delivery environment.
3) DMH-credentialed individuals do not discriminate against any individual because of race, color, creed, gender, religion, national origin, age, disability or political affiliation.
4) DMH-credentialed individuals actively work to eliminate the effect of bias on service provision, and they do not knowingly participate in or condone discriminatory practices.
5) Individuals holding a DMH credential who witness or have knowledge of unethical or discriminatory practices of other individuals who hold a DMH credential are obligated to report such practices to the Division of Professional Licensure and Certification.
6) DMH-credentialed individuals must be respectful of and responsive to individuals with cultural needs.
7) DMH-credentialed individuals must practice appropriate, relevant and sensitive interventions which enable effective work in cross-cultural situations.
8) DMH-credentialed individuals must maintain a fundamental respect for the beliefs, customs, institutions and ethnic heritages of all individuals served.

E. Principle IV: Reporting Abuse

DMH-credentialed individuals must meet reporting requirements as outlined by the Vulnerable Adults Act and the child abuse reporting statutes.

F. Principle V: Sexual Harassment/Misconduct

Sexual harassment/misconduct is considered to be any unwelcome solicitation, physical advance or verbal or nonverbal conduct that is sexual in nature. Sexual harassment/misconduct can consist of a single onerous act or multiple persistent or pervasive acts.

1) Individuals who hold a credential from DMH will not knowingly engage in behavior that is sexually harassing or demeaning to persons with whom they interact within the service delivery environment.
2) Any behavior that could be construed as sexual harassment during the DMH-credentialed individual's function of providing services for a program that is funded/certified/administered through the DMH, shall be subject to disciplinary action.

G. Principle VI: Drug Free Workplace

The Department of Mental Health adopted written policy in Section 71-7-1 through 71-7-31 of the *Mississippi Code of 1972, Annotated* which outlines state policy regarding a Drug Free Workplace. Programs funded/certified/administered and individuals who hold a credential through the Mississippi Department of Mental Health will be expected to abide by this provision.

GROUNDS FOR DISCIPLINARY ACTION

Individuals holding provisional or full certification must conduct their activities and services in accordance with applicable federal and state laws, these *Standards & Requirements*, the *DMH Principles of Ethical and Professional Conduct*, and any other applicable rules/regulations.

An individual holding provisional or full certification may be subject to disciplinary action if the Review Board finds that he/she is guilty of any of the following or has knowledge of the following and has not reported such to the Division of PLACE. Grounds for disciplinary action include, but are not limited to:

1) Negligence in the practice or performance of professional services or activities;
2) Engaging in dishonorable, unethical, unprofessional conduct of a character likely to deceive, defraud, or cause harm in the course of professional services or activities;
3) Engaging in lewd conduct in connection with professional services or activities;
4) Obtaining a Department of Mental Health certificate or renewal certificate by fraud, deceit, material deception or other misrepresentation;
5) Perpetrating or cooperating in fraud or material deception in obtaining or renewing professional credentialing or attempting the same;
6) Being convicted of any crime which has a substantial relationship to the professionally credentialed individual's activities and services or an essential element of which is misstatement, fraud, or dishonesty;
7) Being convicted of any crime which is a felony under federal or state law;
8) Engaging in or permitting the performance of unacceptable services personally or by assistants working under the credentialed individual's supervision due to the credentialed individual's deliberate or grossly negligent act or failure to act, regardless of whether actual damage is established;
9) Treating any person differently or detrimentally because of race, color, creed, age, gender, religion, national origin, disability or political affiliation;
10) Engaging in false or misleading advertising;
11) Revealing confidential information except as may be required by law;
12) Failing to inform a client of the fact that the client no longer needs the services of the credentialed individual;
13) Performing services for compensation or representing oneself as a DMH-credentialed professional while holding a certificate in Defaulted, Lapsed, Relinquished, Suspended, Surrendered, or Revoked Status;
14) Attempting to utilize the certificate issued by the Department of Mental Health for private practice or for services outside the scope of practice;
15) Engaging in any conduct considered by the Review Board to be detrimental to the profession; and/or,
16) Engaging in any conduct considered by the Review Board to be in violation of the *DMH Principles of Ethical and Professional Conduct.*

COMPLAINTS & INVESTIGATION

All complaints concerning a DMH-credentialed individual's professional service or activities must be received by the Division of PLACE.

All complaints concerning a DMH-credentialed individual must be submitted in writing, signed by the individual making the complaint, and notarized. The individual lodging the complaint should also include his/her contact information. The complaint should include the charges set forth with such clarity as to inform the Division, the PLACE Review Board and the certified individual of the issue involved. Complaints lodged with insufficient information may be unable to be addressed by the Review Board.

The Division of PLACE will log each complaint by recording the following information:

1) The DMH-credentialed individual's name;
2) The name and contact information of the complaining party;
3) The date of the complaint;
4) A brief statement of the complaint; and,
5) Disposition or attempts at settlement.

Substantial, jurisdictionally-appropriate complaints, as determined by the PLACE Review Board, will be investigated and evaluated by the Review Board, with consult, as needed, with the DMH Legal Division. A copy of all communications pertaining to complaints/investigations will be forwarded to the DMH attorney. The Review Board, with DMH Legal Division consult, as needed, will determine the necessity of a disciplinary hearing.

NOTICE OF COMPLAINT & DISCIPLINARY HEARING

Upon determination that a hearing is needed, the Review Board will notify the DMH-credentialed individual that a complaint has been received and that a disciplinary hearing will be held.

The DMH-credentialed individual shall be notified <u>at least 30 calendar days</u> before the date of the disciplinary hearing. Notification will be considered to have been given if the notice was personally received by the DMH-credentialed individual or if the notice was mailed "certified, return receipt requested" to the last known address as listed with the Division of PLACE.

The notice will inform the DMH-credentialed individual of the facts which are the basis of the complaint and which are specific enough to enable the credentialed individual to defend against the complaints. The notice of the complaint and the disciplinary hearing shall also inform the credentialed individual of the following:

1) The date, time and location of the disciplinary hearing;
2) That the DMH-credentialed individual may appear personally at the disciplinary hearing and may be represented by counsel;

3) That the DMH-credentialed individual shall have the right to produce witnesses and evidence on his/her behalf and shall have the right to cross-examine adverse witnesses and evidence;
4) That the Rules of Evidence do not apply;
5) That the disciplinary hearing could result in sanctions being taken against the DMH-credentialed individual;
6) That the Review Board will, in writing, advise the DMH-credentialed individual of any sanction(s) to be imposed and the basis for the Review Board's action; and,
7) That disposition of any formal complaint may be made by consent order or stipulation between the Review Board and the DMH-credentialed individual.

The disciplinary hearing will be an informal hearing and will be presided over by the Review Board Chairperson.

The Review Board will provide written notification to the DMH-credentialed individual as to any sanction(s) being imposed and the basis for the Review Board's action. This notification will be considered to have been given if the notice was personally received by the DMH-credentialed individual or if the notice was mailed "certified, return receipt requested" to the last known address as listed with the Division of PLACE.

If disciplinary action is taken against an individual, his/her employer (along with any applicable third party) will be notified by DMH.

All disciplinary hearing procedures are matters of public record and shall be preserved pursuant to state law. The final disposition of any disciplinary hearing will be recorded in Board minutes.

SANCTIONS

The Review Board may impose any of the following sanctions, singly or in combination, when it finds that a DMH-credentialed individual is guilty of any of the offenses referred to in the "Grounds For Disciplinary Action" section of this chapter:

1) Issuance of a letter of official reprimand to the DMH-credentialed individual;
2) Refusal to renew a certificate;
3) Restriction or limitation of the individual's scope of practice;
4) Suspension of the certificate for any period of time;
5) Revocation of the certificate;
6) Approval of the individual's request for surrender of professional credential; and/or,
7) Assessment of reasonable costs for inquiries, disciplinary hearing(s) and/or complaint resolution.

DISCIPLINARY STATUS CATEGORIES

Disciplinary status categories are applicable to individuals holding any level of credentialing available through the DMH Case Management Professional Certification Program.

Limited

1) The Review Board, as a result of disciplinary action as defined in this chapter, may choose to restrict or limit a certified individual's practice.
2) To return to Current Status, an individual in Limited Status would be required to meet all requirements as determined to be necessary by the Review Board and/or DMH Executive Director.

Suspended

The Review Board, as a result of disciplinary action as defined in this chapter, may choose to invalidate an individual's certification for any period of time.

An individual's certification may also be suspended due to noncompliance with the CE renewal requirement, as determined by the audit process described in Chapter Seven.

1) The individual's certificate shall be turned over to the Division for the period of suspension.
2) To return to Current Status, an individual in Suspended Status would be required to meet all requirements as determined to be necessary by the Review Board and/or DMH Executive Director.

Surrendered

1) The Review Board, as a result of disciplinary action as defined in this chapter, may choose to request the surrender of an individual's certificate.
2) In addition, the certified individual may request Surrendered Status. However, the certified individual's request for Surrendered Status is subject to the approval of the Review Board and/or DMH Executive Director.
3) The surrendered certificate shall be turned over to the Division.
4) To return to Current Status, an individual in Surrendered Status would be required to meet all requirements as determined to be necessary by the Review Board and/or DMH Executive Director.

Revoked

1) The Review Board, as a result of disciplinary action as defined in this chapter, may revoke an individual's certification.
2) Once professional certification is revoked, the individual must return his/her certificate to the Division.

3) Following the period of revocation established by the Review Board, the individual may reapply for certification by repeating the application process, meeting all current professional certification requirements, in addition to any additional requirements determined to be necessary by the Review Board and/or DMH Executive Director.

DISCIPLINARY APPEAL

Following a disciplinary hearing, a DMH-credentialed individual aggrieved by a decision of the Review Board related to the disciplinary action/sanctions shall have the right to appeal to the DMH Executive Director. The credentialed individual must notify the Division of PLACE within 15 calendar days of the mailing of the written notification of the Review Board's action. The DMH Executive Director shall review the DMH-credentialed individual's case and notify the credentialed individual of the results of this review within 30 days.

A DMH-credentialed individual aggrieved by the DMH Executive Director's decision regarding the appeal may then appeal to the State Board of Mental Health. Appeals to the State Board of Mental Health must be made within 30 calendar days of the mailing of the DMH Executive Director's final decision; the appeal must be made and conducted in accordance with established Board policy.

Glossary

The following **terms and definitions** apply to the DMH Case Management Professional credentialing program:

- **Applicant:** An individual who has submitted a complete application packet for DMH professional credentialing

- **Approved Educational Institution:** An institution of higher learning which is accredited by a regional accrediting body

- **Audit:** Random selection of renewed individuals for the purpose of determining compliance with the continuing education (CE) renewal requirement

- **Board:** The Mississippi State Board of Mental Health

- **Case Management:** Case management services as described in the *DMH Operational Standards for Mental Health, Intellectual/Developmental Disabilities, and Substance Abuse Community Service Providers*; case management generally refers to the provision and coordination of services that are an integral part of helping individuals access needed medical, social, educational, and other services in order to attain their highest level of independent functioning.

- **Case Management Orientation:** A case management-related training/corresponding exam which was previously administered by the DMH; one of two options for meeting the DMH Case Management Professional credentialing program Exam/Training requirement

- **Certificate:** The document issued by DMH attesting to an individual's DMH professional credential

- **Certification Period:** Individuals holding full certification are on a four-year certification schedule, referred to as the "certification period." Qualified CCMPs and CCMP-IIs renew every four years by the renewal deadline.

- **Certified Case Management Professional (CCMP):** An individual who obtains and maintains the CCMP credential through the Mississippi Department of Mental Health; this credential was formerly known as CCMP-I.

- **Certified Case Management Professional-II (CCMP-II):** An individual who obtained and maintains the CCMP-II credential through the Mississippi Department of Mental Health; (This level of credentialing was discontinued effective January 2009. Though no longer available to new applicants, those who obtained the CCMP-II credential prior to its discontinuance may continue to renew it as long as renewal requirements are met.)

- **Continuing Education (CE) Hours:** Educational/training activities required for renewal which are designed to increase the professional proficiency of an individual holding a DMH professional credential; one Continuing Education Hour (CE) consists of 50-60 consecutive minutes of training

- **Credential(ing):** A generic term referring to any or all levels of DMH professional certification

- **Director of Case Management Services:** The Director of Case Management Services provides direct oversight of a case manager's work and is the individual(s) at each Mississippi state mental health system program designated to verify the case management work experience requirement for full certification.

- **Division/Division of PLACE:** The Department of Mental Health, Division of Professional Licensure and Certification (PLACE)

- **DMH:** The Mississippi Department of Mental Health

- **DMH Executive Director:** The Executive Director of the Mississippi Department of Mental Health

- ***DMH Operational Standards for Mental Health, Intellectual/Developmental Disabilities, and Substance Abuse Community Service Providers*:** Manual published by the Mississippi Department of Mental Health which establishes and promulgates required operational standards for programs receiving DMH certification

- **PLACE Review Board/Review Board:** The Professional Licensure and Certification (PLACE) Review Board

- **Provisional Certification Period:** The Provisional Certification Period is the time period an individual holds provisional certification (PCCMP). The Provisional Certification Period begins on the day the PCCMP credential is issued and can last for a maximum of 24 consecutive months. Provisional certification is temporary and nonrenewable. By the end of the Provisional Certification Period, the PCCMP is expected to have completed all requirements to upgrade to full certification.

- **Provisionally Certified Case Management Professional (PCCMP):** An individual who obtains the PCCMP credential through the Mississippi Department of Mental Health. PCCMP is a temporary, nonrenewable certification. PCCMPs work towards full certification as a Certified Case Management Professional (CCMP).

- **Staff Development Officer (SDO):** State mental health system program employee(s) who is responsible for maintaining staff development records and assisting in the verification of ongoing continuing education for renewal applicants. The SDO also serves as a liaison between the program and the Division and as a resource to his/her program concerning DMH professional credentialing. The SDO is appointed by the Program Director; a record of SDO appointments is maintained on file by the Division.

- **State Mental Health System:** The network of programs in Mississippi which receive funding and/or programmatic certification by the Mississippi Department of Mental Health and/or programs certified/licensed by the Mississippi State Department of Health that are operated by the state mental health system (i.e., Mississippi Department of Mental Health)

- **Upgrade:** Progression (i.e., moving) from provisional (temporary) certification (PCCMP) to full certification (CCMP)

- **Web-based Training Component**: A customized collection of e-learning courses (and corresponding exams) designed to address basic case management knowledge; one of two options for meeting the DMH Case Management Professional credentialing program Exam/Training requirement

REPEAL

~~MISSISSIPPI DEPARTMENT OF MENTAL HEALTH~~

~~State of Mississippi~~

~~Albert R. Hendrix, Ph.D. - Executive Director~~

~~RULES, REGULATIONS AND APPLICATION GUIDELINES FOR THE CASE MANAGEMENT CERTIFICATION PROGRAM~~

~~Including:~~
~~Provisionally Certified Case Management Professional (PCCMP)~~
~~Certified Case Management Professional I (CCMP-I)~~
~~Certified Case Management Professional II (CCMP-II)~~

~~Division of Professional Licensure and Certification~~
~~1101 Robert E. Lee Building~~
~~239 North Lamar Street~~
~~Jackson, MS 39201~~
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~~CHAPTER 1~~

~~General Provisions~~

~~Section 1: Statutory Authority~~

~~Statutory Authority for the certification of Case Managers was granted in 1996 by the State Legislature. Section 41-4-7 of the *Mississippi Code of 1972, Annotated* was amended to include a provision authorizing the State Board of Mental Health to certify/license case managers, mental health therapists, mental retardation therapists, and others as deemed appropriate by the Mississippi State Board of Mental Health. In 1997, authority was expanded to include the certification/licensure of mental health/ mental retardation program administrators and addiction counselors.~~

~~Section 2: Non-Discrimination~~

~~The Mississippi Department of Mental Health does not discriminate against any applicant, provisional certificant, certificant or licensee because of race, color, creed, sex, religion, national origin, age, disability, or political affiliation. The Department of Mental Health promotes non-discriminatory practices and procedures in all phases of state service personnel administration, as well as in programs funded or certified/licensed by the Mississippi Department of Mental Health.~~

~~Section 3: Americans with Disabilities Act~~

~~The Department of Mental Health complies with all aspects of the Americans with Disabilities Act of 1990. If requested, special accommodations to aid in the completion of forms or in the completion of examinations will be provided.~~

~~Section 4: Purpose~~

~~The purpose of these rules shall be to develop procedures and establish requirements for:~~

~~A. Establishment of a Professional Licensure and Certification Review Board, selection of Review Board members, establishment of rules and procedures for Review Board meetings;~~

~~B. Standards and qualifications requisite in the issuance of professional certification in the three identified categories;~~

~~C. Evaluation of qualifications of individuals applying for professional certification;~~

~~D. Issuance and renewal of professional certification to qualified persons;~~

E. Setting fees necessary for the administration of the professional certification program; and,

F. Establishing criteria for disciplinary actions against certificants.

Section 5: Definitions

The following definitions are applicable to the Department of Mental Health Case Management Certification Program.

A. Applicant: An individual who has submitted a complete application packet for any of the three levels of certification.

B. Approved Educational Institution: An institution offering an undergraduate and/or graduate degree, which is accredited by a regional accrediting body.

C. Board: The Mississippi State Board of Mental Health.

D. Case Management: Case management services as described in the *Department of Mental Health Minimum Standards for Community Mental Health/Mental Retardation Services*.

E. Case Management Core Training Program (CM-CTP): A training program comprised of training workshop(s) and written exam(s), as appropriate, developed by/under the direction of the Department of Mental Health for the purpose of providing all DMH-certified Case Management Professionals with the same foundation of knowledge. See Chapter 3, Section 7, pp. 17-21 for more information on the CM-CTP.

F. Certificant: An individual who holds a Department of Mental Health professional credential as a Certified Case Management Professional I (CCMP-I) or Certified Case Management Professional II (CCMP-II).

G. Certificate: The issued document attesting to an individual's professional credentials, including both provisional certificates for PCCMPs and full certificates for CCMP-Is and CCMP-IIs. See Chapter 4, Section 6, C., p. 34 for more information on the issuance of certificates.

H. Certification Period: A specific two-year period of time designated by the Division of Professional Licensure and Certification during which individuals may hold professional certification as a CCMP-I or CCMP-II. An individual may become fully certified as a CCMP-I or CCMP-II at any time during the Certification Period. However, at the end of the established Certification Period, each individual is expected to renew his/her certification. For more information on timelines surrounding certification, see Chapter 3, Section 4, B., pp. 13-14 and Section 5, B., p. 15. See Chapter 4, Section 7, B., p. 35 and Chapter 5, Section 1, A., p. 37 for more information on Certification Periods.

~~I. Certified Case Management Professional I (CCMP-I): A Bachelor's level individual who provides direct case management services to individuals with mental illness/emotional disturbance or mental retardation/developmental disabilities or who supervises the direct provision of such services and who meets all certification requirements for CCMP-I as defined by the certification process in Chapter 3, Section 4, pp. 13-15 and Chapter 4, Section 3, pp. 31-32.~~

~~J. Certified Case Management Professional II (CCMP-II): A Master's level individual who provides direct case management services to individuals with mental illness/ emotional disturbance or mental retardation/developmental disabilities or who supervises the direct provision of such services and who meets all certification requirements for CCMP-II as defined by the certification process in Chapter 3, Section 5, pp. 15-16 and Chapter 4, Section 4, pp. 32-33.~~

~~K. Contact Hours: The unit of measurement that is used to designate participation in an educational/ training program designed to increase the professional proficiency of an individual holding Department of Mental Health professional certification. One Contact Hour consists of 60 minutes of training.~~

~~L. CM-CTP: The Case Management Core Training Program.~~

~~M. Credential: A general term referring to any or all levels of professional certification or licensure.~~

~~N. Division: The Department of Mental Health Division of Professional Licensure and Certification, also known by the acronym PLACE.~~

~~O. DMH: The Mississippi State Department of Mental Health.~~

~~P. Exam: A written test which is given, as appropriate, within the context of the Case Management Core Training Program.~~

~~Q. Executive Director: The Executive Director of the Mississippi State Department of Mental Health.~~

~~R. Grandfathering Period: A specific introductory time period during which certain application provisions are enacted. For the Case Management Certification Program, the grandfathering period is July 1, 2005 – June 30, 2007. See Chapter 3, Section 8, pp. 21-23 and Chapter 4, Section 8, pp. 35-36 for more information on grandfathering period provisions.~~

~~S. PLACE: The Mississippi Department of Mental Health Division of Professional Licensure and Certification. See also "Division."~~

~~T. Program Director: The top-level administrator of a facility or program, such as the Director of a DMH facility or the Executive Director of a regional Community Mental~~

~~Health/Mental Retardation Center. This term does not include mid-level administrators who are in charge of a program component.~~

~~U. Provisional Certificant: An individual who holds provisional certification as a Provisionally Certified Case Management Professional (PCCMP).~~

~~V. Provisional Certification Period: The period of time an individual holds provisional certification. This period begins on the day provisional certification is issued and can last for a maximum of up to twenty-four (24) consecutive months. By the end of the Provisional Certification Period, a provisional certificant is expected to have completed ALL requirements of provisional certification and is expected to apply for an upgrade. See Chapter 3, Section 2, B., pp. 10-12 and Section 3, pp. 12-13, as well as Chapter 4, Section 7, A., p. 35 for more information on the Provisional Certification Period.~~

~~W. Provisionally Certified Case Management Professional (PCCMP): An individual who holds temporary certification [maximum twenty-four (24) months] and who is in the process of working toward full certification as either a Certified Case Management Professional I or II. This individual has met the requirements for PCCMP as defined by the certification process in Chapter 3, Section 2, pp. 10-12 and Chapter 4, Section 2, pp. 30-31.~~

~~X. Review Board: The Professional Licensure and Certification Review Board.~~

~~Y. Staff Development Officer (SDO): Professional employee of a program as described in Chapter 3, Section 1, C., p. 9 responsible for maintaining staff development records and verifying ongoing inservice/training for renewal applicants. See Chapter 5, Section 7, pp. 44-45 for more information on the role of the SDO.~~

~~Z. State Mental Health System: The network of programs within the State of Mississippi which receive funding or programmatic accreditation from the Mississippi Department of Mental Health. See Chapter 3, Section 1, C., p. 9 for a description of the state mental health system.~~

~~AA. Supervisor: The individual who provides direct oversight of a case manager's work; also known as a Case Management Supervisor. See Chapter 3, Section 6, pp. 16-17 and Chapter 4, Section 1, F., pp. 27-28 for more information on supervisor requirements.~~

~~BB. Upgrade: The concept of moving up from one level of professional credentialing to another within the Department of Mental Health Case Management Certification Program. There are three types of upgrade possible:~~

~~1) PCCMP to CCMP-I;~~
~~2) PCCMP to CCMP-II; and,~~
~~3) CCMP-I to CCMP-II.~~

~~Upgrading is intended to streamline the application process and eliminate unnecessary duplication of previously submitted information. More information on upgrading can be found in Chapter 3, Sections 4 and 5, pp. 13-16 as well as in Chapter 4, Sections 3 and 4, pp. 31-33. See also "Upgrade Option" below.~~

~~CC. Upgrade Option: The choice made by a CCMP-I to submit an application to upgrade to CCMP-II at the time of renewal rather than renew the CCMP-I credential. Specific requirements and timelines are applicable to this option. See Chapter 5, Section 1, F., p. 38 and Section 6, pp. 43-44 for more information on the Upgrade Option.~~

~~CHAPTER 2~~

~~Organization~~

~~Section 1: Division of Professional Licensure and Certification (Division)~~

~~A. Pursuant to 1996 Legislative action, the Mississippi Department of Mental Health (DMH) established the Division.~~

~~B. The Division is responsible for the development and implementation of DMH professional certification and licensure programs required by 1996 and subsequent Legislative action.~~

~~C. The Division is responsible for the acceptance and processing of all applications for professional certification and licensure and all other related forms/paperwork/fees.~~

~~D. The Division will be responsible for the interpretation of all rules pertaining to professional certification and licensure and this interpretation will be considered binding on all applicants.~~

~~E. Information, opinions and recommendations made by the Division to the State Board of Mental Health will not be considered binding on the Board if Board action is required.~~

~~Section 2: Professional Licensure and Certification Review Board (Review Board)~~

~~A. Composition and Appointment~~

~~(1) The Review Board shall be composed of five members. Through June 30, 1998, the Review Board shall be comprised of Department of Mental Health staff appointed by the Executive Director.~~

~~(2) Beginning July 1, 1998, the Review Board shall be comprised of DMH-certified or licensed individuals in good standing, one of whom must also be a DMH central office staff representative.~~

~~(3) Beginning July 1, 1998, the term of office of Review Board members will be five (5) years. However, the term of office for initial Review Board appointees will be staggered in annual increments.~~

~~(4) A nomination list for appointment to the Review Board will be generated by the Division for presentation to the Executive Director of the Department of Mental Health for consideration. Nominees to the Review Board must hold a DMH professional credential in good standing. From the nomination list, the Executive Director of the Department of Mental Health will appoint members to the Review Board.~~

~~(5) A Chairperson shall be chosen by the Review Board from among its members. The term of office of the Chairperson shall be for one year. Other functions and responsibilities shall be assigned to other Review Board members by the Chairperson as needed.~~

~~B. Purpose and Meetings~~

~~(1) The Review Board shall meet for the primary purpose of reviewing initial, upgrade and renewal applications for DMH professional certification and licensure, including those for the Case Manager Certification Program, and of making recommendations to the Executive Director regarding the awarding of certification.~~

~~(2) The Review Board shall also have the power to deny initial, upgrade and renewal applications for DMH professional certification and licensure, to hold applications pending the submission of additional information, to investigate complaints and to conduct disciplinary hearings and to impose sanctions, if necessary.~~

~~(3) In addition, the Review Board shall have the power to receive and make decisions regarding requests for Extended, Interrupted, Inactive, Relinquished, Retired and Surrendered status. The Review Board may verify the circumstances surrounding these requests. See Chapter 7, Sections 5, 6 and 7, pp. 51-58 and Chapter 8, Section 5, pp. 64-65 for more information on status categories.~~

~~(4) Decisions of the Review Board relating to either the denial of professional certification application or disciplinary action may be appealed. See Chapter 4, Section 9, p. 36 and Chapter 8, Section 6, p. 65 for more information on administrative and disciplinary appeal procedures.~~

~~(5) The Review Board shall meet at least quarterly at a time and place determined by the Review Board, and at such other times as requested by the Division. Meetings may be called by the Division or Chairperson with ten (10) days notice. The requirement of a 10-day advance notice may be waived by agreement of a majority of the Review Board.~~

~~(6) The quorum for a meeting shall be a majority of the Review Board. If a quorum is not present, the meeting shall be adjourned until a date designated by the Chairperson or Division.~~

~~(7) The Review Board shall review only complete applications.~~

~~C. Removal of Review Board members~~

~~(1) A Review Board member may be removed from office if found to be in violation of any of the rules and/or regulations contained herein.~~

~~(2) A Review Board member may be removed from office if his/her certification or licensure is no longer in good standing.~~

~~(3) A Review Board member must disqualify himself/herself from any Review Board business on which he/she may not make an objective evaluation or decision.~~

~~(4) A Review Board member subject to disciplinary action, as defined in Chapter 8, pp. 62-65, shall disqualify himself/herself from any Review Board business until the complaint is resolved.~~

~~(5) Absence of a Review Board member from three consecutive meetings of the Review Board may constitute grounds for removal from office.~~

~~(6) Action by either the DMH Executive Director or a majority of the Review Board members with the approval of the Executive Director is necessary to remove a Review Board member from office.~~

~~Section 3: Executive Director of the Department of Mental Health (Executive Director)~~

~~A. The Executive Director, or his designee, shall appoint members to the Review Board.~~

~~B. The Executive Director, or his designee, shall review and approve/disapprove Review Board recommendations to award professional certification or licensure to individual applicants.~~

~~C. The Executive Director, or his designee, shall review and make decisions regarding Review Board actions relating to denial of professional certification or licensure if appealed by the applicant or certificant/licensee or the imposition of sanctions if appealed by the certificant/licensee, Chapter 4, Section 9, p. 36 and Chapter 8, Section 6, p. 65.~~

~~Section 4: State Board of Mental Health (Board)~~

~~A. During the administrative appeal process, an applicant may appeal the decision of the Executive Director to the State Board of Mental Health. See Chapter 4, Section 9, p. 36.~~

~~B. During the disciplinary appeal process, a certificant or licensee may appeal the decision of the Executive Director to the State Board of Mental Health. See Chapter 8, Section 6, p. 65.~~

~~CHAPTER 3~~

~~Professional Certification Requirements~~

~~Section 1: General Provisions~~

~~A. Levels of Credentialing~~

~~Within the Case Management Certification Program, the Mississippi Department of Mental Health (DMH) offers three levels of credentialing for persons providing or supervising the provision of case management services to individuals with mental illness/emotional disturbances or mental retardation/developmental disabilities. The three levels are:~~

~~(1) Provisionally Certified Case Management Professional (PCCMP);~~

~~(2) Certified Case Management Professional I (CCMP-I); and~~

~~(3) Certified Case Management Professional II (CCMP-II).~~

~~B. Initial Certification Requirements~~

~~(1) During the Grandfathering Period for the Case Management Certification Program (July 1, 2005 – June 30, 2007), an individual may apply directly for any of the three levels of certification for which he/she is eligible. Each person should read and carefully consider which set of DMH Case Management Certification Program credential requirements best fits his/her own employment, education, experience, etc. See Section 2, pp. 10-12; Section 4, pp. 13-15; and Section 5, pp. 15-16 of this chapter for detailed credentialing requirements. See Section 8, pp. 21-23 of this chapter for information on Grandfathering Provisions. See Chapter 4, Section 8, pp. 35-36 for information on application guidelines during the Grandfathering Period.~~

~~(2) Also during the Grandfathering Period (July 1, 2005 – June 30, 2007), a Bachelor's level individual will not be required to hold PCCMP in order to register for and/or attend Module I (Case Management Orientation) or Module II (Case Management Minimum Standards Training). This means that an individual meeting all other requirements may attend the two trainings and THEN apply directly for CCMP-I.~~

~~(3) Also during the Grandfathering Period (July 1, 2005 – June 30, 2007), a Master's Level individual will not be required to hold PCCMP in order to register for and/or attend Module I (Case Management Orientation) or Module II (Case Management Minimum Standards Training). The individual could also attend Module III (Pre-Evaluation Screening Training) without holding PCCMP as long as he/she takes it through the DMH Division of Community Services. This means that an individual meeting all other requirements may attend the three trainings and THEN apply directly for CCMP-II.~~

~~(4) Following the conclusion of the Grandfathering Period, beginning July 1, 2007, all applicants will be expected to enter the program by submitting an initial application for provisional certification (PCCMP) and to meet all current requirements of the program.~~

~~(5) Also following the conclusion of the Grandfathering Period, beginning July 1, 2007, all individuals will be expected to hold PCCMP before registering for and/or attending required Modules.~~

~~C. Employment in the State Mental Health System~~

~~The professional certification issued by the DMH is designed primarily for those who are not already professionally certified and who are employed within the state mental health system. The state mental health system is comprised of the following programs which are governed by the Mississippi State Board of Mental Health:~~

~~(1) Programs which receive funding from the Mississippi Department of Mental Health;~~

~~(2) Programs which are accredited by the Mississippi Department of Mental Health;~~

~~(3) Programs which are administered by the Mississippi Department of Mental Health;~~

~~or,~~

~~(4) Programs that provide services to individuals with mental illness/emotional disturbances or mental retardation/ developmental disabilities which are designated by the Mississippi Legislature to require certification/licensure.~~

~~D. Programmatic Licensure with the Mississippi Department of Health~~

~~Persons employed by programs primarily providing services to individuals with mental illness/ emotional disturbance and/or mental retardation/developmental disabilities which are licensed by the Mississippi Department of Health in addition to Department of Mental Health programmatic accreditation may be issued professional certification, if requested.~~

~~E. Other Professional Credentials~~

~~(1) Individuals who hold professional certification or licensure in another discipline are not required to hold DMH professional certification/licensure as a requisite for employment in programs described in Section 1, C., p. 9 of this chapter.~~

~~(2) DMH professional certification/ licensure does not exempt an individual from any other professional licensure required by state law.~~

~~(3) Lack of DMH professional certification/licensure does not impede the activities or services of an individual professionally licensed under state law.~~

~~(4) A professionally certified/ licensed individual who is exempt from DMH professional certification/licensure but chooses to obtain DMH professional certification/licensure is subject to the same rules and regulations as other certificants/licensees.~~

~~(5) Revocation for cause of any professional certification/ licensure may result in disciplinary action and/or revocation by the DMH.~~

~~F. Voluntary~~

~~Mississippi Department of Mental Health professional certification shall not be required and shall be on a voluntary basis.~~

~~G. Limit of Influence~~

~~This program is limited to the issuance of professional credentialing through the Department of Mental Health Case Management Certification Program. Actions of the Division of Professional Licensure and Certification, the Professional Licensure and Certification Review Board, the Department of Mental Health Executive Director and the State Board of Mental Health should not in any way be construed as a recommendation for or against personnel action. The individual's current employer alone is responsible for personnel actions.~~

~~Section 2: Requirements for Provisionally Certified Case Management Professional (PCCMP)~~

~~A. Intended Professional Population~~

~~(1) This temporary certification is primarily for employees of the state mental health system who have less than one full year (12 months or its full time equivalent) of experience providing case management services or supervising case management services in Mississippi as described by the *DMH Minimum Standards for Community Mental Health/ Mental Retardation Services* and who also have either a Bachelor's degree or a Master's degree (or higher) in an appropriate field.~~

~~(2) This temporary certification is also for employees of the state mental health system with one or more years of experience either providing or supervising case management services in Mississippi as described by the *DMH Minimum Standards for Community Mental Health/Mental Retardation Services* and who did not obtain professional certification during the Case Management Certification Program's grandfathering period (July 1, 2005 – June 30, 2007).~~

~~(3) During the Grandfathering Period for the Case Management Certification Program (July 1, 2005 – June 30, 2007), individuals should apply for PCCMP only if they do not meet the requirements for full certification as either a CCMP-I or a CCMP-II.~~

~~(4) Following the conclusion of the Grandfathering Period, beginning on July 1, 2007, all individuals interested in applying for credentialing in the Case Management Certification Program are expected to enter the program by applying for PCCMP. Once provisionally certified, an individual is expected to meet all current requirements necessary to upgrade to either CCMP-I or CCMP-II during his/her Provisional Certification Period.~~

~~(5) The following types of educational degrees are considered appropriate for this credential: Mental Health and Mental Retardation-related degrees such as Counseling, Psychology, Social Work, Marriage and Family Therapy, Special Education, Vocational Rehabilitation, Recreation/ Leisure, Nursing and other fields, as applicable.~~

~~B. Purpose and Timelines~~

~~(1) Provisional Certification is a temporary certification with a maximum length of up to twenty-four (24) consecutive months. The purpose of Provisional Certification is to allow an individual to be temporarily professionally credentialed while pursuing full certification as either a CCMP-I or a CCMP-II.~~

~~(2) The Provisional Certification Period begins on the day provisional certification is issued and lasts for a maximum of up to twenty-four (24) consecutive months.~~ ~~**DURING the maximum twenty-four (24) month Provisional Certification Period, a provisional certificant is expected to complete ALL requirements to upgrade to either CCMP-I or CCMP-II. It is the responsibility of the provisional certificant, with the support/ cooperation of his/her employer, to complete all requirements of the Provisional Certification Period in a timely manner.**~~

~~(3) A provisional certificant who does not complete ALL requirements to upgrade to either CCMP-I or CCMP-II by the end of his/her Provisional Certification Period will be considered to have defaulted from the Case Management Certification Program. See Chapter 7, Section 6, D., pp. 54-55 for more information on Defaulted status.~~

~~(4) An individual may apply to upgrade his/her credential in less than twenty-four (24) consecutive months, but he/she must fully meet the requirements for either CCMP I or CCMP II.~~

~~(5) An individual's Provisional Certification Period ends immediately upon defaulting from the Case Management Certification Program. See Chapter 7, Section 6, D., pp. 54-55 for more information on Defaulted status.~~

~~(6) Provisional certification is NOT renewable.~~

~~(7) In rare and extenuating circumstances, the Review Board **MAY** grant an extension of an individual's Provisional Certification Period. See Chapter 7, Section 6, B., pp. 52-53 for information on how to request Extended status.~~

~~(8) Provisional certificants who leave employment within the state mental health system during the Provisional Certification Period will be considered to have defaulted from the program unless they have requested and have been granted Interrupted status. See Chapter 7, Section 6, C. and D., pp. 53-55 for more information on Interrupted and Defaulted status categories.~~

~~C. Requirements for PCCMP~~

~~To apply for Provisionally Certified Case Management Professional (PCCMP), each individual must meet the following requirements:~~

~~(1) Employment: Be employed in a state mental health system program as described in Section 1, C., p. 9 of this chapter.~~

~~(2) Education: Have at least a Bachelor's degree in mental health, mental retardation or a related field from an approved educational institution. If submitting a Master's degree or higher, the degree must be comprised of a minimum of at least 30 semester hours or its equivalent. See Section 2, A., (5), p. 10 of this chapter for more information on acceptable degree types.~~

~~**NOTE:** There is an educational provision available during the program's Grandfathering Period. See Section 8, D., p. 21 of this chapter.~~

~~(3) Experience: There is NO experience requirement to apply for provisional certification. **Submission of experience is NOT accepted as part of the application process for provisional certification.**~~

~~**NOTE:** Although there is no experience needed to apply for PCCMP, the applicant needs to be currently working at a state mental health system program where he/she is either providing case management services or supervising case management services as described by the *DMH Minimum Standards for Community Mental Health/Mental Retardation Services* OR the applicant needs to have had enough previous experience~~

~~at a state mental health system program providing or supervising case management services to meet experience requirements. Documentation of this current or previous experience will be needed to upgrade at the end of the individual's Provisional Certification Period.~~

~~D. To Apply for PCCMP~~

~~To apply for provisional certification (PCCMP), refer to Chapter 4, Section 2, pp. 30-31.~~

~~**NOTE:** In addition, there are special application guidelines during the Grandfathering Period found in Chapter 4, Section 8, pp. 35-36.~~

~~Section 3: During the Provisional Certification Period~~

~~Once an individual has been awarded provisional certification, the individual is expected to complete the following requirements DURING his or her Provisional Certification Period. See Section 2, B., pp. 10-11 of this chapter for more information on timelines regarding provisional certification.~~

~~A. Experience~~

~~(1) Provide or supervise case management services as described by the *DMH Minimum Standards for Community Mental Health/ Mental Retardation Services* under the supervision of a qualified supervisor for one full year (12 months or its full time equivalent) at a state mental health system program in the state of Mississippi. The provisional certificant should document this experience using the appropriate Verification of Experience Form found in Chapter 9. This experience will be submitted as part of the individual's application packet when applying to upgrade to either CCMP-I or CCMP-II.~~

~~(2) If the provisional certificant is depending on **previous** case management experience to meet the experience requirement for either CCMP-I or CCMP-II, he/she should document it during this time using the appropriate Verification of Experience Form found in Chapter 9. This experience will be submitted as part of the individual's application packet when applying to upgrade to either CCMP-I or CCMP-II.~~

~~B. Case Management Core Training Program Requirements~~

~~(1) Each provisional certificant who plans to upgrade to CCMP-I must successfully complete Module I and Module II during his/her Provisional Certification Period. See Section 7, pp. 17-21 of this chapter; Chapter 4, Section 1, G., pp. 28-30; and Chapter 6, Section 3, pp. 47-48 for more information on the Case Management Core Training Program.~~

(2) Each provisional certificant who plans to upgrade to CCMP-II must successfully complete Module I, Module II and Module III during his/her Provisional Certification Period. See Section 7, pp. 17-21 of this chapter; Chapter 4, Section 1, G., pp. 28-30; and Chapter 6, Section 3, pp. 47-48 for more information on the Case Management Core Training Program.

C. Submission of Upgrade Application

Upon completion of all requirements of the Provisional Certification Period, a provisional certificant is expected to submit a new application packet to upgrade to either CCMP-I or CCMP-II as soon as possible, **but no later than the last working day of the month following the conclusion of his/her Provisional Certification Period.** Individuals who fail to submit an upgrade application within established timelines will be considered to have defaulted out of the program. See Chapter 7, Section 6, D., pp. 54-55 for more information on Defaulted status.

Section 4: Requirements for Certified Case Management Professional I (CCMP-I)

A. Intended Professional Population

(1) This level of certification is for employees of the state mental health system who have at least one full year (12 months or its full time equivalent) of experience providing case management services or supervising case management services in Mississippi as described by the *DMH Minimum Standards for Community Mental Health/Mental Retardation Services* and who also have a Bachelor's degree in an appropriate field.

(2) During the Grandfathering Period for the Case Management Certification Program (July 1, 2005 – June 30, 2007), an individual who meets all requirements of full certification as a CCMP-I may apply directly for this level of credentialing.

(3) Following the conclusion of the Grandfathering Period, beginning on July 1, 2007, individuals applying for CCMP-I will be those who hold a current PCCMP credential and who have completed all requirements to upgrade.

(4) The following types of educational degrees are considered appropriate for this credential: Mental Health and Mental Retardation-related degrees such as Counseling, Psychology, Social Work, Marriage and Family Therapy, Special Education, Vocational Rehabilitation, Recreation/ Leisure, Nursing and other fields, as applicable.

B. Purpose and Timelines

(1) The purpose for the CCMP-I credential is to offer full certification for Bachelor's level individuals who work within the state mental health system and who either provide or supervise case management services as described by the *DMH Minimum*

~~*Standards for Community Mental Health/Mental Retardation Services*. Each individual must meet the established criteria in order to hold the credential.~~

~~(2) The individual's initial Certification Period begins on the day certification is issued and lasts until the end of the current two-year Certification Period established by the Division of PLACE. By the end of the Certification Period, the CCMP-I is expected to renew his/her certification, as appropriate. See Chapter 4, Section 7, B., p. 35 and Chapter 5, Section 1, A., p. 37 for more information on established Certification Periods.~~

~~(3) Upon renewal, the Certification Period for a CCMP-I is two years. It begins on July 1st and ends two fiscal years later on June 30th. See Chapter 5, Section 1, pp. 37-38 for more information on Certification Periods and renewal requirements.~~

~~(4) Rather than renewing, a certificant holding a CCMP-I may apply to upgrade to CCMP-II at the time of renewal if he/she meets all CCMP-II requirements. See Chapter 5, Section 1, F., p. 38 for more information on the Upgrade Option.~~

~~C. Requirements for CCMP-I~~

~~To apply for Certified Case Management Professional I (CCMP-I), each individual must meet ALL of the following requirements:~~

~~(1) Employment: Be employed in a state mental health system program as described in Section 1, C., p. 9 of this chapter.~~

~~(2) Education: Have a Bachelor's degree in mental health, mental retardation or a related field from an approved educational institution. See Section 4, A., (4), p. 13 of this chapter for more information on acceptable degree types.~~

~~**NOTE:** There is an educational provision available during the program's Grandfathering Period. See Section 8, D., p. 21 of this chapter.~~

~~(3) Experience: Have at least one year (12 months or its full-time equivalent) of supervised case management experience at a state mental health system program in Mississippi. This experience may be the provision of case management services or the supervision of services.~~

~~(4) Case Management Core Training Program (CM-CTP): Successfully complete both Module I and Module II of the CM-CTP during the individual's Provisional Certification Period.~~

~~**NOTE:** There are special Core Training Program provisions available during the program's Grandfathering Period. See Section 8, E., pp. 21-23 of this chapter.~~

~~D. To Apply for CCMP-I~~

~~To apply for certification as a CCMP-I, refer to Chapter 4, Section 3, pp. 31-32.~~

~~**NOTE:** In addition, there are special application guidelines during the Grandfathering Period found in Chapter 4, Section 8, pp. 35-36.~~

~~Section 5: Requirements for Certified Case Management Professional II (CCMP-II)~~

~~A. Intended Professional Population~~

~~(1) This level of certification is for employees of the state mental health system who have at least one full year (12 months or its full time equivalent) of experience providing case management services or supervising case management services in Mississippi as described by the *DMH Minimum Standards for Community Mental Health/Mental Retardation Services* and who also have at least a Master's degree in an appropriate field.~~

~~(2) During the Case Management Certification Program's Grandfathering Period (July 1, 2005 – June 30, 2007), an individual who meets all requirements of full certification as a CCMP-II may apply directly for this level of credentialing.~~

~~(3) Following the conclusion of the Grandfathering Period, beginning July 1, 2007, individuals applying for CCMP-II will be those who hold either a PCCMP or CCMP-I credential who have completed all requirements to upgrade.~~

~~(4) The following types of educational degrees are considered appropriate for this credential: Mental Health and Mental Retardation related degrees such as Counseling, Psychology, Social Work, Marriage and Family Therapy, Special Education, Vocational Rehabilitation, Recreation/ Leisure, Nursing and related fields, as applicable.~~

~~B. Purpose and Timelines~~

~~(1) The purpose for the CCMP-II credential is to offer full certification for Master's level individuals who work within the state mental health system and who either provide or supervise case management services as described by the *DMH Minimum Standards for Community Mental Health/Mental Retardation Services*. Each individual must meet the established criteria in order to hold the credential.~~

~~(2) The individual's initial Certification Period begins on the day certification is issued and lasts until the end of the current two-year Certification Period established by the Division of PLACE. By the end of the Certification Period, the CCMP-II is expected to renew his/her certification, as appropriate. See Chapter 4, Section 7, B., p. 35 and Chapter 5, Section 1, A., p. 37 for more information on established Certification Periods.~~

~~(3) Upon renewal, the Certification Period for a CCMP-II is two years. It begins on July 1st and ends two fiscal years later on June 30th. See Chapter 5, Section 1, pp. 37-38 for more information on Certification Periods and renewal requirements.~~

~~C. Requirements for CCMP-II~~

~~To apply for Certified Case Management Professional-II (CCMP-II), each individual must meet ALL of the following requirements:~~

~~(1) Employment: Be employed in a state mental health system program as described in Section 1, C., p. 9 of this chapter.~~

~~(2) Education: Have at least a Master's degree in mental health, mental retardation or a related field from an approved educational institution which is comprised of a minimum of at least 30 semester hours or its equivalent. See Section 5, A., (4), p. 15 of this chapter for more information on acceptable degree types.~~

~~**NOTE:** There is an educational provision available during the program's Grandfathering Period. See Section 8, D., p. 21 of this chapter.~~

~~(3) Experience: Have at least one year (12 months or its full time equivalent) of supervised case management experience at a state mental health system program in Mississippi. This experience may be the provision of case management services or the supervision of services.~~

~~(4) Case Management Core Training Program (CM-CTP): Successfully complete all three workshops comprising the CM-CTP (Module I, Module II and Module III) during the individual's Provisional Certification Period.~~

~~**NOTE:** There are special Core Training Program provisions available during the program's Grandfathering Period. See Section 8, E., pp. 21-23 of this chapter.~~

~~D. To Apply for CCMP-II~~

~~To apply for certification as a CCMP-II, refer to Chapter 4, Section 4, pp. 32-33.~~

~~**NOTE:** In addition, there are special application guidelines during the Grandfathering Period found in Chapter 4, Section 8, pp. 35-36.~~

~~**Section 6: Supervision Requirements**~~

~~A. Supervisor Qualifications~~

~~(1) The qualified supervisor shall be the program's designated Case Management Supervisor as described by the *DMH Minimum Standards for Community Mental Health/Mental Retardation Services*.~~

~~(2) A qualified supervisor shall not be a member of the applicant's immediate family.~~

~~(3) The designated Case Management Supervisor may not sign the Verification of Experience Form(s) for his/her own application.~~

~~(4) For more information on Supervisor qualifications, see Chapter 4, Section 1, F., pp. 27-28.~~

~~B. Documentation of Supervision~~

~~(1) All submitted work experience must be verified by the program's designated Case Management Supervisor and must be submitted on the appropriate Verification of Experience Form provided in Chapter 9A, 9B, and 9C.~~

~~(2) For more information on obtaining proper supervisor documentation, see Chapter 4, Section 1, F., pp. 27-28.~~

~~Section 7: Case Management Core Training Program (CM-CTP)~~

~~A. Purpose~~

~~(1) One purpose of the CM-CTP is to provide all DMH-certified Case Management Professionals with a common foundation of knowledge concerning the practical, ethical, legal and regulatory aspects of service delivery.~~

~~(2) Another purpose of the CM-CTP is to provide Case Management Professionals with shared learning experiences which will enhance the long-term productivity and effectiveness of the Mississippi state mental health system.~~

~~(3) Another purpose of the CM-CTP is to recognize the unique quality of the public sector case management professional.~~

~~B. Components and Costs~~

~~(1) The CM-CTP consists of three training workshops (Modules) and corresponding written exams, as appropriate, developed by/under the direction of the Mississippi Department of Mental Health (DMH). The total amount of time necessary for an individual to take all three Modules one time is projected to be approximately a week.~~

~~(2) **Module I** is comprised of the Case Management Orientation training offered through the Department of Mental Health. This training includes practical and clinical information designed specifically for the state mental health system case manager. Module I is projected to require approximately two full days of training and concludes with a written exam. Registration for Module I requires no fees.~~

(3) **Module II** is comprised of DMH Minimum Standards training designed specifically for the Case Management Certification Program which is offered through the Department of Mental Health. This training provides the individual with an overview of the *Department of Mental Health Minimum Standards for Community Mental Health/Mental Retardation Services* with particular emphasis on standards related to case management. Module II is projected to require approximately two full days of training and concludes with a written exam. During the Grandfathering Period (July 1, 2005 – June 30, 2007), registration for Module II requires no fees. Following the conclusion of the Grandfathering Period, beginning July 1, 2007, registration for Module II will require submission of a $20.00 Module/Exam Fee.

(4) **Module III** is comprised of Pre-Evaluation Screening Training offered through the Department of Mental Health and the DMH Division of PLACE. This training prepares the Master's level Case Management Professional to perform the pre-evaluation screening assessment when evaluating an individual for commitment. Module III is projected to require approximately one full day of training and concludes with a written exam. Registration for Module III includes submission of a $20.00 Module/Exam Fee.

(5) During the Case Management Certification Program's Grandfathering Period (July 1, 2005 – June 30, 2007), Module I, Module II and Module III will be available separately.

(6) Following the conclusion of the Grandfathering Period, beginning July 1, 2007, Module I and Module II will be offered in a clustered training opportunity. This will enable individuals to attend the Module I and Module II back-to-back OR to attend the Module he/she needs.

(7) More information on costs related to the CM-CTP can be found in Chapter 6, Section 1, C., p. 46 and Section 3, pp. 47-48.

(8) During the program's Grandfathering Period (July 1, 2005 – June 30, 2007), there are grandfathering provisions available related to the Case Management Core Training Program. For more information see Section 8, E., pp. 21-23 of this chapter.

C. Timeline

(1) Each provisional certificant is expected to complete all requirements to upgrade, including successful completion of the CM-CTP, DURING his/her maximum twenty-four (24) month Provisional Certification Period.

(2) Each provisional certificant is required to successfully complete the CM-CTP before applying to upgrade to either CCMP-I or CCMP-II.

(3) The Case Management Core Training Program Modules may be taken in any order.

~~(4) Modules must be attended in regular intervals to be determined by the Division.~~

~~(5) Provisional certificants are required to attend one of the Modules within the first eight months of the twenty-four (24) month Provisional Certification Period or as scheduled by the Division.~~

~~(6) See Section 8, E., pp. 21-23 of this chapter for information on time-limited Grandfathering Period opportunities.~~

~~D. Registration for a CM-CTP Module~~

~~(1) During the Grandfathering Period for the Case Management Certification Program (July 1, 2005 – June 30, 2007), registration procedures may vary. PCCMPs are expected to read and follow registration instructions provided by the Department of Mental Health.~~

~~(2) It is the responsibility of the individual to register for Modules. This includes the timely submission of all required registration forms, materials and fees, if required. Partial submission of registration materials will not be accepted for registration.~~

~~(3) Individuals holding provisional certification in Current or Extended status (but not Interrupted status) are eligible to register for and attend the CM-CTP Modules.~~

~~(4) Registration for CM-CTP Modules is not open to the general public.~~

~~(5) The CM-CTP Modules are not creditable toward inservice/ training Contact Hour requirements.~~

~~(6) Seating is limited for all Modules and registration is on a first come, first served basis. Registration for any Module will close at the end of the day on its registration deadline OR when registration reaches the maximum class size, whichever comes first.~~

~~E. Attendance Requirement~~

~~(1) Individuals attending a Module are expected to attend one hundred percent (100%) of the Module.~~

~~(2) In rare instances (i.e., family emergency, illness, etc.), examinations will be administered to individuals who have participated in at least eighty percent (80%) of the Module as determined by the Division.~~

~~(3) Anyone who finds it necessary to participate in less than eighty percent (80%) of the Module will be expected to repeat the entire Module before being allowed to sit for the written examination.~~

~~(4) Attendance will be registered at least two (2) times each day. It is the responsibility of the provisional certificant to register his/her attendance with Division staff.~~

~~F. Written Examination~~

~~(1) A written examination(s) will be administered in conjunction with each Module. Exams will only be administered to individuals who meet the attendance requirement as indicated in Section 7, E., p. 19 of this chapter.~~

~~(2) The purpose of the written exam is to evaluate the individual's level of understanding of Module content for the purpose of professional credentialing.~~

~~(3) Written exams are presented primarily in a multiple-choice format.~~

~~(4) Individuals must pass all of the required exams with a score of at least seventy percent (70%) on each exam.~~

~~(5) Only a pass/fail score is reported to the individual who has taken the exam. Upon request, Program Directors and Staff Development Officers will be provided with pass/fail status. Actual scores will be kept confidential. Individuals will be notified of pass/fail results in writing.~~

~~(6) Examination papers/materials are the property of the Department of Mental Health. Neither the examination papers/materials nor copies of examination papers/ materials will be returned to the individual.~~

~~G. Reexamination~~

~~(1) Reexams will be administered on a schedule to be determined by the Department of Mental Health.~~

~~(2) During the Grandfathering Period for the Case Management Certification Program (July 1, 2005 – June 30, 2007), registration procedures for reexams may vary. PCCMPs are expected to read and follow registration instructions provided by the Department of Mental Health.~~

~~(3) It is the responsibility of the individual to register for and attend any opportunity to sit for a reexamination.~~

~~(4) Failure to register for or failure to attend a reexamination results in forfeiture of the reexamination opportunity.~~

~~(5) Each provisional certificant has up to four (4) opportunities to sit for an exam. The four opportunities are:~~

~~(a) 1st Opportunity: At the CM-CTP Module~~

~~**If an individual fails a written exam for any Module at the first opportunity,** he/she will be notified in writing, accompanied by a Reexam Registration Form. The provisional certificant may take the exam once more without repeating the entire Module. To register for the reexam (the second opportunity), the individual should complete the provided Reexam Registration Form and submit it according to instructions by the specified deadline. Payment of the Reexam Fee is required at the time of registration. For more information on the Reexam Fee, see Chapter 6, Section 1, F., p. 46.~~

~~(b) 2nd Opportunity: A reexam administered on specific dates established by the Bureau of Mental Health, Bureau of Mental Retardation and/or the Division of PLACE, as appropriate, at the Department of Mental Health offices in Jackson~~

~~**If an individual fails a written exam for any Module at the second opportunity**, he/she will be notified in writing. In order to sit for the exam again, the individual will be required to repeat the entire Module and associated written examination (the third opportunity). To register for a repeat of the CM-CTP Module, the individual should follow the current registration guidelines including payment of Module/Exam Fees, if necessary. See Section 7, D., pp. 18-19 of this chapter for more information on Module registration. See Chapter 6, Section 1, C., p. 46 and Section 3, F., p. 48 for more information on the Module/Exam Fee.~~

~~(c) 3rd Opportunity: Repeat the entire CM-CTP Module and associated written exam~~

~~**If an individual fails a written exam for any Module at the third opportunity**, he/she will be notified in writing, accompanied by a Reexam Registration Form. The provisional certificant may take the exam a fourth and final time (the fourth opportunity). To register for the last reexam opportunity, the individual should complete the provided Reexam Registration Form and submit it according to instructions by the specified deadline. Payment of the Reexam Fee is required at the time of registration. For more information on the Reexam Fee, see Chapter 6, Section 1, F., p. 46.~~

~~(d) 4th Opportunity: A final reexam administered on specific dates established by the Bureau of Mental Health, Bureau of Mental Retardation and/or Division of PLACE, as appropriate, at the Department of Mental Health offices in Jackson~~

~~**If an individual fails the written exam for any Module at the fourth and final opportunity, he/she will be considered to have defaulted from the DMH Case Management Certification Program.** Official notification of Defaulted status will be sent in writing. See Chapter 7, Section 6, D., pp. 54-55 for more information on Defaulted status.~~

~~(6) No provisional certificant may be allowed more than four (4) opportunities to sit for an exam, including forfeitures.~~

~~Section 8: Grandfathering Provisions~~

~~A. The Grandfathering Period for the Case Management Certification Program will be from July 1, 2005 – June 30, 2007.~~

~~B. During the Grandfathering Period, the following special provisions will be allowed pending proper notification and receipt of the required documentation from applicants seeking any level of certification offered through the DMH Case Management Certification Program.~~

~~C. Be sure to see also the application guidelines for the Grandfathering Period found in Chapter 4, Section 8, pp. 35-36.~~

~~D. Educational grandfathering provisions are available as follows:~~

~~(1) Some individuals have been allowed to work in the state mental health system in the field of case management with a waiver for the mental health- or mental retardation-related- educational degree. These individuals will be allowed to apply for credentialing during the Grandfathering Period, (July 1, 2005 – June 30, 2007), with the same educational degree IF they submit a copy of the written DMH waiver as part of their application packet.~~

~~(2) If the copy of the written waiver is not included in the application packet, the individual's application will be processed as usual and will be expected to meet the requirement to have a mental health- or mental retardation- related degree.~~

~~(3) **It is the responsibility of the applicant to notify the Division of PLACE of the existence of an educational waiver and to present a copy of the written waiver as part of the application packet.**~~

~~(4) Following the conclusion of the Grandfathering Period, beginning with applications received on July 1, 2007, no further waivers for educational requirements will be accepted.~~

~~E. Case Management Core Training Program (CM-CTP) grandfathering provisions are available as follows:~~

~~(1) Module I: During the Grandfathering Period for the Case Management Certification Program (July 1 2005 – June 30, 2007), individuals who have previously taken Case Management Orientation through the Department of Mental Health will not be required to repeat it IF they submit a copy of the written DMH documentation of successful completion as part of the application packet.~~

~~(2) Module II: During the Grandfathering Period (July 1, 2005 – June 30, 2007), Master's level individuals who have previously taken the Minimum Standards class available through the Division of PLACE as part of the Mental Health Therapist and Mental Retardation Therapist Core Training Programs will not be required to repeat Module II requirement IF they submit a copy of the written DMH documentation of successful completion as part of the application packet.~~

~~Also during the Grandfathering Period, a new Minimum Standards training designed specifically for the Case Management Certification Program will be made available through the Department of Mental Health in various locations around the state. It is appropriate for both Bachelor's and Master's level individuals who need the training in order to apply for credentialing within the Case Management Certification Program. This new Case Management Minimum Standards training will NOT be acceptable for either the Mental Health Therapist or the Mental Retardation Therapist Programs.~~

~~(3) Module III: During the Grandfathering Period, Master's level individuals who have previously taken the Pre-Evaluation Screening Training class through either the DMH Bureau of Mental Health or the Division of PLACE as part of the Mental Health Therapist and Mental Retardation Therapist Core Training Programs will not be required to repeat it IF they submit a copy of the written documentation of successful completion as part of the application packet.~~

~~(4) If the copy of the written documentation is not included in the application packet, the individual's application will be processed as usual and will be expected to meet all current CM-CTP requirements.~~

~~(5) **It is the responsibility of the applicant to notify the Division of PLACE of the previous completion of a required CM-CTP training and to present a copy of the appropriate documentation as part of the application packet.**~~

~~(6) Following the conclusion of the Grandfathering Period, beginning with applications received on July 1, 2007, no further previous documentation for CM-CTP requirements will be accepted.~~

~~(7) Following the conclusion of the Grandfathering Period, beginning with applications received on July 1, 2007, the date of Module I, Module II and Module III training, as appropriate, must be within the individual's Provisional Certification Period.~~

~~(8) During the program's Grandfathering Period (July 1, 2005 – June 30, 2007), special provisions are in place to allow individuals not yet holding a PCCMP to attend CM-CTP Modules. Each potential applicant should be sure to see the information found in Section 1, B., (2) and (3), p. 8 of this chapter to determine how this affects his/her requirements and application process.~~

(9) Upon conclusion of the Grandfathering Period, beginning July 1, 2007, each individual must hold a Current or Extended PCCMP professional credential in order to register for a CM-CTP Module.

CHAPTER 4

Application Procedures

Section 1: General Guidelines

A. Application Process

(1) Applicants should read all directions and application materials before beginning the application process, as the required Application Fee is nonrefundable.

(2) During the Grandfathering Period for the Case Management Certification Program (July 1, 2005 – June 30, 2007), an individual may apply directly for any of the three levels of certification for which he/she is eligible. See Chapter 3, Section 2, pp. 10-12; Section 4, pp. 13-15; and Section 5, pp. 15-16 for detailed credential requirements. See Chapter 3, Section 8, pp. 21-23 for information on Grandfathering Provisions. See Section 8, pp. 35-36 of this chapter for information on application guidelines during the Grandfathering Period.

(3) Also during the Grandfathering Period (July 1, 2005 – June 30, 2007), a Bachelor's level individual will not be required to hold PCCMP in order to register for and/or attend Module I (Case Management Orientation) or Module II (Case Management Minimum Standards Training). This means that an individual meeting all other requirements may attend the two trainings and THEN apply directly for CCMP-I.

(4) Also during the Grandfathering Period (July 1, 2005 – June 30, 2007), a Master's level individual will not be required to hold PCCMP in order to register for and/or attend Module I (Case Management Orientation) or Module II (Case Management Minimum Standards Training). The individual could also attend Module III (Pre-Evaluation Screening Training) without holding PCCMP as long as he/she takes it through the DMH Division of Community Services. This means that an individual meeting all other requirements may attend the three trainings and THEN apply directly for CCMP-II.

(5) Following the conclusion of the Grandfathering Period, beginning July 1, 2007, all applicants will be expected to enter the program by submitting an initial application for provisional certification (PCCMP) and to meet all current requirements of the program.

~~(6) Also following the conclusion of the Grandfathering Period, beginning July 1, 2007, all individuals will be expected to hold PCCMP before registering for and/or attending required Modules.~~

~~(7) **All application materials must be submitted together in one application packet.** The official transcript is the only item which may be submitted separately from the application packet.~~

~~(8) **All submission deadlines reflect dates RECEIVED by the Division of PLACE, not the postmark date.**~~

~~(9) In order to be reviewed at the next regularly scheduled Review Board meeting, an application should be submitted so that it is received by the Division of PLACE **at least five (5) working days prior to the Review Board meeting.**~~

~~(10) An individual may apply for more than one type of DMH professional credential (Mental Health Therapist, Mental Retardation Therapist, Case Management Professional, etc.); however, each application should be submitted separately including separate official transcripts, application forms, payment of application fees, etc.~~

~~(11) The applicant is responsible for submitting a complete application packet, including all required application forms, materials and fees. The Review Board will not review incomplete applications.~~

~~(12) Once submitted, all application materials become the property of the Division of PLACE. Application materials will not be returned to the applicant for any reason.~~

~~(13) Incomplete applications are maintained on file for two years from the date of receipt, after which time they are destroyed.~~

~~(14) Upon completion of all requirements of the Provisional Certification Period, a provisional certificant is expected to submit a new application packet to upgrade to either CCMP-I or CCMP-II as soon as possible, **but no later than the last working day of the month following the conclusion of his/her Provisional Certification Period**. Individuals who fail to submit an upgrade application within established timelines will be considered to have defaulted from the program. Incomplete upgrade applications of this type will be maintained on a schedule determined by the Division. See Chapter 3, Section 3, C., p. 13 for more information on submission of upgrade applications.~~

~~(15) An individual holding CCMP-I may apply to upgrade to CCMP-II at any time he/she meets the requirements for CCMP-II. However, such an individual is expected to successfully complete the upgrade process before the end of the two-year Certification Period. Individuals who have not successfully completed the~~

~~upgrade process to CCMP-II by the end of the Certification Period are expected to renew their CCMP-I certification in a timely manner.~~

~~B. Completion of Forms~~

~~(1) Please print or type the information requested on the application forms; typing is preferred.~~

~~(2) All submitted forms should be completed by the appropriate person(s) indicated at the top of each form. Specific directions provided on each form should be read and followed.~~

~~(3) All forms or other application materials submitted in support of the application must bear **original** signatures. Photocopies and faxed copies of completed forms or other application materials will not be accepted.~~

~~(4) Every numbered item on each form must have a response, even if the response is "Not Applicable." Incomplete forms will not be returned to the applicant for completion; a new form must be completed and submitted.~~

~~(5) To ensure validity, all forms other than the notarized Application Form must be submitted in sealed envelopes, with a signature across the envelope's seal that matches the signature on the document inside the envelope.~~

~~C. Reporting Employment~~

~~(1) There is no special provision regarding employment criteria during the program's Grandfathering Period. Applicants are required to meet the established employment criteria.~~

~~(2) Appropriate employment must be submitted on the appropriate official Verification of Employment Form which must reflect the applicant's current place of employment. The required form is located in Chapters 9A, 9B and 9C.~~

~~(3) Item #2 of the Verification of Employment Form requesting information on background checks must be addressed and completed clearly.~~

~~(4) Individuals unsure of how to mark Item #3 of the Verification of Employment Form requesting program information should refer to Chapter 3, Section 1, C., p. 9 of this document. The Personnel Officer may need to consult with the Program Director or the program's Business Office to make a correct determination.~~

~~D. Reporting Education~~

~~(1) When applying for any level of credentialing during the Case Management Certification Program's Grandfathering Period (July 1, 2005 – June 30, 2007) be~~

~~sure to refer to the Grandfathering Provisions regarding the Education requirement found in Chapter 3, Section 8, D., p. 21 and the application guidelines found in Section 8, pp. 35-36 of this chapter.~~

~~(2) On the Application Form, the applicant should clearly indicate on Item #9 which transcript(s) are included with the application packet and which transcript(s) have been sent directly to the Division of PLACE.~~

~~(3) When included in the application packet, the Official Transcript(s) must be submitted unopened in the approved educational institution's letterhead envelope.~~

~~(4) The Official Transcript may be submitted directly to the Division of PLACE by the approved educational institution. This is the only piece of the application that will be accepted outside of the application packet.~~

~~(5) When submitting an upgrade application, it is not necessary to submit an official transcript(s) which has been previously submitted and received by the Division. Only transcripts reporting new mental health or mental retardation-related course work need to be submitted.~~

~~(6) All references to hours of college credit are for semester hours. Quarter hours which are submitted will be converted to semester hours using the standard formula (Number of Quarter Hours X .66 = Semester Hour Equivalent).~~
~~(7) All references to graduate degrees require at least 30 semester hours or its equivalent.~~

~~(8) Before a college or university degree is used to meet any educational criteria, the degree must have been conferred and must appear on the official transcript.~~

~~E. Reporting Experience~~

~~(1) There is no special provision regarding experience criteria during the program's Grandfathering Period. Applicants are required to meet the established experience criteria.~~

~~(2) **Applicants for provisional certification should NOT report work experience as part of his/her application packet.**~~

~~(3) **Applicable work experience should be submitted when applying for either CCMP-I or CCMP-II.**~~

~~(4) Appropriate work experience must be verified by a qualified supervisor and submitted on the appropriate official Verification of Experience Form. The required form is located in Chapters 9A, 9B and 9C.~~

~~(5) When reporting appropriate experience, an applicant needs only to report enough experience to meet the experience requirement of the credential for which he/she is applying. It is not necessary for an individual to report a lifetime of work experience.~~

~~(6) When submitting an upgrade application from CCMP-I to CCMP-II, it is not necessary to submit supervised experience which has been previously submitted on a complete Verification of Experience Form and received by the Division. Only the balance of experience needed to meet the experience requirement of the new credential is required.~~

~~(7) Only complete Verification of Experience Forms are considered by the Review Board. Verification of Experience Forms which have missing information or missing pages will not be considered.~~

~~(8) All experience requirements are based on a full-time, forty (40) hour per week work experience.~~

~~(9) Individuals with part-time experience must indicate an amount of experience which is equivalent to a forty (40) hour work week. The applicant with part-time experience must provide quantitative information which supports his/her claims. The Review Board will review each application and make decisions regarding part-time experience on a case-by-case basis.~~

~~(10) Volunteer work does not meet the experience requirement.~~

~~F. Supervisor Documentation~~

~~(1) The position of Case Management Supervisor, as described in the *Department of Mental Health Minimum Standards for Community Mental Health/Mental Retardation Services*, is the prescribed immediate supervisor of case management staff and services.~~

~~(2) Case Management Supervisors are named/designated by the program's/region's Program Director. A record of the Case Management Supervisors and their original signatures is maintained by the Division of PLACE.~~

~~(3) If a program does not have a position called "Case Management Supervisor," the Program Director will be asked by the Division of PLACE to designate an appropriate administrative staff member who has oversight of case management services and staff to serve as the program's Case Management Supervisor for the purpose of this credentialing program.~~

~~(4) The Division of PLACE should be notified of any change in Case Management Supervisor within fourteen (14) days of the effective date of the change.~~

~~(5) In the event that the designated Case Management Supervisor is not available, the region's/ program's Program Director may serve as the Supervisor.~~

~~(6) In the event that neither the designated Case Management Supervisor nor the Program Director is available, the Chair of the region's/program's governing Board or Commission may serve as Supervisor.~~

~~(7) In the event that a Case Management Supervisor applies for a credential, he/she may not complete or sign off on his/her own Verification of Experience Form. In this instance, the Program Director would be the appropriate individual to complete the form and to sign off as needed.~~

~~(8) Verification of Experience Forms which have been signed by anyone other than the designated Case Management Supervisor or Program Director or Board/ Commission Chair will be considered invalid and must be resubmitted bearing the appropriate original signature.~~

~~(9) More information on Supervisor qualifications is found in Chapter 3, Section 6, pp. 16-17.~~

~~G. Reporting Participation in the Case Management Core Training Program (CM-CTP)~~

~~When applying for CCMP-I or CCMP-II, completion of the required CM-CTP Modules should be documented as follows. A description of each Module is found in Chapter 3, Section 7, B., pp. 17-18. In addition, information about the fees related to the CM-CTP is found in Chapter 6, Section 3, pp. 47-48.~~

~~(1) Module I~~

~~a) On the Application Form, each applicant should clearly indicate that he/she has completed Module I (Case Management Orientation).~~

~~b) During the program's Grandfathering Period (July 1, 2005 – June 30, 2007), each applicant is required to submit a photocopy of the training certificate or official letter or other documentation from the Department of Mental Health showing successful completion of Case Management Orientation as part of his/her application packet. During the grandfathering period, there is no specified limit to the date of this training.~~

~~c) Following the conclusion of the Grandfathering Period, beginning July 1, 2007, the applicant will be responsible for submitting a photocopy of the training certificate or official letter or other documentation from the Department of Mental Health showing successful completion of Case Management Orientation; however, the date of the training must be within the individual's Provisional Certification Period~~ **~~or the individual will be expected to apply for PCCMP and repeat the Module.~~**

~~(2) Module II~~

~~a) On the Application Form, each applicant should clearly indicate that he/she has completed Module II (Case Management Minimum Standards Training).~~

~~b) During the program's Grandfathering Period (July 1, 2005 – June 30, 2007), the Bachelor's or Master's level applicants who attend the Case Management Minimum Standards training offered through the Department of Mental Health are responsible for including a photocopy of the documentation from the Department of Mental Health showing successful completion of the Case Management Minimum Standards training as part of his/her application packet.~~

~~c) During the program's Grandfathering Period (July 1, 2005 – June 30, 2007), the Master's level applicants who previously attended the Minimum Standards training offered through the Division of PLACE for the Mental Health Therapist Program or the Mental Retardation Therapist Program are responsible for providing a photocopy of the official letter or transcript from the Division of PLACE showing successful completion of Minimum Standards training as part of his/her application packet. During the grandfathering period, there is no specified limit to the date of this training.~~

~~d) Following the conclusion of the Grandfathering Period, beginning July 1, 2007, the applicant will be responsible for submitting a photocopy of the documentation from the Department of Mental Health showing successful completion of the Case Management Minimum Standards training; however, the date of the training must be within the individual's Provisional Certification Period **or the individual will be expected to apply for PCCMP and repeat the Module**.~~

~~(3) Module III~~

~~a) On the Application Form, each Master's level applicant should clearly indicate that he/she has completed Module III (Pre-Evaluation Screening Training).~~

~~b) During the program's Grandfathering Period (July 1, 2005 – June 30, 2007), the Master's level applicant is responsible for providing a photocopy of the training certificate or official letter or other documentation from the DMH Division of Community Services showing successful completion of Pre-Evaluation Screening Training as part of his/her application packet. During the grandfathering period, there is no specified limit to the date of this training.~~

~~c) During the program's Grandfathering Period (July 1, 2005 – June 30, 2007), the Master's level applicant who previously attended the Pre-Evaluation Screening Training provided through the Division of PLACE~~

~~for the Mental Health Therapist Program or the Mental Retardation Therapist Program is responsible for providing a photocopy of the official letter or transcript from the Division of PLACE showing successful completion of Pre-Evaluation Screening Training as part of his/her application packet. During the grandfathering period, there is no specified limit to the date of this training.~~

~~d) Following the conclusion of the Grandfathering Period, beginning July 1, 2007, the applicant will be responsible for submitting a photocopy of the training certificate or official letter or transcript or other documentation from the DMH Division of Community Services or the Division of PLACE showing successful completion of Pre-Evaluation Screening Training; however, the date of the training must be within the individual's Provisional Certification Period **or the individual will be expected to apply for PCCMP and repeat the Module**.~~

~~(4) For individuals applying during the Grandfathering Period (July 1, 2005-June 30, 2007), there is additional information regarding participation in the Case Management Core Training Program found in Chapter 3, Section 8, E., pp. 21-23 and application guidelines in Section 8, pp. 35-36 of this chapter.~~

~~Section 2: Application for Provisionally Certified Case Management Professional (PCCMP)~~

~~A. Application Packet~~

~~An individual wishing to submit an application for PCCMP shall submit to the Division of PLACE an **application packet** containing the forms, materials and fees listed below. These items verify the provisional certification requirements listed in Chapter 3, Section 2, pp. 10-12. Forms are located in Chapter 9A, pp. 66-70 of this document.~~

~~(1) Application: A completed, notarized Application Form.~~

~~(2) To Verify Employment: A completed Verification of Employment Form from the applicant's **current** place of employment meeting the employment requirement listed in Chapter 3, Section 2, C., (1), p. 11. More information on reporting Employment is found in Section 1, C., p. 26 of this chapter.~~

~~(3) To Verify Education: An Official Transcript(s) meeting the educational requirements listed in Chapter 3, Section 2, C., (2), pp. 11-12. More information on reporting Education is found in Section 1, D., pp. 26-27 of this chapter.~~

~~(4) Provisional Certification Application Fee: A nonrefundable $45.00 check or money order made payable to the Mississippi Department of Mental Health. See Chapter 6, Section 1, A., p. 46 for more information on the Provisional Certification Application Fee.~~

~~B. Directions~~

~~(1) When preparing to submit an application packet for PCCMP, be sure to follow the General Guidelines found in Section 1, pp. 24-30 of this chapter, as well as the directions found at the top of each form.~~

~~(2) Chapter 9A of this document also includes directions and an application checklist on pp. 66-67.~~

~~(3) If applying during the program's Grandfathering Period (July 1, 2005 – June 30, 2007), be sure to follow the "Applying During the Grandfathering Period" guidelines found in Section 8, pp. 35-36 of this chapter.~~

~~(4) If questions arise which are not addressed in this document, please contact the Division of PLACE for assistance. Contact information for the Division of PLACE is located on the title page of this document.~~

~~Section 3: Application for Certified Case Management Professional I (CCMP-I)~~

~~A. Application Packet~~

~~An individual wishing to submit an application for CCMP-I shall submit to the Division of PLACE an **application packet** containing the forms, materials and fees listed below. These items verify the certification requirements listed in Chapter 3, Section 4, pp. 13-15. Forms are located in Chapter 9B, pp. 71-78 of this document.~~

~~(1) Application: A completed, notarized Application Form.~~

~~(2) To Verify Employment: A completed Verification of Employment Form from the applicant's **current** place of employment meeting the employment requirement listed in Chapter 3, Section 4, C., (1), p. 14. More information on reporting Employment is found in Section 1, C., p. 26 of this chapter.~~

~~(3) To Verify Education: An Official Transcript(s) meeting the educational requirements listed in Chapter 3, Section 4, C., (2), p. 14. More information on reporting Education is found in Section 1, D., p. 26 of this chapter.~~

~~(4) To Verify Experience: A completed Verification of Experience Form(s) meeting the experience requirements listed in Chapter 3, Section 4, C., (3), p. 14. More information on reporting Experience is found in Section 1, E. and F., pp. 27-28 of this chapter.~~

~~(5) To Verify Case Management Core Training Program (CM-CTP): Documentation meeting the CM-CTP requirements listed in Chapter 3, Section 4, C., (4), p. 14. More information on reporting CM-CTP participation is found in Section 1, G., pp. 28-30 of this chapter.~~

(6) Certification Application Fee: A nonrefundable $55.00 check or money order made payable to the Mississippi Department of Mental Health. See Chapter 6, Section 1, B., p. 46 for more information on the Certification Application Fee.

B. Directions

(1) When preparing to submit an application packet for CCMP-I, be sure to follow the General Guidelines found in Section 1, pp. 24-30 of this chapter, as well as the directions found at the top of each form.

(2) Chapter 9B of this document also includes directions and an application checklist on pp. 71-72.

(3) If applying during the program's Grandfathering Period (July 1, 2005 – June 30, 2007), be sure to follow the "Applying During the Grandfathering Period" guidelines found in Section 8, pp. 35-36 of this chapter.

(4) If questions arise which are not addressed in this document, please contact the Division of PLACE for assistance. Contact information for the Division of PLACE is located on the title page of this document.

Section 4: Application for Certified Case Management Professional II (CCMP-II)

A. Application Packet

An individual wishing to submit an application for CCMP-II shall submit to the Division of PLACE an **application packet** containing the forms, materials and fees listed below. These items verify the certification requirements listed in Chapter 3, Section 5, pp. 15-16. Forms are located in Chapter 9C, pp. 79-86 of this document.

(1) Application: A completed, notarized Application Form.

(2) To Verify Employment: A completed Verification of Employment Form from the applicant's **current** place of employment meeting the employment requirement listed in Chapter 3, Section 5, C., (1), p. 16. More information on reporting Employment is found in Section 1, C., p. 26 of this chapter.

(3) To Verify Education: An Official Transcript(s) meeting the educational requirements listed in Chapter 3, Section 5, C., (2), p. 16. More information on reporting Education is found in Section 1, D., pp. 26-27 of this chapter.

(4) To Verify Experience: A completed Verification of Experience Form(s) meeting the experience requirements listed in Chapter 3, Section 5, C., (3), p. 16. More information on reporting Experience is found in Section 1, E. and F., pp. 27-28 of this chapter.

(5) To Verify Case Management Core Training Program (CM-CTP): Documentation meeting the CM-CTP requirements listed in Chapter 3, Section 5, C., (4), p. 16. More information on reporting CM-CTP participation is found in Section 1, G., pp. 28-30 of this chapter.

(6) Certification Application Fee: A nonrefundable $55.00 check or money order made payable to the Mississippi Department of Mental Health. See Chapter 6, Section 1, B., p. 46 for more information on the Certification Application Fee.

B. Directions

(1) When preparing to submit an application packet for CCMP-II, be sure to follow the General Guidelines found in Section 1, pp. 24-30 of this chapter, as well as the directions found at the top of each form.

(2) Chapter 9C of this document also includes directions and an application checklist on pp. 79-80.

(3) If applying during the program's Grandfathering Period (July 1, 2005 – June 30, 2007), be sure to follow the "Applying During the Grandfathering Period" guidelines found in Section 8, pp. 35-36 of this chapter.

(4) If questions arise which are not addressed in this document, please contact the Division of PLACE for assistance. Contact information for the Division of PLACE is located on the title page of this document.

Section 5: Verification of Background Checks

A. As part of the Verification of Employment Form, Personnel Officers will be required to indicate whether or not background checks have been conducted for each applicant, as appropriate to the applicant's position and professional responsibilities.

B. With specific areas of interest being conviction of a crime or conviction of a felony relating to the abuse or mistreatment of other individuals, the verification of background checks should include:

(1) Convictions under the Vulnerable Adults Act;

(2) Child Abuse Registry;

(3) Sex Offense Record;
(4) Criminal Record;

(5) Motor Vehicle Registry; and,

(6) Others, as appropriate to the applicant's position and professional responsibilities.

~~**Section 6: Terms of Certificate Issuance**~~

~~A. Application Review~~

~~Each application proceeds through three levels of review.~~

~~(1) Level 1 Review: The Division of PLACE reviews all applications for completeness. Applicants are notified in writing if a problem(s) is found; they are given an opportunity to correct the problem(s) by resubmitting the necessary forms, materials or fees.~~

~~(2) Level 2 Review: The Review Board reviews all complete applications, evaluates submitted materials against established criteria and makes recommendations regarding the issuance of professional certification to the DMH Executive Director. Applicants are notified in writing if more information is needed. The Review Board will not review incomplete applications (See Chapter 2, Section 2, B., (7), p. 6).~~

~~(3) Level 3 Review: The DMH Executive Director reviews and approves or disapproves each application for professional credentialing. Following the Level 3 Review, each applicant will be notified in writing of the status of his/her application.~~

~~B. Professional Titles~~

~~(1) Individuals who make successful application for provisional certification will be awarded a time-limited, provisional certificate attesting to the title of Provisionally Certified Case Management Professional (PCCMP).~~

~~(2) Individuals who make successful application for the first level (Bachelor's level) of certification will be awarded a full certificate attesting to the title of Certified Case Management Professional I (CCMP-I).~~

~~(3) Individuals who make successful application for the second level (Master's level) of certification will be awarded a full certificate attesting to the title of Certified Case Management Professional II (CCMP-II).~~

~~C. Certificates~~

~~(1) Certificates issued by the DMH Division of PLACE remain the property of the DMH. The individual shall return the certificate to the Division upon request.~~

~~(2) Certificates issued by the DMH reflecting credentialing as a PCCMP are valid for up to a maximum twenty-four (24) consecutive month Provisional Certification Period. The date of issuance and the date of expiration are both indicated on the certificate. Dates of issuance and expiration vary from person to person based upon each individual's date of issuance. **Provisional certificates are not renewable**.~~

~~(3) Certificates issued by the DMH reflecting credentialing as a CCMP-I or CCMP-II are valid for up to a maximum two-year (24 consecutive months) Certification Period established by the Division of PLACE. The date of issuance is indicated on the certificate. Initially, the certificate will be valid for the balance of the current Certification Period. Upon renewal, the certificate will be valid for the next two-year Certification Period. See Chapter 3, Section 4, B., pp. 13-14 and Section 5, B., p. 15 for more information on Certification Periods.~~ **Full certificates are renewable.**

~~(4) It is the intent of the DMH and the Division of PLACE that each individual holds only one certificate per professional title.~~

~~(5) In the event that an individual has lost or damaged his/her certificate and needs a replacement certificate, he/she must follow the directions in Chapter 6, Section 4, pp. 48-49.~~

~~(6) In the event that an individual's legal name has changed and he/she needs to change his/her certificate, he/she must follow the directions in Chapter 6, Section 4, pp. 48-49.~~

~~D. Administrative Appeal~~

~~The terms of administrative appeal are applicable to the application process. See Section 9, p. 36 of this chapter for more information on the administrative appeal process.~~

~~Section 7: Once Credentialed~~

~~A. Provisional Certification (PCCMP)~~

~~(1) Individuals who have been awarded provisional certification are expected to abide by the professional responsibility provisions found in Chapter 7, pp. 50-61.~~

~~(2) Individuals who have been awarded provisional certification are expected to complete all requirements necessary to upgrade to full certification DURING his/her Provisional Certification Period as described in Chapter 3, Sections 2 and 3, pp. 10-13.~~

~~(3) No later than the last working day of the month following the conclusion of his/her Provisional Certification Period, each PCCMP is expected to submit a new application packet to upgrade to either the first level of certification (CCMP-I) or the second level of certification (CCMP-II).~~

~~B. Certification (CCMP-I or CCMP-II)~~

~~(1) Individuals who have been awarded certification are expected to abide by the professional responsibility provisions found in Chapter 7, pp. 50-61.~~

~~(2) Individuals who have been awarded certification are expected to renew their certification in a timely manner at the end of each established two-year Certification Period. See Chapter 3, Section 4, B., pp. 13-14 and Section 5, B., pp. 15-16 for more information on Certification Periods. For more information on Certification Periods and renewal requirements, see Chapter 5, Section 1, A. and B., p. 37.~~

~~Section 8: Applying During the Grandfathering Period~~

~~In addition to these application guidelines, more information on specific grandfathering provisions is found in Chapter 3, Section 8, pp. 21-23.~~

~~A. The Grandfathering Period for the DMH Case Management Certification Program will be from July 1, 2005 through June 30, 2007.~~

~~B. Beginning with applications received on July 1, 2007, no further grandfathering provisions will be accepted and all applicants will be expected to meet all current requirements.~~

~~C. Special provisions allowed during the Grandfathering Period are limited to the Grandfathering Provisions found in Chapter 3, Section 8, pp. 21-23 of this document. No other exceptions will be made.~~

~~D. During the Grandfathering Period, special provisions will be accepted only upon receipt of the required documentation from applicants seeking professional credentialing.~~

~~E. **It is the responsibility of the applicant to notify the Division of PLACE of the existence of an educational waiver OR of the previous completion of a required CM-CTP training AND to present a copy(ies) of the required written documentation as part of the application packet**. If the copy(ies) of the written documentation is not included in the application packet, the individual's application will be processed as usual and will be expected to meet all current CM-CTP requirements.~~

~~F. Individuals who obtain a professional credential through the DMH Case Management Certification Program during the Grandfathering Period are considered to be **Charter Members** of the program. As long as a Charter Member's credential remains in Current, Extended, Interrupted, Inactive or Retired status, he/she will maintain Charter Member designation. A Charter Member may lose his/her Charter Member designation and his/her grandfathering privileges as a result of denial, relinquishment, disciplinary action or as a result of allowing his/her credential to default or lapse.~~

~~G. An individual who earned a professional credential within the DMH Case Management Certification Program during the Grandfathering Period may upgrade to another level credential within the program at any time and maintain his/her Charter Membership and grandfathering privileges. Such an individual must be in Current status at the time of upgrade.~~

H. ~~During the program's Grandfathering Period (July 1, 2005 – June 30, 2007), special provisions are in place to allow individuals not yet holding a PCCMP to attend CM-CTP Modules. Each potential applicant should be sure to see the information found in Section 1, A., (3) and (4), p. 24 of this chapter to determine how this affects his/her requirements and application process.~~

~~Section 9: Administrative Appeal~~

A. ~~An applicant aggrieved by a decision regarding the initial, upgrade or renewal application for professional certification has the right to appeal to the Executive Director. The applicant must notify the Division and provide any supplemental application information within thirty (30) days of receipt of written notification of application review results.~~

~~The Executive Director shall review the application and supplemental information, if provided, and notify the applicant of the results of this review within thirty (30) days.~~

B. ~~An applicant aggrieved by the decision of the Executive Director may then appeal to the State Board of Mental Health. Appeals to the State Board of Mental Health must be made and conducted in accordance with established Board policy (Policy D-0025 entitled "Appeals to the Board of Mental Health").~~

~~The applicant must notify the Division within fifteen (15) days of receipt of written notification of the Executive Director's decision.~~

~~The State Board of Mental Health shall review the applicant's record and notify the applicant of the results of this review within forty-five (45) days.~~

~~CHAPTER 5~~

~~Renewal of Professional Certification~~

~~Section 1: Renewal Requirements~~

A. ~~Certification Periods~~

~~The DMH Case Management Certification Program is organized by two-year Certification Periods.~~ **~~The first Certification Period is July 1, 2005 – June 30, 2007.~~** ~~Subsequent certification periods will be every two years as follows:~~

~~Certification Periods~~
~~2nd Period: July 1, 2007-June 30, 2009~~
~~3rd Period: July 1, 2009-June 30, 2011~~
~~4th Period: July 1, 2011-June 30, 2013~~
~~5th Period: July 1, 2013-June 30, 2015~~

~~B. Biennial Requirement~~

~~(1) Individuals holding CCMP-I or CCMP-II are required to renew their professional credential every two (2) years on a certification schedule established by the Division.~~

~~(2) In accordance with the Certification Period schedule, individuals holding CCMP-I or CCMP-II shall renew their certification on or before the established June 30th renewal deadline in order to maintain Current status.~~

~~(3) The first renewal deadline is June 30, 2007; subsequent renewal deadlines will be every other year, such as June 30, 2009; June 30, 2011; June 30, 2013; etc.~~

~~(4) As a courtesy, the Division of PLACE will mail a renewal notice to each certified individual's self-reported home address prior to the renewal deadline. Therefore, it is critically important to notify the Division of PLACE of any change in mailing address. See Chapter 7, Section 3, pp. 50-51 for more information on changes in vital information.~~

~~(5) **Renewal is not applicable to individuals holding provisional certification (PCCMP)**. See Chapter 3, Section 2, pp. 10-12 and Section 3, pp. 12-13 for more information on the requirements of provisional certification.~~

~~C. Responsibility~~

~~(1) The individual holding CCMP-I or CCMP-II is responsible for renewing in a timely manner.~~

~~(2) Failure to receive a renewal notice from the Division of PLACE shall not relieve the individual from the renewal requirement.~~

~~(3) Individuals who do not renew by the established June 30th renewal deadline will be considered to have allowed their certification to lapse. As a result, the status for each such credential will be changed to Lapsed status. See Section 6, pp. 43-44 of this chapter for more information on expiration timelines. See Chapter 7, Section 7, C., pp. 56-57 for more information on Lapsed status.~~

~~D. Employment Requirement~~

~~An individual applying for renewal must either continue to be employed in the state mental health system OR have Inactive status. See Chapter 3, Section 1, C., p. 9 for more information on state mental health system programs. See Chapter 7, Section 7, B., p. 56 for more information on Inactive status.~~

~~E. Ongoing Inservice/Training Requirement~~

~~(1) A CCMP-I or a CCMP-II applying for renewal must provide proof of a minimum of 24 Contact Hours of successfully completed inservice/training (about 12 Contact Hours per year) as verified by the program's designated Staff Development Officer (SDO). See Section 7, pp. 44-45 of this chapter for more information on the SDO.~~

~~(2) These Contact Hours may be accrued through staff development training provided through the individual's place of employment (including DMH-required training as indicated in the *Minimum Standards for Community Mental Health/Mental Retardation Services*), DMH-sponsored training events (with the exception of the CM-CTP Modules), or conferences/ workshops/CEUs/etc., approved by the Division of PLACE.~~

~~(3) The Contact Hours reported for renewal must have been accrued during the current two-year Certification Period.~~

~~F. Upgrade Option~~

~~(1) A CCMP-I may upgrade to CCMP-II at any time he/she is eligible. However, the option exists for a CCMP-I to apply to upgrade to CCMP-II at the time of renewal rather than renew the lower level credential. This is called the Upgrade Option.~~

~~(2) The Upgrade Option is available to CCMP-Is only during April, May and June prior to the Case Management Program's biennial renewal deadline.~~

~~(3) In order to take advantage of the Upgrade Option, an individual currently holding CCMP-I should review the requirements for CCMP-II found in Chapter 3, Section 5, pp. 15-16 and follow the application process for CCMP-II found in Chapter 4, Section 4, pp. 32-33.~~

~~(4) An individual choosing the Upgrade Option must submit his/her complete upgrade application packet so that it is received by the Division of PLACE between April 1st and the June 30th renewal deadline.~~

~~(5) Any CCMP-I whose upgrade application packet submitted under the Upgrade Option is not received by the Division of PLACE by the June 30th renewal deadline is expected to renew his/her current certification. No upgrade application packet will be accepted under the Upgrade Option after the June 30th renewal deadline.~~

~~(6) More information on important timelines regarding certification expiration is found in Section 6, pp. 43-44 of this chapter.~~

~~**Section 2: Renewal General Guidelines**~~

~~A. Renewal Application Process~~

~~(1) Individuals applying for renewal should read all directions and renewal application materials before beginning the renewal process, as the required Renewal Fee is nonrefundable.~~

~~(2) In addition to directions found in this document, directions will also be provided with the renewal notice mailed to each certified individual prior to the biennial renewal deadline. These directions are especially important to read and follow.~~

~~(3) **All renewal application materials must be submitted together in one renewal application packet**. If submitted to document inservice/training, an Official Transcript is the only item which may be received separately from the application packet.~~

~~(4) An individual who holds more than one DMH professional certification or licensure should submit renewal materials for each credential separately, including separate official transcripts, renewal application forms, payment of renewal fees, etc.~~

~~(5) The applicant is responsible for submitting a complete renewal application packet, including all required renewal application forms, materials and fees. The Review Board will not review incomplete applications.~~

~~(6) Once submitted, all renewal application materials become the property of the Division of PLACE. Renewal application materials will not be returned to the applicant for any reason.~~

~~B. Completion of Renewal Forms~~

~~(1) Please print or type the information requested on the renewal application forms; typing is preferred.~~

~~(2) All submitted forms should be completed by the appropriate person(s) indicated at the top of each form. Specific directions provided on each form should be read and followed.~~

~~(3) All forms submitted in support of the application must bear **original** signatures. Photocopies and faxed copies of completed forms will not be accepted.~~

~~(4) Every item on each form must have a response, even if the response is "Not Applicable." Incomplete forms will not be returned to the applicant for completion; a new form must be completed and submitted.~~

~~(5) To ensure validity, all forms other than the notarized Renewal Application Form must be submitted in sealed envelopes, with a signature across the envelope's seal that matches the signature on the document inside the envelope.~~

~~C. Reporting Employment~~

~~(1) A current Renewal Verification of Employment Form will be included with the renewal notice mailed to each certified individual prior to the biennial renewal deadline. The form provided in the renewal notice packet must be used.~~

~~(2) The Renewal Verification of Employment Form must reflect the applicant's **current** place of employment.~~

~~(3) Item #2 of the Renewal Verification of Employment Form requesting information on background checks must be addressed and completed clearly.~~

~~(4) Individuals unsure of how to mark Item #3 of the Renewal Verification of Employment Form requesting program information should refer to Chapter 3, Section 1, C., p. 9 of this document. The Personnel Officer may need to consult with the Program Director or Business Office to make a correct determination.~~

~~(5) An individual who is no longer employed in the state mental health system as described in Chapter 3, Section 1, C., p. 9, at the time of renewal no longer meets the Employment criteria for DMH professional credentialing. This individual needs to make a special request to change his/her status category. See Section 4, p. 42 of this chapter for more information on making a special request.~~

~~D.Reporting Ongoing Inservice/ Training~~

~~(1) A current Renewal Verification of Inservice/Training Form will be included with the renewal notice mailed to each certified individual prior to the biennial renewal deadline. Programs' staff development printouts which include the same information may be attached to this form for submission. The Staff Development Officer should sign and date the Renewal Verification of Inservice/Training Form in the appropriate place.~~

~~(2) Required Contact Hours may be accrued through staff development training provided through the certified individual's place of employment (including DMH-required training as indicated in the *Minimum Standards for Community Mental Health/Mental Retardation Services*), DMH-sponsored training opportunities, or conferences/workshops/ CEUs/etc. (with the exception of the CM-CTP Modules), approved by the Division of PLACE.~~

~~(3) Priorities for training should be sessions required for programmatic compliance with DMH Minimum Standards and DMH-sponsored training events related to the provision of case management services~~

~~(4) Hours spent in the required Case Management Core Training Program (CM-CTP) are not eligible for submission as inservice/training Contact Hours.~~

~~(5) Graduate-level course work related to the fields of mental health or mental retardation from an approved educational institution will be accepted as ongoing inservice/training. One three (3) semester hour applicable course (or its equivalent) shall be considered to be equal to thirty (30) Contact Hours. An official college transcript(s) must be submitted with the Renewal Verification of Inservice/Training Form reporting such training experiences. If necessary, the Official Transcript may be submitted directly to the Division by the approved educational institution. For more information regarding transcripts, see Chapter 4, Section 1, D., pp. 26-27.~~

~~(6) Courses claimed for inservice/ training Contact Hours must be beyond the course work necessary to meet the educational requirement for DMH professional credentialing.~~

~~(7) Contact Hours of inservice/ training or graduate-level college course work submitted for renewal must have been successfully completed during the current two-year Certification Period.~~

~~(8) Up to half of the reported Contact Hours may be obtained by presenting educational activities. This should be noted in the appropriate column of the Renewal Verification of Inservice/Training Form.~~

~~(9) Documentation providing proof of training, such as training certificates, Continuing Education Unit forms, etc., should be presented to the program's designated Staff Development Officer (SDO).~~ **~~Do not submit such documentation to the Division of PLACE.~~** ~~See Section 7, pp. 44-45 of this chapter for more information on the SDO.~~

~~Section 3: Application for Renewal~~

~~A. Obtaining Renewal Forms~~

~~Current forms and instructions necessary for renewal will be mailed to each CCMP-I and CCMP-II at his/her self-reported home address approximately three months prior to the biennial renewal deadline.~~

~~B. Renewal Application Packet~~

~~Each person who wishes to renew his/her certification shall submit a renewal application packet to the Division of PLACE which includes the forms, materials and fees listed below. These items verify the renewal requirements listed in Section 1, pp. 37-38 of this chapter.~~

~~(1) Application: A completed, notarized Renewal Application Form.~~

~~(2) To Verify Employment: A completed Renewal Verification of Employment Form from the applicant's **current** place of employment meeting the employment requirement listed in Section 1, D., pp. 37-38 of this chapter. More information on reporting Employment is found in Section 2, C., pp. 39-40 of this chapter.~~

~~(3) To Verify Ongoing Inservice/ Training: A completed Renewal Verification of Inservice/Training Form(s) verifying required inservice/training which meets the inservice/training requirement listed in Section 1, E., p. 38 of this chapter. More information on reporting inservice/training is found in Section 2, D., pp. 40-41 of this chapter.~~

~~(4) Renewal Fee: A nonrefundable $30.00 check or money order made payable to the Mississippi Department of Mental Health. See Chapter 6, Section 1, D., p. 46 for more information on the Renewal Fee.~~

~~C. Directions~~

~~(1) When preparing to submit a renewal application packet, be sure to follow the requirements and guidelines noted in Sections 1 and 2, pp. 37-41 of this chapter as well as the directions found at the top of each form and any other directions provided by the Division of PLACE through renewal notice, correspondence, etc.~~

~~(2) If questions arise which are not addressed in this document, please contact the Division of PLACE for assistance. Contact information for the Division of PLACE is located on the title page of this document.~~

~~Section 4: Special Requests~~

~~A. Name Change: An individual who wants to report a legal name change at the time of renewal is expected to follow the directions found in Chapter 6, Section 4, D., (4), pp. 48-49 and submit all necessary documentation/ fees along with the Renewal Application packet by the June 30th renewal deadline. Please note that this request at the time of renewal would require a total payment of $55.00 which includes both the Renewal Fee ($30.00) and the Certificate Replacement Fee ($25.00).~~

~~B. Inactive Status Request: An individual who is not employed in the state mental health system as described in Chapter 3, Section 1, C., p. 9 at the time of renewal may want to include a request for Inactive status along with the Renewal Application packet. The guidelines and instructions for requesting Inactive status are found in Chapter 7, Section 7, B., p. 56. Such an individual is expected to make this request AND renew by the June 30th deadline submitting all required renewal forms, materials and fees except the Renewal Verification of Employment Form. Additional assistance may be obtained by contacting the Division.~~

~~C. Retired Status Request: An individual who has retired should follow instructions found in Chapter 7, Section 7, D., p. 57. An individual who wishes to request Retired status should do so by the June 30th renewal deadline.~~

~~D. Relinquished Status Request: An individual who determines that he/she no longer wants or needs to hold and maintain professional credentialing may submit a written request for Relinquished status. Instructions for making this request are found in Chapter 7, Section 7, E., p. 57. An individual who wishes to request Relinquished status is expected to do so by the June 30th renewal deadline.~~

~~Section 5: Terms of Certificate Renewal~~

~~A. Renewal Application Review~~

~~Each renewal application proceeds through three levels of review.~~

~~(1) Level 1 Review: The Division of PLACE reviews all renewal application materials for completeness. Applicants for renewal are notified in writing if a problem(s) is found; they are given an opportunity to correct the problem(s) by resubmitting the necessary forms, materials or fees.~~

~~(2) Level 2 Review: The Review Board reviews all complete applications, evaluates submitted materials against established criteria and makes recommendations regarding the issuance of professional certification to the DMH Executive Director. Applicants are notified in writing if more information is needed; applicants are given an opportunity to provide clarification or additional information. The Review Board will not review incomplete applications; see Chapter 2, Section 2, B., (7), p. 6).~~

~~(3) Level 3 Review: The DMH Executive Director reviews and approves or disapproves each application for professional credentialing. Following the Level 3 Review, each applicant will be notified in writing of the status of his/her renewal application.~~

~~(4) Upon successful completion of the review process, each individual's certification is renewed and is valid for the next two-year Certification Period.~~

~~(5) Notification of renewal is made by written correspondence which reflects the individual's continued dates of certification.~~

~~(6) Incomplete renewal applications which were received by the June 30th renewal deadline may be maintained on file through July 31st to allow the individuals an opportunity to resolve problem(s). After July 31st, these credentials are considered to be expired and will be changed to Lapsed status. See Section 6, pp. 43-44 of this chapter for more information on the July 31st deadline. More information on Lapsed status is found in Chapter 7, Section 7, C., pp. 56-57.~~

~~B. Professional Titles~~

~~(1) Each individual who makes successful application for renewal of his/her Current CCMP-I professional credential may continue to use the title of Certified Case Management Professional I (CCMP-I) and practice as such for the next two-year Certification Period.~~

~~(2) Each individual who makes successful application for renewal of his/her Current CCMP-II professional credential may continue to use the title of Certified Case Management Professional II (CCMP-II) and practice as such for the next two-year Certification Period.~~

~~(3) Each individual who makes successful application for renewal of his/her Inactive CCMP-I or Inactive CCMP-II professional credential may continue to use the appropriate title behind his/her name; however, he/she may **not** practice as a Certified Case Management Professional during the next two-year Certification Period (unless he/she returns to Current status).~~

~~C. Administrative Appeal~~

~~The terms of administrative appeal are applicable to the renewal process. See Chapter 4, Section 9, p. 36 for more information on the administrative appeal process.~~

~~Section 6: Certificate Expiration~~

~~A. June 30th Deadline~~

~~(1) The renewal application packet, including Renewal Fees, is due on or before June 30th.~~

~~(2) The upgrade application packet submitted under the Upgrade Option, including Certification Application Fees, must be received by the Division by June 30th. No upgrade application will be accepted under the Upgrade Option after June 30th. See Chapter 5, Section 1, F., p. 38 for more information on the Upgrade Option.~~

~~(3) Any certified individual wishing to request a name change, Inactive status, Retired status or Relinquished status at the time of renewal must submit the request so that the Division of PLACE receives it by June 30th. See Section 4, p. 42 of this chapter for more information on Special Requests.~~

~~(4) Case Management Professional certification expires after the June 30th renewal deadline for each two-year Certification Period.~~

~~(5) An individual's certificate ceases to be valid after June 30th at the end of the Certification Period.~~

~~B. On July 1st~~

~~Any certified individual for whom the Division of PLACE has not received a renewal application packet, an upgrade application packet (under the Upgrade Option) or a special request by June 30th will be considered expired and his/her certification status will be changed to Lapsed. See Chapter 7, Section 7, C., pp. 56-57 for more information on Lapsed status. See Section 4, p. 42 of this chapter for more information on special requests.~~

~~C. July 31st Deadline~~

~~(1) Between July 1st and July 31st, professional certification which has Lapsed due to failure to renew may be returned to Current status upon submission to the Division of all required renewal application forms, materials, payment in full of the Renewal Fee PLUS payment of a Late Renewal Penalty Fee. See Chapter 6, Section 1, E., p. 46 for more information on the Late Renewal Penalty Fee.~~

~~(2) Problems with renewal applications must be resolved by July 31st.~~

~~(3) Problems with upgrade applications submitted under the Upgrade Option must be resolved by July 31st. Otherwise, the certified individual must renew his/her lower level credential.~~

~~(4) Problems with special requests submitted at the time of renewal must be resolved by July 31st.~~

~~(5) The certification of any individual who has not completed either renewal or upgrading (under the Upgrade Option) by July 31st is expired. The status of any such individual's credential will be changed to Lapsed. Loss of this credential includes the loss of any grandfathering privileges, if applicable. For more information on Lapsed status, see Chapter 7, Section 7, C., pp. 56-57.~~

~~D. Beginning August 1st~~

~~On and after August 1st, an individual whose certification has Lapsed due to failure to renew (and who wants to continue to pursue professional credentialing) will be required to repeat the application process and meet all current certification requirements.~~

~~Section 7: Staff Development Officer (SDO)~~

~~A. The Staff Development Officer is a professional employee of a state mental health system program as described in Chapter 3, Section 1, C., p. 9 who is responsible for maintaining staff development records and for verifying ongoing inservice/ training for renewal applicants.~~

~~B. The SDO may not be a clerical staff member.~~

~~C. The SDO also serves as a liaison between his/her program and the Division of PLACE.~~

~~D. The SDO also serves as a resource to his/her program concerning DMH professional certification and licensure.~~

~~E. The SDO is appointed by the Program Director. A record of the appointment and the SDO's original signature is maintained on file by the Division of PLACE.~~

~~F. When verifying an individual's inservice/training at the time of renewal, the SDO is responsible for maintaining the individual's documentation of training, such as training certificates, CEU forms, etc.~~

~~G. The Division of PLACE should be notified of any change in SDO within fourteen (14) days of the effective date of the change.~~

~~H. In the event that the designated SDO is not available to verify Contact Hours, the Renewal Verification of Inservice/Training Form may be verified by the Program Director who made the SDO appointment.~~

~~I. Renewal Verification of Inservice/ Training Forms which have been signed by anyone other than the appointed SDO or the appointing Program Director will be considered invalid and must be resubmitted bearing the appropriate original signature.~~

~~J. If unsure as to the identity of your program's SDO, please check with your Program Director or contact the Division of PLACE for assistance.~~

~~CHAPTER 6~~

~~Fees~~

~~Section 1: Fee Schedule~~

~~The schedule for fees is as follows:~~

~~A. Provisional Certification Application Fee: $45.00~~

~~This fee is due with submission of the application packet for provisional certification (PCCMP). It includes credentialing during the individual's Provisional Certification Period (up to two years) and the cost of the provisional certificate.~~

~~See Chapter 4, Section 2, pp. 30-31 for more information on submission of the application packet and application fees.~~

~~B. Certification Application Fee: $55.00~~

~~This fee is due with submission of the application packet for full certification as either a CCMP-I or CCMP-II. It includes credentialing during the current Certification Period (up to two years) and the cost of the certificate.~~

~~See Chapter 4, Sections 3 and 4, pp. 31-33 for more information on submission of the application packet and application fees.~~

~~C. Module/Exam Fee: $20.00~~

~~This fee will go into effect upon the conclusion of the Grandfathering Period (beginning July 1, 2007) for registration for Module II and Module III. (Module I will be provided with no registration cost.) Over the span of the maximum twenty-four (24) months of provisional certification, the total amount due would be $40.00.~~
~~See Section 3, pp. 47-48 of this chapter for more information on fees related to the Case Management Core Training Program.~~

~~D. Renewal Fee: $30.00~~

~~This fee is due with the submission of the renewal application packet at the conclusion of each two-year Certification Period. It includes credentialing during the next two-year Certification Period.~~

~~See Chapter 5, Section 3, p. 41 for more information on the renewal application packet and the Renewal Fee.~~

~~E. Late Renewal Penalty Fee: $15.00~~

~~This fee is imposed when an individual has allowed his/her professional certification to lapse after the June 30th renewal deadline. It will be imposed by the Division of PLACE from July 1st through July 31st following biennial renewal.~~

~~See Chapter 5, Section 6, C., p. 44 and Section 5, p. 49 of this chapter for more information on renewal deadlines and the Late Renewal Penalty Fee.~~

~~F. Reexam Fee: $15.00~~

~~This fee is due with the registration of an individual to sit for a repeat administration of an exam.~~

~~See Chapter 3, Section 7, G., pp. 19-21 for more information on registering for a reexam.~~

~~G. Provisional Certificate Replacement Fee: $15.00~~

~~This fee is due with the written request for a replacement certificate for provisional certification (PCCMP). Payment of this fee is applicable separately to each request for a replacement certificate.~~

~~See Section 4, pp. 48-49 of this chapter for more information on replacement certificates.~~

~~H. Certificate Replacement Fee: $25.00~~

~~This fee is due with the written request for a replacement certificate for full certification (CCMP-I or CCMP-II). Payment of this fee is applicable separately to each request for a replacement certificate.~~

~~See Section 4, pp. 48-49 of this chapter for more information on replacement certificates.~~

~~I. Mailing Label Fee: $35.00~~

~~This fee is due with the written request for mailing labels. It covers the supplies, staff time and printing costs of producing printed mailing labels. This fee is applicable per category of professional credentialing. (Example: mailing labels for Case Management Professionals is one category; mailing labels for Case Management Professionals and Mental Health Therapists is two categories).~~

~~See Section 6, p. 49 of this chapter for more information on requesting mailing labels.~~

~~J. Nonsufficient Funds Fee: $25.00~~

~~This fee may be imposed by the Division of PLACE for any check returned due to insufficient funds.~~

~~Section 2: General Provisions~~

~~A. All fees paid related to Department of Mental Health professional credentialing are **nonrefundable**.~~

~~B. Fees shall be paid in full by check or money order made payable to the **Mississippi Department of Mental Health**. Cash is not accepted.~~

~~C. Fees are subject to deposit upon receipt. It is not possible for the Division of PLACE to hold fee checks for deposit.~~

~~D. No application, renewal application, Module registration, reexam registration, etc., shall be considered complete unless accompanied by the required fees.~~

~~E. Processing of the applicable applications, renewal applications, registration forms, etc., will cease upon return of a check due to nonsufficient funds.~~

F. An individual or program whose check has been returned due to nonsufficient funds may remedy the situation by paying the fees PLUS the Nonsufficient Funds Fee of $25.00 **by money order**.

G. Employers who choose to pay for multiple employees' fees may do so with one check; however, the check and the associated applications/ renewal applications/registration forms/etc., must be submitted together.

H. If an employer's business office needs to make special arrangements regarding payment of its employee's fees, please contact the Director of the Division of PLACE.

Section 3: Case Management Core Training Program (CM-CTP)

A. During the program's Grandfathering Period (July 1, 2005 – June 30, 2007), all three CM-CTP Modules are available with no registration fee. For more information, see Chapter 3, Section 1, B., (2) and (3), p. 8 OR Chapter 4, Section 1, A., (3) and (4), p. 24.

B. Upon conclusion of the Grandfathering Period, beginning July 1, 2007, a Module/Exam Fee of $20.00 per Module will be required at the time of registration for Module II and Module III.

C. Both during and following the program's Grandfathering Period, Module I of the CM-CTP will be made available at no registration cost through the Department of Mental Health.

D. Beginning July 1, 2007, individuals who submit CM-CTP module registration forms without the required Module/Exam Fees are not eligible for registration. Only individuals who submit complete Registration Forms and the appropriate Module/Exam Fees are eligible to be registered.

E. Both during and following the program's Grandfathering Period, individuals who need to take a reexamination (either the second or the fourth opportunity) are required to register as directed, including payment of the Reexam Fee.

F. Beginning July 1, 2007, individuals who are repeating a Module (the third opportunity) are also required to pay the applicable Module/Exam Fee upon registration. See Chapter 3, Section 7, G., pp. 19-21 for more information on reexamination.

Section 4: Certificate Replacement

A. Original certificate charges are included in the Provisional Certification Application Fee and the Certification Application Fee.

~~B. The required fee for replacing a provisional certificate for an individual holding a Current or Extended PCCMP is $15.00. See Section 1, G., pp. 46-47 of this chapter for more information on the Provisional Certificate Replacement Fee.~~

~~C. The required fee for replacing a full certificate for an individual holding a Current or Inactive CCMP I or CCMP II is $25.00. See Section 1, H., p. 47 of this chapter for more information on the Certificate Replacement Fee.~~

~~D. The Division of PLACE will replace a certificate as is indicated below.~~

~~(1) Printing Error: A certificate containing a printing error shall be replaced free of charge by the Division of PLACE upon receipt of a written request and the original certificate containing the error.~~

~~(2) If Damaged: The Division of PLACE may replace a damaged certificate upon receipt of a written request, the remnants of the original certificate and payment of the appropriate certificate replacement fee.~~

~~(3) If Lost, Stolen or Totally Destroyed: The Division of PLACE may replace a lost, stolen or totally destroyed certificate upon receipt of a written request, a notarized affidavit clearly stating what happened to the original and payment of the appropriate certificate replacement fee.~~

~~(4) If Name Has Changed: The Division of PLACE may produce a certificate bearing the individual's new legal name upon receipt of a written request clearly indicating the new name as it should appear on the certificate, the original certificate bearing the individual's previous name, copy of legal documentation indicating the new legal name and payment of the appropriate certificate replacement fee.~~

~~(5) If Never Received: The Division of PLACE may replace a certificate at no charge for a credentialed individual claiming never to have received his/her certificate. In order to make this claim, the individual must submit a notarized affidavit clearly stating that he/she has not received his/her certificate and that, if the original does appear, it will be returned to the Division.~~

~~Section 5: Late Renewal Penalty Fee~~

~~A. During the month of July, a certified individual submitting a late renewal application shall be required to pay a Late Renewal Penalty Fee.~~

~~B. No late renewal application shall be considered complete unless accompanied by the Late Renewal Penalty Fee.~~

~~Section 6: List of Case Management Professionals/Mailing Labels~~

A. ~~The list of individuals holding provisional certification (PCCMP) will be consistently updated as each provisionally certified individual upgrades to full certification.~~

B. ~~The list of individuals holding full certification (CCMP-I and CCMP-II) will be updated at least biennially at the time of renewal.~~

C. ~~Individuals who wish to publicize upcoming training events pertinent to the field of case management may request mailing labels for all Case Management Professionals. This information is available only in printed label format. The request should be made in writing and must be accompanied by the required Mailing Label Fee. See Section 1, I., p. 47 of this chapter for more information on the Mailing Label Fee.~~

D. ~~A list of currently credentialed Case Management Professionals will be made available to Mississippi state agencies upon request at no cost. However, requests from Mississippi state agencies for mailing labels must be accompanied by the Mailing Label Fee.~~

E. ~~The Division of PLACE reserves the right to refuse any request for mailing labels.~~

~~CHAPTER 7~~

~~Professional Responsibilities~~

~~Section 1: Scope of Practice~~

A. ~~Provisionally Certified Case Management Professionals, Certified Case Management Professionals I and Certified Case Management Professionals II are certified to provide or supervise case management services involving the application of the principles, methods and procedures of case management service within Mississippi's state mental health system. The principles, methods and procedures of case management service are expected to be in compliance with the *DMH Minimum Standards for Community Mental Health/Mental Retardation Services*. See Chapter 3, Section 1, C., p. 9 for a description of the state mental health system.~~

B. ~~This certification does not qualify an individual to provide services outside this scope of practice or in private practice. Practicing beyond the scope of practice may lead to sanctions as described in Chapter 8, Section 4, p. 64 of these regulations.~~

~~Section 2: Professional Identification~~

A. ~~Recognized professional titles within the Department of Mental Health Case Management Certification Program are:~~

~~(1) "Provisionally Certified Case Management Professional" or the abbreviation "PCCMP";~~

~~(2) "Certified Case Management Professional I" or the abbreviation "CCMP-I"; and,~~

~~(3) "Certified Case Management Professional II" or the abbreviation "CCMP-II."~~

~~B. A person issued a certificate by the Department of Mental Health may use the title appropriate to his/her category of professional certification while in the employ of a state mental health system program.~~

~~C. Professional identification is directly affected by employment. DMH-certified individuals who experience a change in or separation from state mental health system employment are expected to follow Section 3, pp. 50-51, or Section 4, p. 51 of this chapter, as appropriate.~~

~~Section 3: Reporting Changes in Vital Information~~

~~A. Credentialed individuals are required to notify the Division of PLACE within fourteen (14) days of a change in legal name, address or employment.~~

~~B. Name Change: An individual whose legal name has changed is expected to request a new certificate reflecting his/her new name. Follow the directions found in Chapter 6, Section 4, D., (4), pp. 48-49.~~

~~C. Address Change: An individual whose mailing address has changed is expected to contact the Division of PLACE with the new information.~~

~~D. Employment Change: An individual whose employment has changed has the two following options:~~

~~(1) If the new place of employment IS in the state mental health system (meeting the program requirements described in Chapter 3, Section 1, C., p. 9 of these regulations), the individual should submit a Verification of Employment Form from the new place of employment.~~

~~(2) If the new place of employment IS NOT in the state mental health system, the individual is separated from his/her DMH professional credential. Follow the directions found in Section 4 of this chapter.~~

~~Section 4: Separation from State Mental Health System Employment~~

~~A. Upon separation of the credentialed individual from state mental health system employment as described in Chapter 3, Section 1, C., p. 9, the individual is also separated from his/her DMH professional credential.~~

B. Upon separation of the credentialed individual from state mental health system employment as described in Chapter 3, Section 1, C., p. 9, the individual has the following options available to him/her:

(1) Relinquish his/her DMH credential and return his/her certificate to the Division of PLACE. Follow the directions found under Section 6, E., p. 55 of this chapter (for PCCMPs) or Section 7, E., p. 57 of this chapter (for CCMP-Is and CCMP-IIs) for **Relinquished Status**.

(2) A provisionally certified individual (PCCMP) could request a brief and temporary pause/ interruption to his/her provisional certification. Follow the directions found under Section 6, C., pp. 53-54 of this chapter for **Interrupted Status**.

(3) A fully certified individual (CCMP-I or CCMP-II) could submit a request to become inactive for a short time period. Follow the directions found under Section 7, B., p. 56 of this chapter for **Inactive Status**.

(4) A fully certified individual (CCMP-I or CCMP-II) who has become separated from state mental health system employment because he/she has retired could submit a request for his/her credential to be retired. Follow the directions found under Section 7, D., p. 57 of this chapter for **Retired Status**.

C. A provisionally certified individual (PCCMP) who does not achieve an appropriate status change will default from the Case Management Certification Program. See Section 6, D., pp. 54-55 of this chapter for more information on **Defaulted Status**.

D. A fully certified individual (CCMP-I or CCMP-II) who does not achieve an appropriate status change will lapse from the Case Management Certification Program. See Section 7, C., pp. 56-57 of this chapter for more information on **Lapsed Status**.

Section 5: Application Status Categories

The following status categories are applicable to applications for any level of initial credentialing available through the DMH Case Management Certification Program.

A. Hold Pending

(1) The Review Board may decide to hold an application and allow the applicant the opportunity to submit additional information if the Review Board members need more information or if they need clarification of submitted information to make a decision/recommendation.

(2) The applicant would be notified of this request for more information or clarification by written correspondence.

~~B. Denied~~

~~(1) The Review Board may deny initial application for credentialing for the following reasons, including, but not limited to: lack of appropriate employment; failure to pay required fees; lack of appropriate educational degrees; unacceptable practice of the applicant; violation of Principles of Ethical and Professional Conduct; conviction of a crime which is a felony under federal or state law; or, declaration of mental incompetence by the court.~~

~~(2) The applicant would be notified of this status by written correspondence.~~

~~Section 6: Provisional Certification Status Categories~~

~~The following status categories are applicable to individuals holding provisional certification as a Provisionally Certified Case Management Professional (PCCMP).~~

~~A. Current Status~~

~~(1) An individual holding provisional certification who is in good standing, including timely submission of all forms, fees, changes of information, etc., and without sanctions, will be considered to be in Current status.~~

~~(2) An individual whose credential is in Current status is able to practice within the scope of practice of this credentialing program and the ethical standards/principles.~~

~~(3) In order to maintain Current status, any Provisionally Certified Case Management Professional (PCCMP) is expected to notify the Division of PLACE in writing within fourteen (14) days of a change in vital information such as name, address, employment, etc.~~

~~(4) The name of a person whose credential is in Current status will appear on any list produced by the Division if he/she is Current at the time the list is produced.~~

~~B. Extended Status~~

~~(1) The Review Board may grant Extended status to an individual who is unable to complete all requirements of provisional certification within the required two year (24 consecutive months) time limit due to a rare and extenuating circumstance such as medical treatment, drug treatment, leave of absence, maternity leave, etc.~~

~~(2) Extended status is intended to allow a brief extension in an individual's Provisional Certification Period so that he/she can complete requirements.~~

~~(3) Extended status will only be granted to a provisional certificant who is in good standing (Current Status) at the time of the request.~~

~~(4) In order to obtain Extended status, the individual holding provisional certification must submit a written request to the Division of PLACE. The Division of PLACE will present the request to the Review Board at its next regularly scheduled meeting.~~

~~(5) In the written request, the provisional certificant should specifically request Extended status, provide an explanation as to why the extension is needed and indicate a specific time period for which he/she is requesting the extension. Any documentation which supports the request should be submitted along with the request.~~

~~(6) The Review Board may verify the circumstances surrounding the request for Extended status.~~

~~(7) An individual on Extended status is expected to comply with the terms of Extended status as granted by the Review Board. Failure to do so may result in Defaulted status.~~

~~(8) An individual on Extended status must continue to be employed in a state mental health system program as described in Chapter 3, Section 1, C., p. 9.~~

~~(9) An individual on Extended status is allowed to practice as a PCCMP and is expected to complete **all** requirements of provisional certification by the approved deadline for the extension, including completion of the Case Management Core Training Program modules.~~

~~C. Interrupted Status~~

~~(1) The Review Board may grant Interrupted status to a provisional certificant who is unable to complete all requirements of provisional certification within the required two year (24 consecutive months) time limit because he/she has temporarily left employment in a state mental health system program. State mental health system programs are described in Chapter 3, Section 1, C., p. 9.~~

~~(2) Interrupted status is intended to allow a brief pause/interruption in an individual's provisional certification until he/she can regain employment in an applicable state mental health system program. State mental health system programs are described in Chapter 3, Section 1, C., p. 9.~~

~~(3) Interrupted status will only be granted to a provisional certificant who is in good standing (Current Status) at the time of the request.~~

~~(4) In order to obtain Interrupted status, the individual holding provisional certification must submit a written request to the Division of PLACE. The Division of PLACE will present the request to the Review Board at its next regularly scheduled meeting.~~

~~(5) In the written request, the provisional certificant should specifically request Interrupted status, provide an explanation as to employment status and indicate a~~

~~specific time period when he/she anticipates returning to state mental health system employment.~~

~~(6) The Review Board may verify the circumstances surrounding the request for Interrupted status.~~

~~(7) Upon approval of Interrupted status, the Review Board will grant a new extended deadline for the individual's Provisional Certification Period deadline.~~

~~(8) An individual on Interrupted status is expected to comply with the terms of Interrupted status as granted by the Review Board. Failure to do so may result in Defaulted status.~~

~~(9) An individual on Interrupted status may neither practice as a PCCMP nor register for or attend the Case Management Core Training Program.~~

~~(10) To return to Current status, an individual on Interrupted status would submit a written request to be returned to Current status accompanied by a new Verification of Employment Form from the individual's new place of employment.~~

~~(11) Upon returning to Current status, the provisional certificant will again be allowed to practice as a PCCMP and will be able to register for and attend the Case Management Core Training Program.~~

~~(12) An individual who was previously in Interrupted status and who has been returned to Current status is expected to complete **all** requirements of provisional certification by the approved deadline for the extension, including completion of the Case Management Core Training Program modules.~~

~~D. Defaulted~~

~~(1) A provisional certificant is considered to have defaulted from the Case Management Certification Program upon any of the following situations:~~

~~(a) Upon failure to complete all requirements during the twenty-four (24) consecutive month Provisional Certification Period as described in Chapter 3, Section 2, B., (3), p. 11.~~

~~(b) Upon failure to submit an upgrade application so that it is received by the Division within established timelines as described in Chapter 3, Section 3, C., pp. 12-13 or Chapter 4, Section 1, A., (14), p. 25.~~

~~(c) Upon failure to submit a request for Extended or Interrupted status so that it is received within established timelines as described in Chapter 3, Section 2, B., (8), p. 11.~~

~~(d) Upon the Review Board's determination of failure to submit a satisfactory written request for Extended or Interrupted status as described in Chapter 3, Section 2, B., (8), p. 11 and in Section 6, B. and C., pp. 52-54 of this chapter.~~

~~(e) Upon failure to comply with the terms of Extended or Interrupted status granted by the Review Board as described in Chapter 3, Section 2, B., (8), p. 11 and in Section 6, B. and C., pp. 52-54 of this chapter.~~

~~(f) Upon failure of any one (1) of the Module examinations four (4) times, including any forfeiture(s), as described in Chapter 3, Section 7, G., (4), p. 20.~~

~~(g) Upon separation from employment in the state mental health system as described in Chapter 3, Section 1, C., p. 9 and in Section 4, p. 51 of this chapter.~~

~~(2) Upon defaulting from the Case Management Certification Program, the individual immediately ceases to hold provisional certification (PCCMP).~~

~~(3) Defaulting from the program immediately overrides any other status category held by a provisional certificant.~~

~~(4) To return to Current status, an individual in Defaulted status would be required to repeat the application process meeting all current requirements, including any specific requirements determined necessary by the Review Board.~~

~~E. Relinquished Status~~

~~(1) A provisional certificant who determines that he/she no longer wants or needs to hold and maintain professional certification/licensure may submit a written request to the Review Board requesting Relinquished status.~~

~~(2) The written request must be accompanied by the individual's original certificate(s) attesting to the titles(s) relinquished.~~

~~(3) The Review Board may verify the circumstances surrounding the request for Relinquished status.~~

~~F. Denied~~

~~(1) The Review Board may deny upgrade application for professional certification for the following reasons, including, but not limited to: lack of appropriate employment; lack of appropriate experience; failure to pay required fees; lack of appropriate educational degrees; failure to attend and/or pass required Modules and exams; unacceptable practice of the applicant; violation of Principles of Ethical and Professional Conduct; conviction of a crime which is a felony under federal or state law; or, declaration of mental incompetence by the court.~~

~~(2) The applicant would be notified of this status by written correspondence.~~

~~Section 7: Certification Status Categories~~

~~The following status categories are applicable to individuals holding full certification as either a Certified Case Management Professional I (CCMP-I) or a Certified Case Management Professional II (CCMP-II).~~

~~A. Current Status~~

~~(1) An individual holding certification which is in good standing, including timely submission of all forms, fees, changes of information, etc., and without sanctions, will be considered to be in Current status.~~

~~(2) An individual whose credential is in Current status is able to practice within the scope of practice of this credentialing program and the ethical standards/principles.~~

~~(3) In order to maintain Current status, any certificant (CCMP-I or CCMP-II) is expected to notify the Division of PLACE in writing within fourteen (14) days of a change in vital information such as name, address, employment, etc.~~

~~(4) The name of a person whose credential is in Current status will appear on any list produced by the Division if he/she is Current at the time the list is produced.~~

~~B. Inactive Status~~

~~(1) The Review Board may grant Inactive status to an individual who is temporarily leaving employment in the state mental health system and who wishes to maintain his/her professional credential. (Examples: internship, medical treatment, drug treatment, education, leave of absence, extended maternity leave, etc.). State mental health system programs are described in Chapter 3, Section 1, C., p. 9.~~

~~(2) Inactive status is intended to allow a temporary pause in an individual's certification until he/she can regain or return to employment in an applicable state mental health system program.~~

~~(3) Inactive status will only be granted to a CCMP-I or CCMP-II who is in good standing (Current status) at the time of the request.~~

~~(4) In order to pursue Inactive status, the individual holding certification must submit a written request to the Division of PLACE. The Division of PLACE will present the request to the Review Board at its next regularly scheduled meeting.~~

~~(5) In the written request, the certificant should specifically request Inactive status, provide an explanation as to why the status change is needed and indicate a specific~~

~~time period for the inactivity. Documentation which supports the request may be submitted along with the request.~~

~~(6) The Review Board may verify the circumstances surrounding the request for Inactive status.~~

~~(7) Certificants who are granted Inactive status are required to meet biennial renewal requirements in a timely manner. If not, the certificant's credential will Lapse.~~

~~(8) An individual in Inactive status is allowed to continue to use the professional title behind his/her name, but is **not** allowed to practice.~~

~~(9) A person in Inactive status may be returned to Current status upon submission of a written request, an appropriate Verification of Employment Form reflecting employment within the state mental health system and proof of required continuing education Contact Hours as deemed necessary by the Review Board.~~

~~C. Lapsed Status~~

~~(1) Upon failure to renew professional certification in a timely manner and failure to make a special request and obtain another appropriate certification status, an individual's certification expires and is considered to be Lapsed. See Chapter 5, Section 4, p. 42 for more information on special requests and Section 6, pp. 43-44 for more information on certificate expiration timelines.~~

~~(2) Upon separation from state mental health system employment and failure to request and obtain another appropriate certification status, an individual's certification expires and is considered to be Lapsed. See Section 4, D., p. 51 of this chapter for more information on lapsing due to separation from applicable employment.~~

~~(3) Lapsing from the program immediately overrides any other status category held by a certificant.~~

~~(4) To return to Current status, an individual would be required to repeat the application process and meet all current professional certification requirements.~~

~~(5) This status category is not applicable to an individual who has allowed his/her CCMP-I to "lapse" due to the fact that he/she has upgraded to CCMP-II.~~

~~D. Retired Status~~

~~(1) The Review Board may grant Retired status to an individual who has retired and is no longer employed in the state mental health system as described in Chapter 3, Section 1, C., p. 9.~~

~~(2) Retired status is intended for individuals who have ceased working because they have either reached the age of retirement or they have accumulated the number of years of work required by the employer to retire.~~

~~(3) In order to pursue Retired status, the individual, upon retirement, must submit a written request to the Division of PLACE. The Division of PLACE will present the request to the Review Board at its next regularly scheduled meeting.~~

~~(4) In the written request, the individual should specifically request Retired status and indicate the date of retirement.~~

~~(5) The Review Board may verify the circumstances surrounding the request for Retired status.~~

~~(6) The individual granted Retired status is no longer required to meet biennial renewal requirements/fees and is permitted to keep his/her certificate.~~

~~E. Relinquished Status~~

~~(1) A certificant who determines that he/she no longer wants or needs to hold and maintain professional certification may submit a written request to the Review Board requesting Relinquished status.~~

~~(2) The written request must be accompanied by the individual's original certificate(s) attesting to the title(s) relinquished.~~

~~(3) The Review Board may verify the circumstances surrounding the request for Relinquished status.~~

~~F. Denied~~

~~(1) The Review Board may deny upgrade or renewal application for professional certification for the following reasons, including, but not limited to: lack of appropriate employment; lack of appropriate experience; failure to pay required fees; lack of appropriate educational degrees; failure to attend and pass required Modules and exams; failure to acquire necessary inservice/training Contact Hours; unacceptable practice of the applicant; violation of Principles of Ethical and Professional Conduct; conviction of a crime which is a felony under federal or state law; or, declaration of mental incompetence by the court.~~

~~(2) The applicant would be notified of this status by written correspondence.~~

~~Section 8: Principles of Ethical and Professional Conduct~~

~~A. All applicants, Provisionally Certified Case Management Professionals, Certified Case Management Professionals I and Certified Case Management Professionals II shall~~

~~comply with ethical standards/ principles as established by the Review Board and the Department of Mental Health.~~

~~B. Introduction~~

~~The State Legislature granted Statutory Authority for Mississippi Department of Mental Health certification/licensure programs in 1996. As a result, the Division of Professional Licensure and Certification was created to develop and implement the programs. Having been amended by the State Legislature in 1997, Section 41-4-7 of the *Mississippi Code of 1972, Annotated* currently includes a provision authorizing the State Board of Mental Health to certify/license case managers, mental health therapists, mental retardation therapists, mental health/retardation administrators, addiction counselors and others as deemed appropriate by the State Board of Mental Health.~~

~~The Mississippi Department of Mental Health (DMH) Division of Professional Licensure and Certification Review Board serves as the governing body to the everyday professional conduct of DMH credentialed individuals. Individuals credentialed through the DMH may identify with different professional associations and are often certified by other groups that promulgated codes of ethics.~~

~~The DMH Principles of Ethical and Professional Conduct, herein referred to as "the principles," provide a minimal ethical standard for the professional behavior of all individuals credentialed through the DMH. The principles provide a level of expectation for ethical practice from all who hold a DMH credential. In addition, the principles provide an enforceable standard for all DMH credentialed individuals and facilitate an avenue for recourse in case of a perceived ethical violation.~~

~~Applicable federal and state laws, the principles, program policies and any other pertinent rules must be observed when conducting business as a DMH credentialed professional. Alleged violations of the principles may be subject to disciplinary action if the Review Board finds that a person is guilty of any violation of the principles. For more information on disciplinary action see the Rules, Regulations and Application Guidelines for each individual discipline.~~

~~While the principles cannot guarantee ethical practice by all DMH credentialed individuals or resolve all issues, the intent of the principles is to provide guidelines for individuals who, in good faith, seek to make reliable ethical judgments. Six general principles of ethical and professional conduct follow. For more specific information on professional responsibility see the Rules, Regulations and Application Guidelines document for each individual discipline.~~

~~C. Principle I: — Competence~~

~~(1) Individuals holding a current credential from the Mississippi Department of Mental Health (DMH) must be employed by a program that receives funding from or is accredited or administered by the DMH.~~

~~(2) Individuals who hold a credential through DMH must notify the Division of Professional Licensure and Certification upon any change affecting credential status, especially a change in employment.~~

~~(3) Individuals holding a credential from DMH must represent themselves as competent **only within** the boundaries of their education, training, license, certification, supervised experience or other relevant professional experience.~~

~~(4) Individuals holding a credential from DMH must provide services **only within** the boundaries of their education, training, license, certification, supervised experience or other relevant professional experience. Services provided must be based on the most current information and knowledge available within the scope of the services of the DMH.~~

~~(5) Individuals who hold another professional credential shall abide by all principles contained herein.~~

~~(6) The principles do not alleviate the individual responsibility to other ethical, programmatic or professional guidelines. Rather, the principles must be adhered to in addition to other applicable ethical, programmatic and professional criteria.~~

~~D. Principle II: Confidentiality~~

~~(1) Individuals holding a credential from DMH have an obligation to respect the confidentiality rights of the individuals with whom they work and must take reasonable precautions to preserve confidentiality.~~

~~(2) Members of a treatment team or those collaborating on the care of an individual shall maintain confidentiality within the parameters of the treatment setting.~~

~~(3) Confidential information may only be disclosed with appropriate valid consent from the individual receiving services or a person legally authorized to consent on behalf of the individual.~~

~~(4) All information collected for the purpose of service delivery must be kept confidential and released only when authorized by a re-disclosure consent or state law (or federal law).~~

~~(5) Individuals involved in family, couples, marital or group counseling must be informed of their individual right to confidentiality.~~

~~(6) DMH credentialed individuals must preserve the confidentiality of information shared by others as well as agency policy concerning the disclosure of confidential information and must explain these to the individual receiving services.~~

~~(7) When consulting with colleagues, DMH credentialed individuals do not share confidential information that could lead to the identification of an individual receiving services with whom they have a confidential relationship unless they have obtained the prior consent of the person. Information may only be shared to the extent necessary to achieve the purposes of consultation.~~

~~(8) Permission for the use of electronic recording of interviews must be secured, prior to the interview, from the individual receiving services or a person legally authorized to consent on behalf of the individual receiving services.~~

~~(9) Confidentiality may be waived if disclosure is necessary to prevent serious, foreseeable, and imminent harm to oneself or other identifiable person or when laws or regulations require disclosure without an individual's consent.~~

~~(10) The individual receiving services' confidentiality privilege is waived if the individual brings charges against a DMH credentialed individual.~~

~~(11) Confidentiality may be waived in compliance with appropriate statutes.~~

~~(12) In all instances, individuals who hold a credential from the DMH should disclose the least amount of confidential information necessary to achieve the desired purpose.~~

~~E. Principle III: Respect for People's Rights and Dignity~~

~~(1) Individuals who hold a credential from DMH have a primary responsibility to the individual to whom they provide services. The respect of the fundamental rights, dignity and worth of all people is of the utmost importance.~~

~~(2) DMH credentialed individuals must be aware of and accept the cultural, individual and role differences that occur in the service delivery environment.~~

~~(3) DMH credentialed individuals do not discriminate against any individual because of race, color, creed, sex, religion, national origin, age, disability or political affiliation.~~

~~(4) DMH credentialed individuals actively work to eliminate the effect of bias on the provision of services, and they do not knowingly participate in or condone discriminatory practices.~~

~~(5) Individuals who hold a DMH credential who witness or have knowledge of unethical or discriminatory practices of other individuals who hold a DMH credential are obligated to report such practices to the Division of Professional Licensure and Certification. For more information on the complaint process, see the Rules, Regulations and Application Guidelines document for each individual discipline.~~

~~F. Principle IV: Reporting Abuse~~

~~DMH credentialed individuals must meet reporting requirements as outlined by the Vulnerable Adults Act and the child abuse reporting statutes.~~

~~G. Principle V: Sexual Harassment/ Misconduct~~

~~Sexual harassment/misconduct is considered to be any unwelcome solicitation, physical advance or verbal or nonverbal conduct that is sexual in nature. Sexual harassment/ misconduct can consist of a single onerous act or of multiple persistent or pervasive acts.~~

~~(1) Individuals who hold a credential from DMH will not knowingly engage in behavior that is sexually harassing or demeaning to persons with whom they interact within the service delivery environment.~~

~~(2) Any behavior that could be construed as sexual harassment during the DMH credentialed individual's function of providing services for a program that is funded/certified/administered through the DMH, shall be subject to disciplinary action.~~

~~H. Principle VI: Drug Free Workplace~~

~~The Department of Mental Health adopted written policy in Section 71-7-1 through 71-7-31 of the *Mississippi Code of 1972, Annotated* which outlines State policy on Drug Free Workplace. Programs funded/certified/ administered and individuals who hold a credential through the Mississippi Department of Mental Health will be expected to abide by this provision.~~

~~Section 9: Credential Verification and Reporting~~

~~Upon verbal or written request for credential verification, the Division of PLACE reports specific information about provisional certificants and certificants to Medicaid, insurance companies, prospective employers, other state agencies, etc. The fields of information which may be shared are:~~

~~A. Name;~~

~~B. Type of certification;~~

~~C. Certificate number;~~

~~D. Date of issuance;~~

~~E. Date of expiration;~~

~~F. Credential status; and,~~

~~G. Whether or not formal disciplinary action has been taken against the individual.~~

~~CHAPTER 8~~

~~Complaints and Disciplinary Action~~

~~Section 1: Grounds for Disciplinary Action~~

~~A. Individuals holding provisional certification or either level of full certification shall conduct their activities and services in accordance with applicable federal and state laws, these rules and regulations, ethical principles and any other applicable rules.~~

~~B. Individuals holding provisional certification or either level of full certification may be subject to the exercise of disciplinary action if the Review Board finds that he/she is guilty of any of the following or has knowledge of the following and has not reported such to the Division of PLACE. Grounds for disciplinary action include, but are not limited to:~~

~~(1) Negligence in the practice or performance of professional services or activities;~~

~~(2) Engaging in dishonorable, unethical, unprofessional conduct of a character likely to deceive, defraud, or cause harm in the course of professional services or activities;~~

~~(3) Engaging in lewd conduct in connection with professional services or activities;~~

~~(4) Obtaining a Department of Mental Health certificate or renewal certificate by fraud, deceit, material deception or other misrepresentation;~~

~~(5) Perpetrating or cooperating in fraud or material deception in obtaining or renewing professional credentialing or attempting the same;~~

~~(6) Being convicted of any crime which has a substantial relationship to the professionally credentialed individual's activities and services or an essential element of which is misstatement, fraud, or dishonesty;~~

~~(7) Being convicted of any crime which is a felony under federal or state law;~~

~~(8) Engaging in or permitting the performance of unacceptable services personally or by assistants working under the credentialed individual's supervision due to the credentialed individual's deliberate or grossly negligent act or failure to act, regardless or whether actual damage is established;~~

~~(9) Treating any person differentially or detrimentally because of race, color, creed, age, sex, religion, national origin, or disability;~~

~~(10) Engaging in false or misleading advertising;~~

~~(11) Revealing confidential information except as may be required by law;~~

~~(12) Failing to inform a client of the fact that the client no longer needs the services of the credentialed individual;~~

~~(13) Performing services for compensation or representing oneself as a DMH credentialed professional while holding a certificate in a Suspended, Surrendered or Revoked status;~~

~~(14) Attempting to utilize the certificate issued by the Department of Mental Health for private practice or for services outside the scope of practice;~~

~~(15) Engaging in any conduct considered by the Review Board to be detrimental to the profession; or,~~

~~(16) Engaging in any conduct considered by the Review Board to be in violation of the Principles of Ethical and Professional Conduct.~~

~~Section 2: Complaints and Investigation~~

~~A. All complaints concerning a DMH credentialed individual's professional service or activities shall be received by the Division of PLACE.~~

~~B. The Division of PLACE shall log each complaint by recording the following information:~~

~~(1) The DMH credentialed individual's name;~~

~~(2) The name of the complaining party, if known;~~

~~(3) The date of the complaint;~~

~~(4) A brief statement of the complaint; and,~~

~~(5) Disposition or attempts at settlement.~~

~~C. All complaints shall be investigated and evaluated by the Review Board.~~

~~D. The Review Board shall make the determination of the necessity of a disciplinary hearing.~~

~~Section 3: Notice of Complaint and Disciplinary Hearing~~

~~A. The Review Board shall notify the DMH credentialed individual that a complaint has been received and that a disciplinary hearing will be held.~~

~~B. The DMH credentialed individual shall be notified at least thirty (30) days before the date of the disciplinary hearing. Notification shall be considered to have been given if the notice was personally received by the DMH credentialed individual or if the notice was mailed "certified, return receipt requested" to the last known address as listed with the Division of PLACE.~~

~~C. This notice shall inform the DMH credentialed individual of the facts which are the basis of the complaint and which are specific enough to enable the credentialed individual to defend against the complaints. The notice of the complaint and the disciplinary hearing shall also inform the credentialed individual of the following:~~

~~(1) The date, time and location of the disciplinary hearing;~~

~~(2) That the DMH credentialed individual may appear personally at the disciplinary hearing and may be represented by counsel;~~

~~(3) That the DMH credentialed individual shall have the right to produce witnesses and evidence on his/her behalf and shall have the right to cross-examine adverse witnesses and evidence;~~

~~(4) That the Rules of Evidence do not apply;~~

~~(5) That the disciplinary hearing could result in sanctions being taken against the DMH credentialed individual;~~

~~(6) That within fifteen (15) days of the disciplinary hearing, the Review Board shall, in writing, advise the DMH credentialed individual what sanctions, if any, shall be imposed and the basis for the Review Board's action; and,~~

~~(7) That disposition of any formal complaint may be made by consent order or stipulation between the Review Board and the DMH credentialed individual.~~

~~D. The disciplinary hearing shall be an informal hearing and shall be presided over by the Chairperson of the Review Board.~~

~~E. Within fifteen (15) days of the disciplinary hearing, the Review Board shall provide written notification to the DMH credentialed individual as to what sanctions, if any, shall be imposed and the basis for the Review Board's action.~~

~~F. All disciplinary hearing procedures are matters of public record and shall be preserved pursuant to state law.~~

~~Section 4: Sanctions~~

~~The Review Board may impose any of the following sanctions, singly or in combination, when it finds that a DMH credentialed individual is guilty of any of the offenses referred to in Section 1, pp. 62-63 of this chapter:~~

~~A. Issuance of a letter of official reprimand to the DMH credentialed individual;~~

~~B. Refusal to renew a certificate;~~

~~C. Restriction or limitation of the individual's scope of practice;~~

~~D. Suspension of the certificate for any period of time;~~

~~E. Revocation of the certificate;~~

~~F. Approval of the individual's request for surrender of professional credential; or,~~

~~G. Imposition of a monetary penalty of not more than $1,000.00.~~

~~Section 5: Disciplinary Status Categories~~

~~Disciplinary status categories are applicable to individuals holding any level of credentialing available through the DMH Case Management Certification Program.~~

~~A. Limited~~

~~(1) The Review Board, as a result of disciplinary action as defined in this chapter, may choose to restrict or limit a certificant's practice.~~

~~(2) To return to Current status, an individual with a Limited certification would be required to meet all requirements as determined to be necessary by the Review Board and/or Executive Director.~~

~~B. Suspended~~

~~(1) The Review Board, as a result of disciplinary action as defined in this chapter, may choose to invalidate a certificant's certification for any period of time.~~

~~(2) The individual's certificate shall be turned over to the Division for the period of suspension.~~

~~(3) To return to Current status, an individual with a Suspended certification would be required to meet all requirements as determined to be necessary by the Review Board and/or Executive Director.~~

~~C. Surrendered~~

~~(1) The Review Board, as a result of disciplinary action as defined in this chapter, may choose to request the surrender of a certificant's certificate.~~

~~(2) In addition, the certificant may request Surrendered status; however, the certificant's request for Surrendered status is subject to the approval of the Review Board and/or Executive Director.~~

~~(3) The surrendered certificate shall be turned over to the Division.~~

~~(4) To return to Current status, an individual with a Surrendered certification would be required to meet all requirements as determined to be necessary by the Review Board and/or Executive Director.~~

~~D. Revoked~~

~~(1) The Review Board, as a result of disciplinary action as defined in this chapter, may revoke an individual's certification.~~

~~(2) Once professional certification is Revoked, the individual must return his/her certificate to the Division.~~

~~(3) Following the period of revocation established by the Review Board, the individual may reapply for certification by repeating the application process, meeting all current professional certification/ requirements in addition to any additional requirements determined to be necessary by the Review Board and/or Executive Director.~~

~~Section 6: Disciplinary Appeal~~

~~A. Following a disciplinary hearing, a DMH credentialed individual aggrieved by a decision of the Review Board related to the disciplinary action/sanctions shall have the right to appeal to the Executive Director. The credentialed individual must notify the Division of PLACE within fifteen (15) days of receipt of the written notification of the Review Board's action.~~

~~The Executive Director shall review the DMH credentialed individual's case and notify the credentialed individual of the results of this review within thirty (30) days.~~

~~B. A DMH credentialed individual aggrieved by the decision of the Executive Director regarding the appeal may then appeal to the State Board of Mental Health. Appeals to the State Board of Mental Health must be made and conducted in accordance with established Board policy (Policy D-0025 entitled "Appeals to the Board of Mental Health").~~

~~The credentialed individual must notify the Division of PLACE within fifteen (15) days of receipt of the written notification of the Executive Director's decision.~~

~~The State Board of Mental Health shall review the credentialed individual's case and notify the individual of the results of this review within forty-five (45) days.~~

~~C. Further appeal shall be pursuant to any remedies available at law.~~

Source: Section 41-4-7 of the Mississippi Code of 1972, Annotated