

CLMHD 2022 Mental Health First Aid Instructor Certification Program Application Packet

Thank you for your interest in becoming a certified Mental Health First Aid instructor. This fall we are offering **TWO** opportunities for Instructor Certification. Each training will accommodate 16 participants, who will become certified to offer the Youth MHFA course to members of the general public, **both in-person and virtually.**

Each participant must review this entire document; sign the **Applicant Attestation** and send the application to your DCS to complete the **DCS Attestation**, and then submit the completed packet to CLMHD for review by the MHFA Advisory Committee. To identify your county's DCS, please visit http://www.clmhd.org/contact_local_mental_hygiene_departments/

Applications are due no later than **COB, Friday, September 2, 2022.** Candidates will be notified by **Friday, September 9, 2022** if they have been selected to participate in this year's training.

Session dates are as follows:

- **Session 1: YOUTH MHFA** – Tuesday, 10/25 – Thursday, 10/27
- **Session 2: YOUTH MHFA** – Tuesday 11/1 – Thursday, 11/3

The number of YMHFA trainings you are able to offer each year may vary based on the organization and target audiences, but certified instructors are expected to offer **at least three trainings per year** to maintain certification.

- 1) Virtual Instructor Course Details (page 2)
- 2) Applicant Information (page 3)
- 3) Applicant Experience and Qualifications (page 4)
- 4) Applicant Attestation (page 5)
- 5) DCS Attestation (page 6) - required for submission

Please email completed packet to Francine Sinkoff at fs@clmhd.org with subject line "YMHFA Instructor Certification Application - Oct/Nov 2022".

VIRTUAL INSTRUCTION COURSE DETAILS

VIRTUAL Instructor Training Course Outline

- Once the participant's registration is confirmed, they will receive additional instructions, including directions for ordering all course materials. There's no additional cost for the materials.
- One week before the instructor-led training, participants will gain access to 8 hours of online, self-paced work that they must complete before the first scheduled day of Instructor-led training. At this time, participants will also be asked to review the safety guidelines and sign an agreement form.
- Upon completing the pre-work, MHFA staff will meet individually, by video conference, with each participant to review their technology set-up, safety questions and completed pre-work. The meetings should last 15 to 20 minutes.
- The trainer will lead an interactive online course in real time over three days, each with four to eight hours of content. (Participants will receive a full agenda when registration is confirmed.)
 - Day 1 – Unpacking the course, questions and answers (6 - 8 hours)
 - Day 2 – Coaching by appointment (30 minutes), independent prep for presentation (2 - 4 hours), teaching strategies (1 - 2 hours)
 - Day 3 – Candidates present an assigned section of the course, review one-on-one feedback from the trainer, and participate/view other candidate presentations

IT Requirements

The course will be hosted through [ZOOM](#), and we will provide a how-to guide for participants who have never used this platform.

- **Computer** – Windows or Apple desktop or laptop computer OR Mobile Device/Tablet/Surface: iOS, Android, Windows
- **Phone** (backup audio option) – It is highly recommended that users join the course from a tablet, laptop or desktop computer for the best experience. Phones may be used for audio support.
- **Microphone and speakers** – Participants whose computers do not have a microphone and/or speakers can use the dial-in option from their phone for audio.
- **HD Webcam** – Either built into the user's device or external.
- **Internet Connection** – We recommend an internet speed of at least 5 mbps upload/download speed. Users can test their internet speed here: <https://www.speedtest.net/>

Part I: APPLICANT INFORMATION	
Name (First Last):	
Title:	
Organization:	
Email:	
Phone Number:	
Secondary Phone Number:	
Mailing Address:	
Training Date Preference: <i>Please check only ONE box – preferred date isn't guaranteed but will be considered</i>	Session 1: YOUTH MHFA – Tues, 10/25 – Thurs, 10/27 Session 2: YOUTH MHFA – Tues, 11/1 – Thurs, 11/3
Primary Contact at Your Organization:	
Position / Title:	
Email:	
Phone Number:	
Does your organization have a primary contact for Mental Health First Aid activities?	No Yes (myself or contact listed above) Yes, contact information provided below: Name: Email: Phone number:
Other languages spoken? <i>(please list)</i>	

Part II: EXPERIENCE AND QUALIFICATIONS

1. Please provide a brief description of your professional and/or personal experience in the field of mental health that qualify you to teach Youth MHFA:

2. Please provide a brief description of your experience in adult instruction or any relevant training history:

3. Have you taken an MHFA course yourself?

<input type="checkbox"/> No <input type="checkbox"/> Yes (please specify): <input type="checkbox"/> Adult <input type="checkbox"/> Youth	Date: <hr/> Location: <hr/> Organization providing training:
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4. Do you plan on providing trainings to a target group? (agency/organization, school district, community, etc.)

5. Are you able to offer the training in Spanish?

No Yes

APPLICANT ATTESTATION

The ability to effectively deliver Mental Health First Aid nationwide is dependent on the quality of the instructors and their dedication to and enthusiasm for the program. The MHFA course may only be taught by certified MHFA instructors, who participate in a rigorous process to ensure the highest standard is maintained & their role as an instructor is clearly defined. As such, this application packet is designed to both let us learn about your plan & for you to learn about how instructors fit into ours as part of the larger vision for Mental Health First Aid in the US, so we expect you will give it careful attention.

SELECTION CRITERIA

MHFA instructor applicants are expected to come to the instructor training with an extensive knowledge of mental health (personal or professional) and to possess teaching skills or related training experience.

Each MHFA instructor must have the mental health knowledge and experience to be able to facilitate discussions and answer questions within the key messages of the course, and can identify mental health services within their state and community. In their responses to the above questions, applications should highlight any experience of participants related to the instruction of adult populations, the ability to effectively facilitate diverse groups, and the competency/flexibility to create and maintain a positive learning environment.

Both agency or corporate employees and independent individuals may become certified to deliver the MHFA course. In either situation, outlining a plan for teaching the course, and one's experience in reaching community partners, must be included in the application via responses to the above questions. Individuals applying to become MHFA-USA Instructors under the affiliation of their employer or otherwise as part of an organization must acquire a signature from one member of senior leadership in their organization on this form.

One aim of MHFA is to reduce the discrimination surrounding mental health problems. The curriculum is also specifically designed to promote the recovery/resiliency paradigm. Instructors must exhibit positive attitudes towards individuals with mental illnesses and should have enthusiasm to reduce the negative attitudes/discrimination associated with mental illness and addiction disorders.

ATTESTATION

My signature indicates that I have read all portions of the Mental Health First Aid Instructor Application and I have an understanding and commitment to the requirements of being an instructor.

Applicant Signature _____

Date _____

DCS ATTESTATION

The MHFA Advisory Committee relies on input from the DCS to inform the selection process for this training. Please respond to the following two questions to explain your interest in putting this candidate through for consideration. **THIS FORM IS REQUIRED FOR CANDIDATE CONSIDERATION.**

How does selecting this individual for this year's training fit into your plan or vision for expanding Youth MHFA in your county?

Briefly, what is your county's current capacity for Youth MHFA training?

ATTESTATION

My signature indicates that I am knowledgeable about Mental Health First Aid and support the Applicant in his/her desire to become a certified instructor for the Youth MHFA course. We will work cooperatively with the Applicant to reduce stigma associated with mental health disorders by promoting Youth MHFA.

DCS Signature _____

Date _____