Behavioral Health Division
Mental Health and Substance Abuse Section
Phone: (307) 777-5253
Toll-Free 1-800-535-4006
Fax: (307) 777-5580

Human Resources Management Affirmation Form

In accordance with the Wyoming Standards Chapter 2, Section 10 (b)(i) clinical oversight must consist of one (1) contact per month between a clinical supervisor and treatment staff or peer consultation if the provider is one person.

Professional Development Provider Instructions: The provider will affirm by initialing and dating that each substance abuse treatment staff has completed all staff training listed below:

Training Topic Areas	Initials & Date of Completion
Client Rights Ch. 2, Sec. 9	
Confidentiality Ch. 2, Sec. 9	
Placement of clients based on ASAM Ch. 2, Sec. 9	
Treatment Process & Clinical Protocols Ch. 2, Sec. 9	
Demonstrating Competency with SUD Ch. 2, Sec. 10	
Professional Standards Ch 2. Sec. 11	
Family Centered Services Ch. 2, Sec. 12	
Group Therapy SUD Standards Ch. 2, Sec. 12	
IOP Service Standards Ch. 2, Sec. 13	

Peer Consultation Provider Instructions: A minimum of one (1) contact per month with another current licensed professional by the Wyoming Mental Health Professions Licensing Board. Peer should emphasize critical yet supportive feedback with peers. Consultation topics should incorporate evidence-based practices into clinical material.

Personnel Records Provider Instructions: The provider will affirm by initialing and dating that each substance abuse specific staff have the following applicable information in their personnel record:

Personnel Record Contents	Initials & Date of Completion
Documentation of clinical oversight occurring a minimum of one (1) time per month (SAMHSA TAP 21-A) Ch. 2, Sec 10	
Current Professional License	
Criminal history record background check required by the Wyoming Mental Health Professions Licensing Board	

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Printed Name and Title | Authorized Signature | Date