

Qualified Mental Health Professional Registration and Training Instructions

Registration Instructions

Step 1

To start the training, visit <https://dss.sd.gov/qmhp/Default.aspx>

Step 2

Click "Register Here"

WELCOME TO DIVISION OF BEHAVIORAL HEALTH TRAINING

County Board of Mental Illness Member Training
Qualified Mental Health Professional Registration
[Login](#) or [Register Here](#)

Step 3

Fill out your contact information and ensure that all information is accurate as we will use the contact information to get ahold of you as needed.

Please remember this password, as this is what you will use to log in to take your test.

REGISTER USER

I am a County Board of Mental Illness Member

Contact Information

Email

First Name

Last Name

Day Phone

Evening Phone

Physical Address

Address 1

Address 2

City

State

Zip Code

Separate mailing address

Verification Code (case sensitive)

Password

Confirm Password

Step 4

Confirm your personal information by clicking “Register”.

REGISTRATION CONFIRMATION

Name
Email
Day Phone
Evening Phone
Physical Address

Mailing Address

Step 5

Upon clicking “Register”, you will be directed to login and will receive an email from DSSBHQMHP@state.sd.us notifying you that your account has been activated. Login with the password you just created.

Step 6

Under “MY TRAINING” the most current training available will be displayed. Click “Register”.

MY TRAINING

My Training My Account My Address Change Password	Available Training Qualified Mental Health Professional Training 2021 <input type="button" value="Register"/>
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Step 7

Fill out the following information that describes your qualifications to be a QMHP. Please ensure that you click the **applicable** licensing options that applies for you.

If you do not feel you fit in to one of these options, please reach out to the Division of Behavioral Health at DSSBHQMHP@state.sd.us

TRAINING REGISTRATION

Please check the box that applies to you:

- A psychologist who is licensed to practice psychology in South Dakota.
- An advanced practice nurse with at least a master’s degree from an accredited education program and either two years or one thousand hours of clinical experience including mental health evaluation and treatment.
- A certified social worker with a master’s degree from an accredited training program and two years of supervised clinical experience in a mental health setting.
- A person who has a master’s degree in psychology from an accredited program and two years of supervised clinical mental health experience and who meets the provision of subdivision [36-27A-2\(2\)](#).
- A counselor who is certified under chapter [36-32](#) as a licensed professional counselor and has two years of supervised clinical experience in a mental health setting and who is employed by the state of South Dakota or a mental health center.
- A counselor who is certified under chapter [36-32](#) as a licensed professional counselor-mental health.
- A counselor who is certified under chapter [36-32](#) as a marriage and family therapist with two years of supervised clinical experience in a mental health setting.
- A physician assistant who is licensed under chapter [36-4A](#) and either two years or one thousands hours of clinical experience that includes mental health evaluation and treatment.

If you work for the federal government and are currently licensed in a profession in another state AND in good standing with the licensing boards, and action with the scope of your professional license, please click both boxes that apply.

A professional as listed in subdivision (1) to (8), inclusive, who is employed by the federal government and currently licensed in that profession in another state, in good standing with the licensing board, and acting within the scope of the professional's license.

Federal Agency
State of Licensure

Step 8

Upon clicking the appropriate licensing box, you will need to **explain your experience and/or supervision**.

Please explain supervised clinical experience and schooling

Step 9

Verify the following information.

- I verify that I meet the requirements of [SDCL 27A-1-3](#).
- I verify that my licensure is in good standing with the licensing board.
- I verify that I am acting within the scope of my professional licensure.

Step 10

Type your first and last name to sign and insert the date to verify that the above is true and accurate to the best of your knowledge.

By signing this document, I verify that all the above is true and accurate to the best of my knowledge.

Signature

Date

Step 11

Click "Continue".

Step 12

Review all personal information. If correct, please **print this page** and send to the Division of Behavioral Health with your licensure.

Registration is not complete until you print the verification form.

TRAINING REGISTRATION CONFIRMATION

User
Training
Occupation
Description

Testing
I verify that I meet the requirements of [SDCL 27A-1-3](#).
I verify that my licensure is in good standing with the licensing board.
I verify that I am acting within the scope of my professional licensure.

By signing this document, I verify that all the above is true and accurate to the best of my knowledge.

Next Steps:

1. "Print" out this page.
2. Click "Register" and finish the registration process.
3. Upon successful registration, you will receive a confirmation email.
4. Please mail in a copy of the registration page, licensure, and check/money order to Division of Behavioral Health.
5. Registration approval may take up to 5-7 business days upon receipt of your registration page, licensure, and check/money order.

Step 13

Upon completion of printing the registration page, you will now be able to click "Register".

Next Steps:

1. "Print" out this page.
2. Click "Register" and finish the registration process.
3. Upon successful registration, you will receive a confirmation email.
4. Please mail in a copy of the registration page, licensure, and check/money order to Division of Behavioral Health.
5. Registration approval may take up to 5-7 business days upon receipt of your registration page, licensure, and check/money order.

Step 14

Upon clicking “Register”, you will receive a confirmation email outlining instructions for submitting your required items to the Division of Behavioral Health.

Send the following to the email or mailing address below:

- A photocopy of your relevant professional license
- A copy of the signed registration page printout

DSSBHQMH@state.sd.us

Department of Social Services
Division of Behavioral Health
Attn: QMHP
3900 West Technology Circle, Suite 1
Sioux Falls, SD 57106

Step 15

Upon receipt of all the required documentations to the Division of Behavioral Health and meeting all licensure requirements, you will be approved to complete the training. Upon approval, you will receive an email notification to start the training. **Training must be completed within 30 days of initiating the training or it will be deemed as a failed attempt.**

Training Instructions

Step 1

To begin training, visit <https://dss.sd.gov/qmhp/Default.aspx>

WELCOME TO DIVISION OF BEHAVIORAL HEALTH TRAINING

County Board of Mental Illness Member Training

Qualified Mental Health Professional Registration

[Login](#) or [Register Here](#)

Step 2

Enter email and password. Click login.

LOGIN

Email

Password

[Forgot Password?](#)

Step 3

Click "My Training" on the left-hand side of the page.

MY TRAINING

[My Training](#)
[My Account](#)
[My Address](#)
[Change Password](#)

Step 4

You will be directed to a page to start the training. Click the "Start" button at the top next to the "Available Training".

MY TRAINING

[My Training](#)
[My Account](#)
[My Address](#)
[Change Password](#)

Available Training Qualified Mental Health Professional Training 2021

Training	Start Date	Date Completed	Completed By	Modules Completed	Status(%)	Certificate	Expiration Date	Renewal Date
Qualified Mental Health Professional Training 2021				0 / 13	Not Started			

Step 5

Select the first module to begin training. Training modules must be completed in the order they are listed.

*Please note there are 13 modules. You are not able to skip modules.

TRAINING MODULES

Training Qualified Mental Health Professional Training 2021

Description South Dakota state law requires Qualified Mental Health Professionals (QMHP) to participate in training provided by the South Dakota Department of Social Services. Only a QMHP may do an examination required as part of an involuntary mental illness commitment process.

Score 100%

Module Name	Module Status
QMHP Introduction 2021	New
QMHP Voluntary Admission of Adults 2021	New
QMHP Voluntary Admission of Minors 2021	New
QMHP Involuntary Commitment of Adults 2021	New
QMHP Involuntary Commitment of Minors 2021	New
QMHP Petition for Commitment 2021	New
County Board of Mental Illness 2021	New
QMHP Examination 2021	New
Involuntary Commitment Hearing and the County Board of Mental Illness 2021	New
Involuntary and Voluntary Status Change 2021	New
Co-Occurring Commitments 2021	New
Outpatient Commitment Orders and Treatment Orders 2021	New
Human Services Center (HSC) Medical Capacity and Problems that Masquerade as Psychiatric Illnesses 2021	New

Step 6

You will have questions at the end of each module. Please answer all questions or you will be marked as a failed attempt. You have 30 minutes to answer the questions at the end of each module.

MODULE QUIZ

Warning

You will have 30 minutes to complete the quiz.

There are 1 questions on the quiz. Once you start the quiz, it must be completed or else it will be marked as a failed attempt.

Continue

If you answer a question correctly, your score displayed on the “Training Modules” page will increase. Each time you answer a question wrong, your score will drop. Please note you need **above 75% to pass.**

TRAINING MODULES

Training Qualified Mental Health Professional Training 2021

Description South Dakota state law requires Qualified Mental Health Professionals (QMHP) to participate in training provided by the South Dakota Department of Social Services. Only a QMHP may do an examination required as part of an involuntary mental illness commitment process.

Score 100%

Please note under “Module Status”, upon completion of a module, it will say “Completed” and you can move on to the next module. You *cannot* go back to a past module.

Module Name	Module Status
QMHP Introduction 2021	Completed
QMHP Voluntary Admission of Adults 2021	New
QMHP Voluntary Admission of Minors 2021	New

Step 7

Upon completion of training, your score will appear, and your certificate will auto-populate. **Please note your expiration date and eligibility for renewal date.** To print your certificate, please click "Certificate".

Training	Start Date	Date Completed	Completed By	Modules Completed	Status(%)	Certificate	Expiration Date	Renewal Date
Qualified Mental Health Professional Training 2021				13 / 13	Passed	Certificate		