

# Certification Guidelines: **Credential Standards and Requirements Table**

## Certified Behavioral Health Technician (CBHT)



*Define Yourself as a Professional  
through Certification.*

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# CBHT Standards & Requirements Tables

The purpose of this document is to provide detailed BHT credential specific information, including CBHT standards, requirements and application policies and procedures. This document is to be read in conjunction with the FCB’s overall administrative requirements that are detailed in the following FCB Candidate Guides:

- Candidate Guide: Application Process
- Candidate Guide: Examination Process Credential Award
- Candidate Guide: Maintenance and Renewal Process

Applicants are responsible to read, understand and follow the information in the FCB’s Candidate Guides, this document, and the FCB’s Code of Ethical and Professional Conduct and Disciplinary Procedures. All documents are posted online. Please contact the FCB if you have any questions.

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## CERTIFIED BEHAVIORAL HEALTH TECHNICIAN (CBHT)

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The CBHT designation is an entry-level credential for person’s who assist primary counselors and therapeutic staff by providing clinical support services to adults or children who are receiving substance abuse or mental health services in residential programs, in-patient settings or community based programs. The CBHT requires a minimum of a high school diploma or general equivalency degree and demonstrated competency through training and experience in the performance domains of:

- Clinical Competence
- Maintaining Client and Personal Safety
- Documentation and Patient Confidentiality
- Ethical and Professional Responsibilities

Individuals holding the CBHT credential have meet all FCB administrative requirements and all credential specific standards and eligibility requirements that have been established for the credential.

# CBHT STANDARDS AND ELIGIBILITY REQUIREMENTS

TOPIC	MINIMUM REQUIREMENT
<i>Please review the Candidate Guide: Application Process and the following CBHT standards and eligibility requirements for application.</i>	
<b>Formal Education</b>	High School Diploma or General Equivalency Degree
<b>Content Specific Training</b>	<p>30 hours of content specific training, allocated as follows:</p> <ol style="list-style-type: none"> <li>1. Clinical Competence: 8 hours</li> <li>2. Maintaining Client and Personal Safety: 4 hours</li> <li>3. Documentation and Patient Confidentiality: 4 hours</li> <li>4. Ethical and Professional Responsibilities: 4 hours</li> <li>5. Electives: 10 hours</li> </ol> <p>All training must have been completed within the last 10 years.</p>
<b>Related Work Experience</b>	<p>1,000 hours of formal work providing behavioral health related services.</p> <p>All experience must have been gained within the last 10 years.</p>
<b>On-the-Job Supervision</b>	<p>24 hours of direct supervision of the applicant's performance of CBHT-related services; these hours must include a minimum of 4 hours per performance domain (Clinical Competence; Maintaining Client and Personal Safety; Documentation and Patient Confidentiality; Ethical and Professional Responsibilities). The remaining 8 hours may be in any of the performance domains.</p> <p>All on-the-job supervision must have been completed within the last 10 years.</p>
<b>Recommendations</b>	<p>1 professional letter of recommendation for certification.</p> <p>1 supervisory letter of recommendation for certification</p> <p>1 character/personal letter of recommendation for certification.</p>
<i>Please review the Candidate Guide: Examination and Credential Award and the following CBHT exam requirements.</i>	
<b>Exam</b>	Certified Behavioral Health Technician Exam
<i>Please review the Candidate Guide: Credential Maintenance and Renewal and the following CBHT requirements.</i>	
<b>Continuing Education</b>	10 hours per year. Training content must be related to at least one of the CBHT performance domains.
<b>Renewal</b>	Annual, on June 30th of each calendar year.

## ELECTRONIC APPLICATION AND MANDATORY FORM REQUIREMENTS

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All applicants MUST first establish an on-line account with the FCB. After establishing the on-line account, complete the Certified Behavioral Health Technician (CBHT) electronic application. Hard copy applications are only available for applicants who meet ADA requirements related to accommodations for using computers and related technologies. Please contact the FCB for additional assistance. All other applicants, please see the link below for access to the portal.

<https://portalpcb.cyzap.net/dzapps/dbzap.bin/apps/assess/webmembers/login?webid=FCB>

All credential-specific requirements are documented on FCB forms. All forms are posted on-line at <http://flcertificationboard.org/certification/available-certifications/>.

Applicants must:

- Download and complete the Training Verification Form. The completed form and supporting documentation is uploaded to the electronic application.
- Secure a copy of his or her high school diploma, GED, unofficial college or university transcript, or diploma. The FCB will request this documentation when processing the application.
- Download and provide the following forms to the appropriate individual to complete and submit to the FCB: Work Verification Form; On-the-Job Supervision Verification Form; Personal/Character Recommendation for Certification Form; Supervisory Recommendation for Certification Form; and Professional Recommendation for Certification Form. See the [Hard Copy CBHT Application Documents and Submission Protocol](#) section of this document for additional details.

All applicants have a maximum of 12 months to earn the credential, starting from the date the application and the certification fee are received by the FCB.

When your fee has been processed and your application has been successfully submitted, you will receive a system email and, shortly thereafter, you will receive a personal email of introduction from your assigned certification specialist. This person will serve as your single-point-of-contact throughout the certification application, examination and award processes.

## ELECTRONIC CBHT APPLICATION COMPONENTS & SUBMISSION PROTOCOL

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Applicants have up to 30 calendar days to complete the electronic application. Applications not submitted within 30 days will be automatically deleted, including all data and attachments.

An application is considered submitted when the applicant has progressed through all of the screens, providing all system required information, and making the application fee payment.

Once the application is submitted and the fee payment is received, the application is “locked.” This means that the applicant can no longer make changes to data entered into the application and cannot add additional files of supporting documentation. If changes need to be made to the application and/or additional documents need to be attached, please work directly with your assigned Certification Specialist, who will make the necessary changes/updates.

SECTION	REQUIRED DATA	REQUIRED ATTACHMENTS
<b>Other Certification or Licensure</b>	Enter the requested information for any non-CBHT certification or license you may hold.  If you do not hold other credentials, select the “next” button.	No applicant-provided attachments are required. If you report another credential(s), please upload a copy of the credential.
<b>Formal Education/Degree</b>	Enter the requested information for the highest level degree you hold.	Save a copy of your HSD/ GED or unofficial college or university transcript or degree and provide it to your FCB Certification Specialist when requested.
<b>Content Specific Training</b>	You are not required to enter any fields of data; you only upload mandatory files.	Upload a completed CBHT Training Verification Form and supporting documentation for each course/training event.
<b>References</b>	You are required to identify at least one supervisor who provided you with On-the-Job Supervision for certification purposes.  You are required to identify the three individuals who will submit recommendations for certification on your behalf. One personal/character, one supervisory and one professional reference are required.	There is not an option to upload documents to this section of the application.  You must download the CBHT On-the-Job Supervision Verification form and provide a copy to each supervisor for completion & submission to the FCB.  You must download each of the CBHT Recommendation for Certification Forms from the FCB website and provide them to your references for completion & submission to the FCB.  Note: You cannot collect completed supervision forms or recommendations and submit them to the FCB yourself.
<b>Current Employer</b>	Enter the requested information for your current employer AND each additional employer you will contact to document the 1,000 work requirement.	There are no applicant-provided attachments in this section.  You must download the CBHT Work Experience Verification form and provide a copy to each employer for completion & submission to the FCB.  Note: You cannot collect completed work verification forms and submit them to the FCB yourself.
<b>Assurance and Release</b>	Read the agreements on this page as you are bound by FCB policy and procedure once you check the check box and select the “next” button.	There are no applicant-provided attachments in this section.
<b>Final Review and Application Submission</b>	Review all entered information. If any edits need to be made, make them at this time.	There are no applicant-provided attachments in this section.  When you submit your application, you will be taken to the fee payment screen. Your application is not

SECTION	REQUIRED DATA	REQUIRED ATTACHMENTS
	<p>Additional documents cannot be uploaded after you select the “submit” button.</p> <p>If you do not select the “submit” button with 30 days of starting the application, the system will delete the application, including all entered data and attachments.</p>	submitted until payment is made. You will receive a system generated email with an invoice when your payment has been processed and your application is received.

## HARD COPY APPLICATION DOCUMENTS AND SUBMISSION PROTOCOL

Applicants must download the following forms from the FCB website and provide the forms to the appropriate people for completion and submission to the FCB.

- Work Verification Form
- On-the-Job Supervision Verification Form
- Training Verification Form
- Professional Recommendation for Certification
- Supervisory Recommendation for Certification
- Personal/Character Recommendation for Certification.

Your assigned certification specialist will upload all hard copy documents to your electronic application. You will be able to track the status of each requirement from your online account.

REQUIRED DOCUMENTATION	APPLICANT PROVIDED	NON-APPLICANT SOURCE
<b>Formal Education</b>	On application, report degree(s).	Save a copy of your HSD/ GED or unofficial college or university transcript or degree and provide it to your FCB Certification Specialist when requested.
<b>Work Experience</b>	On application, report employer(s) who will submit verification documentation.  Provides each employer with a Work Verification Form	Employer will document and submit related work experience on the Work Verification Form. Please include a position description specifying all related duties
<b>On-the-Job Supervision</b>	On application, report supervisor(s) who will submit verification documentation.  Provide each supervisor with an OTJ Supervision Verification Form.	Supervisor completes and submits OTJ Supervision Verification Form and supporting documentation directly to the FCB.
<b>Content Specific Training</b>	Complete Training Verification Form and collects copies The applicant provides all content specific training materials directly to the FCB.	No documentation required from a non-applicant source.

REQUIRED DOCUMENTATION	APPLICANT PROVIDED	NON-APPLICANT SOURCE
<b>Recommendation for Certification</b>	<p>On application, report individuals who will submit a Recommendation for Certification.</p> <p>Provide each individual with a Recommendation for Certification Form.</p>	<p>Individual providing the recommendation completes and submits the Recommendation for Certification Form directly to the FCB.</p>

All forms must be filled out electronically – handwritten forms will be denied.

All forms and supporting documentation must be submitted to the FCB by the individual signing off on the form/submitting supporting documentation. Forms and documents provided by the applicant will be denied.

All hard copy documents and fee payments may be made to the FCB via mail, email or fax.

**US Mail:** FCB ♦ 1715 South Gadsden Street ♦ Tallahassee, Florida, 32301

**Email:** Applicants are assigned a Certification Specialist when their application has been received at the FCB. Please ask the applicant for their certification specialist’s name and email address. In the absence of a specified person, FCB accepts email at [admin\\_assist@flcertificationboard.org](mailto:admin_assist@flcertificationboard.org)

**FAX:** 850-222-6247

**Fee Payment:** The preferred method of fee payment is online, using your secure certification account. You can make payments and receive immediate electronic invoices when using the online payment system. Credit card payments made over the phone and check/money order payments will incur a \$5 manual processing fee. Fees are non-refundable and non-transferable. **DO NOT MAKE A FEE PAYMENT UNLESS YOU ARE SURE YOU ARE READY TO MOVE FORWARD.**

## UPDATING THE APPLICATION/ADDING FILES

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Once you submit your electronic application, you are “locked out” of it and cannot make any changes or upload additional documents. If this needs to happen, please work directly with your assigned certification specialist, who will update your application as necessary.

# CERTIFICATION PROCESS CHECKLIST

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By submitting the CBHT application, you are stating/agreeing that you, the applicant, have read all the required policy and procedures covered in the following documents:

- Candidate Guide: Application Process
- Candidate Guide: Examination Process and Credential Award
- Credential Specific Standards Table
- Code of Ethical and Professional Conduct and Disciplinary Procedures

## FCB System Registration and Application

- Online account created
- Online application submitted
  - Identify current or prior licenses/certifications
  - Identify highest level of education completed and degree granting institution.
  - Save copy of HSD/GED and provide to your assigned certification specialist when requested.
  - Upload the Training Verification Form and supporting documents.
  - Identify individuals who will submit Recommendation for Certification Forms. Download and distribute the required form to each individual for completion & submission.
  - Identify individuals who will submit On-The-Job Supervision Form. Download and distribute the required form to each individual for completion & submission.
  - Identify individuals who will submit Related Work Experience Form. Download and distribute the required form to each individual for completion & submission.
- Fee payment made

## Exams

- Receive approval to register for the exam(s).
- Exam Fee Payment Made
- Register for the exam(s)
- Take the exam(s)



## TRAINING TOPICS BY DOMAIN

DOMAIN	TOPICS
<b>Clinical Competence (8 hours)</b>	<ul style="list-style-type: none"> <li>• Identification and Treatment of Substance Abuse Disorders</li> <li>• Identification and Treatment of Mental Health Disorders</li> <li>• Basic Psychopharmacology</li> <li>• Side-Effects of Medication</li> <li>• Clinical Risk Assessment</li> <li>• Daily Living Skills</li> <li>• Treatment Plans</li> <li>• Community Resources</li> <li>• Verbal/Non-Verbal Communication</li> <li>• Relapse</li> </ul>
<b>Maintaining Client and Personal Safety (4 hours)</b>	<ul style="list-style-type: none"> <li>• First Aid</li> <li>• CPR</li> <li>• HIV/AIDS</li> <li>• Universal Precautions</li> <li>• Verbal De-escalation Techniques</li> <li>• Emergency Preparedness/Disaster Planning</li> <li>• Crisis Intervention</li> <li>• Aggression and Control Techniques</li> <li>• Staff Safety</li> <li>• Client Safety</li> </ul>
<b>Documentation and Patient Confidentiality (4 hours)</b>	<ul style="list-style-type: none"> <li>• HIPAA</li> <li>• Clinical Documentation</li> <li>• Patient's Rights</li> <li>• Patient Confidentiality</li> <li>• Active Listening</li> <li>• Behavioral Observation</li> <li>• Federal, State, Local Regulations</li> <li>• Release of Information/Informed Consent</li> </ul>
<b>Ethical and Professional Responsibilities (4 hours)</b>	<ul style="list-style-type: none"> <li>• Professional Conduct</li> <li>• Confidentiality</li> <li>• Patient's Rights</li> <li>• Mandatory Abuse Reporting</li> <li>• Cultural Competence/Diversity</li> </ul>