

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

## Certified Behavioral Health Case Manager Supervisor (CBHCMS)



*Define Yourself as a Professional  
through Certification.*

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# CBHCMS STANDARDS & REQUIREMENTS TABLES

The purpose of this document is to provide detailed CBHCMS credential specific information, including CBHCMS 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 at 850-222-6314 if you have any questions.

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## CERTIFIED BEHAVIORAL HEALTH CASE MANAGER SUPERVISOR (CBHCMS)

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The Certified Behavioral Health Case Manager Supervisor (CBHCMS) designation is for individuals who supervise those who provide direct targeted case management services to adults and/or children with mental health conditions, substance use disorders, and/or those involved in the child welfare system who require behavioral health case management services.

The CBHCMS allows the person to either provide services or supervise. If you hold the CBHCMS, you are qualified to work as a CBHCM. The credential reflects the qualifications of the applicant, not the current position held. It is recommended that the applicant apply for the highest-level credential they are qualified to hold regardless of their current position.

The CBHCMS has demonstrated competency through training, experience and supervision in the performance domains of:

- Engagement and Assessment (initial and ongoing)
- Service Planning and Development (initial and ongoing)
- Coordination, Linkage and Monitoring
- Documentation
- Professional, Legal and Ethical Responsibilities

*The CBHCMS credential satisfies the statutory requirement of s. 394.4573, F.S. and is recognized by the Agency for Health Care Administration (AHCA) for billing purposes.*

*The Child Welfare series of credentials **does not** satisfy the statutory requirement of s. 394.4573, F.S. **and** the Behavioral Health Case Manager series of credentials **does not** satisfy the statutory requirement of s. 402.40, F.S.*

## APPLICATION PROCESS OVERVIEW

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There are two distinct phases to earning the CBHCM credential

- Phase 1: Apply for, submit required supporting documentation and be approved to test for the credential. Please see the [CBHCMS Standards and Eligibility Requirements](#) section and the [CBHCMS Online Application Components and Submission Protocol](#) section of this document for additional details
- Phase 2: Once your application portfolio has been approved, you will sit for the credential exam. Upon passing the exam, your certification will be issued. Please see the [Candidate Guide: Examination Process Credential Award](#) for additional details.

This document provides you with the program requirements and the process steps to apply for and hold the credential through the two-phase process.

## PROFILE AND ONLINE APPLICATION REQUIREMENTS

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There are several process steps involved in applying for certification.

### **To apply for the CBHCMS credential, applicants are responsible to:**

1. Establish an online account in the FCB online system. This is a one-time activity.
2. Create an online Certified Behavioral Health Case Manager Supervisor application for certification. This is the official application and payment pathway. However, there are additional forms and supporting documentation that must also be submitted to the FCB.
3. Download and complete the *Training Verification Form*. The completed form and supporting documentation can be uploaded to the online application or emailed to your Certification Specialist, once assigned.
4. Request an official transcript from the college or university. Transcripts or eTranscripts must be sent directly to the FCB. The FCB will not accept transcripts submitted by the applicant.
5. Download the *Work Experience Verification, On-the-Job Supervision Verification, and Professional Recommendation for Certification Forms*; complete Part 1 of each form; provide the form to the appropriate person(s) to complete and submit directly to the FCB on your behalf. **DO NOT** collect these forms back and submit them yourself. The FCB **WILL NOT** accept these forms or supporting documentation from an applicant.

The CBHCMS application is considered to be successfully submitted when you have progressed through all screens and your fee has been processed. This will generate a system email notifying you that your application has been received and the initial review is underway.

Approximately 3-4 weeks later, you will receive a personal email of introduction from your assigned Certification Specialist, along with the results of the initial review of your application and supporting forms/documentation. This person will serve as your single-point-of-contact throughout the certification application, examination and award processes.

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

The length of time for an application to be approved depends on the timeliness and quality of the documents received by the FCB. We strongly recommend that you ensure you understand the certification process and create a plan to complete all steps before completing/submitting either of the online applications.

**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.**

## CREATE AN ONLINE ACCOUNT

All applicants MUST first establish an online account with the FCB. Please go to our website at [www.flcertificationboard.org](http://www.flcertificationboard.org) and click on My Account to access the portal.

- If you have an account, simply login.
- If this is your first time working with the FCB, click on the My Account link to create a new account and profile.
- If you have forgotten your login or password, please call the office. DO NOT CREATE MULTIPLE ACCOUNTS.

## CREATE AN ONLINE APPLICATION FOR CERTIFICATION

Applicants will be required to complete an online application.

CBHCMS Application: Once you have access to your online account, select the “Apply for New Certification” button and then select the **Certified Behavioral Health Case Manager Supervisor** online application. See the [CBHCMS Online Application Components and Submission Protocol](#) section of this document for additional details.

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.

- You can access the application for a maximum of 45 days. Applications not submitted within 45 days will be automatically deleted, including all data and attachments.
- 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. Please work directly with your assigned Certification Specialist, who will make the necessary changes/updates.

## DOWNLOAD AND DISTRIBUTE/COMPLETE REQUIRED FORMS

All credential-specific requirements are documented on FCB forms. All forms are posted online, under Credentials at FCB’s website, [www.flcertificationboard.org](http://www.flcertificationboard.org). 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 to (850) 222-6247.

**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).

# CBHCMS STANDARDS AND ELIGIBILITY REQUIREMENTS

| TOPIC  | MINIMUM REQUIREMENT   |
|--|---|
| <p><b>Please review the <i>Candidate Guide: Application Process</i> and the following CBHCMS standards and eligibility requirements for application. For the most current application and exam fees, please see the <i>Fee Schedule</i> posted on FCB's website.</b></p> |   |
| <p><b>DCF Level 2 Background Screening</b></p>   | <p>FCB policy requires all applicants to pass a Level 2 Background Screening that is conducted thru the Department of Children and Families. FCB will initiate background checks for individuals seeking the CBHCMS credential.</p> <p>Regardless of if you have been previously approved for a FCB credential or DCF Level 2 Background, you must complete and return the <i>Clearinghouse Applicant Request Form</i> and <i>Privacy Policy Form</i>.</p>  |
| <p><b>Formal Education</b></p>   | <p>Applicants must hold a minimum of a Bachelor's degree. Individuals holding a higher degree in a related field have prorated work experience requirements as detailed below.</p> <p>Related fields are:</p> <p style="padding-left: 40px;">Counseling; Social Work; Psychology; Criminal Justice; Nursing; Rehabilitation; Special Education; Health Education; or a Human Services field in which major coursework includes the study of human behavior and development.</p> <p>Eligible degrees are issued by educational institutions holding United States Department of Education and/or the Council on Higher Education Accreditation (CHEA) recognized accreditation at the time of degree award.</p> <p>Applicants who earned their degree at an educational institution outside of the United States (US), must have their credentials evaluated by an organization approved by the FCB. This is done at the applicant's expense and must be done prior to applying for certification. All documents in a foreign language must be translated by a certified translator into English. The evaluation must provide documentation that formal education/degree is equivalent to an accredited US institution and the course work met the content and hour requirement for a degree awarded in the US. The FCB must receive an original evaluation mailed directly from the educational evaluation service.</p> <p>If you believe you hold a related Master's degree that is not listed, you may apply for a Degree Equivalency Review. The application is posted online at <a href="http://flcertificationboard.org/resources/policy-and-procedure/">http://flcertificationboard.org/resources/policy-and-procedure/</a></p> |
| <p><b>Content Specific Training</b></p>  | <p>50 total clock hours of training divided as follows:</p> <ol style="list-style-type: none"> <li>1. Engagement and Assessment (initial and ongoing): 9 hours</li> <li>2. Service Planning and Development (initial and ongoing): 8 hours</li> <li>3. Coordination, Linkage and Monitoring: 13 hours</li> <li>4. Documentation: 10 hours</li> <li>5. Professional, Legal and Ethical Responsibilities: 10 hours</li> </ol> <p>Eligible training must be taken from an FCB Approved Education Provider within the last 10 years (no time limit on college coursework taken as part of a degree program). FCB Eligible Training Guidelines and Providers are listed online on FCB's website <a href="http://www.flcertificationboard.org">www.flcertificationboard.org</a> under Education &amp; Training.</p> <p>Recommended training topics for each domain are listed at the end of this document.</p> <p>Content specific training and supporting documentation is submitted to the FCB by the applicant. Applicants must complete (1) the FCB Training Verification Form and (2) attach approved supporting documentation for each entry listed on the Form.</p>  |

| TOPIC  | MINIMUM REQUIREMENT  |
|--|--|
| <b>Related Work Experience</b>                               | <p>Work experience is prorated depending on the applicant’s highest level of formal education. Eligible degrees are issued by educational institutions holding United States Department of Education and/or the Council on Higher Education Accreditation (CHEA) recognized accreditation at the time of degree award.</p> <ul style="list-style-type: none"> <li>• 8,000 hours – Bachelor’s Degree or non-related Master’s Degree or higher</li> <li>• 4,000 hours – Master’s Degree or higher in a related field</li> </ul> <p>Related fields are:</p> <p style="padding-left: 40px;">Counseling; Social Work; Psychology; Criminal Justice; Nursing; Rehabilitation; Special Education; Health Education; or a Human Services field in which major coursework includes the study of human behavior and development.</p> <p>Volunteer experience and non-clinical internships are not eligible for certification purposes.</p> <p>Eligible work experience occurred within the last 5 years.</p>   |
| <b>On-the-Job Supervision</b>                                | <p>50 hours of on-the-job supervision of the applicant’s performance of core competencies.</p> <p>The 50 hours are allocated across performance domains as follows:</p> <ol style="list-style-type: none"> <li>1. Engagement and Assessment (initial and ongoing): 10 hours</li> <li>2. Service Planning and Development (initial and ongoing): 10 hours</li> <li>3. Coordination, Linkage and Monitoring: 10 hours</li> <li>4. Documentation: 10 hours</li> <li>5. Professional, Legal and Ethical Responsibilities: 10 hours</li> </ol> <p>For certification purposes, the FCB benchmarks reasonable and achievable supervision at the rate of 3 hours per week/156 hours per year.</p> <p>Eligible supervision can be individual, one-on-one supervision and/or observation of skills OR group supervision/case staffings. At least 50% of the hours of clinical supervision must be individual, one-on-one supervision and/or observation of skills. No more than 50% of the required hours of supervision may be in a group setting. Administrative on-the-job supervision will not be accepted for certification purposes.</p> <p>Supervision must be provided by a qualified supervisor. Qualified supervisors are:</p> <ul style="list-style-type: none"> <li>• A physician or physician’s assistant licensed under Chapters 458 or 459, Florida Statutes</li> <li>• A professional licensed under Chapters 490 or 491, Florida Statutes</li> <li>• An Advanced Registered Nurse Practitioner licensed under Part 1 of Chapter 464, Florida Statutes</li> <li>• A Master’s Level Certified Addiction Professional (MCAP)</li> <li>• A Certified Addiction Professional (CAP)</li> <li>• A Certified Behavioral Health Case Manager Supervisor (CBHCMS)</li> </ul> <p>Eligible on-the-job supervision occurred within the last 5 years.</p> |
| <b>Cross-Over Work Experience and On-the-Job Supervision</b> | <p>Case Management experience is <b>non-clinical work</b> focused on helping individual’s access and navigate necessary supports to address behavioral health concerns.</p> <p><b>Only</b> case management experience hours will be credited for the CBHCMS credential. No additional experience will be credited for either work experience or on-the-job supervision.</p>  |
| <b>Recommendations</b>                                       | <p>Three (3) professional letters of recommendation for certification.</p>   |

*Please review the **Candidate Guide: Examination and Credential Award** and the following CBHCMS exam requirements.*

| TOPIC  | MINIMUM REQUIREMENT  |
|--|--|
| <b>Exam</b>  | Behavioral Health Case Management Exam   |
| <i>Please review the <b>Candidate Guide: Credential Maintenance and Renewal</b> and the following CBHCMS requirements.</i> |  |
| <b>Continuing Education</b>  | <p>10 hours per year for a total of 20 due at each renewal period. Training content must be related to at least one of the CBHCM performance domains.</p> <p>Continuing Education (CE) credit hours must be non-repetitive (i.e., the same course cannot be claimed more than one time during each credentialed period, even if the course is taken annually).</p>   |
| <b>Renewal</b>   | <p>Biennial, on March 31<sup>st</sup> of the renewal year.</p> <p>All CBHCM credentials issued are valid for slightly less than or slightly more than 12 months, pending on the issue date:</p> <ul style="list-style-type: none"> <li>• Credentials issued for the first time in the months of April – December, will expire/must renew on the upcoming March 31<sup>st</sup>.</li> <li>• Credentials issued for the first time in January, February or March, will expire/must renew the following March 31<sup>st</sup>.</li> </ul> <p>After the first renewal, the credential will be issued for a 2-year period, always expiring on March 31<sup>st</sup> of the biennial renewal year.</p> |



## ONLINE APPLICATION COMPONENTS & SUBMISSION PROTOCOL

| SECTION                                 | REQUIRED DATA  | REQUIRED ATTACHMENTS   |
|---|--|--|
| <b>Other Certification or Licensure</b> | <p>Enter the requested information for any non-FCB certification or license you may hold.</p> <p>If you do not hold other credentials, select the “next” button.</p>   | <p>No applicant-provided attachments are required. If you report another credential(s), please upload a copy of the credential.</p>  |
| <b>Formal Education/Degree</b>          | <p>Enter the requested information for the highest level degree you hold.</p>  | <p>Request an official transcript or eTranscript from your college or university. The FCB will only accept transcripts from the college or university. Transcripts provided by the applicant will be denied.</p>   |
| <b>Content Specific Training</b>        | <p>You are not required to enter any fields of data; you only upload mandatory files.</p>  | <p>Upload a completed <i>Training Verification Form</i> and supporting documentation for each course/training event listed on the form.</p>  |
| <b>References</b>                       | <p>You are required to identify at least one supervisor who provided you with On-the-Job Supervision for certification purposes.</p> <p>You are required to identify the three individuals who will submit recommendations for certification on your behalf. Three professional references are required.</p> | <p>There is not an option to upload documents to this section of the application.</p> <p>You must download the <i>On-the-Job Supervision Verification Form</i> and provide a copy to each supervisor for completion &amp; submission to the FCB.</p> <p>You must download the <i>Professional Recommendation for Certification Form</i> from the FCB website and provide a copy to your references for completion &amp; submission to the FCB.</p> <p><b>Note: Do not collect completed supervision or recommendation forms and submit them to the FCB yourself.</b></p> |
| <b>Current Employer</b>                 | <p>Enter the requested information for your current employer AND each additional employer you will contact to document the required work experience hours.</p>   | <p>There are no applicant-provided attachments in this section.</p> <p>You must download the <i>Work Experience Verification Form</i> and provide a copy to each employer for completion &amp; submission to the FCB.</p> <p><b>Note: Do not collect completed work verification forms and submit them to the FCB yourself.</b></p>  |

| SECTION  | REQUIRED DATA  | REQUIRED ATTACHMENTS  |
|--|--|---|
| <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.<br><br>Additional documents cannot be uploaded after you select the “submit” button.<br><br>If you do not select the “submit” button with 45 days of starting the application, the system will delete the application, including all entered data and attachments. | There are no applicant-provided attachments in this section.<br><br>When you submit your application, you will be taken to the fee payment screen.  |
| <b>Fee Payment</b>                             | The certification fee is due at this time. The preferred method is to pay online by credit card.   | Your application is not submitted until payment is made. See the <a href="#">Fee Schedule</a> posted on FCB’s website for most current fees.<br><br>Credit card payments made online are secure and have no additional fees. Payments may also be made by money order/check. Credit card payments made by phone will incur an additional \$5.00 convenience fee per transaction.<br><br><b>All fees are non-refundable.</b> |

## 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.

The following form is submitted by the applicant:

- Training Verification Form*

The following are submitted by those completing the form on behalf of the applicant:

- Work Experience Verification Form*
- On-the-Job Supervision Verification Form*
- Professional Recommendation for Certification Form*

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

| REQUIRED DOCUMENTATION                     | APPLICANT PROVIDED  | NON-APPLICANT SOURCE  |
|--|---|---|
| <b>DCF Level 2 Background Screening</b>    | Hard Copy Document: Certification Specialist will email applicant forms for Level 2 Background Screening upon receiving CBHCMS application. Complete <i>Clearinghouse Applicant Request Form</i> and <i>Privacy Policy Form</i> . | No documentation required from a non-applicant source.  |
| <b>Formal Education</b>                    | Online Application: Report highest level degree(s).   | Hard Copy Document: Official transcript or eTranscript must be provided to the FCB from the degree granting institution.  |
| <b>Work Experience Verification</b>        | Online Application: Report employer(s) who will submit verification documentation.<br><br>Hard Copy Document: Provide each employer with a <i>Work Experience Verification Form</i>   | Hard Copy Document: Employer completes and submits related work experience on the <i>Work Experience Verification Form</i> . Employers must attach a position description on agency letterhead specifying all related duties. |
| <b>On-the-Job Supervision Verification</b> | Online Application: Report supervisor(s) who will submit verification documentation.<br><br>Hard Copy Document: Provide each supervisor with an <i>On-the-Job Supervision Verification Form</i> .                                 | Hard Copy Document: Supervisor completes and submits <i>On-the-Job Supervision Verification Form</i> directly to the FCB.   |
| <b>Content Specific Training</b>           | Hard Copy Document: Complete <i>Training Verification Form</i> and collect copies of supporting documentation.<br><br>Online Application: Upload all documents.   | No documentation required from a non-applicant source.  |
| <b>Recommendation for Certification</b>    | Online Application: Report individuals who will submit a recommendation for certification.  | Hard Copy Document: Individual providing the recommendation completes and submits the <i>Professional Recommendation for Certification Form</i> directly to the FCB.  |

Hard Copy Document: Provide each individual with a *Professional Recommendation for Certification Form*.

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

# CERTIFICATION PROCESS CHECKLIST

By submitting the CBHCMS 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, if held.
  - Identify highest level of education completed.
  - Request official transcript or eTranscript (have sent directly to FCB – we will not accept transcripts from the applicant).
  - Complete and upload the *Training Verification Form* and supporting documents.
  - Identify individuals who will submit *Professional 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 Verification Form*. Download and distribute the required form to each individual for completion & submission.
  - Identify current and/or past employers who will submit *Work Experience Verification Form*.  
Download and distribute the required form to each employer for completion & submission.
- Fee payment made. All fees are non-refundable.

## 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>Engagement and Assessment (initial and ongoing) (9 hours)</b>        | <ul style="list-style-type: none"> <li>• Assessment Instruments, Procedures and Techniques</li> <li>• Screening Instruments, Procedures and Techniques</li> <li>• Behavioral Health Conditions – Mental Health/Substance Use</li> <li>• Risk Factors/Risk Assessment/Risk Management</li> <li>• Client Engagement</li> <li>• Client Matching to Service Array</li> <li>• Motivational Interviewing</li> <li>• Functional Assessment</li> <li>• Abuse and Neglect</li> </ul>  |
| <b>Service Planning and Development (initial and ongoing) (8 hours)</b> | <ul style="list-style-type: none"> <li>• Client Placement Criteria</li> <li>• Strengths-based or Client-centered Service Planning</li> <li>• Developing Goals and Objectives</li> <li>• Measuring Success</li> <li>• Stages of Change</li> <li>• Evidence-based Practices</li> <li>• Human Development</li> <li>• Principles of Recovery</li> <li>• Development of Service Plans</li> <li>• Health Literacy</li> </ul>   |
| <b>Coordination, Linkage and Monitoring (13 hours)</b>                  | <ul style="list-style-type: none"> <li>• Active Care Coordination</li> <li>• Community Resources/Services</li> <li>• Case Management</li> <li>• Special Population Needs</li> <li>• Benefits and Entitlement Programs</li> <li>• Insurance and Health Maintenance Options</li> <li>• Linkage to Formal and Informal Supports</li> <li>• Advocacy and Communication Skills</li> <li>• Multidisciplinary Teamwork</li> <li>• Confidentiality Laws and Regulations</li> <li>• Strategies to Build Partnerships and Alliances</li> </ul> |
| <b>Documentation (10 hours)</b>   | <ul style="list-style-type: none"> <li>• Assessment, Treatment, Progress, Discharge or Transfer Summaries</li> <li>• Clinical Documentation</li> <li>• Electronic Health Records/Technology</li> <li>• Privacy &amp; Confidentiality</li> <li>• Progress Notes</li> <li>• Psychosocial Summaries</li> <li>• Reports/Record Keeping/Records Management</li> </ul>   |

| DOMAIN   | TOPICS   |
|--|--|
| <b>Professional, Legal and Ethical Responsibilities<br/>(10 hours)</b> | <ul style="list-style-type: none"> <li>• Boundaries / Transference</li> <li>• Computer Ethics</li> <li>• Cultural Competence</li> <li>• Ethical Decision Making / Code of Ethics</li> <li>• Laws / Rules &amp; Regulations</li> <li>• Organizational Ethics</li> <li>• Policy in Human Services</li> <li>• Privacy / Confidentiality / HIPPA</li> <li>• Relationships / Dual Relationships</li> <li>• Sexual Misconduct</li> </ul> |