



American Board of First Responder Behavioral Healthcare (FRBH)

National Standards and Accreditation

FRBH National Standard – Public Edition (v2.1)

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1. Purpose & Authority

The FRBH National Standard defines the minimum national requirements for how public safety organizations formally recognize predictable and cumulative occupational trauma exposure and design, govern, activate, document, and sustain organizational behavioral health protection for trauma-exposed occupations.

Under this standard, behavioral health protection is treated as organizational occupational safety infrastructure—not an individual responsibility, discretionary benefit, or clinical entitlement.

FRBH is an independent, non-regulatory standards-setting and accreditation body. The standard defines organizational expectations only; it does not establish legal obligations, clinical standards of care, or employment outcomes.

2. Applicability

The FRBH National Standard applies to public safety organizations operating in trauma-exposed environments, including:

- Local, regional, state, federal, tribal, and territorial agencies
- Career, volunteer, hybrid, and private-sector responder organizations

Alignment is evaluated based on organizational design, governance, activation architecture, documentation integrity, and structural durability—not agency size, call volume, or jurisdiction. Evaluation occurs at the organizational level, not at the level of individual employees.

Occupational exposure under this standard refers to **predictable duty-related events and cumulative operational demands** inherently associated with trauma-exposed public safety work. Exposure recognition under this standard does not depend on individual symptom reporting or voluntary disclosure.

Organizational protection must account for cumulative exposure occurring across a responder's career span, not solely discrete qualifying incidents.

3. Foundational Principle

Organizational behavioral health protection under this standard must be:

- Automatic
- Embedded



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- Protected
- Sustained

“Automatic” means activation occurs without reliance on individual self-disclosure and is triggered through predefined exposure criteria, supervisory authority, or governance-defined activation pathways.

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Protections must be designed so responders are not required to self-identify distress in order for activation to occur following qualifying occupational exposure.

Organizations must maintain structured mechanisms for periodic review of cumulative exposure patterns across designated roles, independent of individual symptom reporting, to ensure reliability of activation systems over time.

Alignment is demonstrated through governance oversight, executive-level accountability, activated response pathways, confidentiality safeguards, continuity of protection, retrievable documentation, and accountability for performance.

4. Minimum National Organizational Protection Elements

Every FRBH-aligned organization must demonstrate the following organizational protection elements:

1. Automatic post-exposure activation
2. Embedded early-response support capacity
3. Protected confidential access pathways
4. Proactive cumulative exposure oversight
5. Career-span continuity of protection, including transition guidance for personnel separating from trauma-exposed roles
6. Organizational accountability for exposure management
7. Supervisor activation and oversight responsibility
8. Family-support integration mechanisms
9. Budgetary and structural durability

These elements establish the minimum national baseline. Organizations may exceed these requirements; however, no element may be omitted. These elements represent organizational safety controls and governance mechanisms. They do not prescribe clinical models, therapeutic approaches, or service-delivery methods.

4A. Adaptive Activation & System Integrity Safeguards

Organizations must demonstrate system resilience under uncommon, novel, or large-scale exposure conditions.

Activation Architecture

- Discretionary activation authority beyond predefined qualifying events



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- Activation pathways based on observable operational or exposure indicators
- Retroactive activation pathways without punitive time limitation
- Surge protocols for large-scale or catastrophic exposure events

Governance Oversight & Reliability

- Annual review of trigger matrices and activation reliability
- Documented governance review following any failure of activation
- Executive leadership accountability formally assigned and reflected in governance records

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Protection & Integrity Safeguards

- Explicit inclusion of all ranks, including executive leadership
- Separation of behavioral health activation from disciplinary processes
- Clear classification protocols distinguishing operational trauma exposure from administrative, disciplinary, or performance-related stressors
- Anti-retaliation safeguards related to activation

Protection systems must demonstrate reliability under operational stress, leadership transition, vendor change, budgetary constraint, and fluctuating workforce demand.

These safeguards govern activation architecture and oversight design only and do not evaluate clinical content or therapeutic delivery.

5. Scope & Limitations

The FRBH National Standard governs organizational design and governance expectations only.

FRBH does not regulate, license, certify, or control:

- Clinical licensure or scope of practice
- Diagnosis, treatment decisions, or clinical standards of care
- Collective bargaining agreements or labor relations
- Employment contracts, personnel actions, or discipline
- Operational command authority

FRBH accreditation is vendor-neutral and does not endorse or require any specific service provider, product, or delivery model. FRBH accreditation does not guarantee the absence of adverse events, individual harm, or behavioral health outcomes. Accreditation verifies organizational design alignment only.

Verification of alignment occurs solely through independent accreditation review conducted by FRBH.

FRBH does not provide clinical, operational, consulting, employment, or implementation services.



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6. What Accreditation Confirms

FRBH accreditation confirms that an organization has demonstrated alignment with this standard, as evidenced through documented and retrievable governance records, activation logs, oversight documentation, and demonstrated system performance under operational conditions:

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- Exposure-based activation of behavioral health protection
- Embedded response pathways integrated into governance and operations
- Clear multi-level accountability, including governing body oversight, executive accountability, and supervisory activation responsibility
- Demonstrated capacity for adaptive activation under novel or uncommon exposure conditions
- Documented reliability under occupational stress

Accreditation does not certify clinical quality, individual outcomes, or service utilization.

7. What Accreditation Is—and Is Not

Accreditation is:

- A governance and enterprise risk-management determination
- Independent verification of organizational alignment
- A national benchmark for behavioral health safety architecture
- A mechanism for durability across leadership and vendor changes

Accreditation is not:

- A wellness or morale initiative
- A vendor selection process
- A clinical or treatment endorsement

Accreditation defines how organizations govern protection, not how clinicians deliver care.

8. Foundational Framework

FRBH standards are grounded in occupational safety science. Applying occupational safety principles to behavioral health protection provides conceptual grounding for FRBH's system-activated model. This framework informs the standards but is not itself an accreditation requirement.

9. Voluntary, Independent, National

FRBH accreditation is voluntary and organization-initiated. It provides an independent national benchmark designed to endure operational stress, leadership transition, and evolving workforce demands. Accreditation determinations are made independently of operational, financial, or vendor interests.



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Organizations have access to a formal appeals process governed by FRBH accreditation policy.

10. In Plain Terms

Accreditation ensures that behavioral health protection is built into how work is governed and managed—so safeguards activate predictably in response to predictable occupational exposure and function consistently even when individuals cannot ask for help.

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11. Interpretation

Questions regarding interpretation or application of this standard may be submitted to FRBH through its published governance channels.

12. Standard Review & Revision

The FRBH National Standard is subject to periodic governance review to ensure continued alignment with occupational safety science, operational realities, cumulative exposure patterns, and emerging risk considerations.