



UtABA School Collaboration Committee

Applied Behavior Analysis in School Settings: Guidelines and Procedures

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UtABA School Collaboration Committee appreciates the time and effort spent by the multidisciplinary work group in contributing to the development of this document:

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Overview

Behavior analysis is a research-based methodology that seeks to understand an individual's behavior in order to create interventions that can create behavior change. The use of applied behavior analysis (ABA) in school settings can be beneficial to the student, teachers, and administrators as they can use its research-based methodology to systematically increase the effectiveness of the learning environment on a specific student's education. Behavior analysts can provide direct observation and intervention for students, training for teachers and staff, and systems evaluation for administrators. Therefore, a behavior analyst can be an important member of a collaborative team in a school setting. However, before entering and collaborating in a school, it is important to understand best practice guidelines for working in that setting, as it is different from working in a private or clinical setting. Because schools are a unique setting, a



behavior analyst should seek training, consultation, and supervision before conducting work there, beyond just the scope of this document.

Processes for Behavior Analytic Practice in Schools

There are many reasons why a behavior analyst would practice in a school setting. The most common reasons include per IEP recommendations, consultation, systems support including possible natural environment training (NET) and discrete trial training (DTT), program evaluations, generalization observations, transitions from treatment centers, coordination of care with the special education department, occupational therapist, physical therapist, and speech-language pathologist.

Role of the Behavior Analyst

The role of the behavior analyst in school settings may vary, but in general, their purpose is to help school teams create behavior plans that support socially valid outcomes for the student. This role may include teaching staff and other personnel the nature of ABA, behavioral evaluation, data collection, evidence-based interventions, and progress monitoring. Behavior analysts may also be responsible for intervention implementation within the guidelines of the LEA and individual classroom settings. It is important for the behavior analyst to have a clear understanding of what the school and client's parents expect from the relationship and work collaboratively with all parties.

Initial Contact

Whether an agency, school, or parents are the first to reach out, behavior analysts should first consult with their supervisors about guidelines for initial communication. This information should be available within each agency's guidelines and regulations. School districts may also



have separate guidelines regarding communications with outside agencies and behavior analysts should review these guidelines for the specific district prior to further contact.

Communication with School

It is important to understand the Individual Education Plan (IEP) process and how it is designed. Generally, an IEP details explanation of student's current performance levels, development of goals, accommodations, special education services, or considerations needed to achieve those goals, and documentation of required service minutes. The IEP team develops goals that are expected to help the child access the general curriculum and guide decisions as to services and accommodations. The IEP may also include Functional Behavioral Assessments (FBAs) and Behavior Intervention Plans (BIPs) for behaviors that interfere with the student's ability to access the curriculum and classroom environment. School Districts have specific forms and formats they use to develop IEPs, FBAs, and BIPs. Before an IEP can be implemented, it must be approved and signed by the student's parents and IEP team in a meeting to ensure that involved parties understand and agree upon the goals and services offered. Understanding the school's IEP process, forms, and IEP terminology will help ABA professionals better communicate with school IEP teams.

It is helpful and necessary for behavior analysts to specify with parents what their role is within school IEP meetings (1.05a, BACB, 2014). It may be helpful to share this information with school IEP teams. An example of defining roles would be:

1. Provide information about skills and behaviors seen in therapy
2. Gather information about skills or behaviors seen in school setting
3. Provide information about interventions used that may be helpful for school personnel



4. Suggest goals or assist with goal writing, if appropriate
5. Provide suggestions about possible accommodations or services to assist in goal acquisition
6. Provide suggestions about training and resources for schools

The overall goal should always be to improve student outcomes for both school and therapy settings. Defining roles may be helpful in avoiding misunderstandings or fears about what the other group's intentions are.

Ethical Practice in Schools

BCBA ethics. There are several overlapping ethical guidelines that both behavior analysts and educators need to abide by. Both behavior analysts and educators need to act in a way that does not discriminate against a student based on age, gender, sexual orientation, race, religious beliefs, or disability (R277-515-1G(1), Utah Educators Standards, 2013 and 1.05d (BACB, 2014). There is also an expectation of confidentiality that both parties must follow, unless there is a reasonable suspicion of abuse or potential harm of the client or by the client (R277-515-1G(2), Utah Educators Standards, 2013 and 2.06a (BACB, 2014). Educators and behavior analysts are expected to demonstrate honesty and integrity in all of the work they do with students and clients (R277-515-4(5), Utah Educators Standards, 2013 and 1.04a (BACB, 2014).

Consent. Consent forms may vary between school districts and even between schools in each district, so it is necessary to find the appropriate forms and make sure they are completed before entering a school or communicating with school personnel. If a behavior analyst is



contracted through their agency of employment, there are likely agency-specific consent forms that one or multiple parties will need to sign.

Confidentiality. Confidential treatment information may be disclosed if required by law, specifically for mandatory reporting purposes in cases of suspected abuse or neglect of a child or vulnerable adult, or for purposes of reporting a communicable disease. Treatment information may be disclosed in an administrative, civil, or criminal proceeding if permitted by Rule 506, Utah Rules of Evidence. Confidential information may be disclosed if “the disclosure is made under a generally recognized professional or ethical standard that authorizes or requires the disclosure.” (Utah Code 58-60 § 509). Behavior Analysts are expected to take precautions to protect the confidentiality of those they work with and explain confidentiality and its limitations with new clients. Behavior analysts are also expected to only share relevant information in reports and only with persons who must obtain confidential information in order to make informed decisions about the client’s treatment. Finally, no identifying information about current clients should be posted within social media contexts (2.06, BACB, 2014).

Recommended Guidelines for Appropriate Conduct in Schools

Collaboration with School Personnel

Building rapport. Building rapport with school office employees, administrators, and team members (e.g., general and special education teachers, related service providers) is essential to effective behavioral consultative and practice in schools. Each school has a different dynamic and atmosphere, and it is important to first learn about the culture of the school. When a behavior analyst enters a school, they are a guest in the building, and it is important to be mindful they are there at the discretion of the school. During the first visit, a behavior analyst should introduce



themselves to the principal and office staff. It is also polite to ask the office administrator for the sign in form and get a “visitor” badge for public schools. Front office staff are often the gatekeepers of the school and are full of helpful information, so it is important to be friendly and develop a positive relationship with them. Behavior analysts should make sure to be aware of the safety procedures for each school and follow them carefully when visiting. At a minimum, these safety procedures typically include completing necessary paperwork, such as confidentiality and consent forms, so it is important to ensure those are completed before attempting to observe a student or meet with school staff. It is also beneficial to become familiar with the standards and contingencies that school personnel must follow, such as federal legislation on special education like the Individuals with Disabilities Education Act (IDEA) and Section 504 of the Rehabilitation Act of 1973..

Given the nature of consultative relationships, there is limited time that a behavior analyst can devote to a school and students. Developing a strong rapport with teachers and staff can increase their likelihood of implementing recommendations made by the consultant, reducing potential negative effects resulting from time constraints. One way to build rapport is to ensure school personnel involved in a case are included in all communication and to ensure opportunities for the entire team to provide input on a client’s behavior and other related recommendations. This increases the probability that critical points are not lost when school staff are passing on information to one another. An additional step in building rapport involves being respectful of a teacher’s time and working around their schedule when planning meetings, so that teachers are not feeling overwhelmed or stressed by the consultant’s presence; therefore, associating them with negative feelings. During meetings, a behavior analyst should ensure the



teacher and staff are given opportunities to contribute to discussions and their opinions are welcome and valid. Behavior analysts should keep in mind and respect the fact that these individuals are experts in the field of education. Some important questions that the behavior analyst can ask in order to develop both rapport and a better understanding of the client in the school setting include asking school team members what their frustrations are with the client, what types of interventions they have tried, what the goals are, and what barriers exist. Creating an outline of shared goals between the behavior analyst and the school team can be helpful for situations where tensions may rise, as those goals can always be referenced.

Using understandable language. Effective communication is not just about presenting a well-organized idea in a pleasant style and tone, it is also about using understandable language and checking for understanding. This includes presenting assessment results in an understandable way and including graphical displays of data that can be easily analyzed by the school team (3.04, BACB, 2014). When working with those in various fields outside of behavior analysis, it is typically best to avoid using acronyms that are specific to ABA. If it is necessary to use a behavioral term, behavior analysts should first explain the concept and what the acronym stands for. It is also helpful to become familiar with the terminology used in schools to find common ground in what both parties are attempting to communicate. If possible, it is beneficial to incorporate the school team's terms into the vocabulary used in meetings, granted that the behavior analyst uses them correctly and can accept feedback when terms are used incorrectly. Meetings with teachers and other school staff should not feel like a lecture on behaviorism, rather it should be a collaborative discussion and the language that is used should reflect that (1.05b, BACB, 2014).



Respectful discourse. It is important to approach each visit, phone call, email, and meeting in the spirit of positive, professional collaboration. This includes respecting and acknowledging the insights and contributions of teachers and other school personnel involved to foster a collaborative environment. A behavior analyst should protect all members of the collaborative team with respectful and thoughtful words and actions in order to best represent ourselves, the client and the field (2.03b, BACB, 2014). When presenting information and recommendations to the team, ensure that it is presented in a way that allows for input from others, and does not seem forceful in nature. Along with that, if disagreeing with suggestions presented by other members of the team, it is valuable to the collaborative relationship to be open to the possibility of compromise instead of simply refusing. Looking at data to drive decision-making is a good strategy when disagreements arise. When considering multiple interventions that are scientifically supported, it is important to get the preferences of the team so they can be considered on top of the efficiency and cost-effectiveness, risks and side-effects of the interventions, and client preference (2.09c, BACB, 2014).

A very important part of respectful discourse is engaging in behavior that does not discriminate against clients or consultees based on age, gender, race, culture, ethnicity, religion, or sexual orientation (1.05d, BACB, 2014). It is the behavior analyst's responsibility to provide appropriate care for clients regardless of any differences, which may entail seeking additional training to ensure competence of provided services. If one cannot provide enough services, it is necessary to make an appropriate referral (1.05c, BACB, 2014)

Preferred communication modalities/expectations. It is often the responsibility of the behavior analyst to contact the client's teacher first. Before doing so, the behavior analyst must



make sure to have appropriate forms signed and use the method of communication that the client's family and school prefer (2.03a, BACB, 2014). If there is a need for classroom observations, it is appropriate to ask the teacher what time would be most convenient while also allowing the observer to get an accurate view of the client's behavior of concern. Other important questions to ask may include questions about the teacher's preference on entering the classroom, if the behavior analyst should be introduced to the classroom and how they should be addressed, if the behavior analyst should sit or stand during observations, and if the behavior analyst is able to move around the room throughout the observation. It is vital to follow the preference of the teacher when conducting observations to be respectful of the teacher and their expectations within their classroom. The behavior analyst should ensure that the teacher knows that the purpose of observations is not to evaluate their skill level, but to understand the behavior of the client. It is critical to clarify the reason for the observation is explicitly known to all necessary parties, and they are aware that any notes taken during observations will not include information or identifying factors related to any other students.

If it is determined that services in the school beyond just classroom observations are required for the client, it is important to contact the LEA or appropriate administration, as they are ultimately the entities that will determine next steps. Behavior analysts must be cautious not to request official meetings or attempt to determine the need for services, and rather, they should leave this responsibility to parents and the IEP team. If the behavior analyst is included in an initial team meeting with the teacher and other school staff, it is recommended to set basic boundaries and expectations. The role of the behavior analyst and their team should be made clear during this meeting, including what exactly they will be doing in the classroom and what



that might look like. It is also important to discuss the nature of the collaboration and develop clear expectations for each party (2.03b, 2.04a, BACB, 2014). This includes thoroughly discussing the time commitment that the behavior analyst has for treatment, the data that will be collected, and any additional involvement or requirements the teacher and school personnel are responsible for.

Scheduling. When considering schedules for service provision and consultation, it is important to work around the client's academic instructional needs. The client may need more support during academic times, however, times that therapy and support are provided ultimately depend on teacher and parent preference. It is also important to consider the social aspect of the school environment, and when it is the most beneficial time for the client to receive services, as that is always the top priority. School days generally adhere to a routine, but there are many changes that can occur weekly, so it is best to confirm the schedule before arriving to provide services. Even after arriving at a school, there may be situations that arise or the client may be absent or unable to receive services, and during those times it is best to remain flexible and understanding and reschedule services to another day.

Training. It is likely going to be necessary and/or beneficial for the behavior analyst to be available for staff support and teaming in order to assist them with the interventions and strategies that the behavior analyst will be using when working with a client. In order to effectively support the staff, it is imperative that there is a strong working relationship between the behavior analyst and the team they're assisting. This working relationship can be improved through the rapport building suggestions mentioned earlier in this document. It may be beneficial



to talk to the team ahead of time to indicate whether assistance will be necessary and to ask questions about preferred consultation models.

When behavior analysts provide support to school personnel, it should reflect current research methods that are effective and represent best practice (1.01, BACB, 2014). Supports ranging from periodic consultation to more discrete training should only be done with skills that are within the competence of the behavior analyst conducting the training (1.02a, BACB, 2014). Any training that a behavior analyst conducts should be behavior analytic in nature and follow the BACB guidelines and Professional and Ethical Compliance Code. Assisting teachers and other staff is about empowering them with new information and skills so they are able to make a difference with their students. Consulting with teachers is more effective when focusing on skill building, so modeling, rehearsal, and providing feedback are integral components when providing support. As the teachers and staff show proficiency with the skills and interventions, the role of the behavior analyst can be faded out of the classroom gradually, and the behavior analyst can be available for treatment questions and follow up, instead of direct intervention. Providing these skills and interventions to teachers can also help other students in the classroom, as the teacher can generalize the skills they are learning for effective classwide behavior management. In order to be respectful of teachers and other school personnel involved in developing skills, it is important to be on time, be mindful of the audience, and come well-prepared.

If discrete training is deemed necessary and appropriate by all parties, the behavior analyst should plan trainings that incorporate evidence-based strategies. Currently, Behavior Skills Training (BST) is one of the most common models that behavior analysts use to train



school personnel. The four basic procedures of BST are: provide specific instruction on how to carry out or perform the intervention, model how the intervention should be implemented, give opportunities for individuals to practice, then give feedback. Before the trainee is able to move on from the training, they are required to demonstrate mastery, as this is the most critical component of BST. BST allows staff to build competence in their skill set, and it allows for there to be a discussion between the trainer and trainee on what is feasible for the classroom as the trainee is practicing the skills (Traub et al., 2017). Another option in training staff is offering pyramidal staff training, or a train the trainer model. This involves the behavior analyst teaching one person on the school team, typically the teacher, the intervention procedure and how to train other staff on the procedure. Once the teacher, or an alternative member of the school team, shows mastery on the procedures, they are able to train the rest of the team on intervention procedures. The behavior analyst can then do fidelity checks on training and program implementation during follow-up visits, and provide feedback as needed (Traub et al., 2017). This should be done until the trainee shows an appropriate level of competency.

Sharing data. Collaborating behavior analysts and school personnel deal with a variety of issues concerning sharing relevant data for joint decision-making. Both groups will be involved in collecting important data on student progress with regard to academic skills, challenging behaviors and other areas of student performance (e.g., domestic and community skills). Behavior analysts and school personnel should be prepared to share specific skill acquisition goals and types of data being collected to monitor progress pertaining to targeted behaviors.



It is imperative that collaborators share information in the most efficient manner. Graphic displays are a particularly efficient and informative format for sharing data. For example, personnel working with a student in home and community settings could share graphs documenting the frequency of targeted challenging behaviors (e.g., number of occurrences of behavior per hour or per day) and the percent correct performance of targeted skills (e.g., completing steps in dressing and other self-care skills). School personnel could securely share graphs documenting the frequency of similar and/or additional challenging behaviors and academic performance in school settings (e.g., percent correct performance on assessments of targeted math and literacy skills).

Sharing data allows collaborators to jointly determine which types of procedures are proving effective in producing positive outcomes in school and other settings. This could lead to possible changes in strategies in one or multiple settings to maximize such outcomes. Appropriate permissions must be obtained from parents/guardians and/or school district personnel to ensure the data sharing process meets legal requirements. Schools will often have bidirectional Release of Information (ROI) forms that they will have parents sign before they release any information to outside agencies, and ABA agencies will also need the parents to sign a release of information before any information is released from ABA agencies to school districts. Most school districts have their own release forms and procedures, and it is important to be educated on these forms prior to sharing information.

As part of this process, collaborators must ensure they are following relevant applicable legal guidelines so the data sharing process is compliant with both the Health Insurance Portability and Accountability Act (HIPAA), which protects medical information, and/or the



Federal Educational Rights and Privacy Act (FERPA), which protects educational information. Along with that, the BACB has very clear ethical guidelines regarding the confidentiality and data sharing that should always be followed (2.06, 2.07, 2.08, 2.10, and 2.11, BACB, 2014).

Medical Necessity for Change of Placement. Students who receive special education services frequently have a medical diagnosis, given by a doctor or other specially trained clinician by using symptom criteria set in the Diagnostic and Statistical Manual of Mental Disorders (DSM). However, a medical diagnosis does not automatically entitle a student to an IEP. Eligibility for an IEP is based on an educational determination of an IEP, including the student meeting the criteria for a specific disability and evidence that the student is unable to progress successfully through the general education curriculum as a result of this disability. Once a student is designated as eligible for special education services, a student is entitled to an education in the least restrictive environment that meets their needs. For some students, this environment may be the home environment or an intensive outpatient treatment program. In some cases, when the severity of a student's symptoms of a medical diagnosis result in an inability to effectively educate the student, even with the addition of the IEP, a change of placement may be warranted. In these cases, it may become a medical necessity to treat symptoms related to the student's medical diagnosis before the student can benefit from the educational process. If the IEP team determines that a student's symptoms of their disability require more intensive services than what can be provided in an educational setting, a recommendation for intensive outpatient services (i.e., attending a day treatment program) is made. The team must then determine how the student will be educated. In some cases, the student's parent or guardian may elect to enroll their student in a home-school curriculum, and in



doing so, take responsibility for the student’s education. Home schooling is provided by a parent or guardian, using the materials and curriculum selected by the parent or guardian. This is different than homebound instruction (also referred to as “Home and Hospice”). Homebound instruction is provided by the public school system at no cost to the family, including materials and instruction, when a child with severe disabilities or medical complexity is unable to attend school. The homebound instruction may be short or long-term. Due to the nature of homebound instruction, it should be reserved for children with the greatest levels of medical complexity when recommended as a result of a severe disability. In some cases, a student may be provided with a blend of in-school and homebound schooling. For students with severe disabilities, this may apply as a student transitions from an intensive outpatient program back into the school setting. Eligibility for homebound instruction is made during an IEP meeting, and in many cases, is contingent on a referral from a physician. Each state varies in how much instruction is provided to students receiving homebound instruction. In addition to state requirements, each district may have its own policies. In some cases, the student is provided with educational packets that can be completed at home or in the intensive outpatient program, while other times, an educator from the school district meets with the student (at a frequency designated by the IEP team) to provide 1:1 instruction in a setting outside of the school. A student who is provided homebound instruction may then receive treatment that focuses on the symptoms of the diagnosis, such as severe maladaptive behaviors or significant communication and social deficits, that prevent the student from benefiting from the school setting. The goal is to provide intensive intervention in a setting outside of the school, that will result in the student being able to transition back to the school setting and benefit from the educational process.



If the IEP team determines that homebound instruction is required, to allow a child to receive intervention services in another setting, the supervising BCBA should maintain collaboration with the IEP team. The team should work together to establish criteria for the student to return to the school setting, evaluate progress, and plan for how that transition will occur.

Collaboration with Supervisors

Behavior analysts should have regular supervision to discuss their clients and their treatment progress (5.06, BACB, 2014). The supervisor may be someone within the school district or for those who are contracted, it may be someone in their agency. If it is someone in their agency, it is important to give consideration to previously mentioned factors (e.g., consents, confidentiality agreements, visitor requirements) if the supervisor needs to do observations or attend meetings at the school. It is also important to discuss the preferred method of supervision and communication, as well as the level of involvement the supervisor wants/needs to have. Clear expectations about when to contact the supervisor outside of regularly scheduled supervision meetings should be decided; this would include what would constitute an emergency situation that would need immediate guidance (5.05, BACB, 2014).

Collaboration with Parents

Using understandable language. Although schools may initially provide some information about ABA and services that behavior analysts provide, it is up to the analyst to make sure parents fully understand their position. When communicating with parents, it is critical to explain practices using simple and understandable language. It is also important to use clear and relatable examples to help with parental understanding. One way to explain behavior analytic practices is to teach parents common terms that will be used throughout treatment. Some



helpful terminology may include positive and negative reinforcement and punishment, extinction, and motivating operations. Teaching parents the definitions of commonly used terms promotes transparency and aids in fostering a collaborative relationship.

Sharing data in an appropriate and understandable way. Prior to sharing behavior data with parents, behavior analysts should take time to teach parents the basics of looking at and interpreting data. A proper first step may include asking parents how familiar they are with data collection and presentation and how they might prefer to receive it (e.g., written summary, data tables, graphs). Once the preferred method is decided, the behavior analyst can show the parents examples and interpret initial data with them until they are fluent. As interventions progress, parents may require more training or even request different ways of displaying the data. It is important to note that behavior analysts should also be available to help parents interpret intervention data that the school may provide directly (3.04, BACB, 2014).

Potential differences between home and school-based therapy. Some parents may be more familiar with in-home behavior services and have questions about the differences between the services provided within the home and school-based services. It will be important to explain that the basic behavioral principles of ABA will be maintained in treatment no matter the environment. Some differences applicable to services provided in school settings that may be helpful to explain could include personnel involved, timing of intervention, potential conflict with academic work-time, and peer involvement. Behavior analysts should explain the benefits of school-based services such as helping them better adjust to school routines and generalization of skills learned within the home.

Additional Considerations for Consulting in Schools



Mandatory Reporting. Mandatory reporting refers to the need to contact the appropriate authorities if abuse or neglect are witnessed while observing in a classroom or school. Below are the steps to report abuse or neglect.

1. Contact State authorities (<https://dcfs.utah.gov/>)
2. Contact relevant supervisor(s)
3. Contact the Special Education director of the district, make a statement of what was witnessed.

Family Educational Rights and Privacy Act. The Federal Family Educational Rights and Privacy Act (FERPA; 20 U.S.C. § 1232g) law protects the privacy of student education records and requires written permission from either the parents/guardians or eligible student to release any information from the student's educational record. Along with the federal FERPA law, those who are practicing in school settings must also follow Utah FERPA. Utah FERPA law prohibits any psychological or psychiatric examination, testing, treatment, or survey without prior written consent of a parent or guardian, in which the student has to reveal information about: political affiliations, mental or psychological problems, sexual behavior, orientation, or attitudes, illegal, anti-social, self-incriminating, or demeaning behavior, critical appraisals of individuals the student has close relationships with, religious affiliations or beliefs, legally recognized privileged and analogous relationships, and income. This restriction is applicable even if the information is not personally identifiable.

The Health Insurance Portability and Accountability Act. The Health Insurance Portability and Accountability Act (HIPAA; 45 C.F.R. § 164.312(a)(1)) protects medical and other health information from being shared without the written consent of the patient. Behavior



analysts must follow HIPAA regulations when working with clients, and ensure they are not sharing treatment information without consent.

Memorandum of Understanding

A memorandum of understanding (MOU) is a formal agreement between two or more parties. It is not a legal document, but it includes the terms and details of a partnership, including each parties' requirements and responsibilities.

MOU Template. Some school districts and agencies may have their own MOU's they use, but if not, it may be necessary to create one when forming a new partnership with a school. See Appendix A for an example MOU.

ABA Decisions Impacting the School-Day. For instance, IEP teams deciding a student should attend half-day at school and half-day at an ABA clinic. This is a team decision that should involve parents, caregivers, school staff, and ABA providers. Please remember to consider regulations within the appropriate guidelines. Schools have legal responsibilities depending on the support provided within the school setting. For instance, a student receiving special education services would be required to have an IEP team meeting to discuss any changes in placements and/or services.

Medical necessity for ABA services

Discuss how this might impact a student

Coordinating Services. Collaborate with your school team when supporting clients that also attend school. The client's behavior support specialist is a valuable point of contact in determining behavioral interventions and performance at school. The behavior support within the school setting can include teachers, paraprofessionals, school psychologists, school



counselors, social workers, as well as behavior analysts. Introducing yourself to the team could be beneficial in coordinating support across settings and improve interventions. Remember to include parents in your communication so they are a part of any discussions to avoid any confusion and/or misrepresentation. Having clear communication is helpful in preventing misunderstandings between the school, home, and clinic settings.

Least Restrictive Behavioral Interventions Technical Assistance Manual Guidelines

In the state of Utah, Public Schools are required to follow *Least Restrictive Behavioral Interventions Technical Assistance Manual* (LRBI) that provides guidelines for all students and is available online (<https://www.schools.utah.gov/file/156f0eca-0b4f-434a-a780-8335eea603f7>). The LRBI was designed as a resource for all school personnel (public or private) in the state of Utah including administrators, classroom teachers, behavior specialists, and related service providers or paraprofessionals. It outlines evidence-based practices to promote a positive school climate while preventing negative behaviors. In addition, it provides templates and tools for data collection and decision making flowcharts to assist school teams in addressing student behavior problems. Behavior analysts are expected to always recommend reinforcement over punishment whenever possible, unless appropriate steps have been taken to implement reinforcement-based procedures or the severity of dangerousness of a behavior necessitates immediate punishment procedures (4.08, BACB, 2014). Along with that, behavior analysts are expected to always recommend the least restrictive procedures likely to be effective and avoid using harmful reinforcers (4.09, 4.10, BACB, 2014).



The LRBI cites the supportive state and federal legislation and outlines behavior supports ranging from universal school wide best practices (tier one) to more intensive (tier two) interventions and may include more restrictive interventions for an individual behavior support plan (tier three). The research base for these practices is also included. The BACB ethical code aligns with the LRBI in several ways. More specifically, both emphasize the necessity of implementing reinforcement procedures rather than punishment unless there are specific safety considerations. In addition, both advise the use of the least restrictive procedures necessary for behavior change. The LRBI provides a list of interventions that are organized in a hierarchy and are described below.

Universal interventions. Universal interventions are considered preventative interventions designed to be utilized prior to considering more intensive interventions. These include evidence-based instructional practices and a wide range of antecedent interventions such as environmental engineering and effective prompting. It also explains a variety of reinforcement practices as alternatives to the use of extinction.

Targeted interventions. Targeted interventions are considered when universal interventions have not worked and a sub-group of students are performing below benchmark on either academic or behavioral measures. These students are then “targeted” to receive evidence-based interventions to help increase their success in the specific academic or behavioral area. These may be considered a “tier two” intervention under a Response to Intervention (RTI) or Multi-Tiered System of Supports (MTSS) model and are part of a Positive Behavior Intervention Supports (PBIS) framework. Interventions are usually done for a specific amount of time and students are re-assessed on their progress regularly. An example of a behavioral targeted



intervention includes the Check In/Check Out program which addresses student truancy and in school behaviors. Tier two interventions are conducted in conjunction with tier one supports.

Individual interventions. Individualized interventions are usually put into place when universal and targeted group interventions have not been effective in addressing problem areas. A formal plan including strategies, specially designed instruction, goals, data collection and review of progress are outlined. The plan may be formally documented in an Individualized Education Plan (IEP) or in a Behavior Intervention Plan (BIP). Interventions are determined based on a specific student and their individual needs. Individual interventions should be done in combination with universal and targeted interventions with the goal of fading strategies to less intensive and typical interventions. Individualized interventions may need increased expertise, supervision and permission. Chart XC (or page 101 found in the LRBI manual) lists various strategies, whether a behavior expert needs to be on the team for the intervention to be used and what type of permission is needed. Some individual interventions may be more restrictive in nature; therefore, they require written consent from parents, school administration and team members.

Emergency Safety Interventions (ESI) are included in Crisis Management section and are used as safety procedures. They should not be used for disciplinary purposes (pages 57-61). They may include restraint or seclusionary time out procedures and are listed in table 41. The use of ESI should not be included on a student's IEP or BIP, as they should only be used in emergency situations of immediate danger. However, in some instances where an IEP team decides to include an ESI in an IEP or BIP, an FBA must be conducted and parental consent must be obtained. Even if an ESI is identified on a BIP, it's use must still follow regulations and the focus



of the BIP should be placed on teaching and supporting more appropriate behaviors that replace the student's dangerous behavior. Any time that an ESI is used, it needs to be documented within the student's records and parents need to be notified per guidelines in the LRBI manual. It is also recommended that following the use of an ESI, a debriefing session takes place between the staff involved to prevent the future use of a similar intervention. Each LEA must organize an ESI Committee to monitor LEA policies on disciplinary plans, actions and behavioral intervention procedures, protections, and safeguards. On each LEA ESI Committee, there should be two LEA administrators, at least two other professionals with behavioral knowledge, and a parent. There needs to be a recognized specialist in behavior supports and interventions in situations where highly intrusive intervention procedures are considered.

Conclusion

The practice of behavior analysis is effective at improving the academic and behavior outcomes of students, and helping to support teachers and school staff working with students. However, since the school setting is a unique environment compared to private practice settings, individuals who provide ABA services in schools should take special consideration when helping students, ensuring respectful and ethical practice with school staff and families. Behavior analysts have a responsibility to provide the best possible care for clients, including establishing collaborative relationships with other care providers, such as teachers and school administrators. Providing this connectedness between team members ultimately improves the targeted outcomes for the students with whom we serve.



References

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State of Utah Office of Education. (2015). LRBI Technical Assistance Manual. Salt Lake City, UT.

The Health Insurance Portability and Accountability Act of 1996 (HIPAA), (45 C.F.R. § 164.312(a)(1), 1996).

Traub, M. R., Joslyn, P. R., Kronfli, F. R., Peters, K. P., & Vollmer, T. R. (2017). A Model for Behavioral Consultation in Rural School Districts. *Rural Special Education Quarterly*, 36(1), 5–16. <https://doi.org/10.1177/8756870517703404>

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Appendix A: Sample MOU

ESMH Memorandum of Understanding

between

Any County School

and

Selected Local Community Organizations

Vision: The ___ County Partnerships supports the academic success of all students through promoting their physical and emotional health.

Mission: The mission of the ___ County Partnership for Expanded School Mental Health Services (ESMH) is to expand school-community connections to promote and care for the behavioral and emotional health of ___ County students in collaboration with students and their families.

Values

This partnership will be guided by the following principles.
Our work shall:

1. Reflect an appreciation for the training, skills, and unique contributions of members of the partnership.
2. Support mutual trust, respect and equality.
3. Reflect an appreciation for social justice, fairness and the value and dignity of individuals, families and communities.
4. Use the strengths and resources of all involved to facilitate development of the school and the community.
5. Provide for continuing education and training for all participating organizations and individuals.



6. Evaluate and document activities and share results with the community, families and supporters.
7. Include the weaving together of resources owned by the school, community organizations and other willing partners to meet common goals.
8. Deal with students, families, teachers and other professionals holistically, individually, developmentally, culturally and as members of families, students in schools and citizens of communities.

Goals

Goal 1:

To eliminate the isolation between the schools and mental health services in the community, by encouraging a joint effort in meeting student's mental health needs among the school, the community and families.

Goal 2:

To connect community mental health services, local youth service organizations, and families with the work of the school student assistant teams, health education and that of the school counseling program.

Strategy for Goal Attainment:

To develop a private-public partnership between the school system and local community organizations that may involve use of school or neighborhood facilities and equipment; sharing resources; collaborative fund raising and grant applications; shared underwriting of some activities, networking; recognition and public relations; mutual support; shared responsibility for planning, implementation, and evaluation of programs and services related to encouraging the mental health of students; shared celebrations; and expanding opportunities for providing mental health services to ___ County students.

Agreements:

Agency .

- ___ Agency agrees to only adopt prevention and care services that are age and culturally appropriate and that are proven to be effective with youth in their care and work with ___ County students.
- ___ Agency agrees to share professional staff and agency leadership to meet the objectives of this partnership.



- ___ Agency agrees to work collaboratively to seek funding for the activities of the partnership through shared grant writing, searching for funding opportunities and developing shared resources when funding is available.
- ___ agrees to provide social services so ___ County families are better connected to mental health services provided at school sites and communication between parents and the schools is enhanced and supported.
- ___ agrees to serve as liaison between the Core Team and the current funding organization, the Bureau for Behavioral Health of the West Virginia Department of Health and Human Resources, located in Charleston, WV.
- ___ agrees to respond to referrals made by ___ County school personnel, parents and other partners in a timely manner, including no more than three business days after receiving referral.
- ___ recognizes that ___ County Schools staff may refer youth to other mental health providers in the community such as the ___ and other providers and agrees to communicate to parent's their right to choose other local mental health providers.
- --- will explain to parents their and their child's rights to confidentiality, their rights to participate or not participate in ESMH services and the costs of those services.

Any County Schools

- ___ County Schools agrees to recognize ___ as an approved referral agency for mental health services for youth.
- ACS agrees to support each schools' Student Assistant Team's (SAT) efforts to connect students to expanded school mental health (ESMH) services provided through the ___ County Partnership.
- ACS agrees to provide space within each participating school for ESMH services.
- ACS agrees to facilitate communications between members of the ___ County Partnership and school staff and organizations.
- ACS agrees to support cross-training between mental health and school personnel.

Any County Family Resource Network (FRN) agrees to:

- Serve as a member of the Any County Partnership (ACP) Core Team.
- Serve as the lead media outlet for the ACP.
- Provide age appropriate and culturally relevant prevention education services to ACS students in collaboration with the ESMH project.
- Serve as an important link between the project and the community.
- Accept referrals from participating partners for services the FRN provides that are appropriate for Tucker County students.

Any Community Mental Health Center (ACHC) agrees to:

- Provide age appropriate and culturally relevant prevention mental health services to ACS students in collaboration with the ESMH project.
- Accept referrals from the ACP participants for mental health services for youth and provide feedback as to the status of those referrals.



- Respond to referrals made by Any County school personnel and parents in a timely manner, including no more than three business days after receiving a referral and provide feedback as to the status of those referrals.
- ACHC recognizes that ACS staff may refer youth to other mental health providers in the community such as ___Agency and other private providers and agrees to communicate to parent's their right to choose other local mental health providers.
- ACHC will explain to parents their and their child's rights to confidentiality, their rights to participate or not participate in ESMH services and the cost of those services.

Upon written notice, submitted to ___Agency., a member of the Expanded School Mental Health Core Team, any party participating in the Memorandum of Understanding may withdraw their participation after thirty-days from the receipt of the notice.

This agreement does not *require* any exchange of funds between parties.

Signatures:

_____, _____ Any County Schools
Name & Title Date

_____, _____ Any Agency, Inc.
Name & Title Date

_____, _____ Any Community Mental Health Center
Name & Title Date

_____, _____ Any County Family Resource Network
Date