

# **Guidelines for the Provision of Behavior Analysis in Public Schools**

**Guideline released in response to *Virginia Code* §22.1-273.4 (House Bill No. 1722).**

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## Introduction

The 2020 General Assembly Session passed House Bill No. 1722 to amend the *Code of Virginia* by adding a section; §22.1-273.4; specifically, that the Virginia Department of Education “shall develop guidance and resources relating to the provision of applied behavior analysis services in public schools for students who are in need of such services,” (House Bill No. 1722). The purpose of the current document is to provide school division personnel, parents, private applied behavior analysis (ABA) providers, and other interested parties with guidance related to House Bill No. 1722.

The development of this guidance document included information from multiple sources and stakeholders. A representative from the Virginia Department of Education, in collaboration with a faculty member from Old Dominion University, held an initial stakeholder meeting that included a variety of stakeholders from across Virginia. Members included representatives from the Virginia Department of Education, special education administrators, a representative from the Virginia Association for Behavior Analysis, and an attorney who specializes in school law. From this initial meeting, information was gathered and questions were derived that would be used for regional stakeholder meetings. A total of five regional stakeholder meetings were held and included stakeholders from all eight of the Superintendent’s Regions of Virginia in order to gather representation from around the state. Stakeholders included school personnel, private providers, and families. At the conclusion of these meetings, information was analyzed and summarized within this document. The original state level stakeholder group as well as the Virginia Department of Education reviewed this guidance document, prior to publication. Additional resources will be created and disseminated based on the input from the stakeholder meetings.

While the staff at the Virginia Department of Education (VDOE) hope this document is helpful for developing policies and practices related to the provision of behavior analytic services in public schools, the VDOE recommends school divisions consult with their school board attorney regarding the development of policies and procedures.

The VDOE would like to acknowledge the work of the individuals who provided information, feedback, and support for the development of this guidance document.

### **Acknowledgments**

Personnel in the Virginia Department of Education (VDOE) acknowledge with appreciation the contributions of administrators, private applied behavior analysis providers, related services personnel, Training and Technical Assistance Center (TTAC) staff, staff from the Virginia Autism Center for Excellence at Virginia Commonwealth University (VCU-ACE), and others for their input, expertise, and support offered in the development process of this guidance document. The VDOE specifically acknowledges the exemplary work of Dr. Selena J. Layden from Old Dominion University.

## **Purpose**

The purpose of this guidance document is twofold. First, this guidance document will address specific legislation related to the provision of applied behavior analysis (ABA) services in the school setting. Second, this guidance document will provide considerations for both school division personnel and private providers in order to promote successful services and supports for students who may receive ABA services. It should be made clear, however, ABA services can be provided by a school division but school divisions are not required to provide ABA unless an individualized education plan (IEP) Team determines ABA is required for a student to receive a free and appropriate public education (FAPE).

Given the varying needs and capacity of school divisions, this guidance will center on the roles and responsibilities of behavior analysts in schools, effective partnership, and communication strategies to enhance outcomes for students. This guidance document is intended to provide information and recommendations to support successful collaboration between school division personnel, behavior analysts, and families.

## Section 1: Applied Behavior Analysis

### What is ABA

Applied behavior analysis (ABA) is the application of a scientific field of study. Specifically, ABA is “a scientific approach for discovering environmental variables that reliably influence socially significant behavior and for developing a technology of behavior change that takes practice advantage of those discoveries” (Cooper et al., 2020, p. 2). This lengthy definition can be broken into some meaningful pieces. Behavior is anything that we say or do. In order for something to be considered a behavior, it needs to meet three criteria:

1. Observable
2. Measurable
3. Specific

These three characteristics are critical as behavior needs to be something that can be seen, something that can be counted in some manner, and something that is identifiable in that an observer will know when they do and do not see the behavior.

ABA focuses on behavior. Behavior analysts implement strategies and techniques of ABA in a systematic manner in order to change behavior. The systematic approach is one of the defining characteristics of the field. In fact, behavior analysts study and utilize experimental designs and data collection procedures to demonstrate the level of effectiveness of their interventions.

Additionally, those practicing ABA are highly interested in behaviors that are socially significant. In other words, behavior analysts typically focus on behaviors that are important to their clients, such as improving communication skills, teaching greater independence, and other

behaviors that improve the client's quality of life. The client can be a child or adult and may or may not have a disability.

ABA includes a lot of different techniques and strategies with which you may or may not be familiar. For example, ABA strategies include modeling, shaping, task analyses, chaining, and reinforcement, just to name a few. However, it should be noted that ABA is not one of these strategies in isolation. While many of these strategies may be employed by many different people, including educators, behavior analysts, speech therapists, and parents, simply implementing one of these strategies does not mean you are practicing ABA.

### **What ABA is Not**

As mentioned above, ABA is a scientific field of study. It is not a collection of strategies or any one particular strategy. For example, discrete trial training is a strategy that is used by some behavior analysts in some cases. It can be a very effective strategy in some instances. However, it is one strategy, not encompassing of the entire field. There are many behavior analysts who do not implement discrete trial training because it is not appropriate for their clients or the skills they are attempting to teach.

### **ABA Practitioners**

Practitioners who study and practice ABA are generally called, behavior analysts. Behavior analysts work in a myriad of settings with a variety of clients with and without disabilities, who can range in age from infancy through adulthood. Some behavior analysts have experience and focus their practice on children either in or outside of the school setting. While many different professionals may work to improve behavior and teach skills, behavior analysts have specific knowledge and a particular set of skills rooted in the principles of behavior.

Behavior analysts have specific training, education, and experience in order to practice in this field.

### **What are BCBA's**

Board Certified Behavior Analysts™ (BCBA™), Board Certified Behavior Analyst-Doctoral™ (BCBA-D™), and Board Certified Assistant Behavior Analysts™ (BCaBA™) are all certified through the Behavior Analyst Certification Board™ (BACB™). The BACB is a “nonprofit 501(c)(3) corporation established in 1998 to meet professional credentialing needs identified by behavior analysts, governments, and consumers of behavior analysis services” (BACB, n.d.). “The BACB’s primary role is to operate certification programs, which is similar to the responsibilities of a regulatory entity. In this role, the BACB establishes practice standards, administers examinations, and provides ethics requirements and a disciplinary system for each of its certification programs” (BACB, n.d.).

There are multiple levels of certification through the BACB. These include BCBA-D®, BCBA, BCaBA, and Registered Behavior Technician™ (RBT™). In order to become certified, each of the BCBA-D, BCBA, or BCaBA levels must take specific coursework, receive supervision in the field prior to becoming certified, and pass an examination provided by the BACB. Those wishing to become an RBT have training, pass a competency exam, and pass an exam provided by the BACB.

Under the BACB requirements, those professionals with a BCBA-D or BCBA designation may practice behavior analysis independently. A BCaBA must receive supervision from another professional at the BCBA-D or BCBA level. An RBT may NOT practice ABA but rather can complete the assigned tasks delegated to them while receiving close, ongoing



supervision from a BCBA-D, BCBA, or BCaBA. For a summary of this information, please refer to Table 1.

### **What is a Licensed Behavior Analyst**

In Virginia, behavior analysts must be licensed to practice. The Board of Medicine is responsible for the licensing of behavior analysts in the Commonwealth of Virginia. The Licensed Behavior Analyst (LBA) designation is used for individuals who are behavior analysts licensed by the state and are able to practice behavior analysis in Virginia. In 2012, the [Virginia Code § 54.1-2957.16](#) gave the authority to the Board of Medicine in the Department of Health Professionals (DHP) to license behavior analysts in the state. With few exceptions, behavior analysts may not practice in Virginia unless they have a current LBA license in Virginia.

There are specific exceptions to this code, however. The [Virginia Code § 54.1-2957.17](#) explains these exceptions. Specifically of note, individuals who are not an LBA but are employed by a school board or school for students with disabilities that is licensed by the Board of Education may implement interventions that are behavior analytic in nature if doing so is part of their regular job duties. However, it is inappropriate for someone to promote themselves as a behavior analyst, particularly a BCBA or LBA or any of the other credentials previously discussed in this document if they do not hold those credentials or license. This exception is also not expected to apply to those who hold the BCBA, BCBA-D, or BCaBA credentials and work in the public schools. Those individuals should also obtain a license from the DHP.

Because licensure is required for behavior analysts to practice in Virginia, regardless of whether someone has a BCBA-D or BCBA certification, they will henceforth in this document be called LBA. Similarly, those with a BCaBA certification are eligible to be licensed as and will

be henceforth called a LABA. There is no licensure for RBT in Virginia at this time, and they are considered “unlicensed persons.”

**Table 1**

*Summary of BACB® Certification Levels*

<b>Credential</b>	<b>State Licensure Designation</b>	<b>Description</b>	<b>Education</b>	<b>Practice</b>
BCBA-D	LBA	A certified behavior analyst with doctoral training	Doctorate	May practice independently
BCBA	LBA	A certified behavior analyst at the graduate level	Master's	May practice independently
BCaBA	LABA	A certified behavior analyst at the undergraduate level	Bachelor's	Must practice under the supervision of a BCBA or BCBA-D
RBT	Unlicensed	An individual who practices ABA under the supervision of a certified behavior analyst; similar to a paraprofessional	High School Diploma	Must work under the supervision of a BCaBA, BCBA, or BCBA-D

**Legislation**

Multiple pieces of legislation are pertinent to behavior analysts providing services in school settings. The focus of this guidance document is specifically section §22.1-273.4; stating

that the Virginia Department of Education shall develop “guidance and resources relating to the provision of applied behavior analysis (ABA) services in public schools for students who are in need of such services.” There are additional pieces of legislation including *Virginia Code* related to who may provide ABA services in Virginia and the Virginia Standards of Quality, that are related and both school division employees and private providers. Professionals involved in the provision of ABA services in Virginia as well as schools are encouraged to have knowledge about these. These will be discussed briefly below.

### **Professionals Who May Provide ABA in Virginia**

All behavior analysts wishing to practice in Virginia must be licensed to practice by the Virginia Board of Medicine. The [Virginia Code § 54.1-2957.16](#) established the authority for the Virginia Board of Medicine in the Department of Health Professionals to license behavior analysts in the state in 2012 with exceptions provided in 2014 (these are described more thoroughly in the section “What is a Licensed Behavior Analyst?”). Thus, without a license, individuals should not be practicing ABA in Virginia with few exceptions. The [Virginia Code § 54.1-2957.17](#) does allow an exception for individuals who are not an LBA, but are employed by a school board or school for students with disabilities that is licensed by the Board of Education. If a professional falls into one of these categories and implementing strategies or interventions that are behavior analytic in nature is part of their regular job duties, they may do so. This provision does not extend to other individuals who are not employed by a school board or school for students with disabilities licensed by the Board of Education simply because they are physically in a school building. Private providers wishing to practice ABA must possess a license to practice. There are other exceptions, which *Virginia Code* defines.

## **School Division Employed LBA**

Another bill passed through the 2020 session of the General Assembly addresses the use of LBAs and LABAs employed by local school boards. House Bill 1143 added LBAs and LABAs to the category of support services positions that are “necessary for the efficient and cost-effective operation and maintenance of its public schools.” While this does not require school divisions to employ LBAs or LABAs, it is permissive and provides clarity that these positions can be supported through local plans to meet the Standards of Quality (SOQ).

## **Section 2: Determining Need and Appropriateness of ABA Services during the School Day**

ABA is applied in all sorts of settings including public schools. Children spend a significant portion of their day in school. As such, we all want students to be successful in school and LBAs may have specific knowledge and skills to promote student success.

### **Provision of ABA in the School Setting**

Many school divisions have hired LBAs to work in the division. LBAs may perform a variety of tasks in their job, such as assisting with the implementation of positive behavior supports, response to intervention or multi-tiered systems of support, or other systemic change programs. LBAs may provide professional development and coaching services to teachers or other professionals. LBAs may also be responsible for assisting teams in conducting functional behavioral assessments, data collection, and data analyses. Some LBAs may provide direct services to students while others may not.

It is important to make a distinction between ABA techniques or strategies and ABA services. ABA techniques or strategies are the methods used by multiple professionals in various fields. Many teachers may use a number of ABA strategies such as reinforcement, modeling, prompting, visual supports, and others. Utilizing strategies from various fields is common in education. For example, speech pathologists have great expertise in communication strategies. However, communication is something that can and should be taught and reinforced by everyone working with that child. Yet there are some services or supports that should be provided by a speech pathologist. This is similar with ABA. There are evidence-based instructional strategies that come from the field of ABA such as reinforcement, modeling, or prompting which are widely used by many, including educators and parents. In fact, good instruction should include many of these practices. However, the implementation of these strategies by educators is an instructional decision. Ultimately, it is up to professionals in the school division as to the instructional methods used with a student.

There are also aspects of behavior analysis that should be implemented by an LBA or under the supervision of an LBA. For some students, behavior analytic services and supports may be appropriate. If a student has been identified as having a disability under the *Individuals with Disabilities Education Improvement Act* (2004; IDEA), the members of the IEP Team will determine the appropriate services and supports the student requires. ABA services may be considered by the team, if appropriate. An LBA may provide services or specific supports as determined by the IEP Team. This can vary, however, depending on the student, their individual needs, the environment, and the professionals working with that student. Ultimately, the services and supports provided through the IEP is an IEP Team decision and are outlined within the IEP document.

LBAs may also implement services that support students but they may not directly work with the student. For example, an LBA may analyze the data collected by the Team and assist with developing a behavior intervention plan (BIP) for the student. It may be the LBA's job to train all the staff members working with the student in how to implement the BIP. Then the LBA steps back and assists with monitoring the plan, thereby not providing direct services to the student. LBAs may also provide services to a school or division. For example, if the school division wanted to improve their implementation of functional behavior assessments, the LBA could be responsible for training staff, coaching, and monitoring. This could be true for a number of schoolwide or divisionwide initiatives.

ABA services can be provided in a variety of ways. ABA services may be provided by the school division as part of a student's IEP. They may also be provided by the school division as part of a programmatic or division-level initiative. Some students may receive ABA services privately outside of the school. It is important to remember that services provided in a school setting and those provided in other settings may be similar or different depending on the goals for the student.

### **Education vs. Clinical or Medical Models**

There are many types of professionals who provide services in a school setting who also provide services in other settings. Examples of this can include many of the related services personnel such as speech language pathologists, occupational therapists, physical therapists, orientation and mobility specialists, and assistive technology specialists, to name a few. What these professionals recommend in the school setting may be different in other settings. For example, a physical therapist working with a child who has limited mobility in the school setting is going to focus on what that child needs to do in order to navigate their school environment.

However, a private physical therapist may focus on many other areas with that same child that are important to other settings, such as the child's home. The use of behavior analysis is similar. LBAs supporting students in a school are going to focus on what that child needs in order to be successful in the school setting. LBAs working privately may focus on many other areas of need so the child can be successful in other environments.

The scope of practice for behavior analysts as a professional is potentially very broad. Generally, an individual practitioner's scope of competence is more specialized and clearly defined. Some behavior analysts work directly with individuals with disabilities and challenging behaviors while others work in corporate settings or even as personal trainers, for example. As previously mentioned, LBAs receive education and training in order to obtain their certification. While all LBAs are required to complete specified coursework and supervision experiences, the manner in which LBAs develop their specialized skills and knowledge in behavior analysis depends largely on the types of experiences they have. For example, some LBAs complete their required supervision in clinical or in-home settings using a more clinical or medical model, while others may complete their supervision in a public school setting or other community setting. The settings in which supervision is completed depends on many factors including, but not limited to, availability of a supervisor, areas of expertise, student preference, and availability of clients and/or sites. These supervisory experiences directly influence the scope of the LBA's competence and behavior analysts are ethically bound to practice within their scope of competence (Behavior Analyst Certification Board, 2014).

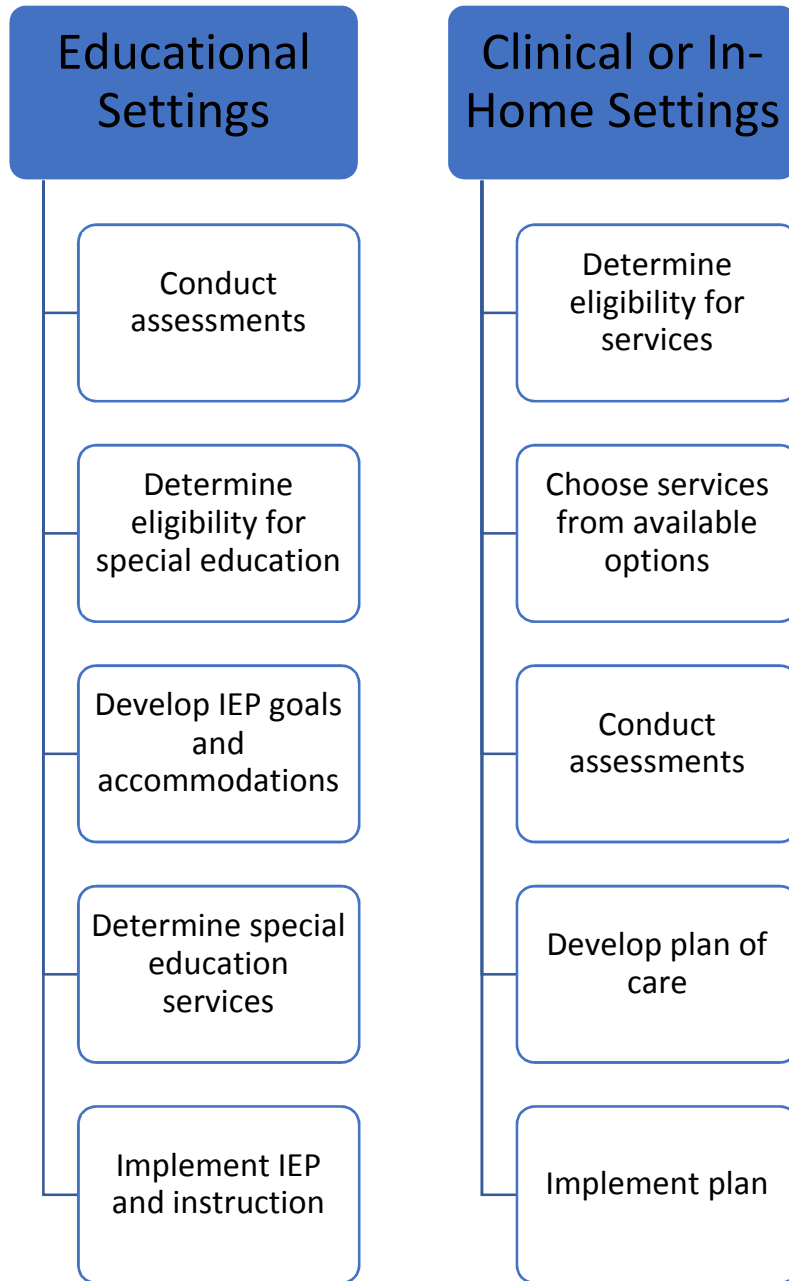
An educational setting varies in many ways from a home or clinic setting. First, even the means in which services are obtained is often different. In many home or clinic settings, the client and their family choose the types of services they want from what is available to them,



through insurance or other means, as well as what is available to them geographically. If a client and their family choose ABA services, they then meet with the LBA provider who will develop a plan of care for that client based on the client's needs in that setting, and what is covered by the funding agency, if there are regulations or policies. Additionally, it is important to note some insurance plans cover ABA services while others may not. It is best to contact individual insurance companies for more information about requirements and eligibility. Qualifying for insurance services often looks different from qualifying for special education services provided through the school division. For more information about qualifying for special education services, please contact your local school division.

Once a multidisciplinary team determines that the child is eligible to receive special education services from the educational setting, the IEP Team determines the appropriate goals and accommodations for a student. Afterwards, the Team decides on the services that are required in order for the student to make reasonable progress on the goals in the IEP and in order for the student to access a Free and Appropriate Public Education (FAPE). Figure 1 provides a visual depiction of the two processes.

**Figure 1**



In addition to how services are obtained, further differences often lie in targeted skills. For example, educational settings target academic goals associated with the state standards and

other goals that are required to ensure a student is successful in the educational environment. Private providers consider goals that target areas needed to ensure that individual is successful in the setting in which they serve the child. For example, for insurance to cover ABA services provided by a private provider, it must be considered medically necessary and the goals must target deficits associated with the disability or condition for which they are receiving services. In the case of a child with autism spectrum disorder (ASD), for example, the goals would have to target the deficits associated with the diagnostic criteria for ASD (Kornack, 2019). However, with students who have significant impairments or complex needs, there is potential overlap in some of these skills such as teaching communication skills.

Another factor to consider is that schools are very different environments from home or other settings. There are typically multiple students in a classroom. These students all have their own strengths and needs. If the student is served in a special education classroom, each student in that classroom will have an IEP that is developed to meet their individual needs. While the majority of students in general education settings do not have IEPs, it is common for some students in general education settings to have one. The majority of students with IEPs are served in the general education setting. The classroom setting has different distractions than at home or other settings too. It is not unusual for children to display some different behaviors in school and at home.

Additionally, there is a different structure in a classroom. Classrooms typically have rules and routines that may differ from home or other settings. For example, at home, children typically can use the restroom when needed, but at school, students may be required to ask permission before using the restroom. At school, children may need to raise their hands if they wish to comment on something whereas in other settings, this is typically not required. In

addition to rule differences, there are frequently schedule differences. At school, there is usually a set time for eating, playing, working, and other activities. At home, this schedule may not be as rigid and even if it is, it may not be exactly the same as the school schedule.

Finally, sometimes children will engage in certain behaviors in one setting but not in another. For example, a child may not eat at the table at home but may do so in the school setting. Conversely, a child may put their toys away at home but may not be willing to do so at school. Sometimes just being around peers can motivate a child to behave differently in school than at home, or being at home is a more comfortable setting for a child, so they behave differently at home than at school.

It is important for everyone to understand the strengths and constraints experienced in a school setting. It can aid in planning as well as support generalization. By understanding that what works at home may not work the same way at school and what works at school may not work the same way at home or in other settings, parents and professionals are better situated to create a more comprehensive plan that can support the child to be successful in all environments.

### **Requests for Services Outside of the IEP**

Ultimately, the school division is responsible for determining who may or may not enter the school building. School divisions maintain discretion regarding authorizing parents and/or other professionals not employed by the school board to observe active classrooms in which other students are present. The Virginia Constitution, Article 8, Section 7, vests school boards with supervisory authority over public schools. Responsibility for the supervision of the day-to-day management and operations of *Code of Virginia* (§ 22.1-293.B) of the school itself rests with the principal. This responsibility encompasses issues such as maintaining classroom environments that are free from disruption. Accordingly, principals maintain discretion in

determining how, when, and if individuals from outside the school division may interact in classrooms.<sup>1</sup>

The school division is responsible for services determined appropriate by teams established under state law. The IEP Team's responsibility is to vet the request to determine the impact to both the school and the individual student to determine if the service is required to provide FAPE. If the IEP Team determines a service is necessary for FAPE, it is the school division's responsibility to provide the service.

In some cases, students may receive private ABA services that are not included in the IEP as necessary for FAPE. In cases in which a doctor or other provider has determined medical necessity, this determination does not necessarily indicate that the school division must provide a place to provide the service. These services may be funded through private insurance, the parents, or other sources. Typically, these services do not address academic skills, but focus on communication, independent living, and challenging behaviors. In some instances, parents may schedule these services outside of the school day. In other cases, parents have opted to pull students out of school for these service appointments.

Parents may request to have some of these services provided during the school day, in the school building. This option offers some advantages and creates challenges. Providing services in the school can help with generalization of skills and assist with the alignment of treatment

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<sup>1</sup> The U.S. Department of Education (US ED), Office of Special Education and Rehabilitative Services (OSERS) has advised that "while the IDEA expects parents of children with disabilities to have an expanded role in the evaluation and educational placement of their children and be participants, along with school personnel, in developing, reviewing, and revising the IEPs for their children, neither the statute nor the regulations implementing the IDEA provide a general entitlement for parents of children with disabilities, or their professional representatives, to observe their children in any current classroom or proposed educational placement. The determination of who has access to classrooms may be addressed by State and/or local policy. However, VDOE encourages school district personnel and parents to work together in ways that meet the needs of both the parents and the school, including providing opportunities for parents to observe their children's classrooms and proposed placement options." (U.S. Department of Education, Office of Special Education Programs, *Letter to Mamas*, 42 IDELR 10; 104 LRP 45071 (May 26, 2004)).

plans, classroom strategies, and IEP goals. However, the inclusion of additional providers in a classroom may also be disruptive to the school day or other students and may affect the educational services the student receives.

If a request is made to receive services during the school day, in the school building, the school team may pursue a number of options. The school team may:

1. Convene an IEP meeting to determine whether services are required by the IEP. If services are deemed necessary by the IEP Team, the school division is required to provide those services in order to provide FAPE.
  - It is the discretion of the school division as to the professional who provides these services. If the school division employs an appropriate professional, they may use that individual. If not, the school division may follow its procedures for entering into a contract with an outside provider to provide the required services.
  - If the school team decides that the service is required to provide FAPE, the IEP must properly document the need for the service, the associated annual goals, and any other LEA responsibilities associated with these services.
  - The school may deny the request based on school division policy, and/or IEP Team considerations. IEP Teams may determine a service is not required for FAPE on an individual basis and reason(s) for denial should be addressed in the Prior Written Notice (PWN).
2. Allow an outside provider to work within the school building under the conditions set forth in a memorandum of understanding (MOU) or other agreement.
  - The school team (e.g., administrators) and providers may enter into a MOU or contract outlining the arrangement for the delivery of on-site services.

- The school, parents, and the provider should coordinate to address the variety of supports and services that the student may receive, guided by any school policy governing logistical considerations.
3. Deny the request based on school division policy and/or IEP Team considerations.
- IEP Teams, school administrators, and division leadership can account for the potential disruption of school operations. School divisions should ensure their policies regarding the delivery of non-FAPE services in their facilities are equitable and consistently implemented within schools.
  - Policies may also identify various parameters, such as (i) spaces within the school to provide services; (ii) required levels of supervision, if any, by school personnel; and (iii) any applicable rules or procedures to ensure that an educational program of high quality is established and continually maintained.

### **Section 3: Considerations regarding personnel who provide ABA in the Public Schools**

Educators want to support students to be successful. Educators have specific training and expertise in instruction and related areas to help students to be successful. However, education is a team endeavor. There are many people who bring different expertise to the school environment such as school psychologists, speech language pathologists, occupational therapists, orientation and mobility specialists, assistive technology specialists, among many others. There are also professionals who specialize in behavior and these behavior analysts can be invaluable if the student requires this type of support.

First, there are differences between LBAs who are school board employees and those who are private providers who are contracted to work with the school. Schools may consider the use of either or both depending on their needs and the availability of LBAs in their area.

#### **School Contracted LBAs**

If an LBA is a private provider who is contracted to work with the school division, there should be a contract in place that defines the role, scope, and duration of the professional relationship. For example, a private LBA may be hired to conduct a functional behavior assessment (FBA) and assist the team with developing a behavior intervention plan (BIP) but once that is done and staff have been trained on the BIP, the relationship between the school division and the private LBA may end. School divisions typically have policies and procedures for contracted workers. School divisions are encouraged to review these policies to ensure they meet their needs regarding private providers who are LBAs.



### **Privately Contract LBAs**

If a parent has privately contracted with a LBA to provide services to their child, the parent might request that some of those services be provided during the school day. This is not a request for the school division to provide the services. Ultimately, the school division has the authority to determine who enters school buildings and thus, it is recommended that the school division have policies in place, which may already exist, regarding visitors and professionals who are not employees of or contracted by the school division.

### **School Division Employed LBAs**

Alternatively, a school division may hire an LBA as a school division employee. In this case, the LBA is part of the school division and has an ongoing professional relationship with the school division.

### **Considerations**

Regardless of whether a school division is using their own LBAs, contracting with outside LBAs, or permitting an outside LBA who is not paid by the school system, it is important for these professionals to understand how school systems work and the legal, ethical, and practical implications of practicing ABA within a school system.

### **Role of the IEP Team**

If you are working with students who have been identified as having a disability and are receiving special education services, you know that student has an IEP Team. It is the responsibility of this team to design a specialized program that meets the unique needs of each student. The members of the IEP Team determine appropriate supports and services that will afford a student with a disability a free and appropriate public education. It is possible the team

determines the student requires supports and services provided by an LBA. These supports and services could be in the form of direct services, consultation to team members, or something else as determined by the IEP Team.

However, LBAs can also provide services in school divisions that are not student specific. For example, LBA could be part of a variety of division initiatives or may be hired to provide programmatic support rather than student specific supports. In this case, the LBA may not be part of a student's team and may not be reflected on an IEP.

Another possibility is that parents request the services of an LBA for their child. In this case, the IEP Team should convene to make a determination regarding the appropriateness of the request, as they would with any parent request for services. The process should follow applicable policies and regulations for IEP meetings, and the decision of the request should be documented. If a student is not receiving special education services, the administrator(s) may consider the request for the provision of ABA services by a private provider. However, the school board has the final say regarding allowing outside providers into the school setting and should follow their policies regarding visitors and/or outside providers.

If the parent is requesting a private LBA provides services or supports to a student during school hours, the school division should consider the following:

1. What is the purpose of the services being provided by the LBA?
2. Are the needs of the student being met through the current IEP?
3. Does the IEP Team need to convene to review the IEP?
4. What is the proposed duration and frequency of services provided in the school setting?

5. How will the provision of services by a private LBA in the school setting impact the student's typical instruction?

Regardless of the decision of the IEP Team, it is highly recommended that the discussion and decision be documented through prior written notice. If the IEP Team determines ABA is not appropriate or required for a student to receive FAPE, the school division can still permit the ABA services to be provided by the outside provider at the cost of the parent while coordinating services in the school or the school division can determine they will not permit the outside provider providing reasons for their decision.

### **What if the Team Disagrees?**

If a team disagrees about the provision of ABA services, the IEP Team should follow the same procedures they would about any disagreement during an IEP meeting. Options such as a facilitated IEP meeting, mediation or due process are available, as they would be for other disagreements between the school division and the parent. However, teams are highly encouraged to work together to try to resolve disagreements and support the student to receive FAPE. Strong communication regarding the needs of the student, current services and strategies to support the student, and assisting everyone to understand and be part of the decision-making process can aid in resolving disagreements early.

### **Policies**

It is recommended that school divisions review applicable policies on visitors and/or volunteers in the school division. School divisions may want to revise their policy to include the provision of services by private providers if they are not already part of the policy.

When reviewing the policies on allowing private providers to enter the school building, school divisions may want to consider the following:

- Does the existing policy cover outside, private providers?
- Does the school division require a memorandum of understanding (MOU), memorandum of agreement (MOA), or other contract with private providers prior to entering the schools?
- What training is required of private providers prior to entering the school?
- What requirements are in place to ensure confidentiality of all students is met?
- How does the school division inform the private provider about child abuse and neglect reporting requirements?
- Is there a process in place for how and to whom the private provider and/or the school division to report concerns or share information?

### **Concluding Thoughts for School Division Considerations**

Having outside providers in the school building can pose some challenges to school personnel but these individuals can also provide additional perspective and information. As school divisions are deciding how to appropriately support students, educators, outside providers, and parents need to remember to be student-focused.

## **Section 4: Financial Responsibilities of personnel not employed by the School who provide Services**

School divisions have the right and responsibility to set policies and procedures related to their hiring and retention of personnel. When it comes to outside providers providing ABA services, school divisions should follow policies and procedures already in place related to outside service providers.

### **Considerations for School Divisions**

If the school division permits an outside provider to provide ABA services within the school building, the school division should consider their financial responsibilities. If the outside provider is allowed to provide services in the school building, the school division should consider including in any agreement what, if any, payment would be made by the school division to the outside provider. If no payment is to be provided by the school division, the school division should document this. The school division will also want to consider existing policy related to liability or other potential costs to the school division. The school division may consider requiring an outside provider to keep their own liability insurance, for example. The school division may also want to specify the financial relationship should the outside provider become injured while on school premises.

Ultimately, it is a school division's decision as to what financial arrangement are or are not agreed to with an outside provider. However, it is recommended to consider this prior to the onset of services and to document either through a contract, MOU, or MOA.

## **Section 5: Developing Agreements between School Divisions, Providers, and Families**

School divisions who agree to permit outside providers into the school building for the purpose of providing ABA services should consider developing a written agreement or contract with the provider. Divisions may choose to document conditions under which the provider may provide services with the family as well.

### **Contracts, MOUs, MOAs**

Depending upon school division policy, it is recommended to have a contract, MOU, or MOA with private providers. This ensures everyone has the same understanding of the expectations of a private provider in the school setting. School divisions will likely want to confer with their school board attorneys in the development of such contracts. However, here are some general considerations school divisions may consider when developing a contract to be used with private ABA providers, which may include the LBA, LABA, or Registered Behavior Technicians (RBT).

- Allowable roles/responsibilities of the private provider
- Insurance requirements required of the private provider
- Training required of the private provider before entering the school and ongoing while providing services
- Maintaining confidentiality of all students
- Procedures for entering/exiting the school
- Procedures while in the school setting
- Point of contact for the private ABA provider to report concerns

- Potential reasons for restricting access to the school
- Conditions for terminating the contract

## **Training**

It is important for school divisions to recognize LBAs are trained in behavior analysis. It is possible they have additional training in education or other areas, but this is not a requirement to become a behavior analyst. Therefore, school divisions may consider requiring training of LBAs before permitting them to provide services in the school setting. This may include content in special education processes, child abuse and neglect reporting, collaborating with school teams, and/or processes and procedures of the school division.

## **Mental Health Parity and Addiction Equity Act**

The *Mental Health Parity and Addiction Equity Act of 2008* (MHPAEA) provides a level of equity for mental health and substance abuse services. Specifically, group health insurance providers cannot be more restrictive than medical benefits or provide less favorable limitations of benefits for mental health or substance abuse disorder than they do for medical benefits. While the law does limit the restrictions insurance companies impose on lifetime and annual dollar limits, it does not require insurance companies to provide benefits related to mental health or substance abuse disorder. These provisions also apply to the Medicaid and the Children's Health Insurance Program. To determine whether a child is eligible for such services under their health insurance, individuals are encouraged to contact their provider directly.

On September 5, 2019, the Department of Labor provided a frequently asked questions document that clarified ABA is an included service under the MHPAEA if the condition ABA is being used to address is covered. For example, ABA meets the criteria set forth as a treatment for

autism. If autism were a covered condition by the insurance company, ABA would be a covered benefit.

Services funded through insurance, such as ABA, should be provided in the child's natural environment if possible, and for most children, that includes school. It should be emphasized, however, that just because insurance companies cannot deny ABA services provided in the school as described herein, this does not require the school division to allow such services to be provided in the school building. The authority for who enters the school building lies with the school division and each division should follow their policies regarding outside providers and/or visitors.

Recall, if a child is found eligible for special education services under the *Individuals with Disabilities Education Act* (IDEA) and a service is required for a student to receive FAPE, then the onus of providing the service falls upon the school. Yet, an IEP Team may determine a service is not required for a child to receive FAPE. Regardless of the IEP Team's decision, the parent might decide to seek ABA services from a private provider on their own. In cases where the team agrees ABA is not required for FAPE but the parent requests ABA services be delivered by the outside provider in the school environment, the school division should follow its policies regarding outside providers and/or visitors in the building. The VDOE strongly encourages school divisions and parents to discuss the costs and benefits of the provision of ABA services during the school day and to document such conversations.

If the school division agrees to allow the provision of services during the school day, it is recommended that school divisions and providers develop a MOU that address the roles, responsibilities, and expectations of each party. The MOU should:

1. Clearly outline the goals being addressed through the LBA.



- a. Clarity of the outcomes, strategies, and responsibilities of the LBA will help ensure that the therapist is working within their scope of practice and competency. This clarity will also help to ensure that the lines between the responsibilities of the school team remain defined by the IEP and the role of the LBA are defined by the student's plan of care.
2. Develop the channels of communication between the agency providing services and the school team. Developing a line of communication means each person knows whom to notify in the event of questions or concerns. This line of communication should include how the LBA will communicate their questions or concerns to the school team and how the school team will communicate regarding questions or concerns related to the LBA. Some questions or concerns may be addressed between the teacher and some may require administrator support. Setting these expectations up front will help ensure that there are efficient channels for communication and help promote a student centered support team.

School teams should clarify the roles of each team member to the organization providing ABA services and vice versa. Issues related to scheduling, identifying a space, and how school staff will monitor/supervise the services will depend on the building administrator and division policy.

Providers should clarify the supervisory structure and requirements of their staff. Many providers may use Registered Behavior Technicians (RBT) to provide services in the school. The ABA provider should provide information to the school related to

the role of each of their employees and how these roles differ. For example, if a company is utilizing RBTs to provide a service, they must communicate to the school team that an LBA will be supervising the RBT(s) and that includes required observations on an ongoing basis, which will require access to the school building. If the RBT is providing direct services, communication channels should be clearly identified for this role as well so the school personnel and provider understand how, when, and to whom communication will occur.

3. Communicate the roles of each team member with the student and family. Clearly defining the responsibilities will help all team members understand the roles of other team members. For example, if an LBA is providing direct services to a student, their role is not to evaluate or coach the school team, unless specifically addressed in the plan and agreed upon by the school team. The reverse is also true.
4. Outline, as specifically as possible, the day to day expectations of the individual providing the service in the school. This may include sign-in procedures, the space in which they will provide services, timeframes for providing services, any supervisory requirements from school staff, how supervision will be provided by the private agency, and any other pertinent factors. It is critical that services provided during the school day are scheduled to allow the school to provide the educational services outlined in the student's IEP, and this responsibility should take priority. Even if the student is not receiving special education services, scheduling of services is still important in order to ensure students are not missing critical instruction.
5. Describe the importance and expectation of confidentiality of the student receiving services as well as other students the provider may encounter. Agreements between

service providers and schools should include a statement that all parties will abide by the requirements of the *Health Insurance Portability and Accountability Act* (HIPAA) and the *Family Educational Rights and Privacy Act* (FERPA).

Receiving additional services during the school day can result in the benefit of skill development in the student's natural environment, which can assist with generalization. Additionally, this could enhance teacher and provider communication to help ensure a level of continuity in interventions. There are impacts that teams must explore when considering the provision of ABA services during the school day. For example, teams must consider what activities or instruction may be missed while receiving services.

#### **Questions to Consider Regarding the Provision of ABA Services During the School Day**

1. Where will the session occur? What time of day?
2. What responsibilities does the school staff have during the sessions? Does a school employee need to supervise during the sessions?
3. What, if any, services, activities, opportunities will the student miss if provided the service during the school day?
4. How will communication occur between the service provider, teacher, school administration, and family?
5. How frequently will communication between the school team and provider occur?

## **Section 6: Utilizing LBAs Employed by the School Board to Provide ABA Services**

School divisions may consider hiring their own LBAs to provide ABA services and supports throughout the school division. LBAs have specialized knowledge and expertise in the area of behavior and can support a myriad of initiatives as well as varied populations within the division.

### **School Division Employed LBAs**

While there is a cost involved in this, there are many benefits of hiring an LBA to work in the division. First, the school division has an LBA to assist with cases across the division. Importantly, the LBA can participate in schoolwide and divisionwide initiatives where their expertise can facilitate systemic change that can have a larger impact for the division and their students. The LBA can assist in providing training and support to other staff members to improve behavioral supports in the division. Finally, having an LBA can open the door for growing additional LBAs in the division. LBAs who meet the criteria set forth by the BACB® are able to provide supervision experiences for others who wish to become an LBA and are taking the coursework to do so. Divisions may consider investing in growing their own LBAs as this provides additional expertise for the division, but it also leads to LBAs who have school experiences, understand the school division and how schools work, and can be effective change agents within the framework of a public school system.

Many divisions throughout Virginia have already seen multiple benefits of hiring LBAs to work in their division. Beyond the many roles a LBA can take, benefits of hiring a LBA to work in the division could include increased staff knowledge and expertise, improved teacher performance in evidence-based practices, reduced suspensions and expulsions, and reduced out

of division placements. LBAs are proficient in data collection and analysis, which can lead to better data-driven decision making as well. All of these factors could, in turn, reduce costs to divisions over time.

### **Concluding Thoughts**

Utilizing LBAs in a school division can have tremendous benefits. LBAs have specific knowledge and skills related to behavior and interventions. Including LBAs as part of school teams can build capacity in the division and reduce reliance on outside providers.

Whether a school division employee or a private provider is providing the supports and services, it is critical to ensure the student remains the center of the discussion and to ensure the student can receive FAPE. School divisions should also ensure strong communication with the family is a priority.

## **Section 7: Considerations for Private Providers Who Wish to Provide Services in Public Schools**

As a private provider, it is important to understand that schools are, first and foremost, institutes of learning. The chief function of a school is to provide students with an education. The *Code of Virginia* provides many regulations that must be followed by school personnel in order to ensure student safety and appropriate educational practices. In the case of students who have been identified as having a disability and receiving special education services, there are many additional federal and state regulations that school personnel are required to follow.

It is also important to remember that educators want their students to be successful. School divisions are ultimately responsible for the safety and education of all students. There are likely policies and procedures that providers will need to be familiar with and follow in order to have a successful working relationship with the school division.

As a private provider, here are some important considerations that will help you to be successful in working in a public school setting.

### **School Division Policies**

There are likely school division policies related to any non-school division employees who enter the school building including volunteers, parents, and private providers. It will be important for you to know what these policies are and to follow them. The school division has the authority as to whether outside providers are allowed in their buildings and under what conditions. When you begin your services in a public school, you will want to ask about policies related to your work. It is recommended you ask for the policies in writing so you can read them

carefully and ensure you understand them. You may even be asked to sign that you agree to the policies before you are allowed to enter the school building to provide services.

School division policies will vary by school division. School divisions may require you to complete specific training, provide proof of insurance, or sign forms such as a contract or confidentiality agreement. It is better to know about these requirements beforehand to ensure you comply with school division policies. These types of agreements not only protect the school division, but they protect you as well.

### **Understand Your Role**

As a private provider who is serving a specific student, your role is to serve that student. Behavior analysts are trained to observe and evaluate the environment and the teacher is part of that environment. However, it is not your role to evaluate the teacher or other educational staff. It is also not your role to provide recommendations about or provide services to other students. Understanding your role will go a long way in building a professional relationship with educators.

### **Scope of Practice**

Given the broad scope of practice that behavior analysts may have, it is likely that within an IEP Team, there will be overlap in scopes of practice between the behavior analyst, the classroom teacher, speech-language pathologists, occupational therapists, and other professionals. Depending on the role the behavior analyst serves in the division, they may be operating under multiple scopes of practice themselves. For example, speech language pathologists work under a single scope of practice provided by the American Speech-Language-Hearing Association. Behavior analysts may be subject to scopes of practice from national organizations (Behavior Analyst Certification Board), state licensures (Board of Medicine), and

other disciplines (psychology, education). Given these opportunities for misunderstanding of the role of the behavior analyst, it is important that the behavior analyst has a clearly defined scope of practice as well as defining their role and responsibilities to the team.

### **Many Factors Determine Instruction**

The IEP is the guiding document for educational programming for students receiving special education services. In a home or clinic setting, you may be responsible for a child's plan or you may work with a small team. In the school setting, students receiving special education services have an IEP Team. The IEP Team includes the student (when possible), the parent(s), a special education teacher, an administrator, a general education teacher, and may include others who have knowledge of the student such as related services personnel. This team will develop an IEP and assuming the parent consents to the IEP, that document will guide the educational team in their supports and services for an individual student. However, other factors guide instructional decisions. The Virginia Standards of Learning (SOLs) or Aligned Standards of Learning (ASOLs) are the required curriculum for all public education students in Virginia. Divisions may also have a prescribed scope and sequence of the SOLs or ASOLs that teachers are required to follow. Teachers have expertise in subject matter as well and may make decisions about instruction based on their content and instructional expertise.

### **Concluding Thoughts for Private Provider Considerations**

As a private provider, you likely have a wealth of knowledge and skills in your area of expertise. Depending on how you approach the working relationship with the school will impact on how well your knowledge and skills will be received. Understanding your role, including the boundaries of that role, and ensuring you stay student-focused while also understanding the



school environment, can help to create a last partnership with a school division that can be beneficial for you, the school, and most importantly, the student.

## **Section 8: Working Collaboratively**

One of the chief ingredients for success is successful collaboration. “Any project that encompasses different specialties or jurisdictions needs to coordinate activities to achieve the greatest effectiveness,” (Health Professions Network Nursing and Midwifery, 2010, p. 19). It is important for all the professionals and family members supporting a student to remember the student is the focus of the work. The following are important considerations for everyone working to support a student to be successful.

### **Understanding Roles and Responsibilities**

Everyone who supports a student has a specific role and responsibilities to that student. The parent(s) have a specific role and responsibilities just as the teacher, the speech language pathologist, and the private provider, if all these people are part of the team. It is important for everyone to know their own role and responsibilities and to understand each other’s roles and responsibilities. This can reduce confusion and misunderstandings in the future. In addition, by optimizing the skills of each individual, the team can be strengthened and produce better outcomes (Health Professions Network Nursing and Midwifery, 2010).

### **Communication**

Communication is the key to any successful collaboration. Defining the mode, frequency, and the content of the communication will help improve successful collaboration. It is particularly important to consider a chain of communication or assigning a key person for outside providers to contact. “Collaborative practice is effective when there are opportunities for shared decision-making and routine team meetings” (Health Professions Network Nursing and Midwifery, 2010, p. 29). By having frequent, clear communication, misunderstandings and

challenges that occur can be handled before they grow into large barriers and the student will benefit and be more successful.

### **Working through Challenges and Constraints**

Schools have challenges and constraints just like all environments. For example, if you take your child to the park and your child does not like the type of swings there, the park is constrained in that it only offers one or two types of swings. In the school setting, there are multiple children present, there are only so many hours in the school day, and the school building is only so big. However, educators typically work through challenges that exist in order to support student success. Now, more than ever before, educators are being asked to work through challenges and they are successfully developing new ideas and strategies that support students. At the heart of it, educators want students to be successful. Educators and private providers can work together to identify and resolve challenges and constraints that exist. Educators need to be open to new ideas and potentially new ways of doing things. Private providers need to understand there are multiple means to an end and not only be aware of challenges and constraints of educational settings, but also actively seek to understand them. With both groups of professionals working together, the student will benefit.

### **Ethical Practice**

It is important for educators to understand that LBAs are held to an ethical code. The BACB® has a [\*Professional and Ethical Compliance Code for Behavior Analysts\*](#). This code dictates the professional behavior of behavior analysts and covers many topics including service provision, responsibility to clients, responsibility to the profession, responsibility to colleagues, and other topics. LBAs must follow this code of ethics or there can be consequences applied that range in severity but, for significant infractions, could include loss of their credentials. While

educators may be familiar with ethical codes or even subscribe to one, there is no ethical code that is universally applied to all educators. Because of the ethical code for behavior analysts, LBAs must remember not only their responsibilities to their jobs, but to their profession as well.

### **Interprofessional Collaboration Competencies**

With the shared goal of improving outcomes for children and young adults, school teams and leadership may consider the Health Professions Network Nursing and Midwifery's Framework for Action on Interprofessional Education and Collaborative Practice and the Interprofessional Education Collaborative (IPEC) and engage in interprofessional practice (IPP) and interprofessional education (IPE). The Health Professions Network Nursing and Midwifery office is housed within the World Health Organization (WHO). Interprofessional practices are exemplified when multiple individuals from different professional backgrounds work together with students/clients, families and caregivers, and communities to deliver the highest quality of care. Interprofessional education is when individuals from multiple professions take on the role of student to learn from and with each other to enable effective collaboration and improve outcomes (Health Professions Network Nursing and Midwifery, 2010).

The Council for Exceptional Children (CEC) has outlined preparation standards for beginning and advanced special education professionals. These standards include elements of collaboration to promote the wellbeing of individuals with disabilities and their families by using culturally responsive practices and collaborative skills to promote understanding and build consensus. These standards are intended to improve programs, services, and outcomes for students (CEC, 2015). Specifically, the Standards from CEC suggest professionals "follow ethical and legal guidelines and work collaboratively with families and other professionals to conduct behavioral assessments for intervention and program development" (Standard 6, CEC,

2020). Additionally, CEC Standard 7: Collaborating with Team Members states: “Candidates apply team processes and communication strategies to collaborate in a culturally responsive manner with families, paraprofessionals, and other professionals within the school, other educational settings, and the community to plan programs and access services for individuals with exceptionalities and their families.”

The Interprofessional Education Collaborative (IPEC, 2016) outlines four interprofessional competency areas, which complement principles from the CEC as well as behavior analysis credentialing and licensing bodies. IPEC competencies are:

- Values/Ethics for Interprofessional Practice
- Roles/Responsibilities
- Interprofessional Communication
- Teams and Teamwork

By being familiar with these competencies and adhering to the guiding principles, teams can enhance their capacity beyond the skills sets of the individual members.

### **Values/Ethics for Interprofessional Practice**

This competency states “team members will work with individuals of other professions to maintain a climate of mutual respect and shared values” (IPEC, 2016, p. 10). This is accomplished by placing the interests of students/clients at the center of interprofessional care delivery and working in cooperation with those who receive care. Teams embrace diversity among clients and other professionals, use the knowledge of their own role, and respect the unique cultures, values, roles/responsibilities, and expertise of other professions and the impact these factors can have on outcomes.

## **Roles/Responsibilities**

This competency suggests professionals use the knowledge of their own role and the role of other professionals to both assess and address the needs of the student or client (IPEC, 2016). This includes being clear about one's roles and responsibilities to the interdisciplinary team. Additionally, this competency includes communicating with team members in order to clarify everyone's responsibility as it relates to the student and the plan. This competency addresses the need for professionals to recognize their own limitations in skills, knowledge, and abilities and engage in continuous professional and interprofessional development to improve the team's performance and foster better collaboration.

## **Interprofessional Communication**

The interprofessional communication competency outlines practices to communicate with patients, families, communities, and other professionals in a "responsive and responsible manner that supports a team approach" (IPEC, 2016, p. 10). This may include choosing communication tools and techniques that effectively ensure information is understandable. In addition, communication should avoid discipline-specific terminology when possible. Both education and behavior analysis have terminology that is unique to their fields but this should not become a barrier to collaboration. Communication also includes active listening and encouraging the ideas and opinions of others on the team.

## **Teams/Teamwork**

The final competency centers on teamwork. This competency addressed the need to utilize values that are relationship building. Additionally, teams should work to plan, implement, and monitor student-centered care and programs so they "are safe, timely, efficient, effective and equitable" (IPEC, 2016, p. 10). Members can demonstrate this competency by incorporating the

knowledge and experience of others, respecting student and community values and priorities, and share accountability in order to inform decisions (IPEC, 2016). It is important professionals prioritize their efforts to increase the effectiveness of the interprofessional teamwork in order to support students to be successful.

The benefits of interprofessional collaborative practice to clients is clear. It prevents redundancy, and/or conflicting treatments, and creates an environment that is centered on the student or client. When executed fully, interprofessional practice provides an environment in which each practitioner is fully valued for their expertise and has the opportunity to learn professionally from other individuals.

## **Conclusion**

This guidance document is intended to provide general guidance regarding House Bill No. 1722 and the *Code of Virginia* by adding a section; §22.1-273.4. The information included in this guidance document was gathered from a variety of sources and individuals practicing as educators, behavior analysts, or both. While this guidance document is intended to provide information and recommendations to support successful collaborations between educators, behavior analysts, and the families with whom they work, ultimately good communication and collaboration cannot be mandated. Thus, the VDOE encourages professionals and parents to remain student-focused and strive to work together.



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## **Appendix A**

### **Common Acronyms**

ABA - Applied Behavior Analysis

ASD - Autism Spectrum Disorder

BACB - Behavior Analyst Certification Board

BCaBA - Board Certified Assistant Behavior Analyst

BCBA - Board Certified Behavior Analyst

BCBA-D - Board Certified Behavior Analyst - Doctoral

BIP - Behavior Intervention Plan

BOE - Board of Education

FAPE - Free and Appropriate Public Education

FBA - Functional Behavior Assessment

H.B. - House Bill

IDEA - Individuals with Disabilities Education Act

IEP - Individualized Education Program

LABA - Licensed Assistant Behavior Analysts

LBA - Licensed Behavior Analyst

LEA - Local Education Agency

LRE - Least Restrictive Environment

MOA - Memorandum of Agreement

MOU - Memorandum of Understanding

RBT - Registered Behavior Technician

SOQ - Standards of Quality

VDOE - Virginia Department of Education

## **Appendix B**

### **Additional Resources**

Virginia Department of Education (VDOE) [\*Department of Special Education\*](#)

Virginia Department of Education (VDOE) [\*Guidelines for Educating Students with Autism Spectrum Disorder\*](#)

Virginia Department of Education (VDOE) [\*Models of Best Practice in the Education of Students with Autism Spectrum Disorders\*](#)

Virginia Department of Education (VDOE) [\*Speech Language Pathology Services in Schools: Guidelines for Best Practice\*](#) (2018)

Behavior Analyst Certification Board (BACB) [\*Website\*](#)

Council for Exceptional Children's (CEC) [\*Advanced Preparation Standards\*](#)

Interprofessional Education Collaborative (IPEC) [\*Core Competencies for Interprofessional Collaborative Practice\*](#)

Virginia Board of Medicine [\*Virginia Department of Health Professionals\*](#)