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**An Overview of the ABA Approach to Therapy**

**ABA Therapy**

Applied behavior analysis (ABA) is the scientific approach to understanding behavior and the functional relationship between variables in the individual’s environment and the targeted behavior. Data is collected and analyzed to assess the relationship between the environment and the behavior. Data is also collected to monitor progress throughout the course of therapy. The goal of ABA therapy is to target behaviors which are socially significant to the development and quality of life of each client. Therapy can include, but is not limited to targeting speech, language, school/academic readiness, social skills, play and behavior management. Treatment is individualized to the client’s strengths and work to decrease skill deficits. Research has indicated that intensive ABA therapy is very effective at reducing and replacing behaviors that interfere with learning and development. ABA utilizes behavioral contingencies to help clients learn functional skills to replace undesirable behaviors.

More information about ABA, including podcasts and resources to help families understand the field and treatment, can be found at [www.behaviorbabe.com](http://www.behaviorbabe.com) or <https://www.autismspeaks.org/applied-behavior-analysis-aba-0>

**Individualized Programming**

Because we recognize that each client is unique and special, we take seriously the need to individualize his/her behavior intervention plan. Our BCBA/BCaBAs continuously assess the client’s needs and utilize the most recent literature/research to support this individualized plan. Our staff (BCBAs, BCaBAs and RBTs) receive ongoing training and education to ensure we are educated in a wide range of ABA methods to meet the needs of all our clients.

**Assessments We May Conduct**

**FBA**

A Functional Behavior Assessment (FBA) is an assessment that is conducted to better understand the concern of the client/caregiver. An analyst will conduct an FBA to:

a. identify behaviors of concern in observable and measurable terms;

b. identify events/situations which predict the demonstration of target behaviors and;

c. identify what function those behaviors serve and determine alternative behaviors that can be taught.

In order to achieve this, the analyst will review records and reports, interview the client and/or caregiver, directly observe the client (in a variety of settings if appropriate) and collect and analyze data collected, develop hypotheses that describe the behavior, the situations in which they occur and the outcome, then recommend and implement interventions based upon research that supports the hypotheses. When the FBA does not produce a reliable hypothesis, additional analysis may be necessary.

**VB-MAPP**

Verbal Behavior Milestones Assessment and Placement Program (VB-MAPP) was created by Dr. Mark Sundberg as a means of assessing children with disabilities and other related diagnoses. The VB-MAPP is based upon B.F. Skinner’s analysis of verbal behavior, ABA research and developmental milestones. Children are assessed across five domains and the results provide baseline performance and a tool for curriculum planning and a direction for intervention. This assessment is developmentally balance across verbal operants and other skills while also allowing for an assessment of barriers to learning. Other features of this assessment allow for an evaluation of the level of inclusion or group instruction a child may need (based upon the transition assessment).

**ABLLS-R**

Dr. James Partington created The Assessment of Basic Language and Learning Skills – Revised, which is an assessment tool, curriculum guide and skills tracking system use to help guide language instruction and other critical learner skills for children with autism or other developmental disabilities. This criterion referenced assessment contains an outline of many skills necessary to learn and communicate successfully. This assessment also provides baseline performance and serves as a tool for curriculum and intervention planning.

**AFLS**

The Assessment of Functional Living Skills (AFLS) is an assessment, created by Dr. James Partington, which assesses individuals using a skills tracking system and curriculum guide for developing the essential skills for independent and functional living. This tool creates a baseline performance and offers a progressive track for the development of these essential skills. Skills targeted consist of those necessary for work, community and family settings and participation.

Other assessments may be used based upon the individual needs of the client.

**Behavior Intervention Plans**

Behavior Intervention Plan (BIP) is a plan of intervention created based upon the behavior analyst’s assessments and the existing literature. A behavior plan will address the client’s present baseline level of skill and outline specifically short- and long-term goals. These goals are reached via addressing behaviors to increase and behaviors to decrease. With each behavior we look to decrease, we will look to teach/increase at least one other skill that will fill the same function for the individual. Behavior plans are emphasized using reinforcement rather than the use of punishment-based procedures.

Each behavior intervention plan written is specifically tailored to the client’s goals, needs and strengths and weaknesses.

**Staffing**

Each client will have a Board Certified Behavior Analyst (BCBA) or Board Certified assistant Behavior Analyst (BCaBA) as the lead supervisor for his/her treatment. A Registered Behavior Technician (RBT) will provide direct (1:1) therapy in the clinic or school setting. All therapists are certified through the Behavior Analyst Certification Board.

**Parent Guidelines**

We recognize the importance of working with you toward the achievement of the goals for your child. We want to ensure that our communication is open so that we may continue to work toward these goals. Please communicate any questions, comments or concern you have at any time.

We request that families give us at least two weeks’ notice on significant changes in their plans for ABA therapy to help facilitate consistency in therapy. This notice will allow for fading and/or transitioning therapy.

Parents and therapists should be respectful and courteous to each other. Open communication between parents and therapists is essential to the establishment of a successful program for the child. If there are any problems or concerns, please contact the office (additional information available in the grievance section of this handbook).

Because it is always important that our attention be with the client, we request that all communication go through the office or staff email. We can always schedule a meeting to discuss questions/comments/concerns that are not appropriate for phone or email. In the event of an emergency, our office will notify us immediately. Communication with employees via personal cell phones or any social media outlet is not permitted.

We understand that there may be times when you would like to show your child’s therapist your appreciation; however, the board that oversees our certification prohibits our RBTs, BCaBAs, and BCBAs from accepting gifts.

Please understand that all information shared is HIPPA protected, it is essential that every ABA clinic employee respects and maintains each client’s right to confidentiality regarding his/her treatment and all personal information. All HIPPA laws apply.

**Service Agreement and Consent Form**

This packet contains information about our services and business policies. It also contains summary information about the Health Insurance Portability and Accountability Act (HIPAA), a federal law that provides new privacy protections and new client rights with regard to the use and disclosure of your Protected Health Information (PHI used for the purpose of treatment, payment, and health care operation). HIPAA requires that we provide you with a Notice of Privacy Practices (the Notice) for use and disclosure of PHI for treatment, payment and health care operations. The Notice, which is attached to this Agreement, explains HIPAA and its application to your personal health information in greater detail. The law requires we obtain your signature acknowledging we have provided you with this information. Although these documents are long and sometimes complex, it is very important you read them carefully and you ask questions regarding the procedures. When signing this document, it will also represent an agreement between our clients/caregivers and the ABA Clinic at Beyond the Spectrum. You may revoke this agreement in writing at any time. That revocation will be binding unless we have taken action in reliance on it; if there are obligations imposed by your health insurer to process or substantiate claims made under your policy; or if you have not satisfied any financial obligations. If you have any questions or concerns, please feel free to bring them to our attention.

**Services and Discharge**

The ABA Clinic at Beyond the Spectrum offers an individualized ABA program. To determine the program needed for each client, we initially complete an assessment to determine whether the client would benefit from our services. When it is determined that our services are needed, a BCBA will continue to work with you and develop a behavior plan based on the findings of the assessment and existing research.

The behavior plan includes general and specific goals with time frames for mastery; goals are reassessed every 6 months. The behavior plan is then implemented by the BCBA who supervises Registered Behavior Technicians on proper implementation of the treatment plan, data collection and ensures for fidelity. The behavior plan is ajusted as needed based upon client progress toward goals; decreasing criteria if too challenging or expanding goals which are found to be too easy. If, after adjusting the treatment plan and following the updated plan we may determine our services are not the proper treatment for the client. If such a determination is made, we will follow our discharge and referral protocol.

Once the client has attained the level of development similar to a typical developing child, the client will be put on a maintenance program until the BCBA determines services will no longer benefit the client. A sudden stop in services can be detrimental to skills acquired, as such, discharge from services is done over a long period of time to achieve a smooth transition for the student and family.

**To Protect the Client or Others from Harm**

If we have reason to suspect that a client or other minor is being abused, we are required to report this (and any additional information upon request) to the appropriate state agency. If we believe that a client is threatening serious harm to him/herself or others, we are required to take protective actions, which could include notifying the police, and intended victim, a minor's parents, or others who could provide protection, or seeking appropriate hospitalization.

**Confidentiality, Records, Release of Information and Professional Consultation**

Services are best provided in an atmosphere of trust; because of this, all services are confidential except to the extent that we are provided with written authorization to release specified information to specific individuals/agencies.

Behavior Analysts routinely consult about cases with other professionals. In doing so, we make every effort to avoid revealing the identity of our clients, and any consulting professionals are also required to refrain from disclosing any information we reveal. We will inform clients of these consultations. If you want us to talk with or release specific information to other professionals with whom you are working, you will need to sign an authorization specifying what information can be released and with whom it can be shared.

**Billing and Payment**

**Changing Fee Structure**

The fee structure for all services rendered through the ABA Clinic at Beyond the Spectrum is subject to change. Clients will be made aware of such modifications 30 calendar days prior to the effective day of any change.

We accept cash, check or credit card for payments. Invoices are billed monthly. Payment is expected by the end of the billed month. If payment cannot be made or you have any billing/payment questions, please contact Peggy Caruso at [peggy.caruso@beyondthespectrum.org](mailto:peggy.caruso@beyondthespectrum.org). A credit card must be on file before initiation of services (unless client has Medicaid).

**Professional Records**

You should be aware that, pursuant to HIPAA, we keep clients' Protected Health Information in one set of professional records. The Clinical Record includes information about reasons for seeking our professional services; the impact of any current or ongoing problerns or concerns; assessment, consultative, or therapeutic goals; progress towards those goals, a medical, developmental, educational, and social history; treatment history; any treatment records that we receive from other providers; reports of any professional consultations; billing records; releases; and any reports that have been sent to anyone, including statements for your insurance carrier. Personal notes are taken during supervision sessions by the Registered Behavior Technician and/or Behavior Analyst. While the contents of personal notes vary from client to client, most are anecdotal notes related to progress and future goals, reference to conversations, and hypotheses ofthe professional. These Personal Notes are kept separate from the Clinical Record are not available to you and cannot be sent to anyone else, including the insurance company. Your signature below waives all rights, now and in the future, to accessing these records in any form under any circumstances. Insurance companies cannot require your authorization as a condition of coverage nor penalize you in any way for your refusal to provide it.

**Patient’s Rights**

HIPAA provides you with several new or expanded rights with regard to your Clinical Record and disclosures of protected health information. These rights include requesting we amend your record; requesting restrictions on what information from your Clinical Record is disclosed to others; requesting an accounting of most disclosures of protected health information you have neither consented to nor authorized; determining the location to which protected information disclosures are sent; having any complaints made about our policies and procedures recorded in your records; and the right to a paper copy of this Agreement, the attached Notice form, and our privacy policies and procedures. We are happy to discuss any of these rights with you.

**Contacting Us**

Given their many professional commitments, our professionals are often not immediately available by telephone. If you need to leave a message, we will make every effort to return your call promptly (within 24-48 hours with the exception of holidays and weekends.). If you are difficult to reach, please leave your availability within the message. In emergency or crisis situations, please contact your physician, or call 911 and/or go to the nearest hospital emergency room.

Your signature(s) below indicates that you have read the information in this document and agree to be bound by its terms described above.