



THE ONTABA ANALYST

Newsletter of the Ontario Association for Behaviour Analysis

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#ONTABACON2020

Keynote Speakers (see page 9)



Dr. Stelios Georgiades



Dr. Marc Lanovaz



Dr. Linda LeBlanc



Dr. Janet Twyman



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FROM THE PRESIDENT'S DESK



Dear Members,

I hope this finds you all well and are enjoying the beautiful summer weather. The world continues to change rapidly since our spring newsletter. Most of Ontario has now entered Phase 3 of reopening. Many members who provide clinical services have had to once again adapt their service models in order to comply with reopening guidelines.

Throughout the restrictions and stressors of the pandemic, I am continuously impressed by peoples' resilience and innovation. Taking time to reflect on successes is especially important during this unprecedented time. After all, "we are not working from home/clinic, we are at home/clinic during a pandemic trying to work."

Sincere thanks to the board, members, and volunteers that have persevered to make several very important initiatives possible over the past few months. I will highlight a few here.

Townhall

On July 10, 2020 we held a virtual town hall for members to discuss questions and challenges they are currently facing. Panelists included three ABA centre directors: Shiri Bartman, Nancy Marchese, and Carobeth Zorzos, along with Dr. Rosemary Condillac. More than 100 members were in attendance who were subsequently polled; 100% indicated that that they would attend a follow up town hall for updates in the future, and 98% said that they found the webinar to be helpful. We would like to take this opportunity to thank all of the panelists for volunteering their time and expertise, especially during these already demanding times. We would also like to thank the members who joined us. We will keep you posted about any follow up sessions. The recording is also available on the member-only side of the website (Resources -> Town Halls).

Anti-Racism Strategy

Celebrated in June were Indigenous History Month, Pride Month, and National Accessibility Week (May 31-June 6). Layered upon the global pandemic has been a long overdue anti-racism awakening which prompted many discussions amongst the board with respect to racism, oppression, privilege, diversity and most importantly, how we can meaningfully combat systemic racism and diversify our organization. We started the conversation in a statement (sent on June 30, 2020 via email). We are committed to continuing the conversation and following through on the commitments we made in that statement, some of which are already underway. For example, we are thrilled to have had 21 members volunteer for the Black, Indigenous & People of Colour (BIPOC) working group in response to our email on July 24. We appreciate that this is only the beginning of many conversations and we are open to receiving feedback from members as to how we can continually evolve and improve as an organization.

Webinars in Collaboration with Autism Ontario

In May, June, and July we hosted several free webinars thanks to generous support and collaboration with Autism Ontario. Sincere thanks to the presenters of the caregiver series: Dr. Joan Broto, Dr. Carly Eby, Harley Lang, Dawn Marciello, Michau Van Speyk, and Janice Theodoropoulos. The caregiver series can be accessed on demand [here](#).

Nancy Marchese and I also delivered a webinar for professionals titled, "Putting Clients and Families First: Compassionate Care and High-Quality Supervision During COVID-19." Members can still obtain a free 1.0 BACB Supervision CEU from accessing the webinar on demand [here](#). The cost of CEUs for non-members is \$10 and can be paid by contacting contact@ontaba.org. The webinars will be available on the Autism Ontario (AO) webinar platform until the end of August, and will then be transferred to the AO resources pages: www.autismontario.com. The legal issues webinars are also available on demand on the AO website: [here](#)

National Autism Strategy

Nancy Marchese and I had a productive discussion with the Canadian Autism Spectrum Disorder Alliance (CASDA) regarding the National Autism Strategy and the importance of national accessibility to evidence-based intervention (e.g., ABA). Anyone who is interested in potentially getting involved in the discussion should contact us at contact@ontaba.org.

Continued Growth of the Field in Ontario

On July 21, Dawn Marciello and I attended the Association for Professional Behavior Analysts (APBA) Affiliate Chapter session led by Dr. Gina Green and Seth Walker. Part of the discussion involved growth in the field. Figure 1 includes the most up to date numbers for BACB certificants in Ontario (current total = 1490 across certification levels).

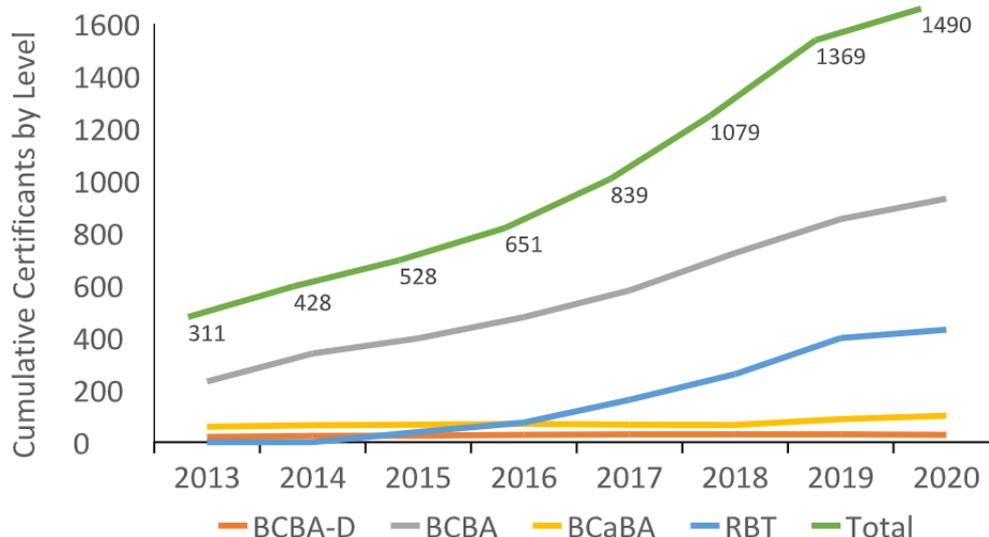


Figure 1. Cumulative BACB Certificants by Level in Ontario from 2013-2020.

Strategic Plan

In the spring newsletter we mentioned the new strategic objectives for the organization. The summary version of our strategic plan is now available on the [website](#).

Conference Planning

Our conference chair, Jacqueline Gigan, vice-chair Karl Gunnarsson, and board members have been hard at work revisioning the conference plan for this year. We are very pleased to be offering an online-only conference on Friday, December 11 and Saturday, December 12. We hope that by holding one of the days on a weekend, it will allow more people to attend. The board and conference committee have been discussing many options and we are committed to delivering a high-quality event. Keep an eye out for more exciting updates regarding interesting conference innovations this year. If you have your own innovative suggestions, please email us at contact@ontaba.org.

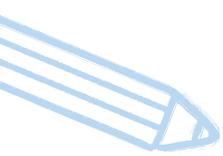
Training Project Update

Last but not least, we are thrilled to release the first phase of resources for behaviour analysts, other professionals, and community members. A super thanks to project technical lead, Dr. Julie Koudys, admin lead, Dr. Rosemary Condillac, admin support, Brandy Sokoloski and dedicated working group members: Melissa Legree, Tracey Lindblad, Dr. Adrienne Perry, and contributors: Lesley Barreira, Louis Busch, Natalie Paquet, Joey Robertston, and Angeline Savard. We are very excited that these resources will be housed on a separate part of our website. See more details in the MCCSS PROJECT UPDATE section on p. 12 and don't forget to please check out the excellent resources [here](#).

Wishing everyone a safe and healthy summer!



Kendra Johnson



COMMITTEE UPDATES



Advocacy & Communications Committee

The Advocacy and Communications Committee has been busy over the last few months and has led numerous projects. Over spring and early summer, our committee held weekly Zoom social hours as the Pandemic progressed. These events provided behaviour analysts a space to be able to meet online, share experiences, take part in fun activities, and access a safe space to discuss challenges. Additionally, the Advocacy and Communications Committee ran a social media campaign called "ONTABA Community Cares". This campaign involved recognizing the contributions of Direct Support Professionals/Frontline workers for their outstanding contributions during these challenging times. Recently, ONTABA also launched an Instagram page! Check us out @ontaba1 on Instagram! We are also proud to have recently started to form a Black, Indigenous, and Persons of Colour (BIPOC) working group. We are very excited to see how this group will develop! We continue to seek feedback from ONTABA members and would love to hear from you about more ideas for campaigns, initiatives, etc. that we could begin.

Membership & Member Services Committee

The Membership & Member Services committee is working hard to meet the needs of our community. Currently, we are working on developing an updated reading list for ONTABA's website. Keep your eyes peeled for new articles and papers.

Organizational Development Committee

The Organizational Development Committee has outlined their initiatives over the next few months. Primarily, we are collecting data from other committees within the organization to determine areas of strength and areas for growth. Additionally, we have begun to collaborate with other committees to begin the process of identifying speakers and guests for additional board training. We are also working on the internal organization of our board documents on our online server. The ODC is also aiming to work alongside our new associate management company to determine areas in which they can assist in supporting the further growth of the organization as a whole.

Governance Committee

The Governance Committee is eagerly preparing to send out nomination information to our members for next year's Board positions. Please keep an eye on your emails for more information in August and September!

Education & Advancement Committee

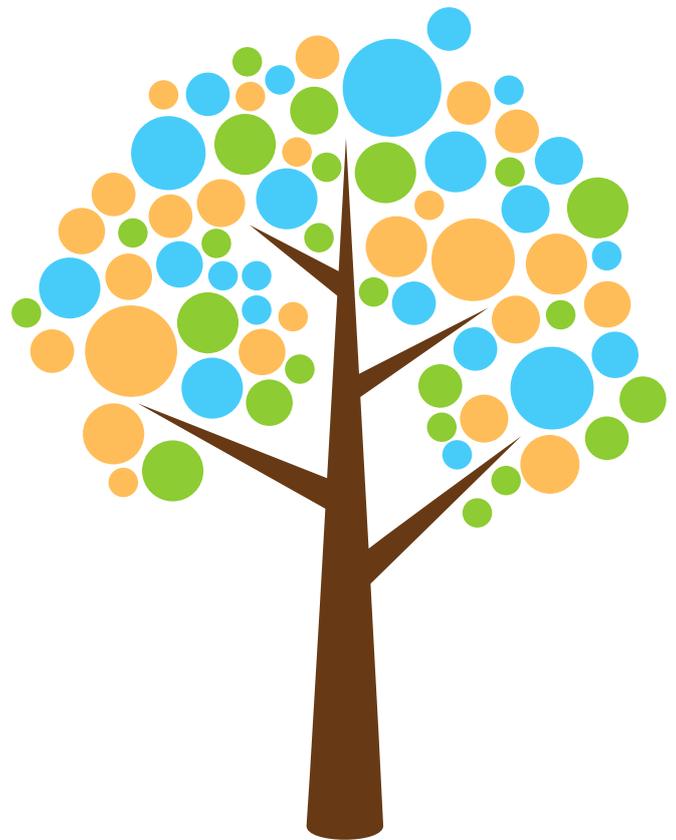
The Education and Advancement Committee had our first committee meeting on May 25th, 2020 with many returning (from the previous Professional Regulation Committee, Jurisprudence Committee, and Education Task Force) and new committee members. Our committee will be working closely with other ONTABA committees this year, especially in the planning and delivery of educational and CEU opportunities for members and non-members. We have several projects in our work plan and will share any updates as they become available. We are also excited to be releasing an ABA in Schools White Paper in the near future, please monitor your email, ONTABA communications, and social media for more information.

Conference & Events Committee

The ONTABA Conference & Events committee is excited to announce our keynote speakers for our annual conference scheduled on December 11th & 12th, 2020. This year we will be hosting the following keynote speakers: Dr. Marc Lanovaz, Dr. Linda LeBlanc, Dr. Stelios Georgiades, and Dr. Janet Twyman. Please stay updated with membership announcements, emails, and social media pages for upcoming information about the conference.

Professional Affairs/ Practice Committee

The Professional Affairs & Practice Committee has been working on how best to support our members in their professional practice. Some practice areas that are particularly salient at this time include practicing ABA through telehealth and preparing for a return to in-person services following pandemic-related restrictions. We are working with other committees to plan professional development opportunities throughout the Summer and Fall. Stay tuned for more info about these offerings!



MEMBERSHIP BENEFITS

Corporate Discounts available to ONTABA Members!

- Discounted auto, travel, and health insurance through **Johnson Insurance**
<https://www.johnson.ca/>
- Discounted **CAA Corporate Membership** <https://www.caa.ca/>
- Special Professional Liability Insurance Program through **McFarlan Rowlands Insurance Brokers Inc.** (cheaper than ABAI and local competitors!) <https://mcfarlanrowlands.com/>
- Access to **GoodLife Fitness** Corporate Membership rates (up to 39% off regular rates)
<https://www.goodlifefitness.com/>
- Discounts on electronics from **Dell and Lenovo** <https://www.dell.com/en-ca/>
<https://www.lenovo.com/ca/en/>
- Access to ONTABAs organizational **Perkopolis** account, member discount program (entertainment, shopping, hotels, travel)-savings on multitude of services, products and events
<https://www.perkopolis.com/>
- Discounted tickets from **Broadway Across Canada** <https://www.broadwayacrosscanada.ca/>
- Discount for the 5-Week BACB Exam Prep Workshop offered by **Pass The Big ABA Exam**
<https://passthebigabaexam.com/>

Networking & Continuing Education/ Professional Development Opportunities!

- Annual ONTABA Conference- including a discounted price for members
- Reduced ABA International Membership and conferences
- Access to job postings exclusively on the ONTABA website
- Access to the Journal of Applied Behaviour Analysis (JABA) and Journal of Experimental Analysis of Behaviour (JEAB)
- Discount to ONTABAs Evening of Behaviour Analysis
- Discount for the CBA Learning Module Series offered by Behavior Development Solutions to study for the BACB exam!

#ONTABACON2020 KEYNOTE SPEAKERS

Stelios Georgiades, Ph.D., Associate Professor, Psychiatry & Behavioural Neurosciences



Is an Associate Professor in the Department of Psychiatry and Behavioural Neurosciences and a Scientist at the Offord Centre for Child Studies at McMaster University. His program of research investigates the factors influencing developmental trajectories of children and youth on the autism spectrum. The overarching objective of this research is to generate new knowledge that will lead to more precise, evidence-based diagnostics and interventions for Autism Spectrum Disorder (ASD). Dr. Georgiades is the Founder and Co-Director of the McMaster Autism Research Team (MacART), an interdisciplinary collaborative aiming to advance autism care through meaningful research. This includes the Pediatric Autism Research Cohort (PARC) Project, which is bridging the research-to-practice gap by embedding a research protocol within the ASD services clinic at McMaster Children's Hospital. Dr. Georgiades is Co-lead for the McMaster site for the Pathways in ASD study, a Canada-wide longitudinal study of children and youth with ASD – the largest of its kind, and the largest longitudinal ASD study to date. He is also a Co-Principal Investigator for the Province of Ontario Neurodevelopmental (POND) Network, a provincial research program working on improving outcomes for children with neurodevelopmental disorders.

Marc Lanovaz, Ph. D., BCBA-D

Dr. Lanovaz's laboratory work involves the use of machine learning to improve clinical decision-making as well as the development of mobile and web applications to facilitate the delivery of health and education services. Currently, his main research interests are: (a) Develop and evaluate machine learning models to improve clinical decision making; (b) Develop and evaluate web and mobile applications to facilitate the implementation of assessments and treatments by parents as well as health and education professionals; (c) Detect and measure verbal and non-verbal behaviours in the context of practice using artificial intelligence; (d) Use data mining to analyze the behaviour of patients, parents and professionals.



Linda A. LeBlanc, Ph.D., BCBA-D, Licensed Psychologist

Is the president of LeBlanc Behavioural Consulting. She previously served as a professor at Claremont McKenna College, Western Michigan University, and Auburn University and as the executive director of Trumpet Behavioural Health. She has published more than 100 articles and book chapters on topics such as behavioural treatment of autism, technology-based behavioural interventions, behavioural gerontology, and systems development in human services. Dr. LeBlanc is an associate editor of Behaviour Analysis in Practice and the literature review editor of Education and Treatment of Children. She has previously served as an associate editor of The Analysis of Verbal Behaviour and the Journal of Applied Behaviour Analysis. She is the 2016 recipient of the American Psychological Association Nathan H. Azrin Award for Distinguished Contribution in Applied Behavior Analysis.



Janet Twyman, Ph.D., BCBA-D

Janet Twyman received her Ph.D. from Columbia University. She currently holds the positions of Associate Professor of Pediatrics at the University of Massachusetts Medical School, and Director of Innovation and Technology for the Center on Innovations in Learning, having served previously as Vice President of Instructional Development, Research, and Implementation for Headsprout. Dr. Twyman is widely recognized as an authority on instructional design, fully informed by behavior analytic research and conceptualization. Her leadership contributions at Headsprout were pivotal in managing a project of more than \$6 million, which reached more than a million children with effective reading instruction. Similarly impressive were her contributions and her leadership at the Fred S. Keller School, where she served as executive director for eight years, arranging a behavioral approach to every aspect of the school's functioning and inspiring many students, staff members, and parents in doing so. Dr. Twyman has also provided significant service to the field, with leadership roles within the Cambridge Center for Behavioral Research and for ABAI, where she served as president, Executive Council member, and chair of several important boards and task forces.



INTRODUCING 'CEUHelper'

ONTABA has been introducing CEUHelper to our events thus far in 2020. The purpose of introducing CEUHelper is to ensure more efficient and secure collection of CEUs for our members. Moving forward, we are phasing out paper CEU collection and embracing CEUHelper!



We encourage all members to take the following steps to ensure their CEUHelper account is up and running for future events including this year's Annual ONTABA Conference.

Creating your CEUHelper Account

1. Download the CEUHelper app
2. Create your account
3. Input your BACB certification number under "Certifications" -> this will allow CEU helper to correctly create your CEU certificates

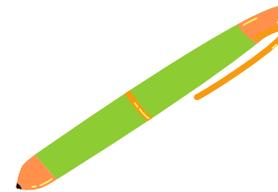
Collecting CEUs via CEUHelper

1. Find correct "conference" and click "Join Conference"
2. Tap "Browse & Check In"
3. Find event that you want to check into and click on it
4. Tap "Tap Here to Check In"
5. Tap "QR Code"
6. Scan QR code provided by event organizer **no later than 10 minutes past the start of the event**
7. Scan QR code at the end of the event to check out **no earlier than 5 minutes prior to the end of the event** *Please note: any check out scans done earlier than the 5-minute mark will unfortunately not result in CEUs*
8. Repeats steps 6-10 for all events that you will be attending for that conference
9. Tap "Leave Conference", confirm that you are done collecting CEUs, then tap "Tap to Finish". *Please ensure you are done collecting CEUs for the conference before going through this last step, as this will check you out of the entire conference*

We encourage members to retain these instructions for future ONTABA events including the annual ONTABA Conference.

Jurisprudence Educational Material

Ministry of Community Children and Social Services (MCCSS) Project Update



The ONTABA Board of Directors and the Jurisprudence Working Group are pleased to announce the upcoming release of ONTABA's **Jurisprudence and Ethics Knowledge and Competency Standards for Ontario Behaviour Analysts ("JE Standards")** and associated **Key Resources for ethical and professional practice in ABA.**

- The JE Standards have been approved by the Board and are in effect as of August 2020.
- The JE Standards are not designed to replace the Behavior Analyst Certification Board's Professional and Ethical Compliance Code (*see the full code here: https://www.bacb.com/wp-content/uploads/2020/05/BACB-Compliance-Code-english_190318.pdf*).
- Rather, the JE Standards serve as an accompaniment to the Compliance Code as behaviour analysts are required to know and comply with applicable legislation, regulations, program requirements and policy directives of municipal, provincial, and federal authorities.
- The purpose of the JE Standards are to outline the knowledge and competency standards pertaining to jurisprudence and ethics requirements for behaviour analysts in Ontario.

The Key Resources have been created for three stakeholder groups:

- (a) behaviour analysts
- (b) consumers of behaviour analytic services
- (c) other professionals and educators with whom behaviour analysts interact.

These resources are designed to provide easily accessible information related to ethical and professional practice, as well as legislation relevant to the practice of behaviour analysis in Ontario. Resources are available free of charge, in both English and French.

Check them out at <http://training.ontaba.org/> -> ONTABA's new webpage dedicated to training and educational resources!

SPOTLIGHT ON:

Providing ABA Services Through Telehealth

By **Raluca Nuta**,
Treasurer, ONTABA



Throughout these uncertain times, many ABA providers have taken to telehealth in an attempt to continue providing excellent ABA services to their clients. See what a few providers have to say about their experience with this new method of service delivery.

Interviewees:

Rebecca Long, BCBA - Self Employed, GTA, ON

Angeline Savard, BCBA & Catherine McConnell, BCBA - Kalyana Support Systems, Brantford, ON

Joan Broto, BCBA-D & Carobeth Zorzos, C. Psych., BCBA - Launch Behavioural Health, Toronto, ON

Jessica Cauchi, BCBA - Atlas Behaviour Consultation, Oakville, ON

What types of services does your agency provide?

RL: I am a self-employed BCBA working alongside another BCBA and a few clinical supervisors. We provide in-home/community ABA therapy within the GTA (mostly in the Peel, Halton, and Guelph Regions). Although we work with children/youth with a primary diagnosis of Autism Spectrum Disorder (ASD) of all ages,; most of our clients are between the ages of 3-10. We work with clients that pay out of pocket as well as clients that receive government funding through the Ontario Autism Program (OAP).

AS & CM: Our organization offers a day school for individuals with learning disabilities and communication disorders. Our clinic offers comprehensive ABA programming for individuals age 12 months to 13 yrs as well as targeted interventions such as sleep intervention and parent training.

JB & CZ: We provide focused and comprehensive ABA services, psychological and diagnostic assessments, parent coaching, speech and language therapy, and social skills groups.

Was your agency providing services through telehealth prior to the Covid 19 pandemic? If yes, what types of services were you providing?

RL: Prior to COVID-19, I was employed by a different agency. [...] With consent from my previous employer I was luckily able to offer remote services to the clients that had requested telehealth services and wanted to continue working with me. Prior to COVID-19, I've completed intakes and parent consultations over the phone, so I didn't really offer any in-depth telehealth services.

AS & CM: We provided telehealth services on a limited basis, specific to our sleep intervention programs.

JB & CZ: We provided some parent coaching and ABA supervision via telehealth, although it was limited.

What ethical considerations were most salient for your agency in setting up telehealth service delivery?

RL: Informed consent- It was important clients understood the risks and benefits of telehealth as well as the similarities and differences to in-person service before agreeing to participate in telehealth services.

AS & CM: Our primary consideration was our responsibility to ensure that clients have ongoing access to services. Decision making surrounding our chosen platform was based on the necessity to ensure client confidentiality was maintained. Also, ethical service delivery was a salient concern, ensuring that services offered via this platform would be socially valid and could be delivered in a manner that could ensure client gains.

JB & CZ: Ensuring our services fit the needs of our clients and delivering telehealth services effectively. We relied on the CASP's Practice Parameters for Telehealth Implementation of Applied Behavior Analysis (2020) to help us develop our own service eligibility criteria for the different services we are offering online. Thankfully we use an online data charting system and this helps us determine whether our services are effective for our individual clients on a day-to-day basis.

JC: Client confidentiality/adherence to PHIPPA and clinical appropriateness

“*Our primary consideration was our responsibility to ensure that clients have ongoing access to services.*”

What types of services did you provide/are you providing using telehealth currently?

RL: BCBA supervision, clinical supervision to instructor therapist, parent training, and indirect services (e.g., program writing, data analysis, etc.)

AS & CM: We provide direct service to a number of clients. We provide parent training in the implementation of Direct Instruction programming, DTT, and sleep intervention programs as well training specific to challenging behaviour.

JB & CZ: 1 to 1 ABA therapy, and language and academic program with a focus on Direct Instruction.

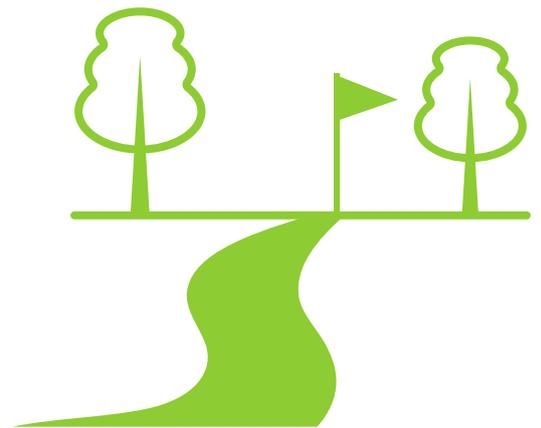
What was one of the biggest challenges you encountered in setting up/delivering services through telehealth?

RL: Confidentiality - a lot of the families I work with are not aware of and/or do not maintain confidentiality on insecure methods of communication (e.g., e-mail). This is something I explain at the onset of services and as needed throughout services. However, I have difficulty navigating such situations when a family chooses to discuss confidential information (e.g., child's name, photos/videos of the child) on an insecure platform.

AS & CM: Ensuring that the provision of telehealth services would be ethical for individual clients presented one challenge. Our model of service delivery was altered drastically and varied significantly across clients. Session length was altered based on differences in the individual client's ability to attend. Programming was modified to incorporate instructional targets that were feasible to deliver via a telehealth platform. For services delivered via the parent training model, the program was less varied and often selected based on parental skills and priorities in addition to child need.

JB & CZ: Developing intake procedures, eligibility criteria, and determining the format of various types of services we offer. For our academic and language program specifically, determining the cost and the amount of preparation required was also a challenge.

JC: It's not clinically appropriate for most of our clients, and for those that it is appropriate, session length and frequency is greatly reduced. Additionally, we are requiring a parent be present throughout the session (at the start at least) to assist with prompting and instructional control development which is a challenge for parent time/schedule demands as well.



What was one of your best successes with this model?

RL: I've had more contact with some families on my caseload through multiple modalities (recordings, telephone calls, video conferences, e-mail, etc.) As I do not have a full caseload, I have a lot more time to focus on indirect work such as data analysis and program writing.

AS & CM: We were excited about the opportunities provided to parents to participate in their child's program in a manner they might not otherwise have experienced. For instance, we have coached several families in program implementation. For many of them, this has translated into a better understanding of how their child learns.

JB & CZ: Our 1 to 1 sessions have been successful with both our older and younger learners. With our older learners, the focus has been on developing foundational skills in reading and math using direct instruction curricula. We've received good feedback from both parents and our clients, they all really like going through their own charts and see how well they're doing! With our younger learners, we have also been successful incorporating fun activities throughout and parent involvement in the sessions.

JC: An online safety skills small group and parent training program!

What do you consider to be the most important benefits of telehealth service delivery?

RL: Open communication with clients. No matter the topic (client progress, confidentiality, program planning, etc.) it's important that the team is kept up to date with how telehealth services are going throughout the pandemic. As we do not have a predicted date in which in-person services will resume it's important that the team is kept up to date changes to programming, how telehealth services are going for the family, and ensuring that there is clinical significance to continue.

AS & CM: The most obvious benefit was the ability to provide some level of service to many of our clients, ensuring the maintenance of skills and/or the acquisition of new skills. Another important benefit was the opportunity to stay connected with families and provide encouragement and reinforcement to parents.

JB & CZ: Continuation of services during a time when we were not able to deliver direct services, delivery of services in rural and remote areas with minimal service options, and opportunities for parents to play an active role in treatment.

JC: Continuation of delivery of services, involvement of parents. Mirroring school delivery model

What do you consider to be the biggest drawbacks to this model?

RL: The unpredictability of when in-person services can resume and ensuring that all members of the team maintain confidentiality on insecure platforms.

AS & CM: We found there to be significant challenges and limitations in our ability to provide service to students without previously established learning readiness behaviours or with significant challenging behaviours. We offered a parent training model to many of these families; however, parents were not always able to participate due to environmental limitations.

JB & CZ: We were not able to provide services at the same level of intensity with some of our clients and had to revise some goals based on availability of materials or appropriateness with the online format. For example, some of our clients were receiving 20 hours of services and we were not able to deliver the same number of hours online. Also, some of our clients did not have the prerequisite skills to participate in online sessions, although in these situations we offered parent coaching as an alternative.

JC: Difficult to establish instructional control, not appropriate for many learners, not appropriate for many types of programming.

Will your agency continue to offer services through telehealth in the future?

RL: Some components of telehealth services I for sure will, but I'm eager to resume in-person services when it is safe to do so. The telehealth services I offer will likely be dependent of each client and what is clinically significant.

AS & CM: Yes. We will continue to use telehealth when running sleep intervention programs. In addition, we have found this to be a useful way to support clients residing outside of our catchment area on a more regular basis. We have also identified this as a useful tool for conducting regular and effective parent training in the home environment.

JB & CZ: Yes, given the feedback we have received, we will continue to offer online services and likely expand these to include other services.

JC: Yes



WHAT WOULD YOU DO?

Dr. Rosemary Condillac, C. Psych, BCBA

Associate Professor, Applied Disability Studies, Brock University

Welcome to the "What Would You Do?" column on ethical and professional dilemmas in ABA. Please submit your questions, issues, dilemmas or tricky situations to contact@ontaba.org. My responses are my own, and are not intended to represent the Behavior Analysis Certification Board (BACB®), ONTABA, or any other organization with whom I am affiliated. Responses should not be taken as specific legal or professional advice as it is not possible to have or provide enough information in a column of this nature.

Since my last column we have moved from the peak of the COVID-19 pandemic in Ontario to Phase 2 re-opening. There are many valid questions and concerns from behaviour analysts, families, service recipients, organizations, and ABA service delivery agencies. While I wish I could give you reliable answers to all of these questions, there are few answers that aren't changing moment-to-moment, situation by situation, and community by community. I am instead providing a list of considerations to help guide your decision-making.

**Have a Question
or Topic for
What Would You Do?**

**Send it to Us!
contact@ontaba.org**

1. Federal, Provincial, and Public Health Directives:

The first thing to consider is the current state of requirements with respect to safe service delivery. Safety of our clients, their families, our teams and ourselves needs to guide decision making. This information is changing quickly and may be different across different parts of the province, and different service sectors depending on the current rate of new cases, outbreaks, etc. If you are getting advice from colleagues, on-line forums, or chats, please be mindful of the locale of those giving advice.

2. Ability to follow Directives given client needs:

With the safety of all involved being paramount, it is important to consider whether or not you can implement the required safety guidelines and directives with your clients. It is difficult to balance the need for service, especially for some clients with higher needs, while managing the necessary safety protocols. Carefully consider and document your decisions to provide in person support (or not) to each client who you were previously serving. Some behaviour analysts are continuing to provide virtual supports for individuals, families, and organizations who are benefitting from that mode of service delivery are ramping up face to face hours with only a few clients who have higher needs. Others have described ramping up with those who can manage wearing masks, and keeping physical distance, and providing consultation for those who are unable to manage safely. Having a clear process of fair and equitable treatment of your clients to promote their safety and well-being and that of others will help you guide you through those decisions.

3. Necessary changes to the plan of care:

Changes to the plan of care are likely inevitable in the current situation. Changes to the plan of care due to COVID-19 restrictions and phased re-opening should be noted in the service agreement, behaviour plan, and informed consent should be obtained and documented. It is also important to document your explanation for the impact of the change in care on the potential client outcomes. A change to your clients plan of care worth careful consideration is teaching mask wearing and handling, hand washing, and safe distancing. Document all changes in writing, seek informed consent, document the consent process, and ensure that you retain signed copies of all changed documents. In other words, do what you would normally do if there is a modification to the behaviour plan or services delivered.

4. Contact tracing:

Any changes to your procedures to allow for contact tracing should be clearly explained as part of the informed consent process for re-opening. It is important that these are made clear to staff and clients. Ensure that staff and clients understand the public health requirements for contact tracing. Consider the personal and cultural histories for some individuals and their concerns about private information being shared with governments. There are some excellent resources to explain the contact tracing process on different municipal public health sites, as municipalities are managing this in different ways.

5. What if my organization has not yet sanctioned face to face contact?

Organizations must consider the safety of all involved and their ability to manage risk to the staff, clients, and organization. Some behaviour analysts are attached to hospitals that may have different requirements for staff safety in the event of a need to re-deploy staff into different roles if there is a second wave. Some behaviour analysts are attached to school boards, and the plans for school in the fall remain unclear. Remember that this interruption in service is unprecedented, and that our desire to help and provide support is part of a complex equation.

Here are a list of resources that may be helpful to you:

<https://www.canada.ca/en/public-health.html>

<https://www.ontario.ca/page/reopening-ontario>

<https://www.ontario.ca/page/how-ontario-is-responding-covid-19>

<https://www.publichealthontario.ca/en/disease-and-conditions/infectious-diseases/respiratory-diseases/novel-coronavirus>

Please see information on www.BACB.com about other ethical issues related to COVID-19.

***As this situation continues to unfold,
please send your questions to
contact@ontaba.org***

