

The ONTABA ANALYST



NEWSLETTER OF THE



Introducing the OSETT-CB Task Force Report

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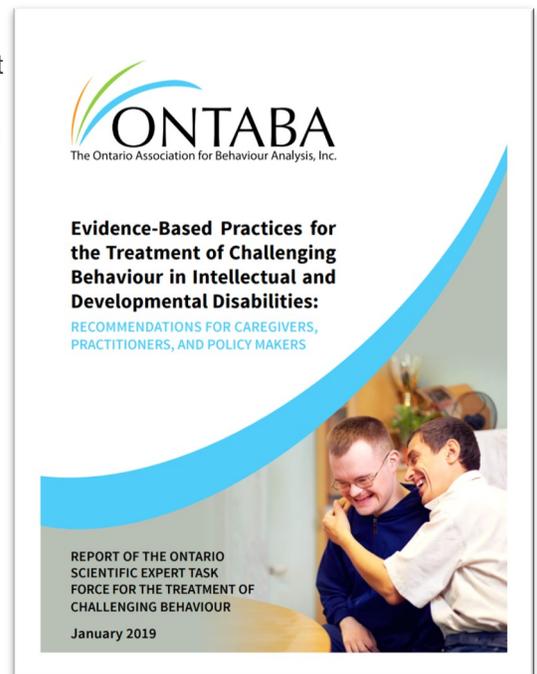
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In the summer of 2017, following the receipt of an International Development Grant from the Society for the Advancement of Behavior Analysis and a generous donation from the Developmental Disabilities Program in the Department of Psychiatry at Western University, the Ontario Association for Behaviour Analysis formed the Ontario Scientific Expert Task Force for the Treatment for Challenging Behaviour (OSETT-CB). OSETT-CB set out to produce guidelines on Evidence-Based Practices for the Treatment of Challenging Behaviour in Intellectual and Developmental Disabilities.

The report is now available for your review through our website at <http://www.ontaba.org> or directly at http://www.ontaba.org/pdf/ONTABA_OSETT-CB_Final_Report_Jan_2019.pdf

The purpose of this report is three-fold. First, we hope that it will serve as a resource for the many professionals and service providers across the province who are concerned with the safety and wellbeing of individuals living with intellectual and developmental disabilities (IDD). Second, we hope that this document will prove to be a useful tool for caregivers, advocates and policymakers that work hard to ensure that the services provided to individuals with IDD are the safest and most effective available. Finally, we hope that the information and recommendations drawn from scholarly review and expert consensus will contribute to improved conditions for the individuals and families that too frequently remained underserved, untreated, and in unsafe situations across the province.

This report is dedicated to our closest partners, the individuals, families and caregivers to whom this work is of the utmost importance.



Follow us on:



Your OSETT-CB Task Force

From the Editor

A new year means new resolutions, new opportunities, and for the ONTABA Analyst, a new editor-in-chief and a new look. I am honored to be entrusted with ONTABA's publication. Thank you to Lesley Barreira for her hard work and dedication to the ONTABA Analyst. It will be difficult to fill her shoes. I'd also like to take this moment to say thank YOU. I am amazed by our community who use their ideas, skills and services to positively impact communities across Ontario. I am looking forward to a new year with ONTABA working with all of you as we continue to make ONTABA and the ONTABA Analyst a success. I hope you enjoy this issue and I welcome your submissions and your feedback about the ONTABA Analyst. What do you think of our new look? What do you like and what is missing? Let us know and we'll see we can do in the future.

Thank you,



Nicole Neil, PhD, BCBA-D, Editor-in-Chief

newsletter@ontaba.org



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FROM THE President's Desk



Dear Members,

Let me begin by wishing you all a Happy New Year! I know that the board and all the committee volunteers truly appreciate your understanding and patience while we took a break over the 2018 holiday season. On behalf of ONTABA, I hope that you were able to enjoy the time with friends and family.

As you know, we closed

out 2018 with a bang — the Annual ONTABA Conference had 620 attendees! As someone who has had the privilege of attending the conference for the last nine years both as a coordinator and attendee, it has been a pleasure to observe the continued growth of the conference. Thank you to Milena Kako, Jeffrey Esteves, the committee and student volunteers who worked tirelessly to ensure the conference ran as smoothly as it did.

As always, the New Year brings changes to the board of directors, I would like to take the opportunity to say a heartfelt thank you to those who have ended their board positions. Sarah O'Donoghue, Milena Kako, Stefani Cali, Jeffrey Esteves, and Cheryl Dore your time and efforts over the past year or two (or more) are very much appreciated. Keen observers probably noticed that there were no nominations for the Secretary position during our 2018 elections. However, Joan Broto, who was re-elected as a Director-at-Large, has agreed to take on this role for the current two-year term. Thank you Joan for stepping up to the plate! I would also like to welcome Carly Eby (Director-at-Large), Karl Gunnarsson (Director-at-Large), Aamir Khan (Director-at-Large), Joey Robertson (Graduate Student Representative), and Jamie Wallace (Undergraduate Student Representative) to the board of directors for their respective terms.

The board and committees are already in full swing developing their work plans and budgets to ensure that we can continue to meet our strategic plan goals and promote behaviour analysis in Ontario. Here are some of the highlights for our 2019 to-do list:

To Do

Complete, review, and pass the updates to the organization's by-laws

Host a Town Hall to inform the membership about the Private Act

Advertise and table the Private Act within the legislature

Hire ONTABA's first paid staff

Continue the development of the organization's policy and procedures manual

Complete a current board evaluation process

Develop of a 2020-2022 strategic plan

2019 is shaping up to be another busy year for not only ONTABA, but for our field as a whole. No matter what the year brings us, let's stand united as a field to ensure a bright future for behaviour analysis in Ontario.

Sincerely,

Jennifer Cunningham
President, ONTABA

The New Faces on Our Board of Directors



Carly Eby, Director at Large, grew up in Toronto and became interested in autism as a high school student volunteer. She has a Master's in ABA from Northeastern University and a PhD in ABA from Columbia University, and has been a BCBA since 2005. Carly has worked in a variety of public and private school settings, most recently serving as the Assistant Director of Partner Classrooms at The New England Center for Children. Carly has taught graduate courses in ABA at Simmons University and Elms College. She has published her research in journals such as Behavioral Interventions, Behavioral Development Bulletin, and the Journal of SLP-ABA. She recently returned to Toronto with her family and is thrilled to be joining the ONTABA board of directors!



Karl Gunnarsson, Director at Large, is interested in all things related to human behaviour after almost a decade dedicated to the field.. His passion lies in three broad areas: gambling behaviour, organizational behaviour, and function based treatments. Before moving to Toronto he was a Director of the NeuroBehavioral program at NeuroRestorative in Carbondale, Illinois. In June 2018, Karl began his position at West Park Healthcare Center as Director of ABIBS. He is completing his dissertation from Southern Illinois University in Rehabilitation (emphasis on Behaviour Analysis and Therapy). He has published peer reviewed journal articles on: gambling behaviour, organizational behaviour, impulsivity and ABI, applied RFT, and experimental animal work. He really looks forward to the work ahead as member of the board.



Aamir Khan, Director at Large, has worked in the field of behaviour analysis for the past 8 years and in developmental services sector for 14 years. Aamir is a Board Certified Behaviour Analyst with a Master's degree in Applied Disability Studies and Applied Behaviour Analysis from Brock University. Aamir is a contributing author for a chapter in an edited book on the history of developmental disabilities across the world. Aamir holds the unique position of Behaviour Facilitator with the Community Networks of Specialized Care in the Toronto Region. In this role, he works with community partners in the to promote the science of ABA and train mediators to implement assessment and intervention procedures with adults with developmental disabilities and dual diagnosis.



Joey Robertson, Graduate Student Representative started his ABA career in 2011, working as a behaviour technician in Ottawa. He completed the M.ADS program at Brock University in June 2017 and was awarded the Board of Trustees Spirit of Brock Medal. Joey enrolled in Brock University's M.A. program to conduct research evaluating a telecommunication model for training staff to implement evidence-based procedures with children with autism spectrum disorder. Joey has been a teaching assistant for Brock's University for over 2 years, giving him a unique perspective on graduate experiences in Ontario. He has been described by his students as approachable, passionate, and friendly and hopes to embody these qualities as ONTABA's Graduate Student Representative.



Jamie Wallace, Undergraduate Representative, received an Advanced Diploma from the Behaviour Science Technology program in 2018 and has since bridged into the third year Honours Bachelor of Behaviour Analysis at George Brown College. Through co-op opportunities, she has applied her knowledge and experience to many areas: from program planning with young children in an IBI and school classroom setting, to implementing behaviour change programs for elderly with brain injury and dementia. As the undergraduate representative she strives to broaden her learning opportunities and create lasting connections in a field that she is passionate about. She hopes to contribute her knowledge and advocate for current and future students.

As we welcome the new members to the ONTABA leadership, we want to thank the Board of Directors Members whose terms have come to an end.

Many thanks to **Cheryl Dore, Jeffrey Esteves, Stefanie Kalie, Milena Kako, Sarah O'Donoghue** for their service to ONTABA.



Committee Updates

ASD Committee

The ASD Committee had an incredibly productive 2018, with 23 task force, working group and stakeholder meetings throughout the year. We want to thank committee members for their hard work and dedication over the past year. Our activities from October to December 2018 included the following:

- ONTABA's Board of Directors approved our request to disband the ASD Task Force and establish an ASD Committee. This change was requested as the ASD Task Force was a time limited, ad-hoc committee. The ASD Committee will now be a standing committee; all current ASD Task Force members will move to the ASD Committee. We are pleased to welcome Carly Eby, an ONTABA Board Member who will serve as Co-Chair of the ASD Committee.
- The committee met at the ONTABA Conference to develop the 2019 Work Plan, which outlines our goals for the next year.
- We completed several meetings with Autism Ontario to discuss contributing to ABA parent resource information on the ABACUS webpage and delivery of a webinar on ABA services for parents.
- We continued information gathering for the development of a possible ABA demonstration projection in rural/remote areas in Ontario. This included a call with RAPON representatives from Northern Ontario.
- We continued work on the development of an ASD self-advocate and parent advisory committee.

We look forward to providing details on our 2019 Work Plan in the next newsletter.

Professional Practice Committee

The Professional Practice Committee (PPC) would like to invite our membership to submit professional practice questions to professionalpractice@ontaba.org. We will endeavour to answer your questions or connect you to evidence-based practice resources. We look forward to hearing from you!

Adult Services Task Force

The Adult Services Task Force will be considered a Committee going forward as Task Forces have a 2-year duration, after which they must be made a standing committee. The Adult Services Committee will be co-chaired by Karl Gunnarsson, Nicole Aliya Rahim, and Rosemary Condillac. The mandate of the committee is "to advocate for investments in behaviour analytic services for adults with developmental disabilities, in forensic settings, with mental health issues, acquired brain injuries, and neurodegenerative disorders associated with aging." Further, we are keenly invested in influencing policy that relates to the delivery and oversight of behaviour analytic interventions. Some specific areas that we will be pursuing include issues relating to overmedication of adults with developmental disabilities, the need for increased emphasis on behavioural interventions, and the oversight of behaviour support plans through the Quality Assurance Measures (QAM; O. Reg. 299/10).

We have met twice since the conference in December to refine our goals and budget for submission to the Board. As we transition to a Committee status, we will also be looking for some additional members to assist with meeting our goals in areas such as geriatrics, forensics/corrections, and mental health, as well as other areas that we continue to pursue. Please watch for our call for new members and send any questions, ideas, or feedback to adult services committee@ontaba.org.

Professional Development Committee

The professional Development Committee is excited for 2019. We hope to continue to help with the dissemination of ABA via workshops, webinars and journal clubs. We hope to distribute even more CEUs this year and will be looking to co-sponsor several events in partnership with our growing community. A big goal for this year is to automate our CEU process to make this easier for you and the hard working volunteers. Finally, we are also looking forward to hosting an evening for behaviour analysts. Stay tuned for more info.

Jurisprudence Committee

The Jurisprudence Committee met multiple times in 2018, both through audio/video conference and for several face-to-face full day meetings. The Committee continues to make progress on our mandated goals. Current and completed activities include:

- Selected the Institute for Credentialing Excellence, Standard for Assessment-Based Certificate Programs, as a general framework for committee work.
- Reviewed the ethics and jurisprudence training and assessment procedures employed by all regulated health care professions in Ontario, select non-regulated professions (i.e., those with title protection, certificant registries) and select out of province and international behaviour analytic associations (e.g., Manitoba, British Columbia).
- Created a comprehensive resource list of legislation and regulations relevant to the practice of behaviour analysis in Ontario.
- Struck a Working Group of professionals with expertise across service sectors and populations, as well as representation from diverse geographical locations. The Working Group, under the direction of the Jurisprudence Committee, created a first draft of the “Jurisprudence and Ethics Knowledge and Competency Standards for Titled Behaviour Analysts in Ontario”. (Referred to as the “JE Standards”).
- Solicited and integrated feedback from the ONTABA Advisory Committee into the JE Standards.
- Explored training and evaluation/assessment processes and platforms.

We have an intensive work schedule planned for 2019 and look forward to continued work on this important project.



2018 Annual Conference



Suggestions or Feedback?

contact@ontaba.org or
newsletter@ontaba.org



Got Something for an Upcoming Issue?

The ONTABA Analyst is produced quarterly. The remaining issues for 2019 will be released in the last week of **April**, **July**, and **October**. Interested? Send it to us! newsletter@ontaba.org



Photo Credits

Louis Busch
<https://brocku.ca/social-sciences/applied-disability-studies/2018/11/21/>



Awards and Honors

THE MEMBERSHIP, AWARDS AND RECRUITMENT COMMITTEE WOULD LIKE TO CONGRATULATE ALL OF THE 2018 ONTABA AWARD WINNERS.

Excellence in Research Award:

Dr. Kimberly Zonneveld

For conducting research in the field of ABA, at any level, with the aim of contributing meaningfully to the ABA literature, and the clinical applications of ABA to a diversity of situations.



President's Award for Service Excellence: Dr. Julie Koudys



Thank you Lesley Barreira
For her outstanding contributions as the editor-in-chief of the ONTABA

Student Achievement Award: Jennifer General

For students and recent graduates who have demonstrated excellence in multiple areas of study.



Behaviour Analysis Ally Award: Beth Skrt

For going above and beyond to advocate for the implementation of, and access to, ABA services in Ontario.

Excellence in Teaching Award: Dr. Nicole Neil

For going above and beyond the call of duty to teach ABA principles and applications and to inspire an appreciation for ABA in his/her students



Poster Award Winners



Cierra Vandermere

Positive Behaviour Support Plans: A Review of Best Practices and Checklist
Positive Behaviour Support Plans (PBSPs) are developed for persons served with developmental disabilities. To ensure that the required guidelines and best practices were met within the PBSPs in the agency, the PBSP-Best Practice Checklist (PBSP-BPC) was developed based on prior research by Cook et al. (2007), and Phillips, Wilson, and Wilson (2010), which sought to increase adequacy and effectiveness in PBSPs. The PBSP-BPC was designed during a 7-week field placement to assist the process of ensuring PBSPs in the agency met best practices criteria, the agency's policies, as well as the Quality Assurance Measure standards (QAM, 2009). Fourteen out of twenty-five of the agency's PBSPs were reviewed with the PBSP-BPC and scores were added from each category to determine the total number of Yes, No, and Partially scores for each PBSP. Scores were combined to determine the overall percentage of best practices items and QAM requirements that were adhered to, versus missing items. Yes was scored consistently the highest, while No was consistently scored the lowest. The average of Best Practices items fully contained in the PBSPs was 64.66% (M= 36.87, SD= 2.35), missing items was 7.39% (M= 4.21, SD= 2.12), and some items were partially covered, with an average of 27.95% (M= 15.93, SD= 1.82). An average of 92.61% of the required criteria identified in the PBSP-BPC was included in the plans. Most of the PBSPs reviewed adhered to the majority of QAM and best practices requirements.





Brittany Davy

First Step In Solving the Puzzle: A Services and Supports Assessment in York Region

The purpose of the research was to understand the services and support needs and perceptions of parent/family caregivers of individuals with autism spectrum disorder (ASD) and professionals working this population in York Region, Toronto, Ontario. The sample consisted of 154 professionals and 202 caregivers who completed the survey, which included questions adapted from CASDA Autism in Canada: National Needs Assessment Survey in 2014. Additional questions were focused on revealing the current state of York Region services and supports through these individuals' experiences. Thematic coding was used to analyze the data. There were three major themes across both caregivers and professionals' narratives. For caregivers, themes were: (1) extremely long waitlists associated with services extended feelings of crisis and created barriers, (2) a lack of family support offered by the government to navigate the next steps following diagnosis, and (3) government funded programs were labelled as limited and inadequate for the number of individuals requiring them. For professionals, the themes were: (1) too few staff trained in ASD or services personalized to this population, (2) lack of support offered to families manoeuvring through their service and treatment options, and (3) an inadequate amount of available government funding. The needs identified by caregivers and professionals may impact a high quality of life among individuals with ASD in York Region now and in the future. Incorporating their daily experiences, decision-makers should consider including them when restructuring and/or creating services. Additionally, the findings may be used to promote empathy and encourage more informed, circumstance-sensitive professionals.



Rebecca Hansford

The influence of psychotropic medications and types of intervention on problem behaviour among individuals who experienced deinstitutionalization from 2004 to 2009 in Ontario

Individuals with intellectual disabilities, including former institution residents, are at increased risk for developing problem behaviour (McGillivray & McCabe, 2005). Despite concerns regarding side-effects, these individuals are frequently prescribed multiple psychotropic medications (polypharmacy) (Lunsky et al., 2017). Long-term use of psychotropic medication and polypharmacy can increase individual risk for complications (Sullivan et al., 2018). Conducting multivariate analyses of variables that predict challenging behaviour may result in a better understanding of practices in Ontario (Stortz et al., 2014). The following questions that are relevant to behaviour analysts who practice with adults with ID will be addressed.

1. Do formal or informal interventions and psychotropic medications predict lower rates of challenging behaviour?
2. What is the relative influence of psychotropic medication and behavioural interventions on challenging behaviour rates?
3. What other variables influence psychotropic medication use and its effect on challenging behaviour?

Design: Data are from a longitudinal study of individuals with intellectual disabilities who moved from institutions to community settings (Condillac, Frijters, & Martin, 2012).

Methods: A multiple regression will be conducted to examine if and to what extent informal vs. formal interventions and psychotropic medication predict challenging behaviour. Potential moderators and mediators will also be examined.

Results: This study will report the relative contribution of formal vs. informal interventions and psychotropic medications to challenging behaviour and relevant moderators and mediators.

Conclusion: Examining the variables associated with polypharmacy among former residents may reveal key psychotropic medication patterns. These findings may inform healthcare practitioners in how to improve prescribing practices among this population



SPOTLIGHT ON:

Acceptance and Commitment Therapy

with Jonathan Tarbox, PhD, BCBA-D, Program Director of the Master of Science in Applied Behavior Analysis program at the University of Southern California, and Director of Research at FirstSteps for Kids.

By Raluca Nuta

Treasurer, ONTABA

For those who are not familiar with Acceptance and Commitment Therapy (ACT), please give us the “elevator speech” for what ACT consists of.

ACT is a way of training habits that help you get less stuck in problematic thoughts and emotions, and more focused on living in the present and doing things that you really care about. It helps make life more meaningful. That would be the “elevator speech” in lay terms, that you might tell the board of a business that you’re consulting to, or even a teacher or parent you’re going to train using ACT. When it comes to translating this into ABA principles, it becomes harder to put it in a nutshell. Complex human behaviour, includes all the same basic functional relations that we examine in behaviour analysis (overt behaviours, antecedents, and consequences), and also includes private events as stimuli that are no different from overt environmental stimuli. The main thing that ACT focuses on is changing our problematic repertoire of following rules that describe escape from, or avoidance of, private events, and making this repertoire more flexible, diverse, and varied. For example, if a parent of a child with ASD is having difficulty implementing extinction, you might ask them “Why is it difficult to implement this procedure?”, and they might say “I am not ok with making my child upset”. You have some initial evidence for a rule that the parent potentially follows when trying to manage their child’s behaviour. This rule, in general, is a good thing! However, any rule that we follow rigidly or repetitively may get in the way of doing other things that might be more important,



Picture source: <https://dornsife.usc.edu/aba/jonathan-tarbox-phd-bcba-d/>

depending on the context. In the context of implementing extinction, the rule “I can’t make my child upset” may be maladaptive, if followed too rigidly. ACT attempts to create flexibility around rules, in the service of helping people engage in overt behaviours that move them in the direction of their values (i.e., sources of positive reinforcement that are more important than the immediate reinforcement that comes from escaping something uncomfortable in the present moment).

In what ways can private events, such as negative self-talk, influence overt behaviours?

Skinner gave us the foundation for this when he said that private events are no different than public events. They are impossible for another person to observe, but they function in the same way. So, emitting private negative self-talk probably has the same effect as emitting public negative self-talk (i.e., saying it out loud), and might function the same as someone else making that statement to you. That is, they may lead to physiological responses and/or impact the future occurrence of various overt behaviours by functioning as rules, discriminative stimuli, and/or being a source of reinforcement or punishment.

How can behaviour analysts implement ACT with clients while still staying within their scope of practice?

Scope of practice questions are very important, because ACT was originally developed (by Steve Hayes and his colleagues at the time) for use in psychotherapy to treat anxiety, panic disorder, depression, substance abuse disorders, etcetera, which are traditionally treated by clinical psychologists. Interestingly, Steve Hayes is a behaviour analyst, and he developed a behaviour analytic approach, based on a behavioural analysis of rules and the maladaptive effects of rules, for use in psychotherapy. That's what ACT was, originally. In the past five to 10 years behaviour analysts have been really interested in how we can apply it to what we do, not as psychotherapy, but as a way of making our words more effective when talking to others. When engaging in half an hour to one hour of parent or staff training per week, we talk to parents and staff about their behaviour, and we hope that the feedback provided in that short time will make a difference in their behaviour between training sessions, when we are not there. It is not just their direct contingencies that we are changing, but also their verbal behaviour. The reason that ACT is interesting to behaviour analysts, then, is that it is a behaviour analytic approach to understanding the verbal behaviour of typically developing adults, and how that impacts the rest of their behaviour. In terms of scope of practice for behaviour analysts, you might say that training, and talking to typically developing adults, and using language to do so, is a big part of our scope of practice. Just don't do psychotherapy! As behaviour analysts we focus on overt behaviours and we don't care about changing the private events, but we can teach new skills for responding to private events, in the service of producing measurable, overt behaviour changes in socially meaningful behaviours.

How can ACT be used during staff and parent training to increase treatment adherence and/or integrity of behavioural procedures?

First, we can start with what we already know from applied behaviour analysis and make sure to use behavioural skills training and goal setting and feedback during parent and staff training and supervision. When our data show those are not sufficient, we can take components from ACT and use them to make our ABA work more effective. For example, talking about values with parents. Asking them why the targeted behaviour change is important and explaining how the procedure you are training will be meaningful. This type of conversation can help change the function of parents' behaviour from avoidance of disappointing you as a BCBA, or simple compliance with the protocol, to working towards their values as a parent as an ultimate positive reinforcer.



Skinner gave us the foundation for this when he said that private events are no different than public events. They are impossible for another person to observe, but they function in the same way.



WHAT WOULD YOU DO?

Dr. Rosemary Condillac, C. Psych, BCBA-D

Associate Professor, Centre for 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 newsletter@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.

Malik is a BCBA working on an inpatient dual diagnosis unit. One of his clients, Karina, who has been hospitalized due to aggression, also engages in severe pica. In addition to working with the team to treat her aggression, Malik has worked diligently develop a behaviour support plan on the unit that includes prevention, skill promotion, and intervention for the rare occasions when she attempts to ingest an inedible object. Malik returns from a weeklong and finds out that Karina has been discharged. As she lived outside of the outpatient clinic’s catchment area, she is not on his list for follow-up. The team assures Malik that a copy of his report was given to her residential agency in his absence. Malik is very uncomfortable with this situation, as he feels a duty to meet his obligations relating to continuity of care. He asks if there will be a behaviour analyst involved in her home community, and is told by the social worker that she has been placed on the waitlist. What can he do?

In Ontario, many behaviour analysts work in situations where their services are paid for directly or indirectly

through government funding under specific program funding or mandate. In health care, the service of the behaviour analyst might be for the duration of admission, which is determined by a multidisciplinary team, and often, final decisions rest with the attending or most responsible physician. Other services, such as those for children and youth with ASD or for adults with intellectual and developmental

provide appropriate pre-termination services, suggest alternative service providers as appropriate, and take other reasonable steps to facilitate timely transfer of responsibility to another provider if the client needs one immediately, upon client consent.” This does not mean that services can never be discontinued, but it does mean that a behaviour analyst should make the limits and duration of service known to the client at the earliest opportunity and should make every effort to assist in orchestrating a successful transition to a new provider or alternate service if services must be discontinued.

In the case of Malik and his client Karina, it would likely have been useful for him to try to determine the community supports available to Karina at the outset of service, and to begin planning with her residential team for the kinds of supports that she would need upon discharge. To meet his professional obligations at this point, Malik could seek permission from the hospital and consent from Karina’s guardian to follow up with the residential agency. If permission is granted he could offer them the opportunity to ask questions, and potentially to be trained on the behavioural support plans that were used in the hospital, if appropriate to the home setting. He could also seek consent to speak with the agency that has Karina on their waitlist for behavioural services to see if he can advocate for some interim supports given that a recent FBA and corresponding behaviour support plans are in place. In future, discharge planning and continuity of care should be clearly delineated in Malik’s initial service agreements with his clients.

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

Send it to Us!

NEWSLETTER@ONTABA.ORG

disabilities, are administered through program guidelines or funding agreements that may be time-based and/or funding-based, ending when time or funding limits are reached.

The Professional and Ethical Compliance Code for Behavior Analysts (BACB, 2016) specifies that we have a duty when it comes to the discontinuation of services. Specifically, Section 2.15 (d) of the code states that, “Behavior analysts do not abandon clients. Prior to discontinuation, for whatever reason, behavior analysts: discuss the client’s views and needs,

References: Behavior Analyst Certification Board (2016). Professional and Ethical Compliance Code for Behavior Analysts. Littleton, CO: Author. https://www.bacb.com/wp-content/uploads/170706r_compliance_code_english.pdf