



STATE OF HAWAII
DEPARTMENT OF EDUCATION
P.O. BOX 2360
HONOLULU, HAWAII 96804

Date: 01/31/2018
Time: 02:45 PM
Location: 229
Committee: Senate Education

Department: Education

Person Testifying: Dr. Christina M. Kishimoto, Superintendent of Education

Title of Bill: SB 2520 RELATING TO BEHAVIOR ANALYSIS.

Purpose of Bill: Appropriates funds to the department of education for behavior analysis services performed by licensed behavior analysts for public school students.

Department's Position:

The Hawaii State Department of Education (Department) supports the intent of SB 2520. The Department recognizes building internal staff capacity to provide behavior analysis services to students will take time; therefore, contracted services by private providers will be needed. The additional funding proposed in this measure will assist the Department to address contracted service costs.

The Department appreciates additional program funding provided the passage of SB 2520 does not replace or adversely impact priorities as indicated in our BOE-approved budget.

Thank you for the opportunity to provide testimony on this measure.

The Hawaii State Department of Education seeks to advance the goals of the Strategic Plan which is focused on student success, staff success, and successful systems of support. This is achieved through targeted work around three impact strategies: school design, student voice, and teacher collaboration. Detailed information is available at www.hawaiipublicschools.org.



Hawai'i Psychological Association

For a Healthy Hawai'i

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Committee on Education

Senator Michelle N. Kidani, Chair

Senator Kaiali'i Kahele, Vice Chair

Testimony in opposition to SB2520; proposed amendment

The Hawaii Psychological Association (HPA) recognizes that there is a shortage of qualified providers of behavioral services in the Department of Education. HPA supports expanding funding for behavioral services **that includes psychologists and other appropriately trained behavioral professionals**. Expanded funding that includes psychologists and other qualified mental health professionals recognizes that these additional levels of education bring specialized training and qualifications that many licensed behavior analysts do not possess. Psychologists and other ABA trained mental health professionals have the advantage of being able to address co-occurring disorders, including anxiety, depression, and ADHD, that are frequently comorbid with autism (e.g., 40% or more meet diagnostic criteria for anxiety disorders, as many as 34% experience clinical depression, and about 30% display externalizing disorders). LBA's are not trained in mental health. Psychologists and other mental health providers can use their ABA training and their additional specialized knowledge and skills in designing behavioral interventions that include interventions for the other co-occurring disorders during the assessment, planning and monitoring phases of ABA service delivery. Given that there is a shortage of qualified professionals for the labor-intensive, multi-tier delivery model that is the hallmark of these types of ABA services for autism, qualified professionals and their assistants are needed (including appropriately trained mid-tier level practitioners such as postdocs, interns and unlicensed master's level practitioners) who are directly supervised by licensed professionals as they oversee the implementation of an ABA program by paraprofessionals (e.g., paraprofessionals, direct service workers and behavior technicians). We object to any language in any legislation that gives a monopoly to one credentialing agency (such as the proprietary terms of the Behavior Analyst Certification Board: BCBA's, BCBA-D, BCaBa, RBT's etc.) which serve to exclude other nationally recognized licenses and certifying agencies.

Tanya Gamby, Ph.D.
President

Hawaii Psychological Association

SB-2520

Submitted on: 1/30/2018 10:12:38 PM

Testimony for EDU on 1/31/2018 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Jennifer Ninci		Support	No

Comments:

I strongly support SB 2520 in order to support the Hawaii Department of Education (DOE) in providing adequate Applied Behavior Analysis (ABA) supports to students warranting ABA assessment(s) and intervention(s). There are currently few Licensed Behavior Analysts (LBAs) working within the DOE. In addition, there is an inadequate number of licensed special education teachers in Hawaii. This has led to students having inadequate access to evidence-based behavioral assessments and interventions. Teachers and paraprofessionals need to be able to consult with professionals that have ABA within their scope of practice in order to support the individualized needs of some students, similarly to how teachers are commonly able to consult with occupational therapists, speech therapists, and physical therapists that have the respective credentials of those fields. These related service areas are expressly stated in the Individualized Education Programs (IEPs) of students.

LBAs hold a Board Certified Behavior Analyst (BCBA) credential. LBAs must adhere to the Professional and Ethical Compliance Code for Behavior Analysts, which pertains specifically to the field of ABA in order to protect consumers and uphold a rigorous quality of the practice. Some individuals that are held responsible to design ABA assessments and interventions in the DOE do not have a transparent applied behavior analysis background/training for consumers. They also may not clearly identify ABA as being in their scope of practice. As a result, appropriate services for students may be delayed, avoided, or replaced with other procedures based on the availability of alternative resources.

When it comes designing IEPs for students as mandated by federal law, supports must be decided based on their evidenced effectiveness, decided upon by a team that supports the student. Unreasonable delay or denial of appropriate ABA services to students who need those services to make meaningful progress is a denial of a Free and Appropriate Public Education (FAPE) and Least Restrictive Environment (LRE) protections. Additionally, there should be no hesitation to include ABA services explicitly in the IEPs of students that need it to be safe and access the curriculum. The DOE and Department of Health professionals should be able to work together to provide the recommended density of ABA services to those who need it to make meaningful progress. These funds would be of clear benefit to students, families, and teachers. Thank you for supporting SB 2520!

Jennifer Ninci, PhD, BCBA-D, LBA

Honolulu, Hawaii

SB-2520

Submitted on: 1/30/2018 2:48:23 PM

Testimony for EDU on 1/31/2018 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Lesley A Slavin		Oppose	No

Comments:

Esteemed Committee Members,

As a licensed Psychologist and a member of The Hawaii Psychological Association (HPA) I recognize that there is a shortage of qualified providers of behavioral services in the Department of Education. I support expanding funding for behavioral services that include psychologists and other appropriately trained behavioral professionals, but I am opposed to expanded funding that is *exclusively* for the purpose of hiring Licensed Behavior Analysts (LBAs).

Expanded funding that includes psychologists and other qualified mental health professionals as well as LBAs would recognize that these additional levels of education bring specialized training and qualifications that many licensed behavior analysts do not possess. Psychologists and other ABA trained mental health professionals have the advantage of being able to address co-occurring disorders, including anxiety, depression, and ADHD, that are frequently comorbid with autism (e.g., 40% or more meet diagnostic criteria for anxiety disorders, as many as 34% experience clinical depression, and about 30% display externalizing disorders). LBA's are not extensively trained in mental health. ABA trained psychologists and other mental health providers can use their ABA training and their additional specialized knowledge and skills in designing behavioral interventions for students with autism and co-occurring disorders during the assessment, planning and monitoring phases of ABA service delivery. Given that there is a shortage of qualified professionals for the labor-intensive, multi-tier delivery model that is the hallmark of these types of ABA services for autism, qualified professionals and their assistants are needed (including appropriately trained mid-tier level practitioners such as postdocs, interns and unlicensed master's level practitioners) who are directly supervised by licensed professionals as they oversee the implementation of an ABA program by paraprofessionals (e.g., paraprofessionals, direct service workers and behavior technicians). I

object to any language in any legislation that gives a monopoly to one credentialing agency (such as the proprietary terms of the Behavior Analyst Certification Board: BCBA's, BCBA-D, BCaBa, RBT's etc.) which serve to exclude other nationally recognized licenses and certifying agencies.

Thank you for the opportunity to comment on this bill.

Sincerely,

Lesley A. Slavin, Ph.D.

317C Olomana Street, Kailua HI 96734 808393-9110

SB-2520

Submitted on: 1/31/2018 11:16:06 AM

Testimony for EDU on 1/31/2018 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Jeanette White		Support	Yes

Comments: