



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

Date: 02/28/2018

Time: 10:45 AM

Location: 211

Committee: Senate Ways and Means

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 licensed 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.

SB-2520

Submitted on: 2/23/2018 5:35:09 PM

Testimony for WAM on 2/28/2018 10:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Louis Erteschik	Testifying for Hawaii Disability Rights Center	Support	No

Comments:

We certainly support the bill. We believe strongly in the value of applied behavior analysis as the most effective treatment for children with autism spectrum disorders. We were very involved in the effort a few years ago which led to the legislative mandate for private insurance to cover it. We then successfully brought a court action to force DHS to cover it under the Medicaid EPSDT program. We are curious, however, to see if the DOE will support this appropriation. In the past few years since ABA was mandated, DOE has been an incredible obstacle to its implementation in the schools. Despite a ruling from the 9th Circuit which specifies that ABA is the presumptively appropriate therapy to be provided to children with autism spectrum disorders in their IEPs under the IDEA, the DOE consistently refuses to implement it. Somehow, despite the evidence submitted by parents in these IEPs, the DOE often seems to find some pretextual justification to support their position that it is "not necessary". Despite the fact that state law requires that functional behavioral assessments be performed by licensed behavior analysts, the DOE often refuses to do so. Most recently, despite the mandate under Medicaid law that medically necessary ABA services be provided in the schools, the DOE refuses to allow providers to come onto campuses to do so. These providers are paid from Medicaid funds and so allowing them to come into the schools would have zero impact on the DOE budget. It would not cost them one penny. Yet, they refuse to allow it under the guise of "non DOE employees are not allowed on campus", despite the fact the protocols are currently in place for providers such as skills trainers to come to the schools to work with children. In terms of the overall state budget, these "medically necessary services" are funded by Medicaid which means that half the costs are paid by the federal government. So, if it truly is a matter of the DOE lacking the resources to implement ABA, then this bill could be a tremendous help to a lot of students. If, however, the DOE position is really based on an antithetical view of ABA, then a mere appropriation will not be sufficient and the legislature in that case would be better advised to consider stronger measures to reign in a DOE that seems to lack the will to want to provide appropriate services to children with autism.



Hawai'i Psychological Association

For a Healthy Hawai'i

P.O. Box 833
Honolulu, HI 96808

www.hawaiipsychology.org

Email: hpaexec@gmail.com
Phone: (808) 521-8995

Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice Chair
COMMITTEE ON WAYS AND MEANS

February 25, 2018

Wednesday, February 28, 2018 10:45 a.m.
Conference Room 211

Testimony

IN STRONG SUPPORT OF SB2520 WITH PROPOSED AMENDMENT RELATING TO BEHAVIOR ANALYSIS SERVICES

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 licensed and trained behavioral professionals**. Unclear language in previous legislation unintentionally restricted the workforce of qualified ABA professionals by giving a monopoly to BCBAs. Thus, there have been unnecessary workforce shortages across agencies and across the islands. HPA asks to clarify that expanded funding for DOE includes psychologists and other qualified mental health professionals recognizing 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 generally 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,

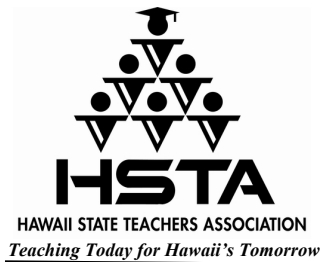
interns and unlicensed master's level practitioners) who are directly supervised by licensed professionals as they oversee the implementation of an ABA program by paraprofessionals (e.g., paraprofessionals, direct service workers and behavior technicians). We object to any language in any legislation 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.) and which serves to exclude other nationally recognized licenses and certifying agencies.

The specific amendment we are proposing on page 2 Lines 8 - 10 is:

Accordingly, the purpose of this Act is to fund behavior analysis services performed by licensed behavior analysts or psychologists or other appropriately licensed and trained behavioral professionals

We strongly support SB 2520 with the proposed amendments which prevents an unnecessary narrowing of the behavioral health workforce within the school setting.

Tanya Gamby, Ph.D.
President
Hawaii Psychological Association



1200 Ala Kapuna Street ♦ Honolulu, Hawaii 96819
Tel: (808) 833-2711 ♦ Fax: (808) 839-7106 ♦ Web: www.hsta.org

Corey Rosenlee
President
Justin Hughey
Vice President
Amy Perruso
Secretary-Treasurer
Wilbert Holck
Executive Director

TESTIMONY BEFORE THE SENATE COMMITTEE ON
WAYS AND MEANS

RE: SB 2520 - RELATING TO BEHAVIOR ANALYSIS

WEDNESDAY, FEBRUARY 28, 2018

COREY ROSENLEE, PRESIDENT
HAWAII STATE TEACHERS ASSOCIATION

Chair Dela Cruz and Members of the Committee:

The Hawaii State Teachers Association **strongly supports SB 2520**, relating to behavior analysis.

Behavior analysis means the design, implementation, and evaluation of instructional and environmental modifications to produce socially significant improvements in human behavior. The practice of behavior analysis includes the empirical identification of functional relations between behavior and environmental factors, known as functional assessment and analysis, as well as the use of contextual factors, motivating operations, antecedent stimuli, positive reinforcement, and other consequences to help people develop positive behaviors.

Act 199, Session Laws of Hawaii 2015, established the behavior analyst program within the Department of Commerce and Consumer Affairs and created licensing requirements for behavior analysts. Licensing of behavior analysis services was made concurrent with mandated insurance coverage for diagnosis and treatment related to autism disorders, with which nearly 1,500 public school students are currently diagnosed.

Unfortunately, the DOE is experiencing a shortage of licensed behavior analysts and, in 2016, successfully sought an amendment to state law to allow teachers to perform behavior analysis and prescribe services. Yet, teachers are not trained or qualified to make behavioral diagnoses, and being commanded to do so—some teachers have been threatened with termination for refusing to complete behavioral diagnoses for which they have no professional training—interferes with their ability

to provide a quality learning environment for their students, taking time away from lesson planning, professional development and collaboration, delivery of personalized learning, and more. This measure would eliminate the need to have teachers perform behavior analysis by providing the DOE with funding to hire licensed behavior analysts, either as employees of the department or by contracting with the many private providers who are currently being denied access to the children they're qualified to serve.

According to *Report on Behavior Analyst and Certification Requirements Implementation*, released by the DOE on January 5th, 2018, the department is supporting efforts for 39 DOE personnel to become BCBA's in an approved program, and assisting another 145 departmental personnel in becoming Registered Behavior Technicians (RBTs) by 2019. We need to continue in this direction, rather than further weakening Luke's Law.

To improve the learning experiences of our most vulnerable keiki, the Hawaii State Teachers Association asks your committee to **support** this bill.



THE SENATE
THE TWENTY-NINTH LEGISLATURE
REGULAR SESSION OF 2018

COMMITTEE ON WAYS AND MEANS
Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice Chair

Wednesday, February 28, 2018
10:45 AM
Conference Room 211
State Capitol
415 South Beretania St.

SB 2520 Relating to Behavior Analysis—Testimony in support

Honorable Chair Dela Cruz, Vice Chair Keith-Agaran, and members of the committee,

I support SB 2520 to appropriate funds to the department of education for behavior analysis services performed by licensed behavior analysts for public school students. Students with behavioral deficits need behavior analytic services, provided by licensed professionals with demonstrated competency, to access their educational curriculum and make meaningful gains. I thank the legislature for bringing this bill to hearing and respectfully ask the committee to support this bill.

Mahalo for your consideration,

Kristen Koba-Burd, M.S., BCBA, LBA

Maui



Committee on Ways and Means
Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice Chair
Wednesday, February 28, 2018 10:45 am
Conference Room 211, State Capitol

SB 2520 Relating to Behavior Analysis--Testimony in SUPPORT

Honorable Chair Dela Cruz, Vice Chair Keith-Agaran, and members of the committee,

Hawai'i Association for Behavior Analysis (HABA) supports our teachers, our keiki, and Senate Bill 2520. As we have testified in previous years, and numerous times throughout this legislative session, applied behavior analysis (ABA) is a necessary treatment for many children within the Department of Education (DOE) and should be provided by those licensed and qualified to do so --as stated in Chapter 465-D. Despite collaborative efforts, HABA has not been able to work together with the administrators of the DOE in finding solutions to the barriers in implementing Chapter 465-D. Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki. If funding is truly the primary barrier in increasing the availability and accessibility of ABA within the DOE, then, SB 2520 provides an solution.

Once additional funding is made available, ABA should be more readily accessible to our children. If it is not, then we must look to barriers outside of funding. Thank you for introducing this bill in support of our teachers, our keiki, and SB 2520.

Mahalo,

Kathleen Penland

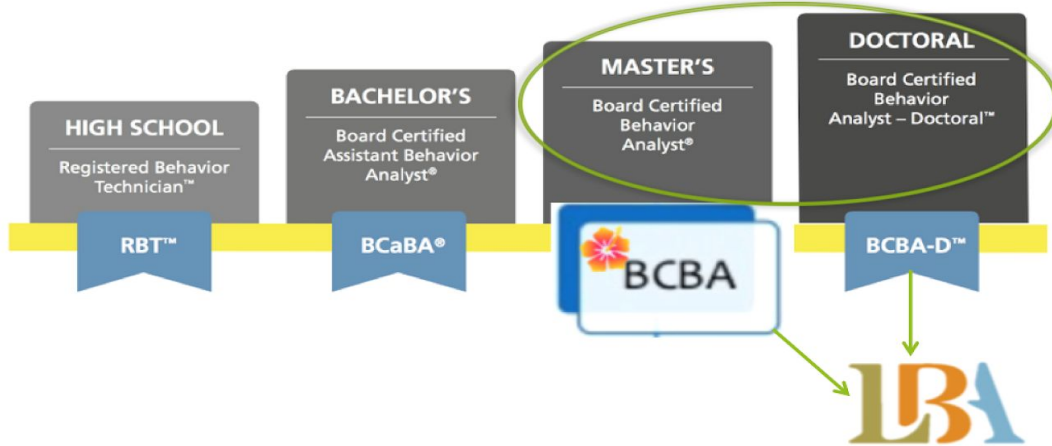
Kathleen Penland, M. Ed. BCBA, LBA

President, Hawai'i Association for Behavior Analysis

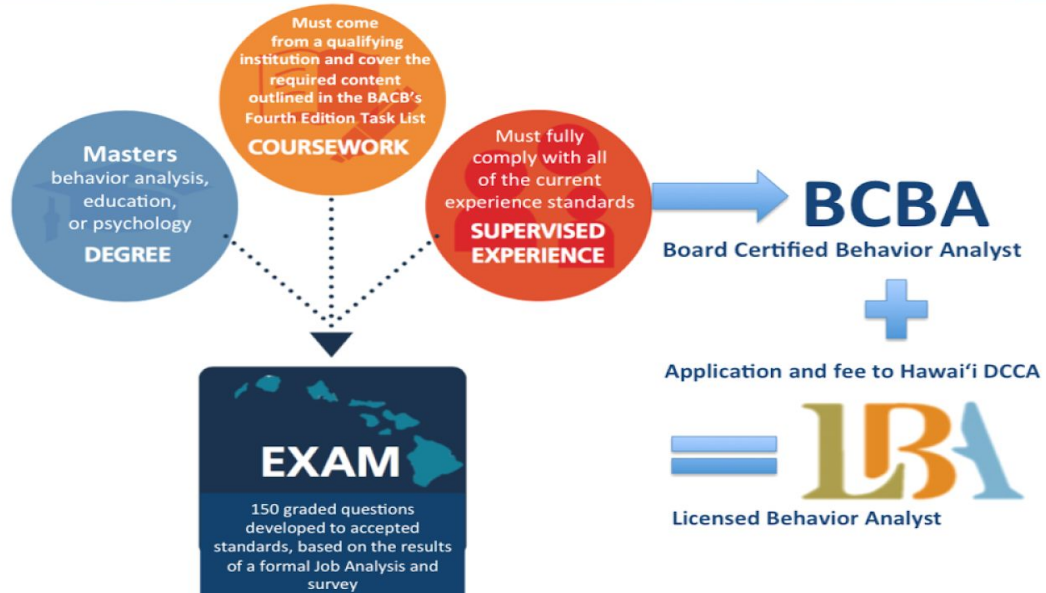
Information current as of 2/16/2018

Behavior Analyst Certification Board (BACB)

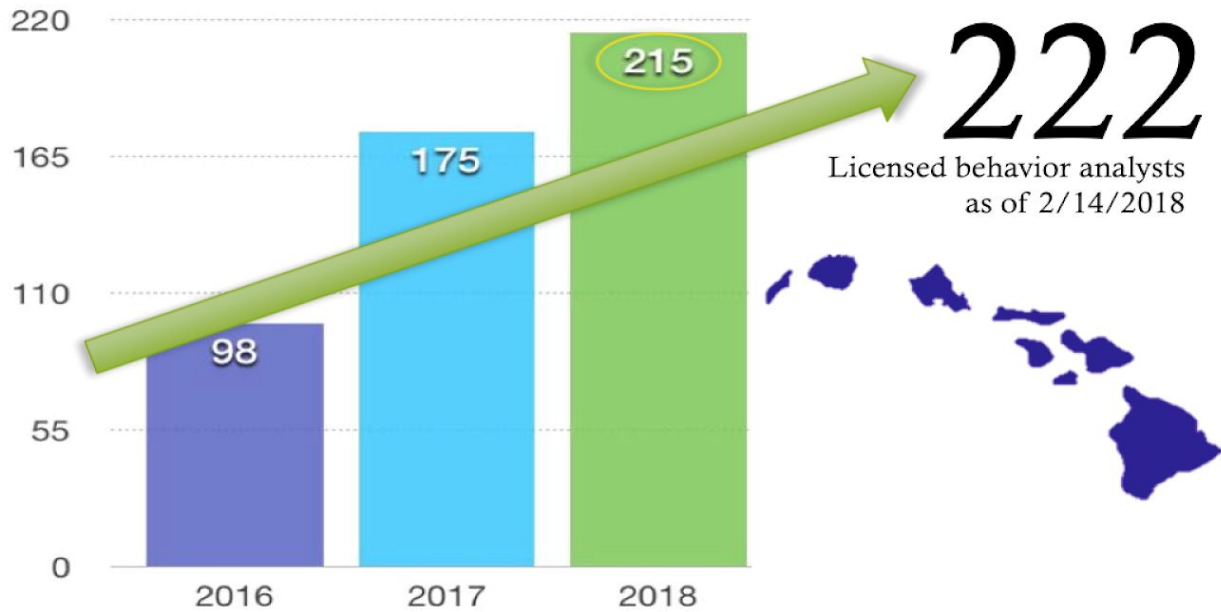
The BACB credentials and recognizes practitioners at four levels:



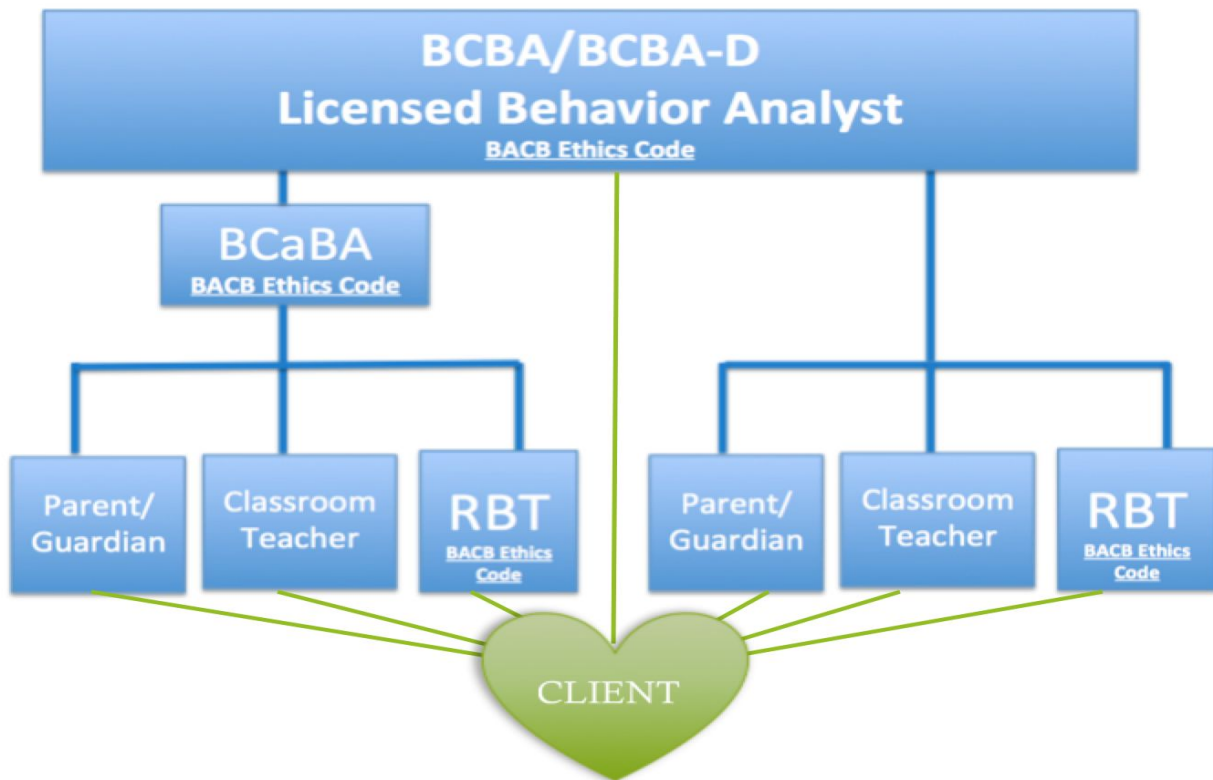
Primary requirements for certification by the Behavior Analyst Certification Board (BACB)



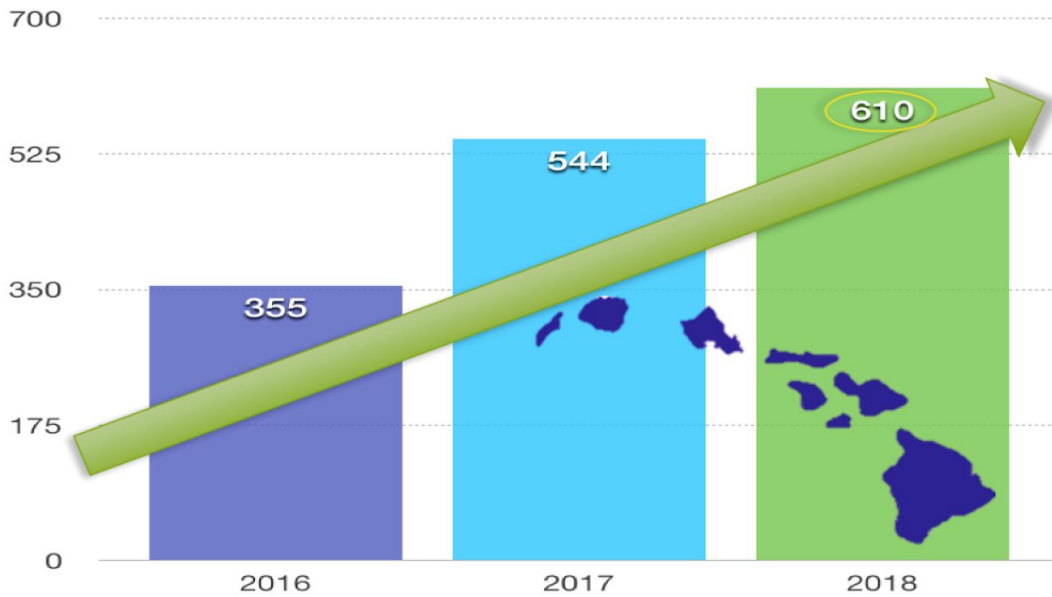
Growth of Licensed Behavior Analysts in Hawai'i



Data as reported at HI DCCA <https://pvl.ehawaii.gov>
dated reported for January 1st of each year



Growth of Registered Behavior Technicians in Hawai'i



Data as reported on www.BACB.com
data reported for January 1st of each year

Direct Support Worker (1:1)	Registered Behavior Technician (RBT) (Source: www.BACB.com)	Hawai'i DOE Paraprofessional (Source: HIDOE)
Job Responsibilities	A paraprofessional who practices under the close, ongoing supervision of a (LBA) BCBA/BCBA-D, BCaBA, or psychologist with the ABPP credential.	A paraprofessional who provides support services "under the direct supervision of a highly qualified teacher or professional practitioner."
Degree	High school diploma	High school diploma plus 48-semester credits of baccalaureate level course, OR associates degree in arts or science at baccalaureate level
Training in Applied Behavior Analysis	40 hours of explicit ABA training, related to the BACB RBT Task List	-----
Demonstrated Competency	Skills demonstration performed with client, conducted by Licensed Behavior Analyst (LBA)	-----
Ethics Code	Ethics Code (BACB) , background check required	-----
Examination	Pearson Vue exam The RBT examination is comprised of 75 multiple-choice questions. Each question has four possible answers. Examination content is based on the RBT Task List. Candidates sitting for the RBT examination will usually answer 85 questions total. Candidates are given a total of one and a half hours (90 minutes) to complete the examination.	ParaPro Assessment The test has 90 multiple-choice questions, approximately two-thirds of which focus on basic skills and knowledge. The remaining one-third focus on applying skills in the classroom. All test questions are in English.
Ongoing Supervision	5% of hours worked by RBT must be overseen by a masters level LBA, some group supervision allowed, minimum monthly supervision requirements	NONE SPECIFIED, as needed
Supervisor	Licensed behavior analyst (LBA) attached to each RBT; Responsible Certificant refers to an individual who serves in the capacity of either organizational compliance officer or direct supervisor of one or more Registered Behavior Technicians.	"A highly qualified teacher or professional practitioner."

Date: February 28, 2018

To: Committee on Education
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

From: NASW Hawai'i Chapter

RE: Testimony in Support of SB. 2520 Relating to the Practice of Behavior Analysis, with an amendment

The National Association of Social Workers- Hawai'i (NASW-Hawai'i) strongly supports SB 2925, with an amendment to include social workers as defined by HRS 467E, and other mental health professionals. Expanded funding to include social workers, Psychologists, and other ABA trained mental health professionals allows wrap around care to include the co-occurring disorders that occur with Autism (Depression, Anxiety, Externalizing Disorders). LBA's do not have training in mental health.

Social workers, 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.

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.

We support HPA's amendment:
The specific amendment we are proposing in Lines 8 - 10 is:

Accordingly, the purpose of this Act is to fund behavior analysis services performed by licensed behavior analysts and other individuals working within the scope of practice of duties of another licensed profession that overlaps with the practice of behavior analysis, including individuals directly supervised by a licensed professional, such as unlicensed master's mental health practitioners, students, and postdoctoral fellows, who may train and supervise a paraprofessional, direct support worker, or parent/guardian in implementing an ABA intervention provided that that supervision is within that licensed professional's recognized scope of practice for public school students.

Sonja Bigalke-Bannan, MSW, LSW
Executive Director
National Association of Social Workers, Hawai'i Chapter

Date: February 28, 2018

To: Sen. Donovan Dela Cruz, Chair and Sen. Gilbert S.C. Keith-Agaran, Vice Chair

Hearing: Wednesday, February 28, 2018, 10:45 am, Conference Room 211

Re: Testimony in Support of SB2520 as Amended by the Hawaii Psychological Association (HPA)

From: Richard J. Kravetz, Ph.D.
(808) 258-2598

I have worked in Hawaii as a psychologist for over thirty years. My work has included training and supervising paraprofessionals, practicum students, interns, postdoctoral residents and master's level clinicians in providing applied behavior analysis (ABA) through contracts with the Hawaii Department of Education, Early Intervention Section and Developmental Disabilities Division since 1997.

I fully support the DOE's request for additional funding to address the shortage of qualified persons to assist the department in providing ABA services, **provided the funding request includes all qualified professionals**, including ABA-trained licensed psychologists and individuals working under their supervision, other licensed or credentialed professionals whose own recognized scope of services overlaps with a licensed behavior analyst (LBA).

I would like to note that **no other state mandates that teachers or paraprofessional staff be certified as Registered Behavior Technicians (RBT's)**. This mandate denigrates the training and practice of licensed/credentialed teachers who have been trained in Applied Behavior Analysis (ABA) prior to obtaining their certification/licensure, and continue to receive training as employees of the DOE. It also affords an association to collect fees for certifying individuals who are already being overseen by DOE minimum entry-level, training and supervision standards. This is an unwarranted expense that no other state, to my knowledge, requires for its teachers and paraprofessional staff. Moreover, the board certifying RBT's requires that the individual continue to be supervised by a BCBA in order to maintain his/her certification, making it impossible for the classroom teacher to exercise his/her responsibility in the classroom with regard to the student. In addition to the extra costs to the state for supervision are the costs required for the RBT to maintain certification as monies must be paid for the holder of the certificate to submit documents attesting to frequency of supervision and an assessment by the supervising BCBA that he/she continues to demonstrate proficiency at an acceptable level.

It bears noting that there is no existing research that supports the use of RBT's over similarly trained paraprofessionals. As a psychologist who has used ABA with different ages of individuals, with different disabilities and in different settings, it is my belief that the state agencies be allowed to develop the content area and target the skills that are needed for the

paraprofessionals they employ/contract. Working with the 0 - 3 population is different than working with elementary age, high school or adult populations and requires a different knowledge base and skill set. Working in the school setting requires a different knowledge base and skill set than working in the community or work setting. Developing an ABA program for individuals with autism and a co-occurring anxiety disorder, clinical depression, or externalizing disorder (which are frequent comorbidities, occurring in 30-40% of children diagnosed with ASD) requires a professional who is trained in ABA and treating mental health issues, the latter of which LBA's are not licensed to treat.

Thank you for the opportunity to share my concerns. As a member of the HPA Task Force on ABA, I support this bill with an amendment that includes the funding of ABA-trained licensed psychologists and other ABA-trained licensed/credentialed professionals and their assistants. The DOE already has minimum-entry requirements, training and supervision standards for mid-tier and paraprofessional staff. Continuing education is important for all who provide services to students needing ABA services, and I would hope that our professional community can work together to address any and all workforce development and training needs that exist.



46-063 Emepela Pl. #U101 Kaneohe, HI 96744 · (808) 679-7454 · Kris Coffield · Co-founder/Executive Director

TESTIMONY FOR SENATE BILL 2520, RELATING TO BEHAVIOR ANALYSIS

Senate Committee on Ways and Means
Hon. Donovan M. Dela Cruz, Chair
Hon. Gilbert S.C. Keith-Agaran, Vice Chair

Wednesday, February 28, 2018, 10:45 AM
State Capitol, Conference Room 211

Honorable Chair Dela Cruz and committee members:

I am Kris Coffield, representing IMUAlliance, a nonpartisan political advocacy organization that currently boasts over 400 members. On behalf of our members, we offer this testimony in strong support of Senate Bill 2520, relating to behavior analysis.

Hawai'i's special needs students are performing below grade level in both reading and mathematics. For the 2016-2017 school year, the statewide achievement gap between high needs students—which includes special education children, English language learners, and economically disadvantaged students—and non-high needs students was 33 percent for language arts and 28 percent for math. While State Superintendent Christina Kishimoto and the Hawai'i State Board of Education have made closing the achievement gap between special needs and general education students their top priority, doing so requires investing in additional resources for special education students, including behavior analysis services.

IMUAlliance is one of the state's largest victim service providers for survivors of sex trafficking. Over the past 10 years, we have provided comprehensive direct intervention services to 130 victims, successfully emancipating them from slavery and assisting in their restoration, while providing a range of targeted services to over 1,000 victims in total. Each of the victims we have assisted has suffered from complex and overlapping trauma, including post-traumatic stress disorder, depression and anxiety, dissociation, parasuicidal behavior, and substance abuse. Trafficking-related trauma can lead to a complete loss of identity. A victim we cared for in 2016, for example, had become so heavily trauma bonded to her pimp that while under his grasp, she couldn't remember her own name.

Sex trafficking is a profoundly violent crime. The average age of entry into commercial sexual exploitation is 13-years-old, with 60 percent of trafficked children being under the age of

16. Approximately 150 high-risk sex trafficking establishments operate in Hawai'i. An estimated 1,500-2,500 women and children are victimized by sex traffickers in our state annually. Over 120,000 advertisements for Hawai'i-based prostitution are posted online each year, a number that is rapidly increasing as technology continues to outpace the law. More than 80 percent of runaway youth report being approached for sexual exploitation while on the run, over 30 percent of whom are targeted within the first 48 hours of leaving home. With regard to mental health, sex trafficking victims are twice as likely to suffer from PTSD as a soldier in a war zone. Greater than 80 percent of victims report being repeatedly raped and 95 percent report being physically assaulted, numbers that are underreported, according to the United States Department of State and numerous trauma specialists, because of the inability of many victims to recognize sexual violence. As one underage survivor told IMUAlliance prior to being rescued, "I can't be raped. Only good girls can be raped. I'm a bad girl. If I *want* to be raped, I have to *earn* it."

The victims with whom we work often do not meet the stereotypical profile of a special needs student. They are frequently children who, prior to being enslaved, were academic all-stars. They were honor students, cheerleaders, athletes, and campus role models. Now, however, they are highly traumatized, often learning disabled, and in need of major behavioral modification. Our survivors struggle when they go back to school because their trauma leaves them with a range of emotional and cognitive challenges that make the classroom setting difficult to navigate. They require school accommodations, comprehensive wraparound services, and the behavioral assistance that behavior analysts are uniquely qualified to provide. They demand our help. They deserve our heart.

To support our most vulnerable children, we ask your committee to support this bill.

Sincerely,
Kris Coffield
Executive Director
IMUAlliance

Date: February 28, 2018

To: Sen. Donovan Dela Cruz, Chair and Sen. Gilbert S.C. Keith-Agaran, Vice Chair

Hearing: Wednesday, February 28, 2018, 10:45 am, Conference Room 211

From: Linda D. Hufano, Ph.D.
(808) 258-2250

Re: Testimony in Support of SB2520 as Amended by the Hawaii Psychological Association (HPA)

Chapter 465 of the Hawaii Revised Statutes expressly defines behavior analysis and therapy as within the scope of psychology, as well as our ability to supervise and direct assistants. The lack of clarification in ACT 199 has resulted in misinterpretations by state agencies and some insurance companies who mistakenly interpret ACT 199 as excluding ABA-trained psychologists and other ABA-trained licensed or credentialed professionals from designing ABA programs for eligible individuals and/or supervising others to implement the programs.

As a behaviorally-trained psychologist I have worked in the DOE, CAMHD and private sector for over 30 years. I strongly support the inclusion of ABA-trained licensed psychologists and other ABA-trained mental health professionals in the current funding request for licensed behavior analysts to assist the DOE in providing behavioral interventions for eligible students.

Why Should Individuals, Schools and Families Have Access to ABA-trained Psychologists and other Mental Health Professionals

If Chapter 465D of the Hawaii Revised Statute continues to be misinterpreted as restricted to professionals certified by the Behavior Analyst Certification Board (BACB) and so broad as to be required for ***any*** person who could benefit from a behavioral intervention, there will be a significant lack of personnel for decades.

The Hawaii workforce needs every qualified provider, including the many licensed/credentialed employees working within the DOE who are competent and trained to design, implement and supervise paraprofessionals in providing ABA services. We not only need to maintain the current workforce, we need to be able to build the workforce in terms of numbers and to further develop the skills of those who work in the schools by providing them with assistance, consultation, and on-going training. We cannot expect that every Licensed Special Education Teacher, LBA, or ABA-trained mental health professional for that matter, will have the competence needed to work with individuals across the life span – i.e., from infants/toddlers to adolescents/adults. We also should not expect that any one individual professional will be able to design a behavioral intervention for any student, regardless the needs or challenges they may have. It is for these reasons why we need ABA-trained professionals from multiple disciplines, including in the schools special education teachers, counselors, school psychologists, speech pathologists, O.T.'s, and mental health professionals, with skills and experience applicable to the populations needing the service.

Consider the needs for students with mental health problems. The training of LBA's is in the application of a methodology, applied behavior analysis. The methodology was developed by psychologists but has since been used widely in business, education, and in working with clinical populations. The training of an LBA does not typically include diagnosing or treating mental health disorders. While ABA-trained psychologists aren't seeking to restrict LBA's from working with clinical populations for which they have had supervised experience, students with mental health problems, their teachers and families should have access to/or the option to work with an ABA-trained mental health professional who can diagnose anxiety disorders, clinical depression, and externalizing disorders that have been found to co-occur with autism 30 – 40% of the time. As mental health providers, knowledge of a student's mental health condition can be critical to designing an effective intervention program and evaluating what may need to be tweaked as well as considering other types of treatment that may be beneficial to the student.

Thank you for the opportunity to submit testimony.

SB-2520

Submitted on: 2/27/2018 10:00:24 AM

Testimony for WAM on 2/28/2018 10:45:00 AM

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

Comments:

2/28/2018 SB2520

Good morning,

Chair Dela Cruz, Vice Chair Keith-Agaran and members of the Senate Committee on Ways and Means:

My name is Jeanette White. I've come here today to speak on my behalf of my 5 year old son.

Currently, my son is no longer in the DOE special education system because I have had to pull him out and place him privately where he can get the Behavior Analysis services he needs. The DOE did not allow insurance-covered behavior analysis to happen on campus during school hours. And they would NOT provide it for my son.

My son needs 40 hours a week of ABA therapy. How is he supposed to get 40 hours a week when a majority of that time is spent in school? Are we supposed to come home and start therapy at 4pm until midnight Monday through Friday? That is impossible.

Current law requires that the practice of behavior analysis be administered by qualified licensed individuals. There is a process that must be followed to ensure that those administering therapy are doing no harm.

The DOE is making parents choose between ABA by an unlicensed and often times unqualified individual or leave for the private school system and utilize insurance-covered treatment.

We are fortunate enough to be able to send my son to private school where he is currently receiving services. We may not be so fortunate come August.

Thank you to Sen. Dela Cruz and Rep. Fukumoto who have been there for our family to get my son the help he needs in school. We appreciate any help that we can get to achieve his goals.

I fully support this bill with the hope that the DOE will create the Licensed Behavior Analysts positions needed to have these services provided in school during the school day.

Thank you very much!

Sincerely,

Jeanette White

Committee on Ways and Means
Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice Chair
Wednesday, February 28, 2018 10:45 am
Conference Room 211, State Capitol

**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Aloha Chair, Vice Chair, and members of the Committee,

My name is Dr. Amanda Kelly. I am licensed behavior analyst and formerly a licensed teacher. Despite collaborative efforts, I have not been able to work together with the administrators of the DOE in finding solutions to the barriers in implementing Chapter 465-D.

Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions.

Medicaid is required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki. Currently the DOE does not provide applied behavior analysis (ABA) by Licensed Behavior Analysts (LBAs) or Registered Behavior Technicians (RBTs).

If funding is truly the primary barrier in increasing the availability and accessibility of ABA within the DOE, then SB 2520 provides a solution. Once additional funding is made available, ABA should be more readily accessible to our children. If it is not, then we must look to barriers outside of funding.

Mahalo for introducing this bill in support of our teachers, our keiki, and SB 2520.

Committee on Ways and Means
Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice Chair
Wednesday, February 28, 2018 10:45 am
Conference Room 211, State Capitol

**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Frankie Servetti
1148 Kupulau Drive | Maui
fscmaui@gmail.com

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Mahalo for introducing this bill in support of our teachers, our keiki, and SB 2520.

Committee on Ways and Means
Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice Chair
Wednesday, February 28, 2018 10:45 am
Conference Room 211, State Capitol

**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Dr. Lori Babbitt
23 Kahoea Pl | Maui
lgbabbs@gmail.com

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Kevin Abella
15-1867 4th Avenue | Hawai'i
kevinabella04@gmail.com

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Kim Wolff
58-117 Kaunala St | Oahu
kwolffbcbca@gmail.com

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Cathryn Langan - PARENT
2953 Kalihi St. Apt. A, Honolulu, HI 96819
cathryn.langan@gmail.com

As a parent of a child on the autism spectrum, I want a Registered Behavior Technician; someone trained in understanding behavior, working with my child. Someone with an autism specific credential may not know how to work fully with my child, who yes, is a child with autism but is also so much more than that. Also, I feel uneasy about licensed psychologists overseeing treatment, as there is no guarantee that a licensed psychologist will adequately know how to work with my child from a behavioral perspective. I strongly support this bill which will allow schools to "provide special education and specific services tailored to meet unique needs of students with disabilities," as outlined in PL 94-142. I personally am uneasy about sending my child to a DOE school to start in kindergarten this fall because I have seen many children fall behind because they were not provided with adequate services which could have been improved by having LBAs assisting with their service plans.

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**SB 2520 Relating to Behavior Analysis
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Linda Barton
92-1491 Aliinui Dr. | Oahu
lindaasolla@gmail.com

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Jason Barton
92-1491 Aliinui Dr | Oahu
cheer1445s@netscape.net

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Jeanette Irvine - PARENT
95-1044 Ainamakua Dr. H Mililani | Oahu
jeanetteirvine@gmail.com

As a parent whose child has benefited from ABA and is now completely independent, I advocate for licensed ABA professionals. Without having had professionals who were credentialed I know my child would not be as successful as he is today.

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Sheryl Cunningham - PARENT
91341 Ewa Beach Road
sherylcunn808@gmail.com

My son has made huge progress thanks to ABA services. He has been accepted into a private school only because he receives ABA services and the DOE will not allow him to have ABA services.

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Maile Rogers - PARENT
68-386 Kikou St. Waialua, HI 96791 | Oahu
maile_m@yahoo.com

My son is autistic. He's considered "high functioning" because he's smart, has a large vocabulary, and can do math problems in his head. But high functioning doesn't mean that his autism doesn't affect him, sometimes very severely, in ways that others can't see or don't interpret as struggling. He has issues socially, emotionally, and behaviorally.

I told Waialua elementary about all the issues my son had before he ever started kindergarten. I asked them to please evaluate him, and told them multiple times that our family was struggling and we were in crisis mode. We were repeatedly told that he was normal, not to worry. In the meantime, since the school wasn't doing anything, we had him privately evaluated and he was given a diagnosis of autism and ADHD. He was constantly in trouble in school, struggling daily. After they suspended him twice for behavior issues directly related to his disability, which I had already repeatedly asked for help with, I got an advocate and they immediately started due process proceedings since the school had broken every single rule. My son spent most of his time with the regular school counselor, who was absolutely not trained to deal with any of his issues. After his autism diagnosis, the school sent an autism consulting teacher in to come to meetings, he said my son had absolutely no issues. At no point during kindergarten did my son spend time with the Autism consulting teacher, or the school behavior health specialist, or the clinical psychologist, or the school psychologist. He went his entire kindergarten year with no services, continually being punished rather than supported. We had a summer of struggles, which included an incident where the principal took it upon himself to approach my child, who was sitting quietly calming himself down with his one to one aid that I paid for out of pocket for summer fun, he proceeded to yell at my tiny 6 year old, and pounding his fists on the table while my disabled child cowered. When school started again, I asked AGAIN to have my son evaluated. At this point we've had a diagnosis on hand for a year. The school again refused. They did offer to have the clinical psychologist perform an FBA. When we received the report, we realized that it was extremely lacking, and that Dr. McDonald clearly did not have FBAs in her scope of abilities. Based on this flawed report, we won our due process case and the school was forced to finally perform a full evaluation on my son. In the short time since my son's diagnosis, we have had a lot of interactions with psychologists, psychiatrist, play therapists, and behavioral therapists. Having my child sit on a couch and talk to a behavior health specialist twice a week for 30 minutes can in NO WAY compare to the impact behavior therapists (BCBAs and RBTs) have had spending hours and hours every week with my son, going through his daily routines until he encounters struggles so they can repeatedly work through those struggles with him until he's finally able to do it on his own. There simply is no comparison. In addition, I have overwhelmingly felt that the behavior analysts and behavior technicians have been so much more compassionate, incredibly

**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

patient, and willing to spend so much time learning about Jaxon and what makes him tick, rather than just forcing him to conform regardless of any struggles he might be having- which is what we've gotten from everyone in a DOE setting. Please help our keiki. Please give them every opportunity to succeed in life.

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Testimony in STRONG SUPPORT**

Ililani Foree - PARENT
PO box 44669 | Hawai'i
irc4ee@yahoo.com

My son is being denied services and being harmed. I believe that the DOE needs to provide the right people to do assessments to get all the needed services and resources that my son needs to be in a safe educational environment at his school. In fact I believe that it is doing my son an injustice because he could be put in possible danger with not receiving the right services. I find that knowingly that my son needed a crisis plan to be done right away that this would be a high priority to be done correctly and in an affective why it wasn't I find it highly unethical as a professional and here are the following reasons:

- Improper assessment
- lacking recommendation of a behavior analyst
- resulting in harm and delayed access to treatment (do we pull him out of school to keep him safe)
- They ignored and minimized concerns brought to light by Aiden's crisis plan - neglected to mention Aiden's ambulance or hospitalization
- neglected to include relevant occurrences of behavior (11/22/17, 9-1-1 called, restrained, urinated himself) - provided a draft of his report
- The Agency did not provide the report before meeting, meaning we had to cancel our son's IEP meeting, further delaying us access to answers and proper care.

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Amy Grant
61-280 Kamehameha Hwy | Oahu
amyjean1984@gmail.com

Our Keiki deserve access to ABA services. ABA should never be a “last resort” it should be the gold standard! We demand our Keiki be put FIRST!! Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent’s memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

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Testimony in STRONG SUPPORT**

Ashley Monden
ashley.monden@student.chaminade.edu

This is my first year working as a licensed Special Education Teacher in the Department of Education and I'm currently seeking my licensure as a Board Certified Behavior Analyst. Before this I was a 1:1 paraprofessional and an Educational Assistant both here on Oahu and on the Big Island. As a 1:1 I've experienced what it's like to work with high needs student who needs the direct supervision of an adult. I went to numerous trainings, looked online for strategies that could give me insight, talked to DOE autism consultants, and supervisors. None of them could give me feedback or show me by example on how to help my students. Over the years I found Applied Behavior Analyst (ABA) strategies and tried them with my students. Through trial and error I saw improvements. I worked with various different disabilities and found that ABA strategies make a big difference when consistent and done the right way. After working 8 hours in my classroom, I work in the evenings and weekends as a Registered Behavior Technician (RBT). This summer I worked with a child who received 6 hours of ABA therapy in the home setting and in as little as 3 months made a lot of gains such as now being able to sit to finish a task, respond to his name, and verbally saying what he wants instead of being aggressive! If our students receive the same support within the school day imagine the outcome! In the DOE school setting we are already failing our keiki by having untrained 1:1's who are just there as an extra body. By allowing LBA (Licensed Behavior Analyst) in the school would only add strength to our educational system and show that we truly do support our teachers who have the biggest jobs "educating our keikis". Why do we want to allow our keikis to fail when we are constantly pushing for success!?

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Jeaustine Larson - PARENT
2249 Elou St | Oahu
larson905@yahoo.com

We have lived in Hawai'i for a little over two years. In those two years, it has taken us over 20 months to finally get our son, who is autistic, an IEP. We finally got one put in place about two months ago. We were previously told, "as long as his grades are good, his lack of social skills is not our concern." We also had an incident with his first ABA company; they were providing services with uncredentialed direct support workers (DSW). This resulted in little to no progress made for our son and very poor services. The Behavior Analyst Licensure law needs to stay and be implemented. General Psychiatrists and Psychologists are not trained in autism, the way Licensed Behavior Analysts (LBAs) are. They do get training, but it is not as extensive as is required by the Behavior Analyst Licensure law. Our children deserve the best we can offer them, not the minimum that exists.

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Testimony in STRONG SUPPORT**

Roger Larson - PARENT
2249 Elou St | Oahu
larson905@hotmail.com

My name is Roger Larson. I am the father of a SPED student at Wheeler Middle School in the Central District on Oahu. I am submitting testimony opposing the DOE's proposal of changing Chapter 465-D. Our children are our future. When teachers instruct their students, we build the foundation for equality and prosperity for tomorrow's generations. Every dollar invested in our community's public schools yields exponential returns, not just for our economy, but also for the promise of a more open and democratic society. We need to keep and strictly enforce Chapter 465-D in our public schools to ensure that teachers and students both have the assets needed to help our keiki succeed. Several administration members at my son's school have stated that they are not qualified to handle my son's issues or adequately support him. They also state that they would love to do more and do the right thing for my son but are told by their district and DOE leadership to not comply with State laws and regulations regarding autism support as it is "not required based off their interpretation." It is a shame that a military family has had to fight for over two years to finally begin to get the care my son needs. We still have a long way to go in that regard since the district and state DOE leadership has been extremely unhelpful and has attempted to undermine the care of our children by threatening teachers and support workers. This is a matter of support for our children's future! We need your help.

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Mahalo. Roger Larson

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Stephanie Phelan | stephanie.h.phelan@gmail.com
66-059 Alapii St., Haleiwa, HI 96712, Oahu

My name is Stephanie Phelan, I am a practicing Licensed Behavior Analyst in Hawai'i and I am writing with concern regarding proposed legislation to change Chapter 465-D, the Behavior Analyst Licensure law. Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

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Sungalina Lee - PARENT
1 Ohana Nui Way HNL 96817 | Oahu
slee@assets-school.net

As a parent, educator and engaged citizen, I am concerned that changing the licensure law, Chapter 465-D, will harmfully affect the most vulnerable of our keikis and families. We are a state who prides ourselves in our values, especially those related to our children and, families so this new effort is not algebras with our values or the needs of teachers, students, parents or our community.

Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

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Sara Dinkelo
2056 A Puu Place, Wahiawa, HI | Oahu
sdinkelo@gmail.com

As a LBA, I can't stress enough the need for our keiki impacted by autism to have access to applied behavior analysis in schools. It's not a methodology but a science with regimented data collections systems to ensure progress and to make program changes based on performance. It is not possible to be "trained" to run an ABA program; it requires credentialed, licensed professionals who abide by strict ethical guidelines to do. Our teachers need support; they cannot teach and be required to do something that is out of their practice. ABA should not be limited to those with severe problem behaviors (however they should be prioritized) but an individual's access to ABA can impact their outcomes across their lifespan. Our keiki have a right to a free and appropriate education. ABA needs to be available to all children who need it and it needs to be provided by licensed professionals (LBAs), or it is not ABA. I support our teachers getting the resources they need to have productive classrooms and help our keiki live productive lives.

Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

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Mahalo for introducing this bill in support of our teachers, our keiki, and SB 2520.

Committee on Ways and Means
Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice Chair
Wednesday, February 28, 2018 10:45 am
Conference Room 211, State Capitol

**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Peggy Brandt - PARENT
3288 Pamakani Place | Oahu
peggy.brandt@gmail.com

Hawai'i's keiki deserve to be supported with the best practices available to them. From my first-hand experience, they will not receive this without legal support.

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Joelle Branch - PARENT
91872 Puhikani St. | Oahu
Jbranch409@yahoo.com

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Josh Wilson
2056a Puu Pl, Wahiawa | Oahu
rollout1983@yahoo.com

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Anastasia Kellercollins
91-129 Nohoihoewa Way | Oahu
anastasiakellercollins@gmail.com

Sometimes it is so hard to do what is right. Sometimes it's too easy not to. Please do what is right. Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

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Corrie Lynn Montalvo
911054 Hoakalei Street | Oahu
kuuipom77@gmail.com

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Andrea Keeseey
66-235A Kamehameha Hwy Haleiwa HI 96712
ak.keeseey@gmail.com

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Lo Edmonds
66-235A Kamehameha Hwy Haleiwa HI 96712 | Oahu
loedmonds@gmail.com

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Rachel Sammis
66-235A Kamehameha Hwy Haleiwa HI 96712
rachelsammis@gmail.com

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Lisa Sakuda
1131 D Wainiha Street, Oahu
lisasak46@gmail.com

If we are pushing for Inclusion in the next school year, the DOE should allow Licensed Behavior Analysts (LBA) to come into the school, and help the teachers write the Functional Behavior Assessment (FBA), and help write Behavior Support Plans (BSP) for the students. We also need Registered Behavior Technicians to help work with the child in the classroom, they are supervised by an (LBA/BCBA). Applied Behavior Analysis does not only help children diagnosed with Autism, it can also help other children in the classroom, and it can help the teachers as well. Your teachers need help; they are tired at the end of the day. They feel the pressure with all the testing required by them, they do not need added stress by asking them write an Functional Behavior Assessment (FBA) on a student. They know nothing about writing an FBA. Would you want someone who is not a Licensed Surgeon to operate on your child? Help you teachers; they work very hard for our children. By not allowing ABA in the school, we are not hurting ourselves, but we are hurting the children, and we are making special education teachers want to quit. I have a couple of Special Education teachers who say they are very tired, and drained at the end of the day. They feel like they do not have the support they need. All they want to do is teach the children. We want the best for our keiki, and they deserve the best education. Put yourself in a SPED teacher shoes, put yourself in a child's shoes, and put yourself in a parent's shoes. How would you want your child, grandchild, niece or nephew to be treated, what kind of education would you want for your family?

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Christina Libby
41-611 Inoaole St Waimanalo Oahu 96795
clibby@mauloalearning.com

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Nikole Ross
94-232 Emoloa Pl | Oahu
nikole.ross82@gmail.com

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Melissa Urquidi - PARENT
1620 Ala Aoloa Lp | Oahu
melissaurquidi@hotmail.com

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Shanda Strickland
PO Box 894811 Mililani | Oahu
ssg808@yahoo.com

Any opportunity to improve environments, communication and access to positive, inclusive experiences should not only be utilized, but celebrated. Removing qualifications for those who directly impact the fundamentals of keiki, teachers, school and families, is in direct conflict with the philosophy and commitment of those who promise to aid our keiki.

To those promoting this declination - I respectfully challenge you to imagine a system that, intentionally or not, promotes a culture of inequality and inadequate care, a ranking system and segregation of preferred diagnosis and community exclusion. Perhaps this decision can benefit by asking you, "Who comes to mind when you discuss adequate and sufficient training, support, regulation and care?" Is it a person in your Ohana? Your neighborhood? Your church? Your community? Your employment? I beg to differ if you say "no one." "No one" is not an option, because it is everyone. Everyone is affected because "that person" we reference is someone's child who is currently in our public education system, or our department of health system, that "that person" is a friend, a neighbor, a community member that is equally deserving of scientifically proven approaches to minimize barriers and increase access to reinforcement. I doubt you say "no one" though, because you - like all of us, are affected and I hope you are equally driven to promote sustainable and ethical interventions. Scientifically proven interventions, not just adequate training but rather a higher criterion of clinical expectations and knowledge base that demands a base level of care, clinical oversight, ongoing education and supervision. One far above what you are promoting. Those who are promoting this Bill - I encourage you to reference our professional code of ethics and for some, your oaths. Reference FAPE, IDEA/IDEIA, ADA, Felix Decree and Luke's Law. I ask you to truly listen to those state and federal regulations, learn from our past mistakes and look to yourself and those around you, to improve our system, not break it down. It should not be needed to encourage you to be and do pono.

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Naomi Tachera - PARENT
PO Box 6388 | Hawai'i
nkaae@Hawai'i .edu

Aloha, My name is Naomi Tachera; I live on Hawai'i with my family including two sons Kaiao (7) and Kaleohano (5) with autism spectrum disorder. They are currently enrolled in public education and receive special education services with IEP's, what's not included in their IEP's is applied behavior analysis, despite years (since 2014) of advocating for FAPE under IDEA. The IEP teams are not taking into consideration the level of my children's disability and how autism impedes their ability to access a free and appropriate education with the use of ABA provided by a Board Certified Behavior Analyst licensed in the State of Hawai'i . Despite the fact that the DOE has lost in the ninth circuit court (R.E.B vs. State of Hawai'i DOE) in February 2017 because "DOE violated the IDEA by failing to specify Applied Behavioral Analysis ("ABA") as a methodology in the IEP" and after the passing of Chapter 465D Behavior Analyst Licensure Law in 2016, the DOE makes no effort to hire BCBA's working in that capacity. They instead are asking for an exemption to NOT provide FAPE in addition to restrictions set forth by an "IEP Team decision" on whether or not a student needs ABA only after they've exhausted all other strategies that do not work. That's taking away time from our precious children! If this analogy were the medical field and everyone that works in the hospital can claim to be a medical doctor or perform medical procedures, then consumers cannot be protected from malpractice. The reason why only people with demonstrated competency (i.e. BCBA competency in ABA) should practice in their scope of practice is for consumer protection. If the Legislation decides to support the DOE with this exemption regarding Chapter 465D, families, including myself will start to sue public school employees individually because of their involvement in violations of the Individuals with Disabilities Education Act (Crofts v. Issaquah School District). My entire family continues to suffer from overwhelming stress, hardship, and harassment from DOE staff members for advocating for our two children, no family deserves this treatment, no child with a disability deserves to be forgotten, and no community deserves to watch the most vulnerable members suffer.

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Eric Tachera - PARENT
PO Box 6388 | Hawai'i
kealiiloa@yahoo.com

Aloha, My name is Eric Tachera; I live on Hawai'i with my family including two sons Kai'ao (7) and Kaleohano (5) with autism spectrum disorder. They are currently enrolled in public education and receive special education services with IEP's, what's not included in their IEP's is applied behavior analysis, despite years (since 2014) of advocating for FAPE under IDEA. The IEP teams are not taking into consideration the level of my children's disability and how autism impedes their ability to access a free and appropriate education with the use of ABA provided by a Board Certified Behavior Analyst licensed in the State of Hawai'i. Despite the fact that the DOE has lost in the ninth circuit court (R.E.B vs. State of Hawai'i DOE) in February 2017 because "DOE violated the IDEA by failing to specify Applied Behavioral Analysis ("ABA") as a methodology in the IEP" and after the passing of Chapter 465D Behavior Analyst Licensure Law in 2016, the DOE makes no effort to hire BCBA's working in that capacity. They instead are asking for an exemption to NOT provide FAPE in addition to restrictions set forth by an "IEP Team decision" on whether or not a student needs ABA only after they've exhausted all other strategies that do not work. That's taking away time from our precious children! If this analogy were the medical field and everyone that works in the hospital can claim to be a medical doctor or perform medical procedures, then consumers cannot be protected from malpractice. The reason why only people with demonstrated competency (i.e. BCBA competency in ABA) should practice in their scope of practice is for consumer protection. If the Legislation decides to support the DOE with this exemption regarding Chapter 465D, families, including myself will start to sue public school employees individually because of their involvement in violations of the Individuals with Disabilities Education Act (Crofts v. Issaquah School District). My entire family continues to suffer from overwhelming stress, hardship, and harassment from DOE staff members for advocating for our two children, no family deserves this treatment, no child with a disability deserves to be forgotten, and no community deserves to watch the most vulnerable members suffer.

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Jolie Kaae - GRANDPARENT
PO Box 6388 Kamuela, HI 96743, Hawai'i
kaaeohana@aol.com

Aloha, My name is Jolie Kaae; I live on Hawai'i with my family. I have two grandsons Kai'ao (7) and Kaleohano (5) who have autism spectrum disorder. They are currently enrolled in public education and receive special education services with IEP's, what's not included in their IEP's is applied behavior analysis, despite years (since 2014) of their parents advocating for FAPE under IDEA. The IEP teams are not taking into consideration the level of my grandchildren's disability and how autism impedes their ability to access a free and appropriate education with the use of ABA provided by a Board Certified Behavior Analyst licensed in the State of Hawai'i. Despite the fact that the DOE has lost in the ninth circuit court (R.E.B vs. State of Hawai'i DOE) in February 2017 because "DOE violated the IDEA by failing to specify Applied Behavioral Analysis ("ABA") as a methodology in the IEP" and after the passing of Chapter 465D Behavior Analyst Licensure Law in 2016, the DOE makes no effort to hire BCBA's working in that capacity. They instead are asking for an exemption to NOT provide FAPE in addition to restrictions set forth by an "IEP Team decision" on whether or not a student needs ABA only after they've exhausted all other strategies that do not work. That's taking away time from our precious children! If this analogy were the medical field and everyone that works in the hospital can claim to be a medical doctor or perform medical procedures, then consumers cannot be protected from malpractice. The reason why only people with demonstrated competency (i.e. BCBA competency in ABA) should practice in their scope of practice is for consumer protection. If the Legislation decides to support the DOE with this exemption regarding Chapter 465D, our family, our community will start to sue public school employees individually because of their involvement in violations of the Individuals with Disabilities Education Act (Crofts v. Issaquah School District). My entire family continues to suffer from overwhelming stress, hardship, and harassment from DOE staff members for advocating for our two grandchildren, no family deserves this treatment, no child with a disability deserves to be forgotten, and no community deserves to watch the most vulnerable members suffer.

Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

Committee on Ways and Means
Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice Chair
Wednesday, February 28, 2018 10:45 am
Conference Room 211, State Capitol

**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

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Mahalo for introducing this bill in support of our teachers, our keiki, and SB 2520.

**SB 2520 Relating to Behavior Analysis
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Kaleo Kaae - GRANDPARENT
PO Box 6388 Kamuela, HI 96743 | Hawai'i
kaaeohana@aol.com

Aloha, My name is Kaleo Kaae; I live on Hawai'i with my family. I have two grandsons Kaiao (7) and Kaleohano (5) who have autism spectrum disorder. They are currently enrolled in public education and receive special education services with IEP's, what's not included in their IEP's is applied behavior analysis, despite years (since 2014) of their parents advocating for FAPE under IDEA. The IEP teams are not taking into consideration the level of my grandchildren's disability and how autism impedes their ability to access a free and appropriate education with the use of ABA provided by a Board Certified Behavior Analyst licensed in the State of Hawai'i. Despite the fact that the DOE has lost in the ninth circuit court (R.E.B vs. State of Hawai'i DOE) in February 2017 because "DOE violated the IDEA by failing to specify Applied Behavioral Analysis ("ABA") as a methodology in the IEP" and after the passing of Chapter 465D Behavior Analyst Licensure Law in 2016, the DOE makes no effort to hire BCBA's working in that capacity. They instead are asking for an exemption to NOT provide FAPE in addition to restrictions set forth by an "IEP Team decision" on whether or not a student needs ABA only after they've exhausted all other strategies that do not work. That's taking away time from our precious children! If this analogy were the medical field and everyone that works in the hospital can claim to be a medical doctor or perform medical procedures, then consumers cannot be protected from malpractice. The reason why only people with demonstrated competency (i.e. BCBA competency in ABA) should practice in their scope of practice is for consumer protection. If the Legislation decides to support the DOE with this exemption regarding Chapter 465D, our family, our community will start to sue public school employees individually because of their involvement in violations of the Individuals with Disabilities Education Act (Crofts v. Issaquah School District). My entire family continues to suffer from overwhelming stress, hardship, and harassment from DOE staff members for advocating for our two grandchildren, no family deserves this treatment, no child with a disability deserves to be forgotten, and no community deserves to watch the most vulnerable members suffer.

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**SB 2520 Relating to Behavior Analysis
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Olympia Frink - PARENT
66-916 Kuewa Dr Waialua, HI 96791 | Oahu
supgirl77@gmail.com

Our schools need behavior analysts, particularly Licensed Behavior Analysts (LBAs) and Registered Behavior Technicians (RBTs) to get our special Ed children the education they deserve. The teachers and current professionals are too few on campus, and have proven they are not able to provide the proper support in reference to kids with autism. Even though our childrens' principal has been willing to work with our ABA providers, district administrators have not figured out how to do so.

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Kenny Frink - PARENT
66-916 Kuewa Dr Waialua, HI 96791
kennyfrink71@gmail.com

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Tyler Rogers - PARENT
68-386 Kikou St. Waialua, HI 96791 | Oahu
rogerstyj@hotmail.com

ABA is needed in Hawai'i schools. Our keiki have been waiting. DOE needs to work with Behavior Analysts. Psychologists are useful team members, but are no replacement for experts in ABA. My son is autistic. Rather than getting proper support in school, he has been suspended multiple times for things directly related to his disability because the school doesn't know how to handle children with behavior issues. He needs the support of licensed behavior analysts in the school setting to help supplement the therapy he already has access to in the home through our private insurance. Please help our keiki.

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Tara Ormond - PARENT
70 Niuhi Street | Oahu
tara.ormond07@gmail.com

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Carla Jager
95-1517 Ainamakua Drive Apt 87 Mililani | Oahu
carla.jager94@gmail.com

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**SB 2520 Relating to Behavior Analysis
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Leanne Nagai
2471 Auhuhu Street | Oahu
nagai.leanne@gmail.com

Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

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Alexandra Sagastume
1255 Nuuanu Avenue | Oahu
aps88@comcast.net

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Testimony in STRONG SUPPORT**

Vania Simmons - PARENT
68025 Apuhihi St | Oahu
brazilnut@Hawai'i .rr.com

We definitely need more parents with children on the spectrum in Congress! Only those parents truly understand the needs of the children with autism. Applied Behavior Analysis is a scientifically validated approach to understanding behavior and how it is affected by the environment and a known strategy to change/modify the behavior of children on the spectrum.

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**SB 2520 Relating to Behavior Analysis
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Celeste Nishijima
98-410 Koauka Loop, Apt. 6G | Hawai'i
celesterodrigues92@gmail.com

As an RBT and an individual pursuing my BCBA credential, I believe that our teachers and keiki deserve the best support available. Our teachers work extremely hard everyday to teach our keiki, and the support of licensed behavior analysts and RBTs will help teachers to ensure that all keiki have access to an appropriate education. Chapter 465-D ensures that our keiki have access to applied behavior analysis services by licensed behavior analysts and RBTs. Our keiki are the future, and they deserve the evidence-based treatment of ABA delivered by licensed professionals. We need to give our keiki the very best we have to offer!

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Michelle Lam
3938 Kilauea Ave. | Oahu
michelle_l_808@yahoo.com

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Debi Hoohuli-Rosa | 506 Kumulani Dr | Maui | debi.hoohuli@gmail.com

What happens when non-licensed and non-credentialed individuals attempt to practice or implement behavior analytic procedures? I moved to Maui in 2014 and worked for a contracted agency as a Skills Trainer within the Department of Education (DOE). I initially worked in a fully self contained classroom overseen by a Special Education Teacher who was so bogged down by paperwork she had little to no time to spend teaching the keiki. There were keiki in the classroom who had problematic behaviors, including but not limited to, aggression, self-injurious behaviors and elopement. One of the keiki's parents requested a Board Certified Behavior Analyst (BCBA) consultation, specifically stating that they were interested in receiving an updated Behavior Support Plan (BSP) for their keiki. A District Autism Consultant (no identifiable licensure) came to the classroom several times and within the course of her visits made scientifically impractical and potentially harmful biomedical, non-evidenced based recommendations such as: chelation therapy and gluten-free/casein free diet. When parents asked if these were ABA interventions, she stated, "ABA means a lot of different things, these interventions would be considered ABA." The interventions were considered by the parents but ultimately not utilized. No recommendations were made to the teacher for the classroom other than, "use trialing - an ABA method - to teach him to communicate." The teacher was then provided with a template form and advised by the Autism Consultant Teacher (ACT) to write a Behavior Support Plan (BSP) based on information received from the Paraprofessional (1:1 assistant). This resulted in an ineffective and non-functional BSP. The following year, I witnessed a District Autism Educational Assistant, who after 6 months of working with a keiki with severe behaviors without a BSP in place, make a formal recommendation to a parent of a child with ADHD and Autism that included the purchase and use of CBD, a cannabis compound! Since then I have worked at 19 different schools on the of Maui, including two private schools and have on several occasions witnessed support staff, administrators, and teachers engage in unethical behavior including social disapproval, shaming, physical abuse, and inappropriate restraints and seclusion in attempts to intervene on inappropriate and problematic behaviors that our keikis engage in. The majority of the occurrences that I witnessed involved keiki who had poorly written or no Crisis or Behavior Support Plans (BSP). Further investigation determined that the majority of the BSPs the staff were directed to implement were not based on Functional Behavior Assessments (FBA), per federal law, and in fact, several were actually based on a template distributed to Behavior Health Specialists (BHS), School Psychologists and teachers by the District Consultants. Faulty BSPs developed by unlicensed individuals, implemented by non-credentialed individuals result in due process hearings, teacher and direct care staff burn out, high turnover rates of front line staff, and severe injury to staff and keiki, as well as the unethical treatment of staff and keiki. Our most vulnerable keiki are placed in harm's way when non-licensed and non-credentialed individuals attempt to practice or implement behavior analytic procedures.

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Aimee Watkins
Po box 1237 Kapaau HI 96755
aimeemalialani@hotmail.com

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Chelsey Mendoza
P.O. Box 492535 Keaau | Hawai'i 96749
chelseysalomon@gmail.com

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Trisha Petit - PARENT
4192 Keanu St., #4 | Oahu
tpetit808@outlook.com

The DOE has already been violating the law.

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Lohea Merola - PARENT
75-6081 Alii Drive X103, Kailua Kona, HI 96740
llimmerola@gmail.com

My son was diagnosed with autism spectrum disorder. He has grown leaps and bounds due to a program he was fortunate to be a part of that included an RBT and a BCBA. Since he has been in the DOE progression has been minimal and the teacher often asks me why my son does not perform and she does not know how to work with my child on skills like eating and doing schoolwork. I have asked for additional support in the classroom and they cannot provide anyone to work on specific skill sets that will set my child up for success in his educational career. I have only asked for the teacher to take data and for us to work together on a program of how to teach my son and what skill sets we should focus on, but what is happening currently in the school does not replace ABA therapy. I know this first hand because my son is not progressing at the speed that he did when he was immersed in an ABA program.

Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

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Mahalo for introducing this bill in support of our teachers, our keiki, and SB 2520.

Committee on Ways and Means
Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice Chair
Wednesday, February 28, 2018 10:45 am
Conference Room 211, State Capitol

**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Kaiolohia Tolentino
P.O. Box 2467 | Hawai'i
kaikait55@gmail.com

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Dawn Decoito - PARENT
94-520 Kupuohi Street, Apt 101, Waipahu | Oahu
ddecuito808@gmail.com

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Erin O'Donnell
Po Box 437333 | Hawai'i
nellieod@yahoo.com

Our keiki need and deserve the right type of providers with the qualifications to serve them. As a provider I have seen kids who need special needs behavior analysts to serve them, this can't be done by just anyone and certainly not teachers who need to focus on all the students in a classroom. Give our keiki, their families and teachers the support to help them thrive and grow with the right tools.

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Juri Ishida - Parent
95-024 Waihau St | Oahu
jurishida@gmail.com

I have seen some children with Autism forced to leave DOE due to lack of professional help (ABA). These children, including my child, have so much potential and are able to academically thrive with the help of ABA. Train the direct staffs with ABA under Licensed Behavior Analysts (LBA); have them obtain RBT credentials and the learning environment for both children with Autism and teachers would be so much better. Please take care of our keikis.

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Jesica La Rue - PARENT
Hc2 Box 5726, 16~1703 41st Orchidland | Hawai'i
Divineewon@gmail.com

Our son is a student with DOE on the Big of Hawai'i. His functional skills classroom (FSC – fully self contained) is not supporting his behavioral and educational needs.

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**SB 2520 Relating to Behavior Analysis
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Felicia Clausen - PARENT
5029 Milburn Loop | Oahu
garneyfs@gmail.com

As a parent, we want our children to get the services they are entitled and depend upon. There are many challenges that they face and having a child with Autism- Applied Behavior Analysis (ABA) has become a major key to our home and life. It is important that the provider is licensed. ABA has allowed my child to be able to function around peers, the community and in the home. It has helped with self-injury, tantrums and poor self-regulation. My child has so much grow and has been reaching his potential with the help of his Licensed Behavior Analyst (LBA) and Registered Behavior Technician (RBT). Our children deserve the right to have ABA by licensed providers in the school.

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Nicole Olival
PO Box 732 Hawai'i
dojah8@yahoo.com

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Simone Hawkins
2055 Ala Wai Blvd #502 Honolulu
simonehawkins@teampbs.com

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John Paul (JP) Phelan
66-059 Alapii St., Haleiwa, HI 96712, Oahu

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Corey Wolff
58-117 Kaunala St | Oahu

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Lawson Cosseboom
61-280 Kamehameha Highway
Haleiwa, Oahu

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Nikki Shigematsu
P.O. box 324 | Hawai'i
nikkishigematsu@yahoo.com

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Testimony in STRONG SUPPORT**

Marija Colic
1645 Ala Wai Blvd Apt 508
colicmarija@outlook.com

I am new to Hawai'i, but not new to quality services. As a provider, I know the value of licensed and appropriately credentialed staff. Let's do the right thing for our keiki.

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Dawna Moody - GRANDPARENT
70 Niuhi Street | Oahu
dawna_moody@yahoo.com

My grandson has a doctor's diagnosis of autism but it has taken 18 months for his school to accept this diagnosis and allow him to receive services. He was denied over and over. The principal and others vehemently fought to discourage this family from getting the services and support in school that he needed. The problem is that we have been down this road before. We had to fight for OUR son to get services back in the 1990's. We had to sue the DOE. Which worked. In our grandson's case every avenue was explored but it too came down to a lawsuit. The imminent threat resulted in him FINALLY receiving the services he was legally due for the past 18 months. And now the DOE would like to do away with the very thing that makes it possible for many of these severely affected children to be able to function in the world. Having behavior analysts follow these children and support them to learn and grow is vital to their ability to make sense of their very confused perception of what is happening around them every day. The DOE has refused to train and hire licensed, trained professionals that would be available to work in the schools, hand in hand with the educators. The DOE has prohibited teachers from receiving further training and even gone as far as threatening the jobs of teachers who had expressed a desire to receive further training that would help them with these lost children. I oppose the DOE's desire to take away the requirement to provide one-on-one support to those children most in need. The DOE has been lazy and stubborn in not realizing that this is a new world. We have the ability to diagnose disabilities much earlier and provide the needed support. We can help these children navigate the education system successfully. Don't allow the DOE to take away something that was fought so long and hard for by LUKE, his family, and many others who have remained unnamed. Don't make lawsuits the only stick that can force compliance.

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Kahalenoe Kamalani
95-169 Kipapa Drive 33 | Oahu
kpk@Hawai'i .edu

I am a strong believer in learning through failure and I can even say that some of my most profound learning experiences arose from my failures. In fact, I believe in failing so much that I allow my children fail and then rejoice with them when they come back stronger and smarter from those failures. I can do this because my children are equipped with the tools to succeed and persevere despite those setbacks. However, for most individuals with disabilities- failure is not an option, in fact, in many cases it can be detrimental to their long term success. We actually have to do the exact opposite, which is continually ensure that we set them up for success. We set up learning situations where they can get it right. Using the principles of behavior through applied behavior analysis (ABA), we can help our most vulnerable students to be successful. ABA should not be used as a last resort; instead, it should be accessible to every child that can benefit from this science. The longer the learning history, especially when failure is involved, the harder it is for the student. Why put our children who already struggle through even more unnecessary struggle by postponing effective treatment as a last resort.

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Kaiki Gunderson-Cook
PO Box 343 Kamuela, HI 96743
risingtide80@hotmail.com

The DOE needs to support the children of Hawai'i . Resources should be offered for educational opportunities, not taken away. This includes children with autism. The DOE should provide this support by having Licensed Behavior Analysts who understand ABA, because they understand the needs of the children. These children will grow up and become a part of our everyday community. We need to make sure they are supported as much as possible in the classroom to teach, mold, and promote the best person that each child can become. We want them to thrive and become an active community member as adults.

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Rachel Sanchez - PARENT
rsanchez701@yahoo.com

I would like to share our personal journey about our son Julian diagnosed with autism/speech delay at the age of 3 years old. After his diagnosis, we started with enrolling him in an ALL day Early Childhood Program located at our nearest elementary school. Along came additional services needed outside of school to include, speech therapy, occupational therapy, physical therapy, and ABA services. In order to make sure we did everything for my son that was needed, we only relied on reputable companies in our area. I can say that throughout the years Julian progressed but this is also due to the fact that we had exceptionally trained therapists in our home. It was intense therapy as he grew to age 7-10 years old. We had a trained therapist in our home 2 hours a day 5 days a week while I homeschooled some of the years and kept all of his therapy appointments and social/community programs going. All of our therapists interacted so that each knew what was being worked on with Julian. I also provided details and had to keep on top of all of it. I couldn't imagine having someone untrained in the specific ABA methods used for my son at the time. It's because of those trained individuals, that I attribute his amazing success back into a great public high school, with minimum supports now because of his independence and becoming a wonderful student academically and socially. He is now 14yrs. old What an amazing journey thus far and looking forward to what's ahead for him. I'm grateful for our trained ABA Therapists whom were so dedicated to Julian and us as our family needed so desperately in his younger years. I ask that my testimony be attributed to keeping only trained ABA Therapists in our schools and outside reputable companies who specialize in ABA. It's truly detrimental to our children's progress.

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Thank you for your time in reading our story. Rachel Sanchez 702-637-8142

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Wendi Park
94-290 Lupua Place
wendihp@msn.com

Knowledge is power, and our children and those supporting our children, teaching our children, and parents loving their children deserve the right to access ABA through and in the DOE. Teachers, Psychologists, Behavior Support Specialists, Speech Therapists, Occupational therapists, are all valued team members, but no one should be replacing another in their role of expertise. Each team member brings knowledge to the table and the Keiki deserve the right to have these specialists working together including an LBA. Our children have no time to waste and the earlier we can help them in all parts of their lives, school, home, and within our communities the better it can be for the individual, their families, our schools, and our state.

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Jeanette Perez | jcperez@Hawaii .edu
16-768 Milo street Keaau HI 96749

I am a licensed special education teacher here in Hawai'i who has since left the classroom due to poor management by administrators, harassment on a personal level by an administrator and no support for special education. I worked at the same school I did my student teaching. I was excited and focused on providing the best care and education to my students. I worked in the fully self-contained classroom for 5 years. Three of those years were with students with multiple disabilities from PreK-5th grade and two were in an "autism" class created by the school. The school has gone through multiple administrators but at one point my concerns were heard and the administration at the time agreed that students on the autism spectrum (ASD) needed a more specialized environment with multiple supports. As the teacher in this class, I struggled with how to support my students. I did receive 2 helpful training's (PECS and TEACCH) from the district office but quickly realized it was not enough. I then heard of Luke's Law and began to read up on it. I then found that Chapter 465-D which is the licensure of Behavior Analyst law in Hawai'i . After reading it and learning more about it, I realized that I was being asked to work outside of my scope and sequence as a teacher. I was not given access to Board Certified Behavior Analyst (BCBA) but was asked to do the work. I was not given training on Functional Behavior assessments or Behavior support plans. This is when I decided to pursue my license in Behavior Analysis. I knew that I wanted to continue working with children with special needs, especially those on the autism spectrum. I am now in my 5th course out of 6 and can only look back and think about how much I could have helped my former students. If I had this knowledge and most importantly, been supervised by a BCBA to apply the knowledge with a student my impact could have been more profound. It is incredibly disappointing to see the DOE try and undermine the work of behavior scientist. Behavior science is unfortunately not common knowledge and it is also not a part of the teaching programs here in Hawai'i . Instead of working with licensed behavior analyst, the DOE would rather train their staff in restraints. Denying the effectiveness and the science behind ABA is like denying the science behind climate change. Do we as a state move forward together and deny evidence-based practices in behavior change and allow anyone to perform the duties of a licensed professional? Would this be an acceptable proposal in any other work setting? Would we allow hospital employees from janitors and cafeteria staff implement medical interventions? Would we let any doctor perform brain surgery? Would we allow anyone with a driver's license drive heavy equipment or semi-trucks? NO! There are specialized educational programs and licenses that one needs to obtain to perform these jobs. We need to hold our Department of Education employees to the same standard as we do for those in other positions. If the DOE does not have the capacity to internally bring this service to all students who need it, they need to contract out from a private provider. Denying students medically necessary services in the DOE setting is in direct violation of FAPE and IDEA.

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If funding is truly the primary barrier in increasing the availability and accessibility of ABA within the DOE, then SB 2520 provides a solution. Once additional funding is made available, ABA should be more readily accessible to our children. If it is not, then we must look to barriers outside of funding.

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Kira Burleson
2134-Mott Smith Dr Honolulu, HI 96822 (Oahu)
kburleson@teampbs.com

ABA is essential for the correct FBA and interventions to be implemented. Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Joshua O’Kain | Ewa Beach | Oahu
jokain@teampbs.com

When I began my career as a special educator with profoundly impacted high school students, I had the privilege of working alongside a classroom BCBA. This BCBA was able to help two of my children obtain intensive ABA treatment in my classroom during the school day because of their needs. With this BCBA’s support, I was able to modify my classroom (with her oversight) to create child-centered behavior reduction and skill acquisition programming that led to each and every one of my students having a method of communication with their peers and other adults around them. This single change in their education helped lead each child to a more meaningful and relevant high school experience. I believe that, if all teachers who are in these severe and profound classrooms had access to support from a BCBA for consultation and/or direct therapy with an RBT, our teachers would be able to concentrate on creating and incorporating quality curriculum and incorporating the methods that the RBTs/BCBAs implement. Our teachers, although well meaning, do not have the support necessary to be successful in their classrooms, especially when the expectations are that they should perform FBAs and BIPs. I have seen, first hand, as an instructor at the University of Hawai’i for emergency hires and BCBA track students, that our teachers do not have the knowledge necessary to manage and prevent challenging behaviors. Most of the teachers that I observed and taught, did not have the ability or knowledge to create FBAs and BIPs that were fit for implementation. They also utilized ABA “methodology” incorrectly and inconsistently. Although many of them were almost at the end of their course sequences, they were mainly focused on how to teach rather than how to manage behaviors. Even their “mentor” or “supervising” teachers, when asked, could not identify appropriate methods. This is quite concerning to me as a university instructor and it should be concerning to all educators and parents.

In my opinion, if we were able to collaborate to improve our education support systems to include BCBAs and RBTs as a related service (much like services such as OT or PT), we would be able to make better use of our teachers’ skill sets and help them to appropriately manage behaviors and utilize ABA as a related service to gain appropriate consultation and oversight as they relate to instruction with intensive, empirically validated methods that may be suggested by an LBA. Out of the 40-50 children that I have worked with on the spectrum, I would say not even one has had appropriate services or instruction that would be maximizing their functional or academic skills. I’m uncertain why our DOE is resistant to having help from outside agencies. I can say that, as a general Ed and licensed special education teacher, as well as a Licensed Behavior Analyst, across 4 states, I have seen a variety of schools. I can say, with confidence, that the state of our SPED programs in Hawai’i are dismal, at best. It is our responsibility as educators and citizens to assure that our keiki have the best education possible so that they can become active, productive members of society.

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Mahalo for introducing this bill in support of our teachers, our keiki, and SB 2520.

Chelsea Jeansonne - PARENT
988 Ohana Nui Circle | Oahu
miahj81@yahoo.com

My son is 5 and has had ABA since he was three. He had a RBT one on one all day at school. We moved to Hawai'i in July. The school determined he did not need a one on one paraprofessional. He also was not offered any ABA services during the school day. We have to use private ABA. Since most companies have a one-year wait list for afternoon appointments we have to pull from the school day. He will miss 15 hours a week from school to attend ABA therapy. He can't function in the classroom until we get the behaviors in control. The school has threatened us with truancy since we pull him 15 hours a week from the classroom. However, we have no choice but to pull him in order to receive the medically necessary ABA therapy. We have seen huge gains thanks to ABA therapy. We are considering homeschool next year in order to maintain a more stringent therapy schedule. He is not progressing in the classroom and SPED like we know he can. This is due to not having his RBT with him during the school day. He struggles staying on task without constant redirection. He still needs that one on one attention and the school has made little effort to help accommodate his individual needs. We asked about providing his RBT in the classroom but we were told several times that this was not allowed. We asked for one through the school and we received no response of yes or no. They ignored my question. The purpose of IDEA is to make sure that all children are able to have their individual learning needs met in the classroom. My son needs ABA to meet his individual needs. The IEP he has does not accommodate all of his individual needs. The school is not holding up their end of FAPE. Which in all honesty I don't have a clue how they are legally allowed to get away with this. Their job is to make sure all children have the education that fits their needs. The school is not making sure that my child receives all the accommodations he needs. I feel they are doing what is best for them and not what is best for my child. ABA is a huge component to the success of my son. The school is not providing the best education for him. So we will be looking elsewhere.

Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA

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Patti Heath
2112 Point Welcome Pl | Oahu
patricia.heath1@gmail.com

ABA is essential to improving the quality of life our kids can develop over the years. Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

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Bernadette Cuba - PARENT
98-142 Lipoa Place#307 | Oahu
stuntman300@gmail.com

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Molly Stemmler
59-602 A Kamehameha Highway | Oahu
refugee.molly@gmail.com

Prior to the behavior analyst licensure law, individuals in our state were receiving behavior support for intense and severe behaviors by a cadre of mixed “professionals”. The intention of the ABA licensure law was to bring credibility to behavioral practices and to increase consumer protections in our state. Why would the legislature agree to reduce these protections for our most vulnerable? As a society, we must take care of each other. It’s our kuleana.

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Heidi Nobmann
67-249 KIAPOKO ST | Oahu
heidinobmann@gmail.com

The people of Hawai'i deserve trained professionals so they have the opportunity to succeed. Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

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Kendall Mindar
533 Kaukaalii St. | Oahu
kendilynn7@hotmail.com

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Johanna Poore
168 Kline Rd. | Oahu
jrasbrat@yahoo.com

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Kellie Crowder
67-242 Kanalu St. | Oahu
kellcrowder@gmail.com

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Meagan Bresson
70 Niuhi street | Oahu
meagan.bresson@gmail.com

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Denita Mortensen | Oahu - PARENT
denita.mortensen@gmail.com

As the mother of a child with disabilities I know how very important it is for children to have early intervention. In other states child psychologists, therapists and special education teachers are trained to analyze and advocate for the needs of the child within the public schools to ensure their progression and scholastic success. As educators, parents and indeed all members of the community will agree that helping our children become and do their best is not only beneficial to the child but to society in general. We have a duty to provide the best learning environment for all our children not just the ones who fit easily into the less-than-perfect existing educational model. The funding is there. We pay taxes and expect it to be used in a prudent way to provide for the needs of ALL our children.

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**SB 2520 Relating to Behavior Analysis
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Maureen McComas - PARENT
7221 Luhi Place | Oahu
rainbowmomhi@gmail.com

Our child made minimal progress in school, and was provided poorly implemented ABA prior to and after the licensing law went into effect- by unlicensed and unqualified staff. Her behaviors prevented her from accessing her learning. As parents we made the difficult decision to remove her from school and place her in a clinical ABA setting where she has blossomed into a happy engaged learner who for the first time has meaningful communication. She has made amazing progress in all areas working with the dedicated and passionate staff that includes only licensed LBA's and RBT's who provide individualized ABA that is specifically designed to meet her unique needs in behavior, communication and social skills. Despite this documented progress, the DOE refuses to include ABA into her school programming.

Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

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John McComas - PARENT
7221 Luhi Place | Oahu
rainbowmomhi@gmail.com

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We have seen firsthand the amazing benefits of ABA programming provided by licensed and certified providers, and have seen firsthand the damage that can be caused by unqualified direct support workers. I stand in strong support #forourkeiki!

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Whitney Moody
68-386 Kikou St | Oahu
whittygirl83@yahoo.com

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Kelsey Kamaau
67-456 Kioe St | Oahu
kelskamaau@gmail.com

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ANONYMOUS

Aloha. I am a care coordinator working with many pediatricians across Oahu. Pediatricians often refer families to me when they've recently received a new diagnosis, are struggling to understand their Individualized Education Programs (IEPs) through their schools, or are generally coming up with barriers in navigating "the system." Many of my families have incomes that are heavily impacted by the structural changes in family roles that arise from having a child with a special health need. One issue that often comes up is getting a one-to-one aide in an after school program. Many children with autism are unable to attend after school programs due to lack of appropriate staffing. When asked during an IEP meeting if the school could provide a 1:1 during this time, the answer is almost inevitably, "That's not a DOE program, we have no ability to provide during this time." One work around that some families have devised is getting their insurance-funded ABA time to take place at the after school program, however, they're now starting to be refused because DOE is not allowing non-DOE contracted service providers on campus, even if it's for a non-DOE program during non-school hours.

As a result of this, many of my families are unable to have full two-income households. One caregiver is able to work full time, while the other is only able to work during DOE hours. This is because the school that houses the after school program will not allow insurance-contracted RBT's to provide ABA therapy in that setting, nor will they provide appropriate ABA services during that time. Many of these kids spend their whole day in special education classrooms with only disabled peers. After school programs offer important socialization opportunities with typical functioning peers.

Moreover, there are movements across our society, here in Hawai'i and across the US, to promote inclusion. The purpose of this is not only for individuals with disabilities, but also for individuals without disabilities to better understand the scope of human diversity, and to find the strengths in everyone. I firmly believe that there is a job for everyone in our society, and that is echoed in many of the transition and employment goals of Hawai'i 's youth with ASD. How can we teach the world that these individuals are able to provide a valued service to society if their first interaction with them is in young adulthood? ABA provides important services that can improve Hawai'i 's inclusion rates, which are dismally low (36% as of February 2016, compared to a national average of 62% at the same time). Very often, kids are put in special education classrooms due to behavior issues that disrupt their learning or the learning of others. ABA is a way to ameliorate that issue.

I am a master's level clinician who is considered "qualified" by the Department of Education to be a Behavior Health Specialist. I can absolutely say that I am not qualified in any way to design or complete any type of Functional Behavior Analysis or Behavior Support Plan. It's simply not within my scope of practice as a mental health counselor.

Committee on Ways and Means
Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice Chair
Wednesday, February 28, 2018 10:45 am
Conference Room 211, State Capitol

**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Implementing effective certification and licensure to require competent clinicians to provide effective and manualized ABA will certainly be expensive. However, as a society, we can't afford not to."

Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

If funding is truly the primary barrier in increasing the availability and accessibility of ABA within the DOE, then SB 2520 provides a solution. Once additional funding is made available, ABA should be more readily accessible to our children. If it is not, then we must look to barriers outside of funding.

Mahalo for introducing this bill in support of our teachers, our keiki, and SB 2520.

**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Gina Konishi
1581 Violet Street | Oahu
geegina46@yahoo.com

I'm in strong support for ABA in schools because I have a cousin that teaches in the public school system here in Hawai'i . She's worked as a 1:1 with students with autism here and also on the neighbor islands. I have witnessed the large amount of dedication that she puts in with her students and coworkers. My cousin Ashley puts in the time and effort to research strategies that help behavioral students and also seek advice from licensed behavior analysts. She often tells me her struggle working under unqualified professionals who use strategies that have not been vetted. I work in the healthcare facility and having people with the right skills and knowledge gives us the assurance of the do's and don'ts on appropriate treatment and procedures. Like in many professions we always seek other professionals for guidance when we are unfamiliar. Why should children be any different or be an exception to the rule? Students that have had the opportunity to have my cousin Ashley as a teacher has made great gains not because she's a teacher but because she knows what it takes to make an impact on each of her students and she's not afraid to seek professionals BCBA's for guidance.

Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

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Coco Pollock
68-300 Mahina ai street, 68-300 | Hawai'i
cocojpollock@gmail.com

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Shazlei Sampaio-Ribucan - PARENT
911159 keahumoa pkwy | Oahu
ms.shazlei@yahoo.com

ABA is needed. My son has severe autism and is non-verbal. Imagine yourself or your child need something and its going to be taken away. How would you react and do when you fight for your child to have something and it's going to be gone. ABA – we need it.

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**SB 2520 Relating to Behavior Analysis
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Wendy Lowry
67-345 Kaiea Pl | Oahu
wendylowryonline@gmail.com

Special Ed in Hawai'i is so far behind the rest of the country. They need better help! Licensed Behavior Analysts can help our keiki reach their fullest potential. Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

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Tasi Taylor
68-017 Waialua | Oahu
tasi.taylor@gmail.com

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Sara Rowley

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68-450 Kikou Street | Oahu
sararowley55@gmail.com

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Lyle Moody - GRANDPARENT
70 Niuhi Street | Oahu
dawna_moody@yahoo.com

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Brighton John
68450 Kikou street | Oahu
brightyy101@gmail.com

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Carly Penaranda
68-416 kikou St | Oahu
carlybeth.swim@gmail.com

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**SB 2520 Relating to Behavior Analysis
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Jennifer Hales
70 Niuhi St | Oahu
jenniemoody92@gmail.com

My nephew is autistic and his behavior analysts have done WONDERS for him. His quality of life is better, he is happy and his behavior has completely changed for the better. Licensed Behavior Analysts can help our keiki reach their fullest potential. Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

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Mai Waye
951062 Kamalino St. Mililani HI 96789 | Oahu
tawmdl@aol.com

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Sarah Sutton
67-616 Kahui Street, Waialua | Oahu
sarah@sustainablemuseums.net

Applied Behavior Analysis (ABA) is one of the most powerful tools we have to address autism and other development and emotional challenges. Its adaptive nature ensures appropriateness for each case. What we do for our keiki now when they are young makes an exponential difference for them, their families, and their communities and Hawai'i in the future. Licensed Behavior Analysts can help our keiki reach their fullest potential.

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Testimony in STRONG SUPPORT**

Lisha Padilla | 99-943 Halawa Heights Rd. Aiea, HI 96701 | lishac57@gmail.com

My name is Lisha Padilla. I am a former teacher in the Leeward District on Oahu. Our children are our future. When teachers instruct their students, we build the foundation for equality and prosperity for tomorrow's generations. Every child in our state deserves an education founded in evidence-based practices that ensures they are graduating with the skills and knowledge necessary to be contributing members of society. We can all agree that our teachers already go above and beyond to support our Keiki. By limiting ABA services as a reactive approach, rather than a proactive one, we will be putting additional strain on our teachers in the classroom. Our Keiki deserve services delivered by qualified professionals. When a child with special needs requires speech therapy to make adequate progress in his/her education, they are provided with a licensed SLP. When a child with special needs requires gross motor therapy in order to make progress in his/her education, they are provided with a licensed PT. When he/she needs occupational therapy, he/she is provided with a licensed OT. When that same child needs behavior interventions, he/she should be afforded a licensed professional to provide high quality services. As a former special education teacher, I can attest to the improvements that I have seen first hand, in my students who received ABA services. I can also attest to amount of work that gets piled onto a teacher's plate when those services are not provided. I would never purport to be an SLP and design/implement speech language services, as I do not have specific training in the area of speech/language pathology. I would never purport to be a PT or an OT, and design/implement interventions in physics therapy or occupational therapy. Yet year after year, the DOE expected me to design and implement behavioral interventions for my students with severe disabilities (including Autism). Precious instructional time was spent developing behavioral interventions for my students that should have been spent teaching or lesson planning. I count myself extremely lucky that my own education included many courses in applied behavior analysis, but even then, when designing behavioral programs, it felt like I was doing more than one person's job. I can say first hand that when I had support from a licensed behavior analyst, I had time to do MY job: being a teacher. The DOE needs to provide adequate services for students with special needs, which reflect the value of our hardworking teachers.

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Mahalo for introducing this bill in support of our teachers, our keiki, and SB 2520. We need your help.

**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Noelle Dennard
94-1071 Kaukahi Place, A9
nchapman@alumni.princeton.edu

I work as an RBT at a private clinic, and I have seen firsthand what ABA therapy can do for kids with special needs. I also have heard many negative things, from parents and from DOE-contracted skills trainers, about the lack of training and organization in many of the agencies that are contracted for special education workers. It seems that ineffective programming often goes unchanged for long periods of time in settings where ABA professionals are not present. By contrast, the programs at our clinic are being evaluated every day by BCBA's and RBTs, and the constant communication ensures that programming is always being improved for maximum efficacy. I think special education in public schools would benefit greatly if ABA professionals were always present in those settings.

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Melody Ericson
98-1729 Kaahumanu Street #B
melodymansour@hotmail.com

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Alison Dinsmore
1916 Fox Blvd | Oahu
ali_r_lose@yahoo.com

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Benjamin Penland - GRANDPARENT
471B Hinano Way | Oahu
bpenland@gmail.com

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Carolyn Penland - GRANDPARENT
471B Hinano Way | Oahu
bpenland@gmail.com

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Committee on Ways and Means
Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice Chair
Wednesday, February 28, 2018 10:45 am
Conference Room 211, State Capitol

**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Forest Penland - PARENT
471B Hinano Way | Oahu
kathleenmpenland@gmail.com

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Stephanie Pollock
68 300 Mahinai Ai Street Waialua | Oahu
workingoutinparadise@yahoo.com

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Kerilyn Pollock
68 300 Mahinai Ai Street Waialua | Oahu
keriynpollock@yahoo.com

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Michelle Rogers
68-386 Kikou St Waialua HI 96791
michellejumprope@gmail.com

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Tracey Kashiwa
1503 Emerson St. Honolulu, HI96813 | Oahu
tracey.kashiwa@gmail.com

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Stephanie Ngo
531 Hahaione St. Apt. 13C | Oahu
sngo@Hawai'i .edu

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Alaina Mead
70 Niuhi St Honolulu, HI 96821 | Oahu
alaina.rogers@gmail.com

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Josh Mead
70 Niuhi St Honolulu, HI 96821 | Oahu
senormead@yahoo.com

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Cosette Rogers
70 Niuhi St Honolulu, HI 96821 | Oahu
cosette.rogers@gmail.com

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Keri Monteith
92-924 Palailai St.
keri_stuart@yahoo.com

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Shaelee Johnson
55-521 Naniloa Loop | Oahu
shaeleejane@gmail.com

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Kawohionalani Jenkins
68-069 Au street Waialua HI 96791
kawohi@autismbehaviorconsulting.com

Aloha! My name is Kawohi Jenkins and I am submitting a testimonial as to why DOE should keep ABA. First things first. The science speaks for itself. It has had a significant impact with helping kids with autism. It's the only proven treatment to make an impact on kids with autism. I've seen it be used to help kids with severe problem behavior. I've seen it help kids who before couldn't or wouldn't speak. I've seen it help kids open up to a positive teaching environment. I've seen parents cry in gratitude for the work that has been done for this. ABA has changed my life. I've found a love for this work and science that I never knew beforehand.

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Victoria Kelleher
1025 A'e Street #305 Kapolei, hi 96707
kelleher.victoria@yahoo.com

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Adessa Lovell
2080 Aheahea St. | Oahu
adessaslavens@gmail.com

I have personally witnessed the way ABA can change family's lives. Licensed Behavior Analysts can help our keiki reach their fullest potential. Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

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Joanne Getty
92-1185 Palahia Street Kapolei, HI 96707 | Oahu
joanne@autismbehaviorconsulting.com

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Amy Smith Wiech
68-275 CROZIER LOOP | Oahu
amy@autismbehaviorconsulting.com

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Lorelei Bandola
91-1034 Akai street | Oahu
ll.fajardo@yahoo.com

Children with autism deserve the right to receive effective treatment under licensed BCBA's and RBT's. Research has shown that children benefit from ABA and BCBA's are experienced professionals who can make a difference for these individuals to live better lives.

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**SB 2520 Relating to Behavior Analysis
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Karlette Johnson
68-386 Kikou St, Waialua, HI 96791 | Oahu
utahcamper@gmail.com

I strongly believe in the value of behavior analysts in our schools to work with autistic children. I have personally seen a huge difference that these professionals make with my nephew. Licensed Behavior Analysts can help our keiki reach their fullest potential. Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

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Jerry Rogers
68-386 Kikou St Waialua HI 96791 | Oahu
gorgefrog@gmail.com

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Karla Rogers
68-386 Kikou St Waialua HI 96791 | Oahu
operationivy9@hotmail.com

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**SB 2520 Relating to Behavior Analysis
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Kathleen Norris
6518 103 St Ewa Beach, Oahu
knorris@teampbs.com

ABA is the practice of using science to improve lives by trained professionals. As a sibling of an adult with autism with minimal access to ABA, I am heartbroken that services were not widely available which stunted his social growth. I have worked as an RBT in a school on the mainland, and I have seen the positive impact on multiple children's lives. I left the banking world to work in this field because of the positive impact it makes. I stick with science.

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Mahalo for introducing this bill in support of our teachers, our keiki, and SB 2520.

Committee on Ways and Means
Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice Chair
Wednesday, February 28, 2018 10:45 am
Conference Room 211, State Capitol

**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Christine Cosio - PARENT
1406 Peter Buck St. Honolulu, HI 96817
christine_cosio@yahoo.com

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Gina Gillstrom
504 Kaiolohia St. Kihei 96753 | Maui
ginagillstrom9175@gmail.com

Our keiki deserve support. Teachers are asking for help. We are ashamed of our public schools. No wonder our teachers are leaving. We have over 300 emergency hires for special education. Licensed Behavior Analysts can help our keiki reach their fullest potential. Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

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I support changes to Chapter 465-D, which clarify that schools must comply. Mahalo to our legislators for reverting to the already extended implementation date of 1/1/2019. However, I am extremely concerned about the expansive exemption now permissible with language in the current bill. I stand in strong support of our teachers and of our keiki.

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Tammy Chang
3103 Esther St | Oahu
tamacha@gmail.com

The task to improve Hawai'i public schools is daunting. However, there have been major strides in moving Hawai'i up the scale, providing effective and efficient education to all of Hawai'i 's Keiki. Licensed Behavior Analysts can help our keiki reach their fullest potential. Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Barney Mollena - PARENT
37 West Waiko Road | Maui
barneymollena@gmail.com

I have a 5 year old son who is autistic. He is non-verbal and can't function in school without his RBT. Without his RBT I know it will be detrimental for him. He has walked away from us in seconds and we wouldn't have a clue where he went. And because he doesn't acknowledge people, it's a scary moment until he is found. Fortunately for me I have a fenced in property to keep him in but he has found his way out when visitors would forget to close our gate. I feel without ABA services we would be forced to keep him at home for his safety. I won't let him be a tragedy should this bill be allowed. The sad part is my son is so smart and has learned to read on his own from the age of two. His memory is amazing and he could name most of the animals and mimic the sound they make. When he was 4 years old, the pre-school teachers would let him read a book during circle time and the children would be amazed that he knew how to read. With his RBT, it is showing him how to function with others that are different than him and be able to express himself to others. Also he is learning how to follow directions to do everyday tasks. With him this is done with constant hand over hand directions.

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Michelle Foushee - PARENT
153-104 Anderson Ct. | Oahu
mlfoushee1@gmail.com

If it weren't for ABA my son wouldn't be where he is today! I'm so grateful for ABA and I want to keep ABA as long as they accept my son in the program. They have not only helped my son who is autistic but as helped myself in so many ways! We need ABA!

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Nicole Skotz
1059 Iopono loop | Oahu
nicskotz@gmail.com

Hello, I am a licensed behavior analyst, but more than that I stand with everyone who wants and expects most effective teaching methods. ABA is a research based science that can and does help individuals with autism and helps teach teachers on how to best support students. What is occurring in schools is sub par and does not support the children who are being let down everyday. Children are being blamed for challenging behavior, when environments are not effective and training is not occurring for teachers and 1:1 providers. Our children do not get a choice as to where they get to learn and it is unethical and inhumane to the give them sub par and in some cases problematic teaching environment where they are not understood. There needs to be rules as far as training and having confidence in the teaching that is being done. Credentialing is the way to ensure that confidence. Our kids deserve better and i know that it is possible if we work together as a community. Our goal is the same: to educate and give all children in schools a bright and thriving future.

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Tracey Kashiwa
1503 Emerson St #4 Honolulu, hi 96813 | Oahu
turtlettk@hotmail.com

We fight, like there is no tomorrow. ALL kids deserve the same educations! Licensed Behavior Analysts can help our keiki reach their fullest potential. Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Denise Thornton - PARENT
PO Box 226 Keaau, Hi 96749
deniserhornton808@yahoo.com

My daughter is in need of ABA therapy. Licensed Behavior Analysts can help our keiki reach their fullest potential. Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Maggie Gaylor
91-2049 Kaioli Street #2704, Ewa Beach, HI, 96706
maggie.gaylor@yahoo.com

Prior to becoming an RBT I was an under-trained worker in the DOE as a skills trainer. Now that I have been trained, tested, and properly supervised I can see the true difference between a skills trainer and a RBT. I am able to now work so much more efficiently for my clients and provide them with the best care. I have been able to see children go from sitting alone in a corner all day flourish socially and initiate play with their peers. I have seen children who don't talk learn to say "Mama" and the tears well up in that mama's eyes. I have seen children who were so frustrated because they couldn't communicate their wants and needs that they would bite themselves and now they can say "I need a break." These children deserve every chance they can to succeed and we can't wait for them to fail before we give them the help they need. Our Keiki deserve better, they deserve the best!

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Alyson Morita
47-465 Hui Aeko Place Kaneohe, HI 96744
amor.620@hotmail.com

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Randi Lee
2256 Liliha St. | Oahu
randi.lee86@gmail.com

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Richard Elg - PARENT
1620 Ala Aoloa Loop | Oahu
rich_elg@hotmail.com

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Stacey Kuhn, MS, BCBA, LBA
1253 S Beretania St, Suite 2710 Honolulu HI 96814 | Oahu
staceykuhn@kuhnbc.com

My name is Stacey Kuhn, Board Certified Behavioral Analyst and Licensed Behavior Analyst in the state of Hawai'i . I am the founder of Kuhn Behavioral Consulting Services, a Kama'aina company, and Behavioral Health Center of Excellence accredited provider in the state of Hawai'i , and I have over 24 years of experience in the field of Behavior Analysis.

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Emily Ferguson
195 Clarey Pl | Hawai'i
emilyquinn1616@gmail.com

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Daiquiri Hammond
142 Reno Rd. | Hawai'i
naturenymph555@gmail.com

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Jackie Gailey
115 Kilu Lane | Oahu
gangstaj08@gmail.com

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Heidi Nobmann
67-249 Kiapoko Street | Oahu
heidinobmann@me.com

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Diana Powell
91-2290 Kanela Street Ewa Beach HI 97606
dpowell@acesaba.com

A lack of qualified behavior analysts in the DOE setting overseeing much needed ABA services for students with autism is unethical and dangerous, in addition to violating several federal laws including I.D.E.A, F.A.P.E., and the American with Disabilities Act. As a Board Certified Behavior Analyst (BCBA) and Licensed Behavior Analyst (LBA) in Hawai'i, I have unfortunately seen the results of lack of qualified personnel in the public school settings firsthand. The result is a dangerous setting for our keiki as well as school personnel; too often children are injured unnecessarily due to untrained, uninformed staff and a lack of qualified behavior analysts overseeing the treatment of students with autism and related developmental disorders.

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Lara Bollinger, M.S.Ed. BCBA, LBA - lara.bollinger@gmail.com
61-280 Kamehameha Hwy. Haleiwa, HI | Oahu

First, thank you all so much for passing Chapter 465-D, to ensure the licensure of Behavior Analysts. I am writing in support of SB2925. Licensed Behavior Analysts can help our keiki reach their fullest potential. Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

1. In my experience, keiki who are exposed to quality behavioral programming can make significant progress while those that are exposed to sub-par programming can develop additional challenges, stall in their learning, or regress. Waiting for our keiki to fail will cause more problems in the long run and is unfair to them and their families.

2. Treating behavioral and learning difficulties as a reactive strategy is just plain wrong. Our goal as professionals is always to prevent problems. Doctors do preventative "well child" check ups to catch problems early and treat them before little problems become big problems. The same can be said for good Applied Behavior Analysis (ABA). We should not be waiting until students are failing before Licensed Behavior Analysts (LBAs) are called to be part of the team.

3. The Individuals with Disabilities Education Act (IDEA) requires that students are given access to a Functional Behavioral Assessment (FBA) anytime that their behavior is impeding their learning or the learning of others. In Hawai'i, Chapter 465-D requires that the FBA is completed by an LBA or a Licensed Psychologist with ABA in the scope of their practice. By not completing this FBA, the Department of Education is opening itself up to many due process cases and potential lawsuits.

If funding is truly the primary barrier in increasing the availability and accessibility of ABA within the DOE, then SB 2520 provides a solution. Once additional funding is made available, ABA should be more readily accessible to our children. If it is not, then we must look to barriers outside of funding.

Mahalo for introducing this bill in support of our teachers, our keiki, and SB 2520.

**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Sierra Whittington
123 Koloko Ct Unit 101 Wahiawa HI 96786
sierra.whittington@icloud.com

Our kids need ABA services. I've experienced so many miracles since I've started providing ABA services. These one on one services provide so much help to these kids and it's important that we keep these services for families and for schools. I have one mom terrified for her kiddo if these bills are passed. She states, "If this happens, this will affect my kid tremendously. He doesn't have his RBT for in school, but he does have her for our home services. A psychologist, whom he already has, will replace his RBT if this bill passes. Which will not be good! His psychologist sees him once every 90 days to redo his prescriptions. How do they expect her to understand his home environment, his behavioral problems/anger issues, in her office?! How is she going to help him with social skills and how to cope with everything, in her office?! She puts a band-aid on his behavior with his medicine, but she doesn't help it go completely away. His RBT helps a lot with his at home behaviors and keeps him on track. Helps him to cope when he is upset and gives him options. If this is taken away from him, it won't just be bad for my child; it will be bad for all of us. He has come a long way, and this will make him backtrack and spiral out of control. Praying for all the kids that could potentially be affected by this.

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Joy Oliveira | HC1 Box 4015 | Hawai'i | JoyMoana21@gmail.com

I am a Special Education Teacher from the Big Island of Hawai'i. I would like to submit testimony to share that there is a devastating impact when Applied Behavioral Analysis (ABA) and services for our keiki are not provided or done so by unqualified personnel. In addition to our keiki, I beg you to consider the negative impact the lack of adequate services and providers have on all students and our hard working teachers in Hawai'i. Not just the child requiring services is impacted, but all students witnessing classroom behaviors are impacted on a daily basis. The longer we wait to install appropriate services, the longer the students miss critical instruction. I personally witnessed unqualified people developing and implementing inappropriate strategies and the results were truly devastating. Not only were some interventions suggested highly inappropriate, but also some were emotionally and physically harmful. As an emergency hire teacher, I was asked to complete Functional Behavioral Assessments and develop Behavior Support Plans for my students and assist in daily implementation. Admittedly, I was not adequately trained, and my coursework had not covered this task in depth. I was instructed that as a Special Education teacher, we are already qualified to support students. This was not accurate and I desperately needed help, my students needed help. I needed the daily access to specialized knowledge and support of a Registered Behavioral Technician. I needed them to monitor behavior and collect data and under the supervision of a BCBA, modify plans as necessary. I needed to be able to manage my classroom and focus on teaching all of my students. The School Based Behavioral Health (SBBH) employee was also a licensed counselor had been instructed to assist me. She and I expressed that neither of us were sufficiently trained in Behavioral Analytical Practices. We needed access to personnel for clarification, and be supported appropriately to improve outcomes for our students. After completing a forty-hour training for Registered Behavioral Technicians nearly two years ago, I affirmed my belief that appropriately developed strategies would absolutely and positively impact students especially within the school setting. I truly believe it is necessary for Functional Behavior Assessments and the development of Behavioral Intervention Plans require the direct supervision of a Board Certified Behavioral Analyst (BCBA) or individuals who can certify that they possess adequate training. Students who spend the majority of their day in school, are already failing, we cannot afford to continue to wait for the provision of services where they spend the majority of day, in the school setting. Additionally, all personnel providing services should meet the basic credentials that a Registered Behavior Technician or a Board Certified Behavior Analysts possess. This is the most vulnerable population of our keiki who need us to responsibly provide services through qualified professionals that are trained specifically conduct a Functional Behavioral Assessments, develop interventional strategies based on data. Teachers need support for their students so that they can succeed. I am asking, for the sake of both our students and our teachers for your support in ensuring we truly provide what is best for our keiki.

Committee on Ways and Means
Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice Chair
Wednesday, February 28, 2018 10:45 am
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**SB 2520 Relating to Behavior Analysis
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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Nicole Domingo
98-417 Hookanike St. #A Pearl City, HI 96782
darqpique@gmail.com

I worked in the school for 5 years with children with autism before starting at my current job at a center where we do ABA treatment for children with autism. I learned so much more about autism and how to support and work with children with autism. I wish I had my knowledge of ABA when I was working in the school.

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**SB 2520 Relating to Behavior Analysis
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Cheryl Ebisui
95-1091 Auina St | Oahu
cebisui@teampbs.com

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Catherine Wilson
PO Box 375 | Kauai
catuare@Hawai'i .rr.com

Dear Member of the Committee,

Thank you for the opportunity to testify. I am Catherine Wilson, a Board Certified Behavior Analyst and a Hawai'i State Licensed Behavior Analyst. I am also in my last year of a clinical psychology doctorate degree. I own and operate a local behavior company, ABA Positive Support Services.

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Please feel free to contact me directly with questions or comments. I am available.

Thank you,
Catherine Wilson, M.Ed., BCBA, LBA, LMHC

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Jennifer Frazier
1103 Mills Blvd
jennkae81@icloud.com

The DOE needs to work hand in hand with ABA providers. Behavior is synchronous to learning.

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**SB 2520 Relating to Behavior Analysis
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Heidi Burgoyne
67-170 Kuhi st Waialua
hbHawai'i@gmail.com

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**SB 2520 Relating to Behavior Analysis
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Maria Futo
58-306 Kaunala Pl Haleiwa
Manefuto@gmail.com

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Bryant Vergara
99-260 Aiea Heights Drive Aiea, HI 96701
bryantv@Hawai'i .edu

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Brandi OCallaghan
1135 Panana St #1102
br.ocallaghan@yahoo.com

I work with special education students and they need these services. If we wait for students to fail then they are already missing concepts and relationships instead of modifying it for them from the outset. Students who are allowed to struggle and fail, when we know they need help, feel horrible about themselves. This attitude can become permanent and they will always be stunted emotionally. We want our citizens to feel capable and valued. Our entire society benefits from early interventions.

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Ashley Hogan, 46-255 Kahuhipa st Kaneohe HI
ahogan216@gmail.com

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Emely Suazo
515 Ulumawao St, Kailua, HI 96734
ESuazo@stepsHawai'i .com

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Andrea Baumes
5171 Warden Ct. Honolulu, HI 96818
andrea.baumes@gmail.com

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Vanessa Montes
1611 Keeaumoku St. #308 | Oahu
vmontes@Hawai'i .edu

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Ariel Keaunui
91-201 Kamoawa Place | Oahu
arielpahayahay@gmail.com

I am currently an RBT on Oahu. Licensed Behavior Analysts can help our keiki reach their fullest potential. Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

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Noveleenne Tuliao
94-269 Pupukoa St. Waipahu 96797 | Oahu
ntuliao13@gmail.com

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Shannon Patalano
469 ena rd | Oahu
patalano4@gmail.com

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Courtney Manning
68-281 Au St
cmanning@maulolearning.com

I have worked in the ABA field since 2013. During my 5 years of working in this field I have seen exceptional growth in our kiddos from their services during school hours. ABA during school hours does not restrict or prevent kids from learning or growing. I have seen so many amazing kids grow, learn, and hit major learning milestones. If we took away ABA services during school hours our kids would be stripped of these opportunities.

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Committee on Ways and Means
Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice Chair
Wednesday, February 28, 2018 10:45 am
Conference Room 211, State Capitol

**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Mia Manzo
PO Box 152, Honomu, HI
miamanzo@gmail.com

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Sneha Bagchi
1830 Wilikina Dr Apt 912 | Oahu
jaisneha90@gmail.com

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Brendan Hales
70 Niuhi St. | Oahu
bdan.hales@gmail.com

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Ryota Takahara
945 Kapahulu Avenue Apt. B, Honolulu, HI 96816
ryota302@gmail.com

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Vikki Kawamura
95-1014 Liho Street
vikk9ff@gmail.com

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ANONYMOUS TESTIMONY

I've been in ABA as a RBT for 3 years and received ABA services for my brother for 5 years and taught for 2 years in the DOE setting with special needs and after being on all sides of this I strongly believe that ABA is a mutually beneficial experience for everyone. The story of applied behavior analysis in education in the United States is inextricably tied to the significant increase in Autism Spectrum Disorder (ASD) diagnoses among school-age children that emerged in the mid-1990s. Suddenly, classrooms were overwhelmed with special needs children who exhibited sometimes severe behavioral issues, impacting both their own education and the schooling of others. With that being said again I strongly believe that ABA is beneficial to all parties in the classroom; teacher, student and families.

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Michelle Haia
68-024 Apuhihi st Waialua | Oahu
mhhsia@gmail.com

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Sheleah Watson – PARENT
59-470 Alapio Road Haleiwa HI 96712 | Oahu
sheleahdiego@yahoo.com

Please think about our Leuko. My son is autistic and really needs this service to help him function and become independent and be self-sufficient, as he becomes an adult.

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Melinda Seymour
59-065 Paumalu Place
melindabcba@gmail.com

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Elizabeth Hand
PO Box 30958 | Kauai
bugdragoo@gmail.com

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Suzanne Machos
47-736 Akakoa Place #2, Kaneohe 96744
suzanne.machos@gmail.com

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Kyle Machos
47-736 Akakoa Place #2, Kaneohe 96744

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Denby Siemer
PO Box 437 Waialua HI 96791 | Oahu
pelagicblue@gmail.com

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Lauralei Tanaka
3276 Uilani Place | Oahu
jnlTanaka@msn.com

Aloha, Our keiki need individuals who are educated and schooled in behavior analysis, not simply baby sitters. We need individuals who have been trained and who are required to receive continuous training to work with our children in order to keep them safe and to make sure that our children are taught using evidence based methods to help them reach their full potential.

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Yvonne San Agustin
91-1016 Mikohu St
yvonnemonique522@gmail.com

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Kristen Holdaas
47-356 Hui Koloa Pl
kbarry35@gmail.com

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Brian San Agustin
91-1016 Mikohu St
b.sanagustin@yahoo.com

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Nancy Trujillo Sisemore
610 Ala Moana Blvd | Oahu
trujillo-nancy@hotmail.com

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**SB 2520 Relating to Behavior Analysis
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Rebecca Seiter
352 Aina Lani Pl, Kauai, HI 96746
rebeccaseiter@yahoo.com

To Whom it May Concern,

I am a Registered Behavior Technician on Kauai doing home visits with school-aged children diagnosed with Autism. While I believe that ABA therapy in the home is important and relevant to changing a child's overall behavior and skills, I have also come to realize how important it is to have that balance during the school day with consistent ABA techniques as well. It is counter-therapeutic to provide ABA structure in one setting and not in another. It allows the child the opportunity to operate with one set of rules during the school setting and then with another set of rules in the home setting. Behavior becomes setting-based, which is not allowing them to truly develop much needed skills, and often hinders overall mastery and progress.

Additionally, with ABA only in the home setting, it is extremely difficult to communicate regularly with the daily school providers to see what strategies are being used or are effective. Likewise, there is no way to model across settings what therapies are being used in the home that are making significant progress there.

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I hope my thoughts are helpful. 808-634-0397

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Erin Stephenson
36 Puu Hale St.
erinam.step@gmail.com

Please do the best for our keiki! Families need all the services they can get access to. This is so important for the development of our kids! Licensed Behavior Analysts can help our keiki reach their fullest potential. Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

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Senator Gilbert S.C. Keith-Agaran, Vice Chair
Wednesday, February 28, 2018 10:45 am
Conference Room 211, State Capitol

**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Brandi Barretto - PARENT
PO Box 30343 | Oahu
brandibarretto@gmail.com

My son received three years of “ABA” therapy in which his behavior support staff were constantly changing. Of 6 interventionists, only one was a Board Certified Behavior Analyst (BCBA). Targets and goals were met consistently and efficiently ONLY when the BCBA supervised his case. Anything less was a waste of valuable learning time.

Licensed Behavior Analysts can help our keiki reach their fullest potential. Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent’s memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

If funding is truly the primary barrier in increasing the availability and accessibility of ABA within the DOE, then SB 2520 provides a solution. Once additional funding is made available, ABA should be more readily accessible to our children. If it is not, then we must look to barriers outside of funding.

Mahalo for introducing this bill in support of our teachers, our keiki, and SB 2520.

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April Woolley
66-939 Kiekonea Way | Oahu
acasey@Hawaii .rr.com

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Jordan Hall
96-212 Waiawa Rd apt 106 | Oahu
jordan_th81@msn.com

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Kahoni Rowland
96-212 Waiawa Rd apt 106 | Oahu
kahoni47@gmail.com

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**SB 2520 Relating to Behavior Analysis
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Lauren Kapp
Po box 5076 Kaneohe | Oahu
LaurenDKapp@gmail.com

I have been a skills trainer for 5 years and an RBT for 2 years. I am scheduled to take my BCaBA exam this month. Having gained the knowledge I have of Applied Behavior Analysis, I can now see the difference in programs that utilize ABA appropriately versus those that do not. ABA in untrained hands can actually make behaviors worse, further hindering the life of the client and their family. I have witnessed the result of what happens when ABA is not used correctly in schools. It is detrimental to the student, and the entire learning environment. I can't stress enough how important it is to have trained individuals assessing, creating and implementing behavior change programs.

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Jessica Huggins
46-318 Haiku Rd. Apt 87 | Oahu
jessica.leanne17@yahoo.com

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**SB 2520 Relating to Behavior Analysis
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Jackie Belding
3-2600 Kaumualii Hwy, STE 1300, PMB 340
Lihue HI 96777 | Kauai
jackiebaker15@hotmail.com

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**SB 2520 Relating to Behavior Analysis
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Julian Leigh
134 Kapahulu Ave. #916, Waikiki 96815 | Oahu
msjulianHawai'i@hotmail.com

I have worked for ten plus years as a Skills Trainer in Hawai'i Public School Special Education classrooms. Most teachers and most school administrators I have encountered are ill-equipped to assess and provide services required by each unique special needs student. There is inconsistency in the behavioral programs designed, as each teacher and school administration approach the child with their own priorities and level of expertise. The inconsistency that results is extremely damaging for our children with special needs and stifles their potential. ABA is the national standard for assessing and addressing the needs of these children and Hawai'i DOE must welcome that standard of service provision into our classrooms.

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Hannah Risko
1395 Pueo Rd | Hawai'i
hannahrisko@gmail.com

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Maggie Frazier
P.O. Box 1630 | Hawai'i
maggiemfrazier@gmail.com

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

GIGI CALI - PARENT
94-1038 LUMIAUUAU ST
Gigi.sean@yahoo.com

Providing additional support in the school environment will allow educators and parents to work as a team by increasing communication, increase observations, implement positive reinforcement at the appropriate time. RBT also provide support to DOE educators to focus on the classroom as a whole oppose to giving attention to a student who needs behavioral support. My son has made an astronomical advancement in his speech language social skills as well as his academic learning. He is currently having more time in the gen ed environment where he can learn from his peers. Without RBT these children will lose the ability to learn because RBT provides the child opportunities to succeed and assist these students to working through their challenges and giving family's hope that their child will survive and become independent. RBT is not only an advocate for students but a liaison between educators and family

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**SB 2520 Relating to Behavior Analysis
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Cori Webb
58-372 Kamehameha Hwy | Oahu
coriwebb86@gmail.com

ABA is vital in these children's lives! We make a difference!! Educate yourselves!! Understand what we do and how it works!!

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Testimony in STRONG SUPPORT**

Rochelle Hall - PARENT
PO Box 18,68, Kealakekua, HI. 96750
Rochellejhall@gmail.com

My daughter has been approved for ABA but the school refuses to allow the providers on campus and they do not provide the support my daughter needs to access her curriculum. She struggles daily, particularly socially and deserves to have this support during her remaining years in school. We met Superintendent Kishimoto on September 18 when she came to speak on the Big Island. That day we asked her what families like us are supposed to do and she told us she needed time to get data and now this bill is introduced. It is disrespectful and disheartening. I expect more of our public schools. My daughter deserves better from us. All of us.

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Mahalo for introducing this bill in support of our teachers, our keiki, and SB 2520.

Kind regards,
Rochelle Hall

**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

John Lopez
6495B 103rd St, Ewa Beach, HI 96706
jokainlopez@gmail.com

As an advocate and a professional in the field, I have heard and experienced the tyranny of low expectations in our education system for children with significant developmental delays. ABA providers that I work with have made significant impacts for the children that we work with in home and community based settings. It is always the limitations of the school that parents mention to be what is “holding them back”. The fact that ABA providers would be limited to home and community based settings vs Speech and Occupational therapists which perform skills across all settings, limits their ability to impact our keiki’s lives to their full potential. Furthermore, teachers need this help. Many teachers that I have met are burnt out and underprepared. They deserve to have help in managing and preventing challenging behaviors. Do what’s right, this bill, as is, is believed to violate several federal laws; I.D.E.A., FAPE, and the American with Disabilities Act (ADA). We stand firmly in support of our teachers and keikis’ having access to appropriately licensed and qualified behavior analysts in the DOE setting.

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Melissa Sandwell
2444 Hihwai Street Apt 2104 Honolulu, HI
Msandwell@gmail.com

Do the right thing for our Keiki!!

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Rebekah Walker - PARENT
53-972 Kamehameha Hwy
Hau'ula Oahu 96717
Matagiwalker@gmail.com

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My daughter has benefited from early intervention with ABA services. It pains me to think that other Autistic children would be denied these services of highly trained aides. With early intervention of trained aides hopefully our children on the Autism Spectrum will have the best opportunities for their success

I support changes to Chapter 465-D, which clarify that schools must comply. Mahalo to our legislators for reverting to the already extended implementation date of 1/1/2019. However, I am extremely concerned about the expansive exemption now permissible with language in the current bill.

Mahalo for introducing this bill in support of our teachers, our keiki, and SB 2520.
Rebekah Walker

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Justine Tubana
94-541 Loaa St.
Waipahu, HI 96797
j2bana14@gmail.com

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Kristine D. Dickson

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**SB 2520 Relating to Behavior Analysis
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Cheryl Jensen
91-1029 Kamaaha Ave #1203
Kapolei, HI 96707
Cjensen@bayada.com

Our children deserve quality professional care from those who are qualified in the field of ABA.
Do the right thing for our Keiki!!

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**SB 2520 Relating to Behavior Analysis
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Beau Laughlin
41 Laumakani Lp
Kihei HI 96753 | Maui
bochacompany@gmail.com

All people with disabilities have a right to effective treatment. For some this may be applied behavior analysis. This is Federal Law. All students should be able to access services they find meaningful. It is time for egos to step aside in this arena of the DOE versus behavior analysis. It is time to realize we need to come together and respect each other for the good of our community.

Do the right thing for our Keiki!!

Licensed Behavior Analysts can help our keiki reach their fullest potential. Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is also required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

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Mahalo for introducing this bill in support of our teachers, our keiki, and SB 2520.

Beau Laughlin, M.S. BCBA

**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Sara Sato
2241 Kauhana Street Honolulu, Hawai'i 96816
saratsuki@gmail.com

My name is Sara Sato and I am an Board Certified Behavior Analyst (BCBA) who has experience as working as a special education teacher and a contracted BCBA in the Hawai'i DOE. I also have previously worked in schools in the San Francisco Bay Area as a BCBA consultant. Having experiences in these settings have given perspective to what models are successful in supporting and teaching students with disabilities as well as structures and systems that fail. Unfortunately, the Hawai'i DOE is more often than not failing to provide the necessary, adequate, and appropriate supports for their special needs students.

One area I find to be the most lacking in the Hawai'i DOE system is the understanding of what ABA is. Applied Behavior Analysis (ABA) is NOT just a way to address challenging behavior. BCBA's are not only necessary to teach a child to stay on task. ABA is the science of teaching. As BCBA's we can look at any situation, break it down into components, examine what might be wrong, look at the objective, and utilizing the principles of behavior and effective teaching, develop a game plan to reach our terminal goal. While this may sound simple, and in theory it really is, our work as Behavior Analysts is constant, systematic, and consistent analyzing of our objectives and making changes based on data to produce meaningful changes in our clients lives. Simply put, teacher's are not put through the same type of training and methodology during their course/field work. For many BCBA's who have masters degrees in special education, an additional 6 or more course sequence plus 1500 fieldwork hours are required to even qualify to sit for the exam. Just these requirements alone show a huge discrepancy in the general experience of a special education teacher and a BCBA. There are numerous FANTASTIC teachers and scores of EXCELLENT BCBA's in Hawai'i. Both groups come from different backgrounds and different skill sets. The bottom line is we want to provide the BEST education that can be provided to our Keiki. It's not a matter of one group or the other, it's working together, celebrating our individual strengths and supporting our areas of need to turn our failing education system into one that we all can be proud and confident of. Our Keiki and our future are so deserving of this.

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Please malama our keiki.

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Geri Pinnow - PARENT

Luke Pinnow - SELF-ADVOCATE

Ewa Beach, Oahu

gpinnow@rocketmail.com

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Say no to Luke. That is what the Department of education said to him as a preschooler and continued to say now as a senior. There are people who have the skills just waiting to help him access his education but DOE says NO! Is Luke not deserving and kids just like him? His Christmas card to me was I'll be brave Mom. Really? Is this a war where your son writes home and says he'll be brave? No mother of a 17 yr. Old high schooler in 2017 should get a Christmas card that says, "I'll be brave." But that is what Luke is trying to tell us. He's had to fight for access to his education. Can you imagine all the non-verbal keiki with autism and what they'd tell you? Imagine with me when we leave this world that these sweet angels will thank us for trying to help. Will you do the right thing? Kids can't wait year after year. We are having them experience year after year of cruelty. Why? The teachers are asking for help, they see the potential in the children, the parents and the community as a whole know the help exists, the children are literally crying for help, and the DOE says, "Will not!" Help exists, the choice is yours. Will you help our state and tell the DOE to let help in now!

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Ashley Brown - PARENT
iambamaa4@gmail.com

My name is Ashley Brown. We are an Army family with two sons. We've lived in Hawai'i for almost eight years now, own a home in Waialua and vote in Hawai'i. My husband has served over twenty five years to date and is still on active duty. He's served three tours of duty in Iraq and has two purple hearts for wounds received in combat in Iraq. As his wife I'm also sad to say that he suffers from the effects of Traumatic Brain Injury and PTSD. Despite this he still works long hours to defend our country and support our family with little to no support from state resources.

Our son Bowen Brown is 15 yrs old and just spent over 150 days locked up in 2 different acute care inpatient wards not equipped to deal with autism. He spent over 60 days at Queens and then 90 days in the UCLA psychiatric unit.

We recently had to send our son 4,700 miles away from family to try and receive needed autism behavioral services. As I speak/write, our son is currently in Virginia while I, his mother is here in Hawai'i. This is where he'll stay for the foreseeable future.

We are trying to get him help in residential program that is only approved for 5 months. We desperately need a functional behavioral assessment (FBA) by Licensed BCBA to identify target behaviors that cause danger to his school and our Waialua community.

We requested, last August, an FBA and IEP with behavior plan to address Bo's dangerous behaviors. We also requested that Waialua Elementary school to help enroll Bo in Child and adolescent mental health. We were hoping for a team effort to help us address Bo's behaviors.

Instead DOE placed Bo on 8 hrs a week homebound services with zero access to any FBA or ABA services or speech therapy. Child and adolescent mental health refused to help us until he was discharged from Queens and Department of Developmental services turned him down because his IQ score was 3yrs old.

So DOE, DDD and CAMHD have denied all services to help address Bo's dangerous autism behaviors. Behaviours such as breaking out of his home, running into traffic, and episodic violent behaviour against both family and strangers. All of these behaviours are clearly dangerous to our community and often results in avoidable tragedies nationwide as we see so often in the news.

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To summarize our situation: the DOE offered zero support or help to address Bo's behaviors and instead he was placed into a homebound program with 10 hours a week of educational services. And now, as a result, we had to leave our child 150 days in acute psychiatric hospitals and then ship him off to Virginia. That is neither Aloha or supportive of the Ohana.

Now we are less than 4 months with a discharge date from Residential care paid by Tricare and DOE refuses speech therapy and an FBA to help facilitate safe transition to Waiialua community and school. Without an FBA and ABA we can't address or help Bo with these dangerous behaviors.

So to summarize, our son is over 4k miles away from home with a return date in 4 months and we can't get DOE to plan and assist with his transition back to school and community. We desperately need an FBA and ABA therapy to address his behavior so he doesn't end up back in Queens cycling in and out until he ends up hurting someone in our community.

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Katrina Dangleman
61-278 Kamehameha Hwy #3
kdangleman@yahoo.com

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Nadia Todd
95-1057 Kaapeha Street #196 Mililani HI 96789
ntodd@maulolearning.com

As a behavior analyst, I have worked in the field for 5 years. I have seen how people with autism are greatly affected by ABA services and without these services, would be highly detrimental. I firmly stand in support of teachers and children having access to appropriately licensed and qualified behavior analysts in the DOE as they are the only professionals who are certified and licensed to provide these services. I have directly been a part of the substantial effects and changes children can make with ABA services in the DOE provided by licensed and qualified behavior analysts. These services provided by professionals is the only way for children on the autism spectrum to reach their highest potential.

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Lilly Atwell
1234 Olino st Honolulu HI 96818
latwell@mauloalearning.com

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Aimee Cueva
975 Ae St Apt 201 Kapolei, HI 96707
acueva.mauloalearning@gmail.com

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Abbas Zaidi
95-1064 Kuauli Street, Unit 212, Mililani, HI 96789
abbaszaidi@hotmail.com

I have a 6 year old special needs daughter Mishal currently enrolled in Mililani Mauka Elementary. Starting at age 18 months she received DOH's early intervention (EI) speech and physical therapy - she also attended Kama'aina kids for a year before enrolling at the local elementary school at age 3. At age 5 and a half the pedi at Kaiser referred us to a specialist behavioral therapist MD who initiated the ABA process after 3 months of further evaluations. It has just been 9 months under a BCBA two twice a week for 3 hours a day and already we have seen a sea change in her personality. Mishal had a dangerous habit of getting out of hand grip suddenly and running off. Once she snapped her hand out of mine and ran onto main Kalakaua Ave stopping traffic ; twice ran off in Pearl Ridge mall where we had to notify security ; and eating out with the tantrums and screaming was out of question. We stopped going out altogether. 9 months of ABA coaching and she now stands next to the car with one hand on the door waiting for the next instruction ; has learnt the rule that once outside the front door she needs her hand to be held to walk ; and we are ecstatic about the increase in vocabulary and expression... but the greatest milestone has been her ability to brush her teeth and use the bathroom independently. We were using on average ten pampers number 7 diapers for her daily - only available from babys'r'us - now we are down to only three a day. The BCBA accompanied us through 2 IEPs at the school and it really helped streamline, improve and better focus some of the goals. To bring synergy where DOE, DOH and insurance are all working together for the best interest of the child there should be an onsite BCBA as part of the school. This will give equal opportunity to every child to be professionally evaluated, assessed, the parents guided on the IEPs and these children access to the ABA methodology in the critically formative years.

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Ebony Fuller
55337 Kamehemaha Hwy, Laie, HI 96762
ebonynuku@gmail.com

I am an RBT for Mau Loa Learning, I have been working in ABA for over a year now and i strongly believe that all of our children on the spectrum should have the right to access ABA services in school. ABA is an evidence based practice that makes monumental positive behavioral changes for those on the spectrum, which then allows for successful skill acquisition. This therapy helps not just the individual receiving the therapy but it Also heavily impacts those who are surrounded by him or her whether at school, home or out In the community. It is important for our kids to have ABA in school as it is a completely different environment which Calls for one on one support which our teachers cannot provide on a consistent basis as they also have other children in their class to watch over and teach. Why anyone would want to remove or limit the access to ABA for our kids in the school system makes no sense as ABA only allows for better behavior management which then in turn opens up the doors for endless learning and generalization of their skills! I am a witness of the positive changes that ABA makes In our kids lives.

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Katie Weldon
46-051 Konohiki St #3731 Kaneohe, HI 96744
klucchesj1990@gmail.com

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Charles White
95-1085 Milia Street
charleswhite7@yahoo.com

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**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Burton Clausen
Address 5029 Milburn Loop, Wahiawa
burt.clausen@live.com

To whom it may concern, I am the parent of a 5 year old who is currently in the DOE Pre K program diagnosed with Autism Spectrum Disorder. He is involved in many supportive therapies outside of the school as it has been a struggle to get any support from the DOE. My child has multiple behaviors that are unfortunately not able to be appropriately addressed as the support we have received from the DOE is minimal. Requesting the help of a licensed behavioral analyst is key to providing my child with an appropriate education. His current Functional Behavior Assessment (FBA) was completed by a guidance counselor who just doesn't have the full education/experience to adequately evaluate my child. It is important that my child be able to having a FBA conducted by a licensed behavior analyst (LBA) so his IEP can reflect his needs. He has every right to receive an education that will make him successful.

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Wendy Marks
73-4364 Hau Nani St. Hawai'i
kamalani.marks76@gmail.com

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Lurlyne Sabug
P.O. Box 334 Waialua, HI 96791
lurbug75@gmail.com

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Kyle Malazdrewicz
1125A 2nd Avenue
kmalaz@Hawai'i .edu

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If funding is truly the primary barrier in increasing the availability and accessibility of ABA within the DOE, then SB 2520 provides a solution. Once additional funding is made available, ABA should be more readily accessible to our children. If it is not, then we must look to barriers outside of funding.

Mahalo for introducing this bill in support of our teachers, our keiki, and SB 2520.

Please malama our keiki.

Committee on Ways and Means
Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice Chair
Wednesday, February 28, 2018 10:45 am
Conference Room 211, State Capitol

**SB 2520 Relating to Behavior Analysis
Testimony in STRONG SUPPORT**

Vicki Davis - Grandparent
P O Box 566, Mt. View
Hawai'i
bootsaloha@hotmail.com

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To my knowledge, I am the only Licensed Behavior Analyst and Psychologist in the State of Hawai'i , which affords me a unique perspective on this legislation. I spent 5 years completing my PhD in Psychology with an emphasis in Behavior Analysis from West Virginia University. I became a Board Certified Behavior Analyst in 2000. Upon returning back home to Hawai'i in 2003, and over the course of the next four years, I respecialized in Clinical Psychology at the University of Hawai'i , a program which included an American Psychological Association (APA) accredited internship at the Veteran Affairs (VA) and a year of postdoctoral experience. Having received education and training in both Behavior Analysis and Clinical Psychology programs, I would like to share my experiences and insight into the differences between the two training paradigms.

Applied Behavior Analysis (ABA) is not typically in the scope of practice for many psychologists. In fact, there are only a handful of Clinical Psychology programs in the country that offer a subspecialty in ABA. Even though some Clinical or Counseling Psychology programs offer training and coursework focusing on people with Autism Spectrum Disorders (ASD) or broader training on people with Developmental Disabilities, the training is not necessarily behavior-analytic in nature. Rather, the training focuses on diagnostic assessment tools, such as the administration and interpretation of psychological test measures for people with ASD or broad training in family therapy for parents of children with ASD. To say that one is knowledgeable in ABA because they have received training on people with ASD is not sufficient. One must also receive specific coursework and training in ABA.

Furthermore, there are many schools of thought in psychology. A psychologist's orientation or identity with a specific branch within psychology dictates treatment approaches. For example, some branches of psychology focus on understanding the underlying personalities of the person, which may result in specific approaches not being based in scientific methods, but rather more 'eclectic' in nature. ABA, however, is a science based on principles of learning theory, which again, may or may not be the philosophy of general psychology programs.

Additionally, some psychology programs may offer training in behavioral approaches that are based on cognitive behavior therapy (CBT) and not ABA. CBT combines behavioral and cognitive interventions to modify maladaptive thoughts, self-statements and beliefs. While CBT is efficacious, the training and implementation of CBT is different than the training and implementation of ABA procedures.

As well, there are behaviorally-orientated psychology programs that provide education and training in ABA. Psychologists who have received specific education and training in ABA have the experience and the demonstrated competency to be able to practice ABA without being licensed as a behavior analyst. Psychologists should continue to supervise trainees, paraprofessionals, and others in accordance with the licensure laws of their profession. The behavior analyst licensure does and should not restrict

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psychologists who have the experience to practice within their scope of competency or restrict their supervision, which I believe was not the intent of the law.

Finally, other bills relating to behavior analysis this session propose an amendment to open up who can practice ABA as a direct support worker. Legislators are being led to believe that a credential from a “national certifying agency” is equivalent to the Registered Behavioral Technician (RBT) credential from the Behavior Analyst Certification Board (BACB). I have supervised doctoral students in Clinical Psychology programs and students in Mental Health Counseling programs. As practicum students at my clinic, I require any student, regardless of their discipline, to become a Registered Behavioral Technician (RBT) to implement ABA. The RBT sets forth rigorous standards on training, competency assessments, and ongoing supervision. Allowing other national certifying agencies, outside of the RBT, would dilute the rigor of ABA programs and place clients in significant harm.

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Christine Kim Walton, PhD, BCBA-D, LBA
Executive Director, Behavior Analysis No Ka Oi, Inc.

**SB 2520 Relating to Behavior Analysis
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Aloha,

On July 4th, 2017 the BBC news published an online article about the Maori language of New Zealand expanding its vocabulary by 200 words and phrases to describe mental health among other issues. One of the keywords that means the most to me to learn is "Takiwatanga", meaning "his or her own time and space" as the Maori's description of Autism.

I've known since his birth that my son was in his own time and space. It took the rest of the world five and half years to realize it too. He was "so smart", "too sweet", and "just normal enough" that no one wanted to see it until the most difficult of his behaviors in our settings happened in theirs.

Screaming, self-harm, physical aggression, and elopement which resulted in his school losing him for 45 minutes all had to happen before a skills trainer was provided by the DOE. The grace by which my child was returned by a retired couple in the neighborhood can never be thanked enough.

I'll say it again and please, read each word slower... It took losing my five year old child for 45 minutes, cops called, all disposable staff dispersed to help look for him, and me trying to drive 13 horrific miles to get from work to school before he was seen as a priority by the DOE.

Meanwhile my insurance had allotted six hours of ABA therapy based off what "data" the school had provided prior to the elopement and an initial analysis by the only ABA services taking clients on the island of Oahu at that time. Those six hours are precious and not one of them can be used in class. Not one.

Instead, a "skills trainer" with half as much knowledge as an ASD mother armed with google is assigned to him from bell to bell. Equally as upsetting is the low wages these trainers are paid. Additionally, there is no obligation from the DOE to provide any continuity of skills trainers. Which is vital for ASD children. This is not a reflection of the good-intentions and big heart the skills trainers I've met have, but a hard stare at the severe lack of understanding, training, and ability to allow ASD children opportunities to advance.

The talents, gifts, and attributes of all children would benefit greatly from many changes within our DOE, but today I can only testify on this change. Those 'In their own time and space' need

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specialists early, often, and in all settings to properly direct behaviors and teach appropriate skills to help them function in the surrounding world.

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Dawna Moriarty

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Phaedra Robinson
623 Akoakoa St. Kailua, Oahu
drlhaedra@me.com

I am a longtime special education here on Oahu and I have seen my students benefit immensely from the implementation of a well constructed program using applied behavior analysis [ABA] by licensed behavior analysts [LBAs]. My students would not have benefited from their education without it and even as highly trained as I am as a teacher, I could not provide the level of services and supports needed without having an LBA on the IEP team. They are invaluable members of an IEP team.

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SB-2520

Submitted on: 2/27/2018 10:39:03 AM

Testimony for WAM on 2/28/2018 10:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Brian Burdt	Individual	Support	No

Comments: