



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

Date: 02/28/2018

Time: 02:45 PM

Location: 229

Committee: Senate Education
Senate Commerce, Consumer Protection,
and Health

Department: Education

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

Title of Bill: SB 2925 RELATING TO THE PRACTICE OF BEHAVIOR ANALYSIS.

Purpose of Bill:

Department's Position:

The Department of Education (Department) strongly supports SB 2925. This measure addresses the scope of licensure for individuals engaged in the practice of behavior analysis in a school setting.

SB 2925 explicitly differentiates between behavior analysis practices and an applied behavior analysis (ABA) program, which will allow the Department to identify positions that require additional licensing. Pursuant to Chapter 465D, Hawaii Revised Statutes (HRS), current state law prohibits individuals from engaging in the practice of behavior analysis without a valid license. This language, "the practice of behavior analysis," may be interpreted to include many evidence-based educational and behavioral interventions commonly used in the school setting for decades.

The Department's effort to provide students with ABA in a school setting is a work in progress. The Department is committed to continuing our discussions with the Hawaii State Teachers Association, Hawaii Government Employees Association (HGEA), parents and other stakeholders about ABA as we must accomplish this work together. Students are our top priority and all parties are committed to finding common ground to improve our responsiveness to Hawaii's families.

SB2925 proposes clarifying the scope of ABA service delivery to students who are in need of ABA to progress and/or gain new skills or replacement behaviors with a licensed behavior analyst (LBA) and a Registered Behavior Technician (RBT) as part of their educational team.

Challenges with Chapter 465D, HRS, and HB2271 HD2

- **HB2271 HD2 expands the scope of the practice of behavior analysis when addressing behaviors to all students** . Teachers, school counselors, and other educators not licensed as a behavior analyst, are limited from effectively managing and supporting student learning in a school setting. As proposed, teachers would not be allowed to teach and manage the day-to-day behaviors exhibited by all children in a classroom setting without the supervision of a LBA.
- For example, a Kindergarten teacher establishing behaviors for sitting in a “morning circle” would be required to be a LBA or a RBT supervised by a LBA. Until this teacher earned his/her behavior analyst credentials, the Department would need to contract with licensed individuals. This licensing requirement would be fiscally impractical and union issues would need to be resolved through collective bargaining. Limiting a teacher’s ability to address behaviors as they occur in the classroom is poor teaching practice and ultimately harmful to the well being of the students.
- **HB2271 HD2 proposes an expanded scope of the practice of behavior analysis and restricts the supervision of direct support workers (e.g., educational assistants [EA]) exclusively to LBAs** . The Department would need to procure contractors to provide supervision for direct support workers in classrooms. This action cripples the educational oversight of licensed educators (e.g., teachers) in the school setting from leading and directing paraprofessionals to implement educational and behavioral strategies. For example, an EA redirecting a student during a reading lesson could not be supervised by the classroom teacher unless that teacher is licensed as a LBA.
- A total of 2112 special education EA positions for classroom support were allocated in school year 2017-18. Under HB2271 HD2, all special education EAs would need to become RBTs. The Department would need to consult with HGEA to address expanded EA minimum qualifications in the employees’ bargaining unit contract.
- With a limited number of RBTs to contract in Hawaii, the Department would need to seek out-of-state resources which would significantly increase costs. As of February 2018, there are 602 RBTs in the state, working mostly with health insurance providers.
- Further, requiring a direct support worker (e.g., EA) to possess the RBT credential issued only by the Behavior Analyst Certification Board (BACB) excludes other nationally credentialed behavior technicians from implementing ABA programs in Hawaii public schools. This exclusive right narrows the field of qualified individuals available for hire.
- **Current Chapter 465D, HRS, licensure requirements mandate LBAs design, and supervise RBTs to implement, behavior analysis interventions** . Any other licensed professional, designing interventions and/or supervising an EA, are subject to a daily fine of not more than \$1000 by the Hawaii State Department of Commerce and Consumer Affairs (DCCA). This sanction is stressing Department staff, may trigger union grievances, and possibly result in a review by the Hawaii Labor Relations Board.
- **HB2271 HD2 would require the Department to review minimum requirements of approximately 800 Department employees (e.g., school-based behavioral health [SBBH] employees)**. This review would result in displacement, reassignment and/or requiring employees to seek additional licensing. These HGEA employees currently serve approximately 10,000 students, 4,545 of whom have Individualized Education Programs (IEPs). In this situation, the Department would need to expend funding to procure licensed contractors to provide services to students.

Current Status

As of February 1, 2018, 1909 students with Autism Spectrum Disorder (ASD) are enrolled in Hawaii public schools. Three hundred thirty-five (335) of the total 1909 ASD students, or 17.5 percent, have IEPs that include ABA services. All 335 of those students are receiving an ABA program. An additional 240 students who are non-ASD also receive ABA services per their IEP to support their learning. Currently ABA services are provided by LBAs, RBTs, licensed teachers, educational assistants, and SBBH personnel.

SB 2925 does not replace the services and expertise of the SBBH employees, who serve a vital role in the school-based behavioral health continuum of services that serve students with behavioral and emotional needs. SBBH provides mental and behavioral health counseling and intervention services supporting all students. These services are provided in the framework of a Positive Behavior Intervention System or IEP service.

Building Internal Capacity

The Department needs additional time to continue building its internal capacity of licensed LBA and RBTs who provide evidence-based interventions as part of an ABA program.

This measure affords the Department sufficient time to develop capacity of existing personnel. The Department estimates 38 LBAs and 575 RBTs will be needed based on 575 total students who are receiving ABA services. The Department anticipates the number of students receiving ABA services will increase. This increase will require additional LBAs and RBTs to meet the students' service needs.

The BACB professional competencies for both BCBAs and RBTs are rigorous and includes both coursework and field performance. While the Department has increased the number of BACB credentialed employees (see table below), it will take at least an additional three (3) years to reach full capacity.

To support employees becoming LBAs and RBTs, the Department is currently assessing the anticipated needs of the program to appropriately compensate fully trained and certified staff at various levels. The scope of RBT and LBA duties falls under several bargaining units (BUs), so the final plans for each BU may differ, as determined by a complete review of the proposed job duties and minimum requirements.

HIDOE BACB (Behavior Analyst Certification Board) Credentialed Personnel				
District/ Complex Area	# of LBAs	# of Individuals in a BCBA* Training Program	# of RBTs	# of Individuals in a RBT Training Program
Honolulu District	1	0	0	10
Central District	1	4	1	21
Leeward District	0	15	0	44
Windward District	4	8	5	29
Hawaii District	0	4	0	30
Maui District	5	7	2	3
Kauai District	1	0	0	5

STATE	3	1	1	3
Total	15	39	9	145

*BCBA – Board Certified Behavior Analyst

Costs

The cost of obtaining a Board Certified Behavior Analyst (BCBA) certification for LBAs has been estimated at \$20,000 per individual. This includes both the graduate level coursework and required hours of supervision. RBT certification runs about \$1,100 per individual and comprises both didactic and performance training. It should be noted that a RBT must be supervised by a LBA in order to retain their credential. The cost is approximately \$12,600 annually per RBT.

This measure proposes to clarify the scope of ABA service delivery to students with behaviors who require ABA services to progress and/or gain new skills or replacement behaviors. Based on SB 2925, the Department anticipates initial program implementation costs to be approximately \$2.0M with additional post-implementation costs to sustain internal capacity. Additional funding would need to be expended by the Department to procure licensed contractors to provide services to students.

Recommended Amendments

The Department respectfully offers the following amendments for consideration: (page 5, lines 10, 12-13, and 18-19; page 7, lines 12 and 15-16) Strike “Behavior Analyst Certification Board” and replace with “national certifying agency (such as Qualified Applied Behavior Analysis and Behavior Intervention Certification Council or any other who meet accreditation requirements by the American National Standards Institute [ANSI] or the National Commission for Certifying Agencies [NCCA]).”

(page 6, line 1) Insert “in an educational setting” so language reads “(B) Is a direct support worker in an educational setting who...”

SB 2925

The Felix Consent Decree and Luke’s Law have both served to ensure the Department provides a menu of services delivered by school-based behavior health specialists and licensed and credentialed professionals to best meet the needs of students.

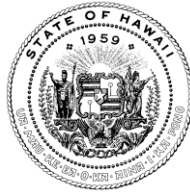
The Department recognizes the practice of behavior analysis in the school setting for all students is valuable. However, licensure requirements for the Department should be limited to practitioners designing and implementing an ABA program for students who exhibit extreme behaviors and for whom less intensive interventions were unsuccessful.

The Department is committed to providing students in need of ABA with a LBA and RBT, as part of their educational team.

Thank you for the opportunity to provide testimony on SB 2925.

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.



DAVID Y. IGE
GOVERNOR
DOUGLAS S. CHIN
LT. GOVERNOR

STATE OF HAWAII
OFFICE OF THE DIRECTOR
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
335 MERCHANT STREET, ROOM 310
P.O. Box 541
HONOLULU, HAWAII 96809
Phone Number: 586-2850
Fax Number: 586-2856
cca.hawaii.gov

CATHERINE P. AWAKUNI COLÓN
DIRECTOR
JO ANN M. UCHIDA TAKEUCHI
DEPUTY DIRECTOR

PRESENTATION OF
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
REGULATED INDUSTRIES COMPLAINTS OFFICE

TO THE SENATE COMMITTEES ON
EDUCATION
AND
COMMERCE, CONSUMER PROTECTION, AND HEALTH

TWENTY-NINTH STATE LEGISLATURE
Regular Session of 2018

Wednesday, February 28, 2018
2:45 p.m.

**TESTIMONY ON SENATE BILL NO. 2925, RELATING TO THE PRACTICE OF
BEHAVIOR ANALYSIS.**

TO THE HONORABLE MICHELLE N. KIDANI, CHAIR, THE HONORABLE ROSALYN
H. BAKER, CHAIR, AND MEMBERS OF THE COMMITTEES:

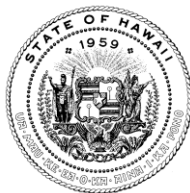
The Department of Commerce and Consumer Affairs (“Department”) appreciates the opportunity to testify on S.B. 2925, Relating to the Practice of Behavior Analysis. My name is Daria Loy-Goto, and I am the Complaints and Enforcement Officer for the Department’s Regulated Industries Complaints Office (“RICO”). RICO offers the following enforcement-related comments.

S.B. 2925, which is a companion to H.B. 2271, amends Hawaii Revised Statutes (“HRS”) chapter 465D by adding a new section that: (1) sets forth the activities in a school setting that would require compliance with the chapter; and (2) authorizes persons licensed under the chapter or board-certified to supervise certain registered or certified individuals to perform behavior analysis services. S.B. 2925 also revises section 465D-7(3) by redescribing certain exemptions from the chapter.

With regard to section 2 of the bill, RICO concurs with the request from the Professional and Vocational Licensing Division (“PVL”) that the term “national certifying agency” on page 3, lines 4-5 and page 4, lines 11-12 and 14-15 be specifically identified. Also, because PVL does not register behavior technicians, RICO suggests that the term “registered behavior technicians” on page 4, line 13 be defined.

With regard to section 3 of the bill, RICO requests clarification of the term “licensed professional” on page 6, line 5. Based on testimony of other related bills, RICO believes this term may be intended to address the supervisory role of licensed psychologists; however, the bill as currently drafted could be broadly interpreted to include any individual with a professional license.

Thank you for the opportunity to testify on S.B. 2925. I am available to answer any questions the Committees may have.



DAVID Y. IGE
GOVERNOR

DOUGLAS S. CHIN
LIEUTENANT GOVERNOR

STATE OF HAWAII
OFFICE OF THE DIRECTOR
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS

335 MERCHANT STREET, ROOM 310

P.O. BOX 541

HONOLULU, HAWAII 96809

Phone Number: 586-2850

Fax Number: 586-2856

cca.hawaii.gov

CATHERINE P. AWAKUNI COLÓN
DIRECTOR

JO ANN M. UCHIDA TAKEUCHI
DEPUTY DIRECTOR

**PRESENTATION OF THE
PROFESSIONAL AND VOCATIONAL LICENSING DIVISION**

TO THE SENATE COMMITTEES ON
EDUCATION
AND
COMMERCE, CONSUMER PROTECTION, AND HEALTH

TWENTY-NINTH LEGISLATURE
Regular Session of 2018

Wednesday, February 28, 2018
2:45 p.m.

WRITTEN TESTIMONY ONLY

**TESTIMONY ON SENATE BILL NO. 2925, RELATING TO THE PRACTICE OF
BEHAVIOR ANALYSIS.**

TO THE HONORABLE MICHELLE N. KIDANI, CHAIR, THE HONORABLE ROSALYN
H. BAKER, CHAIR, AND MEMBERS OF THE COMMITTEES:

My name is Constance Cabral, and I am an Executive Officer within the Professional and Vocational Licensing Division (“PVL”). Thank you for the opportunity to provide testimony on S.B. 2925, Relating to the Practice of Behavior Analysis, which is a companion to H.B. 2271. PVL takes no position on this measure and offers the following comments.

S.B. 2925 clarifies the scope of licensure for individuals engaged in the practice of behavior analysis in the school setting.

This measure provides for “board certification from a national certifying agency” on page 3, lines 4-5 and page 4, lines 11-12 and lines 14-15. As PVL lacks the

expertise to determine the credibility of national certifying agencies, we respectfully request that this measure identify those agencies. Also, because PVL does not register behavior technicians, we suggest that this measure define “registered behavior technicians” on page 4, line 13.

Thank you for the opportunity to provide written testimony on S.B. 2925.



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 Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair
COMMITTEE ON EDUCATION

Senator Rosalyn H. Baker, Chair
Senator Jill N. Tokuda, Vice Chair
COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH

February 25, 2018

Wednesday, February 28, 2018, 2:45pm
Conference Room 229
State Capitol
415 South Beretania Street

Testimony SUPPORTING SB2925
RELATING TO THE PRACTICE OF BEHAVIOR ANALYSIS
and recommending amendments

The Hawaii Psychological Association (HPA) strongly supports Senate Bill 2925 with amendments that clarify the scope of practice for psychologists and other qualified professionals. The HPA is very concerned that language in Act 199, the previous legislation applying to treatment services for autism and the licensure of Board Certified Behavior Analysts (BCBAs), unintentionally restricted well-qualified professionals from providing services to children with autism and other behavioral challenges and unintentionally provided a monopoly for one certifying agency, the Behavior Analyst Certification Board. The HPA supports SB 2925 provided that it seeks to correct the restraint of trade issues that the previous legislation created.

Our intention is to clarify the language so that properly trained psychologists can continue to provide services and continue to supervise paraprofessionals in the multi-tiered delivery model that is the standard of practice in autism and is frequently used in behavioral treatment of people with other mental health challenges. We support SB2925 with proposed amendments which would clarify psychologists' scope of practice. The practice of psychology, as defined in Hawaii state statute, includes the practice of "Behavior Analysis" and the supervision of assistants such as postdoctoral fellows, students and unlicensed master's level clinicians. In a

multi-tiered model, a psychologist may supervise post-doctoral fellows, unlicensed master's level clinicians, and students as these trainees then supervise paraprofessionals, direct support workers, and family members in the implementation of a behavioral program. This clarification would prevent an unnecessary narrowing of the behavioral health workforce by allowing more variety in the acceptable training and certification requirements for paraprofessional workers and their supervisors.

Proposed amendments:

- **We recommend adding a part (c) to Section 3 (at line 16 on p.4) to read:**
This section is not intended to restrict the practice of licensed psychologists or their supervisees in the school setting.
- **We recommend changing Section 3(a)(1) on exemptions (at line 1 on p. 5) to read:**
An individual working within the scope of practice or 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; and provided further that the ~~[person does not purport to be a behavior analyst]~~ licensed professional and the supervised individual shall not use the title of "licensed behavior analyst";

Please see the attached document from the American Psychological Association Practice Organization: "Statement on Behavior Analysis and Behavior Analysts" and the second attached document from the American Psychological Association on: "Applied Behavior Analysis" which both serve to further support the position that Behavior Analysis is a long practiced discipline within psychology. The support for these behavioral approaches being voiced by parents in connection with this and other related bills serves to emphasize the effectiveness of this approach, originally developed by and still practiced by many psychologists. The specific degree or certification held by the practitioner does not alter this. Psychologists are not claiming to have a monopoly on these practices, although we pioneered them – we simply do not want to be forced to give up useful technologies that are needed by our keiki and families because a relatively young profession has developed this particular technical expertise.

We strongly support SB2925 with the proposed amendments which clarify psychologists' scope of practice and prevent an unnecessary narrowing of the behavioral health workforce within the school setting.

Tanya Gamby, Ph.D.
President
Hawaii Psychological Association



COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH
Senator Rosalyn H. Baker, Chair
Senator Jill N. Tokuda, Vice Chair
Wednesday, February, 28, 2018 2:45 pm
Conference Room 229, State Capitol

**SB 2925 Relating to the Practice of Behavior Analysis
SUPPORT w/amendments**

Honorable Chairs Kidani and Baker, Vice Chairs Kahele and Tokuda, and members of the committees,

My name is Kathleen Penland and I am the President for the Hawai'i Association for Behavior Analysis (HABA). Thank you for introducing this bill, to allow for continued conversation relating to the licensure of behavior analysis (HRS Chapter 465-D). There are many vehicles this session which pertain to behavior analyst licensure, however we feel the revised language is confusing to consumers, legislators, and related stakeholders. HABA sees SB2925 as an opportunity to have a clean draft of the proposed amendments. We respectfully request the committee chairs agree to match the preamble of this bill (SB 2925) with what is now listed in the companion bill (HB 2271 HD2) and adopt the additional amendments, as proposed by HABA. Our proposed language has been shared with Hawai'i State Teachers Association (HSTA), Hawai'i Medical Service Association (HMSA), Hawai'i Disability Rights Center (HDRC), and the Hawai'i Psychological Association (HPA), in an effort to be collaborative and transparent. HABA's mission is to educate, advocate for, and support both providers and consumers of Applied Behavior Analysis (ABA). To that end, we have obtained over 200 pieces of testimony in opposition of the original language of SB 2925. Of the 240 pieces, 200 were submitted by parents and community members. Only 40 pieces, or 17% of the testimony submitted, reflect the positions of ABA providers in the state. The outcry from parents and community members speaks to how important this issue is to those who are most deeply affected. Hawai'i public schools have let our children with developmental disabilities fall through the cracks for far too long. We cannot allow the status quo in the Department of Education (DOE) to continue. HABA represents its members, Hawai'i's ABA providers, and the consumers of ABA in support of SB 2925 with amendments.

HABA has significant concerns with the original language in this bill.

- Bill is believed to violate several federal laws; I.D.E.A., FAPE, and the American with Disabilities Act (ADA)
- Bill seeks to limit ABA services to students as a reactive approach. Bill requires a “fair first” approach, and would not allow students in need access to a licensed behavior analyst in the DOE setting. “... when serving a student whose behaviors have not been amenable... to multi-tiered positive behavioral supports...” Why wait until our keiki fail before implementing something we know will work?
- “National certifying agency” is too broad, a concern of consumer protection. Please note: Last year’s testimony on SB 739 included comments from CARD, QABA, and BICC, all of which are organizations with a financial interest in the outcome of this bill. In addition, according to their online registries, there are currently only 154 active ABATs (QABA), with 0 in Hawaii, and 1847 active BCATs (BICC), with only 2 in Hawaii. There are currently 587 RBTs in Hawai’i with capacity growing daily .
- “... A direct support worker who directly implements an applied behavior analysis program under supervision of a licensed professional and does not design intervention or assessment plans” is also too broad. What are the minimum credentials, initial and ongoing training, and supervision requirements for the direct support worker? We respectfully defer to the testimony of Dr. Gina Green, Association for Profession of Behavior Analysts (APBA) for additional comment on this matter specifically.
- ABA programming for learners, as any other specialized field, should be designed and supervised by qualified professionals. This group of professionals with appropriate training in applied behavior analysis are those who are Board Certified as Behavior Analysts (BCBA) or licensed Clinical Psychologists with explicit training and supervision in behavior analysis. While much of the day-to-day ABA work can be performed by certified teachers and well-trained registered behavior technicians (RBTs), behavior analytic programs should always be overseen by highly-trained [licensed] professionals.
- Please see the document added on to the end of this testimony, where we review and respond to the DOE’s concerns with Chapter 465-D.
- HABA stands firmly in support of our teachers and keiki having access to appropriately licensed and qualified behavior analysts in the DOE setting. While we appreciate the support of teachers and other IEP team members, the DOE, as a system, has not made transparent efforts to build capacity and provide ABA in their schools. We encourage the ongoing discussion of how to collectively improve the integrity of behavioral health services here in Hawai’i and are willing to work together to make this happen.

We believe our proposed amendments allow psychologists and their supervisees the ability to practice behavior analysis, when it is in the boundary of their education, training, and competence. This will ensure psychologists' right to practice behavior analysis while maintaining consumer protections. We also believe the amended language will provide teachers the necessary protections to practice, while also protecting our keiki and other recipients of ABA services.

Thank you for the opportunity to testify. I am available for questions.

Mahalo,

Kathleen Penland, M. Ed. BCBA, LBA

Kathleen Penland

President, Hawai'i Association for Behavior Analysis

[§465D-7] Exemptions. (a) This chapter is not intended to restrict the practice of other licensed or credentialed practitioners practicing within their own recognized scopes of practice and shall not apply to:

(1) "Individuals licensed in this State to practice other professions and their supervisees, provided that behavior analysis is in the scope of practice of the profession's licensure law; and the services provided are within the boundaries of the licensed professional's education, training, and competence, and provided that the person does not purport to be a behavior analyst;

~~(1) An individual working within the scope of practice or duties, which that overlaps with the practice of behavior analysis; provided that the person does not purport to be a behavior analyst;~~

(2) "Individuals licensed in this State to practice psychology and their supervisees, provided that behavior analysis is in the scope of practice of the psychology licensure law and the behavior analysis services provided are within the boundaries of the licensed psychologist's education, training, and competence, and provided that the person does not purport to be a behavior analyst;

~~(2)~~ (3) An individual who implements or designs ~~applied~~ behavior analysis services and possesses board certification as an assistant behavior analyst by the Behavior Analyst Certification Board and who practices in accordance with the most recent supervisory and ethical requirements adopted by the Behavior Analyst Certification Board under the direction of a behavior analyst licensed in this State;

(4) A licensed classroom teacher, or someone who is working as a classroom teacher and is enrolled in a teacher preparation program working towards licensure, in a school setting, who implements and does not design, behavior analysis services in direct collaboration with a professional licensed to practice behavior analysis in this State;

~~(3)~~ (5) An individual who directly implements and does not design ~~applied~~ behavior analysis services and:

(A) Is credentialed as a registered behavior technician by the Behavior Analyst Certification Board and is under the direction of a behavior analyst licensed in this State;

(B) Is a direct support worker in a school setting who directly implements a behavior analysis program under the supervision of a professional licensed in this State to practice behavior analysis ~~and does not design~~ intervention or assessment plans on or before January 1, 2019;

~~[(C)] Is a direct support worker who provides Medicaid home and community-based services pursuant to section 1915(c) of the Social Security Act on or before January 1, 2019;~~

provided that for purposes of this paragraph, "direct support worker" means a ~~teacher or~~ paraprofessional;

(6) An individual who designs or implements behavior analysis services to participants in the medicaid home and community-based service waiver program pursuant to section 1915(c) of the Social Security Act on or before January 1, 2024;

~~(7) (4) A family member [or], legal guardian, or caregiver implementing an applied behavior analysis plan and who acts under the direction of a licensed behavior analyst [licensed in this State;] or licensed psychologist;~~ provided that for the purposes of this paragraph, "caregiver" means an individual who provides rehabilitative services in an adult foster home, developmental disabilities domiciliary home, adult residential care home, expanded adult residential care home, special treatment facility, or therapeutic living program pursuant to the medicaid home and community-based service waiver;

~~(8) (5) An individual who engages in the practice of behavior analysis with nonhuman or nonpatient clients or consumers including but not limited to applied animal behaviorists and practitioners of organizational behavior management;~~

~~(9) (6) A matriculated graduate student or postdoctoral fellow whose activities are part of a defined behavior analysis program of study, practicum, or intensive practicum; provided that the student's or fellow's activities or practice is directly supervised by a behavior analyst licensed in this State or an instructor in a Behavior Analyst Certification Board-verified course sequence;~~
or

~~(10) (7) An individual pursuing experience in behavior analysis consistent with the Behavior Analyst Certification Board's experience requirements; provided that the experience is supervised by a behavior analyst licensed in this State.~~

Nothing in this chapter shall be construed to prevent any licensed psychologist from the practice of behavior analysis in this State as long as the person is not in any manner the public as a "licensed behavior analyst" or "behavior analyst" and the behavior analysis services provided by the licensed psychologist are within the licensed psychologists recognized scope of practice.

Written in response to the Hawai'i Department of Education's: "Report on Behavior Analyst and Certification Requirements Implementation" (submitted to the Legislature: dated January 5, 2018)
http://www.hawaiipublicschools.org/Reports/LEG18_ABA.pdf

(1) DOE Statement: "Act 199, Session Laws of Hawai'i, codified as Chapter 465D, established standards for the licensing of behavior analysts to address the present and critical need to ensure that persons requiring diagnosis and treatment for autism receive the care they need. Act 199 recognized that behavior analysts and the practice of behavior analysis should be the subject to regulation and control to protect the public from unqualified practitioners and from unprofessional conduct."

HABA Reply: Chapter 465-D, Behavior Analyst Licensure, originally served as a companion bill to the Autism Insurance Legislation (also known as "Luke's Law"). Despite it being spurred to assist in regulating services for individuals with autism, behavior analysis is a respected, stand-alone profession that does not align itself with any one population, disease, or disorder. It would be incorrect to consider ABA as an "autism-only" treatment, the same way it would be incorrect to consider psychological services appropriate only for those who have been diagnosed as schizophrenic.

"Although autism insurance laws may be the impetus for regulating behavior analysts, the definition of practice should not be restricted to practice with a particular consumer or client population. This Model Act presumes practice will involve human clients and consumers. Please see Section F for exemptions of the practice behavior analysis in other contexts" (e.g., applied animal behavior) (Behavior Analyst Model Licensing Act – BAMLA).

(2) DOE Statement: "Program planning and implementation are progressing and ongoing."

HABA Reply: There are currently no existing positions or external postings for licensed behavior analysts or Registered Behavior Technicians in the Hawai'i DOE, as evidenced by the Hawai'i DOE directory (11/20/2017; 1/5/2018).

The DOE 1/5/2018 Directory lists Daniel Cordial as a Behavior Health Specialist (BHS). It is our understanding the DOE no longer employs Mr. Cordial. In June 22, 2017, a report was filed with RICO (Regulated Industries Complaints Office) against Mr. Cordial for practicing behavior analysis outside his scope of training and qualifications. On July 12, 2017 RICO informed the complainant that the "above-referenced case number will be referred to the Field Investigation Section of the Regulated Industries Complaints Office" (RICO).

(3) DOE Statement: Teachers practice overlaps with the practice of ABA. "Therefore, the recognized scope of practice of teachers and other professionals overlap with the practice of behavior analysis. Licensed teachers and other licensed educational professionals are exempt per HRS 465-7(a)(1).

HABA Reply: "ABA programming for learners, as any other specialized field, should be designed and supervised by qualified professionals. This group of professionals with appropriate training

in applied behavior analysis are those who are board certified as behavior analysts (BCBA) or licensed clinical psychologists with explicit training and supervision in behavior analysis. While much of the day-to-day ABA work can be performed by certified teachers and well-trained registered behavior technicians (RBTs), behavior analytic programs should always be overseen by highly-trained [licensed] professionals" (New York).

Teachers are not licensed by the Department of Commerce and Consumer Protection (DCCA), which means they are not regulated by RICO (Regulated Industries Complaints Office). As stated in Chapter 465-D, a teacher "directly implements intervention or assessment plans under supervision and does not design intervention or assessment plans."

<https://cca.hawaii.gov/pvl/files/2015/12/HRS465D-BehaviorAnalysts-0716.pdf>

"The board of examiners filed an action against the board of education, DPI, and the speech pathologists, alleging that persons unqualified under the Licensure Act for Speech and Language Pathologists and Audiologists, N.C. Gen. State 90-292-90-319 (1993), were employed in public schools to practice speech pathology. The trial court entered summary judgment against the board of examiners. The court reversed the summary judgment and it remanded the action to the trial court. The court held that (1) the school employees did not qualify for an exemption from the licensing requirements in N.C. Gen. Stat. 90-294(c)(4) because they did not hold proper credentials as speech pathologists; (2) N.C. Gen. Stat. 115C-296(a), 115C-21(b)(1) (1994), which authorized the board of education to certify teachers and the DPI to administer board of education policies did not take precedence over the specific terms of the Licensure Act and did not give the board of education or DPI power to employ non-credentialed speech pathologists; and (3) the power conferred to the board of education under N.C. Const. art. IX, 5, was subject to limitation and revision by North Carolina's legislature."

This would be the same as saying teachers practice overlap with the practice of speech and language therapists, and therefore "the recognized scope of practice of teachers overlap with the practice of speech pathology, and are exempt per Chapter 468", which is not the case.

(4) DOE Statement: Students with severe behavior needs require an intensive program where a Licensed Behavior Analyst (LBA) is necessary to develop and supervise a behavior program.

HABA Reply: We agree, which is why we are especially concerned that there are currently no licensed behavior analysts (LBA) employed by the Department of Education (DOE) (HIDOE Provider Directory: 1/5/2018). We would also like to emphasize that behavior analysis is a treatment modality that is appropriate for children whose deficits might be referred to as mild or severe. There is no research that suggests ABA is only effective or necessary for severely impacted children.

(5) DOE Statement: "Typically these cases involve students who engage in behaviors that are harmful to self and/or others (i.e., physical aggression, property destruction, self-injurious behaviors) and whose behaviors remain unchanged after provided with positive behavioral interventions. As a result, the

Individualized Education Program (IEP) team may determine the need for a comprehensive Applied Behavior Analysis (ABA) program developed and supervised by an LBA.”

There are approximately 1,000 ASD students who require intensive instruction, as indicated by the need for one-to-one support. These students may require ABA as an IEP service provided by an LBA and Registered Behavior Technician (RBT).

HABA Reply: The DOE website lists 1,820 students who have qualified for an IEP under a classification of autism. *The DOE has testified during the 2018 legislative session that there are 1,909 students who qualify for an IEP under a classification of autism.*

- How many of these students have been recommended Applied Behavior Analysis (ABA)?
- How many of these students have ABA included in their Individualized Educational Programs (IEP)?
- How many of these students have a Licensed Behavior Analyst (LBA) as a member of their IEP team?
- How many of these students have a Registered Behavior Technician (RBT) as a member of their IEP team?
- How many students without an autism diagnosis have a Behavior Support Plan (BSP) as part of the IEP programming? Of those students, how many have a Licensed Behavior Analyst as a member of their IEP team?

(6) DOE Statement: “Health insurance plans pay for medically necessary ABA therapy pursuant to a treatment plan. HMSA, Kaiser, and Quest have acknowledged the HIDEOE’s responsibility for developing and implementing ABA as part of the student’s IEP.”

HABA Reply: The Hawai’i DOE has not accepted responsibility for developing and implementing ABA as part of students IEPs.

(7) DOE Statement: “Health insurance plans do not fund services provided in the IEP, which are considered duplicative.”

HABA Reply: Because the Hawai’i DOE does not currently provide ABA, designed and overseen by Licensed Behavior Analysts (LBA) and provided by Registered Behavior Technicians (RBT) none of the behavioral health services offered by the DOE are considered duplicative or reimbursable by health insurers.

(8) DOE Statement: “The HIDEOE’s guidance does not allow a parent’s private provider on campus during the school day to serve students, as this would interfere with the school’s obligation to implement the student’s educational program. All educationally relevant services, including ABA, are provided by the HIDEOE.”

HABA Reply: Agreed, all educationally relevant services, including ABA, should be provided by the HIDOE. Because the HIDOE does not currently provide services designed and overseen by Licensed Behavior Analysts (LBA) and provided by Registered Behavior Technicians (RBT), it would be appropriate to say that the HIDOE does not currently provide Applied Behavior Analysis (ABA).

Because the Department of Education (DOE) is supposed to provide services to clients, it does not preclude insurers from their medical responsibility in the case that the HIDOE does not authorize services by appropriately licensed and credentialed specialists (e.g., LBAs and RBTs).

(9) DOE Statement: “In addition, the HIDOE is not required to implement a student’s medically-related treatment plan. It is a HIDOE policy not to allow private providers on campus as it would interfere with the school’s obligation to implement a student’s IEP and to provide special education and related services under the IDEA.”

HABA Reply: The HIDOE is currently failing to recommend, accept, or provide students who have significant behavioral challenges access to ABA, during the school day. Not only has the DOE denied access to educational access, the DOE is now actively prohibiting students’ from accessing medically necessary care during the school day as well.

(10) DOE Statement: “Many states have determined that the ABA licensure standard is consistent with the accepted standards of their respective educational professionals. These states have also recognized that the ABA licensure standard could prohibit public and private school employees from performing their full scope of work.”

HABA Reply: Hawai’i was the 42nd state to pass autism insurance, and was the 25th state to pass licensure. Hawai’i is unique because we have one district for our entire state. This is the main reason why the Hawai’i behavior analysis licensure law did not carve out the HIDOE. In many states, original behavior analyst licensure laws had language, which included each state’s Department of Education (DOE).

Despite having a state law indicating so, school districts in many states, employ behavior analysts full-time, including districts in Alabama, California, Connecticut, Florida, Indiana, Massachusetts, Maine, New Jersey, North Dakota, Pennsylvania, Rhode Island, Virginia, and West Virginia.

School-based claiming: In some states, such as Massachusetts, Medicaid (e.g., Mass Health) recipients are able to access ABA services during the school day. These services, provided by DOE personnel, are at least partially reimbursable for the school districts, so long as individuals providing treatment are Licensed Behavior Analysts (LBA).

<http://www.mass.gov/eohhs/docs/masshealth/bull-2015/sbm-29.pdf>

(11) DOE Statement: “The HIDOE’s implementation plan is focused on ensuring that all students in need of ABA are served by qualified professionals.”

HABA Reply: The DOE website lists 1,820 students who have qualified for an IEP under a classification of autism.

- How many of these students have been recommended Applied Behavior Analysis (ABA)?
- How many of these students have ABA included in their Individualized Educational Programs (IEP)?
- How many of these students have a Licensed Behavior Analyst (LBA) as a member of their IEP team?
- How many of these students have a Registered Behavior Technician (RBT) as a member of their IEP team?
- How many students without an autism diagnosis have a Behavior Support Plan (BSP) as part of the IEP programming? Of those students, how many have a Licensed Behavior Analyst as a member of their IEP team?

(12) DOE Statement: “Two (2) new State-level (Office of Curriculum, Instruction and Student Support) Behavior Intervention Educational Specialist II positions –The primary job responsibility for these positions is the coordination of training and supervision of LBA candidates and RBTs. Positions are currently in the recruitment process for these two positions appropriated by the 2017 Legislature.

HABA Reply: This is a move in a positive direction. However, two positions are not nearly enough to cover student need, especially given Neighbor Island and rural areas. There are currently (DOE Directory: 1/5/2018) zero (0) full-time positions within the HIDOE for Behavior Analysts, who work in the capacity as a Behavior Analyst.

(13) DOE Statement: “Partnerships with Institutions of Higher Education – Leeward Community College offers a one-credit RBT course available to educational assistants. In anticipation of more employees needing to become LBAs, the University of Hawai’i and the HIDOE is expanding the current Memorandum of Understanding to include BCBA program scholarships for qualifying employees to begin in the 2018-2019 school year.”

HABA Reply: The HIDOE has also undermined efforts aimed at building capacity within the state:

- Reserved 30 spots at free 40-hour RBT training, 28 were no-shows
- At least 10 graduate-level students were informed their tuition reimbursement would not apply to their BCBA courses at other universities. These students were forced to drop their graduate classes/BCBA program as a result.
- Significant funding for scholarships for DOE employees were offered to those interested in pursuing certification towards becoming a behavior analyst. Multiple meetings and offerings were made to Hawai’i DOE Administration, including our current Superintendent Christina

Kishimoto (9/12/2017) and the Hawai'i Board of Education (HIBOE) (11/17/2017; 11/21/2017; 12/5/2017).

· The DOE has refused candidates attending other universities access to practicum supervisors on campus to provide supervision towards BCBA

(14) DOE Statement: "Contracting LBAs and RBTs when needed – To address shortages in geographic areas, the HIDOE is considering a request for proposal that would require providers to hold BACB credentials."

HABA Reply: In order to appropriately build capacity, the HIDOE may need to consider contracting with agencies that employ a number of licensed behavior analysts (LBA) across the islands.

The DOE is also encouraged to recruit LBAs who have sufficient expertise and experience in behavior analysis. Equipping an entire state's workforce, and future candidates with supervision provided by novice or entry-level behavior analysts would be poor practice for any profession.

(15) DOE Statement: "Increased HIDOE LBA and RBT personnel – The HIDOE employs 154 RBTs (credentialed and in training) and 54 LBAs (licensed and in training)."

HABA Reply: No person other than a licensed behavior analyst (LBA) may refer to him or herself as an LBA (including "an LBA in training"). To do so would be a direct violation of Chapter 465-D.

There are currently (1/5/2018) zero (0) full-time positions within the HIDOE for Behavior Analysts, who work in the capacity as a Behavior Analyst and not some other job title (e.g., ACT, BISS, SBBH, BHS).

No person other than a properly credentialed Registered Behavior Technician (RBT) may refer to him or herself as an RBT (including "an RBT in training"). To do so would be a direct copyright infringement of the Behavior Analyst Certification Board (BACB).

Even if someone possess the credential of Registered Behavior Technician (RBT), they may not call themselves an RBT or claim they are practicing as an RBT, unless they meet all supervision and related requirements. Currently, RBTs are required to have at least 5% of their hours supervised by a Licensed Behavior Analyst (LBA), who agrees to be the "Responsible Certificiant" for the RBT (<http://www.bacb.com>).

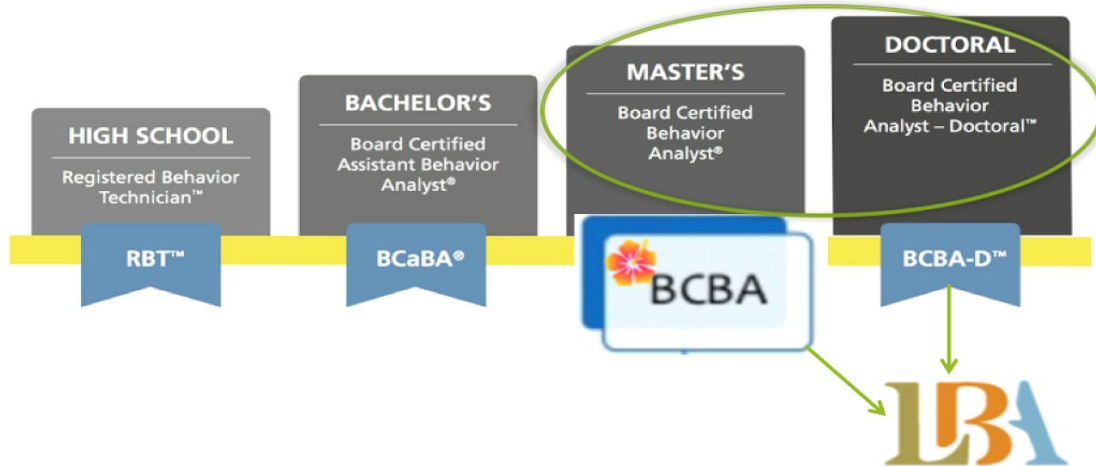
(16) DOE Statement: "The cost of obtaining a Board Certified Behavior Analyst (BCBA) certification has been estimated at \$20,000 per individual and includes both the graduate level coursework and required hours of supervision. The cost of obtaining an RBT certification has been estimated to be \$1,100 per individual, which includes both didactic, and performance training. It should be noted that RBT must receive LBA supervision (approximately \$12,600 annually) to retain their credential."

HABA Reply: How were these figures determined? They appear to be estimated on the very high end, possibly double what other estimates for these services have been (RBT: 40 hours of training, as little as \$50/seat; competency performance (3 hours), up to \$300; flight (if neighbor island), \$200; exam, \$50; estimate: \$600 as compared to HIDOE estimate of \$1,100).

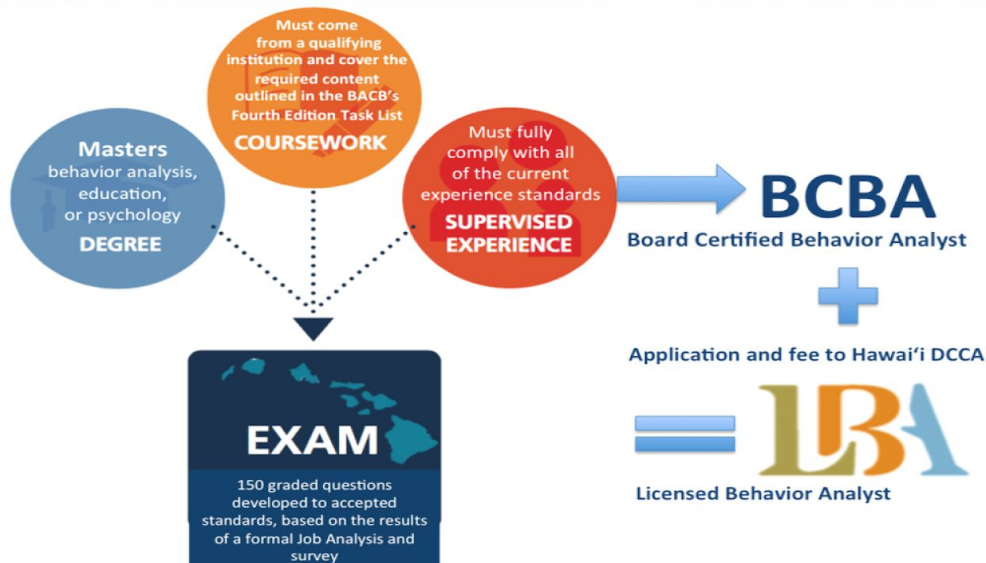
We remain interested in working collaboratively with stakeholders to ensure our keiki have access to ABA by licensed and qualified providers in the DOE. Any person interested in learning more about Hawai'i's Behavior Analysis Licensure law (Chapter 465-D), or the practice of behavior analysis in our state, may contact HABA Legislative Chair, Dr. Amanda N. Kelly at legislation@Hawaiiaba.org or HABA 2018 President, Kathleen Penland at president@Hawaiiaba.org.

Behavior Analyst Certification Board (BACB)

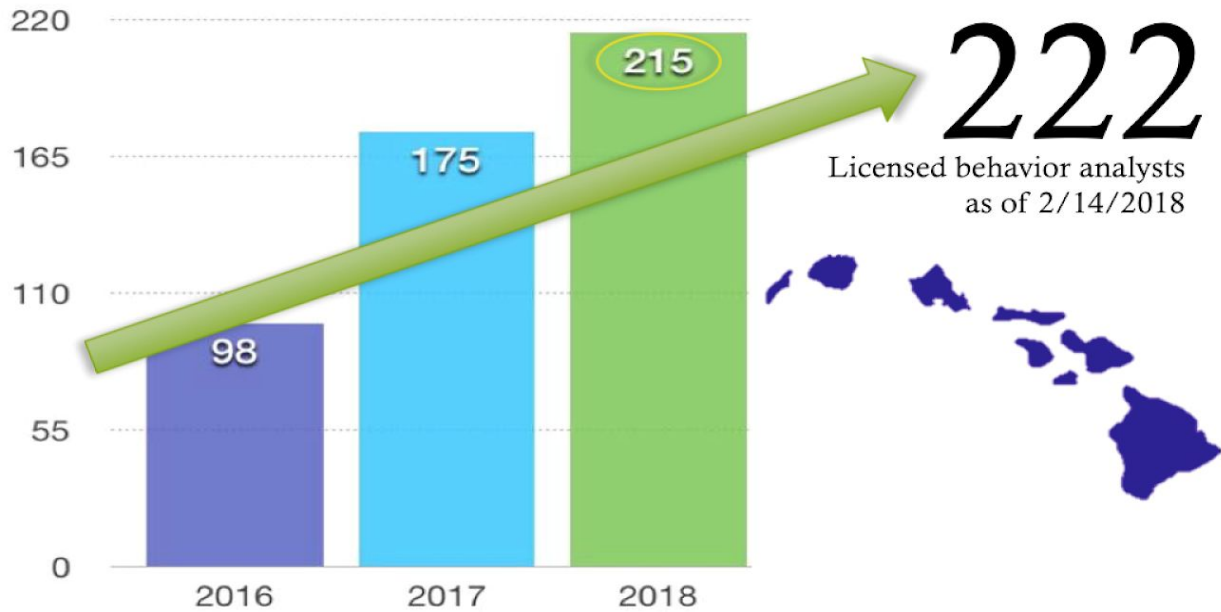
The BACB credentials and recognizes practitioners at four levels:



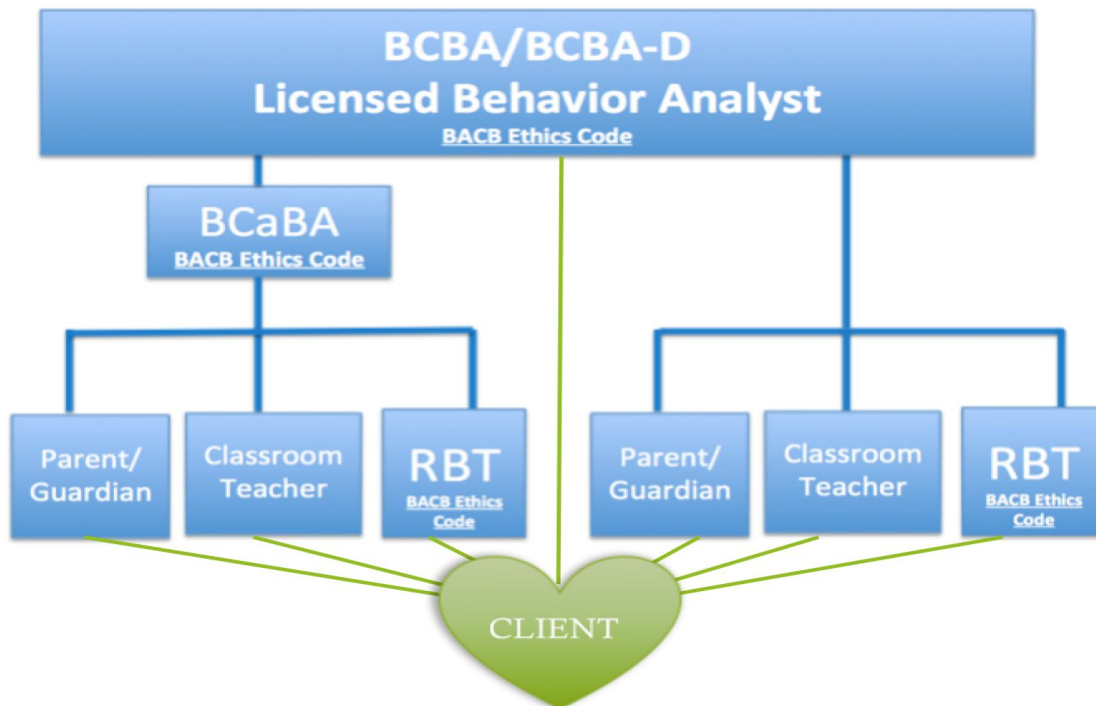
Primary requirements for certification by the Behavior Analyst Certification Board (BACB)

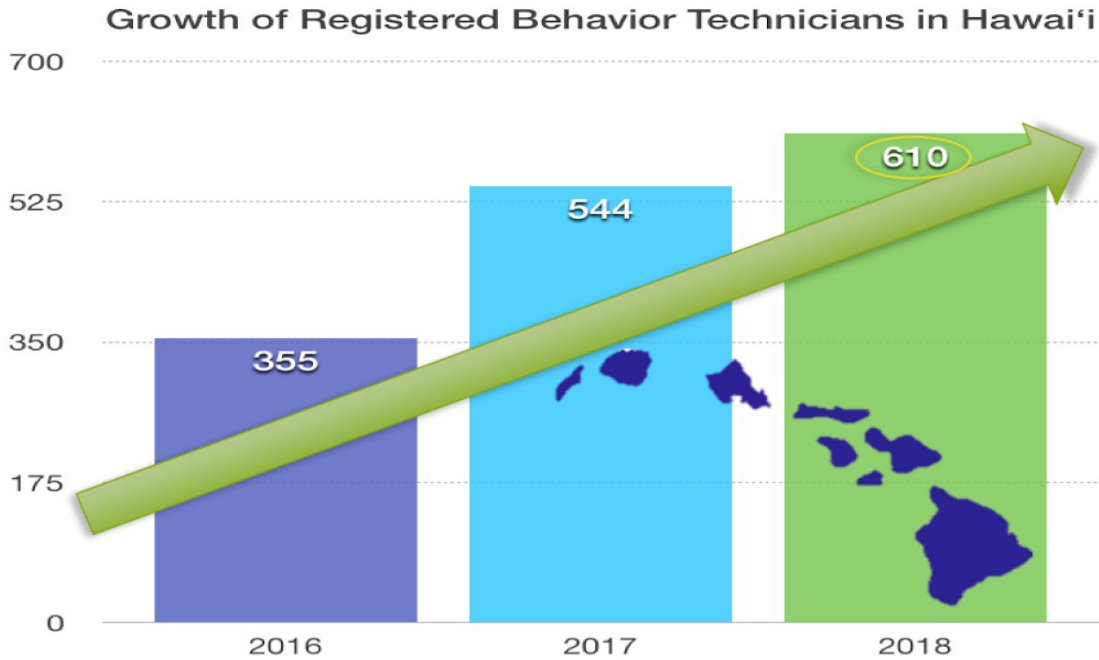


Growth of Licensed Behavior Analysts in Hawai'i



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





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."

Alabama (Montgomery County Public Schools)

"Behavior analysis services are provided by a district-wide board certified behavior analyst (BCBA). The behavior analyst provides comprehensive behavioral assessment and consultation services for students with severe or persistent behavioral challenges. Once a student has been referred, the behavior analyst conducts a functional behavior assessment (FBA) to assist in the understanding of the relationship between the student's behavior and the purpose of the behavior in relationship to environmental factors. Various environmental settings, (e.g. home, school, community) are investigated and analyzed to assist school personnel in understanding and evaluating the student's problem behaviors within a larger context. Next, a behavior intervention plan (BIP) is designed to outline specific prevention and response strategies for the identified behavior. The behavior analyst ensures that all elements of the BIP are humane, respectful, and cause the least amount of disruption to the school structure as possible. Data are collected throughout the consultation process, and programmatic changes are made as necessary to ensure continued progress."

California (Port View Preparatory)

"Currently, Applied Behavior Analysis is one of the only empirically validated interventions used to create and support the learning curriculum and environments for individuals with Autism Spectrum Disorders. Therefore, principles and strategies of Applied Behavior Analysis are utilized throughout the school day and all staff are trained in Applied Behavior Analysis and how to apply ABA to a school setting. Such an environment requires supervision by qualified Behavior Analysts and therefore, Port View Prep® employs Board Certified Behavior Analysts (BCBA), including a doctorate-level BCBA-D, to supervise the programs that help students navigate and better understand their world via structured therapies designed to achieve positive behavioral results and actions. Port View Prep ensures that every student receives an Individualized Behavior Intervention plan that was developed by a BCBA and reviewed by a BCBA-D. These Behavior Intervention plans are developed based on results of a comprehensive Functional Behavior Assessments that take place upon enrollment. Our staff of ABA therapists implement Behavior Intervention Plans throughout each school day and focus on utilizing antecedent strategies and reinforcement to achieve desired learning outcomes and to minimize and ultimately eliminate negative behaviors and habits."

California (Ventura County Public Schools)

Ventura County Special Education supports the philosophical tenets of Applied Behavior Analysis (ABA) as described extensively in the professional literature. Some typical definitions are: "Applied Behavioral Analysis (ABA) is a systematic process of studying and modifying observable behavior through a manipulation of the environment." Prizant, Barry M., PhD, CCC-SLP, Center for the Study of Human Development, Brown University, RI. "Applied behavior analysis has been empirically validated across numerous interventions that have the potential to change the way public education functions as a whole" (Fielding, et al., 2003). "Behavior analysts are trained to develop, deliver, and monitor educational programming that is driven by the results it produces with students. Collaborative consultation with the moment-to-moment coaching it entails can assist educators [in creating] their own evidence-based practices (Hursh, 2007, p. 44)" (Fielding, 2013).

Connecticut (Waterbury Public Schools)

"As a result, Waterbury has continued to develop an intensive individualized program for children with Autism Spectrum Disorder at all levels. This program is a continuation of ABA practices and principals. There is collaboration between individuals working at all levels, so that the program has continuity at all levels. In addition, this year a part –time Board Certified Behavior Analyst (BCBA) will be hired to assist staff with educational and behavioral programming for autistic students (2008-2009)."

Connecticut (West Hartford Public Schools)

"Behavior services are provided throughout the district by West Hartford's Behavioral Specialists. A referral procedure is initiated with a record review, visits and observations, contact with parents, and a consultation with the student's general education teacher and special education support staff. Specific intervention may be provided, documented and monitored. The consultant will participate in strategies, SATs, 504 meetings and PPTs as needed. In addition, the district employs four full time Board Certified Behavior Analysts (BCBA). District BCBA's support students and staff through consultation, behavior analysis, development of behavior support plans, and staff training."

Florida (Collier Public Schools)

"Behavior Specialists are trained in Applied Behavior Analysis (ABA) techniques, classroom management strategies, individual behavior intervention plan development, data collection techniques, discrete trial training, and strategies for positive behavior support. Collier County Public Schools currently employs Behavior Specialists, Board Certified Behavior Analysts, Board Certified Associate Behavior Analysts and School Psychologists to provide these services. Behavioral Specialists are available to provide services at cluster school sites for students with Autism Spectrum Disorders (ASD) and Emotional/Behavioral Disabilities (E/BD) who demonstrate behaviors which significantly impede their learning. These Specialists work collaboratively with educators, administrators, other school personnel and families to ensure that students with severe behavior difficulties receive effective interventions. To impact student change, such as an increase in achievement, direct observations and measurement of behaviors occur in the classroom and other educational settings. By looking at the data, Behavior Specialists assist the Individual Education Planning (IEP) team in designing interventions which will result in increased student achievement. In addition to the cluster school sites, all schools provide positive behavior support services to students who may have behaviors that are interfering with learning. School Psychologists work collaboratively with school teams in developing appropriate interventions based on individual student needs."

Florida (Orange County Public Schools)

"Behavior Analysts consult and collaborate with school based behavior teams to design, implement, train and evaluate formal Behavior Intervention Plans. The formal Behavior Intervention Plans are written using information collected using a Functional Assessment or Analysis. These plans may include complex reinforcement schedules and/or restrictive behavior procedures in order to decrease maladaptive behavior. Typically, most of their professional time is spent supporting students with emotional/behavioral, intellectual or physical disabilities. These are the students who display the most complex behavior problems. In addition, Behavior Analysts also conduct a variety of trainings throughout the district. Some of the trainings include: ABA Principles, Instructional Methodologies,

Teachers' Guide to Behavior Assessment, Restraint/Seclusion overview, Collaboration with Outside Agencies, VB-MAPP and Data Collection. Currently there are 7 District Based Behavior Analysts serving students within OCPS."

Florida (St. Lucie Public Schools)

"The Behavior Services Department uses the science of Applied Behavior Analysis to teach students the skills they need to be successful in the educational setting. Behavior Analysts serve schools as Support Professionals providing consultation to Problem Solving, Student Study and Individual Educational Planning Teams. Behavior Analysts assist school staff in classroom setup, instructional methods and staff training. They address the function, or reason for a student's maladaptive behavior and attempt to teach one that is functionally equivalent. In other words, the goal is to teach the student socially appropriate ways to access their educational environment. Skills such as learning to wait, asking for help and building peer relationships are just some of the areas that may be addressed. These abilities are crucial to a student's educational success. On some occasions, students need more intensive interventions than classroom consultation. In that case, Behavior Analysts will complete a Functional Behavior Assessment and write specific Behavior Intervention Plans for a student."

Hawai'i (Across All Islands - HIDOE)

Currently our keiki in the Hawai'i DOE are being denied access to licensed behavior analysts and therefore access to FAPE under I.D.E.A.

Indiana (Clear Creek Elementary)

(Mark Howard ICASE 2017 Presentation) "Understand applied behavior analysis (ABA) and its history, recognize one way in which ABA has been applied in the public school setting, demonstrate understanding of paraprofessional training in an ABA classroom, explore collaborative relationships between ABA centers and public schools, understand challenges and limitations of implementing intensive ABA in public school settings and compare the differences between the application of ABA in public schools and in ABA/autism centers, explore additional evidence-based practices complimentary to ABA, and review student specific student outcomes."

Massachusetts (Bedford Public Schools)

"The Board Certified Behavior Analyst (BCBA) will train and collaborate with all staff, in order to support students with behavioral challenges throughout the school day. The BCBA will evaluate, observe, support and train students and staff in the development and implementation of behavioral strategies and programs, as appropriate and necessary. Data collection and observations are essential to the BCBA's ability to complete individual Functional Behavioral Analysis (FBA) and Behavioral Intervention Plans (BIP) with greater effectiveness."

Massachusetts (Boston Public Schools)

"Increased numbers of students identified annually and successfully implemented, students Receiving ABA Services, increased internal staff capacity and decreased contracted service providers, provided 275 hours of Professional Development for over 300 teachers, paraprofessionals, related service providers, and administrators, conducted 26 site visits to substantially separate classrooms in collaboration with

school leaders and provided verbal and written feedback for classroom improvement, provided ABA services in 69 schools."

Massachusetts (Braintree Public Schools)

"The Elementary ABA program is designed to meet the academic, social and behavioral special needs of students with a diagnosis of Autism Spectrum Disabilities. Students in this program generally function in the significant range of the disability. The degree and scope of the expressive and receptive language development of students in this program may vary widely but are generally deficient. Social and behavioral growth may be poorly developed."

Massachusetts (Cambridge Public Schools)

"Applied Behavioral Analysis (ABA) Specialists design goals and objectives to address the learning needs of students on the Autism Spectrum who require discrete trial programming. ABA Specialists gather behavioral data on students and complete Functional Behavior Assessments (FBA), and may develop individual or group Behavior Intervention Plans to gradually diminish negative behaviors and increase positive behaviors. They also support learning and facilitate opportunities for a student's integration into general education classrooms when needed."

Massachusetts (Canton Public Schools)

"Individualized programming for children with Autism Spectrum Disorders using the principles of applied behavior analysis to increase skill acquisition and decrease maladaptive behaviors. Regular review of data and programming, training of staff and regular consultation to classroom and families is provided by a Board Certified Behavior Analyst (BCBA). Services include: Functional Behavior Assessment (FBA), assessments for school or transportation refusal, classroom-wide behavior support, Individualized behavior support, consult to academic instruction, and parent training. Comprehensive programming for children with ASD using the principles of applied behavior analysis to increase skill acquisition and decrease maladaptive behavior includes review of data and programming, training of staff, and regular consultation to the classroom by a BCBA".

Massachusetts (Clinton Public Schools)

I appreciate your patience, but I wanted all to know that students have been receiving services and that we do, indeed, have BCBA support in the Clinton Public Schools. Kathleen Buchanan | Director of Special Education

Massachusetts (Danvers Public Schools)

"ASD Class" – The students in this program are students with Autism Spectrum Disorder (ASD) requiring intensive specialized instruction who might otherwise not be able to learn in a public setting. The staff is highly trained in ASD, ABA (Applied Behavioral Analysis) and de-escalation strategies. The highly qualified lead teacher is Special Education Certified. Each student is paired with a paraprofessional. A BCBA consults with the staff regularly. The students are mainstreamed as much as possible depending on their individual needs."

Massachusetts (Milton Public Schools)

"Applied Behavior Analysis (ABA) is a very structured and systematic teaching approach which breaks down learning into small discrete units, which are taught in small steps. Data is collected to monitor individual progress. The District contracts with New England Center for Children (NECC) to provide services to significantly disabled children with Autism Spectrum Disorders. Specifically designed to meet the educational and social needs of children with autism, the Partners model utilizes the instructional curriculum, training and supervision systems that have been developed at NECC. All programs are derived from the NECC Curriculum and NECC's Autism Curriculum Encyclopedia. Individual 1: 1 Applied Behavior Analysis (ABA) and Discrete Trial Training are employed, along with opportunities for supported inclusion in regular education classrooms throughout the school day. Parents are encouraged to participate in a two hour a month home training program conducted at the student's home provided by the student's NECC-trained tutor to review, model and discuss home issues."

Massachusetts (Holyoke Public Schools)

"Holyoke Public Schools provides a continuum of services for students with autism from preschool through high school. Our IEP teams determine the most appropriate programs and services, based on each student's level of need. Our students are educated in the least restrictive environment, and we follow a team-based approach to provide the most comprehensive services, delivered by a variety of service providers. Parents are the most important members of our teams."

Massachusetts (Newton Public Schools)

"Guide to Special Education Programs and Related Services: An inclusion based intensive approach to Applied Behavior Analysis (ABA) instruction. The services include a combination of supported inclusion, discrete trial sessions, small group activities and incidental teaching strategies to students. The program is based on the principles of Applied Behavior Analysis and Positive Behavior Supports with a focus on the use of individualized Behavior Support Plans incorporating function-based strategies including functional communication training (FCT) and positive reinforcement systems."

Massachusetts (Salem Public Schools)

"Typically developing peers are educated alongside students with some significant communication and social challenges who may have a diagnosis in the Autism Spectrum or other global delays within a highly structured, safe and learning environment. The peers attend the program during the mornings allowing more intensive services to be provided in the afternoons to the students on IEPs. The curriculum includes language lessons incorporated into early literacy, science, social studies, math, life skills, and therapies. Social and play skills instruction is integrated throughout the curriculum. The principles of Applied Behavioral Analysis are embedded in the instruction. The use of positive reinforcement, success oriented activities and the utilization of sensory integration strategies provide students a functional framework to focus on personal goals. Special needs students and their families may participate in home-school services and some individual discrete trials as part of their program if deemed appropriate per their IEP."

Massachusetts (Sharon Public Schools)

"Sharon Public Schools currently support the needs of students with Autism Spectrum related disabilities in one of our 3 full-year district wide ASD Programs (Heights and Middle). These students may also have difficulties in physical functioning, sensory motor skills, adaptive functioning, fine motor skills and/or self-help skills and focus on a highly specialized and individualized program using the principles of Applied Behavior Analysis.

Often, students placed within the ASD Program model complete most of their academic content in a smaller learning environment using Discrete Trial Instruction or ABA –Based Learning, and enjoy social experiences within the larger school community. Some students experience inclusion opportunities for academic or social connections for part or most of their school day. Staffing includes: Staffing includes: special education teacher/BCBA, speech/language therapists, occupational and physical therapists, guidance counselors and psychologists. Individual Team decisions determine the student’s daily schedule and level of supports needed within the ASD and general education settings."

Massachusetts (SEEM Collaborative)

"The SEEM Collaborative provides a full range of services to students within our member district schools. Each student receives the blend of services needed to best support his or her unique needs and to enable academic, social, and emotional advancement. SEEM staff work closely with member district staff and parents to assess student progress and determine future treatments and placements. Applied Behavior Analysis: Applied Behavior Analysis (ABA) is the science of systematically studying variables that influence behavior (Sulzer-Azaroff and Mayer,1991). SEEM Collaborative currently employs several Board Certified Behavior Analysts (BCBAs), who provide and supervise ABA services, for students ages 3-22. Five main areas of service are provided: consultation to SEEM Collaborative schools; consultation to member and non-member public school districts; direct and consultative home services; assessments; and ABA-based trainings. SEEM Collaborative provides district-based professional learning workshops in the following areas: Behavior Analysis (ABA), English Language Education, Social Emotional, Leading Educational Access Program (LEAP), Transition, Assistive Technology, and Special Education)."

Massachusetts (Watertown Public Schools)

Experience working with students on the Spectrum, implementing programs, and collecting data under the supervision of a BCBA, implement services and collect data under the supervision of a BCBA, provide home-based services, attend school-based professional development.

Massachusetts (Westwood Public Schools)

"Students in the Focus program require highly individualized, consistent, intensive special education and related services. The methodology and/or supports may include: Applied Behavior Analysis (ABA), direct teaching, small group functional academics, communication skills, daily living skills, orientation and mobility, functional vision use and highly specialized assistive technology. Integrated approaches are utilized to assure medical, orthopedic and augmentative communication techniques are cohesively adjusted for optimal student learning. Inclusive opportunities, through reverse inclusion and purposeful participation within general education environments allow students to be a part of the school community. Community based instructional opportunities may be available for generalization of skills

such as socialization, community awareness and exposure, functional mobility and safety skills. Staffing: Each classroom is staffed with a special education teacher (MADESE certified in early childhood) and instructional assistants as needed. An Applied Behavior Analysis (ABA) Tutor provides services both in and out of the classrooms, as needed. A Board Certified Behavior Analyst (BCBA) consults to the program weekly."

Maine (MADSEC)

"Building Sustainable ABA Programming in the Public School Setting - Why develop ABA programs in the public schools? The successes and challenges of developing intensive special education services within the public school. Implementing services in community schools using public school staff and resources is a cost effective and tremendously beneficial."

New Jersey (Public Schools)

In August 2014, The New Jersey DOE's Office of Special Education Programs (OSEP) announced the creation of a job code for Board Certified Behavior Analysts (BCBAs).

New Jersey (Summit Public Schools)

"A full continuum of special education programs is available to students who have been evaluated by the Child Study Team and found to be eligible for special education and related services. When a student is determined eligible, an Individualized Educational Plan (IEP) is developed. The IEP describes, in detail, the student's special education program and is implemented after parents have given written consent. The goal of special education is to provide students who have been evaluated by the Child Study Team and found eligible for special education and related services with the opportunity for academic as well as personal growth and development. Each student is encouraged to seek the highest level of excellence in the least restrictive environment.

When a student is determined eligible for special education and related services, an Individualized Education Program (IEP) is developed by the IEP team. The IEP team, including the teachers, parents, case manager, and the student, when appropriate, determines the program that meets the student's learning needs. The IEP describes, in detail, the student's special education program and is implemented after the parents have given written consent. To the extent possible, classified students are scheduled in general education classes in all areas of the curriculum. Some students may be scheduled part of the day in classes taught or supported by special education teachers, while others receive all instruction in the general education setting with the appropriate supplementary aids and services."

New Jersey (Voorhees Township Public Schools)

"My name is Mrs. Demski and I am the Voorhees School District's Behavior Specialist. This is my fourth year working for the district. I am a **Board Certified Behavior Analyst**. I earned my bachelor's degree in psychology at Saint Joseph's University in Philadelphia. I earned my master's degree in Psychology with a concentration in applied behavior analysis from University of Maryland Baltimore County. I am a member of the Association for Behavior Analysis".

New York (AHRC)

"ABA is a significant component of all NYC schools. In our preschools, there are dedicated ABA classrooms for students with autism. Educational programming, behavioral support, and classroom arrangement all reflect best practice ABA. The Program Coordinators' and BCBA's comprehensive data collection plans and forms help provide consistent monitoring of students' progress. To ensure high-quality programming, staff receives pre-service and in-service training in ABA practices. ABA classrooms are continuously observed to guarantee that the students with ASD in these environments receive the appropriate instruction" (NY 2017).

North Dakota (Fargo Public School District)

"The Board Certified Behavior Analyst (BCBA) provides behavior analysis services and behavior management plans for both students who receive special education and students who are receiving supports through the Multi-tiered System of Supports (Tiers 2 and 3). The BCBA will be the supervisor for the school district's Positive Behavior Interventionist and Technician program throughout the elementary schools. The BCBA will also be responsible for providing professional development opportunities for certified and non-certified Fargo Public Schools staff, participate in district level committees."

Pennsylvania (ABAinPA)

"The ABA in PA Initiative is a 501 (c)(3) nonprofit advocacy organization made up a parents, industry professionals, and lawmakers dedicated to change the future for all children in Pennsylvania with Autism Spectrum Disorder (ASD) by ensuring access to Applied Behavior Analysis (ABA) therapy via Medical Assistance. The ABA in PA Initiative aims to bring the autism community together as one united voice to urge Pennsylvania and private sector to listen to our concerns and take immediate action to address the service gap for ABA. It is our firm belief that, working together, we can assure that our children get the care they need, when they need it!"

Pennsylvania (Department of Education)

"The Pennsylvania Department of Education addressed the need for a competency-based program for trained staff in applied behavior analysis by initiating the credentialing process in behavior analysis. As a result, the development of a training program designed around Functional Behavioral Assessment in public school settings has emerged. A practical tool for school teams, the Functional Behavioral Assessment Worksheet, has been developed using Applied Behavior Analysis principles and procedures. This article discusses the uses and benefits of the Functional Behavior Assessment Worksheet."

Rhode Island (Barrington Public Schools)

"Social emotional resources and positive behavioral supports are provided through a tiered continuum and are accessible to all elementary school students. They are developed and monitored through the collaborative effort of several school-based teams which meet on a regular basis: the MTSS, RTI, PBIS, and School Improvement teams. The MTSS teams additionally participate in district wide meetings four times a year. The teams are multidisciplinary in nature and may include regular and special educators, a school psychologist, a school social worker, a behavior analyst, a speech and language pathologist, the

guidance counselor, and an administrator. Other therapists, teacher assistants and the school nurse may be involved on some teams."

Virginia (Alexandria Public Schools)

"Autism Spectrum Disorder (ASD) affects behaviors such as social interaction, communication and development of relationships with others. Support for teachers who provide instruction to students with Autism Spectrum Disorders in Alexandria City Public Schools is provided by an Autism Resource Specialist and a Board Certified Behavior Analyst (BCBA). Tenets of Best Practice: Effective instruction for students on the Autism Spectrum should include the following: Intervention approaches should be individualized to match a child's current developmental level and his or her profile of learning strengths and weaknesses, intervention for young children should be based on our current knowledge of child development, an intervention approach should directly address the core characteristics of ASD, intervention approaches should demonstrate a logical consistency with their long-term goals and teaching protocols, and intervention approaches should be derived from a range of sources."

Virginia (Fairfax County Public Schools)

"Our program supports the special education instruction of students with autism and related disorders."

Virginia (DOE - 2015)

"While neither the federal nor Virginia Regulations address other uses of FBAs and BIPs, both sets of regulations require that, as a part of IEP development, when a student's behavior impedes his learning or that of others, the IEP team must consider the use of positive behavioral interventions, strategies and supports to address the behavior. A BIP is, by regulatory definition, one means of addressing interfering behaviors. As a result, although not directly addressed in the regulations, the VDOE has taken the position that, when an IEP team has conducted an FBA and developed a BIP for a student with a disability whose behavior interferes with his learning or that of others, that BIP must be treated as a part of and implemented with the same fidelity as the remainder of the IEP. Practice recommendations contained in this document are based on applied behavior analysis principles. Information is presented for school employees, as long as they do not represent themselves as Licensed Behavior Analysts or Board Certified Behavior Analysts (BCBA) and do not practice behavior analysis professionally unless they obtain one of those licenses. The BCBA's are practitioners who have met the qualifications set by the national Behavior Analyst Certification Board (BACB). The terms and guidance contained in this document are not identical to BCBA practice or the qualifications set by the national Behavior Analyst Certification Board (BACB)."

West Virginia (Charles Town Public Schools)

"Jefferson County Public Schools partner with Private Behavioral Healthcare Provider to Serve Children with Autism (2013) - Grafton Integrated Health Network (Grafton) and Jefferson County schools have partnered to provide services for children with autism in TA Lowery Elementary classroom in Charles Town, West Virginia. Historically, local school systems would identify resources to serve children with significant behavioral, intellectual and developmental challenges within their schools and on occasion, would transport children to facilities outside of their state when necessary. In the spring of 2013, Grafton leaders approached Jefferson County Public Schools about a possible collaboration to serve

students within the schools at Jefferson County. Jefferson County public school officials responded enthusiastically to this project and their willingness to collaborate on this partnership confirms their strong commitment to students, families and teachers within their locality."

Why Model Autism Programs Are Rare in Public Schools

"On a practical level, schools often lack the specialists they need to adequately educate children with autism. These children, especially those on the severe end of the spectrum, need the most evidence-based treatment available: applied behavior analysis(ABA). Whether a child with autism attends a public or a private school, the important thing is that he or she NOT be isolated from the larger community. Children with autism should stay connected to their neighborhoods and hometowns, where they can interact with other students and their families, with local teachers and shopkeepers, forming relationships and bonds that ideally will support and sustain them as they grow into adults."

How to Become a School Behavior Analyst

"National demand for licensed behavior analysts is increasing rapidly, with positions more than doubling between 2012 (1,414 postings) and 2014 (3,083 postings). California, Massachusetts, and New Jersey are enjoying the highest demands, with nearly 50% of all job postings concentrated in these three states. The demand for behavior analysts vary across industries, with 85% of job postings concentrated around Health Care (46%), Educational Services (28%), and Social Assistance (11%). In an educational setting, highly desired skills are data collection and school psychology."

Applied Behavior Analysis in Educational Services

"Today, 1 in 68 American children are diagnosed with ASD. The Federal IDEA (Individuals with Disabilities Education Act), legislation that was first passed in 1975, guarantees each of them the right to an individually appropriate education. While IDEA does not specifically mandate ABA services, both parents and school administrators are increasingly concluding that such treatments offer the best outcomes for children."

**Testimony Regarding Hawaii SB 2925
Relating to Behavior Analysis Services**

Submitted
February 28, 2018

The Association of Professional Behavior Analysts offers the comments that follow in support of its Affiliate, the Hawaii Association for Behavior Analysis (HABA). APBA is an international nonprofit membership organization whose mission is to promote and advance the science-based practice of behavior analysis. One way we fulfill that mission is by advocating for public policies, including laws to license or otherwise regulate practitioners of applied behavior analysis (ABA). We oppose SB 2925, as it is written for the reasons outlined next.

SB 2925 should not be adopted, as is because:

1. It would change the Hawaii behavior analyst licensure law (Section 465D-7, Hawaii Revised Statutes) in ways that are inconsistent with professional licensing standards and would put the public at risk.

In adopting the behavior analyst licensure law, the State of Hawaii wisely ensured that the requirements for obtaining and maintaining state-issued credentials to practice ABA parallel requirements in other licensure laws, which in turn reflect widely accepted standards, case law, and best practices in professional credentialing and consumer protection. Those include

- the knowledge and skills required to practice the profession;
- degree, coursework, and supervised experiential training designed to develop the knowledge and skills;
- passage of a psychometrically and legally validated professional examination in the subject matter;
- standards of professional conduct; and
- requirements for continuing education.
- all of the above and other standards (e.g., regarding supervision)
 - derived from *job analysis studies* involving subject matter experts, large numbers of members of the profession, and experts in psychometrics and applicable laws.
 - pertain to *practicing the profession generally, not with specific client populations or conditions*.

The credentialing programs operated by the Behavior Analyst Certification Board (BACB) have all of these features. The BACB is an independent, nonprofit entity whose credentialing programs are accredited by the National Commission for Certifying Agencies (NCCA) of the Institute for Credentialing Excellence. That accreditation provides important legal and other safeguards to governments, funders, consumers, and the profession. The BACB has a solid 20-year track record in credentialing practitioners of ABA, a full legal team, and procedures for coordinating with governmental regulatory bodies on vetting applicants and investigating allegations of misconduct. It has conducted several comprehensive

job analysis studies that have been published in professional journals and the BACB newsletter. The BACB manages the only professionally and legally validated exams in the general practice of ABA that are currently available.

It is for those and other reasons that legislators and regulators in many jurisdictions have incorporated the BACB credentials into licensure and other laws, as the Hawaii legislature did in the behavior analyst licensure law. It is important to note that it is common for licensure laws and/or rules to incorporate standards and exams that are set and managed by specific professional organizations or credentialing bodies. For instance, the Hawaii psychology licensure law and rules, like many throughout North America, include requirements for applicants to pass the Examination for Professional Practice in Psychology, which is developed and managed by a single entity – the Association of State and Provincial Psychology Boards (ASPPB). The ASPPB also conducts job analysis studies in the professional practice of psychology, using procedures that parallel those used by the BACB. Similarly, rules for licensing speech-language pathologists in Hawaii reference the national licensure exam and national certification managed by a single entity, the American Speech-Language-Hearing Association.

SB 2925 proposes to amend the behavior analyst licensure law by replacing the well-established, legally and empirically validated BACB standards with standards set by some unspecified “national certifying agency.” The bill does not define that term or even specify that such an agency must meet overarching standards for professional credentialing entities like those set by the National Commission on Certifying Agencies. That is entirely inconsistent with other state licensure laws and rules. Additionally, adoption of that very vague, ambiguous language would void the legal and other safeguards that are afforded to the state and the public by the incorporation of BACB standards in the existing behavior analyst licensure law.

2. Language in SB 2925 implied that applied behavior analysis services are pertinent only to children with autism. That is factually inaccurate, and makes the bill contradictory to best practices in professional credentialing and the overwhelming majority of licensure laws and rules, which are not specific to any client population, diagnoses, or disorders. That includes other Hawaii licensure laws and rules; that is, psychologists are licensed to practice clinical psychology rather than schizophrenia or depression, and SLPs are licensed to practice speech-language pathology rather than stroke or articulation disorders. The same is true of the current Hawaii behavior analyst licensure law, but that would change in problematic ways if SB 2925 were adopted.

3. SB 2925 proposes to change the definition of the scope of practice that is in the current behavior analyst licensure law, which is the definition that has been developed by the profession and incorporated into other state behavior analyst licensure laws. Further, the proposed addition of the statement “Practice of behavior analysis also excludes the use of the behavioral techniques specified in paragraph (2) that are used solely as treatment modalities” completely undermines one of the principal purposes of licensure, which is to protect the public by ensuring that those who provide treatments have met training, examination, and other standards set by the relevant professions. We believe that is inconsistent with the way the Hawaii legislature has treated other licensed professions.

4. In our opinion, SB 2925 is unnecessary because (a) the behavior analyst licensure law clearly permits licensed psychologists and other appropriately credentialed professionals to practice ABA without being licensed as behavior analysts, provided that behavior analysis is in their profession's scope of practice *and the scope of the individual psychologist's documented training and competence*; and (b) licensed psychologists and other professionals already have the right to supervise trainees, paraprofessionals, and others in accordance with the licensure laws and regulations of their respective professions. The mere fact that there is some overlap in the scopes of practice of these two professions does not justify changing the behavior analyst licensure law as proposed in SB 2925 any more than it does changing the psychology licensure law to allow behavior analysts and members of other professions whose scopes overlap with psychology's to practice that profession without being licensed in it.

We strongly urge "no" votes on SB 2925.

Respectfully submitted,

Gina Green, PhD, BCBA-D
Chief Executive Officer

Date: February 27, 2018
To: Senator Michelle N. Kidani, Chair and Senator Kaiali'i Kahele, Vice Chair,
Committee on Education
Senator Rosalyn H. Baker and Senator Jill N. Tokuda, Vice Chair,
Committee on Commerce, Consumer Protection and Health
Hearing: February 28, 2018, 2:45 p.m., Room 229
From: Richard J. Kravetz, Ph.D.
(808) 258-2250
Re: Testimony in Strong Support of SB2925, Relating to the Practice of Behavior
Analysis, with Amendments from the Hawaii Psychological Association

As a behaviorally-trained psychologist who has worked in Hawaii for over 30 years, I strongly support SB 2925 with the amendment proposed by the Hawaii Psychological Association that clarifies the scope of Psychologists' practice of Behavior Analysis. This amendment will help assure that in addition to Licensed Behavior Analysts (LBA's), competent, behaviorally-trained psychologists and other licensed professionals can continue to be utilized by the DOE to assess, design, implement and supervise paraprofessionals in providing behavioral interventions for students needing this service.

This should be done without the loss of quality feared by parents as a result of apparent pressure from the LBA's guild organization. As stated by Gina Green Ph.D., BCBA-D, and Chief Executive Officer of the Association of Professional Behavioral Analysts:

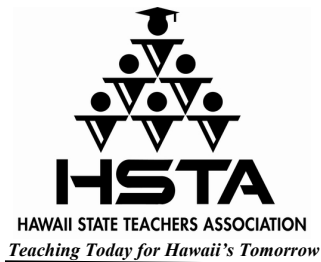
“(a) the behavior analyst licensure law clearly permits licensed psychologists and other appropriately credentialed professionals to practice ABA without being licensed as behavior analysts, provided that behavior analysis is in their profession's scope of practice and the scope of the individual psychologist's documented training and competence; and (b) licensed psychologists and other professionals already have the right to supervise trainees, paraprofessionals, and others in accordance with the licensure laws and regulations of their respective professions.”

Members of the LBA's local guild have promulgated the idea that ACT 199 means that only an LBA and the persons they supervise will be able to “legally” design and implement a behavioral intervention in the school setting. The amendments in the current bill will help clarify to families, state agencies, insurance companies and even some licensed or credentialed professionals that it is “not illegal” for them to continue to design, implement and supervise ABA services when that is and has been within their recognized scope of practice, competence and training. As G. Roy Mayer, author of multiple textbooks on applied behavior analysis, wisely noted in considering whether a school counselor [vs. a BCBA] could consult with a teacher on designing a behavior plan to help a student make friends - “You don't need an elephant gun when a flyswatter will work”.

Being able to continue to use ABA-trained mental health professionals, such as psychologists, licensed mental health counselors, social workers, and marriage family therapists will continue to provide students, school staff and their families with access to professionals who have training in mental health. This is particularly important in properly addressing the needs of youth with autism who frequently (30-40%) have co-occurring diagnoses of anxiety disorder, clinical depression, externalizing disorders, and are at high risk for post-traumatic stress disorder (PTSD) and suicide. Students in need of behavioral

interventions who are not on the autism spectrum often have mental health issues as well, which can be diagnosed by psychologists and other mental health professionals. Identification of a mental health disorder/co-occurring disorder is critical in planning effective behavioral interventions and educational programs for students as well as cost-effective. Since many ABA-trained mental health professionals also have training in non-ABA approaches, it is more likely that they will be able to recommend supplemental evidence-based practices, tweak an ABA program to address a barrier that may be the result of a student's mental health disorder, and recommend a newer/different protocol or treatment approach, if a student is not making adequate progress.

Thank you for the opportunity to share my concerns.



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 COMMITTEES ON
COMMERCE, CONSUMER PROTECTION, AND HEALTH and
EDUCATION

RE: SB 2925 - RELATING TO THE PRACTICE OF BEHAVIOR ANALYSIS

WEDNESDAY, FEBRUARY 28, 2018

COREY ROSENLEE, PRESIDENT
HAWAII STATE TEACHERS ASSOCIATION

Chair Baker, Chair Kidani, and Members of the Committees:

The Hawaii State Teachers Association **opposes and suggests amendments for SB 2925**, relating to the practice of behavior analysis.

Act 199, Session Laws of Hawaii 2015, otherwise known as Luke's Law, 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.

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.

Unfortunately, the DOE is experiencing a shortage of licensed behavior analysts and, in 2016, sought an amendment to state law to allow teachers to perform behavior analysis and prescribe services. Yet, despite teachers not being trained or qualified to make behavioral diagnoses, they are being required to do so in some schools, with some teachers even being threatened with termination for refusing to

complete these diagnoses for which they, again, have no professional license or experience. This 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.

Act 107 of 2016 allowed the DOE until 2019 to ensure that registered behavior technicians are licensed and employed throughout the department, but this act, which amended Luke's Law, was never intended to permit teachers to design or monitor applied behavior analysis plans. Teachers may only implement such plans under the supervision of a licensed behavior analyst and according to a student's individualized education program, since behavior analysis is not a practice included within the scope of a teaching license. We rely on board certified behavior analysts and psychologists who have behavior analysis as part of their training and licensure to perform behavioral diagnoses and develop related plans for students having difficulty making sufficient academic progress. During an IEP meetings, for instance, we often must seek the counsel of medical professionals with behavioral analysis training. That said, a teaching license is not a medical license and should not be misconstrued as qualifying educators to conduct medical assessments.

This measure does not fully rectify the current problems facing the behavior analyst community or the children who depend on their services. To begin, it does not eliminate the staffing shortage that has led to teachers performing behavior analysis, which can only be closed 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.

Moreover, this bill does not repeal teachers from the definition of "direct support worker" under HRS §465D-7, which would prevent teachers from being compelled to perform diagnostic and health-based work for which they are not qualified. Finally, it does not call upon the DOE to allow private behavior analysts to assist students during school hours, despite private insurance companies agreeing to pay for their services. Instead, this proposal further consecrates into state law the problematic and unethical practice of allowing behavior analysis to be conducted by unqualified individuals, whose time is better spent on the professions for which they've been rigorously trained.



HAWAII STATE TEACHERS ASSOCIATION
Teaching Today for Hawaii's Tomorrow

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

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Secretary-Treasurer

Wilbert Holck
Executive Director

According to the DOE's own report to the legislature in *Report on Behavior Analyst and Certification Requirements Implementation*, dated January 5th, 2018, the department is supporting efforts for 39 DOE personnel to become BCBAs 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.

We humbly suggest an amendment to page 6, lines 1-7 of this bill to read: “(B) Is a direct support worker **in a school setting** who [~~provides autism treatment services pursuant to an individualized education plan~~] directly implements an applied behavior analysis program under supervision of a licensed professional and does not design intervention or assessment plans on or before [January 1, 2019; ~~or~~] July 1, 2021; or,” which we feel will clarify the applicability of the bill's requirements. We also urge you to protect teachers from being forced to perform behavior analysis services for which they are not qualified by deleting the word “teachers” from page 6, line 13 of this bill and, in turn, adding an exemption to HRS §465D-7 on p. 7 to read: “(8) A licensed teacher who is working in a school setting and providing services related to a behavior analysis program designed by a professional licensed to practice behavior analysis in this State; provided that any services provided by the teacher shall not be considered behavior analysis, unless the teacher is licensed to practice behavior analysis in this State; and provided further that teachers shall not be required to design or implement behavior analysis services for which they are not licensed.”

To ensure our most vulnerable keiki are given the care they deserve, the Hawaii State Teachers Association asks your committee to **oppose** this bill.

SB-2925

Submitted on: 2/23/2018 5:43:46 PM

Testimony for EDU on 2/28/2018 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Louis Erteschik	Testifying for Hawaii Disability Rights Center	Oppose	Yes

Comments:

We strongly oppose this bill and also believe very 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. 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.

Instead of complying with the current law, the DOE has sponsored this bill and now seeks to further restrict the conditions under which a child could receive applied behavior analysis services and seeks to further erode the qualifications required of those who would provide the service. If it is simply a matter of the DOE lacking the resources to implement ABA, then there are measures pending before the legislature that could appropriate sufficient sums of money. If, however, as we suspect, 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.

We urge the Committee to reject this measure and send a message to the DOE that further non-compliance with the law will not be accepted.



HAWAII GOVERNMENT EMPLOYEES ASSOCIATION
AFSCME Local 152, AFL-CIO

RANDY PERREIRA, Executive Director • Tel: 808.543.0011 • Fax: 808.528.0922

The Twenty-Ninth Legislature, State of Hawaii
The Senate
Committee on Education
Committee on Commerce, Consumer Protection, and Health

Testimony By
Hawaii Government Employees Association

February 28, 2018

S.B. 2925 – RELATING TO THE PRACTICE OF BEHAVIOR ANALYSIS

The Hawaii Government Employees Association, AFSCME Local 152, AFL-CIO strongly supports the purpose and intent of S.B. 2925, which seeks to clarify the scope of licensure for individuals providing behavioral health analysis in a school setting. This measure further ensures that services identified in a student's Individual Education Program (IEP) shall be provided by licensed and credentialed professionals.

As currently written, existing statute may be interpreted to include all behavioral intervention services provided to all students by all employees. This interpretation adversely affects the ability of approximately 800 behavioral health employees in our school system, jeopardizing their ability to provide these needed services.

This measure seeks to clearly identify the scope of behavioral analysis service delivery. We strongly support the purpose of this bill, which will ensure the continued provision of necessary services to this vulnerable student population, and protect the hundreds of positions potentially adversely impacted by the current interpretation of statute.

We strongly support and urge the passage of S.B. 2925.

Respectfully submitted,

Randy Perreira
Executive Director

Date: February 28, 2018

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

Committee on Commerce, Consumer Protection, and Health
Senator Rosalyn H. Baker, Chair
Senator Jill N. Tokuda, Vice Chair

From: NASW Hawai'i Chapter

RE: Testimony in Support of SB. 2925 Relating to the Practice of Behavior Analysis,
with amendments

The National Association of Social Workers- Hawai'i (NASW-Hawai'i) strongly supports SB 2925, with amendments that clarify scope of practice for social workers and other qualified mental health professionals. Previous legislation relating to treatments relating to Autism and licensing Board Certified Behavioral Analysts (BCBAs) in Act 199 unintentionally created a monopoly for one certifying agency, the Behavior Analyst Certification Board, and excluded qualified mental health professionals from providing services to children with Autism.

We would like to ensure that social workers as defined in HRS 467E, can continue to provide behavioral analysis services to people on the Autism spectrum. Social workers have training relevant to providing Behavioral Analysis and accurate knowledge and hold strengths-based attitudes about autism and persons on the autism spectrum.

We suggest the following amendment:

- **We recommend adding a part (c) to Section 3 (at line 16 on p.4) to read:**
This section is not intended to restrict the practice of licensed psychologists or Licensed Social Workers (LSW) or Licensed Clinical Social Workers (LCSW) or their supervisees in the school setting.

We support the amendment proposed by HPA:

- **We recommend adding a part (c) to Section 3 (at line 16 on p.4) to read:**
This section is not intended to restrict the practice of licensed psychologists or their supervisees in the school setting.

- **We recommend changing Section 3(a)(1) on exemptions (at line 1 on p. 5) to read:**

An individual working within the scope of practice or 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



National Association of Social Workers

parent/guardian in implementing an ABA intervention, provided that that supervision is within that licensed professional's recognized scope of practice; and provided further that the [person

~~does not purport to be a behavior analyst]~~ licensed professional and the supervised individual shall not use the title of "licensed behavior analyst"

We believe these proposed amendments will clarify scope of practice to include qualified mental health professionals and avoid creating a further shortage of providers available to the school environment.

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



THE SENATE
THE TWENTY-NINTH LEGISLATURE
REGULAR SESSION OF 2018

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH
Senator Rosalyn H. Baker, Chair
Senator Jill N. Tokuda, Vice Chair

Wednesday, February 28, 2018
2:45 PM
Conference Room 229
State Capitol
415 South Beretania St.

SB 2925 Relating to the Practice of Behavior Analysis—**Testimony in strong opposition**

Honorable Chairs Kidani & Baker, Vice Chairs Kahele & Tokuda, and members of the committee,

I **strongly oppose SB 2925** as currently written, as this bill would weaken current consumer protections for children in need of behavior analytic programming in a school setting.

Over the years, this legislature has listened to testimony from countless families. Families on neighbor islands pleading for help from qualified providers, military families talking of having to homeschool their children because the public system would not provide the services their child had been receiving in other states, and from parents of older children discussing what could have been for their child. The legislature has also heard from numerous licensed teachers and the Hawai'i State Teachers Association (HSTA) stating that they have seen what unqualified "help" looks like and that they need the support of licensed behavior analysts and Registered Behavior Technicians (RBT) to meet the needs of their students. This state has made significant progress in recent years to ensure children can access the behavioral services they need, from trained and competent providers, regardless of the setting in which those services are delivered and **I ask you to uphold this commitment to our keiki.**

Current law affords consumer protection by establishing set standards for minimum training, competency, and ongoing supervision across all settings and funding sources in which applied behavior analysis (ABA) services are provided. As the field of behavior analysis grows, various credentials have become available; however, it is of utmost importance any credential is thoroughly evaluated to ensure consumer protection. In reviewing available literature, the Behavior Analyst Certification Board (BACB) credentials meet key areas of excellence including the use of psychometric procedures, use of job analysis studies, evidence-based training, evidence-based supervision dosage, and a system for disciplinary actions (ethical compliance) in addition to many

others (Green, 2011; Carr et al, 2017; Institute for Credentialing Excellence, 2017). The BACB credentialing body is recommended by Autism Speaks and the Association for Science in Autism Treatment (ASAT) as a means for consumers to identify qualified practitioners in the field of ABA. Removing the BACB credentials and changing the language to unspecified “national certifying agency” will decrease consumer protections. Additionally, the current law allows for other licensed practitioners working in their scope, with *demonstrated coursework, training, and experience in ABA*, to provide services under their own respective licensure law.

I support the suggested amendments submitted by the Hawai'i Association for Behavior Analysis (HABA) clarifying the practice of behavior analysis by other licensed professionals and their supervisees. If your committees choose to move this bill forward, I ask you to please adopt the amendments provided by HABA.

Mahalo for your consideration,



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

Maui

References

- Carr, J.E., Nosik, M.R., & DeLeon, I.G. (2017). The Registered Behavior Technician™ credential: A response to Leaf et al., *Behavior Analysis in Practice*. Retrieved from <http://link.springer.com/article/10.1007/s40617-017-0172-1>.
- Green, G. (2011). How to evaluate alternative credentials in behavior analysis. Retrieved from <http://www.iabaonline.com/wp-content/uploads/2013/03/How-to-Evaluate-Alternative-Credentialsin-Behavior-Analysis-Green-G.pdf>
- Institute for Credentialing Excellence. (2016). *National commission for certifying agencies (NCCA) standards*. Retrieved from <http://www.credentialingexcellence.org/p/cm/ld/fid=66>

SB-2925

Submitted on: 2/26/2018 8:53:40 AM

Testimony for EDU on 2/28/2018 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Momi Robins-Makaila	Individual	Support	Yes

Comments:

Regarding SB2925

Meeting in Room 229 on February 28, 2018, 2:45pm

For committees: EDU/CPH

February 28, 2018

Aloha Senators. Thank you for this opportunity to submit testimony. My name is Momi Robins-Makaila. I am a proud employee of Hawaii's department of education. I am writing as a private citizen and do not represent the Department of Education, however, I pledge my full support for our superintendent, our current vision and mission; our strategic plan; and the expectations placed upon us to make students our top priority. I am an autism consultant teacher, licensed in special education. I serve in the Central District Office of the Department of Education, under the immediate direction of District Educational Specialist Joanne Brinnich in the autism section, under Complex Area Superintendents John Erickson and Robert Davis. I support the passing of this bill, however, I humbly and respectfully request that the language of this bill be amended to look exactly like HB2271-HD2. SB2925 as it is written now allows the education system to be highjacked by other professionals who claim the exclusive rights to analyze and change behavior—which is an integral part of our job, as special educators in the Department of Education.

HB2271-HD2 now allows the Department of Education to continue their job to support children with disabilities, including children with autism, as it acknowledges that other licensed professionals in the state are able to engage in the practice of behavior analysis, write and implement plans for our students. Currently it is our practice that every child with a disability have a multi-disciplinary team of professionals including parents who collaborate on best practices and interventions for that child to thrive. The team, that sometimes involves the students themselves make decisions on how best to educate that child. With the language of SB2925 in its current state, the design and implementation of a plan cannot occur without an LBA and or a BCBA. While on occasion, we may choose to consult an LBA or a BCBA, it is by no means common.

My colleagues and I have gathered the signatures of 45 professionals who work in the Department of Education. On February 23, 2018 I submitted it as testimony to HB2271, the companion bill. Almost all of the names on the list have taught or worked with students with autism. They are special education teachers, principals, vice principals, a clinical psychologist, and student service coordinators. They are frustrated by the effects of Chapter 465D on their ability to do their jobs.

Special Education Teachers, counselors, and behavior health specialists are now afraid to do what we have done effectively for years prior to Chapter 465D for fear of losing their licenses and or being referred to the DCCA having to fight ridiculously unfounded accusations. I believe that others are attempting to ask the legislature to prohibit other licensed professionals from doing their jobs for other reasons than the benefit of our students. They are misinformed, which results in others being misinformed. We, school personnel including special education teachers, counselors and behavior health specialists are not asking to prohibit other professionals' from helping our students, nor are we striving to create a monopoly on practicing behavior analysis. We are simply asking that "licensed professionals" be recognized for the job they already do in the school setting to change and improve the behavior of their students, including their students with autism. For every letter you might have seen condemning the DOE for their apparent injustices against children where one might claim that the root of their child's problems stemmed from the absence of an LBA or a BCBA, I would respectfully argue the root is often due to a lack of communication; a misalignment of goals; or unrealistic expectations. The sad fact is that there are individuals who believe that the professionals in the DOE, are subpar, and that this law remedies that. An LBA or a BCBA cannot fix a lack of communication between team members, a misalignment of goals, or unrealistic expectations. It is analogous to putting gas in a car with no engine and expecting it to run, or giving an antibiotic to a diabetic expecting to cure diabetes.

It is my experience as an autism consultant teacher, all of the students who have autism are thriving. None of them are receiving only a strict ABA program. None of them have an LBA or BCBA on the case. Yet, again they are thriving. I have a parent letter, multiple texts and emails that thank us for doing our jobs, and supporting their children, but again, none of us on the team have an LBA or a BCBA. The reason these children are thriving is because there is a team of professionals, including parents, who work together, have strong and frequent communication, are on the same page, access various evidenced based strategies, create a program for every student's unique needs, and nurture and care for these students.

Chapter 465D2 defines the practice of behavior analysis as *the design, implementation, and evaluation of instructional and environmental modifications to produce socially significant improvements in human behavior. Practice of behavior analysis includes the empirical identification of functional relations between behavior and environmental factors, known as functional assessment and analysis. Practice of behavior analysis also includes the use of contextual factors, motivating operations, antecedent stimuli, positive reinforcement, and other consequences to help people develop new behaviors, increase or decrease existing behaviors, and emit behaviors under specific*

environmental conditions.” This sounds like the course description of EDSE 520 Behavior Analysis—one of the courses I took to obtain my special education teaching certification back in 2000. Special education teachers engage in the practice of behavioral analysis every day. They design, implement and evaluate plans for their students as a part of their responsibilities. Please help us continue to do the jobs we are more than capable of doing.

Thank you for allowing me the opportunity to share my testimony, for considering our requests, and for giving voice to special education teachers, principals, vice principals, school psychologists, counselors, and student services coordinators, who are parents, community members, and individuals who have dedicated their lives to Hawaii’s keiki. I hope and pray you are able to make loud and clear our voices.

Sincerely and Respectfully yours,

Momi Robins-Makaila

February 28, 2018

Senator Baker and Other Senators,

Thank you for allowing me to testify. I am Mary Jo Noonan and am testifying as a private citizen. I hold a PhD in Special Education and am a Professor, a Board Certified Behavior Analyst, and a Licensed Behavior Analyst at the University of Hawaii at Manoa. I am also the Department of Chair of Special Education. In my role at UH, I prepare special educators to teach students with severe disabilities/autism, and I also prepare individuals who desire to become Board Certified Behavior Analysts. Having prepared special educators at UH for 36 years and being a part of a faculty who prepare Behavior Analysts, I can testify to the content and scope of the training of special education teachers and how it compares that of Behavior Analysts. For students with severe disabilities/autism, the foundation of special education instruction – and the instructional approach with the strongest evidence base – is applied behavior analysis. I and my colleagues at UH and across the United States have been training special educators in the area of severe disabilities/autism to implement behavior analysis intervention procedures since the early 1970s – about 30 years prior to the establishment of “board certification” for behavior analysts. In establishing our *verified course sequence* for training behavior analysts, we used the core courses of our special education teacher training program in the area of severe disabilities/autism. Our special education teacher graduates are well-trained in (a) principles of behavior, (b) behavioral assessment methods, (c) behavioral intervention methods, (d) procedures to promote generalization, (e) communication assessment and intervention, (f) functional behavior assessment for challenging behavior, and (g) positive behavior support interventions -- and this list is not exhaustive. **I fully support SB 2925 clarifying that it is within the scope of practice of special education teachers to develop and implement applied behavior analysis assessments and interventions.** It would not make sense to restrict special educators from conducting behavior analysis procedures because that would restrict them from implementing the evidence-based teaching strategies of the special education teaching profession. Thank you.

Mary Jo Noonan, PhD, BCBA, LBA
3357 Anoi Place
Honolulu, HI 96822
808-284-4878

EDU Testimony

From: kadooka.chu@gmail.com
Sent: Monday, February 26, 2018 11:07 AM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Adrienne Kadooka
98-1236 KUAWA ST
AIEA, HI 96701-3427

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

Wednesday, February 28, 2018, 2:45pm
Conference Room 229
State Capitol
415 South Beretania Street

Testimony in SUPPORT of SB 2925
RELATING TO THE PRACTICE OF BEHAVIOR ANALYSIS and recommending amendments

Act 199 was put in place by the legislature to credential a new, additional, group of behaviorally trained professionals to help provide higher level behavioral interventions, especially for children with autism. However, instead, this simple professional licensure law has been used to justify severe limitations on the workforce available to support our teachers and students with behavioral challenges. Teachers and administrators in Hawaii's schools are trying hard to cope with a whole range of behavioral challenges presented by our students. They need more help to meet the needs of these students. They do NOT need arbitrary, bureaucratic rules imposing limitations on who is allowed to support our teachers and students by developing and implementing effective behavior plans. Basic behavioral strategies are ubiquitous tools used widely by parents, teachers and childcare professionals. There are psychologists and other licensed professionals (mental health counselors, clinical social workers, special educators) who live in our state and are well-trained in behavioral interventions. Our schools need to be free to employ these individuals - as well as Licensed Behavior Analysts - to help our children. For this reason, I SUPPORT SB 2925 WITH THE AMENDMENT PROPOSED BY THE HAWAI'I PSYCHOLOGICAL ASSOCIATION.

Sincerely,

Adrienne Kadooka
8085512433

EDU Testimony

From: c.kehaulani@gmail.com
Sent: Monday, February 26, 2018 11:52 AM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Christina Uemura
PO Box 334
Lawai, HI 96765-0334

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

Wednesday, February 28, 2018, 2:45pm
Conference Room 229
State Capitol
415 South Beretania Street

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Sincerely,

Christina Uemura
8086348201

EDU Testimony

From: geniec@hawaii.rr.com
Sent: Monday, February 26, 2018 10:22 AM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Virginia Cynn
2222 Citron St., #1003
Honolulu, HI 96826-2857

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

Wednesday, February 28, 2018, 2:45pm
Conference Room 229
State Capitol
415 South Beretania Street

Testimony in SUPPORT of SB 2925
RELATING TO THE PRACTICE OF BEHAVIOR ANALYSIS and recommending amendments

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Sincerely,

Virginia E.H. Cynn, Ph.D.

EDU Testimony

From: cynthia0537@sbcglobal.net
Sent: Sunday, February 25, 2018 8:50 PM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Cynthia Tucker
354 Uluniu Street, Suite 410
Kailua, HI 96734-2534

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

Wednesday, February 28, 2018, 2:45pm
Conference Room 229
State Capitol
415 South Beretania Street

Testimony in SUPPORT of SB 2925
RELATING TO THE PRACTICE OF BEHAVIOR ANALYSIS and recommending amendments

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Sincerely,

Cynthia Tucker

EDU Testimony

From: logande@gmail.com
Sent: Sunday, February 25, 2018 9:50 PM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Diane Logan
PO Box 5488
Kailua Kona, HI 96745-5488

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

Wednesday, February 28, 2018, 2:45pm
Conference Room 229
State Capitol
415 South Beretania Street

Testimony in SUPPORT of SB 2925
RELATING TO THE PRACTICE OF BEHAVIOR ANALYSIS and recommending amendments

Act 199 was put in place by the legislature to credential a new, additional, group of behaviorally trained professionals to help provide higher level behavioral interventions, especially for children with autism. However, instead, this simple professional licensure law has been used to justify severe limitations on the workforce available to support our teachers and students with behavioral challenges. Teachers and administrators in Hawaii's schools are trying hard to cope with a whole range of behavioral challenges presented by our students. They need more help to meet the needs of these students. They do NOT need arbitrary, bureaucratic rules imposing limitations on who is allowed to support our teachers and students by developing and implementing effective behavior plans. Basic behavioral strategies are ubiquitous tools used widely by parents, teachers and childcare professionals. There are psychologists and other licensed professionals (mental health counselors, clinical social workers, special educators) who live in our state and are well-trained in behavioral interventions. Our schools need to be free to employ these individuals - as well as Licensed Behavior Analysts - to help our children. For this reason, I SUPPORT SB 2925 WITH THE AMENDMENT PROPOSED BY THE HAWAII' I PSYCHOLOGICAL ASSOCIATION.

Sincerely,

Diane Logan
8087855443

EDU Testimony

From: gailsilva003@gmail.com
Sent: Sunday, February 25, 2018 10:45 PM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Gail D. Silva Psy.D.
45-452 Waikalua Pl
Kaneohe, HI 96744-2790

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

Wednesday, February 28, 2018, 2:45pm
Conference Room 229
State Capitol
415 South Beretania Street

Testimony in SUPPORT of SB 2925
RELATING TO THE PRACTICE OF BEHAVIOR ANALYSIS and recommending amendments

Act 199 was put in place by the legislature to credential a new, additional, group of behaviorally trained professionals to help provide higher level behavioral interventions, especially for children with autism. However, instead, this simple professional licensure law has been used to justify severe limitations on the workforce available to support our teachers and students with behavioral challenges. Teachers and administrators in Hawaii's schools are trying hard to cope with a whole range of behavioral challenges presented by our students. They need more help to meet the needs of these students. They do NOT need arbitrary, bureaucratic rules imposing limitations on who is allowed to support our teachers and students by developing and implementing effective behavior plans. Basic behavioral strategies are ubiquitous tools used widely by parents, teachers and childcare professionals. There are psychologists and other licensed professionals (mental health counselors, clinical social workers, special educators) who live in our state and are well-trained in behavioral interventions. Our schools need to be free to employ these individuals - as well as Licensed Behavior Analysts - to help our children. For this reason, I SUPPORT SB 2925 WITH THE AMENDMENT PROPOSED BY THE HAWAII' I PSYCHOLOGICAL ASSOCIATION.

Sincerely,

Gail D. Silva, Psy.D.
808-561-0667

EDU Testimony

From: gt33@mac.comim
Sent: Sunday, February 25, 2018 9:45 PM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Graham Taylor
520 Lunalilo Home Rd. 2404
Honolulu, HI 96825-1723

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

Wednesday, February 28, 2018, 2:45pm
Conference Room 229
State Capitol
415 South Beretania Street

Testimony in SUPPORT of SB 2925
RELATING TO THE PRACTICE OF BEHAVIOR ANALYSIS and recommending amendments

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Sincerely,

Dr. Graham Taylor
808-383-4456

EDU Testimony

From: jimspira@outlook.com
Sent: Monday, February 26, 2018 6:32 AM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

James Spira
1472 Akeke Pl
Kailua, HI 96734-4218

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

Wednesday, February 28, 2018, 2:45pm
Conference Room 229
State Capitol
415 South Beretania Street

Testimony in SUPPORT of SB 2925
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Act 199 was put in place by the legislature to credential a new, additional, group of behaviorally trained professionals to help provide higher level behavioral interventions, especially for children with autism. However, instead, this simple professional licensure law has been used to justify severe limitations on the workforce available to support our teachers and students with behavioral challenges. Teachers and administrators in Hawaii's schools are trying hard to cope with a whole range of behavioral challenges presented by our students. They need more help to meet the needs of these students. They do NOT need arbitrary, bureaucratic rules imposing limitations on who is allowed to support our teachers and students by developing and implementing effective behavior plans. Basic behavioral strategies are ubiquitous tools used widely by parents, teachers and childcare professionals. There are psychologists and other licensed professionals (mental health counselors, clinical social workers, special educators) who live in our state and are well-trained in behavioral interventions. Our schools need to be free to employ these individuals - as well as Licensed Behavior Analysts - to help our children. For this reason, I SUPPORT SB 2925 WITH THE AMENDMENT PROPOSED BY THE HAWAI'I PSYCHOLOGICAL ASSOCIATION.

Sincerely,

Dr James L Spira
809-225-2193

SB-2925

Submitted on: 2/26/2018 3:51:15 PM

Testimony for EDU on 2/28/2018 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Maureen mcomas	Individual	Support	Yes

Comments:

I support SB2925 *with* amendments as proposed by HABA. As written it does not provide our keiki the consumer protection that is a crucial component of Applied Behavior Analysis (ABA) .

Thank you.

Date: February 27, 2018
To: Senator Michelle N. Kidani, Chair and Senator Kaiali'i Kahele, Vice Chair,
Committee on Education
Senator Rosalyn H. Baker and Senator Jill N. Tokuda, Vice Chair,
Committee on Commerce, Consumer Protection and Health
Hearing: February 28, 2018, 2:45 p.m., Room 229
From: Linda Hufano, Ph.D.
(808) 258-2250
Re: Testimony in Support of SB2925, Relating to the Practice of Behavior Analysis,
with Amendments

I am a behaviorally-trained psychologist and since 1984 have worked as a Psychologist for the Hawaii Department of Education (HIDOE), Branch Chief/Psychologist for the Child Adolescent Mental Health Division (CAMHD), private practitioner in Honolulu and Leeward O'ahu, and have recruited, developed, trained and supervised providers of Applied Behavior Analysis (ABA) and other psychological services to work under contracts with the HIDOE and for the CAMHD, Developmental Disabilities Division, and Early Intervention Section of the Hawaii Department of Health.

Strong Support for SB2925

I strongly support of SB2925 with amendments proposed by the Hawaii Psychological Association (HPA). These amendments clarify the exemption of licensed psychologists and other licensed or credentialed professionals (e.g., licensed clinical social workers, mental health counselors, marriage family therapists, APRN's, and special education teachers) whose recognized scope of practice overlaps with behavior analysis.

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 from designing ABA programs for eligible individuals and/or supervising others to implement the programs.

Why Individuals, Schools and Families Should Have Access to ABA-trained Mental Health Providers

Compared with LBAs whose certification does not require training in mental health, ABA-trained psychologist have the advantage of experience in treating the anxiety disorders, clinical depression, externalizing disorders such as ADHD, that are frequently co-morbid with autism (30 – 40% or more for each of the previously mentioned disorders). Post-traumatic stress disorder (PTSD) and suicide are also significantly high among individuals with autism. Licensed psychologists and other mental health providers (e.g., licensed clinical social workers, registered nurse practitioners) are trained and "legally qualified" to diagnose autism as well as anxiety disorders, clinical depression, and externalizing disorders that have been found to co-occur with autism 30 – 40% of the time. Individuals with ASD and other developmental disorders are also at a significantly higher risk for post-traumatic stress disorder (PTSD) and

suicide than their non-disabled counterparts. The knowledge and skill sets of mental health providers can be critical to designing an effective intervention program for students with mental health problems in designing ABA programs for these students, evaluating modifying programs that are not producing the desired outcomes or are resulting in unintended consequences, as well as considering other types of treatment that may be beneficial to the student, which may include newer, non-ABA protocols.

The Workforce Issue

Every qualified provider is needed. It is clear in speaking with representatives of state agencies that there will be a significant lack of trained professionals and paraprofessionals to deliver ABA services if Chapter 465D of the Hawaii Revised Statute continues to be misinterpreted as restricted to LBA's and the persons they supervise. Parents have reported waitlists of up to three years for services covered by insurance, with at least one provider who works exclusively with children under six years of age ("the critical age" for ABA services) informing parents they are no longer maintaining a waitlist.

It is also my understanding that in no other state are Departments of Education mandated to certify their direct support workers/teachers/paraprofessional staff as Registered Behavior Technicians, or to exclusively use Licensed Behavior Analysts/BCBA's to supervise such individuals. Such a mandate would impede access of competent care to consumers desperately needing services, be an additional and unnecessary burden on taxpayers, be an unfair restraint of trade for professionals who have been providing this care, and create an illegal monopoly for Licensed Behavior Analysts, Registered Behavior Technicians and their national certifying board.

Clarifying who can legally provide behavioral intervention services as well as the "overly broad definition" of ABA in ACT 199, should not make it "illegal" for teachers and other staff to continue to design and direct their educational assistants in implementing behavioral interventions for students, provided they are trained and competent to work with the targeted student or provide the specific intervention(s) needed.

I am attaching a comparison sheet of the training requirements of paraprofessional staff for your consideration. National certification of paraprofessionals will be very costly; there is a turnover of 30-40% annually; to my knowledge no other DD Division is required to have direct support workers who are RBT's; the 40 hour on-line training for RBT's (or alternately training by licensed or nationally certified professionals) is relatively new, and there is no proof that it leads to better outcomes. Despite the numbers of LBA's and RBT's registered in Hawaii, contracted agencies, parents, and referring agencies are reporting a shortage of RBT's and frequent turnover in addition to long waitlists, with one agency no longer even keeping a waitlist because of a three year demand. LBA's are not restricted by their national board in only being able to supervise an RBT; they can also supervise paras certified by the other national certifying agencies (such as the Behavioral Intervention Certification Council) which has certified other Hawaii behavior technicians), as well as contracted paraprofessionals who are ABA-trained and meet the attached standards for credentialing by the HIDOE, but are not certified by a nationally certifying agency.

It is certainly possible to include an observation/assessment component to the training of paraprofessionals/direct support workers, or similar oversight protection, which would assure that a paraprofessional/direct support worker is competent to provide the behavioral tasks/strategies required by a particular student. The paraprofessional/direct support worker would then be able to be supervised by any qualified ABA-trained professional, including an LBA, ***but not excluding*** an ABA-trained special education teacher, licensed psychologist or other licensed/credentialed professional from directing or supervising the paraprofessional. Should a student no longer need a behavioral intervention designed by an LBA, the student could retain the paraprofessional under the supervision of his/her classroom teacher, with the LBA moving on to designing ABA programs for students who present challenges that are outside the knowledge/skill set of the classroom teacher or who is unable to address the challenges because of other limitations (e.g., not having the time to develop a data collection system or do a functional behavior assessment in addition to his/her myriad of other responsibilities).

Thank you for the opportunity to submit testimony.

	<u>DOE Parapro</u>	<u>RBT BCBA</u> (NCCA accredited) H.S./Equiv.	<u>BCAT (BICC)</u> (NCCA accredited) H.S./Equiv.	<u>ABAT (QABA)</u> (ANSI Accredited) H.S./Equiv.
Min. Education	A.A./ParaPro Exam			
Preservice Training	32 hrs in-person	40 hrs in-person/online	40 hrs in-person/online	45 hrs in person/online
Content of training specifically addresses target population	Yes	No (designed to be generic)	Yes	Yes
Trainer Qual.	By Doctorate Psy 2 yr exp, MA 3 yrs exp., or BA 5 yrs. exp. w/ students with severe social, comm. funct. and/or behav.deficits	BCBA/BCBA-D (or BA-Level BCaBA)	Licensed/Nat. Cert. Prof.	11 approved agencies/ pre-app. coursework by Lic./Nat. Cert. Prof.
Assessment/ Learner Outcomes	Approved by DOE (May be Oral, Written, Performance-Based)	Performance Eval. Based on Obs. & Written Exam (75 items)	Written Exam (150 items)	Written Exam (Prior to initial cert. and again for 3 yrs recert.)
Field Exp.	None	None	15 sup. hrs w/ASD ind.	40 sup. hrs w/ASD ind.
Security Check Req.	Yes	Yes	Yes	Yes
Cont. Education	16 hours annually	None	12 hrs (3 in ethics) every two years	36 hours (3 in ethics) every 3 years
Supervision	2 hours per month by Lic. Psy 1 yr; Lic. MA 3 yrs; or Unlic MA 5 yrs (and teacher direction in school)	5% of service hrs. by BCBA/BCBA-D (or BA-level BCaBA)	5% of service hrs. by a Lic./Nat. Cert. Prov.	1 hr for every 10 hrs by a Lic./Certif. Prov. (or BA-level QASP)
Renew/Recred./ Recert.	Annual	Annual	Every 2 years	Renew year 1 & yrs Recert. after 3 yrs

	<u>DOE Parapro</u>	<u>RBT (BCBA)</u>	<u>BCAT (BICC)</u>	<u>ABAT (QABA)</u>
Cost				
Application Fees	N/A	\$50	\$30	\$250
Exam	N/A	\$45	\$100/40 (Intro)	
Annual Renewal	N/A	\$35	\$50 (every 2 years)	\$50
Late Fee	N/A	\$50		
Insufficient Funds	N/A	\$45		
Training Costs (included)		~\$300 online (may be discounted); or 40 hrs. by a BCBA (or BA level BCaBA)	~\$300 online; or 40 hrs. by a Lic/Nati. Cert. Prof.	Per vendor; or 45 hrs. by a Lic/Nat. Cert Prof.
Perf. Assess. Costs	N/A	2+hrs by BCBA/BCaBA	N/A	N/A
Supervised FieldWork (included)		5% of service hrs. by a BCBA (or BA level BCaBA)	5% of service hrs. by a Lic/Nat. Cert. Prof.	10% of service hrs. by a Lic/Nat. Cert Prof. (or BA-level QASP)
Continuing Education (included)		N/A	Per vendor; or 6 hrs annually by Lic/Nat. Cert Prof.	Per vendor; or 12 hrs annually by a Lic./Nat. Cert Prof.

Updated Draft: 2/19/18

2/27/18

In support of SB2925 as amended to not restrict trained licensed clinical psychologists' current practice and supervision

I have been working with children with ASD since 1997 and supervising aides since 2000. I have my Ph.D. in Clinical Psychology and was licensed by the State in 2005. To be licensed, we are required to have at least 4,000+ hours in supervised training by a licensed psychologist. When I was applying for licensure, I was told that I actually had too many hours of work with only the ASD population, and I had to prove that I was trained in other areas. Thankfully, I was. In my ASD experience, I worked in the role of an Autism Consultant with the DOE and DOH, ran 2 ABA-based biopsychosocial programs with 75+ children with ASD, and was the director of CARE Hawaii's autism services (ensuring the appropriate provision of services related to D.O.E.'s intensive instructional services contract, including management of services of 100+ providers). Over the years, I've attended dozens of workshops by prominent ASD experts (e.g., Lovaas, Leaf), read countless books and articles by prominent authors (e.g., Lovaas, the Koegels, Schopler, Siegal, Granpeesheh, Leaf, Grandin, Baron-Cohen, Harris & Handleman, Smith), and was intensively supervised by several psychologists and prominent BCBA's. Currently, I have a private practice, and I continue to oversee ABA programs (and the paraprofessionals on the cases) for children with ASD.

Along with many of my colleagues who are licensed psychologists trained in ABA, I am requesting that the legislature accept the amendments to the new law to make it clear that licensed psychologists are able to continue our work with children who need ABA, as well as continue supervising paraprofessionals in the implementation of ABA/behavioral interventions. For licensed clinical psychologists, this practice has been within our scope of practice as defined by the American Psychological Association, but we are also bound by the law and our profession's ethical code to do so competently and ethically.

Mahalo.

Sean W. Scanlan, Ph.D.
License # PSY 910

SB 2925
Hearing:
Wednesday, February 28, 2018
2:45pm

Aloha,

As a Complex Area Superintendent, I would like to express my appreciation to the Senate Committees on Education and Commerce, Consumer Protection, and Health for hearing SB 2925.

I strongly support SB 2925 that addresses the scope of licensure for individuals engaged in the practice of behavior analysis in a school setting.

Further, I feel that licensure requirements should be limited to practitioners designing and implementing an ABA program for students who exhibit challenging behaviors and for whom less intensive interventions were unsuccessful.

Thank you for this opportunity to submit testimony on this measure.

Sincerely,
Bob Davis
Complex Area Superintendent
North Side Central District, Leilehua, Mililani and Waialua

SB-2925

Submitted on: 2/27/2018 12:39:38 PM

Testimony for EDU on 2/28/2018 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
William N. Arakaki	Individual	Support	No

Comments:

SB 2925

Hearing:

Wednesday, February 28, 2018

2:45pm

Aloha,

As the Complex Area Superintendent of Kauai, I would like to express my appreciation to the Senate Committees on Education and Commerce, Consumer Protection, and Health for hearing SB 2925.

I strongly support SB 2925 that addresses the scope of licensure for individuals engaged in the practice of behavior analysis in a school setting.

Further, I feel that licensure requirements should be limited to practitioners designing and implementing an ABA program for students who exhibit challenging behaviors and for whom less intensive interventions were unsuccessful.

Thank you for this opportunity to submit testimony on this measure.

Sincerely,

William N. Arakaki

Complex Area Superintendent, Kauai

SB-2925

Submitted on: 2/27/2018 11:38:49 AM

Testimony for EDU on 2/28/2018 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Kathleen Dimino	Individual	Support	No

Comments:

Aloha,

As a Complex Area Superintendent, I would like to express my appreciation to the Senate Committees on Education and Commerce, Consumer Protection, and Health for hearing SB 2925.

I strongly support SB 2925 that addresses the scope of licensure for individuals engaged in the practice of behavior analysis in a school setting. Requiring teachers, who are credentialed to work with students who have a wide range of disabilities, restricts our ability as a department to hire highly qualified personnel in our schools.

Further, I feel that licensure requirements should be limited to practitioners designing and implementing an ABA program for students who exhibit challenging behaviors and for whom less intensive interventions were unsuccessful.

Thank you for this opportunity to submit testimony on this measure.

Sincerely,

Kathleen Dimino

Complex Area Superintendent - Baldwin-Kekaulike-Maui

SB-2925

Submitted on: 2/27/2018 11:37:58 AM

Testimony for EDU on 2/28/2018 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Lindsay Ball	Individual	Support	No

Comments:

SB 2925

Hearing:

Wednesday, February 28, 2018

2:45pm

Aloha,

As a Complex Area Superintendent, I would like to express my appreciation to the Senate Committees on Education and Commerce, Consumer Protection, and Health for hearing SB 2925.

I strongly support SB 2925 that addresses the scope of licensure for individuals engaged in the practice of behavior analysis in a school setting. It is important that there is a clear distinction between behavior analysis practices and applied behavior analysis (ABA). Requiring teachers, who are credentialed to work with students who have wide range of disabilities, restricts our ability as a department to hire highly qualified personnel in our schools.

Further, I feel that licensure requirements should be limited to practitioners designing and implementing an ABA program for students who exhibit challenging behaviors and for whom less intensive interventions were unsuccessful.

Thank you for this opportunity to submit testimony on this measure.

Sincerely,

Lindsay Ball, Complex Area Superintendent

Hana, Lahaina, Lanai, Molokai

SB 2925
Hearing:
Wednesday, February 28, 2018
2:45pm

Aloha,

As the Kaimuki, McKinley, Roosevelt Complex Area Superintendent , I would like to express my appreciation to the Senate Committees on Education and Commerce, Consumer Protection, and Health for hearing SB 2925.

I strongly support SB 2925 that addresses the scope of licensure for individuals engaged in the practice of behavior analysis in a school setting.

Further, I feel that licensure requirements should be limited to practitioners designing and implementing an ABA program for students who exhibit challenging behaviors and for whom less intensive interventions were unsuccessful.

Thank you for this opportunity to submit testimony on this measure.

Sincerely,
Name Ruth Silberstein
Title Complex Area Superintendent
School/Complex Area Kaimuki, McKinley, Roosevelt

SB-2925

Submitted on: 2/27/2018 2:34:01 PM

Testimony for EDU on 2/28/2018 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
chad	Individual	Support	No

Comments:

SB 2925

Hearing:

Wednesday, February 28, 2018

2:45pm

Aloha,

As a Complex Area Superintendent, I would like to express my appreciation to the Senate Committees on Education and Commerce, Consumer Protection, and Health for hearing SB 2925.

I strongly support SB 2925 that addresses the scope of licensure for individuals engaged in the practice of behavior analysis in a school setting.

Further, I feel that licensure requirements should be limited to practitioners designing and implementing an ABA program for students who exhibit challenging behaviors and for whom less intensive interventions were unsuccessful.

Thank you for this opportunity to submit testimony on this measure.

Sincerely,

Chad K. Farias

CAS

KKPCA and HWCA



STATE OF HAWAII
DEPARTMENT OF EDUCATION
HONOLULU DISTRICT OFFICE
4987 KILAUEA AVENUE
HONOLULU, HAWAII 96816

February 27, 2018

SB 2925
Hearing: Wednesday, February 28, 2018
Time: 2:45pm

Aloha,

As Complex Area Superintendent of the Farrington-Kaiser-Kalani complex area, I would like to express my appreciation to the Senate Committees on Education and Commerce, Consumer Protection, and Health for hearing SB 2925.

I strongly support SB 2925 that addresses the scope of licensure for individuals engaged in the practice of behavior analysis in a school setting.

Further, I feel that licensure requirements should be limited to practitioners designing and implementing an ABA program for students who exhibit challenging behaviors and for whom less intensive interventions were unsuccessful.

Thank you for this opportunity to submit testimony on this measure.

Sincerely,

A handwritten signature in cursive script, appearing to read "Donna Lum Kagawa".

Donna Lum Kagawa
Complex Area Superintendent
Farrington Kalani Kaiser Complex Area



STATE OF HAWAII
DEPARTMENT OF EDUCATION
HONOLULU DISTRICT OFFICE
4967 KILAUEA AVENUE
HONOLULU, HAWAII 96816

February 27, 2018

SB 2925
Hearing: Wednesday, February 28, 2018
Time: 2:45pm

Aloha,

As School Administrators, Complex Area Educational Officers and Support Personnel of the Farrington-Kaiser-Kalani complex area, I would like to express my appreciation to the Senate Committees on Education and Commerce, Consumer Protection, and Health for hearing SB 2925.

We strongly support SB 2925 that addresses the scope of licensure for individuals engaged in the practice of behavior analysis in a school setting.

Further, we feel that licensure requirements should be limited to practitioners designing and implementing an ABA program for students who exhibit challenging behaviors and for whom less intensive interventions were unsuccessful.

Thank you for this opportunity to submit testimony on this measure.

Sincerely,

Officers and Personnel of the Farrington Kalani Kaiser Complex Area

Sean Tajima, Principal <i>Sean Tajima</i>	Mike Harano, Principal <i>Mike Harano</i>	Jeffrey Shitaka, Principal <i>Jeffrey Shitaka</i>
Laura Ann Principals <i>Laura Ann</i>	Linell Dilworth, principal <i>Linell Dilworth</i>	Mahealani Nacamura <i>Mahealani Nacamura</i> PERSONNEL OFFICER
CODY EIKUTA, SRS <i>Cody Eikuta</i>	Joan Funamura, SRS <i>Joan Funamura</i>	Wendy Kau, DES <i>Wendy Kau</i>
BLAINE KASHIMOTO, VICE-PRINCIPAL <i>Blaine Kashimoto</i>	Shannon Goo, Principal <i>Shannon Goo</i>	
Kristal Gardner, Principal <i>Kristal Gardner</i>	Michelle Kay, Complex Area Resource Teacher <i>Michelle Kay</i>	
Wendy Kau, DES <i>Wendy Kau</i>		

SB 2925
Hearing:
Wednesday, February 28, 2018
2:45pm

Aloha,

As a principal, I would like to express my appreciation to the Senate Committees on Education and Commerce, Consumer Protection, and Health for hearing SB 2925.

I strongly support SB 2925 that addresses the scope of licensure for individuals engaged in the practice of behavior analysis in a school setting.

Further, I feel that licensure requirements should be limited to practitioners designing and implementing an ABA program for students who exhibit challenging behaviors and for whom less intensive interventions were unsuccessful.

Thank you for this opportunity to submit testimony on this measure.

Sincerely,
Scott Moore
Principal
Waialua Elementary/Waialua Complex Area

SB 2925
Hearing:
Wednesday, February 28, 2018
2:45pm

Aloha,

As a principal, I would like to express my appreciation to the Senate Committees on Education and Commerce, Consumer Protection, and Health for hearing SB 2925.

I strongly support SB 2925 that addresses the scope of licensure for individuals engaged in the practice of behavior analysis in a school setting.

Further, I feel that licensure requirements should be limited to practitioners designing and implementing an ABA program for students who exhibit challenging behaviors and for whom less intensive interventions were unsuccessful.

Thank you for this opportunity to submit testimony on this measure.

Sincerely,
Linell Dilwith
Principal, Stevenson Middle School
Roosevelt Complex

SB 2925
Hearing:
Wednesday, February 28, 2018
2:45pm

Aloha,

As a vice principal I would like to express my appreciation to the Senate Committees on Education and Commerce, Consumer Protection, and Health for hearing SB 2925.

I strongly support SB 2925 that addresses the scope of licensure for individuals engaged in the practice of behavior analysis in a school setting.

Further, I feel that licensure requirements should be limited to practitioners designing and implementing an ABA program for students who exhibit challenging behaviors and for whom less intensive interventions were unsuccessful.

Thank you for this opportunity to submit testimony on this measure.

Sincerely,
Varissa Pata
Vice Principal
Waialua Elementary School

SB 2925
Hearing:
Wednesday, February 28, 2018
2:45pm

Aloha,

As a (teacher, principal, etc.), I would like to express my appreciation to the Senate Committees on Education and Commerce, Consumer Protection, and Health for hearing SB 2925.

I strongly support SB 2925 that addresses the scope of licensure for individuals engaged in the practice of behavior analysis in a school setting.

Further, I feel that licensure requirements should be limited to practitioners designing and implementing an ABA program for students who exhibit challenging behaviors and for whom less intensive interventions were unsuccessful.

Thank you for this opportunity to submit testimony on this measure.

Sincerely,
DeeAnna Calabrese
Student Services Coordinator
Waialua Elementary School/Waialua Complex



STATE OF HAWAII
DEPARTMENT OF EDUCATION
CENTRAL OAHU DISTRICT OFFICE ANNEX
STUDENT SUPPORT SERVICES
1136 CALIFORNIA AVENUE
WAHIAWA, HAWAII 96786

SB2925

Hearing:

Wednesday, February 28, 2018

2:45pm

Aloha,

As an Autism District Educational Specialist, I would like to express my appreciation to the Senate Committees on Education and Commerce, Consumer Protection, and Health for hearing SB2925.

I strongly support SB2925 that addresses the scope of licensure for individuals engaged in the practice of behavior analysis in a school setting.

Further, I feel the licensure requirements should be limited to practitioners designing and implementing an ABA program for students who exhibit challenging behaviors and for whom less intensive interventions were unsuccessful.

Thank you for this opportunity to submit testimony on this measure.

Sincerely,

A handwritten signature in blue ink that reads "Joanne Brinich". The signature is written in a cursive, flowing style.

Joanne Brinich

District Education Specialist Autism
Central District

SB 2925
Hearing:
Wednesday, February 28, 2018
2:45pm

Aloha,

As a (teacher, principal, etc.), I would like to express my appreciation to the Senate Committees on Education and Commerce, Consumer Protection, and Health for hearing SB 2925.

I strongly support SB 2925 that addresses the scope of licensure for individuals engaged in the practice of behavior analysis in a school setting.

Further, I feel that licensure requirements should be limited to practitioners designing and implementing an ABA program for students who exhibit challenging behaviors and for whom less intensive interventions were unsuccessful.

Thank you for this opportunity to submit testimony on this measure.

Sincerely,

Name:	Cam-Tu Trinh
Title:	STEM Resource Teacher
School/Complex Area	Honolulu District Office/ Kaimuki McKinley Roosevelt Complex

EDU Testimony

From: Bebi Davis <bebi@hawaii.edu>
Sent: Tuesday, February 27, 2018 2:12 PM
To: EDU Testimony
Subject: Testimony-SB 2925

SB 2925
Hearing:
Wednesday, February 28, 2018
2:45pm

Aloha,

As a (teacher, principal, etc.), I would like to express my appreciation to the Senate Committees on Education and Commerce, Consumer Protection, and Health for hearing SB 2925.

I strongly support SB 2925 that addresses the scope of licensure for individuals engaged in the practice of behavior analysis in a school setting.

Further, I feel that licensure requirements should be limited to practitioners designing and implementing an ABA program for students who exhibit challenging behaviors and for whom less intensive interventions were unsuccessful.

Thank you for this opportunity to submit testimony on this measure.

Sincerely,

Bebi Davis, PhD
STEM Resource Teacher
Kaimuki-McKinley-Roosevelt Complex
Honolulu District



Health Plan Approval for ABA During School Day

Amanda Kelly <akelly@anuenueaba.com>

Wed, Jul 12, 2017 at 6:05 PM

To: Deb_T_Farmer/CIB/HIDOE@notes.k12.hi.us, Suzanne_Mulcahy/WINDO/HIDOE@notes.k12.hi.us

Cc: Joanne Brinich <Joanne_Brinich/CENDO/HIDOE@notes.k12.hi.us>

Good Evening Deb,

I have a client who has been authorized to receive 40 hours per week of applied behavior analysis services through his health insurer. These services have been determined to be medically necessary to ameliorate the client's symptoms associated with his diagnosis of autism. The family and I have spoken with Joanne Brinich, Central District Education Specialist, in addition to the client's IEP team about coordinating these services. When Joanne and I spoke this afternoon, she recommended I reach out to you and Suzanne, as she did not believe this had ever been done in Hawai'i before. When we spoke, she also informed me that she will be away for the remainder of the summer (July 14 - August 1).

This is certainly the first time I have had a health plan authorize applied behavior analysis services to explicitly occur in the school setting. For this particular case, I was asked to demonstrate that the client was not currently receiving applied behavior analysis services by a licensed behavior analyst in his DOE placement. Currently, Daniel Cordial, the Behavioral Health Specialist (BHS) assigned to the case *does not possess a Hawai'i state license of any kind*. He is not qualified or credentialed to provide behavior analytic services in Hawai'i or any other state. Provided with this information, the health plan authorized 40 hours per week of applied behavior analysis services as appropriate for this client.

This situation will require some creative problem-solving; as this client will need to have his applied behavior analysis services delivered during the school day. I see this as an opportunity for the Department of Education and the health plans to work together and malama our keiki. As school begins in a few short weeks, we will want to develop a plan quickly. I look forward to working with you, Suzanne, and Joanne to identify a meaningful and timely solution. I truly believe we can find a way to have this child remain in his community, neighborhood school, while receiving access to doctor prescribed, medically necessary care.

Mahalo nui,

Amanda N. Kelly, PhD, BCBA-D, LBA
Director, Anuenue Behavior Analysts
Ph: (808) 298-2658 | F: (808) 441-0944



Amanda Kelly <akelly@haldsambek.com>

Health Plan Approval for ABA During School Day

Deb_Farmer/OCISS/HIDOE@notes.k12.hi.us

Mon, Jul 17, 2017 at 8:26

<Deb_Farmer/OCISS/HIDOE@notes.k12.hi.us>

AM

To: Amanda Kelly <akelly@anuenueaba.com>

Cc: Joanne_Brinich/CENDO/HIDOE <Joanne_Brinich/CENDO/HIDOE@notes.k12.hi.us> ,

Suzanne_Mulcahy/WINDO/HIDOE@notes.k12.hi.us

Hi Amanda,

Please provide me with the doctor order that provides the time for the specific time for this service. Also, what is the health plan?

thanks, Debbie

Amanda Kelly ---07/12/2017 06:07:22 PM---Good Evening Deb, I have a client who has been authorized to receive 40 hours per week of

From: Amanda Kelly <akelly@anuenueaba.com>

To: Deb_T_Farmer/CIB/HIDOE@notes.k12.hi.us, Suzanne_Mulcahy/WINDO/HIDOE@notes.k12.hi.us

Cc: Joanne_Brinich/CENDO/HIDOE <Joanne_Brinich/CENDO/HIDOE@notes.k12.hi.us>

Date: 07/12/2017 06:07 PM

Subject: Health Plan Approval for ABA During School Day

[Quoted text hidden]

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Amanda Kelly <akelly@holdsambeck.com>

Health Plan Approval for ABA During School Day

Amanda Kelly <akelly@holdsambeck.com>

Tue, Jul 18, 2017 at 7:25 AM

To: Deb_Farmer/OCISS/HIDOE@notes.k12.hi.us

Cc: Amanda Kelly <akelly@anuenueaba.com>, Joanne_Brinich/CENDO/HIDOE

<Joanne_Brinich/CENDO/HIDOE@notes.k12.hi.us>, Suzanne_Mulcahy/WINDO/HIDOE@notes.k12.hi.us

Aloha Debbie,

I am able to share that Kaiser and HMSA have issued these approvals and that this matter pertains to many clients, not only the one referenced in my original email (although his needs are the most dense of my existing clients). Curious what you see as next steps. If you would like, we can arrange a meeting with DOE administrators, ABA providers (HABA), health plans, and our legislators. If that is your desire, please send me dates and times you are available to meet. I urge us to move quickly however, as the school year is fast approaching.

Mahalo,

Amanda N. Kelly, PhD, BCBA-D, LBA
Director, Anuenue Behavior Analysts
Cell: (808) 298-2658
Office: (808) 518-4565
Fax: (808) 441-0944
Email: Akelly@anuenueaba.com

On Jul 17, 2017, at 8:26 AM, Deb_Farmer/OCISS/HIDOE@notes.k12.hi.us wrote:

Hi Amanda,

Please provide me with the doctor order that provides the time for the specific time for this service. Also, what is the health plan?

thanks, Debbie

<graycol.gif> Amanda Kelly ---07/12/2017 06:07:22 PM---Good Evening Deb, I have a client who has been authorized to receive 40 hours per week of

From: Amanda Kelly <akelly@anuenueaba.com>
To: Deb_T_Farmer/CIB/HIDOE@notes.k12.hi.us, Suzanne_Mulcahy/WINDO/HIDOE@notes.k12.hi.us
Cc: Joanne_Brinich/CENDO/HIDOE <Joanne_Brinich/CENDO/HIDOE@notes.k12.hi.us>
Date: 07/12/2017 06:07 PM
Subject: Health Plan Approval for ABA During School Day

Good Evening Deb,

I have a client who has been authorized to receive 40 hours per week of applied behavior analysis services through his health insurer. These services have been determined to be medically necessary to ameliorate the client's symptoms associated with his diagnosis of autism. The family and I have spoken with Joanne Brinich, Central District Education Specialist, in addition to the client's IEP team about coordinating these services. When Joanne and I spoke this afternoon, she recommended I reach out to you and Suzanne, as she



Amanda Kelly <akelly@huidasmbc.com>

Health Plan Approval for ABA During School Day

Deb_T_Farmer/OCISS/HIDOE@notes.k12.hi.us

Tue, Jul 18, 2017 at 7:41

<Deb_T_Farmer/OCISS/HIDOE@notes.k12.hi.us>

AM

To: Amanda Kelly <akelly@anuenueaba.com>

Cc: Joanne_Brinich/CENDO/HIDOE <Joanne_Brinich/CENDO/HIDOE@notes.k12.hi.us>,
Suzanne_Mulcahy/WINDO/HIDOE@notes.k12.hi.us

Amanda,

As with all doctor's orders for medical services during the school day, the school receives a copy of those orders for the student record and to be shared with appropriate staff. If you do have the orders, please provide them and we can discuss the issue with the school and the health provider. If there are no orders, then we cannot move forward.

thanks, Debbie

Amanda Kelly ---07/18/2017 07:31:33 AM---Aloha Deb, It appears as though you replied from an email account I cannot respond to:

From: Amanda Kelly <akelly@anuenueaba.com>

To: Deb_T_Farmer/CIB/HIDOE@notes.k12.hi.us

Cc: Amanda Kelly <akelly@anuenueaba.com>, Joanne_Brinich/CENDO/HIDOE <Joanne_Brinich/CENDO/HIDOE@notes.k12.hi.us>,
Suzanne_Mulcahy/WINDO/HIDOE@notes.k12.hi.us

Date: 07/18/2017 07:31 AM

Subject: Re: Health Plan Approval for ABA During School Day

Subject: Re: Health Plan Approval for ABA During School Day

[Quoted text hidden]

This email was scanned by the Cisco IronPort Email Security System contracted by the Hawaii Dept of Education. If you receive suspicious/phish email, forward a copy to spamreport@notes.k12.hi.us. This helps us monitor suspicious/phish email getting thru. You will not receive a response, but rest assured the information received will help to build additional protection. For more info about the filtering service, go to <http://help.k12.hi.us/spam/>



Health Plan Approval for ABA During School Day

Amanda Kelly <akelly@anuenueaba.com>

Tue, Jul 18, 2017 at 8:14 AM

To: Deb_T_Farmer/OCISS/HIDOE@notes.k12.hi.us

Cc: Joanne_Brinich/CENDO/HIDOE <Joanne_Brinich/CENDO/HIDOE@notes.k12.hi.us>,
Suzanne_Mulcahy/WINDO/HIDOE@notes.k12.hi.us

Debbi,

I am not familiar with the process for medical services being provided during the school day. Please call me to discuss, or if possible, email me an outline of the process. This will allow me to streamline supports for impacted families. As some of the information you are requesting is HIPPA protected, I am not able to share what you have requested, without obtaining additional written parental consent. If you want to address this on a case-by-case basis, I can certainly have my clients contact you directly.

Joanne is aware of at least three of the clients (EW, BF, TF) we are discussing, as these have been ongoing needs in Central District. I have petitioned the health plans to cover applied behavior analysis services, across settings, which they have willingly agreed to do, so long as we can prove there is not a duplication of services. Since the DOE does not currently offer fungible services, my requests were approved by the health plans (HMSA, Kaiser, and TRICARE). The next steps, as I see them, are to obtain district approval and assistance in coordinating these services for our families, as part of their medical team.

Mahalo,

Amanda N. Kelly, PhD, BCBA-D, LBA
Director, Anuenue Behavior Analysts
Cell: (808) 298-2658
Office: (808) 518-4565
Fax: (808) 441-0944
Email: Akelly@anuenueaba.com

On Tue, Jul 18, 2017 at 7:41 AM, <Deb_T_Farmer/OCISS/HIDOE@notes.k12.hi.us> wrote:

Amanda,

As with all doctor's orders for medical services during the school day, the school receives a copy of those orders for the student record and to be shared with appropriate staff. If you do have the orders, please provide them and we can discuss the issue with the school and the health provider. If there are no orders, then we cannot move forward.

thanks, Debbie



Amanda Kelly <akelly@holdsambeck.com>

Health Plan Approval for ABA During School Day

Deb_T_Farmer/OCISS/HIDOE@notes.k12.hi.us

Tue, Jul 18, 2017 at 1:24

<Deb_T_Farmer/OCISS/HIDOE@notes.k12.hi.us>

PM

To: Amanda Kelly <akelly@anuenueaba.com>

Cc: Joanne_Brinich/CENDO/HIDOE <Joanne_Brinich/CENDO/HIDOE@notes.k12.hi.us>,
Suzanne_Mulcahy/WINDO/HIDOE@notes.k12.hi.us

Amanda,

Parents should be following the process under IDEA and Chapter 60 with the IEP team, for services requested by the parent. If a parent wants the school to consider a service, documentation needs to be provided, so the IEP team can consider the request.

Consistent with your information that these are HIPPA protected services, DHS has sent out a memo dated May 31, 2017 to Quest health providers, including Kaiser and HMSA. The memo states, "If justification is provided indicating the ABA service is medically necessary and approved by the QI (Hawaii's Quest Integration) health plan, the health plan will be responsible to provide and cover ABA services before or after school and when school is not in session.

thanks, Debbie

Amanda Kelly --07/18/2017 08:17:54 AM---Debbi, I am not familiar with the process for medical services being provided

From: Amanda Kelly <akelly@anuenueaba.com>

To: Deb_T_Farmer/OCISS/HIDOE@notes.k12.hi.us

Cc: Joanne_Brinich/CENDO/HIDOE <Joanne_Brinich/CENDO/HIDOE@notes.k12.hi.us>,
Suzanne_Mulcahy/WINDO/HIDOE@notes.k12.hi.us

Date: 07/18/2017 08:17 AM

Subject: Re: Health Plan Approval for ABA During School Day

[Quoted text hidden]

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Amanda Kelly <akelly@huidssambuck.com>

Health Plan Approval for ABA During School Day

Amanda Kelly <akelly@anuenueaba.com>

Tue, Jul 18, 2017 at 3:25 PM

To: Deb_T_Farmer/OCISS/HIDOE@notes.k12.hi.us

Cc: Joanne_Brinich/CENDO/HIDOE <Joanne_Brinich/CENDO/HIDOE@notes.k12.hi.us>,
Suzanne_Mulcahy/WINDO/HIDOE@notes.k12.hi.us

[REDACTED]

Deb,

You mention parents need to submit information to the IEP team. For the clients I am writing about, that has been done, as noted in my original email. In response, we have been told "district does not allow this". We have met with building based Principals (Jan Iwase, Malaea Wetzel, and Avis Nanbu) as well as the District Education Specialist, Joanne Brinich, who is copied on these email exchanges. Joanne shared that her hands are tied and encouraged me to reach out to you and Suzanne for direction on this matter, which was the impetus for my original email.

Please send me the link or information my clients and your Principals need to move forward with these doctor prescribed, medically-necessary services. I am the referring provider. It is my recommendation for these clients to receive applied behavior analysis across settings, which has been approved for clients I service through TRICARE, HMSA, and Kaiser. To be clear, we are not discussing Quest client services at this time. Therefore, the DHS memo you referenced is not applicable.

I will reiterate my original request. Please tell me what information the Department of Education needs to enable my clients' access to their medically-necessary care during the school day. If you are unable to assist, perhaps Suzanne could weigh in on the matter.

Mahalo,
Amanda

On Jul 18, 2017, at 1:24 PM, Deb_T_Farmer/OCISS/HIDOE@notes.k12.hi.us wrote:

Amanda,

Parents should be following the process under IDEA and Chapter 60 with the IEP team, for services requested by the parent. If a parent wants the school to consider a service, documentation needs to be provided, so the IEP team can consider the request.

Consistent with your information that these are HIPPA protected services, DHS has sent out a memo dated May 31, 2017 to Quest health providers, including Kaiser and HMSA. The memo states, "If justification is provided indicating the ABA service is medically necessary and approved by the QI (Hawaii's Quest Integration) health plan, the health plan will be responsible to provide and cover ABA services before or after school and when school is not in session.

thanks, Debbie

<graycol.gif> Amanda Kelly ---07/18/2017 08:17:54 AM---Debbi, I am not familiar with the process for medical services being provided

From: Amanda Kelly <akelly@anuenueaba.com>

To: Deb_T_Farmer/OCISS/HIDOE@notes.k12.hi.us

Cc: Joanne_Brinich/CENDO/HIDOE <Joanne_Brinich/CENDO/HIDOE@notes.k12.hi.us>,
Suzanne_Mulcahy/WINDO/HIDOE@notes.k12.hi.us

Date: 07/18/2017 08:17 AM

Subject: Re: Health Plan Approval for ABA During School Day



Amanda Kelly <akelly@haldsambek.com>

Health Plan Approval for ABA During School Day

Deb_T_Farmer/OCISS/HIDOE@notes.k12.hi.us
<Deb_T_Farmer/OCISS/HIDOE@notes.k12.hi.us>

Wed, Jul 19, 2017 at 7:44 AM

To: Amanda Kelly <akelly@anuenueaba.com>
Cc: Joanne_Brinich/CENDO/HIDOE <Joanne_Brinich/CENDO/HIDOE@notes.k12.hi.us>, Suzanne_Mulcahy/WINDO/HIDOE@notes.k12.hi.us

Amanda,

I realize I have not been clear, please let me clarify. The medical service I referenced was skilled nursing, which is delivered on a school campus. Although this service is medical, parents do not pay for this service through their health insurance, rather this service is funded by DOE during the school day on a school campus. Skilled nursing is a related service under IDEA/Chapter 60, it is documented in the IEP. Skilled nursing on a school campus is considered an educational service protected under FERPA, not HIPPA.

The relevance of the DHS memo, is the unlikely position that both Kaiser and HMSA will treat their members differently based on their income status. I doubt that both health providers would discriminate between Quest and non-Quest members. However, I will verify the position of both health plans, Kaiser and HMSA, to be sure.

The Department's position is that only educational services are delivered within the school day. Those services that are medically necessary, such as skilled nursing, are delivered during the school day on a school campus at DOE expense, documented in the IEP and considered educational services.

Since the services you mentioned are protected by HIPPA and are paid through the parent's health plan, these are not educational services and are not be delivered during the school day on a school campus. The DOE has a specific mission to educate school age children/youth and our schools take this mission seriously.

thanks, Debbie

Amanda Kelly ---07/18/2017 03:26:57 PM---Deb, You mention parents need to submit information to the IEP team. For the clients I am writing ab

From: Amanda Kelly <akelly@anuenueaba.com>
To: Deb_T_Farmer/OCISS/HIDOE@notes.k12.hi.us
Cc: Joanne_Brinich/CENDO/HIDOE <Joanne_Brinich/CENDO/HIDOE@notes.k12.hi.us>, Suzanne_Mulcahy/WINDO/HIDOE@notes.k12.hi.us
Date: 07/18/2017 03:26 PM

[Quoted text hidden]

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Health Plan Approval for ABA During School Day

Amanda Kelly <akelly@anuenueaba.com>

Thu, Jul 20, 2017 at 9:51 AM

To: Deb_T_Farmer/OCISS/HIDOE@notes.k12.hi.us, Suzanne_Mulcahy/WINDO/HIDOE@notes.k12.hi.us

Cc: Joanne_Brinich/CENDO/HIDOE <Joanne_Brinich/CENDO/HIDOE@notes.k12.hi.us>

Debbie,

Thank you for this additional information. While this conversation was initially about access to medically-necessary applied behavior analysis services, one reason health plans are approving school-day requests are because clients are not receiving fungible services from the Department of Education (DOE). For my clients specifically, they have been denied access to applied behavior analysis services from licensed providers in their current DOE placements, which is a violation of state law (Chapter 465-D), as well as IDEA, for failing to provide students a free and appropriate public education (Endrew F. v. Douglas County School District, October 2016).

Over the past two decades, the nation has seen numerous insurance (46 states) and licensure laws (28 states) passed, which have improved educational and medical services for individuals with autism and related disorders, through access to applied behavior analysis. As someone who knows the value of applied behavior analysis; an evidence-based, scientific problem-solving approach, I have dedicated my career to increasing consumer access to services, both locally and at the national level.

It is disheartening and discouraging to experience such resistance and an unwillingness to collaborate from you, on behalf of the Hawai'i Department of Education. The Department's current position on applied behavior analysis appears to be in direct conflict with its own mission to educate our keiki:

"To serve our community by developing the academic achievement, character and social-emotional well-being of our students to the fullest potential. We work with partners, families and communities to ensure that all students reach their aspirations, from early learning through college, career and citizenship."

In order to advance these discussions and identify solutions, I would like to share the Department's official position with the health plans and providers, my clients, your principals, and our legislators. Will the Department be issuing an updated memo on these matters?

Amanda N. Kelly, PhD, BCBA-D, LBA
Director, Anuenue Behavior Analysts
Cell: (808) 298-2658
Office: (808) 518-4565
Fax: (808) 441-0944

On Wed, Jul 19, 2017 at 7:44 AM, <Deb_T_Farmer/OCISS/HIDOE@notes.k12.hi.us> wrote:

Amanda,

I realize I have not been clear, please let me clarify. The medical service I referenced was skilled nursing, which is delivered on a school campus. Although this service is medical, parents do not pay for this service through their health insurance, rather this service is funded by DOE during the school day on a school campus. Skilled nursing is a related service under IDEA/Chapter 60, it is documented in the IEP. Skilled nursing on a school campus is considered an educational service protected under FERPA, not HIPPA.

The relevance of the DHS memo, is the unlikely position that both Kaiser and HMSA will treat their members differently based on their income status. I doubt that both health providers would discriminate between Quest and non-Quest members. However, I will verify the position of both health plans, Kaiser and HMSA, to be sure.



The Senate

STATE CAPITOL
HONOLULU, HAWAII 96813

SENATOR DONOVAN M. DELA CRUZ

August 3, 2017

Dr. Christina Kishimoto
Superintendent
Department of Education
P.O. Box 2360
Honolulu, HI 96804

Aloha Superintendent Kishimoto:

My office received a concern from Ms. _____, who is the mother of _____, a preschool student at _____ Elementary School. _____ a four-year-old diagnosed with autism and _____ Syndrome as well as other health conditions. Ms. _____ provided the following information regarding her son's case.

During the 2015 legislative session, the Legislature passed, and the Governor signed, Act 199, Session Laws of Hawaii 2015, which requires the licensing of behavior analysts for the practice of applied behavior analysis (ABA). The "Practice of Behavior Analysis" means the design, implementation, and evaluation of instructional and environmental modifications to produce socially significant improvements in human behavior. Practice of behavior analysis includes the empirical identification of functional relations between behavior and environmental factors, known as **functional assessment and analysis**. Practice of behavior analysis also includes the use of contextual factors, motivating operations, antecedent stimuli, positive reinforcement, and other consequences to help people develop new behaviors, increase or decrease existing behaviors, and emit behaviors under specific environmental conditions

According to Ms. _____, _____ has an Individualized Education Program, which she believes should not be utilized because his functional behavior assessment was not conducted by a licensed behavior analyst (LBA). Mr. Daniel Cordial, who is a Department of Education behavior health specialist, conducted _____ functional behavior assessment (FBA).

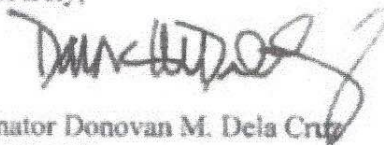
Dr. Kishimoto
August 3, 2017
Page 2

informed that [redacted] has been approved by his health plan to receive 40 hours of ABA services each week. He has been receiving ABA services, overseen by Dr. Amanda N. Kelly (LBA) and her team, for just over a month. Encouraged by her son's progress, [redacted] approached her healthcare provider and received confirmation that her plan will cover ABA services during school hours, so the next step would be to obtain district approval and assistance in coordinating these services, which are critical to [redacted] behavioral, academic, and social-emotional development.

Further, [redacted] refers to state (Chapter 465-D) and federal laws (I.D.E.A), in requesting that the department consider hiring a LBA to conduct a new FBA for [redacted]. She feels that services currently provided to [redacted] may not accurately reflect his most critical needs due to his behavior support plan (BSP) being developed by Mr. Cordial, who is unlicensed, and therefore, she believes is not qualified to conduct this assessment.

I would appreciate a response by Friday, August 18. Should you have any questions please feel free to contact my office.

Sincerely,



Senator Donovan M. Dela Cruz
District 22



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

OFFICE OF THE SUPERINTENDENT

October 2, 2017

The Honorable Donovan M. Dela Cruz
Senator, Twenty-Second District
415 S. Beretania Street, Room 208
Honolulu, HI 96813

Dear Senator Dela Cruz:

This letter is in response to your letter dated August 3, 2017 regarding the services being provided to Ms. [REDACTED] son, [REDACTED], at [REDACTED] Elementary School.

Acts 199 (2015) and 107 (2016), Session Laws of Hawaii, codified as Chapter 465D, Hawaii Revised Statutes, established the requirement of statewide professional standards for the licensing of behavior analysts. Although the intent of this legislation was to ensure qualified personnel in the provision of healthcare for children with autism, it directly impacts the Hawaii State Department of Education's (HIDOE) charge in the provision of educational services to all students.

HRS Chapter 465D-7 allows for the following exemptions: "(a) This chapter is not intended to restrict the practice of other licensed or credentialed practitioners practicing within their own recognized scopes of practice and shall not apply to: (1) an individual working within the scope of practice or duties of another licensed profession that overlaps with the practice of behavior analysis; provided that the person does not purport to be a behavior analyst..."

The HIDOE currently recognizes the following licensed or credentialed professionals, whose practice commonly overlaps with behavior analysis, as exempt from the licensed behavior analyst requirement.

- General Education Teachers
- Special Education Teachers
- Resource Teachers
- School Psychologists
- Clinical Psychologists
- Behavior Health Specialists
- Counselors
- Related service providers (i.e., Speech Language Pathologist, Occupational Therapist, Physical Therapist, etc.)
- Social Worker

AN AFFIRMATIVE ACTION AND EQUAL OPPORTUNITY EMPLOYER

The Honorable Donovan M. Dela Cruz

October 2, 2017

Page 2

The HIDEO is required to comply with the Individuals with Disabilities Education Act (IDEA) and Hawaii Administrative Rules Chapter 8-60; and therefore, must ensure that each student's Individualized Education Program (IEP) is developed by the IEP team and designed to maximize the child's access to and progress in the general education curriculum. Any parent(s)/legal guardian(s) requesting Applied Behavior Analysis (ABA) services through a healthcare provider during the school day may bring the healthcare plan to the IEP team for consideration. It is the IEP team's responsibility to review the healthcare plan and its educational relevance and benefit to the student regarding accessing and progressing in the general education curriculum. Any recommendations and/or services from the healthcare plan determined to be educationally relevant and included in the child's IEP will be provided by the HIDEO.

If a parent(s)/legal guardian(s) disagrees with the school on the program developed by the IEP team, there are procedural safeguards in place. They may:

- Request a mediator to help negotiate or resolve the disagreement;
- File a complaint with the HIDEO Complaints Management Program for review; or
- File for a due process hearing where a hearing officer, after reviewing evidence and hearing testimony, will render a decision with appropriate resolutions.

Should you have any questions, please contact Ms. Annie Kalama, Administrator, Special Needs Section, at (808) 305-9806 or via email at annie_kalama@notes.k12.hi.us.

Sincerely,



Dr. Christina Kishimoto
Superintendent

CMK:ak

c: Governor's Office, Chief of Staff
Governor's Education Policy Analyst
Department of Budget and Finance
Office of Curriculum, Instruction and Student Support

(10/18/2017) Transcription of recorded meeting held for DOE elementary special education teachers. More information is available at the request of our legislators. Please contact Dr. Kelly at (808) 298-2658.

EDUCATION DIVISION (AG): ...if you guys all agree that ABA methodology, you know was the appropriate methodology to be applied in the classroom, for this student, then you need to specify it. I'm not telling you don't do that, that's what your judgment is, that's fine, but be careful. That 9th circuit case doesn't say just cause someone says, "Oh, we need ABA methodology" —and that is an issue that crops up from time to time. Some of you might be aware that there's a particular advocate, for ABA services, named Amanda Kelly and she's pushing an agenda against the DOE —in different areas, but one of those is pushing ABA services to be provided by a BCBA, behavior analyst, in the classroom. I don't know if that means supplanting the teaching or as a supplementary service, because that part is not clear to me. The 9th circuit case is not clear to me what they meant by ABA methodology. Is it teaching? Or, if they meant behavioral services as a supplementary service. That is one of the areas we are exploring as an education division, because that part of the decision isn't that clear. It doesn't give the guidance to the DOE, how do we use this case, like in some of these other areas, like ABA methodology. Right now the advice that I'm giving you who have this issue, in any case where we have this issue, I tell them "we're not going to, you know (inaudible) when it comes to ABA methodology, we're not putting it on the IEP". However, if you as the IEP team believe it is an appropriate teaching methodology and you want to cite that, then fine. But that's different from than "Oh we also need ABA/behavioral services in this classroom, by a BCBA".

AUDIENCE: "So, if you were to use the words, ABA methodology, doesn't that term, that term like, you would have to be certified, right? In order to use that terminology or no?"

EDUCATION DIVISION (AG): Okay, um that's another little area. Are you guys aware of the licensing law that the DOE is facing? Chapter HRS 465-D.

AUDIENCE: No, I mean I know that...

EDUCATION DIVISION (AG): Okay, they refer to something called licensure for a behavioral analysis. Uh, there is a part, and it's not part of I.D.E.A., there is a sub-part in Hawaii Chapter, statutory law, licensing of behavioral analysis or analysts. Okay? That's related to something else, which has to do with insurance reimbursement for ABA service providers. But growing out of that, there's a change in the licensing laws for the state. The licensing laws for the state have a section on licensing of behavioral analysis. And in that law, —all you need to know is that all of you licensed teachers are exempt from those licensing issues. So, for instance, some teachers are aware of this, others are not. And I was taught this by a BCBA, a mom, that as part of your teaching, you use ABA methodologies. You may not recognize it as specific ABA methodology, but you use ABA methodologies. Now this person told

me that not all of our teachers know that expressly. Understand that they do. Okay, anyway that licensing requirement has an exemption for people like licensed teachers. People in your profession that might use behavioral services, that touch on ABA, they're not prohibited from using techniques, which some like ABA methodology. All I am telling you is that at an IEP meeting, if you use the buzz words, they need to have ABA methodology, blah, blah, blah, trust me, someone will make a claim, okay we need an IEP and then that will lead to another claim, which is now we would also like ABA behavioral services, implemented by a BCBA. I mean look, if that's what the team agrees is necessary then that's fine. But I just want you to be aware of it. If that's not what you meant, be weary of talking about it.

You have stuff that you do in your ordinary teaching that is, that someone could say is ABA methodology. But you don't have to say; you don't have to make excuses for that. You don't have to say, well okay, you can do it. All I can say is you can do it. Licensing laws clearly have an exemption for you. The problem for the DOE and it doesn't touch on any of you guys, the problem for the DOE is, it does not apply to the kind of people that you get help from in the district. You have like these BHS's, the ones I've run into are not licensed teachers, they could be licensed in other areas, like counseling. They are not licensed teachers and they are not licensed by that national board that licenses behavior analysts. Okay, the BACB. So they are not Board Certified technicians, under the BACB. They are DOE trained professionals that provide assistance for autistic kids. Uh, and that's a discussion that I think we should have with the state's SPED office. I'll work with them to work that out. Because that is a potential problem area, but that's nothing for you guys to worry about right now. This is a problem area. But for you teachers, this is a non-issue. Just do what you always have done. Okay? All I'm saying is listen. Momi [Patricia Robbins-Makaila, Autism Consulting Teacher] has touched on a point in that 9th circuit case that talked about ABA methodologies and all I'm telling you is unlike transition services that discussion by that court on ABA methodology is not as clear.

Cc: meilyee.cheng@hawaii.gov >

Response to Governor David Ige Email

Today at 12:33 PM

Dear Ms. Hoohuli-Rosa:

This is in response to your email dated October 10, 2017 to Governor David Ige regarding Applied Behavior Analysis (ABA) services.

The Hawaii State Department of Education (HIDOE) is required to comply with the Individuals with Disabilities Education Act (IDEA) and Hawaii Administrative Rules Chapter 8-60 in order to identify, evaluate, and educate individuals with disabilities. The goal of the IDEA is to provide students with a disability a free appropriate public education through individualized and specialized education and related services. Parent(s)/legal guardian(s) requesting to receive Applied Behavior Analysis (ABA) services through a healthcare provider during the school day should bring the treatment plan to the Individualized Education Program (IEP) team for review and consideration. It is the IEP team's responsibility to review the treatment plan and determine whether it is educationally relevant. The IEP team will then determine whether and to what extent autism specific methodologies including ABA are to be provided to student; any recommendations and/or services included in the student's IEP will be provided by the HIDOE.

As you may be aware, healthcare providers such as HMSA will pay for medically necessary ABA "therapy" pursuant to a treatment plan developed outside of the IEP process. The treatment team does not decide whether a student requires ABA services for educational purposes which is a decision reserved for the IEP team. In other words,

medically necessary ABA “therapy” pursuant to a treatment plan developed outside of the IEP process. The treatment team does not decide whether a student requires ABA services for educational purposes which is a decision reserved for the IEP team. In other words, it is the IEP team’s responsibility to determine whether a particular student requires a specific methodology (e.g., ABA) in order to make progress on his/her IEP goals and objectives. In addition, the HIDOE is not required to implement a student’s medically-related treatment plan. It is a HIDOE policy not to allow private providers on campus as it would interfere with the school’s obligation to implement a student’s IEP and to provide special education and related services under the IDEA. Be assured, however, that the HIDOE does currently employ a number of licensed Behavior Analysts and Board Certified Behavior Analyst candidates and continues its efforts to train and hire additional personnel with these qualifications.

If a parent(s)/legal guardian(s) disagrees with the school on the program developed by the IEP team, there are procedural safeguards in place. They may:

- Ø Request a mediator to help negotiate or resolve the disagreement;
- Ø File a complaint with the HIDOE Complaints Management Program for review; or
- Ø File for a due process hearing where a hearing officer, after reviewing evidence and hearing testimony, will render a decision with appropriate resolutions.

Should you have any questions, contact Ms. Annie Kalama, Educational Specialist, Special Needs Section, at (808) 305-9806 or via email at annie_kalama@notes.k12.hi.us.

c: Governor’s Office

11/7/2017

To the Hawai'i Board of Education:

My name is Dr. Amanda N. Kelly. I am writing to express concerns regarding Superintendent Kishimoto's position on hiring and collaborating with licensed behavior analysts (LBAs) for our keiki who require applied behavior analysis (ABA) in the school setting. In 2015, Governor David Ige signed autism insurance "Luke's Law" into law. That same year, he also signed licensure for behavior analysts into law (Chapter 465-D). In 2016, the Department of Education (DOE) contested the Behavior Analyst Licensure law, seeking an exemption. Many families and teachers advocated for maintaining the licensure requirements within DOE public school settings. Our legislators agreed, offering only a temporary reprieve for the requirement of direct support workers to become Registered Behavior Technicians (RBT) until 1/1/2019. The expectation and requirement for licensed behavior analysts was upheld and effective as of 7/1/2016. In 2017, licensed psychologists challenged our law stating they were being pushed out of their right to practice applied behavior analysis (ABA). Our legislators agreed mechanisms exist for those who have behavior analysis in their scope of training and practice. They did not adjust the language of the licensure law during the 2017 session.

This summer, (July 2017) I received authorizations from several commercial health plans who offered to fund applied behavior analysis (ABA) services on DOE school campuses. Denial of this coverage is actually a violation of the mental health parity law. Unfortunately, when I reached out to the Department of Education's administrators, Debra Farmer and Suzanne Mulcahy, I received a less than satisfactory response. Simply put, Debra Farmer stated that insurer-funded ABA cannot occur on a school campus. In reply, I noted:

"While this conversation was initially about access to medically-necessary applied behavior analysis services, one reason health plans are approving school-day requests are because clients are not receiving fungible services from the Department of Education (DOE). For my clients specifically, they have been denied access to applied behavior analysis services from licensed providers in their current DOE placements, which is a violation of state law (Chapter 465-D), as well as IDEA, for failing to provide students a free and appropriate public education (Andrew F. v. Douglas County School District, October 2016).

It is disheartening and discouraging to experience such resistance and an unwillingness to collaborate from you, on behalf of the Hawai'i Department of Education. The Department's current position on applied behavior analysis appears to be in direct conflict with its own mission to educate our keiki: "To serve our community by developing the academic achievement, character and social-emotional well-being of our students to the fullest potential. We work with partners, families and communities to ensure that all students reach their aspirations, from early learning through college, career and citizenship."

In order to advance these discussions and identify solutions, I would like to share the Department's official position with the health plans and providers, my clients, your principals, and our legislators. Will the Department be issuing an updated memo on these matters?"

No additional response was received on behalf of the Hawai'i Department of Education.

On August 3, Senator Donovan DeLa-Cruz issued a letter to Superintendent Kishimoto explaining his concerns with the apparent legal violations of the Department of Education for refusing children access to licensed behavior analysts (LBAs) and applied behavior analysis (ABA) on school campuses during the school day. He did not receive a reply for 2 months. Representative Beth Fukumoto also issued a letter to Superintendent Kishimoto on behalf of the same family. I am unsure if Representative Fukumoto ever received a reply.

On September 12, Dr. Kishimoto held a community meeting in Wahiawa on O'ahu. At that meeting several families and teachers spoke to Dr. Kishimoto about their concerns regarding lack of ABA services and licensed providers in the school settings. Dr. Kishimoto appeared to listen to concerns and asked families for their contact information. When the emails between myself and Debra Farmer were mentioned, Dr. Kishimoto said she had not seen these emails and was "interested in learning more".

On September 18, Dr. Kishimoto held a community meeting in Kona on the island of Hawai'i. I had printed a copy of the email exchanges between me and Debra Farmer (with Suzanne Mulcahy copied) to provide to the Superintendent at this meeting. Instead, Dr. Kishimoto was on my flight from O'ahu. So, when we landed, I handed Dr. Kishimoto the emails. I did not mention these emails at the meeting. However, Dr. Kishimoto was asked questions about how students could gain access to ABA and licensed providers during the school day. She responded by saying "I do not have the data in front of me". When asked her plan for bringing the DOE into compliance, Dr. Kishimoto quipped, now that it's litigious, the lawyers will have to figure it out. When asked how families and community members could go about getting ahold of Dr. Kishimoto, she stated, "If you wanted someone who sits at their desk, then you did not need a superintendent, you needed a secretary". When a parent asked, "Does the DOE currently have any licensed or credentialed behavior analysts, Dr. Kishimoto snapped and replied by saying, "I will not be cornered by you at a community meeting". This is alarming, upsetting, and disrespectful, but my concerns do not end here.

In a letter dated, October 2, 2017, Dr. Kishimoto issued a response to Senator Dela-Cruz. In her letter, the Superintendent states: "The Hawaii DOE currently recognizes the following licensed or credentialed professionals, whose practice commonly overlaps with behavior analysis, as exempt from the behavior analyst licensure law"

- general education teachers
- special education teachers
- resource teachers
- school psychologists
- clinical psychologists
- behavior health specialist
- counselors
- related service providers (e.g., Speech Pathologist, Occupational Therapist, Physical therapist, etc.)
- social worker

The actions of the superintendent and the letter she wrote, conveys an arrogance, as she feels (or has been lead to believe) that she's identified a loophole in our state licensure law. Instead, Dr. Kishimoto has publicly acknowledged several federal violations being committed by the Hawai'i DOE (e.g., FAPE, IDEA, and ADA). A class-action lawsuit is now being drafted and a federal case is going to be brought against the Hawaii Department of Education, Dr. Kishimoto, Debra Farmer, Suzanne Mulcahy, and the Hawai'i Board of Education. Lawsuits are no news to Dr. Kishimoto, as evidenced by this 2016 case in the Gilbert Public School District in Arizona.

Now, more than ever, is the time to unite and work together, rather than spend our energies working against one another. I am available to brainstorm solutions. I am here to help. This has been my missive all along. I invite you to learn more about me. I look forward to learning more about each of you and discovering how we can all work together #fourkeiki.

Mahalo,

Amanda N. Kelly, PhD, BCBA-D, LBA
For Our Keiki | <http://fourkeiki.webs.com>
(808) 298-2658 | fourkeiki@gmail.com




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

OFFICE OF THE SUPERINTENDENT

November 28, 2017

TO: Deputy Superintendent, Complex Area Superintendents, Principals (All), Public Charter School Directors (All), District Educational Specialists, Student Services Coordinators, Special Education Teachers, and School Based Behavioral Health and Autism Personnel

FROM: Christina M. Kishimoto
Superintendent 

SUBJECT: **Functional Behavior Assessment/Behavior Support Plan Signature Page Procedures**

The Functional Behavior Assessment (FBA) is an assessment designed to identify the function or cause of serious behavior problems. It requires the collection and analysis of both student as well as environmental data and is a process that may occur over a period of time. Once completed, the results are utilized by the team for that individual student, i.e. Individualized Education Plan (IEP) Team, 504 Team, Student Support Team, or Student Intervention Team, etc, to identify targeted interventions that comprise the Behavior Support Plan (BSP).

The process of conducting a FBA or/and developing and implementing a BSP is a team effort. It is imperative that individuals who are knowledgeable of the student (including the parent) and professionals who are knowledgeable about behavior change make up the team.

To ensure fidelity of this team process, please include the attached FBA and BSP signature page to your FBA and BSP reports. Be sure to include all team members' names, signatures, titles, and active professional licensure. Applicable professional licensure may be held from the Hawaii Teacher Standards Board for teachers and school counselors; Hawaii Department of Commerce and Consumer Affairs for Mental Health Counselors, Social Workers, Clinical Psychologists, Marriage and Family Therapists, and Behavior Analysts; National School Psychologist Association for School Psychologists; or related professional licensure granted from other states or national boards.

Should you have any questions, please contact Dr. Wing Kan Hui, Educational Specialist, Student Support Section, at (808) 305-9787 or via email at wing_kan_hui@notes.k12.hi.us.

CMK:ar

Attachment

c: Assistant Superintendents
Superintendent's Office Directors
State Public Charter School Commission
Office of Curriculum, Instruction and Student Support

AN AFFIRMATIVE ACTION AND EQUAL OPPORTUNITY EMPLOYER



STATE OF HAWAII
DEPARTMENT OF EDUCATION

Functional Behavior Assessment (FBA)/Behavior Support Plan (BSP)
Signature Page
Current School Year 20__/20__

Student Name: _____ Date of Birth: _____ Grade: _____ Eligibility: _____

School: _____ School ID: _____ Date of Report: _____

Team Members: Record names, signatures and licensure status of all individuals who contributed and shared responsibility for gathering and reviewing FBA/BSP data.

- FBA
- BSP

Name:	Position/Title	Signature	*License Type	License #

Applicable professional licensure may be held from the Hawaii Teacher Standards Board for teachers and school counselors; Hawaii Department of Commerce and Consumer Affairs for Mental Health Counselors, Social Workers, Clinical Psychologists, Marriage and Family Therapists, and Behavior Analysts; National School Psychologist Association for School Psychologists; or related professional licensure granted from other states or national boards.

December 4, 2017 (revised letter)

Original letter sent: 12/1/2017

██████████
On Tuesday, November 28, 2017, I met with Dr. Amanda N. Kelly, BCBA-D, LBA and Ms. ██████████, BCBA, LBA to address ethical concerns Dr. Kelly had regarding my actions as a State of Hawaii, Department of Education (DOE), Autism Consulting Teacher (ACT) who is pursuing certification towards becoming a behavior analyst.

Dr. Kelly brought to my attention, and the attention of my supervisor, actions that I engaged in, which led her to be concerned. She described situations in which I failed to advocate for appropriate steps to be followed when supporting teams with behavior assessments. Dr. Kelly shared she was specifically concerned that I had:

1. Allowed or encouraged others to change assessment dates on Functional Behavior Assessments (FBAs) and Behavior Support Plans (BSP), without first having an updated assessment conducted (BACB 1.04, 2.03, 2.05, 2.09, 3.01, 4.07)
2. Allowed or encouraged others to complete Functional Behavior Assessments, without first obtaining appropriate parental consents (BACB 1.04, 2.03, 2.05, 2.09, 4.04, 4.05)
3. Allowed or encouraged others to complete FBAs and develop BSPs, without advocating for Licensed Behavior Analysts to be team members, as outlined in Hawai'i Behavior Analyst Licensure Law, Chapter 465-D (BACB 1.04, 2.03, 2.05, 2.09, 3.01, 4.07)

The following are areas of the Behavior Analyst Certification Code (BACB), Professional and Ethical Compliance Codes, which were brought to my attention by Dr. Amanda N. Kelly:

1.04 Integrity. (a) Behavior analysts are truthful and honest and arrange the environment to promote truthful and honest behavior in others. (b) Behavior analysts do not implement contingencies that would cause others to engage in fraudulent, illegal, or unethical conduct. (e) If behavior analysts' ethical responsibilities conflict with law or any policy of an organization with which they are affiliated, behavior analysts make known their commitment to this Code and take steps to resolve the conflict in a responsible manner in accordance with law. (BACB 2014, rev. 2016 p.4)

2.03 Consultation. (a) Behavior analysts arrange for appropriate consultations and referrals based principally on the best interests of their clients, with appropriate consent, and subject to other relevant considerations, including applicable law and contractual obligations. (BACB 2014, rev. 2016 p.6)

2.05 Rights and Prerogatives of Clients. (a) The rights of the client are paramount and behavior analysts support clients' legal rights and prerogatives. (BACB 2014, rev. 2016 pp. 7-8)

2.09 Treatment/Intervention Efficacy. (a) Clients have a right to effective treatment (i.e., based on the research literature and adapted to the individual client). Behavior analysts always have the obligation to advocate for and educate the client about scientifically supported, most-effective treatment procedures. Effective treatment procedures have been validated as having both long-term and short-term benefits to clients and society. (BACB 2014, rev. 2016 pp. 8-9)

3.01 Behavior-Analytic Assessment. (a) Behavior analysts conduct current assessments prior to making recommendations or developing behavior-change programs. The type of assessment used is determined by client's needs and consent, environmental parameters, and other contextual variables. When behavior analysts are developing a behavior-reduction program, they must first conduct a functional assessment. (b) Behavior analysts have an obligation to collect and graphically display data, using behavior-analytic conventions, in a manner that allows for decisions and recommendations for behavior-change program development. (BACB 2014, rev. 2016 p.11)

4.04 Approving Behavior-Change Programs. Behavior analysts must obtain the client's written approval of the behavior-change program before implementation or making significant modifications (e.g., change in goals, use of new procedures). (BACB 2014, rev. 2016 p.12)

4.05 Describing Behavior-Change Program Objectives. Behavior analysts describe, in writing, the objectives of the behavior-change program to the client before attempting to implement the program. To the extent possible, a risk-benefit analysis should be conducted on the procedures to be implemented to reach the objective. The description of program objectives and the means by which they will be accomplished is an ongoing process throughout the duration of the client-practitioner relationship. (BACB 2014, rev. 2016 p.12)

4.07 Environmental Conditions that Interfere with Implementation. (a) If environmental conditions prevent implementation of a behavior-change program, behavior analysts recommend that other professional assistance (e.g., assessment, consultation or therapeutic intervention by other professionals) be sought. (b) If environmental conditions hinder implementation of the behavior-change program, behavior analysts seek to eliminate the environmental constraints, or identify in writing the obstacles to doing so. (BACB 2014, rev. 2016 p.12).

Per our conversation with Dr. Kelly she emphasized that I am required to hold myself accountable to the BACB Professional and Ethical Compliance Codes. Moving forward, to ensure that I am adhering with the BACB Professional and Ethical Compliance Code I have committed to taking the following actions:

1. Whenever functional behavior assessments or behavior plans are discussed, I will inform others of their rights and the rights of our students, as understood in Chapter 465-D (BACB 1.04, 2.05, 2.09)

2. Whenever assessments are to be conducted by teams, which I am a member of, appropriate written consents will be obtained from parents and/or legal guardians (BACB 2.03, 2.05, 2.09, 3.01, 4.04)
3. To reconcile any errors I may have made, I will be requesting to reconvene the teams, in which I have been involved, where the FBA and/or BSP were conducted without appropriate provisions. I will request to have my responsibility and roles on these teams to be actively supervised by Ms. [REDACTED] (BCBA, LBA) (BACB, 1.04, 4.05)
4. When there are inaccuracies or actions which I feel are in direct violation with local and federal laws, I will voice my concerns to my employer, in writing (BACB 4.07). In addition, I will work in collaboration with my DOE supervising employer and Ms. [REDACTED], my supervising behavior analyst, to identify a solution to these barriers that satisfies all parties.

I remain committed to my role as an Autism Consulting Teacher with the DOE and I appreciate your support of my efforts to become a behavior analyst. If you have any questions or concerns regarding this letter of clarification, please do not hesitate to let me know. My supervising behavior analyst, Ms. [REDACTED], and me would be more than happy to meet with you at your earliest convenience.

Sincerely,

[REDACTED]

Cc:

[REDACTED], BCBA, LBA
Amanda N. Kelly, PhD, BCBA-D, LBA



**KAISER
PERMANENTE.**

[REDACTED]

12/27/2017

[REDACTED]

[REDACTED]

[REDACTED]

Pt has services with BAYADA. Unfortunately per your DOE rules, the therapist is not allowed in the CLASSROOM. I think this would be the BEST place for the therapist to help [REDACTED] for his continued escalations and behavioral issues. It is difficult for the BAYADA therapist to work with the pt. in a community setting after school. The mom and mom's other children have to be there for the up to 15 hours of the time [REDACTED] has services for. The siblings can be distracting, of course, for [REDACTED]. As a result, IF BAYADA therapist can not be in the classroom (the class BAYADA aide would be the most preferable option for all concerned) it is important that [REDACTED] leave at NOON to get his services and to have a medical absence from NOON onward for his public school.

Sincerely,

WALKO, EILEEN B (M.D.)

HILO CLINIC
PEDIATRICS
1292 Waiianuenue Avenue
Hilo HI 96720
Dept Phone: 808-934-4000
kaiserpermanente.org

1/18/2018

Good Afternoon,

Unfortunately, I am unable to attend today's Board of Education meeting in person. Please accept this letter as my written testimony in place of presenting live.

Since September 2017, I have spoken to the Hawai'i Board of Education about my concerns as an advocate for families and providers in the state, specifically recipients and providers of Applied Behavior Analysis (ABA) services. For months, families have testified and shared their stories, as have teachers, siblings, and self-advocates. Although we have asked questions several times (e.g., "How many licensed behavior analysts are employed by the DOE"), we have not received any direct answers to our questions. Rather, we receive retaliatory responses for our advocacy efforts, specifically the cancelling of contracts, or denial of services for students themselves as a result of actions and statements made by Ms. Debra Farmer, DOE Special Education Administrator. As a result of inadequate action and lack of meaningful support, the community is moving forward and a class-action lawsuit will be brought against the state, as originally stated in my testimony on 11/7/2017.

The last time the HIBOE met, 12/5/2017 I asked several questions:

- How many licensed behavior analysts do you have on staff,
- How many are working in the capacity of an LBA,
- How many students have ABA written on their IEPs, and
- What dissemination efforts were taken to inform IEP teams and families about these available services

On January 5, 2018, the Hawai'i Department of Education released a legislative report titled: "Report on Behavior Analyst and Certification Requirements Implementation". This report speaks to some of the questions that I have asked in the past. However, the document also contains information that is incorrect and misleading. I have selected just a few of these errors to bring to your attention today.

DOE Statement: "...the recognized scope of practice of teachers and other professionals overlap with the practice of behavior analysis. Licensed teachers and other licensed educational professionals are exempt per HRS 465-7(a)(1)."

REPLY: Teachers are not licensed by the Department of Commerce and Consumer Protection (DCCA), which means they are not regulated by RICO (Regulated Industries Complaints Office). As stated in Chapter 465-D, a teacher "directly implements intervention or assessment plans under supervision *and does not* design intervention or assessment plans."

DOE Statement: There are approximately 1,000 ASD students who require intensive instruction, as indicated by the need for one-to-one support. These students may require ABA as an IEP service provided by an LBA and Registered Behavior Technician (RBT).

REPLY: The DOE website lists 1,820 students who have qualified for an IEP under a classification of autism.

- How many of these students have been recommended Applied Behavior Analysis (ABA)?
- How many of these students have ABA included in their Individualized Educational Programs (IEP)?
- How many of these students have a Licensed Behavior Analyst (LBA) as a member of their IEP team?
- How many of these students have a Registered Behavior Technician (RBT) as a member of their IEP team?
- How many students without an autism diagnosis have a Behavior Support Plan (BSP) as part of the IEP programming? Of those students, how many have a Licensed Behavior Analyst as a member of their IEP team?

DOE Statement: "Increased HIDEOE LBA and RBT personnel- The HIDEOE employs 154 RBTs (credentialed and in training) and 54 LBAs (licensed and in training).

REPLY: The purpose of the behavior analyst licensure law was to increase consumer protection by creating an easily recognizable license that allows a person to practice behavior analysis. While students of behavior analysis are allowed to practice (under the supervision of a licensed behavior analyst), they may not "purport to be a behavior analyst" per HRS 465-7(a)(1)."

HIDEOE BACB Credentialed Personnel				
District/ Complex Area	# of LBAs	# of LBA Candidates	# of RBTs	# of RBT Candidates
Honolulu District	1	0	0	10
Central District	1	4	1	21
Leeward District	0	15	0	44
Windward District	4	8	5	29
Hawaii District	0	4	0	30
Maui District	5	7	2	3
Kauai District	1	0	0	5
STATE	3	1	1	3
Total	15	39	9	145

Looking at the information provided by the HIDEOE (table titled "HIDEOE BACB Credentialed Personnel"), it would be more accurate for the Department to state that they have 15 Licensed Behavior Analysts (LBA) and 9 Registered Behavior Technicians (RBT) currently, two years into implementation of Chapter 465-D. It should be noted during the 2016 Legislative session Suzanna Mulcahy reported to Representative Della Belatti, that there were 20 Board Certified Behavior Analysts in the DOE and "many more in the pipe". It appears that there are now 5 LESS behavior analysts than were reported 2 years ago. This is certainly a concerning trend.

Even if someone possess the credential of Registered Behavior Technician (RBT), they may not call themselves an RBT or claim they are practicing as an RBT, unless they meet all supervision and related requirements. Currently, RBTs are required to have at least 5% of their hours supervised by a Licensed Behavior Analyst (LBA), who agrees to be the "Responsible Certificant" for the RBT (<http://www.bacb.com>).

DOE Statement: “Many states have determined that the ABA licensure standard is consistent with the accepted standards of their respective educational professionals. These states have also recognized that the ABA licensure standard could prohibit public and private school employees from performing their full scope of work. As a result, 14 states have either limited or completely exempted schools and educational professionals from this law.

REPLY: This information is false and/or misleading. Many states that have licensure passed these laws 8-10 years ago. When we look at states that pushed autism insurance through early on, we will see low age and dollar caps. This is not because those states did not feel it was important, or that the research does not exist demonstrating efficacy, it was done for political reasons. In all states where autism insurance laws placed low age or dollar caps, they have revised, repealed, or redrafted language since, reflecting what later states have done.

In addition, because a state does not require licensure in school settings, does not mean schools are not providing Applied Behavior Analysis (ABA) by Licensed Behavior Analysts (LBAs). Massachusetts is very clearly one of those states. As a matter of fact, in order to pull funds from Mass Health (for school-based claiming) for ABA services delivered in the school setting, the state requires “the practitioner is required to be licensed by the Board of Registration of Allied Mental Health and Human Services Professions as an Applied Behavior Analyst (ABA), or if prior to January 6, 2016, may be a Board Certified Behavior Analyst (BCBA). In addition, services may be reimbursed if provided by a licensed physician, psychologist, or psychiatrist providing ABA within the scope of his or her licensure; or an Assistant Applied Behavior Analyst (AABA) or other paraprofessional working under the supervision of a licensed ABA. If prior to January 6, 2016, AABA or paraprofessionals may be working under the supervision of a BCBA.”
<http://www.mass.gov/eohhs/docs/masshealth/bull-2015/sbm-29.pdf>

At the same time the 2018 legislative report was released on the DOE website, the report that was intended for the 2017 legislative session was also added to the HIDOE website. Although the report is dated 12/29/2016, it should be publicly acknowledged that this report was not posted until 12/2017.

Reports for the 2017 Legislature

REPORTS ON BILLS AND RESOLUTIONS passed in the 2015 and 2016 Regular Session, Hawaii State Legislature.

	Authorizing Instrument	Subject	Report or Action Requested
1	Act 107 SB 1311, CD1 (2016)	Requires the DOE to report to the Legislature on implementing measures to comply with the behavior analyst licensure and certification requirements.	
2	Act 109 HB 0820, CD1 (2015)	Relating to Public Early Childhood Education	View report

As always, I am here to help. Now, more than ever, is the time to unite and work together.

Amanda N Kelly, PhD, BCBA-D, LBA
 For Our Keiki | www.forourkeiki.webs.com
forourkeiki@gmail.com | 808-298-2658

Student's Name: [REDACTED]

Page 18 of 20

8/11/2016 In response to the Complaint Investigation on Case #1 [REDACTED] the Team agreed to provide 1614 minutes of Teacher Consult services that were not provided during the fourth quarter of school year 2015-2016. These services will be provided by December 2016 by a BCBA/BISS.

Please note the Supplementary Aids and Services - Program Modifications and Supports for School Personnel Tab would not accept the December 2016 date. Any of the 1614 minutes of Teacher Consult Service not used at the time of the Annual Individualized Education Program development date will be included on the next Annual Individualized Education Program.

Mrs. [REDACTED] would like Applied Behavior Analysis to be identified in the Supplementary Aids and Services, Program Modification and Supports for School Personnel section, however, it is not our practice to name specific sciences and/or programs.

Malaea_Wetzel/HALEIWA/HI... 7/18/17

To: Dr. Cc: K

Details



Hi Amanda and Mr. and Mrs. [REDACTED]

Thank you for resending your note to me. I appreciate you sharing that you are currently working with state leadership to help resolve the matter. Unfortunately, in my experience as a DOE administrator, I have NOT encountered any medical/school partnerships. I am aware of other schools working with doctors for medically fragile students, but I have never had those experiences. As for ABA services, personally, I do not know of any other situations. So I apologize, this is very foreign territory for me. Like you, I have been seeking guidance -- but my guidance comes from Joanne, who I am sure consults with Debbie Farmer.

I will wait to see what guidance you receive from Debbie or if I receive something on my side, I will let you know.

Thank you,
Malaea



11/17/17

Parents requested that Behavior Analysis be added under the data collection methods section in the (goals and objectives sections of the) IEP. The team discussed the recent updates to Hawai'i law about including Applied Behavior Analysis (ABA) in the IEP. The Autism Consultant Teacher [ACT], Dr. Lissa Goya indicated that the Hawai'i DOE does not do ABA during the school day. The insurance funded behavior analyst clarified new Hawaii law that stated behavior analytic strategies (for example, but not limited to: data collection methods, reinforcements, FBA/BSP, data analysis) should be reflected on the IEP when it's an integral part of education, also citing the REB vs. HIDOE case as a point of reference. At present time, Dr. Goya is pursuing coursework to become a Behavior Analyst and is being supervised by Wendi Park, BCBA/LBA, therefore, utilizing Behavior Analysis as a data collection method is appropriate.

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH
Senator Rosalyn H. Baker, Chair
Senator Jill N. Tokuda, Vice Chair
Wednesday, February, 28, 2018 2:45 pm
Conference Room 229, State Capitol

**SB 2925 Relating to the Practice of Behavior Analysis
SUPPORT w/amendments as proposed by HABA**

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

I worry about the Department's resistance to providing applied behavior analysis (ABA) services. What appears to be a systemic, philosophical stance against collaborating with Licensed Behavior Analysts and Registered Behavior Technicians (RBTs), places our most vulnerable keiki directly in harm's way. The Individuals with Disabilities Education Act (I.D.E.A.) is a federal law that requires a proactive approach whenever behaviors impede the learning of a student or those around them. The current language appears to violate several federal laws: I.D.E.A., Free and Appropriate Education (F.A.P.E.), and the Americans with Disabilities Act (ADA).

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.

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.

I respectfully request that you consider the language as submitted by the Hawai'i Association for Behavior Analysis (HABA). I believe this language provides psychologists, teachers, and caregivers the necessary protections, while also protecting our keiki and other recipients of ABA services.

Mahalo for your time and consideration.

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Wednesday, February, 28, 2018 2:45 pm
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**SB 2925 Relating to the Practice of Behavior Analysis
SUPPORT w/amendments as proposed by HABA**

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

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. 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 2925 Relating to the Practice of Behavior Analysis
SUPPORT w/amendments as proposed by HABA**

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

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**SB 2925 Relating to the Practice of Behavior Analysis
SUPPORT w/amendments as proposed by HABA**

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.

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. 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 your time and consideration.

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**SB 2925 Relating to the Practice of Behavior Analysis
SUPPORT w/amendments as proposed by HABA**

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. 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.

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Mahalo for your time and consideration.

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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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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

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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.

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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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Cheryl Ebisui
95-1091 Auina St | Oahu
cebisui@teampbs.com

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Catherine Wilson, M.Ed., BCBA, LBA, LMHC | PO Box 375 | Kauai
catuare@Hawaii.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.

I worry about the Department's resistance to providing applied behavior analysis (ABA) services. What appears to be a systemic, philosophical stance against collaborating with Licensed Behavior Analysts and Registered Behavior Technicians (RBTs), places our most vulnerable keiki directly in harm's way. The Individuals with Disabilities Education Act (I.D.E.A.) is a federal law that requires a proactive approach whenever behaviors impede the learning of a student or those around them. The current language appears to violate several federal laws: I.D.E.A., Free and Appropriate Education (F.A.P.E.), and the Americans with Disabilities Act (ADA). 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.

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

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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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Heidi Burgoyne
67-170 Kuhi st Waialua
hbHawai'i @gmail.com

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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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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@Hawaii.edu

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

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

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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
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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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**SB 2925 Relating to the Practice of Behavior Analysis
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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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Rebecca Seiter | 352 Aina Lani Pl, Kauai, HI 96746 | rebeccaseiter@yahoo.com

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.

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. 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 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. Keiki 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.

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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.

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April Woolley
66-939 Kiekonea Way | Oahu
acasey@Hawai'i .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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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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Jackie Belding
3-2600 Kaumualii Hwy, STE 1300, PMB 340
Lihue HI 96777 | Kauai
jackiebaker15@hotmail.com

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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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94-1038 LUMIAUAU ST
Gigi.sean@yahoo.com

Providing additional support in the school environment will slow 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

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. 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.

I respectfully request that you consider the language as submitted by the Hawai'i Association for Behavior Analysis (HABA). I believe this language provides psychologists, teachers, and caregivers the necessary protections, while also protecting our keiki and other recipients of ABA services.

Mahalo for your time and consideration.

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**SB 2925 Relating to the Practice of Behavior Analysis
SUPPORT w/amendments as proposed by HABA**

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!!

Keiki 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.

I worry about the Department's resistance to providing applied behavior analysis (ABA) services. What appears to be a systemic, philosophical stance against collaborating with Licensed Behavior Analysts and Registered Behavior Technicians (RBTs), places our most vulnerable keiki directly in harm's way. The Individuals with Disabilities Education Act (I.D.E.A.) is a federal law that requires a proactive approach whenever behaviors impede the learning of a student or those around them. The current language appears to violate several federal laws: I.D.E.A., Free and Appropriate Education (F.A.P.E.), and the Americans with Disabilities Act (ADA).

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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.

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. 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 your time and consideration.

Kind regards,
Rochelle Hall

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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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I respectfully request that you consider the language as submitted by the Hawai'i Association for Behavior Analysis (HABA). I believe this language provides psychologists, teachers, and caregivers the necessary protections, If it is not, then we must look to barriers outside of funding

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 your time and consideration.
Rebekah Walker

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

Do the right thing for our Keiki!!

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Mahalo for your time and consideration.
Kristine D. Dickson

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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!!

Keiki 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.

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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. 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 your time and consideration.
Beau Laughlin, M.S. BCBA

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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.

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

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Mahalo for your time and consideration.
Please malama our keiki.

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Geri Pinnow – PARENT & Luke Pinnow - SELF-ADVOCATE
Ewa Beach, Oahu | gpinnow@rocketmail.com

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. 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.

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!

I respectfully request that you consider the language as submitted by the Hawai'i Association for Behavior Analysis (HABA). I believe this language provides psychologists, teachers, and caregivers the necessary protections, while also protecting our keiki and other recipients of ABA services.

Mahalo for your time and consideration. Help Luke get ABA in the DOE
<https://www.facebook.com/forourkeiki/videos/541725256208502/>

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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

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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.

To summarize our situation: the DOE offered zero support or help to 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 a 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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Please malama our keiki.

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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.

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. 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.

I respectfully request that you consider the language as submitted by the Hawai'i Association for Behavior Analysis (HABA). I believe this language provides psychologists, teachers, and caregivers the necessary protections, while also protecting our keiki and other recipients of ABA services.

Mahalo for your time and consideration.
Please malama our keiki.

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**SB 2925 Relating to the Practice of Behavior Analysis
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Lilly Atwell
1234 Olino st Honolulu HI 96818
latwell@maulolearning.com

Our children deserve quality professional care from those who are qualified in the field of ABA. 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. 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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Aimee Cueva
975 Ae St Apt 201 Kapolei, HI 96707
acueva.mauloalearning@gmail.com

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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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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

Keiki 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.

I worry about the Department's resistance to providing applied behavior analysis (ABA) services. What appears to be a systemic, philosophical stance against collaborating with Licensed Behavior Analysts and Registered Behavior Technicians (RBTs), places our most vulnerable keiki directly in harm's way. The Individuals with Disabilities Education Act (I.D.E.A.) is a federal law that requires a proactive approach whenever behaviors impede the learning of a student or those around them. The current language appears to violate several federal laws: I.D.E.A., Free and Appropriate Education (F.A.P.E.), and the Americans with Disabilities Act (ADA).

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

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

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 and 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

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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 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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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.

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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 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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Mahalo for your time and consideration.

Dawna Moriarty

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Senator Rosalyn H. Baker, Chair
Senator Jill N. Tokuda, Vice Chair
Wednesday, February, 28, 2018 2:45 pm
Conference Room 229, State Capitol

**SB 2925 Relating to the Practice of Behavior Analysis
SUPPORT w/amendments as proposed by HABA**

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.

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.

I respectfully request that you consider the language as submitted by the Hawai'i Association for Behavior Analysis (HABA). I believe this language provides psychologists, teachers, and caregivers the necessary protections, while also protecting our keiki and other recipients of ABA services.

Mahalo for your time and consideration.

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

My name is Dr. Amanda Kelly. I am licensed behavior analyst and formerly a licensed teacher. I would like to submit testimony today in SUPPORT of SB2925 with amendments. The Hawai'i Department of Education (DOE) asked the legislature to introduce a bill relating to Behavior Analyst Licensure (Chapter 465-D). The original language in this bill seeks to limit ABA services to students as a reactive approach, requiring a "fail first" approach, and would not allow students in need access to a licensed behavior analyst (LBA) in the DOE setting. We believe our keiki and our teachers cannot wait any longer for these services.

I see SB2925 as an opportunity to have a clean draft of the proposed amendments. I respectfully request the committee Chairs agree to match the preamble of this bill (SB 2925) with what is now listed in the companion bill (HB 2271 HD2) and adopt the additional amendments, as proposed by HABA. Their proposed language has been shared with Hawai'i State Teachers Association (HSTA), Hawai'i Medical Service Association (HMSA), Hawai'i Disability Rights Center (HDRC), and the Hawai'i Psychological Association (HPA), in an effort to be collaborative and transparent. HABA's mission is to educate, advocate for, and support both providers and consumers of Applied Behavior Analysis (ABA).

I worry about the Department's resistance to providing applied behavior analysis (ABA) services. What appears to be a systemic, philosophical stance against collaborating with Licensed Behavior Analysts and Registered Behavior Technicians (RBTs), places our most vulnerable keiki directly in harm's way. The Individuals with Disabilities Education Act (I.D.E.A.) is a federal law that requires a proactive approach whenever behaviors impede the learning of a student or those around them. The current language appears to violate several federal laws: I.D.E.A., Free and Appropriate Education (F.A.P.E.), and the Americans with Disabilities Act (ADA).

Behavior analysts are trained to develop, deliver, and monitor educational programming that is driven by the results it produces with students. Collaborative consultation with the moment-to-moment coaching it entails can assist educators [in creating] their own evidence-based practices (Hursh, 2007, p. 44)" (Fielding, 2013). ABA programming for learners, as any other specialized field, should be designed and supervised by qualified professionals. This group of professionals with appropriate training in applied behavior analysis are those who are board certified as behavior analysts (BCBA) or licensed

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clinical psychologists with explicit training and supervision in behavior analysis. While much of the day-to-day ABA work can be performed by certified teachers and well-trained registered behavior technicians (RBTs), behavior analytic programs should always be overseen by highly-trained licensed professionals with ABA in their scope (New York).

Our teachers are caring and committed to helping our keiki succeed. Our teachers are being tasked with responsibilities that exceed their skill sets. Despite asking for help, for access to Licensed Behavior Analysts (LBA), our teachers' requests are denied. I opposed the language in the original bill, because it is unfair to them. Teachers who advocate too loudly or who have asked too many questions have been reprimanded, and in some cases actively retaliated against, even being terminated from their teaching positions <https://www.facebook.com/forourkeiki/videos/540341319680229/> | www.forourkeiki.webs.com/say-what

Parents may require a school district to fund ABA services if the parents can show that such services are necessary to allow the child to make reasonable progress in the curriculum and to benefit educationally from instruction. There must be sufficient evidence from a qualified professional, which supports this conclusion. The qualified professional may be a child's therapist, an independent evaluator with appropriate qualifications, or district staff (Attorney Hickman). When a child requires a particular methodology to receive FAPE, the district has an obligation to use that method (REB vs Hawai'i , 2017) <http://cdn.ca9.uscourts.gov/datastore/opinions/2017/09/13/14-15895.pdf>

The Department of Education does provide behavioral health services and there are many respectable team members. However, the department has testified that they currently do not have licensed behavior analyst (LBA) positions and they do not allow providers on campus, nor do they provide a fungible service themselves. IEP teams in Hawai'i frequently refuse to accept outside evaluations; often debating and rejecting legitimate diagnoses, which directly impact educational access. I believe this occurs in large part because we are missing Licensed Behavior Analysts (LBAs) as team members, and because our teachers are afraid to speak up for fear of retaliation. <https://www.facebook.com/forourkeiki/videos/550736171974077/>

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Questions that would be useful for the DOE to answer to advance these discussions:

1. How many students have behavior support plans (BSP) as part of their IEP?
2. How many students require functional behavior assessments (FBA)?
3. How many students have come to the IEP with a recommendation for ABA?
4. Of those, how many students did the team agree required ABA?
5. How many IEPs list applied behavior analysis (ABA)?
6. How many IEPs list Licensed Behavior Analysts on the service grid?
7. How many IEPs list Registered Behavior Technicians (RBTs 1:1) in the service grid?
8. How many have outside reports listing ABA, but the team decided ABA wasn't needed?
9. How many of these IEP teams include Licensed Behavior Analysts (LBAs)?
10. How many Licensed Psychologists does the DOE who design ABA services?
11. How often does a student who has autism not qualify under the classification of autism?
12. Of the 1,909 students with autism, the DOE reports 335 students are receiving ABA. Who designs and delivers this instruction?
13. How are ABA services currently reflected in IEPs here in Hawaii? Are credentials listed?
14. Medicaid requires specifically licensed and credentialed providers in order for reimbursement to be available. Specific to ABA services, who can bill Medicaid?

Teachers | Hawai'i DOE

- 13,320 teaching positions in Hawai'i (HNN, 11/22/2017)
- 1,011 of current teaching positions are filled by emergency hires (HNN, 11/22/2017)
- 311 of our Special Education Teaching positions lack a licensed teacher (HNN, 11/22/2017)

Students | Hawai'i DOE ...although we should be looking beyond autism...

- 1,909 students reported to qualify for an IEP under autism (DOE testimony, 2/23/2018)
- 1,100 students with autism who require a 1:1 paraprofessional (DOE testimony, 1/31/18 for SB2520)

Licensed Behavior Analysts (LBAs)

- 30,000 behavior analysts worldwide (1/8/2018, BACB)
- 218 Licensed Behavior Analysts (LBAs) in Hawai'i (2/4/18, DCCA)
- 15 number of DOE employees who are licensed as a behavior analyst (1/5/18, DOE)
- 0 number of DOE employees working as a behavior analyst (1/5/18, DOE)

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Registered Behavior Technicians (RBT)

- 587 Registered Behavior Technicians (RBTs) in Hawai'i (2/4/2018, BACB)
- 9 Registered Behavior Technicians (RBTs) in the Hawai'i DOE (1/5/2018, DOE)
- 0 number of DOE employees working as an RBT (1/5/18, DOE)

ABA in other States

- 31 states currently regulate the practice of behavior analysis (APBA)
- 46 states offer ABA services funded through health insurances; provided by licensed behavior analysts, and licensed psychologists practicing in their scope and experience
- At least 35 school districts have information about services available online (For Our Keiki)
- Schools in at least 14 states offer ABA services by BACB credentialed Behavior Analysts

Medicaid and ABA Services in the DOE

- Medicaid is required to cover ABA services for children, up to age 22 under EPSDT (CMS)
- This includes before and after school, as well as when school is in session
- In states where school-based Medicaid claiming is established (such as Massachusetts), Medicaid can reimburse for a percentage of ABA services, when those services are provided by a Licensed Behavior Analyst (LBA) and/or Registered Behavior Technician (RBT), as appropriate.

<http://www.mass.gov/eohhs/docs/masshealth/bull-2015/sbm-29.pdf>

Whereas the Department of Health (DOH-DDD) has made several good faith efforts (such as commissioning a rate study, updating waiver standards to include Licensed Behavior Analysts (LBAs), as well as Registered Behavior Technicians (RBTs), and proposing a rate increase 20% above Medicaid rates), the Department of Education (DOE) has actively resisted and undermined efforts aimed at establishing an adequate workforce, despite several efforts made by community organizations and Universities, resistance from the DOE remains.

1. The Hawai'i DOE refuses to provide ABA (2016, 2017, 2018)

They have actively and explicitly provided instructions to their staff to refrain from making or considering ABA as a treatment modality for any student. This includes recorded conversations from an Attorney General with the Education division, who traveled to numerous schools across the islands and

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shared, "Right now the advice that I'm giving you who have this issue, in any case where we have this issue, I tell them "we're not going to, you know (inaudible) when it comes to ABA methodology, we're not putting it on the IEP" <https://www.facebook.com/forourkeiki/videos/524566931257668/>

2. Hawai'i cohort with the University of West Florida was established (2016)

The DOE forced at least 10 students enrolled in the program to drop the program, as they would not be issuing tuition reimbursement for anyone enrolled. Students who remained enrolled in our program have been prohibited from having supervisors and professors on DOE campus to provide practicum supervision (similar to a teaching practicum supervisor).

3. \$1million in scholarships for BACB certification was offered, but declined by DOE (2016 & 2017). In response, we were told, "it isn't the right time". We met with other stakeholders and offered scholarships to them.

4. 40-hour Registered Behavior Technician (RBT) training offered for free (2016)

This training was offered through partnership with the University of West Florida and Keiki Educational Consultants (my private practice at the time). Assets elementary school was generous enough to host the event. 50 spaces were offered and individuals with DOE email addresses reserved 30 spaces. On the first day of the training, there were 28 no-shows, all of whom had DOE email addresses.

5. Health plans offered to fund ABA services provided at school by LBAs and RBTs (2017)

The DOE, specifically Debra Farmer, Suzanna Mulcahy, and Superintendent Kishimoto have refused to offer these services as part of students' IEPs. They have also refused to collaborate with outside professionals or to agree that ABA is medically necessary and needed for students' to access their education and make meaningful progress on robust and ambitious goals (Endrew F. vs. Douglas County). https://www.supremecourt.gov/opinions/16pdf/15-827_0pm1.pdf

Whereas money is concerned, the language in the bill would allow the DOE the opportunity to use providers (e.g., supervisees) who are not currently reimbursable by the commercial health plans or Medicaid. By upholding the expectation for direct support workers to become registered behavior technicians (RBT), this would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

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Mahalo nui for your time and dedication on this very important matter. I am available to answer any questions.

Amanda N Kelly, PhD, BCBA-D, LBA
(808) 298-2658 | forourkeiki@gmail.com

Amendments proposed: Match preamble of the bill to HB 2271 (companion bill). Additional changes to clarify psychologists and their supervisees' right to practice, clarifying language for teachers to implement ABA programs in collaboration with a person licensed in this state, and offers clarity for definition of DOH-DDD caregiver (refer to HABA's amendments).

Additional resources:

www.forourkeiki.webs.com/say-what

www.facebook.com/forourkeiki

www.hawaiiaba.org

www.facebook.com/hawaiiaba

www.BACB.com

www.APBAhome.net

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**Transcription of meeting between District Education Specialist (DES) and Dr. Amanda N. Kelly
(5/23/2017), Recording available upon request**

Dr. Kelly: Family expecting BCBA, in writing from team.

DES: Team wanted to know how to contract one.

Dr. Kelly: Described student, autism, multiple diagnosis, hearing loss, preschool, age 4.

"I prescribed 40 hours. We are going to have to figure that out. If the schools are not providing the comparable service then the parents option is to advocate for it to happen in school through insurance, which has not yet happened--

DES: "—it has not yet happened. I can't tell you that it won't."

Dr. Kelly: "I don't know either, but the other option is...I'm not recommending they pull him out of school for his services, but his services are more important than being in school without them. The other option I can think of for the family is to go for, or look for a private placement, because the child should be in school. What happened is, I'm just going to be frank with you, because I feel like I can be, is regardless of who is being told they can or can't do something or if its like smudging legal or illegal or whatever, Daniel does not have the competency to do what he did."

DES: "...and you're telling me that. I've got him going to a training."

Dr. Kelly: "What training? What training has he gone to?"

DES: "FBA/BSP training"

Dr. Kelly: "But who's doing the training?"

DES: "My Clinical Psychs"

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Dr. Kelly: "Exactly, and many clinical psychologists are not being reimbursed through health insurance for doing ABA or FBAs either. Although a clinical psychologist might be able to skirt under the law, there are very few with competencies to do functional behavior assessments (FBA) that are appropriate. Nothing personal against the field of psychology or psychologists, I cannot do a lot of the assessments they can do. There's certainly a benefit to having them on the team. We're not supposed to be covering our asses we're supposed to be helping the kids. I believe you care for the kids."

DES: "I do. I'm frustrated. I hope the new Superintendent helps our kids."

Dr. Kelly: "I've already tried reaching out to her."

DES: "Good. I really hope she makes a difference. I really and truly hope that OCSIS gets its layering together and their act together and starts producing memos—"

Dr. Kelly: "Speaking of memos, I have one. Let's talk about it. Explain that to me (hands memo).

DES: "This is um, verbatim, sitting at a DES meeting, with all of the DES's present, sitting next to XXX XXXX, SBBH and myself, that I sent to my staff that **this is exactly what Debbie Farmer quoted.**"

Dr. Kelly: "So you wrote this."

DES: "Well this is the word document but the email said, I'm sitting at a meeting and this is verbatim what I'm being told."

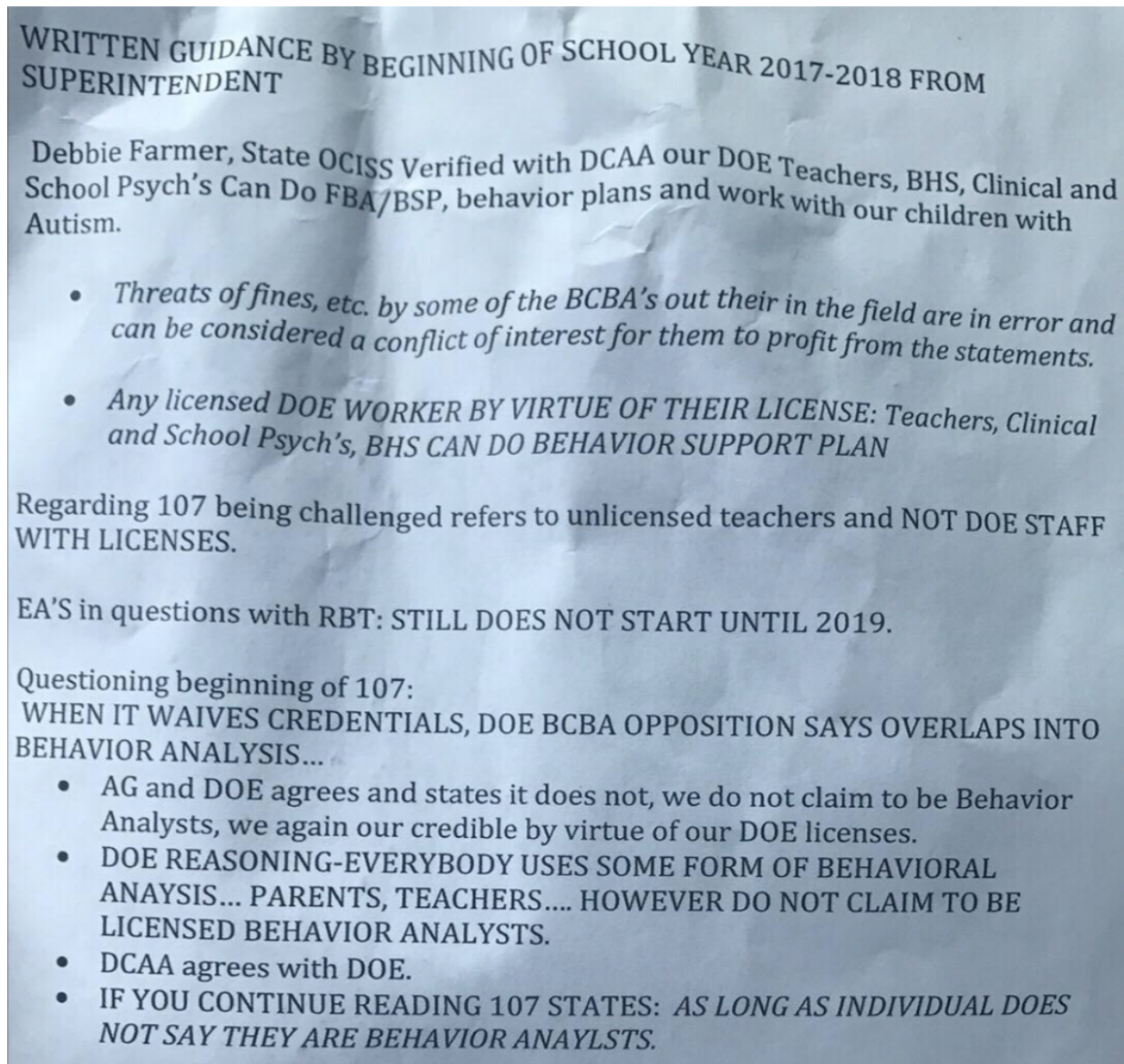
Dr. Kelly: "Okay, so that's helpful."

DES: "This is verbatim what was said."

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IEPS in other states list “applied behavior analysis” by “board certified behavior analysts” directly on the IEP grid. Hawai'i does not. This is a screenshot of an IEP written in Massachusetts in 2014.

A. Consultation (Indirect Services to School Personnel)			
Focus on Goal #	Type of Service	Type of Personnel	Start Date
1,5	Inclusion Consult	SpEd/RegEd Teacher	1/14/2014
1-10	Parent Consult	BCBA Home Trainer	1/14/2014
1-10	BCBA Consult	BCBA Consultant	1/14/2014
1-10	Parent Consult	School BCBA	1/14/2014
2,3,	Speech/Language Consult	School Psych/SLP	1/14/2014
4	OT Consult	OT/SPED Teacher	1/23/2013

B. Special Education and Related Services in General Education				
Focus on Goal #	Type of Service	Type of Personnel	Start Date	End Date
1,5	Inclusion Support	SPED Teacher/Para	1/14/2014	1/14/2014

C. Special Education and Related Services in Other Settings			
Focus on Goal #	Type of Service	Type of Personnel	Start Date
1-10	Home Training	BCBA	1/14/2014
1-9	Discrete Trials	Sped Paraprofessional	1/14/2014
1-9	Academics/Soc/Beh	SPED Teacher/Para	1/14/2014
1-9	Discrete Trials	SpEd Teacher	1/14/2014
2,3,5	Speech/Language	Speech/Language Therapist	1/14/2014
4	Occupational Therapy	Occupational Therapist	1/14/2014

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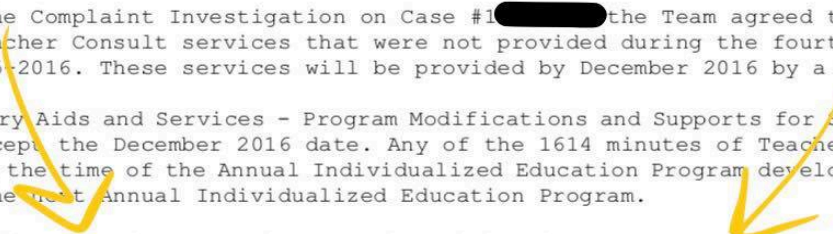
IEPS in other states list "applied behavior analysis" by "board certified behavior analysts" directly on the IEP grid. Hawai'i does not. This is a screenshot of an IEP written in Hawai'i in 2016.

Student's Name: [REDACTED] Page 18 of 20

8/11/2016 In response to the Complaint Investigation on Case #1 [REDACTED] the Team agreed to provide 1614 minutes of Teacher Consult services that were not provided during the fourth quarter of school year 2015-2016. These services will be provided by December 2016 by a BCBA/BISS.

Please note the Supplementary Aids and Services - Program Modifications and Supports for School Personnel Tab would not accept the December 2016 date. Any of the 1614 minutes of Teacher Consult Service not used at the time of the Annual Individualized Education Program development date will be included on the next Annual Individualized Education Program.

Mrs. [REDACTED] would like Applied Behavior Analysis to be identified in the Supplementary Aids and Services, Program Modification and Supports for School Personnel section, however, it is not our practice to name specific sciences and/or programs.



SB-2925

Submitted on: 2/26/2018 11:06:18 PM

Testimony for EDU on 2/28/2018 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Justin Salisbury	Individual	Support	No

Comments:

SB-2925

Submitted on: 2/23/2018 4:00:33 PM

Testimony for EDU on 2/28/2018 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Javier Mendez-Alvarez	Individual	Support	No

Comments:

EDU Testimony

From: dr.greta.kugler@gmail.com
Sent: Monday, February 26, 2018 10:57 PM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Greta Kugler
PO BOX 1271
Kapaa, HI 96746-9674

February 27, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

Wednesday, February 28, 2018, 2:45pm
Conference Room 229
State Capitol
415 South Beretania Street

Testimony in SUPPORT of SB 2925
RELATING TO THE PRACTICE OF BEHAVIOR ANALYSIS and recommending amendments

Act 199 was put in place by the legislature to credential a new, additional group of behaviorally trained professionals to help provide higher level behavioral interventions, especially for children with autism. However instead, this simple professional licensure law has been used to justify severe limitations on the workforce available to support our teachers and students with behavioral challenges. Teachers and administrators in Hawaii's schools are trying hard to cope with a whole range of behavioral challenges presented by our students. They need more help to meet the needs of these students. They do NOT need arbitrary, bureaucratic rules imposing limitations on who is allowed to support our teachers and students by developing and implementing effective behavior plans. Basic behavioral strategies are ubiquitous tools used widely by parents, teachers and childcare professionals. There are psychologists and other licensed professionals (mental health counselors, clinical social workers, special educators) who live in our state and are well-trained in behavioral interventions. Our schools need to be free to employ these individuals - as well as Licensed Behavior Analysts - to help our children. For this reason, I SUPPORT SB 2925 WITH THE AMENDMENT PROPOSED BY THE HAWAI'I PSYCHOLOGICAL ASSOCIATION.

Sincerely,

Greta L. Kugler, PsyD
8084824998

EDU Testimony

From: jcwhite54@gmail.com
Sent: Monday, February 26, 2018 9:22 AM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Judith White
P.O. Box 1719
Kapaa, HI 96746-5719

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

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Sincerely,

Judith C. White, Psy.D.
808-345-5856

EDU Testimony

From: drmarieterry@gmail.com
Sent: Sunday, February 25, 2018 9:00 PM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Marie Terry-Bivens
4401 kapuna rd
Kilauea, HI 96754-5524

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

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Sincerely,

Marie Terry-Bivens
8083327190

EDU Testimony

From: drjeffstern@gmail.com
Sent: Monday, February 26, 2018 2:47 PM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Jeffrey D. Stern Ph.D.
1433 Kamehameha IV Rd.
Honolulu, HI 96819-2583

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

Wednesday, February 28, 2018, 2:45pm
Conference Room 229
State Capitol
415 South Beretania Street

Testimony in SUPPORT of SB 2925
RELATING TO THE PRACTICE OF BEHAVIOR ANALYSIS and recommending amendments

Honorable Senators Kidani and Baker (Chairs) Kahele and Tokuda (Vice Chairs) and members of the Senate Committees on Education and Commerce, Consumer Protection, and Health;

I have submitted previous testimony on HB2721 and am submitting this testimony in strong support of SB 2925 as amended.

Act 199 was put in place by the legislature to credential a new, additional, group of behaviorally trained professionals to help provide higher level behavioral interventions, especially for children with autism. However, instead, this simple professional licensure law has been used to justify severe limitations on the workforce available to support our teachers and students with behavioral challenges. Teachers and administrators in Hawaii's schools are trying hard to cope with a whole range of behavioral challenges presented by our students. They need more help to meet the needs of these students. They do NOT need arbitrary, bureaucratic rules imposing limitations on who is allowed to support our teachers and students by developing and implementing effective behavior plans. Basic behavioral strategies are ubiquitous tools used widely by parents, teachers and childcare professionals. There are psychologists and other

licensed professionals (mental health counselors, clinical social workers, special educators) who live in our state and are well-trained in behavioral interventions. Our schools need to be free to employ these individuals - as well as Licensed Behavior Analysts - to help our children. For this reason, I SUPPORT SB 2925 WITH THE AMENDMENT PROPOSED BY THE HAWAII PSYCHOLOGICAL ASSOCIATION.

Sincerely,

Jeffrey D. Stern, Ph.D.
8083873703

EDU Testimony

From: minke@hawaii.edu
Sent: Monday, February 26, 2018 7:32 AM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Karl Minke
700 Richards St., I Apt. 2205
Honolulu, HI 96813-4621

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

Wednesday, February 28, 2018, 2:45pm
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415 South Beretania Street

Testimony in SUPPORT of SB 2925
RELATING TO THE PRACTICE OF BEHAVIOR ANALYSIS and recommending amendments

I support Senate Bill 2925 with the amendment recommended by the Hawaii Psychological Association (HPA). I am past Chair of the Department of Psychology, U.H. Manoa and past Director of Clinical Studies for the same department. In addition, I am author or co-author on a number of the early studies demonstrating the effectiveness of behavioral interventions, serving as the empirical basis for the later specialty known as "Applied Behavior Analysis." Most clinical psychologists are well trained in the practice of behavioral interventions and the supervision of assistants such as postdoctoral fellows, students and unlicensed master's level clinicians as well as paraprofessionals, direct support workers, and family members in the implementation of a behavioral program. The proposed amendment clarifies psychologists' scope of practice as including the practice and supervision of behavioral interventions and would prevent an inappropriate narrowing of the behavioral health workforce to individuals following a specific theoretical orientation within the broader, evidence based, cognitive-behavioral approach used by psychologists today .

Thank you for the opportunity to provide testimony on this important topic.

Sincerely,

Karl Minke, Ph.D
University of Hawaii, Manoa, retired

Sincerely,

Karl A. Minke

EDU Testimony

From: kellar@hawaii.edu
Sent: Sunday, February 25, 2018 9:25 PM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Michael Kellar
435-E Haleloa Place
Honolulu, HI 96821-2251

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

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Sincerely,

Michael Kellar

EDU Testimony

From: mtsunemo@hawaii.edu
Sent: Monday, February 26, 2018 7:47 AM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Michelle Kawasaki
94-970 Lumiauu St B101
Waipahu, HI 96797-4824

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

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Sincerely,

Michelle Kawasaki, PhD
808-256-7031

EDU Testimony

From: mariabriones@hawaiiantel.net
Sent: Tuesday, February 27, 2018 7:32 AM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Maria Briones
3176 Poipu Rd #5
Koloa, HI 96756-9521

February 27, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

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Sincerely,

Maria Briones
8086359074

EDU Testimony

From: kkuikahi@gmail.com
Sent: Monday, February 26, 2018 12:47 PM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Kahanaaloha Kuikahi-Duncan
3144 Elua St. #2
Lihue, HI 96766-1211

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

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Sincerely,

Kahanaaloha Kuikahi-Duncan
8084300377

EDU Testimony

From: drmechristopher@gmail.com
Sent: Monday, February 26, 2018 11:32 AM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Michael Christopher
3734 Harding Ave
Honolulu, HI 96816-3729

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

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Sincerely,

Michael Christopher

EDU Testimony

From: n.sidun@hawaiiantel.net
Sent: Sunday, February 25, 2018 9:45 PM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Nancy Sidun
1195 Kamehame Drive
Honolulu, HI 96825-3504

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

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Sincerely,

Nancy Sidun
8083959871

EDU Testimony

From: nrobello@gmail.com
Sent: Monday, February 26, 2018 9:57 AM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Nicole Aurellano PsyD
92-1295 Hookeha St.
Kapolei, HI 96707-1572

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

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Sincerely,

Nicole Aurellano, PsyD
8083481553

EDU Testimony

From: patricku@hawaii.edu
Sent: Sunday, February 25, 2018 10:05 PM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Patrick Uchigakiuchi
1448 Young Street, Apt 1109
Honolulu, HI 96814-1861

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

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Sincerely,

Patrick Uchigakiuchi
8083756114

EDU Testimony

From: ppost717@gmail.com
Sent: Sunday, February 25, 2018 11:45 PM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Petrina Post
1920A Waimano Home Rd
Pearl City, HI 96782-1468

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

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Sincerely,

Petrina B Post Post PsyD
8082188261

EDU Testimony

From: rkim@tcgoc.com
Sent: Monday, February 26, 2018 10:52 AM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Richard Kim
3615 Harding Ave, Suite 509
Honolulu, HI 96816-3757

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

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Sincerely,

Richard J Kim
808-739-1992

EDU Testimony

From: rkappenberg@gmail.com
Sent: Sunday, February 25, 2018 9:00 PM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Richard Kappenberg
99-1661 Aiea Hts Dr #C
Aiea, HI 96701-2900

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

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Sincerely,

Richard Kappenberg, Ph.D.
808-486-0322

EDU Testimony

From: drhamada810@gmail.com
Sent: Monday, February 26, 2018 12:52 PM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Roger Hamada
98-211 Pali omi St., Suite 810
Aiea, HI 96701

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

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Sincerely,

Roger Hamada, Ph.D.
8084887001

EDU Testimony

From: scott.hashimoto@doh.hawaii.gov
Sent: Monday, February 26, 2018 11:02 AM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

scott hashimoto psy.d.
45-691 keeahala road
kaneohe, HI 96744-3569

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

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Sincerely,

scott hashimoto, psy.d.
808.2333726

EDU Testimony

From: iirie@waimanalohealth.org
Sent: Sunday, February 25, 2018 10:10 PM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Ivan Irie
41-1347 , Kalaniana'ole Hwy
Waimanalo, HI 96795-1247

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

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Sincerely,

Ivan Irie
8082599917

EDU Testimony

From: wfinley22kona@earthlink.net
Sent: Monday, February 26, 2018 12:47 PM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Willie Finley Jr
87-205 Helelua Street, Unit 5
Waianae, HI 96792-3811

February 26, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

Wednesday, February 28, 2018, 2:45pm
Conference Room 229
State Capitol
415 South Beretania Street

Testimony in SUPPORT of SB 2925
RELATING TO THE PRACTICE OF BEHAVIOR ANALYSIS and recommending amendments

Act 199 was put in place by the legislature to credential a new, additional, group of behaviorally trained professionals to help provide higher level behavioral interventions, especially for children with autism. However, instead, this simple professional licensure law has been used to justify severe limitations on the workforce available to support our teachers and students with behavioral challenges. Teachers and administrators in Hawaii's schools are trying hard to cope with a whole range of behavioral challenges presented by our students. They need more help to meet the needs of these students. They do NOT need arbitrary, bureaucratic rules imposing limitations on who is allowed to support our teachers and students by developing and implementing effective behavior plans. Basic behavioral strategies are ubiquitous tools used widely by parents, teachers and childcare professionals. There are psychologists and other licensed professionals (mental health counselors, clinical social workers, special educators) who live in our state and are well-trained in behavioral interventions. Our schools need to be free to employ these individuals - as well as Licensed Behavior Analysts - to help our children. For this reason, I SUPPORT SB 2925 WITH THE AMENDMENT PROPOSED BY THE HAWAI'I PSYCHOLOGICAL ASSOCIATION.

Sincerely,

Willie Finley Jr.
8087786935

EDU Testimony

From: erynn.fernandez@everyactioncustom.com on behalf of Erynn Fernandez
<erynn.fernandez@everyactioncustom.com>
Sent: Wednesday, February 21, 2018 7:02 AM
To: EDU Testimony
Subject: Please revise SB 3095 to include pesticide disclosure and notification

Dear Hawaii State Senate Committee on Education,

I am writing to urge you to reinsert the mandatory disclosure and notification requirements back into SB 3095. We need mandatory disclosure and notification, along with pilot programs for buffer zones and drift studies around schools. Additional studies on pesticide drift are meaningless without knowledge of what pesticides were and are being applied.

Mandatory disclosure and notification is way overdue for our keiki and the environment. The independent Joint Fact Finding (JFF) Study Group has already recommended mandatory statewide pesticide disclosure and reporting. No more studies are needed. We need mandatory disclosure and notification for there to be meaningful pesticide regulation within the State. Please reinsert the mandatory disclosure and notification provisions of SB 3095 back into the bill.

Thank you for your consideration of my testimony.

Sincerely,
Erynn Fernandez
94 -1054 Paha Pl Waipahu, HI 96797-4458

SB-2925

Submitted on: 2/27/2018 11:02:53 AM

Testimony for EDU on 2/28/2018 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Bonnie Koba	Individual	Oppose	No

Comments:

SB-2925

Submitted on: 2/27/2018 11:00:13 AM

Testimony for EDU on 2/28/2018 2:45:00 PM

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

Comments:

I oppose this bill as written as it weakens protections for children in the school setting and relies on a fail first approach our keiki should not be subjected to. If this bill moves forward, I support the amendments submitted by HABA.

SB-2925

Submitted on: 2/27/2018 11:09:03 AM

Testimony for EDU on 2/28/2018 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
catherine wilson	Testifying for ABA Positive Support Services	Support	No

Comments:

February 27, 2018

Re: **Opposition to HPA amendments.**

To Whom It May Concern:

As a business owner of an ABA provider company, ABA Positive Support Services, INC., I have had the opportunity to see what is occurring in the field of aba and how legislation has made an impact. There are three areas I want to discuss; consistency of services, parents pulling children out of school and the momentum within the DOE to provide aba services.

Consistency of services

There are some special education teachers who took **a** course in applied behavior analysis in their college program and have chosen to continue learning about aba in workshops and online. They are the special education teachers stating that they can do aba. That it is within their cope of practice. There are however, many other special education teachers who did not take classes in applied behavior analysis in their program. They do not choose to obtain continuing education credits in this area.

Parents of children with disabilities are seeing these teachers who **do** know about aba. They see the improvement in language and the decrease in tantrums. But some of these parents have children in classrooms with a special education teacher who **does not** have the training in aba. This is when lawsuits are being filed. It is the inconsistency in services at school. Parents are asking, "why does my neighbor's child get an aba program but my kid, who is at the same school with the same needs, is getting nothing?" Services for children should not be based on luck of the draw. It should be based on licensed professionals.

Sped teachers, clinical psychologist, licensed mental health counselors, marriage and family therapy, etc. do not have to have course work in applied behavior analysis. They

do not have to obtain continue education credits in applied behavior analysis. Licensed behavior analyses do.

Parents are pulling their children out of school

With 3rd party reimbursement of ABA services, children are now able to access ABA therapy afterschool. These services usually take place between 2:30 and 5:30pm through out the week. There are only so many children who can be seen during these 3 hours by RBTs and LBA. Most companies, including my own, have waitlist for this time period. Parents have seen and heard the success stories from aba therapy. They do not want to be on a wait list for the next 9 months but they are not receiving the services at school. Therefore their only option is removing their child from school and receiving the aba at home during the daytime from a private agency.

When parents have to remove their children from school to provide them medically necessary treatment, parents are going to sue the DOE. The number of parents removing their child is growing rapidly. I receive calls from parents daily telling me they want to start services during the day and are remove their child from school.

Momentum

The DOE has been making steps towards providing LBA and RBT in the schools. My company has multiple contracts with the DOE. These contracts include providing LBA and RBT services to students in school and supervising DOE staff to become BCBA's. We currently supervise eight DOE staff for their LBA in the Leeward district. The staff consists of two clinical psychologists and one school psychologist. The DOE has recognized that even clinical psychologists need their BCBA to practice applied behavior analysis effectively. That aba is not in their current scope of practice.

Hawaii has an example within the state of what happens when there are LBA providing services at school. The Windward district put their ACTs through the BCBA course work and assisted them in becoming LBA years ago. This was through the direction and guidance of Aletha Sutton. The last I spoke to Aletha, which was a few months ago, she stated that there were no current lawsuits in her district.

The DOE put out an email on January 24, 2018 stating that they, "requests community input to facilitate the HIDOE's planning activities and development of a request for proposals (RFP) to provide Licensed Behavior Analyst (LBA) and Registered Behavior Technician (RBT) services to eligible HIDOE students statewide." It appears to be the DOE's intent to provide LBAs and RBTs in the school in the near future. It is my concern that not passing this bill with HABAs recommended amendments will cause all this momentum in providing aba services to dissipate.

I stand in strong opposition of the amendments introduced by the Hawaii Psychological Association on this bill. HPA are not behavior analyst. The amendments suggested by the Hawaii Association of Behavior Analyst should be added to the bill.

Thank you for your time.

Catherine Wilson, M.Ed., BCBA, LBA

SB-2925

Submitted on: 2/27/2018 11:09:08 AM

Testimony for EDU on 2/28/2018 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Lauren Wilson	Individual	Support	No

Comments:

Date: February 28, 2018

To: Committee on Education

Senator Michelle N. Kidani, Chair

Senator Kaiali'i Kahele, Vice Chair

Committee on Commerce, Consumer Protection, and Health

Senator Rosalyn H. Baker, Chair

Senator Jill N, Tokuda, Vice Chair

From: Lauren Wilson, LCSW

RE: Testimony in Support of SB. 2925 Relating to the Practice of Behavior Analysis,
with amendments to include licensed social workers

The National Association of Social Workers- Hawai'i (NASW-Hawai'i) strongly supports SB 2925, with amendments that clarify scope of practice for social workers and other qualified mental health professionals. Previous legislation relating to treatments relating to Autism and licensing Board Certified Behavioral Analysts (BCBAs) in Act 199 unintentionally excluded qualified mental health professionals from providing services to children with Autism. This is a disservice to those affected by autism who have every right to choose from an array of qualified providers.

It is important to ensure that licensed social workers as defined in HRS 467E, can continue to provide behavioral analysis services to people on the Autism spectrum. Social workers have training relevant to providing Behavioral Analysis and accurate knowledge and hold strengths-based attitudes about autism and persons on the autism spectrum. Licensed social workers as well as licensed psychologists bring knowledge of other mental health conditions which can serve as a benefit to individuals on the autism spectrum with co-occurring disorders.

I support the recommended amendment from the National Association of Social Workers Hawai'i Chapter, that the following amendment is recommended to ensure choice of a wide array of qualified professionals:

Adding a part (c) to Section 3 (at line 16 on p.4) to read:

This section is not intended to restrict the practice of **licensed psychologists** or **licensed social workers** or their supervisees in the school setting.

I further support the recommended amendment from the Hawai'i Psychological Association:

Changing Section 3(a)(1) on exemptions (at line 1 on p. 5) to read:

An individual working within the scope of practice or 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; and provided further that the ~~[person does not purport to be a behavior analyst]~~ licensed professional and the supervised individual shall not use the title of "licensed behavior analyst"

I firmly believe these proposed amendments will clarify scope of practice to include qualified mental health professionals and avoid creating a further shortage of providers available to the school environment.

Sincerely,

Lauren Wilson, LCSW

Maui County

SB-2925

Submitted on: 2/27/2018 12:43:10 PM

Testimony for EDU on 2/28/2018 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Lori Hull	Individual	Support	No

Comments:

SB 2925

Hearing:

Wednesday, February 28, 2018

2:45pm

Aloha,

As a teacher, I would like to express my appreciation to the Senate Committees on Education and Commerce, Consumer Protection, and Health for hearing SB 2925.

I strongly support SB 2925 that addresses the scope of licensure for individuals engaged in the practice of behavior analysis in a school setting.

Further, I feel that licensure requirements should be limited to practitioners designing and implementing an ABA program for students who exhibit challenging behaviors and for whom less intensive interventions were unsuccessful.

Thank you for this opportunity to submit testimony on this measure.

Sincerely,

Lori Hull

Teacher

Waialua Elementary School/ Waialua Complex Area

EDU Testimony

From: tammy@3.1416.org
Sent: Tuesday, February 27, 2018 1:22 PM
To: EDU Testimony
Subject: Testimony in SUPPORT OF SB2925 with amendments

Tammy Bopp
1134 Kinau St. #701
Honolulu, HI 96814-1110

February 27, 2018

Michelle N. Kidani
Chair, Senate Committee on Education

Dear Senator Kidani:

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Jill N. Tokuda, Vice Chair

Wednesday, February 28, 2018, 2:45pm
Conference Room 229
State Capitol
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Testimony in SUPPORT of SB 2925
RELATING TO THE PRACTICE OF BEHAVIOR ANALYSIS and recommending amendments

Act 199 was put in place by the legislature to credential a new, additional, group of behaviorally trained professionals to help provide higher level behavioral interventions, especially for children with autism. However, instead, this simple professional licensure law has been used to justify severe limitations on the workforce available to support our teachers and students with behavioral challenges. Teachers and administrators in Hawaii's schools are trying hard to cope with a whole range of behavioral challenges presented by our students. They need more help to meet the needs of these students. They do NOT need arbitrary, bureaucratic rules imposing limitations on who is allowed to support our teachers and students by developing and implementing effective behavior plans. Basic behavioral strategies are ubiquitous tools used widely by parents, teachers and childcare professionals. There are psychologists and other licensed professionals (mental health counselors, clinical social workers, special educators) who live in our state and are well-trained in behavioral interventions. Our schools need to be free to employ these individuals - as well as Licensed Behavior Analysts - to help our children. For this reason, I SUPPORT SB 2925 WITH THE AMENDMENT PROPOSED BY THE HAWAII' I PSYCHOLOGICAL ASSOCIATION.

Sincerely,

Tammy R. Bopp, Psy.D.
(808) 282-7308

SB-2925

Submitted on: 2/27/2018 1:43:54 PM

Testimony for EDU on 2/28/2018 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Jeanette Perez	Individual	Support	No

Comments:

Aloha,

My name is Jeanette Perez and I am a licensed Special Education teacher on the Island of Hawaii. I worked as a DOE teacher for 5 years, the last two of which were in a school designated (not district) Autism classroom. I was the most highly trained teacher to work with our students on the Autism spectrum at this school. When I heard about Chapter 465D, I quickly searched all I could about Applied Behavior Analysis. I knew that if I wanted to continue to provide my student with a quality meaningful education, I needed to know more about ABA. I needed to know it myself because the DOE was not providing us teachers access to BCBA's.

Though some are arguing that Applied Behavior Analysis is done by everyone on a daily basis, I argue that it is not being done correctly and within ethical standards. As I look back at my days in the classroom, I do so with a heavy heart because I wish I knew then, what I know now in regard to ABA. Had I been given access to a BCBA by the DOE I would still be in the classroom today.

The language of this bill is concerning as is. I SUPPORT SB2925 WITH AMENDMENTS AS PROPOSED BY HABA.

I urge you to pass SB2925 tomorrow, with HABA's amendments and uphold the expectation for ABA in DOE.

Thank you for your time,

Jeanette Perez

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH
Senator Rosalyn H. Baker, Chair
Senator Jill N. Tokuda, Vice Chair
Wednesday, February, 28, 2018 2:45 pm
Conference Room 229, State Capitol

**SB 2925 Relating to the Practice of Behavior Analysis
SUPPORT w/amendments as proposed by HABA**

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

I worry about the Department's resistance to providing applied behavior analysis (ABA) services. What appears to be a systemic, philosophical stance against collaborating with Licensed Behavior Analysts and Registered Behavior Technicians (RBTs), places our most vulnerable keiki directly in harm's way. The Individuals with Disabilities Education Act (I.D.E.A.) is a federal law that requires a proactive approach whenever behaviors impede the learning of a student or those around them. The current language appears to violate several federal laws: I.D.E.A., Free and Appropriate Education (F.A.P.E.), and the Americans with Disabilities Act (ADA).

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.

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.

I respectfully request that you consider the language as submitted by the Hawai'i Association for Behavior Analysis (HABA). I believe this language provides psychologists, teachers, and caregivers the necessary protections, while also protecting our keiki and other recipients of ABA services.

Mahalo for your time and consideration.

COMMITTEE ON EDUCATION
Senator Michelle N. Kidani, Chair
Senator Kaiali'i Kahele, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH
Senator Rosalyn H. Baker, Chair
Senator Jill N. Tokuda, Vice Chair
Wednesday, February, 28, 2018 2:45 pm
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**SB 2925 Relating to the Practice of Behavior Analysis
SUPPORT w/amendments as proposed by HABA**

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

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**SB 2925 Relating to the Practice of Behavior Analysis
SUPPORT w/amendments as proposed by HABA**

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

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Senator Jill N. Tokuda, Vice Chair
Wednesday, February, 28, 2018 2:45 pm
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**SB 2925 Relating to the Practice of Behavior Analysis
SUPPORT w/amendments as proposed by HABA**

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

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Wednesday, February, 28, 2018 2:45 pm
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**SB 2925 Relating to the Practice of Behavior Analysis
SUPPORT w/amendments as proposed by HABA**

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.

I respectfully request that you consider the language as submitted by the Hawai'i Association for Behavior Analysis (HABA). I believe this language provides psychologists, teachers, and caregivers the necessary protections, while also protecting our keiki and other recipients of ABA services.

Mahalo for your time and consideration.

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Wednesday, February, 28, 2018 2:45 pm
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**SB 2925 Relating to the Practice of Behavior Analysis
SUPPORT w/amendments as proposed by HABA**

Linda Barton
92-1491 Aliinui Dr. | Oahu
lindaasolla@gmail.com

I worry about the Department's resistance to providing applied behavior analysis (ABA) services. What appears to be a systemic, philosophical stance against collaborating with Licensed Behavior Analysts and Registered Behavior Technicians (RBTs), places our most vulnerable keiki directly in harm's way. The Individuals with Disabilities Education Act (I.D.E.A.) is a federal law that requires a proactive approach whenever behaviors impede the learning of a student or those around them. The current language appears to violate several federal laws: I.D.E.A., Free and Appropriate Education (F.A.P.E.), and the Americans with Disabilities Act (ADA).

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**SB 2925 Relating to the Practice of Behavior Analysis
SUPPORT w/amendments as proposed by HABA**

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

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**SB 2925 Relating to the Practice of Behavior Analysis
SUPPORT w/amendments as proposed by HABA**

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.

I worry about the Department's resistance to providing applied behavior analysis (ABA) services. What appears to be a systemic, philosophical stance against collaborating with Licensed Behavior Analysts and Registered Behavior Technicians (RBTs), places our most vulnerable keiki directly in harm's way. The Individuals with Disabilities Education Act (I.D.E.A.) is a federal law that requires a proactive approach whenever behaviors impede the learning of a student or those around them. The current language appears to violate several federal laws: I.D.E.A., Free and Appropriate Education (F.A.P.E.), and the Americans with Disabilities Act (ADA).

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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.

I worry about the Department's resistance to providing applied behavior analysis (ABA) services. What appears to be a systemic, philosophical stance against collaborating with Licensed Behavior Analysts and Registered Behavior Technicians (RBTs), places our most vulnerable keiki directly in harm's way. The Individuals with Disabilities Education Act (I.D.E.A.) is a federal law that requires a proactive approach whenever behaviors impede the learning of a student or those around them. The current language appears to violate several federal laws: I.D.E.A., Free and Appropriate Education (F.A.P.E.), and the Americans with Disabilities Act (ADA).

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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

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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 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.

I worry about the Department's resistance to providing applied behavior analysis (ABA) services. What appears to be a systemic, philosophical stance against collaborating with Licensed Behavior Analysts and Registered Behavior Technicians (RBTs), places our most vulnerable keiki directly in harm's way. The Individuals with Disabilities Education Act (I.D.E.A.) is a federal law that requires a proactive approach whenever behaviors impede the learning of a student or those around them. The current language appears to violate several federal laws: I.D.E.A., Free and Appropriate Education (F.A.P.E.), and the Americans with Disabilities Act (ADA).

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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.

I worry about the Department's resistance to providing applied behavior analysis (ABA) services. What appears to be a systemic, philosophical stance against collaborating with Licensed Behavior Analysts and Registered Behavior Technicians (RBTs), places our most vulnerable keiki directly in harm's way. The Individuals with Disabilities Education Act (I.D.E.A.) is a federal law that requires a proactive approach whenever behaviors impede the learning of a student or those around them. The current language appears to violate several federal laws: I.D.E.A., Free and Appropriate Education (F.A.P.E.), and the Americans with Disabilities Act (ADA).

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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. 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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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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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.

I worry about the Department's resistance to providing applied behavior analysis (ABA) services. What appears to be a systemic, philosophical stance against collaborating with Licensed Behavior Analysts and Registered Behavior Technicians (RBTs), places our most vulnerable keiki directly in harm's way. The Individuals with Disabilities Education Act (I.D.E.A.) is a federal law that requires a proactive approach whenever behaviors impede the learning of a student or those around them. The current language appears to violate several federal laws: I.D.E.A., Free and Appropriate Education (F.A.P.E.), and the Americans with Disabilities Act (ADA).

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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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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. I worry about the Department's resistance to providing applied behavior analysis (ABA) services. What appears to be a systemic, philosophical stance against collaborating with Licensed Behavior Analysts and Registered Behavior Technicians (RBTs), places our most vulnerable keiki directly in harm's way. The Individuals with Disabilities Education Act (I.D.E.A.) is a federal law that requires a proactive approach whenever behaviors impede the learning of a student or those around them. The current language appears to violate several federal laws: I.D.E.A., Free and Appropriate Education (F.A.P.E.), and the Americans with Disabilities Act (ADA).

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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.

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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.

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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.

I worry about the Department's resistance to providing applied behavior analysis (ABA) services. What appears to be a systemic, philosophical stance against collaborating with Licensed Behavior Analysts and Registered Behavior Technicians (RBTs), places our most vulnerable keiki directly in harm's way. The Individuals with Disabilities Education Act (I.D.E.A.) is a federal law that requires a proactive approach whenever behaviors impede the learning of a student or those around them. The current language appears to violate several federal laws: I.D.E.A., Free and Appropriate Education (F.A.P.E.), and the Americans with Disabilities Act (ADA).

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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. I worry about the Department's resistance to providing applied behavior analysis (ABA) services. What appears to be a systemic, philosophical stance against collaborating with Licensed Behavior Analysts and Registered Behavior Technicians (RBTs), places our most vulnerable keiki directly in harm's way. The Individuals with Disabilities Education Act (I.D.E.A.) is a federal law that requires a proactive approach whenever behaviors impede the learning of a student or those around them. The current language appears to violate several federal laws: I.D.E.A., Free and Appropriate Education (F.A.P.E.), and the Americans with Disabilities Act (ADA).

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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
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rachelsammis@gmail.com

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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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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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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 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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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 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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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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Olympia Frink - PARENT
66-916 Kuewa Dr Waiialua, 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.

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. 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 HODOE access to potentially millions of dollars in federal funds for our keiki.

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Kenny Frink - PARENT
66-916 Kuewa Dr Waiialua, HI 96791
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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

I worry about the Department's resistance to providing applied behavior analysis (ABA) services. What appears to be a systemic, philosophical stance against collaborating with Licensed Behavior Analysts and Registered Behavior Technicians (RBTs), places our most vulnerable keiki directly in harm's way. The Individuals with Disabilities Education Act (I.D.E.A.) is a federal law that requires a proactive approach whenever behaviors impede the learning of a student or those around them. The current language appears to violate several federal laws: I.D.E.A., Free and Appropriate Education (F.A.P.E.), and the Americans with Disabilities Act (ADA).

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Leanne Nagai
2471 Auhuhu Street | Oahu
nagai.leanne@gmail.com

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

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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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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,

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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.

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. 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 2925 Relating to the Practice of Behavior Analysis
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Aimee Watkins
Po box 1237 Kapaau HI 96755
aimeemalialani@hotmail.com

I worry about the Department's resistance to providing applied behavior analysis (ABA) services. What appears to be a systemic, philosophical stance against collaborating with Licensed Behavior Analysts and Registered Behavior Technicians (RBTs), places our most vulnerable keiki directly in harm's way. The Individuals with Disabilities Education Act (I.D.E.A.) is a federal law that requires a proactive approach whenever behaviors impede the learning of a student or those around them. The current language appears to violate several federal laws: I.D.E.A., Free and Appropriate Education (F.A.P.E.), and the Americans with Disabilities Act (ADA).

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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. I worry about the Department's resistance to providing applied behavior analysis (ABA) services. What appears to be a systemic, philosophical stance against collaborating with Licensed Behavior Analysts and Registered Behavior Technicians (RBTs), places our most vulnerable keiki directly in harm's way. The Individuals with Disabilities Education Act (I.D.E.A.) is a federal law that requires a proactive approach whenever behaviors impede the learning of a student or those around them. The current language appears to violate several federal laws: I.D.E.A., Free and Appropriate Education (F.A.P.E.), and the Americans with Disabilities Act (ADA).

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

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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
ddecoito808@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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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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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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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.

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. 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),

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as Chapter 465-D states, would allow the HIDEOE access to potentially millions of dollars in federal funds for our keiki.

I respectfully request that you consider the language as submitted by the Hawai'i Association for Behavior Analysis (HABA). I believe this language provides psychologists, teachers, and caregivers the necessary protections, while also protecting our keiki and other recipients of ABA services.

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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.

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. 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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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.

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. 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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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.

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. 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 HODOE access to potentially millions of dollars in federal funds for our keiki. I respectfully request that you consider the language as submitted by the Hawai'i Association for Behavior Analysis (HABA). I believe this language provides psychologists, teachers, and

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caregivers the necessary protections, while also protecting our keiki and other recipients of ABA services. 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.

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. 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 HDOE access to potentially millions of dollars in federal funds for our keiki.

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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. I worry about the Department's resistance to providing applied behavior analysis (ABA) services. What appears to be a systemic, philosophical stance against collaborating with Licensed Behavior Analysts and Registered Behavior Technicians (RBTs), places our most vulnerable keiki directly in harm's way. The Individuals with Disabilities Education Act (I.D.E.A.) is a federal law that requires a proactive approach whenever behaviors impede the learning of a student or those around them. The current language appears to violate several federal laws: I.D.E.A., Free and Appropriate Education (F.A.P.E.), and the Americans with Disabilities Act (ADA).

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.

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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

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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.

I respectfully request that you consider the language as submitted by the Hawai'i Association for Behavior Analysis (HABA). I believe this language provides psychologists, teachers, and caregivers the necessary protections, while also protecting our keiki and other recipients of ABA services.

Mahalo for your time and consideration.

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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 maintains 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 removed 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 need. 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.

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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. 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.

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. 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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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. 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

I worry about the Department's resistance to providing applied behavior analysis (ABA) services. What appears to be a systemic, philosophical stance against collaborating with Licensed Behavior Analysts and Registered Behavior Technicians (RBTs), places our most vulnerable keiki directly in harm's way. The Individuals with Disabilities Education Act (I.D.E.A.) is a federal law that requires a proactive approach whenever behaviors impede the learning of a student or those around them. The current language appears to violate several federal laws: I.D.E.A., Free and Appropriate Education (F.A.P.E.), and the Americans with Disabilities Act (ADA).

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Mahalo for your time and consideration.

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**SB 2925 Relating to the Practice of Behavior Analysis
SUPPORT w/amendments as proposed by HABA**

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

I worry about the Department's resistance to providing applied behavior analysis (ABA) services. What appears to be a systemic, philosophical stance against collaborating with Licensed Behavior Analysts and Registered Behavior Technicians (RBTs), places our most vulnerable keiki directly in harm's way. The Individuals with Disabilities Education Act (I.D.E.A.) is a federal law that requires a proactive approach whenever behaviors impede the learning of a student or those around them. The current language appears to violate several federal laws: I.D.E.A., Free and Appropriate Education (F.A.P.E.), and the Americans with Disabilities Act (ADA).

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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.

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. 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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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. 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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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

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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.

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."

I respectfully request that you consider the language as submitted by the Hawai'i Association for Behavior Analysis (HABA). I believe this language provides psychologists, teachers, and caregivers the necessary protections, while also protecting our keiki and other recipients of ABA services.

Mahalo for your time and consideration.

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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 witnesses 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 BCBAs for guidance.

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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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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. 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
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 2925 Relating to the Practice of Behavior Analysis
SUPPORT w/amendments as proposed by HABA**

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. 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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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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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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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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senormead@yahoo.com

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

I worry about the Department's resistance to providing applied behavior analysis (ABA) services. What appears to be a systemic, philosophical stance against collaborating with Licensed Behavior Analysts and Registered Behavior Technicians (RBTs), places our most vulnerable keiki directly in harm's way. The Individuals with Disabilities Education Act (I.D.E.A.) is a federal law that requires a proactive approach whenever behaviors impede the learning of a student or those around them. The current language appears to violate several federal laws: I.D.E.A., Free and Appropriate Education (F.A.P.E.), and the Americans with Disabilities Act (ADA).

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Mahalo for your time and consideration.

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**SB 2925 Relating to the Practice of Behavior Analysis
SUPPORT w/amendments as proposed by HABA**

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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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.

I worry about the Department's resistance to providing applied behavior analysis (ABA) services. What appears to be a systemic, philosophical stance against collaborating with Licensed Behavior Analysts and Registered Behavior Technicians (RBTs), places our most vulnerable keiki directly in harm's way. The Individuals with Disabilities Education Act (I.D.E.A.) is a federal law that requires a proactive approach whenever behaviors impede the learning of a student or those around them. The current language appears to violate several federal laws: I.D.E.A., Free and Appropriate Education (F.A.P.E.), and the Americans with Disabilities Act (ADA).

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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. 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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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. 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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operationivy9@hotmail.com

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

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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. 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. 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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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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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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Mahalo for your time and consideration.

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Wednesday, February, 28, 2018 2:45 pm
Conference Room 229, State Capitol

**SB 2925 Relating to the Practice of Behavior Analysis
SUPPORT w/amendments as proposed by HABA**

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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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. 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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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. 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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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

I worry about the Department's resistance to providing applied behavior analysis (ABA) services. What appears to be a systemic, philosophical stance against collaborating with Licensed Behavior Analysts and Registered Behavior Technicians (RBTs), places our most vulnerable keiki directly in harm's way. The Individuals with Disabilities Education Act (I.D.E.A.) is a federal law that requires a proactive approach whenever behaviors impede the learning of a student or those around them. The current language appears to violate several federal laws: I.D.E.A., Free and Appropriate Education (F.A.P.E.), and the Americans with Disabilities Act (ADA).

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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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