

NOTICE OF INTENT
Department of Health and Hospitals
Behavior Analyst Board
(Revised April 8, 2016)

Supervision Requirements for Registered Line Technicians
(LAC 46:VIII.Chapter 5)

Notice is hereby given in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq, the Louisiana Behavior Analyst Board intends to re-promulgate §502, §503, and §504 and promulgate §509, §511, §513, §515, and §517 under Subchapter B.

Re-promulgation is necessary to renumber §502, §503, and §504 to odd numbers to accommodate any future additions to rule. §501 D. 2. is re-promulgated to correct an error changing LBA to SCABA. §505, formerly §503, I. is re-promulgated changing 30 days to 10 calendar days. §507, formerly §504, A. 8. is re-promulgated changing 30 days to 10 calendar days. §509, §511, §513, §515, and §517 under Subchapter B are promulgated as Supervision Requirements for Registered Line Technicians.

Title 37

PROFESSIONAL AND OCCUPATIONAL STANDARDS

Part VIII. Behavior Analysts

Chapter 5. SUPERVISION REQUIREMENTS

Subchapter A. Supervision Requirements for State Certified Assistant Behavior Analysts [SCABA]

§501. Supervision – General

A. A state certified assistant behavior analyst [hereinafter referred to as "SCABA"] shall assist a licensed behavior analyst [hereinafter referred to as "LBA"] in the delivery of applied behavior analysis in compliance with all state and federal statutes, regulations, and rules.

B. The SCABA may only perform services under the direct supervision of a LBA as set forth in this Rule.

C. Supervision shall be an interactive process between the LBA and SCABA. It shall be more than peer review or co-signature.

D. There shall be a written supervisory agreement between the LBA and the SCABA that shall address:

1. the domains of competency within which services may be provided by the SCABA; and
2. the nature and frequency of the supervision of the practice of the ~~LBA~~ SCABA by the LBA.

E. A copy of the written supervisory agreement must be maintained by the LBA and the SCABA and made available to the board upon request.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3706-R.S. 37:3708.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Behavior Analysts Board, LR 40:1933 (October 2014), repromulgated LR 42:

§503. Supervision – Requirements

[Formerly §502]

A. The manner of supervision shall depend on the treatment setting, patient/client caseload, and the competency of the SCABA. At a minimum, for full-time SCABAS, working at least 30 hours per week, a face-to-face supervisory meeting shall occur not less than once every four weeks, with each supervisory session lasting no less than one hour for full-time SCABAS. The qualifying supervision activities may include:

1. direct, real-time observation of the SCABA implementing behavior analytic assessment and intervention procedures with clients in natural environments and/or training others to implement them, with feedback from the supervising LBA; and
2. one-to-one real-time interactions between the supervising LBA and the SCABA to review and discuss assessment procedures, assessment outcomes, possible intervention procedures and materials, data collection procedures, intervention outcome data, modifications of intervention procedures, published research, ethical and professional standards and guidelines, professional development needs and opportunities, and relevant laws, regulations, and policies.

B. More frequent supervisory activities may be necessary as determined by the LBA or

SCABA dependent on the level of expertise displayed by the SCABA, the practice setting, and/or the complexity of the patient/client caseload. These additional supervisory activities, however, do not qualify towards the once per month requirements. The non-qualifying additional supervision activities may include, but are not limited to:

1. real-time interactions between a supervising LBA and a group of SCABAS to review and discuss assessment and treatment plans and procedures, client assessment and progress data and reports, published research, ethical and professional standards and guidelines, professional development needs and opportunities, and relevant laws, regulations, and policies; and

2. informal interactions between supervising LBAs and SCABAs via telephone, electronic mail, and other written communication.

C. Supervision requirements for part-time practice, less than 30 hours per week, may be modified at the discretion of the board upon approval of the submitted plan. Additional modifications of the format, frequency, or duration of supervision may be submitted for approval by the board.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3706-R.S. 37:3708.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Behavior

Analysts Board, LR 40:1933 (October 2014), repromulgated LR 42:

§505. Supervisor Responsibilities

[Formerly §503.]

A. Qualifying supervision shall ensure that the quality of the services provided by the SCABA to his employer and to consumers is in accordance with accepted standards, including the guidelines for responsible conduct for behavior analysts and professional disciplinary and ethical standards for the Behavior Analyst Certification Board or other nation credentialing bodies as approved by the board.

B. Qualifying supervision shall guide the professional development of the SCABA in ways that improve the practitioner's knowledge and skills.

C. The LBA or the supervisor's alternate LBA designee must be available for immediate consultation with the assistant behavior analyst. The supervisor need not be physically present or on the premises at all times.

D. The LBA is ultimately responsible and accountable for client care and outcomes under his clinical supervision. The supervising LBA shall:

1. be licensed by the board as a LBA;

2. not be under restriction or discipline from any licensing board or jurisdiction;

3. not have more than 10 full-time-equivalent SCABAs under his/her supervision at one time without prior approval by the board;

4. provide at least one hour of face-to-face, direct supervision per month per each SCABA.

5. be responsible for all referrals of the patient/client;

6. be responsible for completing the patient's evaluation/assessment. The SCABA may contribute to the screening and/or evaluation process by gathering data, administering standardized tests, and reporting observations. The SCABA may not evaluate independently or initiate treatment before the supervising LBA's evaluation/assessment; and

7. be responsible for developing and modifying the patient's treatment plan. The treatment plan must include goals, interventions, frequency, and duration of treatment. The SCABA may contribute to the preparation, implementation, and documentation of the treatment plan. The supervising behavior analyst shall be responsible for the outcome of the treatment plan and assigning of appropriate intervention plans to the SCABA within the competency level of the SCABA.

E. Be responsible for developing the patient's discharge plan. The SCABA may contribute to the preparation, implementation, and documentation of the discharge plan. The supervising LBA shall be responsible for the outcome of the discharge plan and assigning of appropriate tasks to the SCABA within the competency level of the SCABA.

F. Ensure that all patient/client documentation becomes a part of the permanent record.

G. Conduct at least one on-site observation per client per month.

H. The supervisor shall ensure that the SCABA provides applied behavior analysis as defined in R.S. 37:3702 appropriate to and consistent with his/her education, training, and experience.

I. Inform the board of the termination in a supervisory relationship within ~~30~~ **10 calendar** days.

AUTHORITY NOTE: 37:3706-R.S. 37:3708.

HISTORICAL NOTE: Health and Hospitals, Behavior Analysts Board, LR 40:1934 (October 2014), repromulgated LR 42:

§507. SCABA Responsibilities

[Formerly §504.]

A. The supervising LBA has the overall responsibility for providing the necessary supervision to protect the health and welfare of the patient/client receiving treatment from an SCABA. However, this does not absolve the SCABA from his/her professional responsibilities. The SCABA shall exercise sound judgment and provide adequate care in the performance of duties. The SCABA shall:

1. not initiate any patient/client treatment program or modification of said program until the behavior analyst has evaluated, established a treatment plan, and consulted with the LBA;
2. not perform an evaluation/assessment, but may assist in the data gathering process and administer specific assessments where clinical competency has been demonstrated, under the direction of the LBA;
3. not analyze or interpret evaluation data;
4. monitor the need for reassessment and report changes in status that might warrant reassessment or referral;
5. immediately suspend any treatment intervention that appears harmful to the patient/client and immediately notify the supervising LBA; and
6. ensure that all patient/client documentation prepared by the SCABA becomes a part of the permanent record;
7. meet these supervision requirements, even if they are not currently providing behavior analysis services. If not currently providing behavior analysis services, supervision from the supervising LBA may focus on guiding the development and maintenance of the SCABA's professional knowledge and skills and remaining current with the professional literature in the field; and
8. inform the board of the termination in a supervisory relationship within ~~30~~ 10

calendar days.

AUTHORITY NOTE: 37:3706-R.S. 37:3708.

HISTORICAL NOTE: Health and Hospitals, Behavior Analysts Board, LR 40:1934 (October 2014), repromulgated LR 42:

Subchapter B. Supervision Requirements for Registered Line Technicians [RLT]

§509. Supervision – General

A. A Registered Line Technician [hereinafter referred to as “RLT”] shall be responsible for implementing, not designing, the behavior plans designed by their supervising Licensed Behavior Analyst [hereinafter referred to as “LBA”].

B. The RLT may only perform behavior analytic services under the direct supervision of a LBA as set forth in this rule.

C. Supervision can be conducted by either the LBA or State Certified Assistant Behavior analyst [hereinafter referred to as “SCABA”].

D. Supervision shall be an interactive process between the LBA or SCABA and RLT. It shall be more than peer review or co-signature. The supervisor and supervisee should maintain appropriate documentation on all supervision activities.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3706-R.S.> 37:3708.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Behavior Analysts Board, LR 42:

§511. Supervision Requirements

A. The manner of supervision shall depend on the treatment setting, client caseload, and the competency of the RLT. The qualifying supervision must include the following criteria:

1. The LBA must ensure ongoing supervision for a minimum of 5 percent of the hours the RLT spends providing applied behavior-analytic services per month for the clients under their jurisdiction.
2. Supervision must include:
 - a. At least two face-to-face contacts per month with at least one being real time 1:1 contact.
 - b. At least one on-site contact with each RLT/Client dyad every two months.
3. The LBA may delegate supervisory responsibilities to a SCABA under

their direct supervision.

4. Other supervisory activities may include real-time interactions between a supervising LBA or SCABA and a group of RLTs to review and discuss assessment and treatment plans and procedures, client assessment and progress data and reports, published research, ethical and professional standards and guidelines, professional development needs and opportunities, and relevant laws, regulations, and policies.

5. In the case of multiple supervisors, the RLT must be supervised by the LBA or SCABA for the clients assigned under each supervisor's jurisdiction.

6. RLT's who provide substitute services will not be subject to the twice-monthly on-site contact supervisory contact. Substitute services are defined as eight hours or less per client per month. However, it is expected that the RLT will be provided with essential information and assistance pertinent to the client's case. This does not exempt the RLT from requirement 1a. [above] for the 5 percent of monthly supervision time.

B. More frequent supervisory activities may be necessary as determined by the LBA, SCABA, or RLT dependent on the level of expertise displayed by the RLT, the practice setting, and/or the complexity of the client caseload. Supervision should occur at a schedule consistent with evidence-based practice and sufficient to ensure competence in the delivery of each of the client's current treatment programs. These additional supervisory activities, however, do not qualify towards minimum supervision requirements. The non-qualifying additional supervision activities may include, but are not limited to: Informal interactions between supervising LBA or SCABA and RLT via telephone, electronic mail, and other written or electronic communications.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3706-R.S> 37:3708.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Behavior

Analysts Board, LR 42:

§513. Supervision Documentation

A. All supervision should be documented and must contain a minimum of the client's name, RLT's name, date, time, brief description of supervision activities, and initials of both RLT and LBA.

B. All Supervision documentation should be kept a minimum of six years.

C. Random Audits will be conducted.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3706-R.S> 37:3708.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Behavior

Analysts Board, LR 42:

§515. Supervisor Responsibilities

A. Supervision shall ensure that the quality of the services provided by the RLT to his employer and to consumers is in accordance with accepted standards, including the Guidelines for Responsible Conduct for Behavior Analysts and Professional Disciplinary and Ethical Standards for the Behavior Analyst Certification Board or other national credentialing bodies as approved by the board.

B. Supervision shall guide continuing professional development of the RLT in ways that improve the practitioner's knowledge and skills.

C. It is the responsibility of the designated supervisor to determine which tasks an RLT may perform as a function of his or her training, experience, and competence.

D. The LBA, SCABA, or the supervisor's alternate LBA or SCABA designee must be available for immediate consultation with the RLT. The supervisor need not be physically present or on the premises at all times.

E. The LBA is ultimately responsible and accountable for client care and outcomes under his clinical supervision. The supervising LBA shall:

1. be licensed by the board as a LBA;

2. not be under restriction or discipline from any licensing board or jurisdiction;

3. provide the minimum qualifying supervision requirements as stated in section,

however more supervision may be necessary and should be conducted on a schedule consistent with evidence-based practice and sufficient to ensure competence in the delivery of each of the client's current treatment programs;

4. be responsible for all referrals of the client;

5. be responsible for completing the client's evaluation/assessment. The RLT may contribute to the screening and/or evaluation process by gathering data and reporting observations. The

RLT may not evaluate independently or initiate treatment before the supervising LBA's evaluation/assessment;

6. be responsible for developing and modifying the client's treatment plan. The treatment plan must include goals, interventions, frequency, and duration of treatment. The RLT may contribute to the preparation, implementation, and documentation of the treatment plan. The supervising behavior analyst shall actively review all aspects of the RLTs contributions and be responsible for the outcome of the treatment plan and assigning of appropriate intervention plans to the RLT within the competency level of the RLT;

7. be responsible for developing the client's discharge plan. The RLT may contribute to the preparation, implementation, and documentation of the discharge plan. The supervising LBA shall be responsible for the outcome of the discharge plan and assigning of appropriate tasks to the RLT within the competency level of the RLT;

8. inform the board of the termination in a supervisory relationship within 10 calendar days;

9. ensure that all client documentation becomes a part of the permanent record; and

10. if a RLT is not currently providing behavior analysis services, proper documentation must be maintained on reasons for not meeting qualifying supervision requirements.

F. The LBA is ultimately responsible and accountable for client care and outcomes under his clinical supervision. The supervising LBA shall:

1. be licensed by the board as a LBA;

2. not be under restriction or discipline from any licensing board or jurisdiction;

3. provide the minimum qualifying supervision requirements as stated in section, however more supervision may be necessary and should be conducted on a schedule consistent with evidence-based practice and sufficient to ensure competence in the delivery of each of the client's current treatment programs;

4. ensure that all client documentation becomes a part of the permanent record; and

5. if a RLT is not currently providing behavior analysis services, proper documentation must be maintained on the reasoning for not meeting qualifying supervision requirements.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3706-R.S> 37:3708.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Behavior

Analysts Board, LR 42:

§517. RLT Responsibilities

A. The supervising LBA has the overall responsibility for providing the necessary supervision to protect the health and welfare of the client receiving treatment from an RLT. However, this does not absolve the RLT from his/her professional responsibilities. The RLT shall exercise sound judgment and provide adequate care in the performance of duties. The RLT shall:

1. be primarily responsible for the direct implementation of skill acquisition and behavior-reduction plans developed by the supervisor;

2. not initiate any client treatment program or modification of said program until the behavior analyst has evaluated, established a treatment plan, and consulted with the LBA;

3. not perform an evaluation/assessment, but may assist in the data gathering process and administer specific assessments where clinical competency has been demonstrated, under the direction of the LBA;

4. not analyze or interpret evaluation data;

5. immediately contact the supervising LBA or SCABA if any treatment intervention that appears harmful to the client;

6. ensure that all client documentation completed by the RLT becomes a part of the permanent record;

7. if they are not currently providing behavior analysis services, proper documentation must be maintained; and

8. inform the board of the termination in a supervisory relationship within 10 calendar days.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:3706-R.S> 37:3708.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Behavior Analysts Board, LR 42:

Family Impact Statement

The Behavior Analyst Board hereby issues this Family Impact Statement as set forth in R.S.49:972. The proposed rule and adoption of the rule related to supervision requirements is being implemented to guarantee the licensing authority can safeguard the public welfare of this state and will have no known foreseeable impact on the stability of the family; authority and rights of parents regarding the education and supervision of their children; functioning of the family; family earnings and family budget; behavior and personality responsibility of children; or the ability of the family or a local government to perform the function as contained in the proposed rule.

Poverty Impact Statement

The proposed modifications regulate supervision of State Certified Assistant Behavior Analysts and Registered Line Technicians in the interest of health, safety, and the welfare of the public. The rules do not have any known or foreseeable impact on any child, individual or family as defined by R.S. 49:973.B. Specifically, there is no known or foreseeable effect on: household income, assets, and financial security; early childhood development and preschool through postsecondary education development; employment and workforce development; taxes and tax credits; or child and dependent care, housing, health care, nutrition, transportation, and utilities assistance.

Provider Impact Statement

The proposed rules do not have any known or foreseeable impact on providers as defined by HCR 170 of 2014 Regular Legislative Session. Specifically, there is no known or foreseeable effect on: the staffing level requirements or qualifications required to provide the same level of service; the total direct or indirect cost to the providers to provide the same level of service; or the overall ability of the provider to provide the same level of service.

Public Comments

Interested persons may submit written comments to Rhonda Boe, Executive Director, 8706 Jefferson Highway, Suite B, Baton Rouge, Louisiana 70809. All comments must be submitted by 12 noon on May 9, 2016.

Rhonda Boe
Executive Director