



ABAT™ Practice Analysis Summary

The Qualified Applied Behavior Analysis Credentialing Board™(QABA™) conducted a large scale job analysis to identify and confirm the competency areas of the paraprofessional delivering Applied Behavior Analysis treatment and support to those individuals diagnosed with Autism and related disorders. This process began informally in 2008 and continued through January 2012. In January 2012, formal surveys of candidates and subject matter experts were conducted and continue to June 2014. The information in this report is based on the data from 2012 to present. In conducting this study, the QABA's goal was to define the competency areas, knowledge and skills, which needed to be assessed and demonstrated by the paraprofessional who was delivering ABA Treatment and support.

Although there have been several job analyses on the behavioral health paraprofessional workforce including the direct support professional workforce supporting those individuals with a wide-range of intellectual and developmental disabilities, this is the first one specifically looking at the paraprofessional providing Applied Behavior Analysis treatment and support to individuals diagnosed with Autism. In conducting the study, the QABA™ chose methods that adhered to established standards in conducting a job analysis study. These principles and procedures outlined in federal regulation (Uniform Guidelines on Employee Selection Procedures) and those of the National Commission for Certifying Agencies (NCCA, 2010) were used through this job analysis study.

This job analysis study provided the basis for content validity as the primary process for identifying and confirming existing research on the competency areas needed for proficient performance as an Applied Behavior Analysis Technician™ (ABAT™). This job analysis documents a sound linkage between the professional knowledge and the critical responsibilities and tasks of the ABAT.

This job analysis consisted of the following steps:

1. Initial Development and Validation: The identified QABA™ team researched previous related job analysis with the human services sector to confirm and refine the core competencies of the ABAT™. This research focused on studies of the standardization of specific core competencies

of the direct support professional within the human services field. The following were the areas of research:

- a. The Direct Support Professional (DSP) within the Intellectual and Developmental Disabilities Sector
 - b. The DSP within the Behavioral Health Sector
 - c. Best practice guidelines for Individuals with Autism
 - d. Best practice guidelines for providing Applied Behavior Analysis Treatment and Support
2. Validation Study: A qualified and representative sample of published professionals who have expertise in Autism, Applied Behavior Analysis and Service Providers. (Certified Behavior Analysts, Licensed Psychologists, Educators) reviewed and validated the competency areas for the ABAT™ defined by the QABA™'s initial development and validation based on the research of established competencies.
3. Development of Competency Areas: Based on the ratings and confirmation gathered from the 7 of the 11 professionals initially involved in gathering the research and information, the competency areas were refined and aligned with the current established best practices. Within each core competency area, specific domain competencies were identified and confirmed.
4. Validation of Competency Areas: Using the defined core and domain competency areas developed and outlined by the committee of SMEs, the core and domain competencies were validated by collecting data from Job incumbents (i.e., those who hold the ABAT certification).
5. Development of the Preliminary ABAT™ Test Specifications: Using the data (i.e., frequency and "essentialness") from the 1164 survey respondents the initial test specifications (i.e., the number of test questions that are allocated to each standard) were developed and finalized. Once the preliminary test specifications were produced, the group of subject matter experts reviewed the data. This was facilitated by the QABA™'s Psychometric Consultant in August 2015. Based on this review and the new test specifications a new ABAT™ exam form will be developed and will be available for administration in November 2015.

The ABAT™ Preliminary Test Specifications based on the Job Analysis Data can be found in Appendix B.

The current Applied Behavior Analysis Technician™ (ABAT™) examination form consists of 68 questions. The mean, standard deviation, reliability coefficient and standard error of measurement reported here are based on all 68 items (see Table 1). The table shows that the mean raw score was 80.92%. The median for the examination was 82%. The standard deviation of the examination was 8.23.

The Kuder-Richardson-20 (or KR-20) was .738. This reflects a moderate degree of internal consistency, which may be a reflection of test length. It is important, however, to understand the rationale for the current 68-test item length of the exam.

Summary of Results:

The ABAT™ job analysis for Applied Behavior Analysis Technicians™ was conducted to identify and confirm the competency areas of the paraprofessional delivering Applied Behavior Analysis treatment

and support to those individuals diagnosed with Autism and related disorders. This process began informally in 2008 and continued through January 2012. In January 2012, formal surveys of candidates and subject matter experts were conducted and continue to June 2015. The literature review took 3 years to complete. The survey was up and running in March 2015.

The process began with a comprehensive literature review to initially identify and validate the core competencies of the Applied Behavior Analysis Technician™ (ABAT™). The initial competencies that were identified then were subject to a pilot survey and a large-scale validation survey, in order to assess the appropriateness of the various core and domain competencies and tasks to the ABAT™. The initial research team and SME committee consisted of ten individuals representing Australia, New Zealand, the United Kingdom and the United States.

With a view to further validate the day-to-day use, in practice, and the importance of each performance domain as rated by both SME's and practicing ABAT's, a core knowledge validation survey was conducted. The purpose was to further confirm and increase confidence that the identified Performance Domains are representative of those used in actual practice. The survey was conducted using an online survey tool and was sent to 2,634 ABAT's to further validate the committee of SMEs recommendations. The survey was sent out and all responses were anonymous in order to better assure the accuracy and honesty of the resulting data.

The survey requested that each performance standard were rated in two ways.

1. How often do you use each Performance Domain in day-to-day practice?
2. How important would you rate each Performance Domain for day to day practice?

The task was for the respondents to rate each on a five-point scale for each question.

The rating scales were defined as the following:

<u>Rating Scales</u>			
<u>Table 1</u> (How often)		<u>Table 2</u> (How Important)	
1	Frequently	1	Fundamental
2	Regularly	2	Very Essential
3	Somewhat Regularly	3	Essential
4	Rarely	4	Somewhat Essential
5	Never	5	Not Essential

The Job Analysis committee will have the responsibility for recommending the expansion or reducing the scope of the ABAT™. Much of the information that the Job Analysis committee uses will come from the surveys which are completed by the ABAT™ incumbents.

The Job Analysis Committee must work closely with the Scheme Committee and review any new evidence-based practices, emerging best practices, and new laws and regulations that oversee the ABAT™ role. Since the role of the ABAT™ is emerging as new Federal, State, and Health care regulations are

being identified and approved, the Job Analysis Committee will need to review the scope of the ABAT™ on an annual basis using the survey data and current laws, regulations, and current best practice and evidence based ABA treatment strategies. Specific policies and procedures will be refined during the 2015-2016 operating year.

The Applied Behavior Analysis Technician™ (ABAT™) job analysis sets precedence for those direct support paraprofessionals in the emerging acknowledgement and practice of Applied Behavior Analysis in the Behavioral Health sector.

The job analysis has also highlighted the need for the development of industry standards. Development of industry standards provides a framework for ensuring unlicensed paraprofessionals, who are delivering more than 80% of the covered ABA benefits, are appropriately trained and credentialed.

The ABAT™ credentialing process creates a risk management mechanism for the protection of all stakeholders including the members, families, payors, community, providers, and practitioners.

<u>Performance Domain/Standard</u>	<u>Table 1</u>	<u>Table 2</u>
	<u>Weighting</u> <u>How often is each used in daily practice?</u>	<u>Weighting</u> <u>How important is each in daily practice?</u>
Autism Core Knowledge	4.6	5
Educational and Legislative Requirements	2.8	3.5
Principles of ABA	4.6	4.9
Instructional Interventions	4.2	4.6
Principles of Working with Autism Effectively	4.6	4.8
Treating Individuals with Challenging Behaviors	4.3	4.4
Data Collection and Evaluation	4.4	4.3
Positive Behavior Supports	5	4.5
Discrete Trial Teaching	3.6	3.6
Transitioning between Activities	4	3.9
Functional Communication and Visual Supports	4	3.9
Asperger's Syndrome and High functioning Autism	2.8	4
Providing Behavioral Health Services	3.4	3.8
Pivotal Response Treatment	3.8	3.7
Person Centered Planning	4.5	4.1
Functional Analysis	4.3	4.4
Philosophy and Values	4.5	4.5
Advocacy	4	4
Legal and Ethical Considerations	4.3	4.4

* Aspergers Syndrome and High Functioning Autism (These are no longer valid or legally allowed diagnoses by the commission that published the DSMV, the Federal Government, as well as ICD-10 on the international level by W.H.O. which coordinated the DSM in the U.S. with the ICD codes for the first time.)

References:

Skill Competency Committee of the Virginia Autism Council, 2010

http://www.vcuautismcenter.org/documents/va_skill_competencies.pdf

The Community Support Skill Standards (CSSS), a comprehensive job analysis conducted by the U.S. Department of Labor (Taylor, Warren and Bradley, 1996); <https://www.nadsp.org/library/csss.html>

Direct Support Professional Work Group Report 2007;

<http://phinational.org/sites/phinational.org/files/clearinghouse/NC%20Commission%2011-15.pdf>

A synthesis of direct service workforce demographics and challenges across intellectual/ developmental disabilities, aging, physical disabilities, and behavioral health, November 2008: DSW National Resource Center, the U.S. Department of Health and Human Services, and the Centers on Medicaid and Medicare Services and the Research and Training Center on Community Living and U.S. Department of Education; <http://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and-supports/workforce/downloads/a-synthesis-of-dsw.pdf>

Evidence-Based Practices and Treatments for Children with Autism and the Yale Child Study Center. (2010): [Social skills interventions for individuals with autism: Evaluation for evidence-based practices within a best evidence synthesis framework](#). B Reichow, FR Volkmar - Journal of autism and developmental disorders, 2010. <http://link.springer.com/article/10.1007/s10803-009-0842-0#page-1>

The National Autism Center. (2009). National Standards Report. Randolph, Massachusetts: National Autism Center. Phase 1; <http://www.nationalautismcenter.org/national-standards-project/history/significant-findings/>

National Professional Development Center on Autism Spectrum Disorders. (2010). Evidence-based practices for children and youth with autism spectrum disorders. U.S. Office of Special Education Programs; <http://autismpdc.fpg.unc.edu/>.

National Direct Service Workforce Resource Center: <http://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and-supports/workforce/downloads/dsw-training-rates-toolkit.pdf>

Applied Behavior Analysis Treatment of Autism Spectrum Disorder: Practice Guidelines for Healthcare Funders and Managers; http://bacb.com/Downloadfiles/ABA_Guidelines_for_ASD.pdf

Registered Health Information Technician Job Analysis, April 2011; http://www.ahima.org/~media/AHIMA/Files/Certification/AHIMA%20RHIT%20Job%20Analysis%20Report_with%20Addendum.ashx?la=en

Michigan Department of Community Health 2012; Michigan Autism Spectrum Disorders State Plan, Findings and Recommendations: https://www.michigan.gov/documents/autism/ASDStatePlan_2_19_13_Final_414143_7.pdf