

Policy on Supervision of Board Certified Assistant Behavior Analysts

Amount of Supervision for BCaBA: 1 hour per month (12 hours per year)

Type of Supervision: 2 of the 1 hour sessions per year must be in-person

Verified on your annual renewal or recertification form

Each Board Certified Assistant Behavior Analyst™ (“BCaBA®”) must be supervised by a Board Certified Behavior Analyst® (“BCBA®”). This applies to all BCaBAs, including those previously certified as Board Certified Associate Behavior Analyst.®*

Supervision shall occur at least once each month for one hour. Annually, at least two of these monthly supervision sessions shall be conducted in-person, to include direct observation of actual service provision with individuals. Type 3 CE may be earned for this supervision (up to 9 total Type 3 hours for the BCBA and 6 hours for the BCaBA), if properly documented (see “Recertification Procedures” in the “Maintain Certification” section of www.BACB.com). For group supervisory sessions, normally not more than half may qualify towards the monthly requirements (e.g., not more than 6 sessions per year). (In rare cases of extreme hardship and/or temporary/unexpected breaks in supervision the BACB will consider alternative proposals pre-approved by the BACB.)

Qualifying supervision shall: (a) occur only through two-way interactions involving real time visual and auditory contact (i.e., face-to-face meetings or electronic video chat sessions); (b) involve prior and follow-up submission of materials by the BCaBA concerning his or her professional work, as requested by the BCBA supervisor; (c) depending on the nature of the BCaBA’s work, include some observation of appropriate professional skills; (d) ensure that the quality of the services provided by the BCaBA to his or her employer and to consumers meets the minimum standards of the profession as defined by the current BACB Task List, the BACB Professional Disciplinary Standards, the BACB Guidelines for Responsible Conduct for Behavior Analysts, current BACB rules and regulations, and the professional literature in the field (including textbooks and peer-reviewed journals); and (e) guide the professional development of the BCaBA in ways that improve the practitioner’s knowledge and skills.

Supervisory interactions should generally include review, discussion, and recommendations focusing on the following topics: (a) case background information, (b) planned behavioral assessment procedures, (c) assessment outcomes, (d) data collection procedures, (e) possible intervention procedures and materials, (f) intervention outcome data, (g) modifications of intervention procedures, (h) ethical issues associated with behavior change services or employment, and (i) professional development needs and opportunities. When needed or desired, the supervision relationship may include informal contacts via telephonic, e-mail, and postal communication. These exchanges, however, do not qualify towards the once per month requirements.

All BCaBAs must meet these supervision requirements, even if they are not currently providing behavior analysis services. If not currently providing behavior analysis services, supervision may focus on guiding the development and maintenance of the BCaBA’s professional knowledge and skills and remaining current with the professional literature in the field.

* As of January 1, 2009, the certification mark Board Certified Associate Behavior Analyst, is replaced with the mark “Board Certified Assistant Behavior Analyst.”

**Behavior Analyst Certification Board®
BCaBA Annual Supervision Reporting Form**

Name: _____

Date: _____ BACB certificate number: _____

I am a BCaBA reporting my supervisor(s) for the past year

I am a BCBA reporting my supervisee(s) for the past year

I have engaged in supervision activities with the following individual(s) during the past year:

NAME	BACB CERTIFICATE #	SUPERVISION START DATE	SUPERVISION END DATE

(Use additional copies of this form if reporting supervision with more than five individuals. All forms must bear your original signature.)

DECLARATION By signing below, I affirm that the supervision activities identified on this form were conducted in compliance with all of the BACB's requirements for supervision of BCaBAs. Further, I acknowledge that, as with any documentation required by the BACB, submission of inaccurate information on this form may be grounds for sanctions against my certification status, as provided in the BACB Professional Disciplinary Standards.

Signature

Date