



Registered Behavior Technician™ (RBT®) Certification Renewal Packet

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Registered Behavior Technician™ (RBT®) Renewal Checklist

This checklist will guide you through the RBT renewal process. You must complete all steps to renew your credential.

- Update your Information** – If you have changes to any of the information below, log into your [BACB Gateway Account](#) and click on the “Update Profile” link under the “Profile tab” to update your information.
 - Email Address (Permanent/Personal)
 - Email Address (Alternate/Work)
 - Mailing Address
 - Telephone Number
 - Name Change
- Review RBT Maintenance Requirements** — Review the RBT requirements for [maintenance](#).
- Complete a New Competency Assessment** — Have a BACB-qualified assessor complete a [Competency Assessment](#) no more than 45 days before your expiration date.*
- Complete the RBT Renewal Application** — Complete the entire RBT Renewal Application (*this application may only be completed by you, the RBT*).
- Log into your BACB Gateway Account** — Log into your [BACB Gateway Account](#) and click on the “RBT” tab.
- Pay for the Application**
 - a) If you are paying online, click on the “RBT Renewal Invoice” link to pay for the renewal application.
 - b) If you are paying by check, mail your payment (include your RBT credential number on the check) to:
Behavior Analyst Certification Board
7950 Shaffer Parkway
Littleton, CO 80127 USA
- Upload your Documents** — Once payment has been made and your documents have been merged into one PDF, upload your renewal documents (i.e., RBT renewal packet and additional documents) into your [BACB Gateway Account](#) under the “RBT” tab. (*Tip: free software for merging documents is available online by searching the keywords “merge documents to PDF.”*)
- Monitor** — Allow two weeks from the date you uploaded your documents for your application to be processed. Monitor your email and the BACB Gateway in case additional information is needed.

* Your expiration date can be found in your BACB Gateway Account under the “RBT” tab.



Registered Behavior Technician™ (RBT®) Competency Assessment

Introduction

The BACB's RBT Competency Assessment is the basis for key eligibility and renewal requirements for the RBT credential. The assessment's administration instructions are below:

Assessor Qualifications

- ▶ Must possess a BCBA/BCBA-D, BCaBA, or FL-CBA credential; and
- ▶ Must have completed an 8-hour training based on the [BACB Supervisor Training Curriculum Outline](#); and
- ▶ May be the same person who delivered the 40-hour RBT training program; and
- ▶ Must not be related to, subordinate to, or employed by the applicant or RBT.

Assessment Instructions

- ▶ The initial (pre-credential) assessment must be completed after the 40-hour RBT training has concluded.
- ▶ The assessment may be administered by more than one assessor.
- ▶ The assessment may be administered in person or live via the internet.
- ▶ The assessment may be administered over multiple sessions.
- ▶ The assessor(s) must provide an opportunity for the applicant or RBT to perform each skill, initial the box next to each skill after the individual has demonstrated competence, check either the "In-Vivo" or "Role-Play" box for each skill, and sign the attestation at the end of the assessment when the individual has demonstrated competence in every skill.
- ▶ The assessor(s) must directly observe the applicant or RBT performing the task in a competent manner in-vivo with an actual client. Observation of video recorded behavioral samples is acceptable if the recordings were made for the purpose of this assessment. Role-play scenarios may be used when circumstances do not permit using clients (in-vivo). However, the entire set of tasks may not be demonstrated using only role-play assessment. Each task demonstrated via role-play must be indicated as such on the assessment form.
- ▶ If an applicant or RBT does not demonstrate competence of a specific task, the assessor(s) can provide performance feedback and permit the individual to test again no earlier than the following day; this process may be repeated until competence is demonstrated.
- ▶ Performance feedback may not be delivered during the final determination of a skill competence.
- ▶ For items that are comprised of multiple skills (e.g., 2, 7, and 8), the applicant or RBT only needs to demonstrate competence in one of the skills.
- ▶ Assessors may develop their own version of the RBT Competency Assessment form. These alternative forms must include all of the following elements:
 - RBT Task List sections listed individually (based on the form)
 - A comment field for specific information from the assessment
 - An attestation at the end of the assessment that includes:
 - The assessor's name, signature, credential, and date signed
 - The relationship of the assessor to the applicant or RBT (e.g., employer, contracted)
 - The applicant's or RBT's name, signature, and date signed



Registered Behavior Technician™ (RBT®) Competency Assessment Form

Measurement

Task		Initials	Assessment Type <i>(check one)</i>
1	Implement continuous measurement procedures (e.g., frequency, duration).		<input type="checkbox"/> In-Vivo <input type="checkbox"/> Role-Play
2	Implement discontinuous measurement procedures (e.g., partial and whole interval, momentary time sampling).		<input type="checkbox"/> In-Vivo <input type="checkbox"/> Role-Play
	Implement permanent product recording procedures.		
3	Enter data and update graphs.		<input type="checkbox"/> In-Vivo <input type="checkbox"/> Role-Play

Assessment

Task		Initials	Assessment Type <i>(check one)</i>
4	Conduct preference assessments.		<input type="checkbox"/> In-Vivo <input type="checkbox"/> Role-Play
5	Assist with functional assessment procedures.		<input type="checkbox"/> In-Vivo <input type="checkbox"/> Role-Play

Skill Acquisition

Task		Initials	Assessment Type <i>(check one)</i>
6	Use contingencies of reinforcement (e.g., conditioned/unconditioned reinforcement, continuous/intermittent schedules).		<input type="checkbox"/> In-Vivo <input type="checkbox"/> Role-Play
7	Implement discrete-trial teaching procedures.		<input type="checkbox"/> In-Vivo <input type="checkbox"/> Role-Play
	Implement naturalistic teaching procedures (e.g., incidental teaching).		
	Implement task analyzed chaining procedures.		
8	Implement discrimination training.		<input type="checkbox"/> In-Vivo <input type="checkbox"/> Role-Play
	Implement stimulus control transfer procedures.		
	Implement stimulus fading procedures.		
	Implement prompt and prompt fading procedures.		

Behavior Reduction

Task		Initials	Assessment Type <i>(check one)</i>
9	Implement interventions based on modification of antecedents such as motivating/establishing operations and discriminative stimuli.		<input type="checkbox"/> In-Vivo <input type="checkbox"/> Role-Play
	Implement differential reinforcement procedures (e.g., DRA, DRO).		
	Implement extinction procedures.		
10	Implement crisis/emergency procedures according to protocol.		<input type="checkbox"/> In-Vivo <input type="checkbox"/> Role-Play

Documentation and Reporting

Task		Initials	Assessment Type <i>(check one)</i>
11	Generate objective session notes by describing what occurred during sessions.		<input type="checkbox"/> In-Vivo <input type="checkbox"/> Role-Play

Professional Conduct and Scope of Practice

Task		Initials	Assessment Type <i>(check one)</i>
12	Respond appropriately to feedback and maintain or improve performance accordingly. (May be assessed via observation by focusing on the “respond appropriately to feedback” element.)		<input type="checkbox"/> In-Vivo <input type="checkbox"/> Role-Play

Comments

By signing below I attest that the competencies initialed above have been successfully demonstrated by the applicant or RBT.

Assessor's Printed Name: _____ Credential: _____

Assessor's Signature: _____ Date Signed: _____

Relationship of Assessor to the applicant or RBT (check one): Employer Contractual

Applicant or RBT Printed Name: _____

Applicant or RBT Signature: _____ Date Signed: _____

Make additional copies of this page if necessary.



Registered Behavior Technician™ (RBT®) Task List Items for Optional Interview Assessment

The tasks below are verbal competencies provided for informational purposes only, in the event the assessor(s) would like to evaluate these tasks independently of the Competency Assessment. For purposes of obtaining the RBT credential, these tasks will be assessed via the RBT exam.

Measurement

Prepare for data collection.

Assessment

- ▶ Describe the behavior and environment in observable and measurable terms.
- ▶ Assist with individualized assessment procedures (e.g., curriculum-based, developmental, social skills).

Skill Acquisition

- ▶ Identify the essential components of a written skill acquisition plan.
- ▶ Prepare for the session as required by the skill acquisition plan.
- ▶ Implement generalization and maintenance procedures.
- ▶ Assist with the training of stakeholders (e.g., family, caregivers, other professionals).

Behavior Reduction

- ▶ Identify the essential components of a written behavior reduction plan.
- ▶ Describe common functions of behavior.

Documentation and Reporting

Report other variables that might affect the client (e.g., illness, relocation, medication).

Professional Conduct and Scope of Practice

- ▶ Describe the role of the RBT in the service delivery system. Communicate with stakeholders (e.g., family, caregivers, other professionals) as authorized.
- ▶ Maintain professional boundaries (e.g., avoid dual relationships, conflicts of interest, social media contacts).
- ▶ Maintain client dignity.



Registered Behavior Technician™ (RBT®) Renewal Application

A. RBT Information

RBT's Legal Name: _____

RBT Credential #: _____

Note: *Only* the RBT named in this application may complete and sign the renewal application. Please respond to all the questions below. Incomplete applications **will not** be processed.

B. Ability to Practice

I (RBT) understand that I must have a Responsible Certificant on record with the BACB in order to practice as an RBT. I understand that if I do not have a Responsible Certificant:

- Agree I may not practice as an RBT. Practicing as an RBT is defined as engaging in any tasks identified in the [RBT Task List](#).
- Agree I may not identify myself as an RBT.
- Agree I may not bill for services as an RBT.
- Agree I will not be listed on the RBT registry.

C. Supervision

I (RBT):

- Agree Disagree Have met all the [supervision requirements](#) for the past year, including at least 5% of my hours spent providing behavior-analytic services.
- Agree Understand that the BACB may require documentation of my supervision.

D. BACB Rules and Requirements

I (RBT):

- Agree Disagree Have complied with the BACB's rules and requirements (for example, supervision requirements, ethical requirements).

E. Required Reporting

- Agree I (RBT) understand that I am required to report to my Responsible Certificant, any information that might impact my criminal background check or status with the BACB.
- Agree I (RBT) understand that I am required to report to my Responsible Certificant and the BACB, any physical conditions, mental conditions, or substance addictions that could impair my ability to competently provide behavior-analytic services and/or jeopardize public health and safety.

- Agree I (RBT) understand that I am required to report to my Responsible Certificant and the BACB, any disciplinary investigations or actions by a professional or regulatory body.
- Agree I (RBT) understand that I am required to report to my Responsible Certificant and the BACB, any public health or safety-related investigations or actions.

F. Attestation

By signing, I acknowledge and affirm that:

- Agree I have carefully read and understand the BACB rules and requirements, to include the [Terms and Conditions](#).
- Agree I agree to abide by these rules and requirements, to include the [Terms and Conditions](#).
- Agree The information I have provided in this application and in the attached documentation is true and correct to the best of my knowledge.

If you selected “Disagree” to any of the above items, you must report required information or non-compliance with BACB requirements at [submit legal documentation](#).

PRINTED RBT NAME: _____ DATE: _____

RBT SIGNATURE: _____