SLP-ABA Collaboration for Children with Autism: Developing Harmonious Interprofessional Relationships

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Agenda

• Motivation for this conference topic
• ABA and Autism Service Delivery
• Overview of collaboration & Shared Practice
• Barriers to SLP-ABA Collaboration
• Strategies for Enhancing Collaboration
• Case Study Example
Why this Topic?

- No health care professional works in a vacuum
- How we collaborate with others affects the quality of service delivery
- SLP-ABA collaboration is often challenging when both professions serve children with ASD
- ASHA’s Code of Ethics (2010)
  Principle of Ethics IV.A “Individuals shall... maintain harmonious interprofessional... relationships...”
Why, cont.

- Meanwhile, the prevalence of ASD is increasing:

  1975 - 1 in 5,000
  1985 - 1 in 2,500
  1995 - 1 in 500
  2000 - 1 in 150
  2004 - 1 in 125
  2008 - 1 in 88
  2014 - 1 in 68

(1 in 42 boys)

Based on www.nature.com

Based on CDC statistics www.cdc.gov
Board Certified but what about a license?

- Everyone agrees licensure is better but why
  - Defined scope of practice
  - Protect the public
    - Consumers and Practitioners
  - Improves service delivery
  - Recognition of a discipline
  - State licensing board vs. National Certification Board
  - Increased number of families to the state

HB714 - Behavior Analyst Licensure Bill
The Bottom Line

- Children with a spectrum of needs require a spectrum of interventions

- SLP and ABA professionals are important service providers in this spectrum
Applied Behavior Analysis and Autism Service Delivery
What is ABA?

ABA is **NOT**

* Not exclusive to the treatment of Autism/Intellectual Disabilities
  * Not invalidated due to the focus on one child at a time
    * Not one standard set of procedures
      * Not only for maladaptive behaviors
        * Not only useful in clinic settings
          * Not based on aversives
            * Not a new fad
              * Not easy
What is ABA? cont.

- "Applied behavior analysis is a scientific approach for discovering environmental variables that reliably influence socially significant behavior"

- It is a framework in which...

  ★ Individually-appropriate teaching strategies are derived from the principles of behavior

  ★ The strategies are applied to improve socially significant behavior

  ★ Systematic data analysis is used to assess the effectiveness of the intervention

Cooper, Heron, & Heward, 2007, p. 15
What is ABA? cont.

- A central principle of ABA is that **Behavior** is controlled by **Antecedents & Consequences**
  
  \[ A \rightarrow B \rightarrow C \]

  - ★ **A** = a physical stimulus and/or a motivating operation
  - ★ **C** = reinforcement or instructional feedback

- **Behavioral interventions** all reflect variations of antecedent and/or consequence conditions.....WHY?

- All behavior has a function

- Identifying the function tells us
  
  - ★ the conditions in which the behavior may occur
  - ★ a possibly effective treatment method / how to respond to the behavior
What is ABA? cont.

- Regardless of strategy or program “package”, there is no “one size fits all” ABA therapy.

★ Each child’s behavior and learning needs are assessed individually.

★ Each intervention program is designed to meet the needs of an individual learner.
What is ABA? cont.

- Characteristics of ABA:
  - Emphasis on function of behavior
  - Emphasis on observable and measurable behavior
  - Requires data collection and repeated analysis
  - Change environment to change behavior
  - Everyone is accountable for progress
Who are ABA Service Providers?

- **ABA service providers vary greatly** with respect to ...
  - Educational background
  - Supervised experience
  - Certification

- **Certification** is increasingly becoming the standard

- The BACB offers **2 levels of certification**
  - **BCBA** = Board Certified Behavior Analyst
    - Requires at least a master’s degree
  - **BCaBA** = Board Certified Assistant BA
    - Requires at least a bachelor’s degree

- Both are based on **academic coursework, supervised practice, and national exam**
ABA Service Providers, cont.

- BACB offers two additional designations:
  - **BCBA-D** → BCBA with doctoral degree in ABA
  - **RBT** = Registered Behavioral Technician → Individuals who work under the close supervision of a BCBA or BCaBA

- Some people w/o BCBA may also be competent behavior analysts
  - People who earned graduate-level academic degrees in ABA before the BACB established certifications
    - e.g., Andy Bondy
  - People who have worked closely with highly qualified ABA professionals over many years, prior to the development of certification
    - e.g., Lori Frost
ABA Service Providers, cont.

- The national credentialing agency for ABA professionals is the Behavior Analyst Certification Board (BACB)

http://www.bacb.com

- BACB has only been in operation since 1998 (17 yrs.)
- Compare with ASHA (1952) (63 yrs.)
Collaboration and Shared Practice
It Takes a Village

- Children with ASD have a spectrum of needs, and it takes a professional village to address these needs.
It Takes a Village, cont.

- **SLP & ABA professionals** are important members of that village

  - Each brings valuable contributions to the table

  - Technically, the expertise of each profession actually complements the other
Working Together

- What can happen when professionals work together?

★ Collaboration
★ Shared Practice
★ Encroachment
Working Together, cont.

- **Collaboration** occurs when professionals from different disciplines work together to support a client in *complementary performance domains* e.g.,
  - SLP - communication
  - OT - fine motor skills
  - ABA - socially-appropriate behavior

- **Shared Practice** is a special case of collaboration that occurs when professionals from different disciplines support a client’s needs within *overlapping performance domains* e.g.,
  - SLP - speech-language-communication needs
  - OT - social communication needs
  - ABA - verbal behavior & functional comm. skills
Working Together, cont.

- **Encroachment** is a negative term referring to shared practice involving service providers who step outside of their scope of practice
  
e.g., see ASHA (2011)
  
★ This is a risk factor in shared practice
★ Interestingly, we hear more about this in SLP-ABA collaboration than in SLP-OT collaboration
Working Together, cont.

- Our goals in advocating for SLP-ABA Collaboration are...

1. To encourage collaboration & shared practice
2. To avoid encroachment
Challenges of Collaboration

- Scheduling

- Role Release & Role Sharing
  - Important for all team functions
    - Assessment
    - ID & prioritization of learning objectives
    - Intervention planning and delivery
    - Communication with families
Role Release/Sharing, cont.

- Requires openness to ...
  - Teaching other team members what we do
  - Learning what others do
  - Providing constructive feedback
  - Receiving constructive feedback
  - Recognize & utilizing overlap between roles
Advantages to Collaboration

- It’s a **win-win-win**
  - **Professionals** can learn from each other
  - **Families** can be spared some confusion
  - Ultimately, **children** will receive the best possible support
Barriers to SLP-ABA Collaboration
1. Overlapping Scopes of Practice

• Scope of Practice - description of the kinds of problems addressed by a profession.

★ Ethical standards require professionals to limit their service delivery to problems within their professions scope of practice

e.g., Skills targeted by each profession

★ Prelinguistic Skills (Stimulus Control; VB)
  ✪ Joint attention, play, imitation, gestures, communicative functions, etc.

★ Speech and AAC (Topography)
  ✪ Comm. Modalities (Topographical responses)

★ Language (Topography; Verbal Behavior)
  ✪ Functional vocabulary, word combinations, following directions, etc.

★ Pragmatics (Verbal Behavior)
  ✪ (Functional Communication; VB; PBS)
  ✪ Self regulation (Adaptive replacement behaviors)
Support the needs of individuals with a wide range of disorders of communication, speech, language, literacy, and swallowing.

Support communication impairments including the reduction of problem behaviors that stem from inadequate communication skills.

Support a wide range of problems that challenge individuals and organizations in the performance of socially-valued verbal and non-verbal behaviors.
2. Overlapping Competencies

- **Competencies** – the professional knowledge and skills needed to engage in a scope of practice

  ★ Note that a person’s competencies may not cover the entire Scope of Practice

  ★ Ethical standards and EBP require us to use only those strategies for which we have the competency
Overlapping Competencies, cont.

- **SLP Competencies** - knowledge and skills related to areas that impact the development of communication
  
  - Anatomy and physiology of the speech, language & hearing mechanisms
  - Components of language and methods of linguistic analysis
  - Developmental sequences and natural environmental conditions that support them
  - Developmental risk and of abnormal developmental processes
  - Options for AAC systems
  - Methods for assessing a child’s communication profile
  - Procedures for teaching communication skills (adult-directed, child-directed, hybrid)
Overlapping Competencies, cont.

- **BCBAs competencies** - knowledge and skills that impact the instructional design, implementation, and assessment. e.g.,

  ★ Fundamental **elements of behavior change**: shaping, prompting, and chaining

  ★ Specific **behavior-change procedures** and systems: differential reinforcement and extinction

  ★ **Task analysis**

  ★ Individualized reinforcement systems

  ★ Positive behavior support (PBS) strategies

  ★ **Analysis of controlling variables (ABC)**

  ★ **Analysis of Verbal Behavior (AVB)**

  ★ **Errorless teaching strategies**
Daw, Holman, & Heilicser (2014) studied the self-reported competencies of SLPs and BCBAs.

- Participants: 19 SLPs & 16 BCBAs
- In a survey, each was asked to assess his/her own competencies in relation to 23 skills considered important for autism service delivery.
Overlapping Competencies, cont.

(Daw et al., 2014, cont.)

Competencies with the most overlap:

- Communication Intent/JA
- Picture Schedules
- Sign Language
- Selective Mutism
- Feeding/Swallowing

(Daw et al., 2014, cont.)
Overlapping Competencies, cont.

(Daw et al., 2014, cont.)

Competencies with the least overlap

- Speech Articulation
- Behavior Plan Dev.
- Behavior Reduction Plan
- Reinforcement Pref Assess
- Discrete Trial Instruction
- ABA Therapy

(Bcba SLP)
Overlapping Competencies, cont.

- Competences that ranged between “most” and “least” overlap:
  - ★ Expressive Language
  - ★ Early Childhood Lang
  - ★ Receptive Language
  - ★ AAC
  - ★ Motor Planning
  - ★ Social Pragmatics
  - ★ Choosing
  - ★ Verbal Behavior
  - ★ Reinforcement
  - ★ Errorless learning
  - ★ Prompt Fading
  - ★ Shaping
3. Different Frameworks

Different philosophical frameworks can lead to problems when team members do not understand important features of each other’s mode of operation:

- Approaches to assessment
- Instructional design
- Exposure to Literature
- Terminology
Different Frameworks, cont.

e.g., Differences in identification of targets

SLP

Tend to use ...

- **Descriptive Comm. Profiling** (assess speech, language, collateral areas)
- **Developmental linguistic** framework for target selection

ABA

Tend to use ...

- Task analysis
- Functional behavior assessment
- Criterion-referenced testing
Different Frameworks, cont.

e.g., Differences in instructional design

**SLP**
- Preference for...
  - Treatment in naturalistic contexts
  - Use of eclectic evidence-based procedures from low to high structure
    - Adult-Directed
    - Child-Directed
    - Hybrid

**ABA**
- Preference for...
  - Systematic use of most to least structure
  - Use of conceptually-consistent evidence-based procedures
Different Frameworks, cont.

- Team members with similar roles are often not exposed to each other’s literature.

### 2011 ASHA Present.

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7% of ASD

### 2010 ABAI Present.

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<td>SLP present</td>
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8% of ASD
Different Frameworks, cont.
e.g., Differences in technical terms

SLP Terms
1. Communicative Temptations
2. Imitation
3. Requesting
4. Naming
5. Conv. turn-taking
6. Carry-over

ABA Terms
1. Establishing Operations
2. Echoic
3. Manding
4. Tacting
5. Intraverbal
6. Generalization
But, are we REALLY so different?

- SLP intervention strategies are behavioral.

Aren't the differences complementary?

- SLPs are experts in what to teach
- BCBAs are experts in behavioral teaching
Different Frameworks, cont.

- Train metaphor

★ For children with ASD, SLPs are often more expert about what goes in the train (the content of instruction)

★ BCBAs are often more expert in how to drive it (the methods)
3. Baggage

- Misconceptions and stereotypes, often born of insufficient information

**Stereotypes about ABAs**
- **They** teach children to perform like robots
- **They** use bribery
- **They** are obsessed about data collection
- **They** know nothing about developmental processes

**Stereotypes about SLPs**
- **They** only do play therapy.
- **They** don’t collect data.
- **They** only do pullout therapy
- **Their** methods aren’t science-based
Who are THEY?

★ The worst examples of each profession?
★ No profession is perfect
★ The worst example does not define the group
Strategies for Enhancing Collaboration
Improved Communication

- SLPs will need to understand and respect the ABA framework
- ABA professionals will need to understand and respect the DSP approach
- We need to
  - Learn each other’s language about shared topics
  - Work out the details of role sharing
Consider this 8 Step Program...

1. Acknowledge the Problem

2. Understand each other’s scope of practice

3. Acknowledge each other’s strengths/limitations

4. Leave baggage at the door

5. Complement and Collaborate

6. Engage in Life-Long Learning

7. Participate in National Advocacy

8. Advocate for Families
Case Study Example
VG History

- Speech-Language Eval 2013- No functional communication, few vocalizations, no imitation and lots of maladaptive escape behaviors (vomiting) Referred to ABA to increase early learner skills.
- 35 hrs of ABA at Meredith Autism Program starting in September 2013
- Jan 2015 referred for speech-language therapy.
- Feb 2015 -Current- 35 hrs ABA+ 2, 30 min sessions of speech/language therapy per week with coordination of goals. Daily practice in ABA as guided by SLP.
ABA Session - Prior to Speech
Speech/Language Session
Lots of Opportunity for Practice
Speech/Language Session
Conclusion

- Autism is a complex and challenging disorder

- A number of children with ASD do not achieve best outcomes despite early and intensive behavioral intervention

- It will only be through collaboration and collective efforts that we will be able to improve the lives of these individuals
Thank You!
References


