TALK LIKE AN RBT

A guide for the every day person to pass the RBT Competency Assessment

Abstract

Complete the following worksheet while 'shadowing' an active RBT. Complete the activity and exercises. Study these examples and definitions for the competency assessment.

Table of Contents

CONTINUOUS MEASUREMENTS	3
DURATION	3
LATENCY	3
Inter Response Time	4
DISCONTINUOUS MEASUREMENTS	4
INTERVAL	4
"TIME SAMPLING"	
PREFERENCE ASSESSMENTS	6
PREFERENCE ASSESSMENT	6
FREE ACCESS	
MULTIPLE STIMULUS WITH REPLACEMENT	7
PREFERENCE ASSESSMENT WITHOUT REPLACEMENT	
CHOICE MAKING	
ANTECEDENT, BEHAVIOR, CONSEQUENCE [ABC DATA]	
FUNCTIONS OF BEHAVIOR	10
LEARNING AND BEHAVIORS	11
DISCRETE TRIAL TRAINING	11
NATURALISTIC TEACHING / INCIDENTAL TEACHING	12
CHAINING & TASK ANALYSIS	13
SHAPING	15
DISCRIMINATION TRAINING:	16
STIMULUS CONTROL TRANSFER	16
PROMPTING	17
TYPES OF PROMPTING	17
VERBAL PROMPTING	
GESTURAL / MODELING PROMPTING	18
PHYSICAL PROMPTING	18
PROMPT HIERARCHY	18
PROMPT FADING	18
ACTIVITY	19
TOKEN SYSTEMS	20
Star Chart - Token System	20
Treasure Chest - Token System	21
TITLE HERE	21
SCHEDULES OF REINFORCEMENT	21
CRISIS / EMERGENCY PROTOCOL	22
ANTECEDENT INTERVENTIONS	23
SATIATION	23
DEPRIVATION	23
Establishing Operations [EO]	24

DISCRIMINATIVE STIMULI [S.D.]	24
DIFFERENTIAL REINFORCEMENT OF ALTERNATIVE BEHAVIORS [DRA] DIFFERENTIAL REINFORCEMENT OF OTHER BEHAVIORS [DRO]	25
DIFFERENTIAL REINFORCEMENT OF OTHER BEHAVIORS [DRO]	28
	28
DIFFERENTIAL REINFORCEMENT OF INCOMPATIBLE BEHAVIORS [DRI]	28
	28
EXTINCTION	29
"Extinction Burst"	30
Section 4: Professionalism and Requirements	31
Practice a Session Note	31
Client Dignity	
Professional Boundaries	31
CLINICAL SUPERVISION	33
Clinical Direction	34

WELCOME

Welcome toTalk like a RBT! The guide to helping break down the science of ABA therapy into everday language. My name is Jazzmyn, I am a mom and a therapist. I have been helping children with disabilities and learning disroders since 2011. My favorite part is helping every day people such as parents, teachers, and other therapists understand, in plain English, and do everyday ABA. Afterall, every one of us uses ABA all day. You just don't know it. In this book, I aim to help therapists understand concepts and strategies using every day examples. You will learn to understand and use these terms in your therapy life and every day life. Just a heads up, once every day people understand how to do behavioral psychology at tend to use these strategies more as parents, therapists, aunts, uncles, and more. Welcome to understanding the basics.

CONTINUOUS MEASUREMENTS

Ever notice how some things happen more often than others? Keeping track of how often something occurs can be really useful. It's like counting how many times your dog barks at the mailman each week. That number you get, that's the frequency. Seeing those numbers can help us understand patterns and make changes if needed.

FREQUENCY

Ever notice how often someone taps their foot or says "like"? We're talking about frequency - how many times something happens. It's like counting how many times a dog barks in an hour. You keep track, maybe make some tally marks. That way, you get a clear picture of how often the behavior is happening, which can be really helpful!

- Johnny hits his head 7 times. The Frequency is 7
- Marissa bites the toy 25 times. The frequency is 25
- Bill says "mom" 42 times. The frequency is 42.

DURATION

Ever feel like some things take forever? In therapy, we actually measure how long things last. It's like timing how long you brush your teeth, but for behaviors. We use timers and stuff to track it all. This helps us figure out if things are changing over time.

- The movie is 2 hours and 30 minutes. The duration is 2 hours and 30 minutes.
- The child sits in the chair for 5 minutes. The duration of chair sitting is 5 minutes.
- The Drive to work is 1 hour. The duration of the drive is 1 hour.

LATENCY

Sometimes, it takes a bit for someone to get going. That little gap between asking and doing? That's what we call latency. We're watching how long that gap is to see if it changes. Imagine someone asks you to grab a pencil, but you take your sweet time. Tracking how long you take is like measuring latency! Latency is the time between the stimuli and the response.

SPECIAL NOTE

A stimulus is anything you hear, taste, touch, smell or physically feel [a clock alarm, a bug bite, bad flavored food, a candle, a person talking, a song turning on, etc.

Examples of Latency

- For example, If you ask someone their name, typically, a person, will take less than 3 seconds to say their name. The latency is 3 seconds.
- Another example, If you ask a person "What is the capital of Brazil?", unless you're good
 at geography [this behavior analyst is not], it may take longer to think of the answer to
 this question. Let's say 30 seconds to look on Google. The time between asking the
 question and the person responding is 30 seconds.
- A common home example. A parent asks a teenager to wash the dishes at 8:00pm. The
 teenager doesn't start washing the dishes until 8:13pm. The time between the instruction
 "Wash the dishes", and the teeneager doing the dishes, is 13 minutes. The latency is 13
 minutes.

Inter Response Time

Think of it as the pause between actions, like the time between bites of a yummy snack. It's that little gap after one behavior ends and before the next one starts. This pause can be short, long, or somewhere in between. Observing it helps us understand behavior patterns. Sometimes, we even try to change it to help build new skills.

- Eat at 9am and Eat at 12pm. The IRT between eating is 3 hours. Eat at 12pm and 2:15pm. The time between the two responses [eating times] is 2 hours and 15 minutes.
- You get paid on Friday. Then two weeks later, you get paid again on friday. The time between getting paid is 2 weeks. The IRT of being paid is 2 weeks.

DISCONTINUOUS MEASUREMENTS

Some things are easier to measure than others. Ever tried to figure out how long a toddler can actually stay quiet? Tricky, right? That's where sneaky measurement tools come in handy. We use them to get a little peek into behaviors that come and go quickly. It's like trying to measure a shooting star, you just need the right tools for the job! And trust me, when you are working on building new skills, every little bit of progress is worth celebrating!

INTERVAL

Discontinuous measurement involves dividing the observation period into smaller "intervals". For example, dividing 30 minutes into three 10-minute intervals. The observer then writes whether the behavior of interest occurred at least once during each interval. The observer records a "yes" or "no" for each interval, indicating whether the behavior was observed or not. At the end of the time, they divide the yes's by the total number to get the percentage.

Remember! An "interval" is a specific amount of time.

Examples

Activity: Circle Time				
Duration of Circle Time is 30 minutes				
	INTERVAL 1	INTERVAL 2	INTERVAL 3	
	0 - 10 minutes	11 - 20 minutes	21 - 30 minutes	
Partial Intervial [Any Time]	ANY TIME	ANY TIME	ANY TIME	
Whole Interval [The entire	ENTIRE TIME	ENTIRE TIME	ENTIRE TIME	
time]				
Momentary Time Sampling [At	AT THE END	AT THE END	AT THE END	
the end of the time]				

"TIME SAMPLING"

Imagine trying to track how often a kid fidgets, but you can't watch them all day. Time sampling is like taking snapshots. Instead of watching constantly, you check in for a bit, then take a break, then check again. So, you might see if they're fidgeting for one minute, then wait five

minutes, then check again for a minute. It's simpler than tracking every single second, and it still gives you a good idea of what's going on!

Definition of "Time Sampling" – dividing a specific amount of time into smaller intervals

Example 1

Circle Time is 30 minutes, the BCBA breaks down the 30 minutes into 5-minute intervals

Group Reading is 10 minutes, the BCBA breaks down the 10 minutes into 2-minute intervals

PARTIAL INTERVAL TIME SAMPLING

Imagine you're a soccer parent, you're watching your kid during the game. Did your child score a goal AT ANY TIME during the game? Yes or no? This is Partial Interval Time Sampling. In partial interval recording, the observer marks down whether a behavior occurs AT ANY TIME during the interval by placing an "X" for occurrence and a "O" for no nonoccurrence.

Did the child raise their hand AT ANY TIME during the Circle Time? Did the child look at the TV AT ANY TIME during the interval?

WHOLE INTERVAL TIME SAMPLING

Imagine you're at the nail salon, you're sitting down in the chair to get your feet done. Did you sit down in the chair the entire time you were getting the pedicure? or did you get up at any point. This is Whole Interval Time Sampling. In whole interval recording, the observer marks down whether a behavior occurs throughout THE ENTIRE INTERVAL by placing an "X" for occurrence and a "O" for no nonoccurrence. Whole interval recording means that the observer is interested in behavior that occurs during the entire interval.

Examples

Did the client sit at the table for THE ENTIRE 30 seconds? Yes or No Did the client actively work on the paper for THE ENTIRE 5 minutes? Yes or No Did the client wait for skittles, for THE ENTIRE 5 seconds? Yes or No

MOMENTARY INTERVAL TIME SAMPLING

Imagine you're a teacher. The teacher has a lot of papers to grade. So the students are all sitting down at their tables doing math papers. The teacher sets a timer for 5 minutes, and then goes onto the computer to grade papers. When the timer alarms, the teacher looks up from her computer, to the students, and sees if all the students [or any one particular student] is actively doing their work. This is Momentary Interval Time Sampling. It refers to collecting data on the occurrence behavior [positive or negative], only if the student is engaged in that behavior AT THE END of the interval.

Example

Teacher

- All the kids in the class are working at their table
- The Teacher needs to do work on the computer
- The teacher puts on a timer for 5 minutes [THE INTERVAL]
- The teacher does work on her computer
- When the TIMER ALARMS [At the end of the timer], the teacher looks up,
- The teacher collects data: Is the client sitting at the table working, yes or no?

Mom

- Mom has 2 kids at home
- Mom has to do laundry in a different room
- Mom puts on the TV with toys for the 2 kids in the living room
- Mom puts on a timer for 3 minutes
- Mom walks into the bedroom to do laundry
- When the timer alarms [AT THE END OF THE INTERVAL], mom walks into the living
- Mom checks: "Are the kids playing nicely together, yes or no?

IMPORTANT TIPS

When thinking about Interval Time sampling, remember the following will help pass your exam.

- 1. In Partial Time Sampling the behavior / action happens AT ANY TIME during the interval
- 2. In Whole Time Sampling the behavior / action happens THE ENTIRE the interval
- 3. In Momentary Time Sampling the behavior / action happens at AT THE END of the interval

PREFERENCE ASSESSMENTS

PREFERENCE ASSESSMENT

Ever notice how some things just make a person light up? Figuring out what those things are is a big part of ABA therapy. We call it a preference assessment, and it helps us find what motivates someone to learn. It's like finding the key to unlocking their potential! Knowing what they love helps us teach new skills in a fun and engaging way.

Definition:

Preference assessment is a procedure that allows ABA therapists to determine the hierarchy of a child's preferred items, from low preferred to highly preferred ones. This method can be used to determine hierarchies of everything from toys and foods to social interactions, people, and locations.

FREE ACCESS / FREE OPERANT

Ever notice how some things are super rewarding for one person, but not so much for another? Free access preference assessments help us figure out what motivates someone by seeing what they gravitate towards when given free rein. It's like figuring out someone's favorite snack by letting them loose in a candy store and seeing what they pick! This helps therapists and caregivers understand what might work best as rewards during therapy sessions. After all, everyone deserves a little something special to keep them engaged, right?

How it works:

Step 1: This involves observing the learner during downtime with free access to toys and activities.

Step 2: Data is recorded on what they demonstrate an interest in [Write the name of the toy], and how long they engage in each activity [write the duration with each toy].

MULTIPLE STIMULUS WITH REPLACEMENT

Imagine having a bunch of toys and wanting to know which ones a child likes best. We put out a few at a time and let the child pick one to play with. After a little bit, we take that toy away and replace it with a new one. By seeing which toys the child chooses over and over, we learn what they really enjoy! This helps us figure out how to motivate them during therapy sessions. It's like finding out their favorite game so we can play it together!

How it works:

Step 1: an array of items is placed in front of the learner.

Step 2: The learner chooses one of the items.

Step 3: After they play with or consume the item, the items are put back into the array and mixed up

Step 4: Repeat the process

Purpose:

A hierarchy of what is "Most preferred" and "Least preferred" is created.

The items that were chosen most often are deemed the learner's highest preferred items,

While the items chosen the fewest or not at all, are considered the lowest preferred items.

MULTIPLE STIMULUS ASSESSMENT WITHOUT REPLACEMENT

Imagine presenting several toys to a child and seeing which one they pick up first. Now, take that toy away and offer the remaining choices. That's basically what a Multiple Stimulus Preference Assessment without Replacement is all about! We keep track of what they choose each time to get a good idea of their favorites. This helps us figure out what motivates them, so we can use those preferred items to encourage learning and positive behaviors. It's like finding the magic key to unlock their potential!

How it works:

Step 1: an array of items is again placed in front of the learner,

Step 2: The learner chooses one of the items [and has access to play or consume the item]

- Step 3: The item is then removed from the array,
- Step 4: The process is repeated until there are no remaining items in the array.

Purpose

A hierarchy is created of "1st preferred or Most preferred", "2nd most preferred", 3rd most preferred, and least preferred.

A hierarchy of preferences is created with the items chosen first listed as the highest preferred and the items chosen last as the least preferred.

Example

What is you	r favorite	color?			
Cho	ices:	RED	BLUE	GREEN	YELLOW
Clie	nt choose	s Gree	n [RBT re	emoves G	reen]
What is you	r favorite	color?			
Cho	ices:	RED	BLUE		YELLOW
Clie	nt choose	s Red [RBT rem	noves Red]
What is you	r favorite	color?			
Cho	ices:		BLUE	YE	ELLOW
Client chooses Blue [RBT removes Blue]					
Last color remaining is Yellow.					

CHOICE MAKING

Picture this: you're learning something new, and you get to pick what you want to learn about! That's kind of the idea behind choice making in ABA therapy. It's all about giving people more say in their day, which can be really motivating. When we have choices, it can make us feel more independent and in control. Plus, who doesn't love getting to pick what they want to do, even if it's just between two activities? So, next time you're feeling stuck, remember the power of choice!

Ever feel stuck between a rock and a hard place? In ABA, we call that a choice! Giving folks options, even small ones, can be super empowering. It's like choosing between pizza or tacos for dinner - way more fun than having no say at all, right? And the best part? Making choices helps us learn and grow, no matter our age. So yeah, choice making is a pretty big deal!

•	McDonalds or ChickFil A?	•	Cookies or chips?
•	Red or Green?	•	Salty or sweet?

- Physical touch or gifts? _____
- Tracing Letters or numbers?

Work on Alphabet or tracing?

ANTECEDENT, BEHAVIOR, CONSEQUENCE [ABC DATA]

Imagine a vending machine: you put in money (antecedent), press a button for a snack (behavior), and out pops your tasty treat (consequence). That's kind of how antecedent, behavior, and consequence (ABC) work together. Basically, it helps us understand what happens before, during, and after a behavior happens. By looking at the ABCs, we can get a better idea of why someone does something. This then helps us figure out how to change the situation for better outcomes!

IMPORTANT TIPS

When thinking of the ABC's it's important to remember the following. Keep these notes handy, to help pass your RBT exam, and sound like a pro in conversations.

- "A" stands for Antecedent
- "B" stands for Behavior
- "C" stands for Consequence
- Antecedent comes BEFORE the behavior
- Consequence comes AFTER the behavior

	A.B.C. Data on Problematic BEHAVIORS			
	Antecedent	Behavior	Consequence	
Example 1	The RBT says "No" to more video	The client yells and drops to the floor	The RBT says "you have to wait" and puts on a timer for 2 minutes	
Example 2	The RBT says "Let's go in the work room"	The client drops to the floor	The RBT says "Let's go to the workroom, and prompts the client to stand up and walk into the room.	

A.B.C. Data on Skill Acquisition Goals				
	Antecedent Behavior Consequence			
Example	The RBT says "Clap	The client claps their	The RBT says "Good job"	
	your hands"	hands	and tickles the client	
Example	The RBT says	The child responds with	The RBT says "Yay, that's	
2	"What's your name?"	their name	your name, good job!"	

Example	The RBT says "Let's	The client waits	The RBT says "Good job
3	wait for the phone?"	appropriately, looking at	waiting, here's the phone".
	and puts on a timer	the timer.	
	for the child to see		

LEARNING AND BEHAVIORS

DISCRETE TRIAL TRAINING

Breaking down skills into smaller steps can be super helpful for learning. It's like teaching someone to tie their shoes, you wouldn't show them the whole thing at once. Instead, you'd teach each little part, like crossing the laces, then making a loop, and so on. With practice and positive feedback, the person learns to master each step. Eventually, they can put all the steps together and tie their shoes independently! That's kind of how this type of teaching works, making learning manageable and rewarding.

Definition

Discrete trial teaching involves breaking skills down into smaller components and teaching those smaller sub-skills individually.

Examples

- The client needs to learn "Colors",
- we start by teaching 1 color, and repeating instruction with that 1 color until the client masters that color.
- Then a 2nd color is added to the program, and is repeated until the client masters that color. Etc.
- The client learns all the colors individually [One by One], until he learns ALL the colors

Review the table below for common examples of Discrete Trial Training in everyday ABA.

	Instruction [SD]	Response
Example 1:	SD: What color is this? + flashcard	The client says "Blue"
Example 2:	SD: How old are you?	The client says "3 years old"

Example 3: SD: Find the cat. Client touches the flashcard with the

cat on it.

Example 4: SD "Trace the line" The client traces the line

NATURALISTIC TEACHING / INCIDENTAL TEACHING

Imagine teaching a kiddo how to ask for juice. Instead of structured drills, you wait for them to reach for the juice box. That's their "cue." You jump in with, "What do you want?" giving them a chance to use their words. They get the juice for trying, and boom! Learning happens naturally throughout the day. That's incidental teaching, sneaky learning in action!

Definition -

the goal is to apply ABA therapeutic techniques within the child's natural environment or routine

Incidental Teaching -

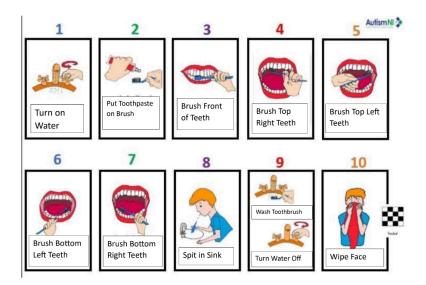
Definition - Incidental teaching is a strategy that uses the principles of applied behavior analysis (ABA) to provide structured learning opportunities in the natural environment by using the child's interests and natural motivation. Incidental teaching is an especially useful approach with young children.

	Skill / Program	Routine in which the skill occurs?
Example 1:	The client eats with the spoon	Only teach the skill of 'eating with a spoon' during
		Breakfast, Lunch, and Snack Time
Example 2:	The client learns to sits on the	Only teach the skill of 'sitting on the toilet' during
	toilet	potty training
Example 3:	The client holds the hand of the	Only teach this skill while walking in the hallway,
	RBT while walking	walking in the parking lot, or walking from one
		room to another

CHAINING & TASK ANALYSIS

Ever notice how you break down big tasks into smaller steps? Chaining in ABA therapy is kind of like that! It's about teaching a new skill as a sequence of smaller, easier steps. Each step becomes like a link in a chain, building towards the final skill. Think of it as a recipe: you wouldn't bake a cake all at once, you'd follow each step in order. It helps make learning manageable and rewarding!

The image below shows how "Brushing Teeth" is an overall task, and is broken into 10 smaller tasks. These 10 smaller steps are taught in a specific sequence that helps the individual learn the skill with ease.



The image below shows how "Washing Hands" is an overall task, and is broken into 10 smaller tasks. These 10 smaller steps are taught in a specific sequence that helps the individual learn the skill with ease.



TYPES OF CHAINING

There are three types of chaining that we use in everyday life. These come in handy in helping teach our individuals new skills during our ABA therapy sessions. These methods are to help the individual learn the skill in individual, smaller, easier parts. This helps reduce frustration from trying to get the whole thing right or being continuously corrected. Review these types of chaining. They're sure to come up on the RBT exam and during therapy sessions, even during your at home daily chores.

Forward Chaining

Forward chaining involves teaching the sequence / order of the steps, starting with the first step. In this method, you teach the first step, and provide full assistance on the remainder steps, until the first step is mastered. Once the individual masters the first step, then they learn the First AND the second step, and the therapist continues to provide full assistance on the remainder steps. Then the individual learns the first, second, and third step... and so on until they learn all the steps in the correct sequence.

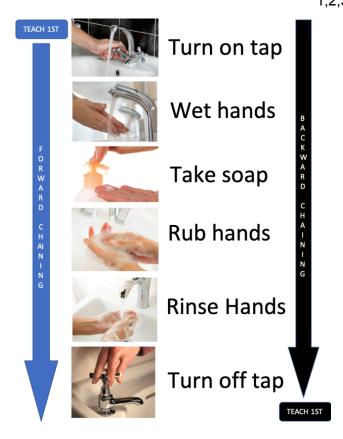
Whole Chaining [A.K.A. Total Task Chaining]

Teaching the sequence / order of the steps, by teaching ALL the steps of the sequence

Backward Chaining

teaching the sequence / order of the steps, by starting with the last

Types of Chaining [Examples]			
Forward Chaining	Whole Chaining	Backward Chaining	
1 [once masters]	1,2,3,4,5,6,7	7 [once masters]	
1, 2 [once masters]	Client learns ALL steps	6,7 [once masters]	
1,2,3 [once masters]		5,6,7 [once masters]	
1,2,3,4 [once masters]		4,5,6,7 [once masters]	
1,2,3,4,5 [once masters]		3,4,5,6,7 [once masters]	
1,2,3,4,5,6,7 [once masters]		2,3,4,5,6,7 [once masters]	
		1,2,3,4,5,6,7	



SHAPING

Think of it like baking a cake. You wouldn't just throw all the ingredients in at once, right? First, you focus on one step, like mixing the flour and sugar. Then, you slowly add other steps, like the eggs and milk, until you get closer and closer to the final product. That's what we're doing here, taking small steps towards the goal!

Think of shaping like playing that "hot and cold" game. You gradually guide someone toward a goal, giving praise for steps in the right direction. Instead of saying "cold," you just ignore the wrong tries and celebrate even tiny wins. Over time, they'll master the skill, step by encouraging step!

Definition –

a systematic approach to teaching a new skill by reinforcing successful approximations [allowing individuals to gradually progress towards the desired response / behavior].

Example 1 – When a baby learns to walk

The mom reinforces standing up

The mom then reinforces standing up and taking one step

The mom then reinforces standing up and taking 3 steps

The mom then reinforces standing up and walking to the parent [5 steps]

The mom then reinforcers more and more steps until the child is walking

Example 2 – The client is learning the word "Bubble"

The client says "Buh" the RBT says "Good job Buh for Bubbles"

The client says "Bub" the RBT says "Good job Buh-B for Bubbles"

The client says "Buh – bl" the RBT says "Good job Buh-Bl for "Bubbles"

The client says "Buh -bles" the RBT says "Good job Buh-bles"

DISCRIMINATION TRAINING:

Ever noticed how you instinctively grab your phone when you hear *your* ringtone? That's kind of like discrimination training in action! Basically, it's helping someone tell the difference between things that look, sound, taste, smell, or feel similar. Think teaching the difference between a fork and a spoon, or recognizing the letter "B" versus "D." By practicing and getting rewarded, those distinctions become crystal clear. It's a powerful tool for building essential skills!

In ABA therapy, it's used to teach a variety of skills, from identifying objects to understanding complex instructions. And just like with our fruit example, it involves a lot of repetition and positive reinforcement!

	Stimuli 1	Versus	Stimuli 2
Example 1	Blue	Versus	Green
Example 2	Mommy	Versus	Teacher
Example 3	Car	versus	Truck
Example 4	Green Light	Versus	Red Light

STIMULUS CONTROL TRANSFER

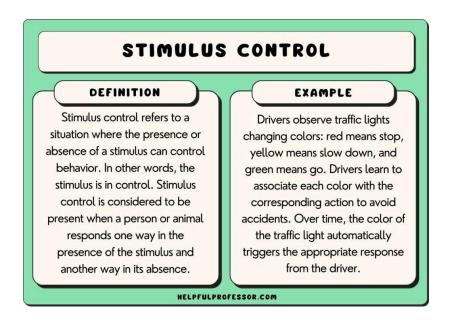
Picture this: you're learning a new skill, like riding a bike. At first, you need training wheels for support. Gradually, you rely less on them, gaining confidence. Eventually, you're cruising on two wheels, all by yourself! That's like mastering a skill and using it in different places or situations. It's like unlocking a new level of independence.

So, you're trying to switch things up a bit? It's like teaching a new trick but with a twist! Instead of the same old routine, we're mixing it up. Think of it as learning to ride a bike with training wheels, then ditching them to ride free. That's the magic of learning new skills and using them in different places.

Definition

Stimulus Control Transfer refers to the process of transferring the control of behavior from one set of stimuli to another. In ABA, this involves teaching individuals to respond to specific cues or discriminative stimuli in order to evoke desired behaviors.

Example



PROMPTING

Prompting in ABA Therapy

What is prompting?

Prompting means giving a child extra help or a cue to help them do the correct behavior or response. Prompts make it easier for the child to learn a new skill by guiding them toward the right answer or action. The goal is to help the child succeed without making errors, and then slowly reduce the help over time.

Definition

the term 'prompting' refers to providing assistance or cues to encourage to teach / the use of a specific skill.

TYPES OF PROMPTING

Think of it like giving a friend a little nudge in the right direction. You're offering support to help them learn a new skill. This support can be anything from a gesture to a spoken word, depending on what they need to succeed! As they get better, you'll gradually fade those prompts away. It's like watching your friend ride a bike – at first, they need your help, but soon they're off on their own!

VERBAL PROMPTING



A verbal prompt involves telling the learner the answer, giving a verbal cue, such as, the beginning sound of the answer, and/or giving the direction more than once

GESTURAL / MODELING PROMPTING



Using a gesture or any type of action the learner can observe the instructor doing, such as pointing, reaching, or nodding, to give information about the correct response.

PHYSICAL PROMPTING



Physically guiding the learner's hands to complete the task thoroughly. Also known as hand-over-hand assistance

PROMPT HIERARCHY

The prompt hierarchy is the order of prompts from most to least supportive. It shows how much help the therapist gives.

Definition - Systematically <u>Increasing</u> the level of prompting [assistance] provided to the client to reach the desired behavior

From most to least help, it usually goes like this:

- 1. **Full Physical Prompt** Hand-over-hand assistance.
 - Example: Helping a child physically place a block in a box.
- 2. **Partial Physical Prompt** Light touch or guidance.
 - o Example: Gently tapping the child's elbow to remind them to pick up the block.
- 3. **Model Prompt** Showing the child what to do.
 - Example: The therapist demonstrates putting a block in a box.
- 4. **Gestural Prompt** Using a gesture, like pointing or nodding.
 - o Example: Pointing to the block or box.
- 5. **Verbal Prompt** Telling or reminding the child what to do.
 - Example: Saying, "Put the block in the box."
- 6. **Independent** The child performs the task on their own with no help.

PROMPT FADING

Ever notice how someone might need fewer and fewer reminders to do something? It's like when you learn a new recipe, you need the instructions less and less each time. In ABA therapy, we call that "fading" the prompts. We gradually reduce those helpful hints, so the skill becomes more independent. Eventually, the person can do it all on their own, which is a pretty big deal!

Poefinition - Systematically <u>Decreasing</u> the level of prompting [assistance] provided to the client to reach the desired behavior

ACTIVITY

Teach your favorite recipe to your friend. What kind of help / assistance did you use?

When you write down the instructions, that's a visual aid.

When you tell your friend "fold in the cheese". That's verbal prompting.

When you show your friend how to flip the plan "Like this". That's gestural prompting.

When you grab the pot and help your friend carry it, that's physical prompting.

In the beginning, your friend will need the most amount of help [prompt heirarchy].

Each time they practice the recipe, they'll need less and less help [prompt fading].

If you're a dance guru, Teach your friend a dance move.

When you tell your friend "step to the left" or "step forward". That's verbal prompting.

When you show your friend the move "like this". That's Gestural prompting.

When you physically turn your friend, that's physical prompting.

TOKEN SYSTEMS

Imagine earning points for doing a great job! Now, picture trading those points for something you really want. That's kind of how a special reward system works. It's all about encouragement and learning new skills. By collecting those points, you're on the right track! And guess what? The more you practice, the closer you get to awesome rewards!

Definition: A system for delivering positive reinforcement for engaging in a desired behavior or completing a specific number of tasks.

Star Chart - Token System

Here is a visual example of a Token Economy. This a simple 5 star token system. The learner completes a task[s], once complete, the learner earns a star for that task. Once all stars are obtained, the learner gains a reward.

Instead of stars, the learner can choose their image. Each token can be a different star wars character.



Treasure Chest - Token System



Another type of token system, that is common in schools, for every task the learner gets 1 ticket. At the end of the day, the learner can exchange the tickets for something in the "Treasure Chest.

Token / Level Heirarchy

One difference about the "Treasure Chest Token System" is that smaller value items 'cost less', and the more value items 'cost more'. This is a motivation system. The more tickets the learner obtains for good behavior, the more that learner can purchase from the Treasure Chest.



1 ticket = 1 small toy
5 tickets = a ball
10 tickets = a whistle
15 tickets = game time

20 tickets = _____

SCHEDULES OF REINFORCEMENT

Ever notice how sometimes you get rewarded for every little thing you do, and other times it seems random? That's kind of how reinforcement schedules work in therapy. Instead of giving a reward every single time, we mix it up to keep things interesting and help you learn faster. Sometimes it's every other time, sometimes it's after a certain amount of time passes, and sometimes it's unpredictable. This keeps you on your toes and makes those rewards even sweeter when you get them! It's all about finding what works best for each person.

CRISIS / EMERGENCY PROTOCOL

A behavioral crisis is a situation in which a person's behaviors can put them in jeopardy of harming themselves or others, of being unable to care for themselves, and/or live a restricted life.

What This Means

Crisis and emergency protocols are the steps and procedures an RBT must follow during dangerous, unexpected, or emergency situations to keep clients, themselves, and others safe. This is one of the most important areas of the RBT Competency Assessment because safety is always the highest priority in Applied Behavior Analysis (ABA).

RBTs are not responsible for creating crisis plans—that is the BCBA's role—but RBTs must know and follow the plan exactly as it is written.

When to Use Crisis and Emergency Protocols

RBTs use these procedures during situations that may include:

- A client engaging in aggression, self-injurious behavior (SIB), or property destruction
- A medical emergency, such as fainting, choking, or a seizure
- A runaway or elopement attempt (leaving the safe area)
- Severe tantrums or unsafe behaviors that could cause harm to the client or others
- Environmental emergencies, such as fire drills, natural disasters, or power outages

What the BACB Expects RBTs to Know

For your Competency Assessment, you should be able to:

- 1. **Identify** when a situation becomes a crisis or emergency.
- 2. Follow the written plan or supervisor's directions calmly and accurately.

- 3. **Implement procedures** to ensure **immediate safety** (for example, removing dangerous items, clearing the area, or calling for help).
- 4. **Avoid restraint or physical management** unless you are specifically trained and your supervisor has written authorization in the client's behavior plan
- 5. **Report and document** the event immediately after the situation is under control.
- 6. **Stay within your scope of practice**—never make up your own safety procedures or handle a crisis alone without supervision if it can be avoided.

Examples

Example 1: Aggression

A child begins hitting and kicking during a session.

- The RBT calmly moves nearby items out of the way, blocks safely if trained to do so, and ensures other clients are removed from the area.
- The RBT follows the behavior plan steps (e.g., "block and redirect to functional communication") and calls the BCBA for support.
- Once safe, the RBT documents the incident and completes the required report.

Example 2: Medical Emergency

A child begins choking on a snack during session.

- The RBT immediately follows the emergency plan—initiating the Heimlich maneuver if trained, or calling for help.
- The RBT contacts emergency services (911) if necessary and notifies the supervisor and parent right away.

Example 3: Elopement

A client runs toward the parking lot.

• The RBT follows the elopement protocol—maintaining visual contact, blocking access to unsafe areas if safe to do so, and alerting other staff.

• The RBT documents what happened, including what may have triggered the attempt and how the client was safely recovered.

Key Points to Remember

- Always stay calm, clear, and consistent.
- Follow the behavior intervention plan (BIP) or crisis plan exactly as written.
- Protect safety first, then focus on teaching and prevention later.
- **Document everything** accurately and immediately after the situation.
- Ask for support—you are never alone in handling emergencies.

ANTECEDENT INTERVENTIONS

Let's just say it's all about figuring out what makes someone tick. It's like finding that special something that really gets them going and makes them want to learn or do something. Think of it like discovering their favorite snack or game; it's a big deal! Once you know what it is, you can use it to help them reach their goals. It's pretty amazing how such a simple idea can make a huge difference.

Think about what gets you moving and grooving! It's probably something you really enjoy, right? Well, in a way, it's the same for everyone, just with different things that light that fire. We all have things that push our buttons in a good way, making us want to go for it. These special somethings are powerful motivators, and that's what we're talking about here.

Motivating / Establishing Operations

Motivating Operations [M.O.] influences the effectiveness of a reinforcer:

A motivating operation will influence whether the stimuli is effective as a reinforcer [motivator]

SATIATION

Sometimes, we just want something so badly. Then, we get a lot of that thing, maybe even too much! Eventually, wanting that thing loses its appeal. It's like that with things we really enjoy, and even things we don't enjoy so much. This can be a useful tool to help manage challenging behaviors. Basically, it's all about finding that sweet spot where we've had enough.

Definition: occurs when the person has been exposed to a reinforcer continuously until the item loses it's effectiveness on their behavior

Example: If the client eats 100 M&M's, M&M's may not be effective in motivating the client to do table work.

DEPRIVATION

Definition: withholding a reinforcer, to make it more effective to motivate the client to complete the desired action / prevent the client from completing a negative behavior.

Example: If the BCBA withholds [limits access to] the Tablet, the tablet may be effective in motivating the client to do table work.

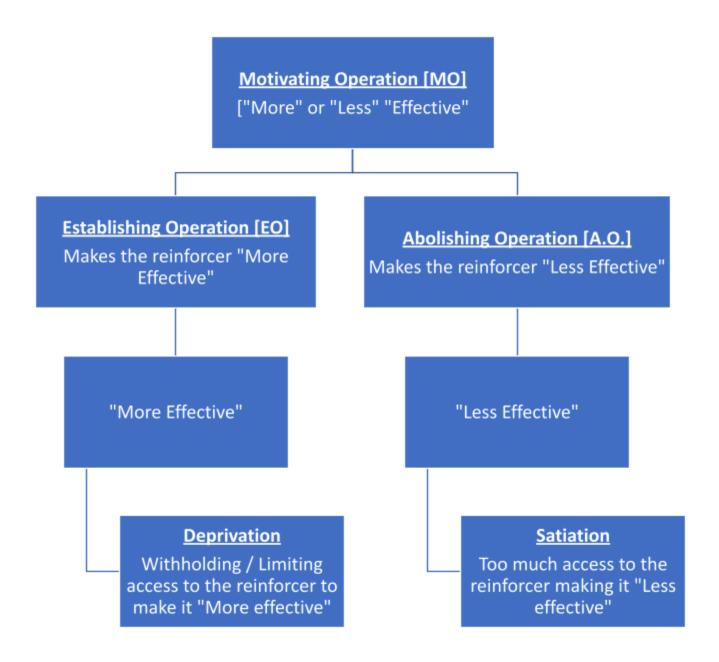
Establishing Operations [EO]

<u>Increases the effectiveness of a reinforcer</u> / A type of Motivating Operation [MO] that increases how reinforcing something is. Example: Deprivation - Withholding the tablet, makes the tablet more effective as a reinforcer [motivator]

Abolishing Operations: [AO]

<u>Decreases the effectiveness of a reinforcer /</u> A type of Motivating Operation [MO] that makes the stimulus less desirable [a.k.a. makes the stimulus less effective as a reinforcer]. Example: Satiation - If the client just finished eating 2 cheeseburgers, 2 slices of pizza, and 2 cupcakes, food will not be as effective as a reinforcer [motivator

Example	"More" or "Less" Effective?	Satiation or Deprivation?
If the therapist eats a whole cup of Ice	Is Ice Cream "More Effective" or	Is this an Example of
Cream, is the therapist going to be	"Less Effective" as a motivation?	Satiation [too much] or
motivated to work for Ice Cream?		Deprivation [limited or
		none]?
If the therapist wins the Lottery, and their	In this example is Money "More	Is this an example of
boss asks them to work on the holidays	Effective" or "Less Effective" as a	Satiation or Deprivation?
for extra money, is the therapist	motivation for the therapist to work	
motivated to work?	the holidays?	
If the therapist missed 3 days of work,	In this example, is Money "More	Is this an example of
due to being sick. Their paycheck is	effective" or "Less effective" as a	Satiation [too money money]
smaller than it was last week. Is the	motivation for the therapist to work?	or Deprivation [limited or no
therapist motivated to work for money?		money]?
A client loves Oreos, the therapist uses	In this example, are Oreos "More	Is this an example of
Oreos to reinforce every good behavior	effective" or "Less effective" as a	Satiation [too many Oreos]
from 9am to 12pm. The client eats lunch	motivation for the client to work?	or Deprivation [limited or no
at 12pm. Will the client be motivated to		Oreos]?
work for Oreos?		



DISCRIMINATIVE STIMULI [S.D.]

Think of it like this: you only crave coffee when you smell it brewing. The smell is the cue, or discriminative stimulus, that makes you want coffee. In ABA therapy, we use specific cues to help people learn. These cues, like a picture card or a spoken word, signal that a particular behavior is appropriate at that moment. Just like the coffee smell makes you want coffee, these cues help individuals understand what to do and when. So, the next time you crave coffee when you smell it, remember discriminative stimuli!

Picture this: a kiddo sees a vending machine. They know that means tasty treats are just a button-push away! The vending machine is like a secret signal, telling them what to do. In ABA therapy, we call these signals "discriminative stimuli" – they help us understand what comes next and how to react. It's all about connecting the dots between what we see and what we do! Pretty cool, right?

a specific environmental cue that signals to an individual that a particular behavior will be reinforced or punished.

A "Stimulus" is anything we Hear / Touch / Smell / Taste / Feel [physically] – that evokes a response

Is an instruction or other stimuli that evokes a specific response

```
Example: 1
```

Discriminative Stimulus "S.D" = The RBT says "Touch your nose" [the SD]

Client response = the client then touches their nose

Example: 2

SD = The RBT says "Sit down"

Client response = the client then sits down

Example: 3

SD = The RBT says "Come here"

Client response = the client walks to the RBT

Example: 4

SD = The adult sees a Red Light

Response = the adult steps on the breaks to stop the car

SD = the adult sees a Green Light while driving

Response = the adult presses on the gas pedal to drive the car

Example: 5

SD = The adult hears the mosquito BZZZZZZZ near their ear

Response = the adult moves their head and waves their hand

Example: 6

SD = The adult smells a burning candle

Response = the adult says "That smells good"

PROMPTING SUCCESS, PREVENTING BEHAVIORS

Think of it like this: instead of waiting for a tough behavior to happen, we try to set things up so it's less likely in the first place. Giving clear instructions and rewards for good choices can work wonders. Sometimes we even teach new skills to replace the old behaviors, like using words instead of getting frustrated. It's all about making things smoother and more positive! And remember, consistency is key - everyone involved needs to be on board for the best results.

PRIMING

Think of it like this: you see a commercial for pizza, and suddenly you're craving pizza, right? That's kind of like priming! In ABA therapy, we use priming to help kids get ready for an activity. So, if a child is learning colors, we might show them a red toy before asking them to point to red. It's all about giving a little nudge in the right direction!

PREMACK PRINCIPLE [A.K.A FIRST-THEN]

Ever notice how a little "treat yourself" can be super motivating? That's kind of like the Premack Principle in action. Basically, it means you can use a preferred activity as a reward for doing a less-preferred one. Think, "If I finish my veggies, I can have dessert!" It's a simple but powerful tool for building positive habits. So next time you're struggling to get something done, try pairing it with something you enjoy!

ENVIRONMENTAL ARRANGEMENTS

Think of it like setting the stage for success! You know how a tidy workspace helps you focus? Environmental arrangements are about tweaking the surroundings to make it easier for someone to learn and thrive. This might mean organizing materials in a specific way, reducing distractions, or even just having comfy seating. Small changes can make a big difference! It's all about setting everyone up for a positive and productive experience.

VISUAL AIDS / VISUAL SCHEDULE

Think of it like this: ever put together furniture with pictures? Visual aids are like those instruction manuals for behavior. They help break down skills and routines into clear, easy-to-follow steps. This can be super helpful because sometimes words aren't enough, especially when learning

something new. Using visuals can make a huge difference in helping someone understand expectations and learn more effectively. So, next time you see a visual schedule or a choice board, you'll know it's all about making learning clearer and easier!

DIFFERENTIAL REINFORCEMENT

Which involves selectively reinforcing desired behaviors while withholding reinforcement for undesired behaviors.

DIFFERENTIAL REINFORCEMENT OF ALTERNATIVE BEHAVIORS [DRA]

DRA involves reinforcing a behavior that serves as an alternative to the inappropriate behavior.

	Behavior	Alternative Behavior [DRA]
Example	The client is climbing on the	The alternative behavior is sitting on the
1	chair.	chair.

DIFFERENTIAL REINFORCEMENT OF OTHER BEHAVIORS [DRO]

Differential reinforcement of other behavior (DRO) is a behavior modification technique that involves reinforcing the absence of a problem behavior for a specific period of time, while withholding reinforcement for the problem behavior itself.

	Behavior	"Other" Behavior [DRO]
Example	The client is tantrumming on	The RBT reinforces "Good job looking at
1	the floor.	me" or "good job touching my arm" or "good
		job standing" [anything that is NOT the
		behavior]

DIFFERENTIAL REINFORCEMENT OF INCOMPATIBLE BEHAVIORS [DRI]

Differential reinforcement of incompatible behavior (DRI) is a behavior modification technique that involves identifying a behavior that is incompatible with the problem behavior and reinforcing it when it occurs while withholding reinforcement for the problem behavior. The goal is to increase the occurrence of the incompatible behavior while decreasing the occurrence of the problem behavior.

	Behavior	"Incompatible" Behavior [DRI]
Example 1	The client is biting on the	The incompatible behavior is for
	wheel of a car	the client to drink water. [The client
		Cannot physically bite the car, and
		drink water at the same time]

SUMMARY

Term	Acronym	Extinction [make behaviors go away like the Dinosaurs]	Reinforce
Differential Reinforcement of Alternative Behaviors	DRA	Bad Behavior	An Altnerative / Replacement Skill
Differential Reinforcement of Other Behaviors	DRO	Bad Behavior	Any skill / appropriate behavior that is NOT the bad behavior
Differential Reinforcement of Incompatible Behaviors	DRI	Bad Behavior	Any skill / appropriate behavior that is PHYSICALLY INCOMPATIBLE with the bad behavior
Differential Reinforcement of High Rates	DRH	Bad Behavior	
Differential Reinforcement of Low Rates	DRL	Bad Behavior	

EXTINCTION

Ever notice how some behaviors just fade away? Like, maybe you used to hum while working, but now you don't. In ABA therapy, that's kind of like extinction - we're aiming to decrease a behavior by stopping the reinforcement that used to keep it going. It's not about punishment, but more like cutting off the fuel supply. Think of it like a kid who throws a tantrum for candy; if you stop giving in, the tantrums usually lessen over time. That's the goal with extinction: gradual reduction until the behavior is basically gone.

Ever notice how a kid might stop doing something they used to because nobody reacts anymore? It's like their behavior goes extinct! In ABA therapy, we use that same idea to help decrease behaviors that aren't helpful. Basically, we figure out what's reinforcing the behavior and then stop that from happening. Without the reward, the behavior fades away, just like that! It's pretty cool to see how it can help people learn new, more positive ways of getting what they need.

Definition

Reinforcement is 'Discontinued' to increase a specific response or decrease a problematic behavior

Example 1

A client drops to the floor – Mom picks up the client and says "It's okay" [reinforcing the dropping to the floor]

A client drops to the floor – Mom ignores the dropping to the floor [extinction] and waits for the client to stand up and says "Good job standing" [reinforces standing up]

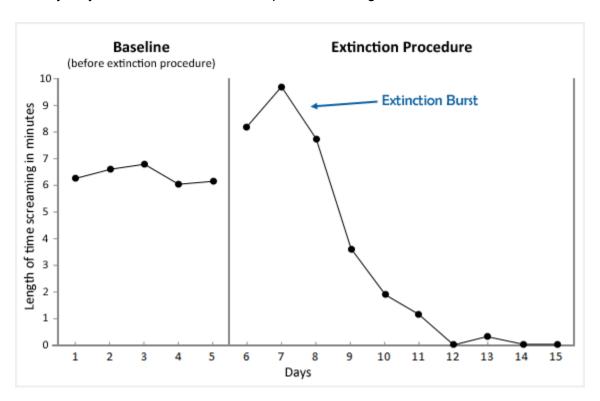
"Extinction Burst"

Extinction bursts are a normal part of the learning process. When a behavior that was previously reinforced is no longer reinforced, it is common to see a temporary increase in that behavior. This increase is called an extinction burst. Extinction bursts can be frustrating, but they are a sign that the intervention is working. It is important to remain consistent with the intervention and not give in to the extinction burst. With time and consistency, the behavior will decrease.

Ever feel like a kid's tantrum gets worse before it gets better? That's kind of like an extinction burst! It's a temporary increase in a behavior when we stop rewarding it. Think of it like the last-ditch effort before the behavior fades away. So, even though it's tough, hang in there – it's a sign we're on the right track!

Definition - an increase in the frequency, intensity, or duration of an undesired behavior when reinforcement is withheld.

For example, if a toddler usually cries to get their way, but crying doesn't work anymore, they may escalate to a tantrum in hopes of obtaining their desired reinforcement.



CLINICAL PROFESSIONALISM

Alright, let's talk shop! In the clinic, we keep it classy. That means dressing the part, being on time, and always treating everyone with respect. Remember, clear communication is key, so speak up if you have questions but keep the chit-chat professional. Bottom line, we're here to create a positive and healthy environment for everyone.

HIPPA PRIVACY LAWS

Keeping things confidential is a big deal in therapy, just like at the doctor's office. Sharing information about someone's therapy sessions is a no-go unless they say it's okay. That's super important for respecting everyone's privacy and building trust. It's all about making sure people feel safe and comfortable sharing during therapy. So, remember to zip your lips and keep things private!

CLINICAL SESSION NOTES

At the end of every session, a therapist will write a "session note". Every company had a different template, so make sure you ask for training on company template. Think of a session note like a snapshot of what you talked about. Stick to the facts and leave out your opinions or guesses about what might be going on. For example, instead of writing "They seemed sad," you could write "They reported feeling down today." Remember, clear and concise language is key.

ASK YOUR SUPERVISOR

That's something you want to ask a professional about. They are the experts when it comes to therapy. It's important to get information about these things from reliable sources. Don't be afraid to reach out and ask your questions. Understanding the process can make you feel more comfortable. Just remember, knowledge is power.

BURN-OUT

Sometimes, taking a little break can be really helpful. It helps us refocus and be ready for the next step. Learning new things can be like that too! Giving ourselves a bit of time between activities can make a big difference. It's all about finding a good rhythm that works for us.

CLIENT DIGNITY

Everyone deserves to be treated with respect, plain and simple. That means listening to someone's needs and preferences, even if they communicate differently. It's about making choices together and supporting independence whenever possible. Remember, kindness and empathy can go a long way in helping someone feel valued and understood. We're all in this together!

Definition

Client dignity refers to the inherent value and worth of an individual, regardless of their abilities or circumstances. It is an important aspect of ethical practice in any field that involves serving individuals, including healthcare, social work, and counseling. You can maintain a client's dignity by showing respect at all times, maintaining privacy and confidentiality, and communicating effectively and professionally. You can also offer your client's choices and allow them to be an active participation in treatment development.

Examples

Knocking on the door before entering

Asking the client their preferred name [first name or nickname, etc.]

Running the following programs in the bathroom and Keeping the bathroom door closed during toileting, dressing, undressing, toilet accidents, etc.

PROFESSIONAL BOUNDARIES

Keep it strictly professional, like you're running a business. No personal favors, no accepting gifts, and definitely no sharing personal social media. It's all about the client's needs during sessions, so no side conversations or going off on tangents. Remember, you're there to provide a service, and clear boundaries help maintain that professional relationship. Ultimately, maintaining those boundaries keeps everyone safe and the focus where it should be: on the client's progress.

Definition

Maintaining a professional relationship with the caregiver[s], client[s], and client relatives that is focused on objectively providing ABA therapy services to the child.

BCBA Terms to Look out for

"Dual Relationships"

"Conflict of Interest"

"Monetary / Gifts"

Examples

The RBT's will NOT provide personal information such as full name, phone number, email, address, birthdays, out of work personal plans, etc. with the caregivers

The RBT's will NOT have caregiver[s] or client relatives on social media platforms.

Including but not limited to Facebook, Tik Tok, Instagram, Twitter, etc.

The RBT's will NOT attend personal events of the client [i.e. church with the client, client or caregiver birthday parties, client vacations, etc.]

The RBT will NOT give nor receive gifts that are over \$10 in monetary value [this is a requirement of the Behavior Analyst Certification Board].

The RBT will NOT have personal conversations with caregiver[s] such as personal relationships, personal financial situations, personal political beliefs, personal spiritual beliefs, or personal preferences regarding sports.

CLINICAL SUPERVISION

Ever feel like even therapists need someone to talk to? It's true! Therapists see supervisors to make sure they're giving you the best care possible. It's kind of like a coach helping an athlete improve their game. Regular supervision helps therapists stay sharp, handle tough cases, and avoid burnout. So, next time you see a therapist, know they have a support system too!

Definition

Supervisors oversee individuals who are accruing fieldwork hours to become certified (e.g., trainees) and/or individuals who are providing behavior-analytic services. "Individual Supervision "

One on One Supervision between the BCBA [Behavior Analyst] and the RBT [Registered Behavior Technician during an active ABA therapy session with a client present "Group Supervision"

Supervision between the BCBA [Behavior Analyst] and up to 10 RBT's [Registered Behavior Technicians] in a group setting, during active ABA therapy sessions with a client present.

Examples

Circle Time, Art Time, Physical Activity Time, Group Eating, etc.

SUPERVISION REQUIREMENTS

Supervision is an important part of therapy. It's to ensure the client is making progress on learning and behavior reduction, and also to provide support to each therapist. The BACB requires that supervisees receive a minimum of 5% supervision of the total number of hours that the RBT worked during that month. whether you track it using a calendar, notes, or a client software, make sure to get those supervision hours. the BACB may do random audits

ACTIVITY: What percentage of supervision does an RBT need per month?	<u>%</u>		
Exercise: Calculate the number of 'Supervision hours' you will need?			
The RBT worked 140 hours in the month, how many supervision hours does the RBT need?			
140 hours X 5% requirement = supervision hours			
The RBT worked 180 hours in the month, how many supervision hours does the RBT need?			
hours X 5% requirement = supervision hours			
The RBT worked 91 hours in the month, how many supervision hours does the RBT need?			

hours X 5% requirement = _____ supervision hours

Clinical Direction

Ever had a coach at work? It's kind of like that, but for therapists. The supervisor helps the supervisor get better at their job and learn new skills. They talk through cases, work on challenges, and make sure everything is ethically sound. Think of it as mentorship, but with more paperwork. It's a super important part of becoming a therapist and providing the best care possible.

Definition

Any instance in which the RBT [Registered Behavior Technician], reaches out to / contacts the BCBA for clinical guidance or direction.

Examples

The RBT should speak with the BCBA [seek clinical direction], if a client is not making progress on a skill acquisition goal

The RBT should speak with the BCBA [seek clinical direction], if the caregiver wants to change, update, or wants training on skill acquisition programs, or behavior reduction strategies.

The RBT should speak with the BCBA [seek clinical direction], if the client is engaging in a new target behavior or a new topography of a current behavior

The RBT should speak with the BCBA [seek clinical direction], prior to starting any programs the RBT thinks would be good for the client

The RBT should speak with the BCBA [seek clinical direction], when an RBT does not understand a program, strategy, or behavior plan.

SUMMARY

Thank you for reading the RBT Competency Assessment Training Book!

By studying this guide, you've taken an important step toward becoming a confident, compassionate, and skilled Registered Behavior Technician. Remember, the key to success in ABA therapy is practice, consistency, and continued learning.

If you'd like practice questions, helpful tools, or more information about the next steps for taking the RBT exam, please visit my website at: www.ariumaba.com

Continue your learning journey and stay connected with me for updates, training tips, and resources, Find me on social media: @Mrs.Jazzmyn on TikTok, Facebook, and Instagram

For additional ABA resources, activities, and materials, visit my store on Teachers Pay Teachers.

Thank you again for investing in your professional growth and dedication to the field of Applied Behavior Analysis.

I'm so proud of your hard work and commitment to helping others thrive.

Until next time,

Mrs. Jazzmyn Mijic