



Advanced Applied Project Manual

Chicago Campus

Contact Information:

My Project Site Supervisor

Name: _____

Email: _____

Phone: _____

My Project Chair

Name: _____

Email: _____

Phone: _____

My Second Reader

Name: _____

Email: _____

Phone: _____

Important Links:

TCSPP ABA Website

Find useful documents, links, and updates here.

www.tcsppABA.webs.com

Behavior Analyst Certification Board

BACB® requirements and updates regarding practicum are located [here](#).

NOTE:

All Advanced Applied Project procedures must be conducted in accordance with the Behavior Analyst Certification Board (BACB®) ethics, American Psychological Association (APA) ethics.

TCSPP Advanced Applied Project Manual

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Table of Contents

I.	Advanced Applied Project Overview.....	4
II.	Course Progression.....	5
III.	Project Components.....	6
IV.	Defense.....	11
V.	Appendices.....	12
	a) Appendix A: Site Consent.....	12
	b) Appendix B: Informed Consent.....	13
	c) Appendix C: Rubric for Oral Presentation of Assessment and Results (AB 566).....	15
	d) Appendix D: Rubric for Case Proposal (AB567)	16
	e) Appendix E: Rubric for Final Written Case Report (AB568)...	17
	f) Appendix F: Rubric for Oral Defense (AB 568).....	19

Advanced Applied Project Overview

The purpose of the Advanced Applied Project (AAP) capstone project is for you to demonstrate mastery of clinical and academic material learned during your master's program at The Chicago School of Professional Psychology. This project will determine your readiness to provide exceptional services as a clinician.

AAP capstone project components include:

- Site consent
- Client/guardian consent
- Case conceptualization
- Behavior/Skill assessment
- Treatment recommendations
- Behavior intervention plan/Skill acquisition plan
- Literature review
- Treatment results
- Future recommendations
- Written report
- Poster
- Oral defense

Your final product will be a thorough case report with a literature review and a poster with oral defense.

Advisement

Upon successful completion of AB 551, you will enroll in AB 566 and be assigned a faculty Project chair. Your chair will remain constant throughout the AAP process. You will work with your chair to identify a field supervisor under which you will work on your AAP. The field supervisor will typically be your Practicum supervisor; however, this is not always the case. Your field supervisor may change after AB566, if you change sites.

It is your responsibility to organize a meeting between your AAP chair and your field supervisor at the onset of *each* semester. In addition, you will be responsible for ensuring your chair and supervisor are informed of your progress throughout the process.

NOTE:

You are responsible for scheduling a minimum of one meeting per week with your chair and your supervisor separately.

Course Progression

Semester 1: AB 566

While completing your project, you will select a client and work closely with your field supervisor and AAP chair on assessment and identification of interventions with the final product of AB 566 being a case presentation. Prior to sharing any data, both consent forms (Appendix A & B) must be completed and uploaded in Canvas. This will be presented to your class in the form of a Power Point presentation at the end of AB 566 (rubric in Appendix C).

Semester 2: AB 567

As in AB 566, you will also complete a case conceptualization; however, you will work more independently in AB 567 as you identify, assess, and provide treatment for the client, while still under the guidance of your site supervisor and chair. You will work with your project chair to select a second reader for your AAP case report. The final product of AB 567 is your case conceptualization, assessment plan, and treatment goals. These should be submitted to both your chair and reader by the end of the semester.

Your written case report proposal will include your case conceptualization, with detailed information about your behavior and skill assessment procedures, proposed treatment recommendations, and a literature review supporting your recommendations. Treatment recommendations must take into account variables related to diversity and cultural differences. Your case report proposal will also include data summaries (graphs) of assessment results, pre-test or baseline measures, and any initial treatment data.

Semester 3: AB568

After receiving feedback on your written case proposal from your project chair and second reader, in AB 568, you will implement skill acquisition and behavior support plans under the guidance of your site supervisor, making data and literature-based decisions to promote behavior change in the desired direction.

You will prepare a final written case report including your case conceptualization, behavior and skill assessment, treatment recommendations, literature review to support treatment recommendations, results (including graphs), discussion regarding any modifications required to promote desired behavior change, and future recommendations. All treatment recommendations must take into account variables related to diversity and cultural differences. This written case report must be submitted to your second reader at least two weeks before the end of the semester to be eligible for your oral defense at the end of the term.

Project Maintenance: AB 955X

If you do not complete the project in these three courses, you will enroll in AB955X Project Maintenance until you complete your project and successfully defend.

Project Components

Site & Client Consent

At the onset of *each* semester, you must have your site supervisor sign a 'Site Consent for Applied Project' form (Appendix A). Each client you work with during the project must also sign a Client Consent for Applied Project form (Appendix B and available in Canvas).

Selecting a Client

For AAP, you may choose a problem behavior for reduction or a set of skills to teach your client. Identification of the client and the need for a behavior reduction or skill acquisition plan must be coordinated with your field supervisor and must be selected based on need. You can choose to work with a new or existing client at your site. If you choose to work with an existing client, the client must show a need for assessment and intervention in the area of problem behavior or skill acquisition.

Problem behaviors and skill deficits are not viewed in a vacuum. As such, identifying a solitary skill or a problem behavior without considering the client's functioning level in other domains is inconsistent with behavior analytic clinical work. To this end, you must identify 1) a cluster of related skills, 2) problem behavior and replacement behavior, or 3) a combination of these for your AAP.

Note:

In accordance with BACB® ethical codes, you must obtain consent prior to collecting data.

Assessment

The purpose of conducting assessments is to identify behaviors and skills currently in the client's repertoire, the client's past history of reinforcement, and areas for clinical intervention. You are responsible for selecting needed assessments and providing a rationale for each assessment, and communicating with your field supervisor and chair prior to conducting assessments.

Informal and formal assessments are needed for both skill acquisition and problem behavior interventions. All assessments must include the following:

- Date of birth
- Previous assessment results
- Current and previous treatments/interventions and outcomes
- Medications/allergies

- Ecological assessment
- Stimulus preference assessment

Behavior reduction assessments start by formulating an operational definition of the target behavior. In addition, they may include:

- Caretaker interview (e.g., background information, FAIR-P, QABF/FAST)
- Operational definition of problem behavior
- Direct assessments (e.g., ABC, frequency, interval)
- Functional Analysis (optional)

Skill acquisition assessments may include:

- Standardized assessments (e.g., VB-MAPP, ABLLS-R AFLS, VABS™-II)
- Other assessments (e.g., curriculum-based assessment, fluency timings)
- Parent or teacher interview

Written Case Report

Your written report will include your case conceptualization, behavior and skill assessment, treatment recommendations, literature review to support treatment recommendations, results (including graphs), discussion regarding any modifications required to promote desired behavior change, and future recommendations. All treatment recommendations must take into account variables related to diversity and cultural differences.

Format of Written Case Report

The written case report should be formatted like a clinical report. While there is not a standardized format, clinical reports are not written in APA format. They are typically single-spaced with section subheads and have visual displays embedded in the text. For the purposes of this project, you will need to include the literature review, references, and appendices in addition to your actual clinical report. These should be in APA format (and can be in the same document or a second document).

NOTE:

Please see the WRITTEN CASE REPORT rubrics for Proposal (Appendix D) and Final (Appendix E).

Case Conceptualization

Your written report proposal and final written report will include a formal case conceptualization of the client, providing a holistic view of the client including background information, reason for referral (as if this client was referred to you), functioning level, client strengths, summary of assessments and results including graphs, and identification of the area(s) for intervention including operationalized definitions for

target behaviors. Recommendations must take into account variables related to diversity and cultural differences, as well as progress to date.

NOTE:

Please ensure you change identifying information (e.g., name, date of birth, school attended) to maximize confidentiality.

Intervention

Based on the data collected and your literature, you will identify your method of intervention. Methods must be approved by your site supervisor and your project chair prior to implementation. You should also send your proposal to your second reader for review, feedback, and suggestions prior to implementing your procedures.

NOTE:

Intervening without supervisor approval is both unethical and may cause harm to clients. Such behavior is subject to academic disciplinary action.

Behavior Reduction Plans

The purpose of a behavior reduction plan is to provide technologically written instructions for specific techniques in an attempt to reduce problem behavior. This project is driven by client need, not a research question. All procedures must be function-based to the greatest extent possible. You must provide extensive rationale to both your field supervisor and project chair if you plan to use any arbitrary interventions. In addition, in accordance with BACB® guidelines, you will need to teach alternative behaviors for each behavior targeted for reduction.

Behavior reduction plans must include:

- A clear operational definition for each target behavior
- At least one specific, measureable goal with objectives for each target behavior
- A technological account of intervention methods including proactive and reactive interventions
- List of preferred activities and/or items as identified by the stimulus preference assessment
- Appropriate data collection methods
- Visual displays
- Functionally equivalent alternative behaviors
- Baseline and intervention measures
- Progress evaluation criteria
- Realistic fading and maintenance plan

NOTE:

If your client has multiple problem behaviors, it is ethically responsible to address all problem behaviors in your treatment plan.

Your written case report will include the aforementioned components, be written technologically and be accessible for interventionists (e.g., behavior therapists, direct service providers).

Skill Acquisition Plans

The purpose of a skill acquisition plan is to communicate assessment results and the corresponding recommendations based on those results. This section of your report should be technologically written in the form of a protocol for an interventionist to follow. Plans should be accessible for interventionists (e.g. behavior therapists, direct service providers, teachers)

In the field, skills are not viewed in isolation; rather, they are viewed in combination with one another, as composite skills often contain component skills from other domains. As such, training one skill is not an adequate representation of your clinical expertise. Based on your assessment and review of the literature, you, under the advisement of your site supervisor, will identify a group of skills to teach your client.

Skill acquisition plans must include:

- A clear operational definition for each target behavior
- At least one specific, measureable goal with objectives for each target behavior
- A technological account of teaching methods
- List of preferred activities and/or items as identified by the stimulus preference assessment
- Appropriate data collection methods
- Visual displays
- Baseline and intervention measures
- Progress evaluation criteria
- Programming for generalization
- Realistic fading and maintenance plans

Interobserver Agreement and Treatment Fidelity

You must plan for and report Interobserver agreement (IOA), treatment integrity, and treatment integrity interobserver agreement for each behavior on which you intervene.

Results

The results of your intervention must be written and displayed graphically. The results /progress section should contain a thorough explanation of the effects of your

intervention, including levels, trends, and variability for each phase for your client. This might include stating the frequency/rate, celeration, and the bounce/variability.

Discussion and Future Recommendations

This portion of your case report is a written analysis of your results including any change in treatment that you made outside of your original procedures. In addition, discuss the limitations or barriers of implementation in your plan. Finally, provide future recommendations for this client. This can be with respect to continuing ABA services, accessing resources, and/or next steps in the treatment plan.

The 'Future Recommendations' section should be written as though you are transferring the client to another ABA provider or you are terminating services.

Literature Review

As an ethical behavior analyst in training, the recommendations for intervention must be evidence based. As such, you will conduct a literature review to identify interventions that are appropriate for your client. Examples of topics to research include, but are not limited to, diagnosis, domain specific interventions (e.g., verbal behavior), prompting strategies, caregiver training, and variations of interventions (e.g., DRA with/without extinction). You will work closely with your chair to identify the breadth and depth of your research.

The final product of this section will be an organized literature review with multiple references from behavior analytic journals. Although there is not an identified page requirement, literature reviews for APP may range from 5-8 pages double-spaced depending on the breadth and depth upon which you and your chair decide.

References

At the end of your written project, include a reference page containing all of the references used in your project. This must be in APA format.

Defense

In order to defend, you must have approval from your project chair to send your written report to your second reader a minimum of 14 days before the scheduled defense date. Your chair will provide approval contingent upon your report addressing all components requested including appendices.

Your second reader will provide you edits within 14 days of your submission to them. To the best of your ability, you should make changes requested by your second reader to your document and insert these changes into your presentation prior to your defense.

Poster

You will follow the department poster template (In PowerPoint) to include client summary, assessment, results/graphs, summary/next steps, acknowledgements, and references. You should send a draft of your poster to your chair at least 8 days prior to your scheduled defense and schedule a time to practice.

Presentation

On the day of defense, it is expected that you will conduct yourself professionally (Rubric see Appendix F). This includes timeliness, attire, and attending to other students' presentations. You should bring printed copies of your poster (or handout) with full-page copies for each of your visual displays. You will have 15 minutes to present your project, and there will be 5 minutes for questions.

NOTE:

It is highly recommended that you work with your chair on the content and presentation of your work prior to the defense.

Post Defense

After the defense, you will be asked to meet with the faculty regarding your project. At this time, you will be informed that you 1) passed without revisions, 2) passed contingent upon revisions, or 3) did not pass.

Your degree will be conferred contingent upon passing with your final draft. Should you need to make revisions, your chair will give you a due date for those revisions. If you do not finalize the revisions prior to the deadline, you will need to enroll in a Project Extension section of the class and may fail the course you are in at the time of defense.

Appendix A



Site Consent for Applied Project

_____, known hereafter as "the site," agrees to allow

_____, known hereafter as "the student," to conduct his/her applied clinical project under the supervision of a doctoral level faculty member in the Applied Behavior Analysis (ABA) program at The Chicago School (TCS). The project requires the student to complete an acquisition and/or behavioral reduction program. As this is part of the student's degree requirements, the student must be allowed, in consultation with the site and the student's TCS advisor, to conduct an assessment, design and use a measurement system, implement an intervention, and make changes to the program based on the data. The student must also be allowed to train caregivers or another staff member on the procedures. The student will take video records throughout various steps of this project. As this project is a culmination of skills learned during the TCS ABA master's program and serves as experience hours for the student preparing to become a Board Certified Behavior Analyst, the student, under faculty supervision, must design and implement the program. It cannot be something the site has already established for the client. If disagreements or conflicts arise, a meeting may be convened with site supervisor(s), student, and TCS advisor to discuss and identify potential resolutions.

Prior to initiation of the project, the student will also have informed and video consent forms signed by the participant and/or the participant's conservator. The site further agrees to allow the student to present assessment procedures and results, data collection procedures, intervention procedures, data collected, and video recordings of the client, intervention implementation, and staff/caregiver training to the student's advisor and project committee. The student and TCS faculty agree to maintain confidentiality of all information, according to applicable legal and ethical guidelines. Following conclusion of the project, the student will destroy all confidential information and video records. If requested, project data can be submitted to the site for client records.

This agreement is entered into on this _____ day of _____, 20____.

Graduate Student Signature
Printed name:

Site Supervisor Signature
Printed name:
Title:

Appendix B



Informed Consent Form

You and your child are being asked to participate in a student project. This project will be conducted by a graduate student completing an applied project in partial completion of graduation requirements for the Master's Program in Applied Behavior Analysis at The Chicago School of Professional Psychology, Chicago Campus.

PURPOSE: The purpose of this project is for the student to conduct a functional behavior assessment and develop a behavior intervention plan to address a behavior of concern or to teach a skill that your child does not have. This project will consist of indirect assessment (questionnaires and checklists), descriptive assessment (observation and data collection), and the development of a behavior intervention plan that directly targets the behavior of concern or skill deficit. The behavior intervention plan will be implemented, and the student will provide training to you or another individual working with your child on the implementation of the plan.

PARTICIPATION: During this project, you and your child will participate in an agreed upon number of sessions which may be daily, weekly, or a customized schedule to meet your family's needs. The total duration of this project will be determined between you and the student conducting the project.

VIDEO RECORDING: During this project, the student will be required to video record your child's behavior, their implementation of the intervention, and the training and implementation of the behavior intervention by you or another staff member.

SUPERVISION: Because this project is related to behavioral concerns, the student will conduct this project under the advisement of a doctoral level faculty member in the Applied Behavior Analysis Department at the Chicago School and in consultation with the agency providing services. The role of the supervisor is to assist the student in targeting a specific behavioral concern and to monitor the student's performance during the project. Although the advisor will monitor the student's performance, the advisor will provide only minimal direct guidance so as not to compromise the assessment activities and development, implementation, and training of the behavior intervention plan. The project is to be completed solely by the student as part of the graduation requirements for a master's degree. By signing this consent form, the faculty member agrees to serve as the advisor to the student as outlined within this section.

RISKS & BENEFITS: There are no significant risks anticipated with this study. Children participating in behavioral programs may experience minimal to moderate frustration when learning new skills in deficit areas that serve to replace behavior excesses identified in the assessment. If this occurs, the student conducting this project (under the supervision of his or her supervisor) will work through or coach you through addressing your child's frustration. Anticipated benefits to you and your child include improvements in targeted behavior.

COMPENSATION: Neither you, your child, nor anyone else participating in this project will be given compensation for their participation in the project.

VOLUNTARY PARTICIPATION: Your participation and your child’s participation are completely voluntary. In signing this form, you are allowing your child to participate in this project. However, your decision whether or not to allow your child to participate will in no way affect your current or future relationship with the student conducting this project. You have the right to withdraw your child from the project at any time without penalty.

CONFIDENTIALITY: The student and TCS faculty agree to maintain confidentiality of any information, according to applicable legal and ethical guidelines. Once the project has been completed, all confidential information and videos will be destroyed. Project data may be submitted to the agency providing services for further continuation of the behavior intervention plan. Should any information in the written report be shared for educational purposes, all names and other identifying information will be changed to protect anonymity.

If you would like a copy of your child’s written report at the end of the course, this can be provided to you by the student at your request.

If you have any questions or would like additional information about this project, please contact the student’s advisor, **Ashley Whittington-Barnish, Ph.D., BCBA-D at abarnish@thechicagoschool.edu**.

I understand the above information and have had all of my questions about participation on this project answered. I voluntarily consent for my child and me to participate in this project. A signed copy of this consent form will be given to you.

Printed Name of Participant

Signature of Participant

Date

Printed Name of TCS Student

Signature of TCS Student

Date

Printed Name of TCS Supervisor

Signature of TCS Supervisor

Date

Appendix C

Rubric for Oral Presentation of Assessment & Results (AB 566)

There are two components to passing the oral defense. Passing Component 1 will be based on your presentation and the rubric items that pertain to the presentation. Passing Component 2 will be based on your ability to answer questions that pertain to your assessment and case conceptualization. You must earn 3s and 4s on all items, and the simple majority of raters must have 3s and 4s for you to pass.

Oral Defense	Rubric Score			
	1	2	3	4
Time of Presentation	18 min or above	17 min range	16 min range	15 min range
Component 1a: Items within the Presentation	3 or more items are missing or are lacking clarity and detail (which could not be resolved or clarified during the questions and answers).	2 items are missing or are lacking clarity and detail (which could not be resolved or clarified during the questions and answers).	1 item is missing or is lacking clarity and detail (which could not be resolved or clarified during the questions and answers).	Student has: <ul style="list-style-type: none"> • Background info. • Reason for referral • Functioning level • Client strengths • Summary of assessments+ results, graphs, • Identified area(s) for intervention • Operational definitions for target behaviors. • Recommendations take into account variables related to diversity/ cultural differences.
Component 1b: Speaking, Style, and Professionalism	The student has major communication issues (reads entirely from a script, rarely looks at audience), poor organization and professionalism	The student has moderate communication issues (reads mostly from a script, rarely looks at audience), moderately poor organization and professionalism	The student has minor communication issues (reads off notes too much), lacks some organization, PPT is not professional	The student communicates in a technological manner such that the research could be replicated by others. The student is professional with respect to their attire, and presentation style (font is visually appropriate for the room, PPT template is professional)
Component 2: Questions and Answers	3 answers are not conceptually systematic and/or technological	2 answers are not conceptually systematic and/or technological	1 answer is not conceptually systematic and/or technological	The student addresses all questions. All answers are conceptually systematic, and are technological.
Total Rubric Score				

Appendix D

Rubric for Case Proposal (AB 567)

The first and second readers of your project case report will independently fill out this rubric. The first reader will complete this rubric when you submit your final proposal draft. You must earn scores of 2 or 3 for each category to pass. When a passing score is received from the first reader, you may submit your proposal to the second reader.

Component	Included/ Addressed			
	0 Does not include	1 Insufficient detail	2 Sufficient detail	3 Exceeds expectations
Client demographics presented				
Includes relevant client history				
Uses multi-informant assessment (e.g. client, teacher, staff, parent, guardian)				
Uses multi-method assessment (e.g. observation, interview, functional analysis, rating scales, VB-MAPP, ABLLS-R)				
Results presented professionally, including tables and graphs, if helpful				
Includes client strengths				
Includes a rationale for treatment				
Includes recommendations for intervention				
Includes specific, measurable, and timely goals.				
Includes plan for each goal, including example targets for skill acquisition goals.				
Plans include teaching/ prompting procedures				
Plans include error correction procedures.				
Plans program for skill maintenance and generalization				
Staff training plan included				
Proposal was well organized and reader-friendly				
Formatted as a professional report, including professional language, proper spelling and grammar.				
Total rubric score				

Appendix E

Rubric for Final Written Case Report (AB 568)

The first and second readers of your project case report will independently fill out this rubric. The first reader will complete this rubric when you submit your final proposal draft. You must earn scores of 2 or 3 for each category to pass. When a passing score is received from the first reader, you may submit your proposal to the second reader.

Component	Included/ Addressed			
	0 Does not include	1 Insufficient detail	2 Sufficient detail	3 Exceeds expectations
Client demographics presented				
Includes relevant client history				
Uses multi-informant assessment (e.g. client, teacher, staff, parent, guardian)				
Uses multi-method assessment (e.g. observation, interview, functional analysis, rating scales, VB-MAPP, ABLLS-R)				
Asses. results presented professionally, including tables and graphs, if helpful				
Includes client strengths				
Includes a rationale for treatment				
Includes recommendations for intervention				
Includes specific, measurable, and timely goals.				
Includes plan for each goal, including example targets for skill acquisition goals.				
Plans include teaching/ prompting procedures				
Include error correction procedures.				
Programs for skill maintenance and generalization				
Results described				
Includes IOA				
Includes treatment integrity/ IOA of TI				
Results graphed				
Staff training plan included				
Discussion includes data-based decisions to promote behavior change in the desired direction				

Discussion describes next steps				
Proposal was well organized and reader-friendly				
Formatted as a professional report, including professional language, proper spelling and grammar.				
Total rubric score				

Appendix F:
Rubric for Oral Defense (AB 568)

There are two components to passing the oral defense. Passing Component 1 will be based on your presentation and the rubric items that pertain to the presentation. Passing Component 2 will be based on your ability to answer questions that pertain to your research, and are based on the program learning objectives. You must earn 3s and 4s on all items, and the simple majority of raters must have 3s and 4s for you to pass.

Oral Defense	Rubric Score			
	1	2	3	4
Time of Presentation	18 min or above	17 min range	16 min range	15 min range
Component 1a: Items within the Presentation	3 or more items are missing or are lacking clarity and detail (which could not be resolved or clarified during the questions and answers).	2 items are missing or are lacking clarity and detail (which could not be resolved or clarified during the questions and answers).	1 item is missing or is lacking clarity and detail (which could not be resolved or clarified during the questions and answers).	Student has: <ul style="list-style-type: none"> • Background info. • Reason for referral • Functioning level • Client strengths • Summary of assessments+ results, graphs, • Identified area(s) for intervention • Operational definitions for target behaviors. • Recommendations take into account variables related to diversity/ cultural differences.
Component 1b: Speaking, Style, and Professionalism	The student has major communication issues (reads entirely from a script, rarely looks at audience), poor organization and professionalism	The student has moderate communication issues (reads mostly from a script, rarely looks at audience), moderately poor organization and professionalism	The student has minor communication issues (reads off notes too much), lacks some organization, PPT is not professional	The student communicates in a technological manner such that the research could be replicated by others. The student is professional with respect to their attire, and presentation style (font is visually appropriate for the room, PPT template is professional)
Component 2: Questions and Answers	3 answers are not conceptually systematic and/or technological	2 answers are not conceptually systematic and/or technological	1 answer is not conceptually systematic and/or technological	The student addresses all questions. All answers are conceptually systematic, and are technological.
Total Rubric Score				