

**DANIEL GOHL, CHIEF ACADEMIC OFFICER  
OFFICE OF ACADEMICS**

DATE: April 21, 2021

TO: All Principals

FROM: Daniel Gohl  
Chief Academic Officer

VIA: Valerie S. Wanza, Ph.D.  
Chief School Performance and Accountability Officer

SUBJECT: **COLLABORATION OF PUBLIC AND PRIVATE INSTRUCTIONAL PERSONNEL IN LIGHT OF  
COVID-19 FOR THE 2020-2021 SCHOOL YEAR  
FLORIDA STATUTE 1003.572**



**ACTION:** All Private Instructional Personnel (PIPs/RBTs) desiring to observe, collaborate and/or provide services in a Broward County Public School must complete an application and submit for approval. For the 2020-2021 school year, in light of COVID-19, the 2019-2020 approved packets can be continued with five (5) 2020-2021 PIP/RBT documents obtained from each provider prior to the provision of any services in the school setting. Any Private Instructional Personnel who does not have an approved PIP/RBT packet from the 2019-2020 school year, will need to complete the entire process for approval (completion of full packet).

To ensure that all schools comply with the guidelines for Private Instructional Personnel, please take the following actions:

1. **For any private providers who did not have an approved 2019-2020 PIP/RBT packet:** Provide the parent(s) and/or Private Instructional Personnel copies of the packets dated April 2021.

Please note that there are three separate applications for the 2020-2021 school year:

- a. a packet for Registered Behavior Technicians (dated April 2021)
- b. a packet for Private Instructional Personnel (other than RBTs and dated April 2021)
- c. a COVID-19 PIP/RBT and Parent(s) Acknowledgement form **(Required for all)** NEW

2. **For any private providers with an approved 2019-2020 PIP/RBT packet:** Distribute the PIP/RBT/Parent Letter and obtain the items outlined below from any PIP who wishes to continue collaborating with school personnel utilizing the 2019-2020 approved PIP/RBT packet. The following items must be returned and approved by school-based administration from each provider prior to resuming services during the 2020-2021 school year:

- a. a COVID-19 PIP/RBT and Parent(s) Acknowledgement form **(Required for all)** NEW
- b. a current copy of a vendor badge
- c. a current copy of the individual's licensure and/or certification

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IN LIGHT OF COVID-19 FOR THE 2020-2021 SCHOOL YEAR**

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- d. a current copy of the private behavior plan, as applicable
  - e. a current Authorization for Release of Information signed by the parent
3. Utilize the School Packet to process the PIP/RBT packets. Please note there are three school checklists:
- a. a checklist for Private Instruction Personnel for the 2020-2021 School Year (for individuals who do not have a 2019-2020 approved packet)
  - b. a checklist for Registered Behavior Technicians and Private Instructional Providers for the 2020-2021 School Year (for individuals who do not have a 2019-2020 approved packet)
  - c. a checklist for Registered Behavior Technicians and Private Instructional Providers for the 2020-2021 school year with an approved 2019-2020 PIP/RBT Packet.
4. Share this information with any school-based staff who may be impacted by this change.

All resources needed for PIPs/RBTs can be accessed via Canvas at the following link:

<https://browardschools.instructure.com/enroll/TPKDBJ>

**RATIONALE:** Florida Statute 1003.572 provides the opportunity for collaboration of public and private instructional personnel.

There are several types of professionals who can observe, provide services and collaborate with school staff (see Section 1003.572). Broward County Public Schools has determined that the following professionals meet the definitions above: Board Certified Behavior Analyst Doctoral (BCBA-D), Board Certified Behavior Analysts (BCBA), Board Certified Assistant Behavior Analysts (BCaBA), Registered Behavior Technicians (RBT), Speech Language Pathologists (SLP), Occupational Therapists (OT), Physical Therapists (PT), Psychologists, Clinical Social Workers (CSW), Licensed Mental Health Counselor (LMHC) and Licensed Marriage and Family Therapist (LMFT). Allowing Registered Behavior Technicians in the schools as a part of this statute is above & beyond what is outlined in FS 1003.572.

DG/VSW/SC/TH/FS:es

Attachment #1 – Private Instructional Personnel (PIP) Parent Packet, dated April 2021

Attachment #2 – Registered Behavior Technician Parent Packet, dated April 2021

Attachment #3 – Private Instructional Personnel and Registered Behavior Technician School Packet, dated April 2021

Attachment #4 - COVID-19 PIP/RBT and Parent Acknowledgement Forms, dated April 2021

Attachment #5 – Q & A, dated April 2021

cc: Senior Leadership Team

School Performance and Accountability Directors

Exceptional Student Learning Support Executive Director and Directors

Exceptional Student Learning Support District Administrators

# **Private Instructional Personnel (PIP)**

## **Parent Packet**

# The 2019 Florida Statutes

[Title XLVII](#)  
K-20 EDUCATION CODE

[Chapter 1003](#)  
PUBLIC K-12 EDUCATION

[View Entire Chapter](#)

## **1003.572 Collaboration of public and private instructional personnel.-**

(1) As used in this section, the term “private instructional personnel” means:

(a) Individuals certified under s. [393.17](#) or licensed under chapter 490 or chapter 491 for applied behavior analysis services as defined in ss. [627.6686](#) and [641.31098](#).

(b) Speech-language pathologist licensed under s. [468.1185](#).

(c) Occupational therapists licensed under part III of chapter 468.

(d) Physical therapists licensed under chapter 486.

(e) Psychologists licensed under chapter 490.

(f) Clinical social workers licensed under chapter 491.

(2) The collaboration of public and private instructional personnel shall be designed to enhance but not supplant the school district’s responsibilities under the Individuals with Disabilities Education Act (IDEA). The school as the local education agency shall provide therapy services to meet the expectations provided in federal law and regulations and state statutes and rules. Collaboration of public and private instructional personnel will work to promote educational progress and assist students in acquiring essential skills, including, but not limited to, readiness for pursuit of higher education goals or employment. Where applicable, public and private instructional personnel shall undertake collaborative programming. Coordination of services and plans between a public school and private instructional personnel is encouraged to avoid duplication or conflicting services or plans.

(3) Private instructional personnel who are hired or contracted by parents to collaborate with public instructional personnel must be permitted to observe the student in the educational setting, collaborate with instructional personnel in the educational setting, and provide services in the educational setting according to the following requirements:

(a) The student’s public instructional personnel and principal consent to the time and place.

(b) The private instructional personnel satisfy the requirements of s. [1012.32](#) or s. [1012.321](#).

For the purpose of implementing this subsection, a school district may not impose any requirements beyond those requirements specified in this subsection or charge any fees.

(4) The provision of private instructional personnel by a parent does not constitute a waiver of the student’s or parent’s right to a free and appropriate public education under IDEA.

**History.**—s. 5, ch. 2013-236; s. 21, ch. 2014-184.

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# APPLICATION TO ALLOW PRIVATE INSTRUCTIONAL PERSONNEL INTO A BROWARD COUNTY PUBLIC SCHOOL

To be completed by student's parent:

\_\_\_\_\_  
Print Student's Name

\_\_\_\_\_  
Current School

\_\_\_\_\_  
Current Grade

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Primary Eligibility

I have read Florida Statute 1003.572: Collaboration of public and private instructional personnel.

I request that the following Private Instructional Personnel (PIP) be allowed to provide the service(s) indicated below for my child:

☐

Consultation

☐

Observation

☐

Direct Instruction

\_\_\_\_\_  
Print Private Instructional Personnel's Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Email Address

This PIP holds the following credential(s): (Check all that apply)

☐

Certified to provide Applied Behavior Analysis service under F.S. § 393.17; or chapter 490 or 491. (If certified under F.S. § 393.17, individual must hold a certification from national Behavior Analyst Certification Board, Inc. This individual must be a Board Certified Behavior Analyst (BCBA) or a Board Certified Assistant Behavior Analyst (BCaBA).

☐

Speech-Language Pathologist, licensed under F.S. § 468.1185

☐

Occupational Therapists, licensed under part III of F.S. chapter 468

☐

Physical Therapist, licensed under F.S. chapter 486

☐

Psychologist, licensed under F.S. chapter 490

☐

Clinical Social Workers, licensed under F.S. chapter 491

☐

Mental Health Counselor, licensed under F.S. chapter 491

☐

Marriage & Family Therapist, licensed under F.S. chapter 491

**NOTE: A Registered Behavior Technician has a separate packet to complete.**

## APPLICATION TO ALLOW PRIVATE INSTRUCTIONAL PERSONNEL INTO A BROWARD COUNTY PUBLIC SCHOOL

\_\_\_\_\_  
Print Student's Name

As the parent of the above-named student and the PIP, we understand that the PIP is required to:

- The packet will not be processed until it is complete with all required documents on the checklist. This process can take up to 30 school days and may require additional documents as determined by the school-based administration. Requests for additional documents may extend the timeline.
- Comply with Florida Statute 1003.572 requiring certification or licensure;
- Submit to a fingerprint background screening by school district officials at the expense of the person requesting access. The screening must have occurred within the last five (5) years. Clearance must be obtained prior to services beginning;
- Apply/update vendor badge annually in August;
- Submit proof of certification/licensure in August;
- Sign a confidentiality statement annually;
- Sign Communication Agreement annually;
- Adhere to School Board Policies and any of the school's procedures including, but not limited to, adhering to the school's procedures regarding safety and security to include entering the campus through the single point of entry, signing in and out every time the PIP is on campus, and adhering to scheduled time and location of services to be provided;
- **At no time can any PIP use any physical intervention with a student on any school campus;**
- Provide a copy of the private plan of care/private behavior plan;
- Provide a copy of all data collected in the school setting as agreed upon between school and PIP; and,
- Arrange a schedule for services with administration.

As the parent of the above-named student I understand that:

- The collaboration between school staff and the PIP does not change the District's responsibility to provide the student with a free appropriate public education under the Individuals with Disabilities Education Act and that the school and the school alone will continue to be responsible to implement the student's Individual Education Plan, as well as other plans including, but not limited to, behavior and health plans;
- My child's public instructional personnel and the school's principal must consent to the time and location of where services will be provided. In determining the time and date for services to be provided, the principal must adhere to the collective bargaining agreement for instructional employees. Services may be delivered in my child's classroom with the express permission of the principal, subject to the principal's determination that such activity will not be detrimental to the educational process and/or to other students. If the principal initially permits the PIP to provide services in the classroom, the principal may rescind permission if, at a later date, it is determined that the services are disrupting the educational process for the named student and/or other students in the classroom. The parent and PIP will be informed in writing if they are no longer allowed to provide services in the classroom and/or school settings;
- The parent(s) is required to sign a release of information form annually so that the school staff and the PIP can communicate regarding services;
- PIPs may not be present during state/district testing;
- At no time shall the PIP act in place of the teacher or ESP in the classroom and will not be left alone with the student to provide supervision unless previously agreed upon by school administration;
- At no time shall a PIP intervene with other students in the classroom;
- At no time shall a PIP take any photographs, audio recordings or videos while in the school setting;
- If the PIP violates any policies and/or procedures they may be asked not to return to the school's campus to provide services;

- The parent will notify the school immediately if there is a change to the PIP provider; and/or, if the PIP is no longer providing services to the student;
- Some goals that are appropriate in another setting may not be able to be implemented in a school setting;
- If your child's IEP team determines that Extended School Year (ESY) is needed for your child to receive FAPE, a new schedule for the PIP must be established with staff at the ESY site. Parents may elect to provide a copy of the packet to the ESY site to expedite the process and establish a schedule for collaboration;
- In the event that your child transfers to another Broward school, it is the parents' responsibility to submit a copy of the packet to the new school with updated releases of information. The schedule that was previously in place will need to be reviewed and agreed upon by the teacher and administration in the new setting; and,
- Medicaid billing by the school district will not impact Medicaid billing by the private provider.

## APPLICATION TO ALLOW PRIVATE INSTRUCTIONAL PERSONNEL INTO A BROWARD COUNTY PUBLIC SCHOOL

\_\_\_\_\_  
Print Student's Name

The parents/guardian of the relevant minor(s) and undersigned PIP hereby acknowledge that the PIP is not an employee, agent, or assignee of the District School Board of Broward County (School Board). The parents/guardian of the relevant minor(s) and PIP further agree that the undersigned PIP does not have an expectation of employment with the School Board. The parent and PIP agree that the undersigned PIP has no right or expectation to the benefits, rights, or protections of an employee of the School Board, including, but not limited to wages, worker's compensation insurance, health insurance, disability insurance, fringe benefits, or any other benefits, rights, or protections afforded to School Board employees by contract or law.

The parents/guardian of the relevant minor(s) and the PIP, hereby agree and acknowledge that the School Board shall in no way be liable for any damages of any nature whatsoever which are caused or materially contributed to by the negligence, misfeasance, malfeasance, recklessness, intentional acts, unintentional acts, or any other acts of the undersigned PIP. Furthermore, the parents/guardian of the relevant minor(s), hereby fully release the School Board from any and all damages of any nature whatsoever which relate to, are caused by, or are materially contributed to by the direct or indirect negligence, misfeasance, malfeasance, recklessness, intentional acts, unintentional acts, or any other acts of the undersigned PIP. This release of liability specifically includes, but is not limited to, any and all claims concerning the School Board's supervision, direction, or control of the undersigned PIP, as well as the allowance of the PIP to be present on School Board property or act on School Board property.

The parents/guardian of the relevant minor(s) and the PIP agree and acknowledge that the undersigned PIP shall indemnify, protect, and hold harmless the School Board for any and all damages of any nature whatsoever which are caused or materially contributed to by the negligence, misfeasance, malfeasance, recklessness, intentional acts, unintentional acts, or any other acts of the undersigned PIP. In the event that the School Board incurs any costs, legal fees, or losses resulting from claims or judgments arising out of the negligence, misfeasance, malfeasance, recklessness, intentional acts, unintentional acts, or any other acts of the undersigned PIP, then such PIP agrees to fully reimburse School Board for the same within thirty (30) days of the School Board's presentation of such costs, fees, or losses to the PIP. The undersigned PIP agrees that any amounts not reimbursed within the contractual thirty (30) day period, will incur monthly interest at the statutory rate applying to judgments in effect at the time that such cost, legal fee, or loss is presented to the PIP.

The School Board specifically reserves any and all rights, benefits, and protections afforded to it by Florida Law, whether it be by statute, administrative law, regulation, general law, or common-law. These protections specifically include, but are not limited to those afforded by Section 768.28, Florida Statutes, sovereign immunity, and any other controlling legal precedent. The parents/guardian of the relevant minor(s) and the PIP agree that the provisions of this agreement, and the application of any relevant laws, are to be construed in a manner that is most favorable to the School Board, so as to provide protection, indemnification, and a release of liability to the School Board.

The undersigned PIP agrees to secure a working knowledge of, and abide by, all School Board policies, rules, and procedures while present on School Board property. The undersigned PIP further understands that any observation, collaboration, or provision of private services under this agreement are subject to the consent of the applicable school principal and public instructional personnel as to time and place.



**APPLICATION TO ALLOW PRIVATE INSTRUCTIONAL  
PERSONNEL INTO A BROWARD COUNTY PUBLIC SCHOOL**

\_\_\_\_\_  
Print Student's Name

**We, the parent(s) of the student and the PIP, have read the information contained within and agree with our responsibilities and acknowledge the Indemnification section of this agreement.**

The following completed forms are attached to this agreement. We understand that the packet will not be processed until all forms are completed and provided to the Principal. The approval process may take up to 30 school days. Any requests by administration for additional documentation may extend the timeline.

\_\_\_\_ Application.

\_\_\_\_ Documentation of Licensure.

\_\_\_\_ A copy of a Broward County issued vendor badge attached to the top of the packet. This verifies the individual has obtained Level 2 security clearance.

\_\_\_\_ Signed Authorization for the Release of Information Form.

\_\_\_\_ Signed Confidentiality Statement.

\_\_\_\_ Signed Communication Agreement.

\_\_\_\_ Check all boxes that apply:

☐ The PIP carries Professional Liability Insurance including sexual molestation coverage

☐ The PIP carries Workers' Compensation Insurance or Medical Insurance

\_\_\_\_ Private Behavior Plan or Plan of Care. When submitting a behavior plan, it must contain the procedures and strategies to be used to implement the goals.

\_\_\_\_ Proof of employment, on company letterhead, identifying the individual employed by the company matching the proof of insurance (when needed).

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Parent's Name

\_\_\_\_\_  
Private Instructional Personnel's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Private Instructional Personnel's Name

**CONFIDENTIALITY STATEMENT FOR PRIVATE INSTRUCTIONAL PERSONNEL  
WHO HAVE ACCESS TO A BROWARD COUNTY PUBLIC SCHOOL**

\_\_\_\_\_  
Print Student's Name

\_\_\_\_\_  
Current School

As a Private Instructional Personnel providing services to the above-named student in a Broward County Public School, I acknowledge that certain information about District's students is contained in records created and maintained by the District for which I may access and this information is confidential and protected by the Family Educational Rights and Privacy Act of 1974 (FERPA) (20 U.S. C. 1232g), and/or the Health Insurance Portability and Accountability Act (HIPAA) (45 CFR parts 160-164) and related District policies, as amended from time to time, currently available at [www.browardschools.com](http://www.browardschools.com). I further acknowledge that I might observe and/or overhear verbal conversations about District's students that are confidential and protected by the above-named Acts and policies. This confidential information cannot be disclosed unless valid consent is obtained from eligible students or their legal guardians. I agree to protect these records in compliance with FERPA, HIPAA, and District's policy.

I acknowledge that I may create and maintain records pertaining to the above-named student and these records, shared with the District, will be maintained and protected by the District in the same manner as District created records.

I agree that I may create, receive from or on behalf of the District, or have access to, records or record systems that are subject to FERPA and/or HIPAA (collectively, the "Confidential Records"). I represent, warrant, and agree that I will: (1) hold the Confidential Records in strict confidence and will not use or disclose the Confidential Records except as (a) permitted or required for this individual student, (b) required by law, or (c) otherwise authorized by the District in writing; (2) safeguard the Confidential Records according to commercially reasonable administrative, physical and technical standards as required by law; and (3) continually monitor its operations and take any and all action necessary to assure that the Confidential Records are safeguarded.

To the extent permitted by law, nothing contained herein shall be construed as precluding either I or the District from releasing such information to the other so that each can perform its respective responsibilities.

I understand that a breach of this Confidentiality Statement shall constitute grounds for the District to terminate my access to the above-named student and/or any other student, at the students' school.

\_\_\_\_\_  
Private Instructional Personnel's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Private Instructional Personnel's Name

\_\_\_\_\_  
Principal's Signature

\_\_\_\_\_  
Date Signed Statement was Received

**COMMUNICATION AGREEMENT FOR PRIVATE INSTRUCTIONAL PERSONNEL  
WHO HAVE ACCESS TO A BROWARD COUNTY PUBLIC SCHOOL**

\_\_\_\_\_  
Print Student's Name

\_\_\_\_\_  
Current School

As a non-School Board employee who is being granted access to a School Board employee's classroom, the following guidelines for positive communication and working environment will be adhered to:

- The PIP will not interrupt the teaching and learning occurring in the classroom setting that is being delivered by the teacher and/or the educational support personnel;
- The PIP will provide any feedback/suggestions on implementation of interventions and strategies to the classroom staff in writing or addressed during a pre-arranged conference/collaboration time;
- The PIP will communicate any changes to the pre-approved/agreed upon schedule to the classroom teacher. If administration requests to be included in this communication regarding schedule changes, the PIP will comply;
- The PIP will not be present for any state or district testing;
- The PIP will not intervene with any other students in the classroom other than the individual student identified above;
- The PIP will not be responsible for supervision of the student identified above;
- The PIP will share a copy of their private Plan of Care/Behavior Intervention Plan and any revisions;
- The PIP will not audiotape, audiofile, video or photograph while on the school campus; and,
- The PIP will provide copies of all data collected in the school setting as agreed upon between the PIP and the school.

\_\_\_\_\_  
Private Instructional Personnel's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Private Instructional Personnel's Name

\_\_\_\_\_  
Principal's Signature

\_\_\_\_\_  
Date Signed Statement was Received

**THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA**

**AUTHORIZATION FOR RELEASE AND/OR REQUEST  
FOR INFORMATION**

I hereby request and authorize: \_\_\_\_\_  
(Name of Person, School, or Department)

\_\_\_\_\_ to engage  
(Street Address) (City) (State) (Zip) (Telephone #)

in verbal and/or written communication with and release records to : \_\_\_\_\_  
(Name of Person, Job Title and/or School/Agency/Entity)

\_\_\_\_\_  
(Street Address) (City) (State) (Zip) (Telephone #)

regarding the **information checked below** concerning my child\* \_\_\_\_\_, whose date of birth is \_\_\_\_\_. I understand that information concerning psychiatric, psychological, medical diagnosis, drug or alcohol abuse, economic status, and educational information regarding my child will be released and/or communicated if indicated below. I further understand that this information might contain information regarding my family, in addition to my child.

<input type="checkbox"/> Treatment Plans	<input type="checkbox"/> Substance Abuse Treatment Records
<input type="checkbox"/> Treatment / Discharge Summaries	<input type="checkbox"/> Social and/or Developmental History
<input type="checkbox"/> Health / Medical Records	<input type="checkbox"/> Psychological and/or Psychiatric Evaluations
<input type="checkbox"/> Case / Progress / Therapy Notes	<input type="checkbox"/> Restorative Support Services
<input type="checkbox"/> Student Identification Number	<input type="checkbox"/> Social Support Services (Food, Clothing, Shelter)
Academic / School-related Records	<input type="checkbox"/> Medical Services
<input type="checkbox"/> Grades	<input type="checkbox"/> Substance Abuse Treatment Records
<input type="checkbox"/> Test Scores	<input type="checkbox"/> HIV/AIDS test results or related conditions (to disclose or
<input type="checkbox"/> Attendance	receive this information, specific individuals must be named
<input type="checkbox"/> Suspensions / Expulsions	above)
<input type="checkbox"/> Exceptional Student Education / Section 504 Records	
<input type="checkbox"/> Other _____	

For the Purpose of: \_\_\_\_\_

**I acknowledge that all information I authorize to be released or requested will be held strictly confidential and cannot be released by the recipient without an additional written consent. I understand this authorization will expire one (1) year after the date signed, or on \_\_\_\_\_, 20\_\_\_\_\_, whichever is earlier. A copy of this authorization is valid in lieu of the original. I further understand I may withdraw my consent in writing at any time.**

Print Name of Parent / Guardian / Eligible Student \_\_\_\_\_ Signature of Parent / Guardian / Eligible Student \_\_\_\_\_ Date \_\_\_\_\_

Relationship to Child \_\_\_\_\_

\*Eligible students (age 18 or over) may authorize the release of their education records.

**(USE THIS SPACE IF CONSENT IS WITHDRAWN)**

**I hereby withdraw my previous consent to the release of information about my child.**

Date Consent is Withdrawn \_\_\_\_\_ Signature of Parent / Guardian / Eligible Student \_\_\_\_\_

Form #4301  
REV 07/18  
Risk Management



BROWARD COUNTY PUBLIC SCHOOLS  
Security Clearance Office 754-321-2374  
securityclearance.fp@browardschools.com



Registration site for fingerprinting and/or badging: <http://www.fieldprintbrowardschools.com/>  
Additional information can be found at <http://www.broward.k12.fl.us/police/secclear.html>

APPLICANT GROUP	FIELDPRINT CODE	FEE*
NEW Vendor – (PIP) Direct Contact	<b>FPBCPSVenPIPDDirCon</b>	\$88.00
Vendor (PIP) - Direct Contact – Badge Renewal <b>REQUIRED ANNUALLY</b>	<b>FPBCPSVenPIPDDirConBRen</b>	\$20.00
VENDOR (PIP) – DIRECT CONTACT BADGE REPLACEMENT	<b>FPBCPSVenPIPDDirConBRep</b>	\$10.00

\*Fees are subject to change. Please contact the number above to verify.

All vendors are required to be re-fingerprinted every five (5) years.

# **Registered Behavior Technician (RBT)**

## **Parent Packet**

# APPLICATION TO ALLOW PRIVATE REGISTERED BEHAVIOR TECHNICIANS INTO A BROWARD COUNTY PUBLIC SCHOOL

To be completed by student's parent:

<hr/>		<hr/>
Print Student's Name		Current School
<hr/>	<hr/>	<hr/>
Current Grade	Date of Birth	Primary Eligibility

I acknowledge that permission for a Registered Behavior Technician is an administrative decision. F.S. 1003.572 governs the collaboration between public and private instructional personnel and does not address Registered Behavior Technicians.

I request that the following Registered Behavior Technician (RBT) be allowed to provide the service(s) indicated below for my child:

☐ Consultation      ☐ Observation      ☐ Direct Instruction

<hr/>	<hr/>
Print Private RBT's Name	Street Address
<hr/>	<hr/>
Telephone Number	City, State, Zip
<hr/>	
Email Address	

<hr/>	<hr/>
Print Supervising BCBA/BCaBA/BCB-D Name	Street Address
<hr/>	<hr/>
Telephone Number	City, State, Zip
<hr/>	
Email Address	

The RBT named above and the certified Supervising Behavior Analyst, holds the current credentials to provide implementation of behavior-analytic services.

The Registered Behavior Technician™ (RBT®) is a paraprofessional who practices under the close, ongoing supervision of a BCaBA, BCBA, or BCBA-D. The RBT is primarily responsible for the direct implementation of behavior-analytic services. The RBT does not design intervention or assessment plans. It is the responsibility of the RBT Supervising Behavior Analyst to determine which tasks an RBT may perform as a function of his or her training, experience, and competence. The Supervising Behavior Analyst of the RBT is responsible for the work performed by the RBT on the cases they are overseeing.

## APPLICATION TO ALLOW PRIVATE REGISTERED BEHAVIOR TECHNICIANS INTO A BROWARD COUNTY PUBLIC SCHOOL

\_\_\_\_\_  
Print Student's Name

We (the parent of the above-named student, the Supervising Behavior Analyst, and the RBT) understand that the individual providing the services is required to:

- The packet will not be processed until it is complete with all required documents on the checklist. This process can take up to 30 school days and may require additional documents as determined by the school-based administration. Requests for additional documents may extend the timeline.
- Comply with Florida Statute 1003.572 requiring certification or licensure;
- Submit to a fingerprint background screening by school district officials at the expense of the person requesting access. The screening must have occurred within the last five (5) years. Clearance for both the Supervising Behavior Analyst and the RBT must be obtained prior to services beginning;
- Update vendor badge for both the Supervising Behavior Analyst and the RBT. Each Private Provider must provide the school with proof that the vendor badge has been renewed annually in August;
- Submit proof of licensure/certificate for the Supervising Behavior Analyst and the RBT annually in August;
- Sign a Confidentiality Statement annually in August;
- Sign a Communication Agreement annually in August;
- Conduct an observation by Supervising Behavior Analyst of the student in the educational setting prior to the Registered Behavior Technician providing any services in the school setting;
- Adhere to all student's assigned school's procedures including, but not limited to, adhering to the school's procedures regarding safety and security to include entering the campus through the single point of entry, signing in and out every time the RBT is on campus, and adhering to scheduled time and location of services to be provided.
- **At no time can any RBT use any physical intervention with a student on any school campus;**
- Participate in the process outlined on the Private RBT Initiation Checklist prior to services beginning; (a copy of this checklist will be completed with school staff)
- Provide a written tentative schedule for the provision of services during the school day to school-based administration at least one week prior to the start of each month;
- Provide a copy of the private plan of care/private behavior plan; and,
- Provide a copy of all data collected in the school setting agreed upon between the school and the PIP.

As the parent of the above-named student I understand that:

- The collaboration between school staff and the RBT does not change the District's responsibility to provide the student with a free appropriate public education under the Individuals with Disabilities Education Act and that the school and the school alone will continue to be responsible to implement the student's Individual Education Plan, as well as other plans including, but not limited to, behavior and health plans;
- My child's public instructional provider and the school's principal must consent to the time and location of where the services will be provided. In determining the time and date for services to be provided, the principal must adhere to the collective bargaining agreement for instructional employees. Services may be delivered in my child's classroom with the express permission of the principal, subject



## APPLICATION TO ALLOW PRIVATE REGISTERED BEHAVIOR TECHNICIANS INTO A BROWARD COUNTY PUBLIC SCHOOL

---

Print Student's Name \_\_\_\_\_

to the principal's determination that such activity will not be detrimental to the educational process and/or to other students. If the principal initially permits the RBT to provide services in the classroom, the principal may rescind permission if, at a later date, it is determined that the services are disrupting the educational process for the named student and/or other students in the classroom. The parent and RBT will be informed in writing if they are no longer allowed to provide services in the school setting;

- The parent(s) is required to sign a release of information form annually so that the school staff, Supervising Behavior Analyst and RBT can communicate regarding services;
- RBTs may not be present during state/district testing;
- At no time shall the RBT act in place of the teacher or ESP in the classroom and will not be left alone with the student to provide supervision;
- At no time shall a private RBT intervene with other students in the school setting;
- At no time shall a private RBT take any photographs, audio recordings or videos while in the classroom setting;
- If the Supervising Behavior Analyst/RBT violates any policies and/or procedures, they may be asked by school administration not to return to the school's campus to provide services. In event that the Supervising Behavior Analyst violates a policy or procedure, the RBT will be also have privileges removed;
- The parent will notify the school immediately if the Supervising Behavior Analyst or RBT are no longer providing services to the student and this PIP/RBT Packet is no longer in effect;
- Some goals that are appropriate in another setting may not be able to be implemented in a school setting;
- If your child's IEP team determines that Extended School Year (ESY) is needed for your child to receive FAPE, a new schedule for the RBT must be established with staff at the ESY site. Parents may elect to provide a copy of the packet to the ESY site to expedite the process and establish a schedule for collaboration;
- In the event that your child transfers to another Broward school, it is the parents' responsibility to submit a copy of the packet to the new school with updated releases of information. The schedule that was previously in place will need to be reviewed and agreed upon by the teacher and administration in the new setting; and,
- Medicaid billing by the school district will not impact Medicaid billing by the private provider.

## **APPLICATION TO ALLOW PRIVATE REGISTERED BEHAVIOR TECHNICIANS INTO A BROWARD COUNTY PUBLIC SCHOOL**

\_\_\_\_\_  
Print Student's Name

The parents/guardian of the relevant minor(s) and undersigned RBT hereby acknowledge that the RBT is not an employee, agent, or assignee of the District School Board of Broward County (School Board). The parents/guardian of the relevant minor(s) and RBT further agree that the undersigned RBT does not have an expectation of employment with the School Board. The parent and RBT agree that the undersigned RBT has no right or expectation to the benefits, rights, or protections of an employee of the School Board, including, but not limited to wages, worker's compensation insurance, health insurance, disability insurance, fringe benefits, or any other benefits, rights, or protections afforded to School Board employees by contract or law.

The parents/guardian of the relevant minor(s) and the RBT, hereby agree and acknowledge that the School Board shall in no way be liable for any damages of any nature whatsoever which are caused or materially contributed to by the negligence, misfeasance, malfeasance, recklessness, intentional acts, unintentional acts, or any other acts of the undersigned RBT. Furthermore, the parents/guardian of the relevant minor(s), hereby fully release the School Board from any and all damages of any nature whatsoever which relate to, are caused by, or are materially contributed to by the direct or indirect negligence, misfeasance, malfeasance, recklessness, intentional acts, unintentional acts, or any other acts of the undersigned RBT. This release of liability specifically includes, but is not limited to, any and all claims concerning the School Board's supervision, direction, or control of the undersigned RBT, as well as the allowance of the RBT to be present on School Board property or act on School Board property.

The parents/guardian of the relevant minor(s), the Supervising Behavior Analyst and the RBT agree and acknowledge that the undersigned RBT shall indemnify, protect, and hold harmless the School Board for any and all damages of any nature whatsoever which are caused or materially contributed to by the negligence, misfeasance, malfeasance, recklessness, intentional acts, unintentional acts, or any other acts of the undersigned RBT. In the event that the School Board incurs any costs, legal fees, or losses resulting from claims or judgments arising out of the negligence, misfeasance, malfeasance, recklessness, intentional acts, unintentional acts, or any other acts of the undersigned RBT, then such RBT agrees to fully reimburse School Board for the same within thirty (30) days of the School Board's presentation of such costs, fees, or losses to the RBT. The undersigned RBT agrees that any amounts not reimbursed within the contractual thirty (30) day period, will incur monthly interest at the statutory rate applying to judgments in effect at the time that such cost, legal fee, or loss is presented to the RBT.

The School Board specifically reserves any and all rights, benefits, and protections afforded to it by Florida Law, whether it be by statute, administrative law, regulation, general law, or common-law. These protections specifically include, but are not limited to those afforded by Section 768.28, Florida Statutes, sovereign immunity, and any other controlling legal precedent. The parents/guardian of the relevant minor(s) and the RBT agree that the provisions of this agreement, and the application of any relevant laws, are to be construed in a manner that is most favorable to the School Board, so as to provide protection, indemnification, and a release of liability to the School Board.

The undersigned RBT agrees to secure a working knowledge of, and abide by, all School Board policies, rules, and procedures while present on School Board property. The undersigned RBT further understands that any observation, collaboration, or provision of private services under this agreement are subject to the consent of the applicable school principal and public instructional personnel as to time and place.

**APPLICATION TO ALLOW PRIVATE REGISTERED BEHAVIOR  
TECHNICIANS INTO A BROWARD COUNTY PUBLIC SCHOOL**

\_\_\_\_\_  
Print Student's Name

**We, the parent(s) of the student, the PIP, and RBT, have read the information contained within and agree with our responsibilities and acknowledge the Indemnification section of this agreement.**

The following completed forms are attached to this agreement. We understand that the agreement will not be processed until all forms are completed and provided to the Principal.

- \_\_\_\_ Application.
- \_\_\_\_ Documentation of Licensure (Supervising Behavior Analyst) and Registered Behavior Technician.
- \_\_\_\_ A copy of a Broward County issued vendor badge attached to the top of the packet. This verifies the individual has obtained Level 2 security clearance
- \_\_\_\_ Signed Authorization for Release of Information Form for both the Supervising Behavior Analyst and the Registered Behavior Technician.
- \_\_\_\_ Signed Confidentiality Statement from the Registered Behavior Technician and Supervising Behavior Analyst.
- \_\_\_\_ Signed Communication Agreement from the Registered Behavior Technician and Supervising Behavior Analyst.
- \_\_\_\_ Check all boxes that apply:
  - ☐ The PIP carries Professional Liability Insurance including sexual molestation coverage
  - ☐ The PIP carries Workers' Compensation Insurance or Medical Insurance
- \_\_\_\_ Private Behavior Plan or Plan of Care must contain the procedures and strategies to be used to implement the goals.
- \_\_\_\_ Proof of employment, on company letterhead, identifying the individual employed by the company matching the proof of insurance (when needed).

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Parent's Name

\_\_\_\_\_  
Registered Behavior Technician's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Registered Behavior Technician's Name

\_\_\_\_\_  
Supervising Behavior Analyst's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Supervising Behavior Analyst's Name

**CONFIDENTIALITY STATEMENT FOR REGISTERED BEHAVIOR TECHNICIANS  
WHO HAVE ACCESS TO A BROWARD COUNTY PUBLIC SCHOOL**

\_\_\_\_\_  
Print Student's Name

\_\_\_\_\_  
Current School

As a Private Instructional Personnel providing services to the above-named student in a Broward County Public School, I acknowledge that certain information about District's students is contained in records created and maintained by the District for which I may access and this information is confidential and protected by the Family Educational Rights and Privacy Act of 1974 (FERPA) (20 U.S. C. 1232g), and/or the Health Insurance Portability and Accountability Act (HIPAA) (45 CFR parts 160-164) and related District policies, as amended from time to time, currently available at [www.browardschools.com](http://www.browardschools.com). I further acknowledge that I might observe and/or overhear verbal conversations about District's students that are confidential and protected by the above-named Acts and policies. This confidential information cannot be disclosed unless valid consent is obtained from eligible students or their legal guardians. I agree to protect these records in compliance with FERPA, HIPAA, and District's policy.

I acknowledge that I may create and maintain records pertaining to the above-named student and these records, shared with the District, will be maintained and protected by the District in the same manner as District created records.

I agree that I may create, receive from or on behalf of the District, or have access to, records or record systems that are subject to FERPA and/or HIPAA (collectively, the "Confidential Records"). I represent, warrant, and agree that I will: (1) hold the Confidential Records in strict confidence and will not use or disclose the Confidential Records except as (a) permitted or required for this individual student, (b) required by law, or (c) otherwise authorized by the District in writing; (2) safeguard the Confidential Records according to commercially reasonable administrative, physical and technical standards as required by law; and (3) continually monitor its operations and take any and all action necessary to assure that the Confidential Records are safeguarded.

To the extent permitted by law, nothing contained herein shall be construed as precluding either I or the District from releasing such information to the other so that each can perform its respective responsibilities.

I understand that a breach of this Confidentiality Statement shall constitute grounds for the District to terminate my access, to the above-named student and/or any other student, at the students' school.

\_\_\_\_\_  
Registered Behavior Technician's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Registered Behavior Technician's Name

\_\_\_\_\_  
Supervising Behavior Analyst's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Supervising Behavior Analyst's Name

\_\_\_\_\_  
Principal's Signature

\_\_\_\_\_  
Date Signed Statement was Received

**COMMUNICATION AGREEMENT FOR REGISTERED BEHAVIOR TECHNICIANS  
WHO HAVE ACCESS TO A BROWARD COUNTY PUBLIC SCHOOL**

\_\_\_\_\_  
Print Student's Name

\_\_\_\_\_  
Current School

As a non-School Board employee who is being granted access to a School Board employee's classroom, the following guidelines for positive communication and working environment will be adhered to:

- The RBT will not interrupt the teaching and learning occurring in the classroom setting that is being delivered by the teacher and/or the educational support personnel;
- The RBT will provide any feedback/suggestions on implementation of interventions and strategies to the classroom staff in writing or addressed during a pre-arranged conference/collaboration time;
- If the RBT has a concern regarding behavioral strategies in the classroom, the RBT agrees to present the concerns to the Supervising Behavior Analyst who will collaborate with school administration;
- The RBT will communicate any changes to the pre-approved/agreed upon schedule to the classroom teacher. If administration requests to be included in this communication regarding schedule changes, the RBT will comply;
- The RBT will not be present for any state or district testing;
- The RBT will not intervene with any other students in the classroom other than the individual student identified above;
- The RBT will not be responsible for supervision of the student identified above;
- The RBT will share a copy of their Plan of Care/Behavior Intervention Plan and any revisions;
- The RBT will not audiotape, audiofile, video or photograph while on the school campus; and,
- The RBT will provide copies of all data collected in the school setting as agreed upon between the RBT and the school.

\_\_\_\_\_  
Registered Behavior Technician's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Registered Behavior Technician's Name

\_\_\_\_\_  
Supervising Behavior Analyst's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Supervising Behavior Analyst's Name

\_\_\_\_\_  
Principal's Signature

\_\_\_\_\_  
Date Signed Statement was Received

## PRIVATE REGISTERED BEHAVIOR TECHNICIAN INITIATION CHECKLIST

### *TO BE COMPLETED BY SCHOOL STAFF ONLY*

\_\_\_\_\_  
Print Student's Name

\_\_\_\_\_  
Current School

Supervising Behavior Analyst conducted an observation of the student in the school setting.

Date of Observation \_\_\_\_\_

- \_\_\_\_\_ Private Supervising Behavior Analyst and school staff reviewed the School Board's IEP and PBIP and the private behavior plan.
- \_\_\_\_\_ School staff collaborated with ESLS Program Specialist for Behavior to ensure that private and school-based PBIPs are aligned and there are no anticipated conflicts between the plans.
- \_\_\_\_\_ In the event that there are any interventions on the private behavior plan that cannot be implemented in the school setting, the Supervising Behavior Analyst agrees not to allow the RBT to implement these interventions in the school setting.
- \_\_\_\_\_ A system is created for the exchange of information between the RBT and the school.
- \_\_\_\_\_ Reviewed school procedures to include school safety protocols.

\_\_\_\_\_  
Private Instructional Personnel's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Private Instructional Personnel's Name

\_\_\_\_\_  
Principal's Signature

\_\_\_\_\_  
Date

**THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA**

**AUTHORIZATION FOR RELEASE AND/OR REQUEST  
FOR INFORMATION**

I hereby request and authorize: \_\_\_\_\_  
(Name of Person, School, or Department)

\_\_\_\_\_ to engage  
(Street Address) (City) (State) (Zip) (Telephone #)

in verbal and/or written communication with and release records to : \_\_\_\_\_  
(Name of Person, Job Title and/or School/Agency/Entity)

\_\_\_\_\_  
(Street Address) (City) (State) (Zip) (Telephone #)

regarding the **information checked below** concerning my child\* \_\_\_\_\_, whose date of birth is \_\_\_\_\_. I understand that information concerning psychiatric, psychological, medical diagnosis, drug or alcohol abuse, economic status, and educational information regarding my child will be released and/or communicated if indicated below. I further understand that this information might contain information regarding my family, in addition to my child.

<input type="checkbox"/> Treatment Plans	<input type="checkbox"/> Substance Abuse Treatment Records
<input type="checkbox"/> Treatment / Discharge Summaries	<input type="checkbox"/> Social and/or Developmental History
<input type="checkbox"/> Health / Medical Records	<input type="checkbox"/> Psychological and/or Psychiatric Evaluations
<input type="checkbox"/> Case / Progress / Therapy Notes	<input type="checkbox"/> Restorative Support Services
<input type="checkbox"/> Student Identification Number	<input type="checkbox"/> Social Support Services (Food, Clothing, Shelter)
Academic / School-related Records	<input type="checkbox"/> Medical Services
<input type="checkbox"/> Grades	<input type="checkbox"/> Substance Abuse Treatment Records
<input type="checkbox"/> Test Scores	<input type="checkbox"/> HIV/AIDS test results or related conditions (to disclose or
<input type="checkbox"/> Attendance	receive this information, specific individuals must be named
<input type="checkbox"/> Suspensions / Expulsions	above)
<input type="checkbox"/> Exceptional Student Education / Section 504 Records	
<input type="checkbox"/> Other _____	

For the Purpose of: \_\_\_\_\_

**I acknowledge that all information I authorize to be released or requested will be held strictly confidential and cannot be released by the recipient without an additional written consent. I understand this authorization will expire one (1) year after the date signed, or on \_\_\_\_\_, 20\_\_\_\_\_, whichever is earlier. A copy of this authorization is valid in lieu of the original. I further understand I may withdraw my consent in writing at any time.**

Print Name of Parent / Guardian / Eligible Student \_\_\_\_\_ Signature of Parent / Guardian / Eligible Student \_\_\_\_\_ Date \_\_\_\_\_

Relationship to Child \_\_\_\_\_

\*Eligible students (age 18 or over) may authorize the release of their education records.

**(USE THIS SPACE IF CONSENT IS WITHDRAWN)**

**I hereby withdraw my previous consent to the release of information about my child.**

Date Consent is Withdrawn \_\_\_\_\_ Signature of Parent / Guardian / Eligible Student \_\_\_\_\_

Form #4301  
REV 07/18  
Risk Management



BROWARD COUNTY PUBLIC SCHOOLS  
Security Clearance Office 754-321-2374  
securityclearance.fp@browardschools.com



Registration site for fingerprinting and/or badging: <http://www.fieldprintbrowardschools.com/>  
Additional information can be found at <http://www.broward.k12.fl.us/police/secclear.html>

APPLICANT GROUP	FIELDPRINT CODE	FEE*
NEW Vendor – (PIP) Direct Contact	<b>FPBCPSVenPIPDireCon</b>	\$88.00
Vendor (PIP) - Direct Contact – Badge Renewal <b>REQUIRED ANNUALLY</b>	<b>FPBCPSVenPIPDireConBRen</b>	\$20.00
VENDOR (PIP) – DIRECT CONTACT BADGE REPLACEMENT	<b>FPBCPSVenPIPDireConBRep</b>	\$10.00

\*Fees are subject to change. Please contact the number above to verify.

All vendors are required to be re-fingerprinted every five (5) years.



**Private Instructional Personnel (PIP)**  
**Registered Behavior Technician (RBT)**  
**School Packet**

**PRIVATE REGISTERED BEHAVIOR TECHNICIAN INITIATION CHECKLIST**  
***TO BE COMPLETED BY SCHOOL STAFF ONLY***

\_\_\_\_\_  
Print Student's Name

\_\_\_\_\_  
Current School

Supervising Behavior Analyst conducted an observation of the student in the school setting.

Date of Observation \_\_\_\_\_

- \_\_\_\_\_ Private Supervising Behavior Analyst and school staff reviewed the School Board's IEP and PBIP and the private behavior plan.
- \_\_\_\_\_ School staff collaborated with ESLS Program Specialist for Behavior to ensure that private and school-based PBIPs are aligned and there are no anticipated conflicts between the plans.
- \_\_\_\_\_ In the event that there are any interventions on the private behavior plan that cannot be implemented in the school setting, the Supervising Behavior Analyst agrees not to allow the RBT to implement these interventions in the school setting.
- \_\_\_\_\_ A system is created for the exchange of information between the RBT and the school.
- \_\_\_\_\_ Reviewed school procedures to include school safety protocols.

\_\_\_\_\_  
Private Instructional Personnel's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Private Instructional Personnel's Name

\_\_\_\_\_  
Principal's Signature

\_\_\_\_\_  
Date

APPLICATION TO ALLOW **REGISTERED BEHAVIOR TECHNICIAN** and **PRIVATE INSTRUCTIONAL PROVIDER**  
INTO A BROWARD COUNTY PUBLIC SCHOOL

Print Student's Name \_\_\_\_\_

**For School's Use Only**

**Received**

	<b>RBT</b>	<b>PIP</b>			
Is this a student with an IEP? If not, process stops and packet is denied	<input type="checkbox"/>	<input type="checkbox"/>			
Application	<input type="checkbox"/>	<input type="checkbox"/>			
Signed Release of Information Form	<input type="checkbox"/>	<input type="checkbox"/>			
Completed Private RBT Initiation Checklist	<input type="checkbox"/>	<input type="checkbox"/>			
Signed Confidentiality Agreement	<input type="checkbox"/>	<input type="checkbox"/>			
Signed Communication Agreement	<input type="checkbox"/>	<input type="checkbox"/>			
Documentation of Certification (RBT)	<input type="checkbox"/>		Date Issued	_____	Date of Expiration _____
Documentation of Level 2 Clearance (RBT)	<input type="checkbox"/>		Date Issued	_____	Date of Expiration _____
Documentation of Licensure (Supervisor)		<input type="checkbox"/>	Date Issued	_____	Date of Expiration _____
Documentation of Level 2 Clearance (Supervisor)		<input type="checkbox"/>	Date Issued	_____	Date of Expiration _____
Plan of Care / Private Behavior Plan	<input type="checkbox"/>	<input type="checkbox"/>			
COVID-19 PIP/RBT and Parent Acknowledgement Form	<input type="checkbox"/>	<input type="checkbox"/>			
Shared Packet with Public Instructional Personnel	<input type="checkbox"/>	<input type="checkbox"/>			

**1003.572 Collaboration of public and private instructional personnel.—**

(1) As used in this section, the term "private instructional personnel" means:

- (a) Individuals certified under s. 393.17 or licensed under chapter 490 or chapter 491 for applied behavior analysis services as defined in ss. 627.6686 and 641.31098.
- (b) Speech-language pathologists licensed under s. 468.1185.
- (c) Occupational therapists licensed under part III of chapter 468.
- (d) Physical therapists licensed under chapter 486.
- (e) Psychologists licensed under chapter 490.
- (f) Clinical social workers licensed under chapter 491.

(2) The collaboration of public and private instructional personnel shall be designed to enhance but not supplant the school district's responsibilities under the Individuals with Disabilities Education Act (IDEA). The school as the local education agency shall provide therapy services to meet the expectations provided in federal law and regulations and state statutes and rules. Collaboration of public and private instructional personnel will work to promote educational progress and assist students in acquiring essential skills, including, but not limited to, readiness for pursuit of higher education goals or employment. Where applicable, public and private instructional personnel shall undertake collaborative programming. Coordination of services and plans between a public school and private instructional personnel is encouraged to avoid duplication or conflicting services or plans.

(3) Private instructional personnel who are hired or contracted by parents to collaborate with public instructional personnel must be permitted to observe the student in the educational setting, collaborate with instructional personnel in the educational setting, and provide services in the educational setting according to the following requirements:

- (a) The student's public instructional personnel and principal consent to the time and place.
- (b) The private instructional personnel satisfy the requirements of s. 1012.32 or s. 1012.321.

For the purpose of implementing this subsection, a school district may not impose any requirements beyond those requirements specified in this subsection or charge any fees.

(4) The provision of private instructional personnel by a parent does not constitute a waiver of the student's or parent's right to a free and appropriate public education under IDEA.

As the School-Based Administrator where the student attends school, the student's IEP and PBIP have been reviewed by myself or my designee and I confirm that the current IEP and PBIP provide the student with the supports and services required for the student to receive a free appropriate public education (FAPE). The provision of a PIP in the school setting is the sole decision of the parent and was not determined to be a need by the IEP committee.

I consent to this Private Instructional Personnel/RBT providing services to this student in my school beginning on \_\_\_\_\_.

I do not consent to this Private Instructional Personnel/RBT providing services to this student in my school beginning on \_\_\_\_\_.

Principal's Signature \_\_\_\_\_

Date \_\_\_\_\_

Date parent notified in writing of outcome: \_\_\_\_\_ (see approval/denial/recension letter)

Approved ☐

Denied ☐

APPLICATION TO ALLOW **PRIVATE INSTRUCTIONAL PERSONNEL**  
INTO A BROWARD COUNTY PUBLIC SCHOOL

\_\_\_\_\_  
Print Student's Name

**For School's Use Only**

**Received**

Is this a student with an IEP? If not, process stops and packet is denied

☐

Application

☐

Signed Release of Information Form

☐

Signed Confidentiality Agreement

☐

Signed Communication Agreement

☐

Documentation of Licensure (PIP)

☐

Date Issued \_\_\_\_\_ Date of Expiration \_\_\_\_\_

Documentation of Level 2 Clearance (PIP)

☐

Date Issued \_\_\_\_\_ Date of Expiration \_\_\_\_\_

Plan of Care / Private Behavior Plan

☐

COVID-19 PIP/RBT and Parent Acknowledgement Form

☐

Shared Packet with Public Instructional Personnel

☐

**1003.572 Collaboration of public and private instructional personnel.—**

(1) As used in this section, the term "private instructional personnel" means:

(a) Individuals certified under s. 393.17 or licensed under chapter 490 or chapter 491 for applied behavior analysis services as defined in ss. 627.6686 and 641.31098.

(b) Speech-language pathologists licensed under s. 468.1185.

(c) Occupational therapists licensed under part III of chapter 468.

(d) Physical therapists licensed under chapter 486.

(e) Psychologists licensed under chapter 490.

(f) Clinical social workers licensed under chapter 491.

(2) The collaboration of public and private instructional personnel shall be designed to enhance but not supplant the school district's responsibilities under the Individuals with Disabilities Education Act (IDEA). The school as the local education agency shall provide therapy services to meet the expectations provided in federal law and regulations and state statutes and rules. Collaboration of public and private instructional personnel will work to promote educational progress and assist students in acquiring essential skills, including, but not limited to, readiness for pursuit of higher education goals or employment. Where applicable, public and private instructional personnel shall undertake collaborative programming. Coordination of services and plans between a public school and private instructional personnel is encouraged to avoid duplication or conflicting services or plans.

(3) Private instructional personnel who are hired or contracted by parents to collaborate with public instructional personnel must be permitted to observe the student in the educational setting, collaborate with instructional personnel in the educational setting, and provide services in the educational setting according to the following requirements:

(a) The student's public instructional personnel and principal consent to the time and place.

(b) The private instructional personnel satisfy the requirements of s. 1012.32 or s. 1012.321.

For the purpose of implementing this subsection, a school district may not impose any requirements beyond those requirements specified in this subsection or charge any fees.

(4) The provision of private instructional personnel by a parent does not constitute a waiver of the student's or parent's right to a free and appropriate public education under IDEA.

As the School-Based Administrator where the student attends school, the student's IEP and PBIP have been reviewed by myself or my designee and I confirm that the current IEP and PBIP provide the student with the supports and services required for the student to receive a free appropriate public education (FAPE). The provision of a PIP in the school setting is the sole decision of the parent and was not determined to be a need by the IEP committee.

I consent to this Private Instructional Personnel providing services to this student in my school beginning on \_\_\_\_\_.

I do not consent to this Private Instructional Personnel providing services to this student in my school beginning on \_\_\_\_\_.

\_\_\_\_\_  
Principal's Signature

\_\_\_\_\_  
Date

Date parent notified in writing of outcome: \_\_\_\_\_ (see approval/denial/recension letter)

Approved ☐

Denied ☐

CONTINUATION OF A 2019-2020 APPROVED PACKET FOR A **PRIVATE INSTRUCTIONAL PERSONNEL AND REGISTERED BEHAVIOR TECHNICIAN** FOR 2020-2021 DURING COVID-19  
INTO A BROWARD COUNTY PUBLIC SCHOOL

Print Student's Name \_\_\_\_\_

**For School's Use Only**

**Received**

Confirmed a packet was approved for the 2019-2020  
Letter provided to the Parent/PIP/RBTs

☐

Signed Authorization for Release of Information Form for  
2020-2021

☐

Documentation of Certification (RBT)

☐

Date Issued \_\_\_\_\_ Date of Expiration \_\_\_\_\_

Documentation of Level 2 Clearance (RBT)

☐

Date Issued \_\_\_\_\_ Date of Expiration \_\_\_\_\_

Documentation of Licensure (PIP)

☐

Date Issued \_\_\_\_\_ Date of Expiration \_\_\_\_\_

Documentation of Level 2 Clearance (PIP)

☐

Date Issued \_\_\_\_\_ Date of Expiration \_\_\_\_\_

Plan of Care / Private Behavior Plan

☐

COVID-19 PIP/RBT and Parent Acknowledgement Form

☐

Shared Packet with Public Instructional Personnel

☐

**1003.572 Collaboration of public and private instructional personnel.—**

(1) As used in this section, the term "private instructional personnel" means:

(a) Individuals certified under s. 393.17 or licensed under chapter 490 or chapter 491 for applied behavior analysis services as defined in ss. 627.6686 and 641.31098.

(b) Speech-language pathologists licensed under s. 468.1185.

(c) Occupational therapists licensed under part III of chapter 468.

(d) Physical therapists licensed under chapter 486.

(e) Psychologists licensed under chapter 490.

(f) Clinical social workers licensed under chapter 491.

(2) The collaboration of public and private instructional personnel shall be designed to enhance but not supplant the school district's responsibilities under the Individuals with Disabilities Education Act (IDEA). The school as the local education agency shall provide therapy services to meet the expectations provided in federal law and regulations and state statutes and rules. Collaboration of public and private instructional personnel will work to promote educational progress and assist students in acquiring essential skills, including, but not limited to, readiness for pursuit of higher education goals or employment. Where applicable, public and private instructional personnel shall undertake collaborative programming. Coordination of services and plans between a public school and private instructional personnel is encouraged to avoid duplication or conflicting services or plans.

(3) Private instructional personnel who are hired or contracted by parents to collaborate with public instructional personnel must be permitted to observe the student in the educational setting, collaborate with instructional personnel in the educational setting, and provide services in the educational setting according to the following requirements:

(a) The student's public instructional personnel and principal consent to the time and place.

(b) The private instructional personnel satisfy the requirements of s. 1012.32 or s. 1012.321.

For the purpose of implementing this subsection, a school district may not impose any requirements beyond those requirements specified in this subsection or charge any fees.

(4) The provision of private instructional personnel by a parent does not constitute a waiver of the student's or parent's right to a free and appropriate public education under IDEA.

As the School-Based Administrator where the student attends school, the student's IEP and PBIP have been reviewed by myself or my designee and I confirm that the current IEP and PBIP provide the student with the supports and services required for the student to receive a free appropriate public education (FAPE). The provision of a PIP in the school setting is the sole decision of the parent and was not determined to be a need by the IEP committee.

I consent to this PIP/RBT providing services to this student in my school beginning on \_\_\_\_\_.

I do not consent to this PIP/RBT providing services to this student in my school beginning on \_\_\_\_\_.

Principal's Signature \_\_\_\_\_

Date \_\_\_\_\_

Date parent notified in writing of outcome: \_\_\_\_\_ (see approval/denial/recension letter)

Approved ☐

Denied ☐

PLACE ON SCHOOL LETTERHEAD

(Insert Date)

Dear (Insert Parent Name):

The Registered Behavior Technician (RBT) and/or Private Instructional Personnel (PIP) packet was received and reviewed.

The RBT/PIP has been:

☐ Approved

☐ Denied for the following reason(s):

☐ Student is not a student with an IEP

☐ Packet Received is incomplete

☐ Authorization for Release of Information was not provided

☐ Confidentiality Agreement was not provided

☐ Communication Agreement was not provided

☐ Plan of Care/Behavior Plan was not provided

☐ Certification/Licensure provided is/was not current \_\_\_ RBT \_\_\_ PIP/Supervising Behavior Analyst

☐ Documentation of Level 2 Clearance was not provided \_\_\_ RBT \_\_\_ PIP/Supervising Behavior Analyst

☐ Vendor badge is not current \_\_\_ RBT \_\_\_ PIP/Supervising Behavior Analyst

☐ COVID-19 PIP/RBT and Parent Acknowledgement Form was not provided

☐ Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sincerely,

(Insert Principal Name)

**PLACE ON SCHOOL LETTERHEAD**

(Insert Date)

Dear (Insert Parent Name):

The Registered Behavior Technician Private/Instructional Personnel who has been providing services in our school setting has violated one or more conditions agreed upon when submitting the RBT/PIP packet. Therefore, the private provider is no longer allowed to provide services on this school campus effective (Insert Date), for the following reason: (insert reason why provider is no longer allowed on campus)

Sincerely,

(Insert Principal Name)

**COVID-19 PIP/RBT  
Acknowledgement Forms**



PLACE ON SCHOOL LETTERHEAD

**FOR USE WITH NEW PIPs/RBTs FOR THE 2020-2021 SCHOOL YEAR**

**(Purpose is to provide notice to applicant that process may take up to 30 days)**

(Insert Date)

Dear (Insert Parent(s) Name) and/or (Insert Private Instructional Personnel Name):

Any individuals with a complete Private Instructional Personnel/Registered Behavior Technician (PIP/RBT) packet submitted will be processed for the 2020-2021 school year upon receipt of the documents outlined below:

\_\_\_\_\_ A COVID-19 PIP/RBT Acknowledgement form signed by the PIP/RBT and parent

\_\_\_\_\_ A completed April 2021 Packet for a PIP/RBT packet with all of the documentation

Please return all the items indicated on this letter above completed to the school. The process for reviewing these documents may take up to 30 calendar days to complete. Once reviewed and completion is confirmed and approved, you will be notified in writing.

It is always the desire of Broward County Schools to work collaboratively with families and community providers to meet the unique needs of all students, specifically our students with disabilities. Should you have any concerns regarding your client, please do not hesitate to contact (insert contact individual's email/phone).

Sincerely,

(Insert Principal Name)

## COVID-19 PIP/RBT AND PARENT ACKNOWLEDGEMENT FORM

For NEW PIP/RBT Applicants for the 2020-2021 School Year

Name of Private Provider (PIP/RBT): \_\_\_\_\_

Name of Student: \_\_\_\_\_

Completion of this form is a request to provide services to my child/client named above during the 2020-2021 school year.

### FOR THE PARENT(S):

My signature below indicates an agreement and understanding of the documents.

Parent initials	Parent initials	Acknowledgements and Agreements for the 2020-2021 School Year
		I/We, the parent(s) of the above-named student, understand that the decision regarding the schedule for services in the school setting is determined by the Public Instructional Provider (classroom teacher) and the school-based administrator.
		I/We understand that approvals may take up to 30 calendar days from the date that all the required documents are received by school staff.
		I/We understand that services in the school setting may be limited and or stopped in order to ensure public safety and comply with the safety protocols put in place in response to the COVID-19 pandemic.
		I have provided an Authorization for Release of Information for the 2020-2021 school year to the school staff.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Print Parent's Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Print Parent's Name

\_\_\_\_\_  
Date

### FOR THE PIP/RBT:

I will implement and comply with all the requirements contained within the completed application for the 2020-2021 school year.

PIP Initials	RBT Initials	Acknowledgements and Agreements for the 2020-2021 School Year
		I/We, the PIP/RBT of the above-named student, understand that the decision regarding the schedule for services in the school setting is determined by the Public Instructional Provider (classroom teacher) and the school-based administrator.
		I/We understand that approvals may take up to 30 calendar days from the date that all the required documents are received by school staff.
		I/We understand that services in the school setting may be limited and or stopped in order to ensure public safety and comply with the safety protocols put in place in response to the COVID-19 pandemic.
		I have reviewed School Board Policy regarding Facial Coverings (2170-E) and agree to comply with all safety guidelines in response to the COVID-19 Pandemic provided by the school-based administration and/or school-based staff.

\_\_\_\_\_  
Registered Behavior Technician's Signature

\_\_\_\_\_  
Print Registered Behavior Technician's Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervising Behavior Analyst's Signature

\_\_\_\_\_  
Print Supervising Behavior Analyst's Name

\_\_\_\_\_  
Date

PLACE ON SCHOOL LETTERHEAD

**FOR USE WITH PIPs/RBTs WITH APPROVED PACKET FOR THE 2019-2020 SCHOOL YEAR**

**(Purpose is to provide notice to applicant that process may take up to 30 days)**

(Insert Date)

Dear (Insert Parent(s) Name) and (Insert Private Instructional Personnel Name):

During the 2019-2020 school year, a Private Instructional Personnel and/or Registered Behavior Technician (PIP/RBT) packet was submitted and approved for your child/client who attends this school. The PIP/RBT packet submitted and approved for the 2019-2020 school year will continue to be approved for the 2020-2021 school year upon receipt of the documents outlined below:

- \_\_\_\_\_ A COVID-19 PIP/RBT Acknowledgement form signed by the PIP/RBT and parent
- \_\_\_\_\_ A current copy of a vendor badge for the individual on the approved 2019-2020 PIP/RBT Packet
- \_\_\_\_\_ A current copy of the PIP/RBTs licensure and/or certification
- \_\_\_\_\_ A current copy of the private behavior plan, as applicable
- \_\_\_\_\_ A current Authorization for Release of Information signed by the parent for the PIP/RBT to communicate with school staff

Please return all the items indicated on this letter above completed to the school. The process for reviewing these documents may take up to 30 calendar days to complete. Once reviewed and completion is confirmed and approved, you will be notified in writing.

It is always the desire of Broward County Schools to work collaboratively with families and community providers to meet the unique needs of all students, specifically our students with disabilities. Should you have any concerns regarding your client, please do not hesitate to contact (insert contact individual's email/phone).

Sincerely,

(Insert Principal Name)

For Previously Approved PIP/RBT Applicants for the 2020-2021 School Year

Name of Student: \_\_\_\_\_

By initialing below, I (Parent(s), PIPs and RBTs) am acknowledging that the following documents were completed in the packet submitted to the school during the 2019-2020 school year (Please initial below by each document):

**FOR THE PARENTS:**

Parent initials	Parent initials	Acknowledgements and Agreements for the 2020-2021 School Year
		I/We, the parent(s) of the above-named student, understand that the decision regarding the schedule for services in the school setting is determined by the Public Instructional Provider (classroom teacher) and the school-based administrator.
		I/We understand that approvals may take up to 30 calendar days from the date that all the required documents are received by school staff.
		I/We understand that services in the school setting may be limited and or stopped in order to ensure public safety and comply with the safety protocols put in place in response to the COVID-19 pandemic.
		I have provided an Authorization for Release of Information for the 2020-2021 school year to the school staff.

Parent Signature	Print Parent's Name	Date

## 4 of 5

I will implement and comply with all the requirements contained within these documents for the 2020-2021 school year.

PIP Initials	RBT Initials	Acknowledgements and Agreements for the 2020-2021 School Year
		I/We, the PIP/RBT of the above-named student, understand that the decision regarding the schedule for services in the school setting is determined by the Public Instructional Provider (classroom teacher) and the school-based administrator.
		I/We understand that approvals may take up to 30 calendar days from the date that all the required documents are received by school staff.
		I/We understand that services in the school setting may be limited and or stopped in order to ensure public safety and comply with the safety protocols put in place in response to the COVID-19 pandemic.
		I have reviewed School Board Policy regarding Facial Coverings (2170-E) and agree to comply with all safety guidelines in response to the COVID-19 Pandemic provided by the school-based administration and/or school-based staff.

\_\_\_\_\_  
Registered Behavior Technician's Signature

\_\_\_\_\_  
Print Registered Behavior Technician's Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervising Behavior Analyst's Signature

\_\_\_\_\_  
Print Supervising Behavior Analyst's Name

\_\_\_\_\_  
Date

# **Private Instructional Personnel (PIP) Registered Behavior Technician (RBT) Questions and Answers**

**Section I .....Packet Questions**

**Section II .....Badges/Security**

**Section III .....Observations/Services/Plan of Care**

**Section IV .....Aftercare**

**Section V .....COVID-19**

## Section I

### Packet Questions

- 1. Once the PIP/RBT packet is reviewed and accepted, where is the packet to be maintained?**

Answer

A PIP/RBT packet is a student record. This packet is housed at the student's school and placed in the student's cum folder. The packet is not uploaded to ED Plan.

- 2. If a student moves from one school to another does the RBT need to complete a new packet?**

Answer

Any packets prior to November 2019, should be requested from the previous school. In the November 2019 updated parent packets, parents were informed that they must submit a copy of the previous packet, approved at the previous school.

- 3. If an RBT is an RBT for more than one school, does the RBT need to complete more than one packet?**

Answer

Yes, a packet is required for each student where services are being provided.

- 4. How many packets can be submitted for one student?**

Answer

There is no limit to the number of packets that can be submitted by a parent for a student.

- 5. If an employee of the District is a PIP and employs RBTs, are these individuals required to complete packets?**

Answer

Yes. All PIPs/RBTs seeking to work in the school setting must complete all required components of the packet.

- 6. Is there a turnaround time that the schools must respond to the RBT Packet?**

Answer

The approval process may take up to 30 school days. Any requests by administration for additional documentation may extend the timeline.

## **Section II**

### **Badge/Security**

**7. Is it required for the vendor badge to explicitly state Private Instructional Provider?**

Answer

No. A vendor badge is only obtained after Level 2 security clearance. If a provider has a vendor badge, this requirement has been met. A contractor badge or a BCPS NSU student badge is not sufficient.

**8. Can an RBT/PIP forego the requirement to complete the Level 2 security clearance in Broward County Public Schools?**

Answer

No. All individuals must complete the process in Broward which includes receiving a Level 2 screening and vendor badge issued by Broward County Schools.

**9. Is the Behavioral Health Partnership the same as the PIP/RBT process?**

Answer

No. The Behavioral Health Partners are cleared through the District and do not need to complete the PIP/RBT process. For more information on Behavioral Health Partnerships... [http://bcps-esls.com/html/BHP\\_Provider\\_List.php](http://bcps-esls.com/html/BHP_Provider_List.php)



## **Section III**

### **Observations/Services/Plan of Care**

**10. Who decides the schedule for the RBT/PIP in the school setting?**

Answer

According to Florida Statue 1003.572 (3) (a) The student's public instructional personnel and principal consent to the time and place.

**11. Are RBTs/PIPs allowed to service Gen Ed students?**

Answer

No, Florida Statue 1003.572 applies only to students with an IEP.

**12. What do you do if the RBT is taking pictures and videos in the school setting?**

Answer

PIPs/RBTs have signed an agreement acknowledging that pictures, videos, and audio recordings are not allowed. Administration should meet with the RBT/PIP, address the concern and inform the provider that any future violation may result in rescission of access to provide services in the school. Utilize the rescission letter as appropriate.

**13. Is there a limit of how many observations can be done by a PIP/RBT?**

Answer

This statute, 1003.572 is in regard to collaboration of public and private instructional personnel. It is silent to the number of times, the number of days or anything specific regarding the scheduling of these services/observation. Schedules are determined by public instructional personnel and administration.

**14. Does insurance billing/coverage determine a PIP/RBTs schedule?**

Answer

No. This is between the principal and public instructional provider.

**15. Can a PIP/RBT be present for State and/or District Testing?**

Answer

PIP/RBTs will not be present for any state or district testing.

**16. Are PIPs/RBTs allowed to attend field trips with the student?**

Answer

Participation in field trips is at the principal's discretion. The amount of time, location of service, and schedule for the service is subject to agreement between the principal and public instructional personnel. It is suggested that if they are attending, the RBT/PIP should meet the student/class at the field trip location, cover the cost of their own ticket/admission/etc. and cannot be counted as a provider.

**17. Can individuals who do not meet the criteria of PIP/RBT observe in the classroom setting?**

Answer

Observations are possible outside of the PIP/RBT processes. The observations must follow the guidelines established in the BTU's collective bargaining agreement.

**18. If a PIP has been approved and provide services on a school campus, is the school required to have a staff member present during the provision of services?**

Answer

No, the individual has been determined to meet the Level II clearance requirements and can be alone with the child in the school setting. However, an RBT must provide services where an SBBC staff member is present.

**19. Does the principal have the right to designate a place where services are provided for PIPs/RBTs?**

Answer

It is the decision of the building administration to determine the schedule and location for where services are to be provided. There are services that would not be appropriate in the classroom. If the service is something where the student needs to be in their regular programming and the principal and teacher agree (such as behavior therapy), then the classroom might be the best location.

**20. Can a PIP/RBT supplant student needs determined by the IEP team?**

Answer

Florida Statue 1003.572 (2) states: The collaboration of public and private instructional personnel shall be designed to enhance but not supplant the school district's responsibilities under the Individuals with Disabilities Education Act (IDEA). The school as the local education agency shall provide therapy services to meet the expectations provided in federal law and regulations and state statutes and rules. Collaboration of public and private instructional personnel will work to promote educational progress and assist students in acquiring essential skills, including, but not limited to, readiness for pursuit of higher education goals or employment. Where applicable, public and private instructional personnel shall undertake collaborative programming. Coordination of services and plans between a public school and private instructional personnel is encouraged to avoid duplication or conflicting services or plans.

The reason why this is a part of the packet is so that schools are not moving a need that a student has that should be provided as our obligation to provide FAPE to a private provider. This is not in any way to replace our educational obligations to meet the student's unique needs. The principal has to sign off on this so that the team has ensured that the request from the parent is not based on student need but rather parent request.

**21. Do parents of children NOT receiving PIP/RBT services have the right to restrict a PIP/RBT from coming into their child's classroom?"**

Answer

No. However, if services provided to another student becomes disruptive, administration must address the concern.

**22. Individuals can cause a disruption if it not part of the classroom routine. What are the guidelines for this?**

Answer

If services become a disruption, administration must address the concern.

**23. Must the child have behavior goals or a PBIP in order for a BCaBA/RBT therapist to be able to provide services?**

Answer

No. It is not mandatory for a student to have a PBIP and/or behavior goals. However, it is a time to look at the student to see if the child is exhibiting behavior concerns within the school setting. If the child is, this should be addressed.

**24. Why is it critical to receive private plans of care and/or behavior plans?**

relevant section of the statute below.

Answer

Florida Statute 1003.572 Collaboration of Public and Private Instructional Personnel:

(2) The collaboration of public and private instructional personnel shall be designed to enhance but not supplant the school district's responsibilities under the Individuals with Disabilities Education Act (IDEA). The school as the local education agency shall provide therapy services to meet the expectations provided in federal law and regulations and state statutes and rules. Collaboration of public and private instructional personnel will work to promote educational progress and assist students in acquiring essential skills, including, but not limited to, readiness for pursuit of higher education goals or employment. Where applicable, public and private instructional personnel shall undertake collaborative programming. Coordination of services and plans between a public school and private instructional personnel is encouraged to avoid duplication or conflicting services or plans.

The last two sentences clearly states that programming should be collaborative and encourages that this collaboration can avoid duplication or conflicting services OR plans. Collaboration cannot occur without sharing plans.

**25. Can an RBT begin to work in a school without an FBA/PBIP where behavior is addressed through goals?**

Answer

The RBT (or supervising Behavior Analyst) must provide the school with the plan that they will be implementing in the school in order for us to determine if it is in alignment with/does not contradict the behavior goals/strategies that the school is implementing and in order for their packet to be approved. No PIP/RBT can begin to work with a child in the school setting during instructional time without collaboration about what it is they will be doing with the child and what the teacher can expect to see in the classroom, etc...

Parents may request and complete a packet for students who do not currently have an FBA/PBIP. School staff should discuss and confirm that there is not a need to address behavior by school staff (check to see if there are goals, observe in the classroom to see the teacher has a "defacto" behavior plan in place that should be formally written). If there is a need, the school must initiate a reeval, evaluate for an FBA and consider the need to add behavior goals to the IEP. However; there are times when there are no concerns in the school setting, there are no behavior goals and there is no FBA/PBIP. In these instances, if the parents request, a PIP/RBT can provide support in the school setting.

**26. Are Program Specialists for Behavior reviewing RBT Packets for students who do not have a school based FBA/PBIP?**

Answer

Program Specialists for Behavior are not reviewing packets but rather private and school-based behavior plans. The responsibility to review packets rests with the school administration. Program Specialists for Behavior should review all plans of care even if the student does not have an FBA/PBIP in EDPlan to ensure that the private plan is appropriate to be implemented in the school setting. The Program Specialist for Behavior will review the private plan and determine any portions that will require further discussion with school staff prior to implementation. When there is a request for a PIP/RBT and the student does not have a school-based plan, the team should consider if there is a need to develop a school plan.

**27. Are RBTs allowed to be supervised under a Marriage and Family Counselor?**

Answer

No. RBTs must be supervised by a BCBA or a BCaBA.

**28. Prior to developing a PBIP for home, can a BCBA come into the schools to conduct trials in order to collect data, to use in the development of a PBIP?**

Answer

Given that the statute allows for observations, if they have completed a packet, they should be able to come in to observe and collect data. Any data collected must be shared with the school.

**29. How often is a Plan of Care reviewed?**

Answer

A Plan of Care/Behavior Intervention Plan will be shared with the school upon submitting the application and whenever a change(s) is/are made to the plan. The school must collaborate with the ESLS Program Specialist for Behavior to ensure that private and school-based PBIPs are aligned and there are no anticipated conflicts between the plans. If it is not approved, the Plan of Care must be revised and submitted for review.

**30. How is the RBT data being provided to the school?**

Answer

Each school-based team must establish a plan and system to obtain data collected by the RBT/PIP in the school setting.

**31. Prior to Senate Bill 1108, private providers were allowed to observe a student in a classroom in accordance with the teacher contract. Does this legislation replace the current practices for observation?**

Answer

No, parents have always been entitled to request an observation through school-based administration in accordance with the teacher contract guidelines. Parents may still utilize this process for observations. However, if the parent is requesting ongoing observations, collaboration and provision services of ESE students by a PIP, they must complete the application process. Private Providers, who have completed the application process and have been approved, will not be required to be escorted by a school board employee while they are on campus and will be allowed to work with the child alone.

**32. Is the school required to provide the PIP/RBT materials to work with the student?**

Answer

No, it is the responsibility of the PIP/RBT who is being paid by the parent to bring any materials needed while working with the student on the school campus. However, a PIP/RBT may utilize classroom instructional materials while working with the student in the classroom.

**33. If the parent completes the application process for a PIT/RBT and coordinates with administration to provide services in the school setting, are these services addressed on the IEP?**

Answer

No, privately provided services that the IEP team has not determined to be needed for the student to receive a Free Appropriate Public Education are not recorded on the IEP. It is important for IEP teams to ensure that a student receives the services needed to make meaningful progress. The only services recorded on the IEP are the services provided by school district staff.

**34. Will the District billing for Medicaid impact the private provider's ability to bill Medicaid for the services that they provide?**

Answer

No. The District delays billing Medicaid for the services it provides by several weeks in order to allow private providers to bill and get paid first. Medicaid will not pay for duplicate services on the same day (two speech or language services, for example). Therefore, it is in the District's and private provider's best interest to collaborate on scheduling to try to avoid duplicate services being delivered on the same days of the week.

## Section IV

### Aftercare

#### 35. Can PIPs/RBTs provide services during before and after-school programs?

##### Answer

- a. For District operated before and after-school programs. There is no requirement to allow PIP/RBTs to provide services during before and/or after-school programs. However, School Principals are in charge of the before and after school programs located on their individual campuses, therefore if the Principal agrees to allow a PIP/RBT to provide services during these programs, it is permissible. Parents and PIP/RBTs would have to complete the same application, Level 2 clearance, etc. to provide services during before and/or after school programs operated by the District as they would if they provided services during the school day.
- b. For before and after school programs operated by a community agency. This legislation is regarding collaboration between a school district and PIP/RBTs paid by the parent and does not reference before and after school programs. Therefore, it would be the decision of a community agency who is operating the before and after school programs to allow or not allow a PIP to provide services during their programs. The District or individual school would not be involved with this decision. The community agency would follow their contract with the District regarding having additional individual on campus during before and after school programs.

## Section V

### COVID-19

**36. Will PIPs/RBTs be permitted to collaborate with public school instructional personnel and provide services on school campuses when instruction resumes in the brick and mortar setting?**

Answer

Due to the current COVID-19 pandemic, access to classrooms on school campuses for district staff as well as private instructional providers has been suspended. Once conditions stabilize, collaboration between public and private instructional providers may resume and schools will be updated when this happens. At this time, all PIPs and RBTs may not be permitted on school campuses in the classrooms.

**37. Will 2019-2020 PIP/RBT approved packets be accepted for the 2020-2021 school year?**

Answer

Due to the current COVID-19 pandemic, the PIP/RBT packet submitted and approved for the 2019-2020 school year will continue to be approved for the 2020-2021 school year upon receipt of the following documents:

- A COVID-19 PIP/RBT Acknowledgement Form signed by the PIP/RBT and the parent(s)
- A current copy of a vendor badge for the individual on the approved 2019-2020 PIP/RBT packet
- A current copy of the PIP/RBT licensure and/or certification
- A current copy of the private behavior plan, as applicable
- A current Authorization for Release of Information signed by the parent for the PIP/RBT to communicate with school staff

**38. If a new RBT is working with a student for the 2020-2021 school year but the supervising PIP from 2019-2020 is the same, is a new packet required?**

Answer

The RBT must complete a new packet and the supervising PIP needs to sign the RBT Packet's required documents. The PIP must follow the guidelines stated in #37 above.

**39. If there is a public health concern will schedules be adjusted?**

Answer

Yes, schedules will have to be adjusted to meet the required public health guidelines.

**40. Can a schedule be limited or changed?**

Answer

Yes, capacity and social distancing limits must be followed.

**41. Will a PIP/RBT be required to wear a mask?**

Answer

Yes, per Policy 2170-E (Face Coverings): Subject to the exception set forth below, each student, employee, visitor, vendor or other person are always required to properly wear a face covering while at or inside a school/facility, or other vehicle owned, leased or operated by The School Board. Proper wearing of a face covering, should cover both the nose and the mouth of the person and should fit snugly against the sides of the person's face with no gaps.