

Child Development Center ABA Client and Family Handbook of Operational Policies

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Thank you for choosing Easter Seals North Texas (ESNT), the leading non-profit provider for people living with disabilities. We look forward to working with you and your family. Please take a moment to review our Child Development Center handbook as it contains information that will be helpful to you and your family. If you have any questions or need clarification on the contents, please do not hesitate to ask. Again, we thank you for choosing Easter Seals North Texas Child Development Center.

ESNT MISSION STATEMENT

The mission of Easter Seals North Texas (ESNT) is to create opportunities that advance the independence of individuals with disabilities and other special needs.

PURPOSE

The purpose of this early childhood center is to serve the needs of children from 18 months to six years of age, ensuring quality, innovative educational programming in a setting that includes children in our community with developmental disorders. We focus on helping all children develop a positive self-concept, independence and self-control in a fun, engaging environment with an emphasis on language development and socialization. Each month we focus on themes that are incorporated in social play, math and science, language arts and reading, music and free play. We are committed to the individualized education and care of children. It is our belief that each child is unique and has something special to offer.

SCOPE

Our staff will provide developmentally appropriate curriculum, experiences and activities, as well as therapeutic intervention for those in need of such services. Classrooms will be staffed by highly trained professionals and paraprofessionals. Staff and Administration will provide a program that:

- Promotes cognitive, emotional and physical development;
- Maximizes the independence and enhances the function and potential of young children;
- Provides individualized, quality services to children and their families;
- Provides a family-centered program to ensure that each family's priorities, concerns, and cultures are addressed and incorporated into their child's daily activities;
- Provides a naturalistic environment where each child's overall development is enhanced and enriched;
- Includes children as active participants in their learning experience; and
- Maintains and increases the expertise of staff and quality services by providing opportunities for ongoing professional development.

In order to accomplish these goals, we will provide a child development program that enthusiastically:

- Promotes a healthy and safe environment for children;
- Promotes regular communication with parents;
- Promotes specially trained teachers and assistants;
- Promotes adult-child ratios which ensure quality care and individualized attention;
- Provides nutritious snacks;
- Promotes frequent, positive and warm interactions among adults and children;
- Provides planned learning activities and material appropriate to each child's developmental age;
- Promotes an opportunity for children with diverse abilities to participate in child development services together.

CLIENT/FAMILY BILL OF RIGHTS

The human rights of clients and families shall be respected throughout the time they are served at Easter Seals North Texas. All persons, regardless of race, color, national or ethnic origin, disability, age, sex/gender, sexual orientation, sexual preference, gender identity, religion, creed, marital status, political affiliation, or genetic information are equal in value and shall be treated accordingly. This organization promotes rights that include, but are not limited to:

For the client, the right to:

- Confidentiality and privacy;
- Interactions that are sensitive to his/her culture;
- Freedom from physical and psychological abuse and neglect;
- Freedom from unnecessary restraint;
- Participate in individual planning, decision making, and implementation;
- Personal dignity;
- Personal safety;
- Provision of services in the most appropriate, least restrictive, environment;
- Accept or refuse services:
- Decline to participate in research;
- Internal and external grievance procedures;
- Offer complaints and receive timely, appropriate responses;
- Receive information in an understandable manner on the results of evaluations, examinations, and treatments; and
- · Religious freedom.

For the parent/guardian, the right to:

- Accept or refuse services;
- Confidentiality and privacy;
- Interactions that are sensitive to his/her culture;
- Decline to participate in research;
- Internal and external grievance procedures;
- Offer complaints and receive timely, appropriate responses;
- Participate in individual planning, decision making and implementation;
- Personal dignity;
- Personal safety:
- Receive information in an understandable manner on the results of evaluations, examinations and treatments; and
- · Religious freedom.

Any allegation that the rights of one of our clients has been violated will be investigated immediately by the Program Director and Vice President of Therapeutic and Autism Services, with written reports of the results and recommendations forwarded to the client and the President and CEO of Easter Seals North Texas.

Proposed research projects involving clients at ESNT must be reviewed by the Program Director, Vice President of Therapeutic and Autism Services, and CEO to ensure that the human rights of the clients will be protected.

EASTER SEALS NORTH TEXAS THERAPUTIC AND AUTISM SERVICES PHILOSOPHY

Easter Seals North Texas strives to provide high-quality programs and services that are:

- Evidence- based:
- Supervised and/or provided by licensed/certified personnel in respective fields;
- Individualized:
- Family-centered; and
- Collaborative in nature.

Easter Seals North Texas maintains that:

- A client will make greater progress if the parent(s)/guardian(s) participate in the therapy sessions and home-programming activities;
- Services should be offered in an approach-based manner in the least restrictive environment;
- Our services should help all clients develop a positive self-image, independence and self-control in a fun, engaging environment;
- Each client and family is unique and services should be sensitive and respectful of the family's culture, values, beliefs, education, and life experiences;
- Open, honest communication leads to better outcomes; and
- We should serve as a resource to families and other professionals serving individuals with special needs.

CORE VALUES OF ESNT CHILD DEVELOPMENT CENTER

Easter Seals North Texas Child Development Center is the a full replication of the Walden Early Childhood Center at Emory University in Atlanta which is the only nationally recognized Incidental Teaching and National Association for the Education of Young Children accredited model for ABA therapy. We provide a fully inclusive preschool program, supervised by Board Certified Behavior Analysts (BCBA), thus giving the ability to work on language and socialization throughout the child's day. These two skill areas are the most important to be targeting in early learning. Our goal at the Child Development Center is to impact preschool-aged children to produce significant and lasting behavior change to better the lives of those diagnosed with autism spectrum disorder and other developmental disabilities alongside their typically developing peers. Young children with an autism spectrum disorder have deficits in both their ability to communicate and their ability to learn from others in the natural environment. With the acquisition of these skills, they can begin to acquire new skills with much less systematic intervention and in a more natural environment.

It is also nationally recommended best practice that parents and all other caregivers be involved in their child's intervention goals and procedures, and implementation is carried over into their other daily settings, such as home and other parts of their community. Parents and the treatment staff may also choose to have an additional set of goals that are targeted specifically in these other environments. Combining the treatment provided onsite with the support of the professionals guiding the parents' part of the intervention, the children with autism spectrum disorders and other developmental disabilities should receive an adequate amount of well-balanced treatment to see progress in the targeted goals.

SERVICES OFFERED

- ABA Therapy
 - Key Features of Applied Behavior Analysis:
 - The child's behavior is assessed through observations that focus on exactly what the child does, when he or she does it, at what rate, and what happens before (antecedents) and what happens after (consequences). Strengths and weaknesses are specified in this way;

- Skills that the child does not demonstrate are broken down into small steps;
- Instruction emphasizes teaching a child how to learn to listen, to watch, to imitate:
- As the child progresses, guidance is systematically reduced so that the child is responding independently; prompts are faded out;
- As steps are acquired, the child is taught to combine them in more complex ways and to practice them in more situations;
- Problem behavior is not reinforced. The child is not allowed to escape from learning and is redirected to engage in appropriate behavior;
- The child's responses during every lesson are recorded. These data are used to determine if he or she is progressing at an acceptable rate. If not, that part of the program is changed;
- The teacher's and parent's behavior is also observed continuously at first and then less frequently and as needed to ensure that procedures are being applied correctly and safely; and
- The information adds to our knowledge about the effectiveness of procedures and how to avoid and overcome problems that may arise in practice.
- Styles of ABA Teaching:
 - Incidental teaching
 - Incidental teaching is a systematic protocol of instruction that is delivered in the context of the natural stimulus conditions of everyday environments (Hart & Risley, 1968, 1974, 1975). Despite the title for this form of teaching, incidental teaching requires an extreme amount of skill and planning for it to be effective. The environment must be arranged to attract children to desired toys and activities. The same principles of learning underlie both incidental teaching and direct instruction formats (as in the Lovaas, 1987 study). Research has also shown that children are better able to transfer their language to new settings and people following instruction with incidental teaching (McGee, Krantz, & McClannahan, 1983).
 - Direct Instruction Teaching
 - Many opportunities or trials are given repeatedly in structured teaching situations to teach each step:
 - Therapist gives a clear instruction; provides assistance in following the instruction (for example "prompt" by demonstration of physical guidance), and uses materials that are at the person's learning level;
 - Client emits a correct response; and
 - Therapist delivers a positively reinforcing event (which is basically a consequence for that particular behavior that will strengthen that behavior and increase the likelihood of it occurring more frequently).
 - Both Incidental Teaching and Direct Instruction are intensive, are delivered in the natural environment, and require highly skilled staff and a low teacher to child ratio. Direct instruction can also be performed in an environment with minimal distractions typically to aid in the acquisition of early learning skills. Both forms of teaching are geared toward generalization of skills and intensity of repetition to ensure adequate skill acquisition.

Parent Training

 Parent education is a large component of any child's program and is essential for the ongoing success of your child. By providing parents of young children with autism spectrum disorder the specialized competence in how to promote their child's learning, more intervention time becomes available to the child and more normalized family functioning becomes a long term reality (McGee, Jacobs, & Regnier, 1993). Parents are expected to learn the same teaching techniques and provide an additional 12 hours minimum per week of intervention. These additional hours are essential for a child's daily routine; such as dressing, eating, bath time, and playtime. In order to accomplish this, parents are required to complete and initial 15-20 hour parent training course. Parents will receive education on how to implement the principles of ABA in everyday activities with their child. Both parents are encouraged to attend the required monthly meetings with those individuals involved in your child's programming. This ensures you are most current on your child's program and teachings and will provide ongoing parent training.

Speech-Language Therapy

- Speech-Language Therapy provides testing and individualized therapy in areas related to communication. This includes:
 - Speech- how the client produces sounds and words, including pronunciation, fluency, etc.:
 - Receptive Language Skills- how well the client understands what is said to him or her:
 - Expressive Language Skills how the client expresses him/herself with words or gestures;
 - Pragmatic Language Skills the social use of language;
 - Oral Facilitation oral motor and feeding;
 - Auditory training-listening skills; and
 - Alternative communication-non-verbal ways of communicating, such as basic signlanguage, computers, communication boards, picture symbols, etc.

Occupational Therapy

- Occupational Therapy provides testing and individualized therapy in areas related to the development of functional independence in;
 - Daily living skills such as dressing, grooming, feeding, etc.:
 - Use of hands, arms and upper body for tasks such as grasping, writing, eye-hand coordination and use of one or both hands to complete a task; and
 - Sensory or motor skills, which are often delayed in clients with coordination problems, learning disabilities, attention deficits, handwriting disorders and sensory integration deficits.

Participation in ARD meetings

- Current clients
 - ESNT staff will make a reasonable attempt to attend Admission, Review, and Dismissal (ARD) meetings for current clients. It is preferred that staff members receive at least two-weeks-notice prior to the ARD; however, it is recognized that it may not be possible to provide that amount of notice in some cases. ESNT staff attendance at an ARD meeting may not be possible for multiple reasons, such as scheduling conflicts, lack of preparation time, etc. Please be prepared to provide ESNT staff with a copy of the child's IEP (individualized education plan) and BIP (behavior intervention plan) prior to the ARD meeting to ensure that the staff member can be as prepared as possible to contribute to the meeting.

Former clients

■ ESNT staff will attend one post-discharge ARD meeting per client free of charge in cases in which the client has been discharged within 3 months of the ARD date. If the request for attendance at an ARD is more than 3 months post-discharge, it is at the discretion of ESNT staff as to the appropriateness of attendance. If there is a request for attendance at additional ARD meetings, the fees will be as follows:

- Initial Charge (includes 2 hours for preparation and 1½ hours for the ARD meeting): \$200
- Additional time for preparation or meeting: \$50/hour
- Mileage: \$0.45/mile for travel (subject to change to the current agency rate for reimbursement)
- These costs are for one ESNT representative to attend; if additional staff is requested, ESNT staff will review those on a case-by-case basis.
- Kindergarten preparation
 - ESNT staff will provide children with opportunities to increase academic skills in order to prepare them for a successful kindergarten year.

LICENSING AND ACCREDITATION

Easter Seals North Texas, Child Development Center is licensed through the state of Texas. A copy of the current licensing regulations, most recent licensing inspection report, and contact information for the nearest licensing office is available for examination outside the Director's office. Licensing regulations may also be obtained through the local office of the Department of Family and Protective Services. Parents have the option and right to review the minimum standards provided by the state under which the school must operate and comply. In addition, ESNT Child Development Center is reviewed regularly (usually once a year) by the state's childcare licensing office and this report is available for parents' review. If you wish to view these documents, please make a request to the center's Director for that information.

Contacting the local licensing office, child abuse hotline, and DFPS website: Instructions for contacting the local licensing office and child abuse hotline are posted by every phone inside the building. Our local licensing office is in Tarrant County. You can find them on the web at www.dfps.state.tx.us

STAFFING

All members of the team have access to the clients' records. Members of the ESNT Child Development Center team include:

- Director of the Child Development Center
- Board Certified Behavior Analysts, Board Certified Assistant Behavior Analysts, and Registered Behavior Technicians
 - (Board Certified Behavior Analysts, Board Certified Assistant Behavior Analysts, and Registered Behavior Technicians at the Child Development Center meet professional and ethical requirements set by the BACB. For a list of these guidelines visit www.bacb.com)
- Speech-Language Pathologists
 - All speech-language pathologists and audiologists hold a license in the state of Texas and are certified through the American Speech-Language-Hearing Association.
- Occupational Therapy
 - All Occupational Therapists hold a license in the State of Texas.
- Senior Program Coordinators
- Senior Program Managers
- Program Coordinators
- Program Managers
- Behavior Technicians

Additionally, if the client is enrolled in multiple programs at Easter Seals North Texas, client information and progress may be shared with other programs within the agency in order to coordinate care.

Other ESNT staff members, including but not limited to the Vice President of Therapeutic and Autism Services and Vice President of Compliance, additionally review client information and have access to the clients' records as necessary.

On a monthly basis, the staff of the Therapeutic and Autism Services team meets to review and discuss client cases within individual programs. The purpose of these meetings is to allow an opportunity for all of the service providers within these programs to collaborate on specific cases and seek feedback from other professionals that have expertise in other service areas. These meetings include the VP of Therapeutic and Autism Services, the Director of the Autism Treatment Program, Director of the Child Development Center, the Director of Outreach and Training, the Director of Outpatient Rehabilitation, BCBAs from the Autism Treatment Program, BCBAs and the BCaBA from the Child Development Center, Occupational Therapists, Speech-Language Pathologists, and Physical Therapists. Clients receiving services through the Child Development Center may be discussed at this meeting.

For questions about:

- The client's treatment plan (e.g. frequency of treatment, progress, goals, or the need for additional evaluations at ESNT), please talk to your child's treating BCBA;
- The client's classroom schedule, please talk to the child's Program Coordinator;
- Financial arrangements, please talk to our financial team; and
- The program structure, exceptions to policies outlined in this manual, conflicts you are unable to resolve with ESNT staff members, please talk to the Director of the Child Development Center Program.

HOURS OF OPPERATION

Easter Seals North Texas, Child Development Center is a 12-month program, open Monday through Friday from 9:00 AM to 4:00 PM. The Child Development Center is not open weekends and will be closed on New Year's Eve, New Year's Day, Martin Luther King Day, President's Day, Good Friday, Memorial Day, Independence Day, Labor Day, Columbus Day, Thanksgiving (Thursday and Friday), Christmas Eve and Christmas Day.

Staff Development:

The center will also be closed for approximately 8 additional staff training days each year. Parents will receive notice of the dates and a school calendar at the beginning of each calendar year.

Extended hours ("stay and play"):

Child care is provided for those families needing extended hours. Stay and Play hours are from 7:30-9:00 am and 4:00-5:30 pm, with additional fees. Enrollment is required for Stay and Play. Parents may make changes to enrollment with 30 days' notice. Drop in is available if space is available and parents have secured space in advance.

ADMISSION CRITERIA

- Diagnosis:
 - Any Developmental Disability or Autism Spectrum Disorder;
 - o If a child does not yet have a formal ASD diagnosis but the parent(s) and/or care provider(s) have a suspicion that the child has an autism spectrum disorder, the child could still be admitted to the program. The child will receive an autism spectrum disorder screening as part of the initial evaluation. If the screening tool produces a positive indication of ASD, ESNT staff will refer the family to both the local education agency and a local diagnostic clinic where a definitive diagnosis can be ruled out or confirmed.
- Medical Status:

- Information about medical status will be obtained from the client and/or physician;
- Clients must be medically stable to be able to attend and participate in a safe and effective manner;
- Information about past and current prescription medication/ supplements, including frequency and dosage must be provided and client/ family must inform Case Manager of any changes or updates in medication;
- Information about past and current over the counter medication/ supplements, including frequency and dosage must be provided and client/ family must inform Case Manager of any changes or updates in medication;
- If there are concerns about the client's medical stability for safe and effective therapy, a letter from the client's physician will be required stating that the client is able to attend and fully participate in therapy; and
- Proof of current immunization is required.
- Assessments at Easter Seals North Texas:
 - Assessments are required at regular intervals for all therapy provided at Easter Seals North Texas in order to determine the nature, frequency, intensity, and duration of therapy, to establish functional goals, and to begin to establish discharge criteria and planning; and
 - Outside evaluations from referring sources, schools, etc., are welcome and helpful. They will be reviewed and considered along with the internal assessments.
- Parent/Family Involvement:
 - Clients admitted to the Child Development Center must have active involvement by their parents, families, or caregivers in order to maximize the benefits of the program, to prepare for discharge, and to carry out any home program given during and/or after the active phase of therapy;
 - Families may be required to observe/participate in therapy in order to establish home programming; and
 - Families may need to make arrangements for care of siblings or other dependents while at Easter Seals North Texas with the client, as drop-in child care services are not available, and young children may interfere with or prevent the parent or caregiver from observing/participating adequately in the client's therapy.
- Financial Arrangements:
 - Clients will receive contracts for appropriate arrangements for payment before being admitted to therapy.
- Documentation:
 - o Prior to starting treatment, clients must provide the following:
 - Proof of current immunizations, or affidavit of the reason why these cannot be given;
 - Consent to treat and release information:
 - Information about the client's current medical status, including the name of the client's primary care physician:
 - Authorization for medical treatment; and
 - Arrangements for payment of services including any third-party reimbursement and any self-pay arrangements.

ENROLLMENT IN THE ABA PROGRAM

Inquiries and referrals are accepted over the phone at the Easter Seals North Texas Child Development Center. Parents are welcome to schedule an appointment with the Director to visit the program. The initial enrollment form needs to be returned to apply for placement. After parents receive notification that placement has been confirmed, additional completed forms must be returned within 14 days with an \$85 registration fee to hold the child's space. Enrollment forms include:

- Enrollment form;
- Admissions form, including emergency contacts and consent to treat;

- Marketing release;
- Child health appraisal (to include allergy information, immunization records, and physician's statement of health);
- · Confidentiality statement; and
- Acknowledgement of receipt of policies.

NO child will be admitted to the program without these forms on file. All information must be current and recorded on the appropriate form.

WAITING LIST

Children are enrolled on a first come, first available space basis, as spaces open in the program. To help plan for enrollment, we aim to provide parents with approximately two-weeks-notice when a space becomes available. Placement openings can be held for no longer than 14 days after notification of openings. A parent wishing to guarantee placement after the 14-day notice will be required to cover the cost of tuition until enrollment is finalized.

PROGRAM AGE REQUIREMENTS AND TRANSITIONS

ESNT Child Development Center provides services to children 18 months to 6 years of age. Children are placed in groups according to age/developmental level and will be moved to the next age group at the beginning of the program year. Any exceptions to this policy will require the approval of the Program Director.

A client's case manager will notify the family 6 months prior to the client's 7th birthday to remind them that they must discharge out of the program by the day before the client's 7th birthday. Case managers will provide recommendations as to the client's next placement and aide parents in the transition process.

TRANSITION/DISCHARGE CRITERIA AND PLANNING

Preparations for discharge occur throughout therapy as the goal of starting therapy is to help the client become more functional in his or her natural environment and to help the caregiver care for the client at home and in the community. Throughout the client's time in the program, progress will be assessed through analysis of the data collected by the client's treatment team. The case manager will document and discuss these assessments monthly through the monthly progress reports. These assessments of progress will be used to determine progress toward functional goals and to adjust the therapy program as needed. The client will be discharged when:

- He/she ages out of the program;
- He/she achieves goals set and there are no new goals to set;
- He/she functions in the normal range for age with no deficits to target;
- He/she has attendance that is not in compliance with Easter Seals North Texas attendance policy:
- He/she has a medical condition that is unstable, or has changed such that therapy is not safe or appropriate;
- He/she is transferred to another program or service provider;
- He/she requests discharge for any reason; and
- He/she does not comply with financial agreements made with Easter Seals North Texas and declines to work with Easter Seals North Texas in good faith to resolve the problem.

With the appropriate notice of withdrawal, home programming, designed over the course of the therapy program, will be discussed and taught to the client/family. The home program will be designed to help the client incorporate what has been learned during therapy, to maintain gains and functional skills

achieved during therapy, to prevent loss of skills, and to help the family care for the client at home and in the natural environment. Appropriate referrals to other programs and services will be made at the time of discharge, if needed.

Clients are usually discharged voluntarily, that is, with their understanding and agreement with the reason for discharge and the plan. However, there may be situations in which a client is discharged involuntarily if the treatment team, with due diligence, determines that the clients skill level is within developmentally appropriate limits, progress has plateaued, continued therapy is unwarranted or unsafe, or if the client fails to comply with the terms of the therapy agreement.

ATTENDANCE AT POST-DISCHARGE ADMISSION, REVIEW, AND DISMISSAL (ARD) MEETINGS ESNT staff will attend one post-discharge ARD meeting per client free of charge in cases in which the client has been discharged within 3 months of the ARD date. The ARD meeting must be scheduled prior to discharge or additional charges may apply. If the request for attendance at an ARD is more than 3 months post-discharge, it is at the discretion of ESNT staff as to the appropriateness of attendance. If there is a request for attendance at additional ARD meetings, the fees will be as follows:

- Initial Charge (includes 2 hours for preparation and 1 ½ hours for the ARD meeting): \$200;
- Additional time for preparation or meeting: \$50/hour; and
- Mileage: \$0.45/mile for travel (subject to change to the current agency rate for reimbursement).

 The Mileage: \$0.45/mile for travel (subject to change to the current agency rate for reimbursement).

These costs are for one ESNT representative to attend; if additional staff is requested, ESNT staff will review those on a case-by-case basis.

NOTICE OF WITHDRAWAL

Easter Seals North Texas, Child Development Center prefers written notice of intent to withdraw from the program 30 days before the client's last day of attendance. This allows staff members to complete final assessments, compile data, prepare final documents and develop recommendations to aide in the client's transition to the next placement. Without written, 30-days-notice, these documents cannot be prepared accurately and therefore, ESNT may be unable to provide them to parents.

FEES FOR SERVICES

Once a family has been accepted into the Child Development Center, our Billing Specialist will contact them to obtain all necessary information. The Billing Specialist will discuss the information and ensure that the family understands its financial obligation for enrollment in the program.

Families participating in the program will be billed monthly for services received. Payment is expected according to the agreement made in the Financial Contract. If a family is not able to meet this contract obligation they need to contact the ESNT finance team immediately to discuss options.

Includes: Ongoing Parent Training & meetings

Daily program supervision by Board Certified Behavior Analysts Up to 30 hours per week of ABA, Monday – Friday, 9:00-4:00 12 month Inclusive preschool enrollment (with scheduled holiday/

in-service breaks)

Extended hours ("stay and play"): \$160/ month 4-5 days/week (Enrollment required) \$120/ month 2-3 days/week

\$10/ day (drop-in rate, if space is available)

ADDITIONAL BILLABLE FEES

Diaper Fees:

In the event that a child does not have any diapers at school, staff will use ESNT Child Development Center diapers. Parents will be billed \$1 for each diaper used. Parents are encouraged to leave a package of diapers at the school at all times to avoid incurring this cost. If a child is potty trained but still requires a diaper for naptime or for car rides home, it is the parents' responsibility to provide those diapers.

Forgotten Lunch Fees:

In the event that a child does not have a lunch, staff will provide a pre-packaged lunch for the child. Parents will be billed \$5 for each lunch used.

Client/Family Education:

Easter Seals provides client/family education, resources, and referrals as part of the client's therapy program, and on request for an additional fee. Client/Family education classes are available as appropriate, and are coordinated by the BCBA, or referrals for similar programs in the area are made as needed.

COMMUNICATION BETWEEN HOME AND SCHOOL

ESNT strives to serve each client effectively and efficiently. Important information for all clients will be posted on the ESNT bulletin boards located in the reception area. It is the responsibility of the client/family to check this board for information at each therapy session.

ESNT Child Development Center will provide you with a daily report giving a brief recap of the client's day. Parents and Coaches can share information about the child, and flyers or notices can be tucked inside backpacks. Program Coordinators post a Weekly Planning form so that parents are aware of weekly educational themes and specific daily activities. Notices for field trips, parent workshops, or in-service trainings are included in the back packs.

Parent meetings will be scheduled once a month to discuss the child's progress on goals.

ESNT Child Development Center lead staff (Program Director, Program Coordinators, Program Managers, BCBA's and Training Coordinator) is available to discuss any concerns with you. Classroom staff cannot receive phone calls during classroom hours. Emergency calls may be taken by the Director.

The Director and Program Coordinators can be reached at the following numbers:

Director: 972-939-3930

Armadillo's Dugout Coordinator: 972-939-3934

Turtle Cove Coordinator: 972-939-3933 Doggies Den Coordinator: 972-939-3942

Protocol to review questions or concerns with center Director

Jessie Whitesides is the certified Child Care Director for ESNT Child Development Center and may be reached during school hours via phone at 972-939-3930, or via email at jwhitesides@ntx.easterseals.com. Communication and observations of any kind are strongly encouraged

and welcomed.

Encrypted email

In order to effectively communicate with you, while protecting your information at the same time, we will send all email correspondence that contains any protected health information to you via encrypted email.

When you open your email, the first thing you will notice is that the title of the email starts with "Secure". (For some people, this will go to the "trash" the first time you receive an email from us). After you open the email, you will see:

New ZixCorp secure email message from Easter Seals North Texas

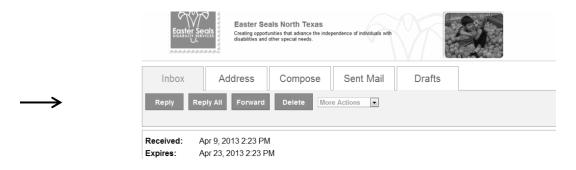
Open Message

You should click the box that says "Open Message". This will take you to a new webpage. The first time you receive an encrypted email from us you will need to register to use the system. After you register the first time, you will be able to just type in your email address and password in order to log in.

Easter Seals	Easter Seals North Texas Creating opportunities that advance the independence of ind disabilities and other special needs.	industs with	
Welcome to the I	Email Address: Password: Remember Me	Secure Message Center	Sign In
	Forgot your password?	New to secure email? Register	Need more assistance?

To register, all you need is your email address and a password. It is important you remember your password so that in the future you are able to use it to receive emails from us.

Once you log in you can read your email. If you reply through this system (by clicking reply at this website) your email will be encrypted and sent back to us. You can also compose email through this system, and send us copies of forms or reports securely.



FAMILY PARTICIPATION AND OBSERVATION

Parents are encouraged and welcome to participate in their child's program activities. Children enjoy sharing with their parents the activities of the day. Parents are viewed as active participants in their child's program at the center and are encouraged to visit often.

Due to confidentiality we ask for appointments to visit the classrooms. All visitors are required to sign in prior to visiting. In rare instances, children find it difficult to transition from parent interaction back into the classroom routine. In these cases, parents are requested to establish a visitation schedule that meets their daily needs as well as their child's tolerance for parent visitation.

Video equipment is also available to view all classrooms and is available to families at any time. Using the Video Monitoring equipment is an excellent way to observe skills used in the classrooms by our trained staff, but also are an environmental control for checks and balances on the day-to-day classroom interactions. The monitor is located outside the Armadillo's Dugout Classroom.

SUPPORT SERVICES

- Client/Family Education: Easter Seals North Texas provides client/family education, resources, and referrals as part of the client's therapy program, and on request.
- Helping on Horseback: Horseback riding is available at times for ESNT clients through a
 partnership with Helping on Horseback, Inc.. Horseback riding takes place at a local equestrian
 facility. Horseback riding is an opportunity for the clients to enjoy the experience of riding; it is not
 intended to be therapeutic riding. When available, information about horseback riding will be
 posted on the bulletin board in the lobby.
- ESNT Respite nights: ESNT periodically hosts respite nights throughout the year at one of its four service locations. This typically takes place on a weekend and is available at no cost to clients and their siblings on a first come, first served basis. When available, information about respite will be posted on the bulletin board in the lobby.

ARRIVAL AND DEPARTURE PROCEDURES

Safety Concerns: To ensure your child's safety please drive slowly and respect the signs directing traffic around the building. If the child is walking, hold his/her hand at all times. Also, please note that the entrance to the building is always locked with a key code. Families and staff are given the code for entry and departure, all other visitors to the building must ring the bell. This is a security measure taken for your children and our staff.

Arrival:

Children are expected to arrive by 9:00 am, unless special arrangements have been made in advance. Classroom activities begin at 9:00 am. To ensure a positive start to your child's day, students and parents are requested not to arrive later than 9:00 am.

Children arriving between 7:30 am and 9:00 am and who are enrolled in stay and play, will be placed in the stay and play childcare area. Parents wishing to utilize stay and play must enroll their child for that service. Drop-in stay and play will only be available if space allows, at a rate of \$10 per day. Parents must secure drop-in spots **before** leaving children in the stay and play area.

Signing in and out:

All parents are <u>required</u> to sign their children in and out each day. Parents sign their children in and out at the front desk. Parents complete the information portion of the Daily Report and take it with them to the child's class.

Departure:

Classroom activities conclude at 4:00 pm. Children must be picked up by parents or individuals designated by the parents at the appropriate dismissal times each day. Upon arrival, parents should remain in the lobby area. The Administrative Assistant will call for the child and their belongings to be brought to the front door. On most occasions, lead staff will bring the child to the front door and will answer any questions/concerns regarding your child's day. Any further questions may be directed to the Program Coordinator. After 4:15, parents may come into the stay and play area to pick up their child.

Children remaining after 4:00 pm, who are enrolled in stay and play, will be taken to the stay and play childcare area. Drop-in stay and play will only be available if space allows, at a rate of \$10 per day. Parents must secure drop-in spots **before** children can be taken to the stay and play area. If space is not available, parents will be required to pick up their child at 4:00 pm.

Persons Authorized to Pick Up Child:

No child will be released to any adult not listed as authorized to pick up the child on the child's application form, unless a written note, signed by the parent is received by the Director prior to the child's departure. Anyone newly authorized by the parent to pick up the child will be subject to photo ID check.

ATTENDANCE POLICY AND PROCEDURE

Regular Attendance:

It is essential that your child attend the Child Development Center on a regular basis to ensure their optimal success. Attendance must be maintained at a level of 85% of scheduled sessions each month, and over the duration of enrollment. Chronic absenteeism and/or tardiness may be grounds for dismissal from the program or the decision not to permit enrollment for the next year.

Planned Absences:

Planned absences include doctor, dental, or therapy appointments which cannot be rescheduled after the Child Development Center's hours, death in the family, vacations, hospitalizations or any other unusual circumstances acceptable to the Program Director. Parents may request to have enrollment suspended for a period of one week, twice a year for planned absences without loss of enrollment in the program. When a parent anticipates an absence, they should notify the Director at least two weeks in advance. The client's enrollment will be suspended for up to one week at a time and his/her spot in the program will be held. Enrollment cannot be suspended for more than one week at a time, except in rare, unusual extenuating circumstances. If this occurs the client may be withdrawn from the program and may reapply to Easter Seals North Texas when their situation has changed.

Tardiness/Late Arrivals:

Clients who arrive after 9:00am or leave before 4:00pm often experience difficulty joining a session in progress and/or disrupt the program for the other clients and staff members. Therefore, it is essential that clients and parents arrive at the center in a timely manner, by 9:00 am each day, and be picked up as close to 4:00 pm as possible.

Noncompliance with Attendance Policy:

Clients who continue to fail to attend regularly may have the number of days of attendance reduced, or may be withdrawn from the program. Clients withdrawn from the program due to attendance issues will be offered names of other service providers who may better meet their needs.

The Procedure for Managing Attendance Problems:

ESNT Child Development Center must be notified of all absences for the security of the children as well as for programming purposes. **Refunds will not be made for absences** or emergency closing of the Child Development Center.

Noncompliance: If a client misses 2 (or more) scheduled days in a row, or if his/her monthly attendance falls below 85%, the Director will call the parents and remind them of the attendance policy. If the parents cannot be reached by phone, a letter will be sent to remind them of the attendance policy and to request a conference to confirm the parents' intent to participate in the program.

If the parents respond and the client resumes regular attendance, enrollment will continue as planned.

No contact:

If the Parent fails to respond to the attempted contacts from the Director within 72 hours, the client will be withdrawn from the program. A letter will be sent to the parents explaining the reason for the withdrawal and a copy will be kept in the client's records.

Recurrent Noncompliance:

If the parents respond to the contact, but still cannot maintain 85% attendance on a recurrent basis, the client may be withdrawn from the program. However, if the parents wish to try and continue the program and the Director thinks it would be beneficial, the client's schedule may be reduced to a level more likely to be maintained. If attendance is maintained for 2 months, the number of hours of attendance may then be increased as space permits and if ordered appropriate.

Re-admission:

When the client is withdrawn from the Child Development Center for attendance issues, the client may reapply to the VP of Therapeutic and Autism Services Office for re-admission to the Child Development Center at a later date when circumstances permit more regular attendance. The client will have to meet admission criteria at that time.

LATE PICK UP OF A CLIENT

If you are going to be late, please call and let the staff know. There is no childcare staff member scheduled beyond 5:30 pm. Should there be a circumstance where a child is left at ESNT Child Development Center after 5:30, there will be a \$25 fee assessed for each 15 minutes after 5:30 pm with no exceptions.

INFORMATION ON HEALTH CHECKS

Changes in Child Care Standards require Child Care Centers to explain to families that we are required to complete Health Checks on our children daily, what Health Checks are and who completes them. Health Checks have been and will be completed by your child's classroom staff daily.

Officially Health Checks are defined as:

A visual or physical assessment of the client to identify potential concerns about a client's health, including signs or symptoms of illness and injury, in response to changes in the child's behavior since the last date of attendance.

What this means at ESNT Child Development Center is that daily, usually as one of the first activities of the program day, the classroom staff will complete health checks on all the kids. ESNT Child Development Center staff will review the top portion of the Daily Report Forms that parents complete upon arrival in the morning. They will be looking for your notes about changes in your child's sleeping, eating or drinking patterns, any concerns you identify about your child, any cuts/bruises or injuries received since staff last saw them and any follow-up care needed. We are also looking to make sure all the children are healthy to start their school activities.

Health Checks will involve ESNT Child Development Center staff gently feeling the client's cheek, forehead or neck, checking to see if the client is unusually warm, cold or clammy; visually observing the client's arms, legs, chest and back, checking for changes in skin color, bruising, swelling, cuts, sores or rashes; and observed for severe coughing, discharge from eyes or nose and for any signs of breathing difficulty.

ESNT Child Development Center staff is trained to work with the children explaining what they are doing so they don't alarm the children and reassure them they are making sure the child is healthy for the day. Staff often sing and talk with children about fun topics during the check to help reduce any feelings of discomfort. Should any of our children indicate verbally or by their actions that they are uncomfortable, ESNT Child Development Center staff will discontinue the health check at once, will work with the Director and the parents will be informed.

Health Checks are logged in the classroom "Health Check Log Book" and parents will be notified by phone if any findings cause concern or if the child needs to go home. Please refer to the Health

Requirements section of the handbook for further information on when children should not attend or when they will be sent home from care for health reasons.

If you have any questions or concerns about this process please talk to our Child Development Center Director.

GUIDELINES TO ATTENDANCE/ HEALTH POLICIES

Illness:

The goal of the illness policy is to enable all the children enrolled in ESNT Child Development Center program to participate as healthy individuals. This ensures the health and safety of all children and adults. To that end, any child exhibiting the following symptoms during a 24 hour period **prior** to scheduled attendance at the Child Development Center should be kept home until all symptoms have been relieved for 24 hours. A note from the child's doctor may be required when the child is absent 3 or more days. A doctor's release is required to return following a communicable disease.

Exclusion is necessary when: a) the illness prevents the child from participating comfortably in program activities; b) the illness results in a greater care need than the child care staff can provide without compromising the health and safety of the other children; or c) the child has any of the following conditions:

- Fever of 100 degrees F or higher (99 if taken underarm) within the last 24 hours.
 - a. The client should be fever free without the use of medication.
- Runny nose that is yellow or green in color and not allergy related.
- Cough with yellow-green phlegm.
- Cold symptoms (e.g. runny nose, cough, persistent congestion): the child will be excluded for a
 runny nose and/or cough that are not discounted as allergy related and the discharge or phlegm
 is yellow or green in color indicating an infection. The child will be excluded until symptom free.
 In some cases, the child must have clearance from his/her health care provider before returning
 to the center.
- Rashes on the body, except diaper rash or poison ivy. The child will be excluded until a health care provider determines that the symptoms do not indicate a communicable disease.
- **Diarrhea** (loose, watery, foul smelling bowel movements): the child will be excluded after two (2) DIARRHEA STOOLS FOR A MINIMUM OF 24 HOURS AND UNTIL DIARHEA FREE. During peak season of outbreaks of diarrhea you may be requested to have a stool culture. This policy is based on the recommendations from the Commissioner for Public Health Disease Control.
- Vomiting: the child will be excluded after two or more episodes of vomiting. He/she may return
 after the 24 hour vomiting period is resolved, or in some cases when a health care provider
 determines the illness to be non-communicable and the child is not in danger of dehydration.
- **Conjunctivitis** (pink eye): the child will be excluded from school until a health care provider has seen him/her and treatment has been initiated for 24 hours. The child will need to return with a doctor's clearance including diagnosis and treatment prescribed.
- Impetigo: the child will be excluded from school until a health care provider has seen him/her and treatment has been initiated for 24 hours. The child will need to return with a doctor's clearance including diagnosis and treatment prescribed.
- Strep Throat: the child will be excluded from the facility until 48 hours after treatment has started. He/she may return after treatment has been initiated and he/she has been fever free for at least 24 hours.

- Lice: the child will be excluded from the facility. He/she may return 24 hours after treatment has been initiated. An examination will be completed to ensure he/she is nit free.
- Chicken Pox: the child will be excluded from the facility. He/she may return after sores have dried up and crusted over. The child will need doctor's clearance.
- Ringworm: the child can be included with ringworm; however, the child will be excluded for ringworm of the scalp and may return only after being seen by a health care provider with treatment initiated. He/she will need to return with a doctor's clearance indicating diagnosis and treatment prescribed. Ringworm on the body will not lead to exclusion provided the ringworm remains covered at all times while at school and an over the counter anti-fungal has been initiated. If the condition doesn't improve, you may be required to have the child seen by his health care provider and return with the doctor's clearance.

If a child becomes ill with any of the above symptoms while attending the ESNT Child Development Center program, staff will notify the child's parent(s). The child will be removed from the classroom and cared for in the office until the parent arrives. If a parent cannot be reached, staff will contact one of the emergency contacts provided by parents at enrollment. It is the parent's responsibility to provide information that allows ESNT Child Development Center staff members to get in touch with them during the time their child is at school.

Parents are expected to pick up their child within one hour of being notified, or to make arrangements for an alternate person listed on the emergency form to pick up the child. It is the sole responsibility of the parent to have their child picked up within 1 hour of being notified. Should a situation arise whereby a parent cannot pick up their child within one hour, they must notify the Director, inform her/him of the delay, and make other arrangements. This policy will be strictly enforced. Should there be a circumstance where a child is not picked up within an hour of a Child Development Center staff members' attempts to contact the parent or their designated emergency contact, there will be a \$25 fee assessed for each 15 minutes after the hour with no exceptions. Failure to comply with this policy may result in possible discharge.

Please let staff know if your child has been exposed to or is diagnosed with chicken pox, rubella (German measles), roseola, fifth disease, lice, or any other common childhood illnesses. It is important that other families receive notification of their child's possible exposure to these illnesses. In case of contagious illnesses, parents are required to keep the child at home until you obtain a written statement from the child's doctor that the child is free of contagious illness and may return to school. When considered necessary, The ESNT Child Development Center may require additional medical information, examination and/or medical tests prior to considering the child's continued participation in school programs.

Families and staff members will be notified by the Child Development Center Director whenever a client or staff member becomes ill with one of the above listed illnesses. Letters will be sent home via client's backpacks or via email. For reasons of confidentiality and to protect our client's personal health information, clients' names and the class they attend will not be released.

INCLEMENT WEATHER

Easter Seals North Texas management may determine it is proper to consider a delayed opening, early dismissal or school closing for the day on unique occasions, such as during inclement weather. In such an event, the school will follow the decision of major area universities and/or local school districts. The Child Development Center follows Grapevine-Colleyville ISD for weather-related closings, delayed openings, or early dismissals. In the event of a delayed start or closing, a message will be left on our main number (817-424-9797). Although school may not be closed during some hazardous driving

conditions, it is understood that some children will be unable to attend due to travel distance involved. In this event, please notify the Director by phone.

If an unsafe weather situation, such as a tornado, develops during school hours, children will be moved into the two student bathrooms and hallway by the kitchen until the storm is over. Teachers will stay with the students and play quiet games to help maintain a calm atmosphere.

EVACUATION AND EMERGENCY PROCEDURES

Medical Emergencies:

If a child should become seriously ill or sustain an injury requiring immediate treatment, supervising staff may make the decision to call the Emergency Medical Services. Every effort will be made to establish contact with parents prior to making this decision.

For less serious injuries, parents may be notified by phone call. An incident report will be sent home at the end of the day detailing what happened and what steps were taken by staff members. Although every effort will be made to keep children safe, most children sustain a series of bumps, bruises, and scrapes during the early years.

Emergency Evacuation:

The decision to evacuate may be made by the Director, Easter Seals North Texas management, or government officials. In such a case, staff and children will evacuate to the playground, near the fence on Pine Street. Children with mobility issues will be carried by staff members and all others will walk as a group with staff.

Other Emergencies:

There may be rare occasions where ESNT Child Development Center may need to close due to emergency circumstances beyond our control, such as extended power loss. If the facility is unable to open due to such an emergency, a staff member will attempt to call your home as early as possible. If it becomes necessary to close early due to such an emergency, you will be asked to pick up your child early or make arrangements for persons listed on the emergency form to pick up your child. The Director will determine the length of time children may remain at the center without power. If the temperature in the building becomes uncomfortable or unhealthy, or if the drinking water supply is contaminated, or if the bathrooms become inoperable, parents will be called to pick up their children. Since these closings are due to circumstances out of our control, we are not able to offer any refunds for missed days.

Emergency Drills:

Fire Drills are held once every month. Children are evacuated to the playground fence by Pine Street and wait for the Director to take role and give the all clear before returning to the building.

Severe weather drills are held every three months. Children are taken to the two bathrooms and the hallway by the kitchen, and are seated on the floor. Staff will play quiet games until the Director takes attendance and gives the all clear to return to class.

EMERGENCY CONTACT

Parents are required to keep the Director informed of any changes in emergency contact individuals and phone numbers as they occur. The emergency contact person must be willing and able to pick up the children in an emergency. The parent and emergency contact must be reachable by phone during the entire time the child is present at the Child Development Center.

CONFIDENTIALITY

All information received and/or obtained through Easter Seals North Texas Child Development Center is confidential. No one is permitted to share any information obtained at the Child Development Center with any person(s) outside of the Child Development Center staff. Anyone who has knowledge of any

person(s) who has violated this confidentiality agreement is required to report that to the Director immediately. Any willful misrepresentation or failure to comply and follow any policy and procedures at any time is cause for denial or dismissal of service.

Your child's information is kept in folders in a monitored and locked area for confidentiality. ESNT will only release information from the record with a signed Release of Information or with a valid subpoena. And internally, only staff with a "need-to-know" have access to the records.

COLLABORATION

Easter Seals North Texas facilitates and encourages communication and collaboration with other service providers and individuals in the client's life throughout enrollment in the program. This is necessary to ensure that efforts are coordinated across all environments to aid in the client's success. This also aids in eliminating duplication of effort and ensures an adequate transition plan is in place for when the client leaves the program. In order to collaborate with other providers and individuals, Easter Seals North Texas requires the primary caregiver to complete a Personal Health Information (PHI) release form so that the staff can communicate with individuals outside of Easter Seals North Texas. These release forms are valid for one year from completion and can be obtained through your case manager or the front desk staff.

ALTERNATIVE TREATMENT POLICY

It is our policy at Easter Seals North Texas to provide only empirical and data-based treatments to the children we serve. If you, as a parent/guardian, decide to participate in alternative treatments in conjunction with your behavioral program we require full disclosure of other therapies, medications, and procedures. We also request that no more than one treatment intervention begin or discontinue within 3 months of each other in order to determine the effectiveness of each treatment. As with all behavioral programs, we reserve the right to deny alternative therapies to be implemented during school hours, according to data collected. This will be discussed at monthly meetings prior to any changes.

MANDATED REPORTING OF SUSPECTED CHILD ABUSE AND NEGLECT

Texas law requires caregivers to report suspected child abuse or neglect to the Texas Department of Family and Protective Services or law enforcement. Failure to report suspected abuse or neglect is a crime. Employers are prohibited from retaliating against caregivers who make reports in good faith.

Additionally, as service providers, it is our legal obligation to report any <u>suspected</u> abuse or neglect. Therefore, Easter Seals North Texas employees are required to follow the law should a situation arise that causes them to suspect abuse or neglect.

COURT ORDERS IMPACTING ENROLLED CHILDREN

Please be advised that the staff cannot refuse to release a child to the child's parent or legal guardian who has or shares legal custody of the child, who presents apparently reliable evidence of such right, and who presents photographic identification. In most cases, both parents have equal custody rights unless and until a court says otherwise. This is generally true even if parents have separated and one has moved out of the family home.

In the absence of a court order, both natural parents have equal rights to their child and to information about their child. Parents must provide the Easter Seals North Texas Child Development Center with a certified copy of any custodial agreements issued by a court of law. Easter Seals North Texas Child Development Center will follow the most current copy of court orders in the child's records.

Therefore, if you do not authorize your child's other parent or legal guardian to pick up your child, you must provide the Director with a certified copy of the court order awarding custody solely to you or denying custody to such person. The staff cannot refuse to release a child to a parent without a court order.

Parents experiencing custody difficulties are strongly urged to keep the Director fully advised of circumstances that might affect Easter Seals North Texas Child Development Center and their child.

In rare circumstances where the safety of the children and/or staff is threatened by unauthorized person determined to remove a child from the facility, Easter Seals North Texas cannot guarantee the child will not be released to that person.

If a dispute arises placing any client or staff member of Easter Seals North Texas at risk, law enforcement will be called to mediate.

PHOTOGRAPHS AND VIDEOTAPING

The treatment team will collect video data for each client on a regular basis. This video collection will only be viewed by ESNT team members and allows the team to track and monitor progress for each client.

If a family wishes to have a copy of a specific video, it can be requested through the Case Manager. In the event another client is in the video, due to confidentiality reasons, the request for a copy will be denied. ESNT can copy a video to a CD; however, we are unable to email videos or transfer them to a USB flash drive.

These videos will also be used for internal training purposes for ESNT staff.

These videos are not considered to be a part of the client's medical record and will not be stored as such. Once a client discharges from the program, the videos will be destroyed within 60 days of the client's discharge date.

However, during the discharge preparation, the family will be informed if ESNT staff members wish to retain any videos for internal training purposes. A release form will be provided to the family that will allow release of the materials (e.g. videos) for training purposes. Prior to signing, the family will be offered the opportunity to review the videos on site.

ESNT reviews the need to keep training videos annually. There is no guarantee training videos will be kept post discharge regardless if prior consent was given.

Each family also has the right to request that no videos be retained for training purposes. If a family makes this request, all videos will be destroyed within 60 days of the client's discharge date.

Note: videos/photographs taken by the Development and Marketing team do not fall under this policy. Requests regarding videos/photographs taken in this context must be addressed directly to Development and Marketing. The ESNT staff will NOT use the videos for any marketing purposes unless the family provides a separate signed consent allowing ESNT to do so.

Photographing and videotaping by non-ESNT employees are not permitted in any Easter Seals North Texas facility for reasons of client privacy and confidentiality. The only exception to this policy is during special class events, such as class parties, graduations and field trips where parents may wish to take pictures of their child. Parents giving permission for their child to attend these events are also giving permission for their child to be photographed.

Any other exceptions to this policy require approval of the President/ CEO or designee with a valid reason and with proper client consent. Exceptions are made, with proper client/family consent, for Easter Seals North Texas Marketing and Development purposes. Clients have the right to refuse to participate in Marketing and Development activities and their decision will have no effect whatsoever on the extent or quality of services provided.

CURRICULUM

Easter Seals North Texas Child Development Center bases its programs on NAEYC guidelines and a variety of developmentally appropriate practices to help shape the various curriculum models.

DAILY SCHEDULE

A generalized daily schedule of activities is posted in each classroom. While routine is important, schedules will vary slightly from day to day depending on your child's classroom, the activities planned, and the needs of individual children. All classrooms' schedules will include 1-2 group circle times, small group or peer activities, snack and lunch periods, rest/nap periods, cooperative play, outside time, art and sensory activities, language enrichment activities, and academic games.

CLASS ASSIGNMENTS

Children are assigned to classes based on age/developmental level. The range of ages in one class will not exceed three years. Generally, the groups stay with the assigned caregivers throughout the day and may move to different areas throughout the center, indoors and out. The groups will not mix freely with other groups, unless attending a special event with parental permission.

Staff to child ratios:

Most classes will have a 1:4 staff to student ratio. The oldest group may have less staff, depending on the specific needs of the children assigned to that class.

PROFESSIONALISM

Easter Seals North Texas is committed to creating a safe, respectful environment that is focused on the needs of the client. Relationships between Easter Seals North Texas staff members and clients are intended to set limits and clearly define a safe, therapeutic connection, putting the needs of clients first.

Professional boundaries will be maintained at all times between Easter Seals North Texas staff members and clients so that appropriate services are provided. Without professional boundaries it becomes difficult to remain objective in programming decisions and clients may not receive appropriate therapy. These boundaries will be maintained during treatment and after discharge.

Dual relationships are not allowed with current or former clients. Dual relationships occur when a therapist has some form of interaction with a client outside of the therapy environment. Any personal information revealed will be relevant to the client's treatment.

Easter Seals North Texas staff members may only be contacted through Easter Seals North Texas phone numbers, emails or in person at Easter Seals North Texas work locations. If a family needs to contact Easter Seals North Texas staff members during enrollment or after discharge, they may reach out via Easter Seals North Texas contact information.

SOCIAL MEDIA AND ENCOUNTERS OUTSIDE OF ESNT

ESNT staff members are prohibited from engaging in any social media relationship with current or former clients and/or families. This is to ensure privacy as well as to respect the professional boundaries of the relationship between ESNT and the clients' family.

To respect the privacy of ESNT clients, ESNT staff will not approach clients outside of ESNT if encountered in a public setting. Families are more than welcome to approach the staff member if desired but staff members will not initiate the interaction.

DISCIPLINE AND GUIDANCE PRACTICES

Most problems are avoided by keeping the children engaged in activities that are appropriately challenging and interesting, as well as by maintaining a predictable structure upon which the children can rely. Each classroom has clearly established and consistently reinforced rules regarding appropriate behavior. These rules are intended to ensure the child's safety and the safety of others within the classroom and the school, as well as to promote social development and relationships both with peers and adults. Such rules may include taking turns, using words to express needs and wants, walking in the classroom and using materials safely and respecting the space and property of others.

The goal of discipline is to have the child be responsible for their own behavior. At no time is physical punishment, restraint, forced compliance, or punishment related to food, naps, medications or use of bathrooms allowed.

A sit-and-watch time may be used only when a child is hurting himself or others. This time is used to help a child regain control of himself/herself when all other methods have failed. During sit-and-watch, the child is seated in a designated area within the classroom and within sight and hearing of the staff and of the ongoing classroom activities. This is limited to not more than two minutes duration. If a child consistently seems to require a sit-and-watch time to control his/her behavior, a team meeting with the parents will be called to identify more appropriate and effective interventions.

If a child's behavior is such that she/he consistently displays hostile or aggressive behavior which is dangerous to self or others, and cannot be effectively managed in the classroom, Child Development Center staff will develop an effective plan of action with the family.

CLIENT DEVICES

From time to time, families and clients bring personally owned devices such as communication boards, iPads, iPods, specialized games, etc. into the center. These devices can be used for valid therapeutic purposes as well as for rewards. Before any client-owned equipment/devices are brought on-site at ESNT, a release of liability form must be completed by the client or legal guardian and must be on file at ESNT. Devices will not be allowed in the center until this document is on file. ESNT encourages parents to discuss the use of client-owned devices with the treating Case Manager before bringing it to ESNT.

WHAT TO SEND WITH YOUR CHILD

Unless otherwise specified, please send two changes of clothing, lunch, snack, nap mat, blanket, back pack, diapers and diapering products as needed. Clothing should be appropriate for the weather and the child's individual needs. Practical play clothes are appropriate for everyday school wear.

Shoes should protect the feet. **Jellies, Crocs and flip flops are not considered appropriately protective.** Closed toe shoes are recommended for outdoor play.

While we try to protect clothing, children do use paint and other messy material that may stain clothing.

All clothing and other belongings should be clearly labeled with the child's first name and last initial. We reserve the right to permanently label any belongings with the child's initials to ensure that the belongings are not mistaken for another child's.

Blankets are sent home on Fridays to be washed and returned on Mondays for the next week's use.

Do not bring nuts or products containing nuts, candy, gum, chocolates, jewelry, money, food or toys (with the exception of Show and Tell days or specific programming needs).

ESNT Child Development Center staff members cannot be responsible for lost or broken toys that are brought from home.

PARTIES AND BIRTHDAYS

Children usually enjoy celebrating birthdays at the Child Development Center. Parents are encouraged to discuss their contribution for the celebration with the child's teacher. Special events such as clowns or entertainers cannot be accommodated and are best enjoyed at home. Cookies, rice crispy treats, and cupcakes are preferred celebration foods.

ACCEPTANCE OF GIFTS

Periodically, families and clients may want to bring small gifts for the Child Development Center staff members (e.g. birthdays, holidays, etc.) as a symbol of gratitude. While this is a very kind and much appreciated gesture, due to ethical guidelines, ESNT staff members cannot accept any gifts, including homemade and food items, from clients and/or families regardless of the value. Families are more than welcome to donate to ESNT as an agency in lieu of giving gifts to staff members if the family so wishes.

FIELD TRIPS

Field trips are a privilege which serve the instructional program by utilizing educational resources of the community to supplement classroom work. Parents will be given advance notice of all field trips and sign a written request for permission for their child to participate, releasing the center and its personnel from liability. According to state law, children are not allowed to attend a field trip without written permission from the parents or guardians. No exceptions can be made.

Parents are always encouraged to attend the field trips and transport their children and additional staff members if they wish.

Parents will be notified regarding the cost of each field trip prior to the scheduled event. If you have a desire for your child to participate in a particular field experience that is not currently offered, feel free to suggest a location. If you do not wish for your child to attend a field trip, the child will remain with the class that does not attend the field trip. In the event that the entire center is going, it is the parent's responsibility to make other arrangements for their child.

TRANSPORTATION

Transportation is only provided in the event of a field trip. In this case, parents will be notified in advance of the field trip and will be asked to sign consent for their child to be transported, releasing ESNT and its personnel from liability.

Because the Texas State Department of Family and Protective Services recommends all children under the age of 8 and/or less than 80 pounds use a car or booster seat, all parents are required to provide a car seat or booster seat if their child is to be transported by ESNT staff.

Staff members providing transportation have provided the school with a copy of their current driver's license, a current proof of auto liability insurance, and current CPR/First Aid training. A first aid kit and cell phone with emergency contact information are present in the vehicle at all times during transport.

If parents do not want their child transported by staff it is their responsibility to provide transportation.

ALLERGIES

The ESNT Child Development Center is a nut free facility.

We have many clients and staff members with nut allergies; therefore, we cannot allow peanuts, peanut butter, or other nut products in the Easter Seals North Texas treatment or common areas. All ESNT sites are nut free facilities. Parents/guardians are responsible for notifying the facility, in writing, of any allergies or other medical conditions upon enrollment or as the parents become aware of them.

BALLOONS

ESNT strives to provide a safe environment for all clients to learn in. Balloons often distract in this environment and can be dangerous to our clients. We ask that balloons not be brought into ESNT facilities.

ANIMALS/PETS

Animals/pets are not permitted in therapy areas or hallways without approval from the Vice President of Therapeutic and Autism Services.

Clients bringing service animals to ESNT should let the front desk know they have a service animal with them when signing in.

MEDICATION PROCEDURES

Parents are responsible for giving their children medications. In cases where this is not possible, the parent must contact the Director for a case by case decision regarding giving medicine at school. If approved, the staff can give medications only if the following procedures are followed:

- A prescription or non- prescription medication must be given to the office staff in the original prescription bottle with the pharmacist's label attached;
- Parents must sign a form authorizing the staff to give the medication. Forms are available from the Director. Forms shall expire or be renewed after 10 working days, except in cases of long term medication, in which case the parent must complete and sign an exception form. All medication authorization forms will be kept on file in the child's main folder, with the teacher retaining a copy;
- All medication must be labeled with the child's name:
- All medication must be handed directly to lead staff. Do not leave any medication in the child's back pack;
- All medication will be stored in a locked cabinet or in the kitchen refrigerator out of possible child's reach;
- Unused medication and expired medication will be returned to the child's parents; and
- The Child Development Center has a monitoring process to review medications and Medication Authorization Forms to ensure they are current.

TOILETING AND DIAPERING

Clients enrolled in the Child Development Center are not required to be toilet-trained, but parents are expected to provide diapers and creams, if needed, for children who are not yet toilet-trained. Universal precautions will be used at all times including, but not limited to: hand washing, wearing gloves, and disposing of diapers/soiled clothing appropriately. It is recommended that all parents send a change of clothes with their child. In the event clothing is soiled, the clothing will be sent home in a plastic bag. If the child does not have a change of clothes, Easter Seals North Texas' extra clothing items will be used, if possible.

PROCEDURES AND CHARGES FOR OBTAINING COPIES OF MEDICAL RECORDS

Clients or their parents/guardians may receive one copy of medical records free of charge on request and with appropriate consent for release as required by law. Additional copies will be provided on request; a basic document fee will be charged for these additional copies. The basic document fee will cover the first 20 pages. Additional fees, such as processing requests electronically or via other mediums, postage, or additional pages, may apply. Charges and fees will be reviewed with the client or their parent/guardian and payment for all fees must be received before copies will be made.

This same fee schedule applies to all records released to other sources with these exceptions: necessary records will be sent to managing physicians without charge as needed for proper medical care; necessary records will be sent to schools or other therapeutic programs as needed to ensure proper coordination of services, free of charge. Some agencies will have a fee contract for records, such as the Social Security Administration, which will be used in place of this fee schedule. Records may be sent to third party payers without charge as part of the billing process, and with proper consent.

All client records or information, in any form, released to anyone for any purpose, must be requested with proper written consent for release of records if, when, and as required by law, regardless of whether there is a fee for the service or not. This pertains to individual identifying information or records, not to data or case scenarios which do not or could not identify as individual client, such that that used for statistical data, for general marketing purposes, etc.

With consent, records will be pulled and copied in a timely manner, depending on the source of the record (such as active chart, inactive stored chart, or microfilm), and the number of pages to be copied.

Only ESNT staff may pull and copy records, and all records sent must be recorded in the client's chart, to include the date, which records were released and to whom they were released. Clients have the right to request and be told which records were released, and to whom.

FAMILY OPPORTUNITIES

Families/Clients as Volunteers:

Easter Seals welcomes volunteers who can assist with various projects or clerical tasks. Anyone interested in volunteer opportunities may call our corporate office at 817-332-7171 and ask to speak to the volunteer coordinator.

Publicity:

Throughout the year, the Development and Marketing Department may request that clients and families take part in publicity activities. It is the client/family's sole decision whether they will or will not participate. Clients/families will be asked to sign a release indicating if they wish to participate or not. This may be changed or revoked at any time, at the sole discretion of the client/family. The extent and quality of services provided to a client/family will not be affected by that client/family's decision to participate or not. Participation is completely voluntary.

Donations:

Easter Seals depends on donations in order to provide quality services to clients regardless of ability to pay. Please contact the Development and Marketing Department for further information. A client/family's decision to donate or not will have no effect whatsoever on the extent or quality of services provided to that client/family.

STUDENTS, INTERNS AND VOLUNTEERS

Easter Seals North Texas is involved with several university training and outreach programs. Students who are fulfilling affiliations or practicum programs may participate in the client's evaluation, program planning and/or therapy. These professionals will be under the supervision of the appropriate licensed member of the client's team. The students, interns, and volunteers are screened, oriented, and trained so they know ESNT's policies, procedures, and rules.

Thank you for helping us to provide "hands on" training these future therapists require to expand treatment opportunities for other clients needing therapy services. Please feel free to discuss any questions involving this student-training program with the program Director.

SMOKING POLICY

Smoking is prohibited in all Easter Seals facilities in order to promote a safe and healthy environment for clients, families, volunteers, visitors, and staff.

SAFE ENVIRONMENT

Easter Seals North Texas seeks to provide a safe environment free from acts and threats of violence and to respond effectively in the event such acts or threats of violence occur. Acts of violence and threats of violence, including any conduct involving the workplace or work relationships that causes an individual to have a reasonable fear for his or her safety or the safety of his or her family, friends, associates, or property, are prohibited.

Building controls are in place to ensure a safe environment and include: automatic code locks at front door; alarm system; locked back door during business hours to prevent unapproved entry from the back, video monitoring of classrooms, Fire Marshall inspection, fire extinguisher inspections, heating/water system inspections, all staff trained in CPR and First Aid, the emergency procedures noted previously and drills conducted so the staff and children are experienced with drills.

Weapons are prohibited inside any property owned, leased or controlled by Easter Seals North Texas, including anywhere company business is conducted, such as customer locations, client locations, trade shows, restaurants, company event venues, and so forth. Weapons include, but are not limited to, guns, knives or swords with blades over four inches in length, and explosives. These prohibitions apply to all employees, applicants, prospective employees, temporary employees, volunteers, guests and/or visitors.

Possession of a weapon can be authorized by the company's president/CEO to allow security personnel or a trained employee to have a weapon on company property when this possession is determined necessary to secure the safety and security of company employees. Only the president/CEO, or designee, may authorize the carrying of or use of a weapon.

BREAST FEEDING POLICY

ESNT Child Development Center will provide a comfortable place with a seat for mothers to breastfeed their child if they choose to do so. Parents may also provide breast milk for their child to be served while in our care.

COMPLIANCE

Easter Seals North Texas has a VP of Compliance and an active Compliance Committee which functions to insure compliance with all applicable federal, state, and local laws regulating health care facilities and services

Anyone is welcome to express a concern about ESNT's or this center's compliance in the following ways: Directly to the Child Development Center Director; to the VP of Therapeutic and Autism Services; contact the VP of Compliance directly at 817-759-7942; or call the 24/7 Compliance Line and leave a message at 1-866-203-2496. This call can be made anonymously, if desired, or you can identify yourself for a return call.

CONSUMER GRIEVANCE POLICY (CONFLICT RESOLUTION)

ESNT abides by the principle that problems should be resolved in a timely, non-confrontational manner. Staff expects parental support in development and implementation of a plan to solve the concern. Misunderstanding may occur if the problem is not first investigated at the source. Personal issues are not appropriate items with which to approach other staff members or parents. To appropriately resolve concerns, please communicate within the outlined measures.

The following is a summary of the ESNT Consumer Grievance Policy from the ESNT Employee Handbook. If you wish to review the policy in full, you may request a copy from your Program Director.

Consumers will be treated with respect and dignity and receive courteous service. They will be provided with a clear description of ESNT's programs, and permitted to use the services to the extent that their abilities, interests, and ESNT's resources allow.

When, in the course of receiving services from ESNT, a consumer has a grievance against an ESNT employee, he/she has the right to an informal review of the grievance. ESNT has the following steps in place to ensure your grievance is reviewed:

- 1. Discuss grievance with your assigned staff person (e.g. therapist, case manager) as soon as possible or within seven (7) calendar days of the event or action.
- 2. Discuss concern with the Program Director over the phone, face-to-face or you can prepare and submit a written grievance. The Program Director will make every reasonable attempt to contact you as soon as possible, no later than five (5) calendar days to discuss the grievance.
- 3. If this discussion does not result in a mutually satisfactory resolution, you/your family member can share the grievance with the VP, Therapeutic and Autism Services over the phone, face-to-face or you can prepare and submit a written grievance. The Vice President will make every reasonable attempt to contact you as soon as possible, no later than five (5) calendar days to discuss the grievance.
- 4. If you/your family member remain dissatisfied with the decision from the VP, you/your family member may appeal the decision in writing to the President & CEO within five (5) calendar days. Within ten (10) calendar days of receiving the appeal, the President & CEO will render a final decision in writing to you/your family member and to the VP with whom you were working.

At any point during this process:

- 1. The written grievance can also be given to the receptionist at each site to deliver to the appropriate person.
- 2. You have the right to speak with the VP of Compliance at 1-866-203-2496 or 817-759-7942.

EASTER SEALS NORTH TEXAS PROGRAMS AND SERVICES

Applied Behavior Analysis (ABA) Services for Children with Autism:

Individualized treatment plans with intervention strategies are created that vary based on the needs of each child and their family. The following ESNT programs utilize ABA therapy:

- Autism Treatment Program Comprehensive clinic and community-based program for children ages 2- 15 who have been diagnosed with autism spectrum disorders. Clinic locations in Carrollton, Oak Cliff, and Ft. Worth.
- Child Development Center A fully inclusive, Walden replicated (Emory University) preschool
 program open to both children with autism and typically developing children ages 18 months to 6
 years. Academy location in Grapevine.

Class Case Management:

Case managers insure that children and adults enrolled in this Medicaid waiver program receive all the supports needed for them to remain in the communities where they live rather than in institutions. Service plans are based on each individual's unique situation and personal choices, and may include attendant care, transportation assistance, durable medical equipment, home or vehicle modifications, and traditional and specialized therapies.

Employment Services:

Adults with disabilities are matched with their best opportunities for success in the workplace, based on their skills and interests, through exceptional relationships with local employers and by providing focused, personal support and long-term follow-up for the employees.

Homemaker Services:

In-home helpers perform light housekeeping tasks to help ensure a safe and healthy living environment for people with disabilities and other special needs.

Outpatient Rehabilitation:

Children and adults with disabilities are evaluated and receive occupational therapy, physical therapy and speech-language therapy to improve their functional skills. Therapy services are available to those with and without insurance, although availability varies by site.

Personal Assistant Services:

In-home help with bathing, grooming, dressing, eating, mobility, and other personal tasks enables adults with physical and intellectual disabilities to live in their own homes rather than in nursing homes.

Respite Care Services:

Primary caregivers for adults with disabilities get a temporary break from their fatiguing responsibilities when trained professionals briefly take over the role. Usually only a few hours each week or month, this short-term break can improve the caregiver's emotional and physical wellbeing, reduce stress and enhance the quality of life for both the caregiver and the recipient.

Work Incentives Planning and Assistance (WIPA):

Adults receiving Social Security Disability Insurance (SSDI) or Supplemental Security Income (SSI) benefits learn about the financial and medical incentives for returning to work or obtaining employment, so that they can make informed decisions.

Website: www.ntx.easterseals.com

General Email: info@ntx.easterseals.com

SUGGESTED READINGS FOR PARENTS

Books & Book Chapters Catherine Maurice, 1993.

Let me Hear Your Voice: A Family's Triumph over Autism.

Ballantine Books, NY.

Catherine Maurice, Gina Green, & Stephen C. Luce, 1996. Behavioral Interventions for Young Children with Autism. Pro-Ed, Austin, TX.

Gina Green, 1996.

Evaluating claims about treatment for autism.

Behavioral Interventions for Young Children with Autism, Chapter 2.

Leaf and McEachin, 2008.

Sense and Nonsense in the Treatment of Autism

DRL Books, New York City, New York.

Sandra Harris & Mary Jane Weiss, 1998.

Right from the start: Behavioral intervention for young children with autism.

Woodbine House, MD.

Gail G. McGee, Teresa Daly, & Heidi A. Jacobs, 1994.

The Walden Preschool.

Preschool Education Programs for Children with Autism, Chapter 8.

Dr. Glenn I. Latham, 1994.

The Power of Positive Parenting.

P&T Ink Books, Logan, Utah.

Journal Articles

Steven Anderson & Raymond Romanczyk, 1999.

Early interventions for young children with autism: Continuum-based behavioral models.

Journal of the Association for Persons with Severe Handicaps, vol. 24, pp.162-173

Don M. Baer, Wolf, & Risley, 1987.

Some still-current dimensions of applied behavior analysis.

Journal of Applied Behavior Analysis, 20, 313-327.

O. Ivar Lovaas, 1987.

Behavioral treatment and normal educational and intellectual functioning in young autistic children.

Journal of Consulting and Clinical Psychology, vol. 55, pp. 3-9.

Gail G. McGee, Michael J. Morrier, and Teresa Daly, 1999.

An Incidental Teaching Approach to Early Intervention for Toddlers with Autism.

Journal of the Association for Persons with Severe Handicaps, 24 No.3, 133-146

Easter Seals DISABILITY SERVICES

Easter Seals North Texas

Acknowledgement of Receipt: Child Development Center Client and Family Handbook

This acknowledges that I have been given the Easter Seals North Texas' Child Development Center Client and Family Handbook on the date listed below. By signing below, I acknowledge that it is my responsibility to read and understand the policies contained within this handbook and I will comply with the policies and any modifications or revisions. By signing below, I also acknowledge that failure to comply with any Easter Seals North Texas' policies may result in termination of services. Individuals concerned with the actions resulting from our policies can contact their Program Director to request an appeal.

While all parts of this handbook are important and relevant to your child's enrollment in our program, there are certain sections we need specific acknowledgement of reading. Please initial next to each statement below:

Parent/Guardian Signature	Date	
Parent/Guardian Name (Printed)	Client Name	
I understand and agree to provid child or changes to my contact informati	e the center with any changes to who is autl on as soon as they occur.	norized to pick up my
I acknowledge that I have read a 22).	and understand the policy on photographs a	nd videotaping (page
I understand and agree to comoutlined in this handbook.	aply with the terms of the medication proce	edures (page 26) as
I understand and agree to comply handbook.	with the terms of the health policies (page 1	L8) as outlined in this
I understand and agree to complete 15) as outlined in this handbook.	ly with the terms of the arrivals and departu	res procedures (page
I understand and agree to comply handbook.	y with the terms of late payment fees (page 1	L3) as outlined in this
I understand and agree to comp pick up policy (page 17) as outlined in th	ly with the terms of the attendance policy (p nis handbook.	page 16) and the late
	nestions or concerns regarding any of the poli m Director for clarification and/or rationale.	cies contained withir

ADMISSIONS PROCEDURES AND FORMS

Each child participating in the program is required to complete the application process prior to his/her admission to the program. There are three components to our application process as followed:

- An enrollment application package
 - o Completion and submission of all the following forms:
 - Enrollment application
 - Current completed ABLLS assessment (if available)
 - Current IEP (if available)
 - Program summary, data, or information from other therapies previously or currently provided (if applicable)
 - Medical & developmental history
 - Consent forms
 - Confidentiality agreement
 - Copy of front and back of insurance card
- Intake Interview
 - Each applicant will have the opportunity to visit the site and meet with the BCBA prior to enrollment to allow for initial assessments. Parents will have the opportunity to complete all necessary paperwork and ask questions.
- Child Development Center admission (no additional fees will be applied)
 - Child Development Center admission form
 - o Immunization records or Affidavit
 - Doctor's statement of health
 - Marketing Release
 - Receipt of handbook acknowledgement

After acceptance there will be a brief transition time for the child. This involves the child making visits to:

- Establish rapport with the staff
- Get acquainted with the school and classrooms
- The BCBA and Program Manager will assess the child's skills

□ Video Samples of parent/child interaction (upon request)

- The BCBA, Program Manager, and parents will establish program goals, short-term and long-term
- Parent training sessions will be scheduled

Application Checklist:

Enrollment Application
Diagnosing Physicians' Assessments and referral
Fees
A copy of current IEP (if applicable)
A copy of current home program data, or summary of other therapies (if applicable)
A copy of a completed The Assessment of Basic Language and Learning Skills (ABLLS) (only
needed if enrolled, and if available)
A copy of available medical history
A copy of developmental history
Consent form to participate
Marketing Release
HIPAA Confidentiality form
Copy of insurance card, front and back (if filing insurance)
Assignment of benefits form (if filing insurance)



Student Information Anticipated date of admission: Child's address: Sex: M Name of School Attending: School Address: Classroom Teacher:	onological Age: Year(s)	Month(s) Date of withd Referral source	Child's home phone #:		
Anticipated date of admission: Child's address: Sex: M Name of School Attending: School Address:	F		Child's home phone #:		
Child's address: Sex: M Name of School Attending: School Address:	F		Child's home phone #:		
Sex: M Name of School Attending: School Address:	F	Referral source	·		
Name of School Attending: School Address:	F	Referral source	rce:		
School Address:					
Classroom Teacher:					
			School Phone #:		
Father's/Legal Guardian's name:			<u> </u>		
Father's/legal Guardian's employe Employer's Address:	r:		Work phone #: Email:		
Mother's name:					
Mother's employer: Employer's Address:			Work phone #: Email:		
Medical Background List any family members that have Name:	related heali Relationship		pecial needs: Diagnosis: ———————————————————————————————————		
	ems such as past 12 mont	allergies, existi hs, any medica	Yes/No ting illness, medical/behavioral concerns, pr ation prescribed for long-term continuous u		



Client Name:	Chart Number:	Date:
Date of Birth:	Chronological Age: Year(s) Month(Diagnosis:
Please list medical/behavior	al protocol/ instructions for ar	ny current medical/behavioral conditions.
Current and previous medic	cal/behavioral treatment histor	
Has your child ever received	d services or is your child rece	iving services from a Speech Language
Pathologist/Therapist?		
If yes, please de	scribe:	
Has your child ever receivedIf yes, please des	•	eiving services from an Occupational Therapist?
Has your child ever receivedIf yes, please des	•	eiving services from a Physical Therapist?
Has your child ever receivedIf yes, please des		child receiving any other services services/therapies?



Client Name:	Chart Number:	Date:
Date of Birth:	Chronological Age: Year(s) Mo	Diagnosis:
Dietary Informatior Please list any dietary	1 restrictions or food sensitivitie	es/ allergies .
		f which our team should be aware in order to best treat
Strengths and Weal Please list all of your c	knesses child strengths such as drawing	g, writing, computer, etc.



Child Development Center –Enrollment Application
Client Name: Chart Number:

Date of Birth:	Chronological Age: Year(s) Month(s)	Diagnosis:
	and/or inconsistent sensitivities, e	e.g. oversensitive to noises, oversensitive to certain ns that would help staffs to better support the
Daily Routine Please write a descriptive o	detail of his/her typical daily or w	eekly schedule.
	_	

Date:



Child Development Center –Enrollment Application
Client Name: Chart Number:

Date of Birth:	Chronological Age: Year(s) Month(s)	Diagnosis:					
Possible Reinforcers Please list all or any preferences that your child has shown and put * next to the ones that are highly preferred in each category. Please be SPECIFIC!!							
FOOD: (snacks, candies, choc	colate – please be specific; kind	or brand names)					
TOYS: (games, stuff animals,	etc.)						
PHYSICAL CONTACT: (tickles,	hugs, kisses, clapping, back ru	bs, etc.)					
ACTIVITIES: (reading books,	listen to music, etc.)						
OTHERS: (any special prefere	nces not mentioned)						

Date:



Client Name:	Chart Number:		Date:	
Date of Birth:	Chronological Age: Year(s)	Month(s)	Diagnosis:	
Parent/Guardian O	Objectives : (Goals for trea	tment)		

Easter Seals North Texas Child Development Center –Admission Form



Client Name:	С	hart Numb	er:	Date:				
Date of Birth:	С	hronologica	-	Diagnosis:				
Year(s) Month(s)								
Operation Name				Re	ferral Sou	ırce		
Child's Home Address				Ch	ild's Hom	e Telephone	No.	
Date of Admission	Date of W	Vithdrawal		Mc	onday-Frid		rcle) ay/Wednesda	y/Friday
Parent's or Guardian's Name	1			Ad	esday/Th dress (if o	ursday different from	child's addres	s)
List contact information below where pa	arents/guar	dian may be	reached while	child	l will be in	care. Circle	preferred met	hod of contact.
Mother's/Guardian's Father	's/Guardian none No.		Alternate Telephone No		Email-M	other/Guardia	in	
Give the name, address and phone nu	mber of per	son to call in	case of an em	erge		ather/Guardia ents / guardia		Relationship
reached:	boi oi pei	Jon to ball III	dado of all office	oi ge	noy ii pai	omo , guardia	Jannot be	Rolationship
I hereby authorize the childcare operat list name & telephone number for each after verification of ID.								
CHECK ALL THAT APPLY: 1. TRANSPORTATION:								
		nergency ca	re					
2. FIELD TRIPS: I hereby give do not give — my consent for my child to participate in Field Trips:					ate in Field			
Parent's Comments: 3. WATER ACTIVITIES:	hereby 🗌	give \square	do not give		my conso	ant for my ch	ild to particip	ate in Water
J. WAILK AUTHIES.	_	orinkler play	_	Acti	ivities: ading poo	_	iter table play	
4. RECEIPT OF WRITTEN OPER	ATIONAL F	POLICIES:						•
I acknowledge receipt of the to a street of the total street of the street of the total street of the street of the total street of the total street of the street of the total street of the street				_			-	
S. FUNDERSTAND THAT THE FOLL ☐ AM Snack ☐ Lunch (Providence)					nack	TOTALLE IN OF	uvE.	
AUTHORIZATION FOR EMER arrangements for emergency medical							be reached to	o make
Name of Physician:		Address:	,	3~		, :	Ph.#:	
Name of Emergency Medical Care F	acility:	Address:					Ph.#:	
I give consent for the facility to secure any and all necessary emergency medical care for my child.								
Signature - Parent or Legal Guardian								
List any special problems that your child may have, such as allergies, existing illness, previous serious illness, injuries and hospitalizations during the past 12 months, any medication prescribed for long-term continuous use, and any other information which caregiver's should be aware of:								
Child daycare operations are public ac such an operation may be practicing di (voice) or (800)-514-0383 (TTY).								
Signature – P	arent or L	egal Guard	ian				Date	

Easter Seals North Texas Child Development Center –Admission Form



Client Name:	Chart Numb	er:		Date:	bassassass	
Date of Birth:	Chronologic Year	•	onth(s)	Diagnosis:		
IMMUNIZATION RECORD:	e operation with a copy	y of my child's	s most cur	rent immunization reco	ord.	
I am excluding my child from the notarized affidavit form develop					belief. I have attached an official affidavit is valid for 2 years.	
For additiona	al information regarding ir <u>www.dshs.</u>	nmunizations c state.tx.us/ir		•	h Services at	
ADMISSION REQUIREMENT: Or week of admission. Please check only one option: 1. HEALTH-CARE PROFESSIO able to take part in the day	DNAL'S STATEMENT: 11		·		·	
2. A signed and dated copy of	Health Care Profession f a health care profession	•	nt is attache	ed.	Date	
Medical diagnosis and treatmember of; I have attached a			of a recog	nized religious organization	on, which I adhere to or am a	
4. My child has been examined	d within the past year by sion, I will obtain a healt	a health care			ate in the day care program. ubmit it to the child-care operation.	
I Name and address of health care	professional:					
-	Signature - Parent or L	egal Guardian		_	Date	
			<u> </u>			
VISION	R 20/			_ 20/	☐ PASS ☐ FAIL	
SIGNATURE of person administerin screening	g		DATE			
HEARING	1000 Hz	2000 I	lz	4000 Hz		
R					☐ PASS ☐ FAIL	
SIGNATURE of person administering Screening DATE						
Parent Signature:				Date:		

Easter Seals North Texas Child Development Center –Doctor's Statement of Health



		hannan i
Client Name:	Chart Number:	Date:
Date of Birth:	Chronological Age: Year(s) Month(s)	Diagnosis:
I have examined he/she is		in the past 12months and
in good health and can a	ttend preschool.	
Please list any concerns	:	
	Printed name of	physician
	Date	
	Signature of phy	sician

Easter Seals North Texas Child Development Center – Marketing Authorization



Client Name:	Chart Number:	Date:
Date of Birth:	Chronological Age: Year(s) Month(s)	Diagnosis:

I understand that Easter Seals North Texas is requesting possible access to my child's first name, picture, video, other audio visual or sound recording or testimonial of services to be used to demonstrate Easter Seals North Texas Programs. These items may be used by Easter Seals North Texas (hereafter referred to as ESNT) acting only on authorization, for the purpose of illustration, broadcast, or testimonial in connection with the work of ESNT. These materials may be released to the general public under the conditions below.

I understand that pictures, videos (and other items named above) and my child's name are protected health information, as defined under 45 C.F.R. 164.501, and as such, are treated confidentially by ESNT, their respective employees and agents, and those acting with ESNT's permission. This information cannot be released without authorization from the client/client's family.

I understand and agree that ESNT employees will review with me such material as stated above so that we can together select the appropriate materials for release, however, I understand that these materials made by ESNT, its employees and agents are owned by ESNT and that they may copyright them.

I understand that these materials may be published on ESNT's network of websites. As a result, selected elements of my child's personal information may be disclosed online however, the disclosure will be limited to my child's picture/video or likeness, my child's first name and/or the designation of Easter Seals North Texas. (i.e., "Anna, Easter Seals North Texas" or just their picture without a name).

I understand that the rights described above are granted to ESNT on an unlimited basis without any compensation or payment being made for any current or future use. I understand that this authorization is voluntary and that ESNT will not condition any treatment or funding to my child on the completion of this authorization. This release will be in effect for (5) five years from the date of the signature below.

I also understand that I may revoke my authorization at any time if the information has not already been disclosed. To revoke my authorization, I must notify ESNT in writing by sending my request to Easter Seals North Texas President/CEO, 1424 Hemphill St., Fort Worth, Texas, 76104-4703.

I understand and agree that once ESNT, its respective employees and agents, and those acting with its permission, disclose my child's protected health information, as noted by the release below, this information is subject to re-disclosure and may no longer be protected the Health Insurance Portability and Accountability Act of 1996.

(Please initial the statements to show yo I agree / do not agree to my pictur I agree / do not agree to the relea authorization. I agree / do not agree to the relea video, audio, artwork or likeness with my	re being taken by ESNT or see of my picture/photogra	their contractors/agents. ph, video, audio, artwork o	r likeness with my
If I <u>disagree</u> with any of the above marke opportunities on a project by project bas	_	I am open to being approa	_ iched in the future about
I am the parent or legal guardian of	Print Child's Name		age of 18 years old.
I have read this release and authorizatio	n before signing below, an	d I fully understand its con	tents.
Signature of Parent or Legal Guardian	Printed Name of F	Parent or Legal Guardian	Date
 Witness for ESNT	 Date		

Easter Seals North Texas Child Development Center –Confidentiality Agreement



Client Name:	Chart Number:		Date:
Date of Birth:	Chronological Age: Year(s)	Month(s)	Diagnosis:
All clients and families of Eas confidentiality. Therefore, all clients and families receiving	visitors/volunt	eers are require	ed to ensure the privacy of
I,	North Texas' c	lients and fami	
If I violate this policy, I under actions brought against me b			Texas is not liable for any
Vicitor /Volumtoon Cignotum			Data
Visitor/Volunteer Signature			Date
Parent of Visitor/Volunteer Si (If Visitor/Volunteer is a mind	_		Date
Witness			



Easter Seals North Texas Consent to Evaluate and Treat

Consent to Evaluate and Treat Acknowledgement of Notice of Privacy Practices

Client's	Name (Printed):	Chart #:	
whon Seals 100, 0	n I have legal guardianship. I hereby author North Texas operating at any of its several lo	rize Easter Seals North Texas (ESN ocations: 4201 Brook Spring Dr, B	legal guardian of the above named client or for NT), a Texas non-profit corporation, (dba Easter Bldg II, Dallas, TX, 75224; 4443 N Josey Ln, Suite mphill Street, Fort Worth, TX, 76104), to perform
involv		or my child. I understand that ES	I by qualified staff members of ESNT may be SNT may use or disclose any and all information of ESNT.
in cas		al law permits ESNT to release an	y medical treatment for the above named client by protected health information necessary about
	ase ESNT, its Board of Directors, employees, from the above named client's participation		r any and all liability, claims, or suits, which may agency.
	e of an emergency, I request that ESNT con ase of a minor if the parent or guardian is u		essary (if the adult client is incapacitated, or in
1	Name (Printed Clearly):	Relation To Client:	Phone Number:
2	Name (Printed Clearly):	Relation To Client:	Phone Number:
3	Name (Printed Clearly):	Relation To Client:	Phone Number:
proted HIPAA receiv Specia	cted health information is used and disclose and other laws. This notice explains my rigge a copy of this document and the notice up all Note regarding Health Oversight: As part	d by ESNT for treatment, payment this regarding my protected healt bon request. of the ESNT program, I understan	Privacy Practices. This notice explains how my nt, operations, and other uses under Federal thinformation. I understand and I am entitled to nd that copies of evaluations, re-evaluations, plan my primary care physician (PCP)/ prescribing
	cian listed below in order for the ESNT team		
Prescr	ibing Physician/Primary Care Physician:		
	ess:		
Phone	e Number:	Fax Nu	mber:
I also sent.	acknowledge that if I change PCPs, it is my	responsibility to update ESNT in	order to update where these documents are
Signature		Date	This form was reviewed on the following dat Corrections and updates should be made by marking of thin line through incorrect information and adding no information. Write the date and initial next to updates.
Name (Printed)		Relationship to Client	Date Reviewed Changes Yes/No Signature of Parent/Guardian



Easter Seals North Texas **Financial Information Form**

				Date:
				DOA:
Patient's Name (Printed):			Chart #:
	Perso	on Responsible Fo	or Paymen	
Name:				Social Security Number:
Address:				Phone Number:
City:		State:	Zip:	County:
Employer:				Phone Number:
The Financial Cou benefits" to Easter		nsurance claim form	m to your ir	surance company. You will be asked to "assign
		Primary Covera	age	
Name of Insured:				Social Security/ID Number:
Name of insurance com	pany:			Phone Number:
Mailing Address:				I
		Secondary Cove	rage	
Name of Insured:			-	Social Security/ID Number:
Name of insurance company:			Phone Number:	
Mailing Address:				
		Other Coverage	ge	
Medicare/Medicaid:	Recipient's Name:			Card Number:
CSHCN:	Recipient's Name:			Card Number:
	Authorization of As	signment of Bene	efits and R	ecord Release
policy for all service mental records with child's behalf during this authorization sh	es rendered at Easter Seals. I authorize respect to my/my child's medical history g the appeal process of any Easter Seal nall be considered as effective and valid	e Easter Seals to rele y at Easter Seals. If Is services denied by	ease, when in necessary, I my insurandathorization	medical reimbursement benefit under my insurance requested by my insurance company, any medical or authorize Easter Seals to act on my behalf and/or my be company or Medicaid plan. A photo static copy of a will expire 12/31/2015.
Insured's or Authorize	ed Person's Signature		Date	

PAYMENT IS DUE ON THE DAY OF SERVICE.
IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT A FINANCIAL COUNSELOR AT 972.394.8900.

Easter Seals is committed to providing you with quality services. Information can be conveyed to you in a variety of different formats or languages, printed, spoken or signed. If you need any accommodation to assist you in understanding this document or to ensure you are fully informed about your care or your financial arrangements at Easter Seals, please ask the nearest staff person for assistance in accessing this information in a different way.



Easter Seals North Texas **Demographic Tracking Information**

The mission of Easter Seals North Texas is to create opportunities that advance the independence of individuals with disabilities and other special needs.

Easter Seals North Texas is an affiliate of Easter Seals, Inc. As part of this larger entity, we are required to provide certain demographic information on the clients we serve each year. This data is used both locally and in Easter Seals, Inc.'s Annual Report to provide information to a variety of entities interested in the work of Easter Seals including: legislators, foundations, corporate sponsors and potential business and program partners, as well as the general public and watchdog agencies.

You are not required to provide us with this information. However, if you do, ESNT and Easter Seals, Inc. will not use this to identify you or your family members in any way. This information is compiled to reflect who we serve as a whole, and never on our individual clients.

Please complete the following based on the client being served by ESNT:

How did you hear about us?						
Military Status:						
		None	□ Active Du	ty	□ National Guard/Reserve	
		Veteran	□ Member o	of a military/ve	eteran family	
Race/Ethnicit	y :					
		Asian		Aboriginal		
		Non-Hispanic Blo	ıck	□ Non-Hispa	nic White	
		Hispanic		□ North Ame	erican Indian and Alaska Native	
		Native Hawaiian	and Other P	Pacific Islander		
		Multiple Ethnicity	,	□ Other		
Individual/Household Income:						
		\$0-9,999/year		□ \$10,000- 19	7,999/year	
		\$20,000- 34,999/	/ear	□ \$35,000- 49	9,999/year	
		\$50,000- 99,999/	/ear	□ \$100,000+/	/year	

Please return this form to the front desk once completed.

Thank you, in advance, as this information is truly valuable when advocating for our services and seeking new funding opportunities!