



**taking on disability together**

**CHILD DEVELOPMENT CENTER  
Client and Family Handbook**

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Thank you for choosing Easterseals 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 ESNT Child Development Center.

## **ESNT MISSION STATEMENT**

The mission of 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 staff members;
- 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; and
- 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 ESNT. 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 ESNT.

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.

## **ESNT THERAPUTIC AND AUTISM SERVICES PHILOSOPHY**

ESNT 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.

ESNT maintains that:

- A client will make greater progress if the parent(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**

ESNT Child Development Center is the 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 parent's 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 the progress in the targeted goals.

## **SERVICES OFFERED**

- Kindergarten Preparation
  - Kindergarten preparation provides children with academic skills in order to prepare them for a successful kindergarten year.
- ABA Therapy
  - ABA Therapy provides intense treatment in language, engagement and social skills under the supervision of a Board Certified Behavior analyst.

- **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 communications, such as basic sign-language, computers, communication boards, picture symbols, etc. **Physical Therapy**
- **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.

## **CERTIFICATION AND LICENSING**

ESNT, 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 on the bulletin boards 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/ guardians’ review. These documents are available to view at any time.

*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, and their phone number is 817-321-8604. You can find them on the web at [www.dfps.state.tx.us](http://www.dfps.state.tx.us).

## **STAFFING**

Services in the ESNT Child Development Program are provided utilizing a collaborative model. Members of the Child Development Center team meet regularly to discuss progress and to coordinate care. 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](http://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 ESNT, 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 the Vice President of Compliance, additionally review client information and have access to the clients' records as necessary.

For questions about:

- The client's progress or classroom schedule, please talk to the child's Program Coordinator.
- Financial arrangements, please talk to our financial team.
- 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.

On a monthly basis, the staff members of the Therapeutic and Autism Services team meet 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, the Director of the Child Development Center, the Director of Outreach and Training, the Director of Outpatient Rehabilitation, BCBA's from the Autism Treatment Program, BCBA's from the Child Development Center, Occupational Therapists, Speech-Language Pathologists, Physical Therapists and Social Services. Clients receiving services through the Child Development Center may be discussed at this meeting.

## **HOURS OF OPERATION**

ESNT, 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.

## **ENROLLMENT**

Inquiries and referrals are accepted over the phone at the ESNT 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:

- Admissions form, including emergency contacts and permission to treat
- Marketing release
- Child health appraisal (to include allergy information, immunization records, and physician's statement of health)
- Confidentiality statement
- 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**

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.

## **NOTICE OF WITHDRAWAL**

ESNT, 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**

In an effort to help clients with their budgeting, tuition is determined by multiplying the daily cost of providing services by the number of days ESNT Child Development Center is open for the year, then dividing the total amount equally over the 12 months of the year.

Monthly Tuition:                      \$500/ month 5 days (M/T/W/Th/F)  
   \$385/ month 3 days (M/ W/ F) or 2 days (T/ Th)

Registration Fee:                      \$85/ one-time fee

Supply fee:                              \$15/ month 5 days (M/T/W/Th/F)  
   \$8/month 3 days (M/ W/ F) or 2 days (T/ Th)



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)

Cash, check, Master Card, Visa or money order are acceptable forms of payment. Tuition may be paid monthly (due the 1<sup>st</sup> business day of the month) or semi-monthly (due the 1<sup>st</sup> business day and the 1<sup>st</sup> business day following the 15<sup>th</sup> of the month).

#### Late Fees:

Tuition not paid by the 2<sup>nd</sup> business day following the due date(s) shall incur a \$25.00 late fee. Tuition which is not received in full by the last business day of the month, may cause a child to be dropped from the program and his/her spot be allocated to another child.

Checks returned by the bank shall incur a \$50 returned check charge. Future payments may be requested in cash or certified funds.

#### Drop-in fees:

Parents wishing to bring an established client for a day during a period when they have chosen to temporarily suspend enrollment may do so **pending availability of staff**. The drop-in fee for the 9:00-4:00 day is \$30.00 per day. The drop-in Stay and Play fee is \$10.00 per day, **if space is available**. Parents must notify the Director in advance to secure space for the day. This fee is payable when the child is dropped off at the center.

### **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.

### **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 parent to check this board for information daily.

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

Conferences will be scheduled two times per year to discuss the child's progress on curriculum goals. The Program Coordinators will schedule these conferences in October and May.

Any changes to ESNT policies will be communicated via written email or letter and the parent handbook will be updated to reflect those changes. Any time the parent handbook is updated, a new copy will be distributed to parents.

ESNT Child Development Center lead staff (Program Director, Program Coordinators, 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

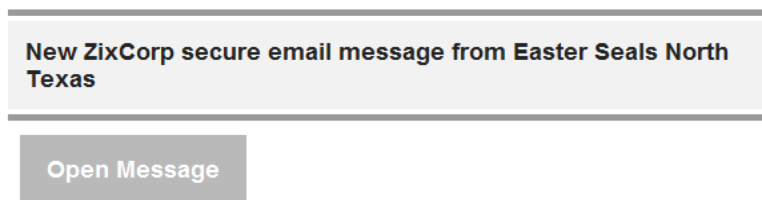
Protocol to review questions or concerns with center Director

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

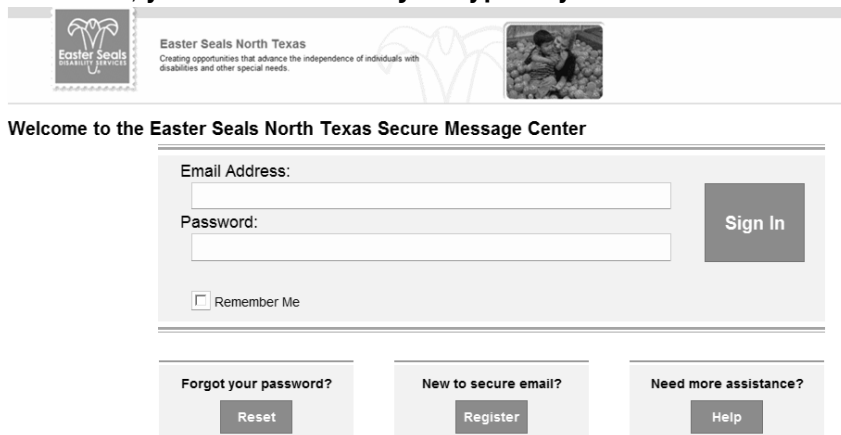
jwhitesides@ntx.easterseals.com. Communication and observations of any kind are strongly encouraged and welcomed.

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:



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.

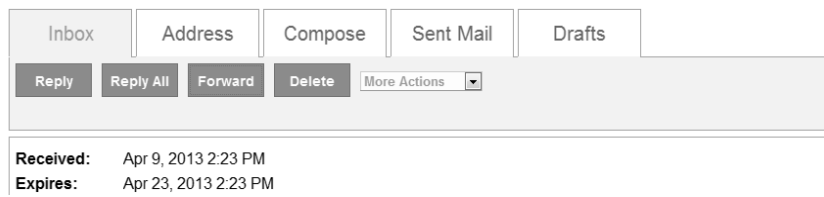


To register, all you need is your email address and a password. It is important you remember your password so that in the future you are able to use it to receive emails from us.

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.



Easter Seals North Texas  
Creating opportunities that advance the independence of individuals with disabilities and other special needs.



## **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 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.

## **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. Program activities begin at 9:00 am. To ensure a positive start to your child's day, children 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 required 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 during the first year of enrollment for vacation, and two weeks per year thereafter, without loss of enrollment in the program. If parents provide 2-weeks-notice to the Director, they will receive a 50% reduction in tuition for vacation weeks. A week is defined by the number of days the client attends in a given week. These days must be used in the same week and cannot be split across weeks.

#### **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 Parent/guardian/Guardian and remind them of the attendance policy. If the parent 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 parent's 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 parent 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 parent 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**

Texas State Law requires that each child enrolled in a school and/or child care facility be age appropriately immunized and have records on file at the school or child care facility. Parents must provide a copy of their child's current immunization records upon enrollment. If a parent does not wish to immunize their child, they must provide an affidavit from the Texas Department of State Health Services exempting their child from immunization due to reasons of conscience.

### **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 DIARRHEA 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. 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 parent 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 Director whenever a client or staff member becomes ill with one of the above listed illnesses. For reasons of confidentiality and to protect personal health information, clients' names and the class they attend will not be released.

## **STAFF IMMUNIZATION POLICY**

Easterseals North Texas has no vaccine requirements for employees of the ESNT Child Development Center. Easterseals North Texas Management Staff will regularly monitor local and state Public Health Services/Department of State Health Services (DSHS) guidelines and the Center for Disease Control (CDC) vaccine recommendations and requirements and the Department of Family & Protective Services/ Child Care Licensing website and provider memos and alerts and will review and revise requirements, if needed. Easter Seals North Texas recommends, but does not require, influenza vaccinations for all staff due to the various, vulnerable populations served by the agency. Easter Seals North Texas has specific guidelines related to staff actions when they are ill to protect the children served by the agency, their families and ESNT co-workers.

## **INCLEMENT WEATHER**

ESNT 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 parent 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, ESNT 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 call your home as soon 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 ESNT 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**

ESNT 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, ESNT requires the primary caregiver to complete a Personal Health Information (PHI) release form so that the staff can communicate with individuals outside of ESNT. These release forms are valid for one year from completion and can be obtained through The Program Coordinator or the front desk staff.

### **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 suspected abuse or neglect. Therefore, ESNT employees receive annual training in prevention and reporting of abuse, neglect and exploitation. ESNT employees are required to follow the law should a situation arise that causes them to suspect abuse or neglect.

The DFPS child abuse hotline number, 1-800-252-5400, is posted at every phone in the center. If you have any questions please speak with the Center Director.

## **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 a 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 ESNT Child Development Center with a certified copy of any custodial agreements issued by a court of law. ESNT 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 ESNT 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, ESNT cannot guarantee the child will not be released to that person.

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

## **REQUIREMENTS REGARDING GANG FREE ZONES**

As a result of House Bill 2086, information about gang-free zones must be distributed to parents of children enrolled in child care facilities. You may find this information posted on the parent bulletin board outside the office.

## **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 ESNT 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 ESNT 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**

ESNT 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 parent 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**

ESNT is committed to creating a safe, respectful environment that is focused on the needs of the client. Relationships between ESNT 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 ESNT 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.

ESNT staff members may only be contacted through ESNT phone numbers, emails or in person at ESNT work locations. If a family needs to contact ESNT staff members during enrollment or after discharge, they may reach out via ESNT 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 Parent/guardian/Guardian 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 Program Coordinator 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 parent. 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 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 ESNT treatment or common areas. All ESNT sites are nut free facilities.

Parents 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. If your child has been **diagnosed** with allergies by a medical professional, an emergency plan must be on file at the center. This plan must list the diagnosed allergy, possible symptoms if exposed, and steps to take if the child has an allergic reaction. This plan must be signed by a medical professional and be kept in every room the child may enter at the center. A copy must also be kept in any area where food is prepared.

## **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 parents 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 parents 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.
- 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, ESNT' extra clothing items will be used, if possible.

## **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**

ESNT 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 WORK ENVIRONMENT**

ESNT 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 ESNT, 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**

ESNT 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 parent 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.

## **ESNT 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, 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.



**Acknowledgement of Receipt:  
Child Development Center  
Client and Family Handbook  
Updated August 2016**

This acknowledges that I have been given the ESNT' 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 ESNT' 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:

\_\_\_\_\_ I understand that if I have any questions or concerns regarding any of the policies contained within this handbook, that I can ask the Program Director for clarification and/or rationale.

\_\_\_\_\_ I understand and agree to comply with the terms of the attendance policy (page 12) and the late pick up policy (page 13) as outlined in this handbook.

\_\_\_\_\_ I understand and agree to comply with the terms of the arrivals and departures procedures (page 11) as outlined in this handbook.

\_\_\_\_\_ I understand and agree to comply with the terms of late payment fees (page 9) as outlined in this handbook.

\_\_\_\_\_ I understand and agree to comply with the terms of the health policies (page 14) as outlined in this handbook.

\_\_\_\_\_ I understand and agree to comply with the terms of the medication procedures (page 22) as outlined in this handbook.

\_\_\_\_\_ I acknowledge that I have read and understand the policy on photographs and videotaping (page 18).

\_\_\_\_\_ I understand and agree to provide the center with any changes to who is authorized to pick up my child or changes to my contact information as soon as they occur.

\_\_\_\_\_  
Parent/guardian/Guardian Name (Printed)

\_\_\_\_\_  
Client Name

\_\_\_\_\_  
Parent/guardian/Guardian Signature

\_\_\_\_\_  
Date

## **ADMISSION PROCEDURES AND FORMS**

Please provide these items before or on the first day of class:

- Completed Admission form
- Fees: Enrollment fee and first month's tuition
- Copy of current immunization record from physician
- Signed doctor's statement of health
- Marketing release
- Confidentiality agreement
- Signed acknowledgment of receipt & understanding of this packet

<b>Client Name:</b>		<b>Chart Number:</b>		<b>Date:</b>	
<b>Date of Birth:</b>		<b>Chronological Age:</b> Year(s)      Month(s)		<b>Diagnosis:</b>	
Operation Name			Referral Source		
Child's Home Address			Child's Home Telephone No.		
Date of Admission		Date of Withdrawal		Days attending (Please circle ) Monday-Friday    Monday/Wednesday/Friday Tuesday/Thursday	
Parent's or Guardian's Name			Address (if different from child's address)		
List contact information below where parents/guardian may be reached while child will be in care. Circle preferred method of contact.					
Mother's/Guardian's Telephone No.		Father's/Guardian's Telephone No.		Alternate Telephone No.	
			Email-Mother/Guardian		
			Email Father/Guardian		
Give the name, address and phone number of person to call in case of an emergency if parents / guardian cannot be reached:					Relationship reached:
I hereby authorize the childcare operation to allow my child to leave the childcare operation <b>ONLY</b> with the following persons. Please list name & telephone number for each. Children will only be released to a parent or a person designated by the parent/guardian after verification of ID.					

<b>CHECK ALL THAT APPLY:</b>	I hereby <input type="checkbox"/> give <input type="checkbox"/> do not give    – consent for my child to be transported and supervised by the operation's employees:				
1. <input type="checkbox"/> <b>TRANSPORTATION:</b>	<input type="checkbox"/> for emergency care <input type="checkbox"/> on field trips				
2. <input type="checkbox"/> <b>FIELD TRIPS:</b>	I hereby <input type="checkbox"/> give <input type="checkbox"/> do not give    – my consent for my child to participate in Field Trips:				
<b>Parent's Comments:</b>					
3. <input type="checkbox"/> <b>WATER ACTIVITIES:</b>	I hereby <input type="checkbox"/> give <input type="checkbox"/> do not give    – my consent for my child to participate in Water Activities: <input type="checkbox"/> sprinkler play <input type="checkbox"/> splashing/wading pools <input type="checkbox"/> water table play				
4. <input type="checkbox"/> <b>RECEIPT OF WRITTEN OPERATIONAL POLICIES:</b>	I acknowledge receipt of the facility's operational policies including those for discipline and guidance.				
5. I UNDERSTAND THAT THE FOLLOWING MEALS WILL BE SERVED TO MY CHILD WHILE IN CARE:					
<input type="checkbox"/> AM Snack <input type="checkbox"/> Lunch (Provided by parents or guardian) <input type="checkbox"/> PM Snack					

<b>AUTHORIZATION FOR EMERGENCY MEDICAL ATTENTION:</b> In the event I cannot be reached to make arrangements for emergency medical care, I authorize the person in charge to take my child to:		
Name of Physician:	Address:	Ph.#:
Name of Emergency Medical Care Facility:	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 accommodations under the Americans with Disabilities Act (ADA), Title III. If you believe that such an operation may be practicing discrimination in violation of Title III, you may call the ADA Information Line at (800) 514-0301 (voice) or (800)-514-0383 (TTY).

\_\_\_\_\_  
Signature – Parent or Legal Guardian

\_\_\_\_\_  
Date



**Easterseals North Texas  
Development Center –Admission Form**

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

**IMMUNIZATION RECORD:**

I have provided the childcare operation with a copy of my child's most current immunization record.

I am excluding my child from the immunization requirements for reasons of conscience, including a religious belief. I have attached an official notarized affidavit form developed and issued by the Department of State Health Services. I understand this affidavit is valid for 2 years.

For additional information regarding immunizations contact the Department of State Health Services at [www.dshs.state.tx.us/immunize/public.shtm](http://www.dshs.state.tx.us/immunize/public.shtm)

**ADMISSION REQUIREMENT:** One of the following must be presented when your child is admitted to the child-care operation or within one week of admission.

Please check only one option:

1.  **HEALTH-CARE PROFESSIONAL'S STATEMENT:** I have examined the above named child within the past year and find that he / she is able to take part in the day care program.

\_\_\_\_\_ Health Care Professional's Signature      \_\_\_\_\_ Date

2.  A signed and dated copy of a health care professional's statement is attached.

3.  Medical diagnosis and treatment conflict with the tenets and practices of a recognized religious organization, which I adhere to or am a member of; I have attached a signed and dated affidavit stating this.

4.  My child has been examined within the past year by a health care professional and is able to participate in the day care program. Within 12 months of admission, I will obtain a health care professional's signed statement and will submit it to the child-care operation.

Name and address of health care professional:

\_\_\_\_\_

\_\_\_\_\_ Signature - Parent or Legal Guardian      \_\_\_\_\_ Date

<b>VISION</b>	R 20/ _____	L 20/ _____	<input type="checkbox"/> PASS <input type="checkbox"/> FAIL
SIGNATURE of person administering screening _____		DATE _____	
<b>HEARING</b>	<b>1000 Hz</b>	<b>2000 Hz</b>	<b>4000 Hz</b>
<b>R</b>			
<b>L</b>			
SIGNATURE of person administering screening _____			<input type="checkbox"/> PASS <input type="checkbox"/> FAIL
			DATE _____

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

Date: \_\_\_\_\_



**Easterseals North Texas**  
**Child Development Center – Doctor’s Statement of Health**

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

I have examined \_\_\_\_\_ in the past 12 months and  
he/she is in good health and can attend preschool.

Please list any concerns:

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\_\_\_\_\_  
Printed name of physician

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of physician

**Easter Seals North Texas - Marketing Authorization – 18 and Under**

I understand that ESNT 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 ESNT Programs. These items may be used by ESNT (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 ESNT. (i.e., “Anna, ESNT” 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 ESNT 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 mark if you **agree/do not agree** to each phrase below)*

1. I **agree/ do not agree** to my child’s picture being taken by ESNT or their contractors/ agents.
2. I **agree/ do not agree** to the release of my child’s picture/ photograph, video, audio, artwork or likeness with my authorization.
3. I **agree/ do not agree** to the release of my child’s first name only with a picture or likeness of my child’s picture/ photograph, video, audio, artwork or likeness with my authorization.  
**If I marked “do not agree” for #1, #2, and/or #3:**
4. I **agree/do not agree** to being approached in the future about opportunities on a project by project basis.

I am the parent or legal guardian of \_\_\_\_\_, a child under the age of 18 years old.

I have read this release and authorization before signing below, and I fully understand its contents.

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Printed Name of 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 ESNT have the right to patient confidentiality. Therefore, all visitors/volunteers are required to ensure the privacy of clients and families receiving services at ESNT.

I, \_\_\_\_\_, agree to adhere to the above policy and preserve the privacy of all ESNT' clients and families. I will not divulge any specific client information, including names, etc. unless given written permission from the client/family to do so.

If I violate this policy, I understand that ESNT is not liable for any actions brought against me by client and/or family.

\_\_\_\_\_  
Visitor/Volunteer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent of Visitor/Volunteer Signature  
(If Visitor/Volunteer is a minor)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness



**Easterseals North Texas**  
**Consent to Evaluate and Treat**  
**Acknowledgement of Notice of Privacy Practices**  
**Acknowledgement of Notice of Program Accessibility**  
**Acknowledgement of Notice of Nondiscrimination Policy**

Client's Name (Printed):	Chart #:
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**I, the undersigned, am the adult consenting client named above or the true and legal guardian of the above named client or for whom I have legal guardianship.** I hereby authorize ESNT (ESNT), a Texas non-profit corporation, (dba ESNT, Inc. operating at any of its several locations: 4201 Brook Spring Dr, Bldg II, Dallas, TX, 75224; 4443 N Josey Ln, Suite 100, Carrollton, TX, 75010; 303 West Nash Street, Grapevine, TX, 76051; 1424 Hemphill Street, Fort Worth, TX, 76104), to perform evaluations and/or treatment services.

I understand that ESNT is a training site for students. As such, students supervised by qualified staff members of ESNT may be involved in the direct programming for clients. I understand that ESNT may use or disclose any and all information about clients for its use in the student-training program, an operation of ESNT.

I understand that I must and do give my consent to ESNT to arrange for emergency medical treatment for the above named client in case of an emergency. I understand that federal law permits ESNT to release any protected health information necessary about the above named client for any such emergency treatment. I give consent for ESNT to secure any and all necessary emergency medical care for the above named client, including allowing trained staff members to perform CPR and first-aid procedures.

I release ESNT, its Board of Directors, employees, contract staff, and volunteers for any and all liability, claims, or suits, which may result from the above named client's participation in the program provided by this agency.

**I acknowledge that ESNT has provided to me a reviewable copy of:**

- **Notice of Privacy Practices:** This notice explains how my protected health information is used and disclosed by ESNT for treatment, payment, operations, and other uses under Federal HIPAA and other laws. This notice explains my rights regarding my protected health information. I understand and I am entitled to receive a copy of this document and the notice upon request.
- **Notice of Program Accessibility:** This notice outlines the agency's policies to ensure programs and facilities are accessible to all clients, in accordance with civil rights laws.
- **Notice of Nondiscrimination Policy:** This notice outlines uniform guidelines in order to promote an environment that is free of discrimination and harassment, and to affirm the agency's commitment to equal opportunity.

**I have reviewed these documents and understand I am entitled to receive a copy of the above documents upon request.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (Printed)

\_\_\_\_\_  
Relationship to Client



## Financial Information Form

Date: \_\_\_\_\_

DOA: \_\_\_\_\_

Patient's Name (Printed):	Chart #:
---------------------------	----------

Person Responsible For Payment			
Name:		Social Security Number:	
Address:		Phone Number:	
City:	State:	Zip:	County:
Employer:		Phone Number:	

The Financial Counselor will prepare and submit an insurance claim form to your insurance company. You will be asked to "assign benefits" to Easter Seals.

Primary Coverage	
Name of Insured:	Social Security/ID Number:
Name of insurance company:	Phone Number:
Mailing Address:	

Secondary Coverage	
Name of Insured:	Social Security/ID Number:
Name of insurance company:	Phone Number:
Mailing Address:	

Other Coverage		
<b>Medicare/Medicaid:</b>	Recipient's Name:	Card Number:
<b>CSHCN:</b>	Recipient's Name:	Card Number:

### Authorization of Assignment of Benefits and Record Release

I hereby assign, transfer and set over to ESNT (ESNT) all my rights, title and interest to my medical reimbursement benefit under my insurance policy for all services rendered at ESNT. I authorize ESNT to release, when requested by my insurance company, any medical records with respect to the client's medical history with ESNT. If necessary, I authorize ESNT to act on my behalf and/or the client's behalf during the appeal process of any ESNT services denied by my insurance company or Medicaid plan. A photo static copy of this authorization shall be considered as effective and valid as the original.

\_\_\_\_\_  
Insured's or Authorized Person's Signature

\_\_\_\_\_  
Date

**PAYMENT IS DUE ON THE DAY OF SERVICE.**

**IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT A FINANCIAL COUNSELOR AT 817-759-7931**

*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:**

**Military Status:**

- None                       Active Duty                       National Guard/Reserve
- Veteran                       Member of a military/veteran family

**Race/Ethnicity:**

- Asian     Aboriginal
- Non-Hispanic Black                       Non-Hispanic White
- Hispanic     North American Indian and Alaska Native
- Native Hawaiian and Other Pacific Islander
- Multiple Ethnicity                       Other

**Individual/Household Income:**

- \$0- 9,999/year                       \$10,000- 19,999/year
- \$20,000- 34,999/year                       \$35,000- 49,999/year
- \$50,000- 99,999/year                       \$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!*