



CLIENT HANDBOOK

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WELCOME LETTER

Welcome to our Every Day Counts Family!

I am so excited that you have made the decision to entrust us with your most precious gift – your child. We are committed to working with you and your family to maximize your child’s progress by using the techniques of Applied Behavior Analysis (ABA). We recognize that every child has different strengths, challenges, and needs. At EDC, each child has an individualized program that will work with you to help your child reach their fullest potential.

We are a highly inclusive, culturally sensitive, culturally respectful, and culturally competent organization. We will make every effort to ensure you are always treated with respect and dignity, in consideration of the following (but not limited to): racial, ethnic, or cultural customs, practices, and beliefs; sexual orientation; gender, gender identity, and gender expression; disability, and community differences.

Further, EDC will take reasonable steps to ensure that those with Limited English Proficiency (LEP) have meaningful access and equal opportunity to participate in our services, activities, and programs.

Working with you, the families is what allows us to make an even larger difference. We will develop a partnership throughout this journey. This handbook was designed to provide every caregiver with information that will allow us to operate in-home, school, and center based services with a common understanding of what is critical to teaching and learning, as well as policies and procedures that help us keep everything running smoothly. Please ask any questions you have regarding its contents. We are always willing to listen and discuss. Our program is a cooperative effort between you and our staff. Together we can make a difference in your child’s path to learning.

I look forward to working with you and your family.

Sincerely,



Kakie Fontenot, M. Ed., BCBA, LBA
Executive Director

MISSION STATEMENT

Our mission of Every Day Counts – ABA Therapy Center is to provide services to individuals with autism and other developmental disabilities using the science of Applied Behavior Analysis. We assist our students in reaching their full potential and improve their quality of life. We strive to help students of all ages and developmental levels. Treatment involves teaching communication, life skills, listener skills, social, self-care and school readiness.

2025 CLOSURES (UPDATED)

Closures	Date
Return from Winter Break January 2 nd , 2025	
Mardi Gras	March 3 rd
Good Friday	April 18 th
Spring Break	April 24 th & 25 th
Memorial Day	May 23 rd & 26 th
Independence Day	July 4 th
Labor Day	Sept 1 st & 2 nd
Thanksgiving	Nov 26 th , 27 th , & 28 th
Winter Break	Dec 24 th – Jan 2 nd (students return 1/5/26)
<i>Professional Development Days- May 23rd, September 2nd, Jan 2nd, 2026 (No school for students)</i>	

2025 Early Dismissals (1:30)

February 7 th
March 7 th
May 2 nd
June 6 th
August 1 st
October 3 rd

Every Day Counts – ABA Therapy Center

Mailing Address: PO Box 44

Livonia, LA 70755

UPDATED: 12/10/24

Phone: 225-713-144

Fax: 225-638-2030

info@everydaycounts-aba.com

www.everydaycounts-aba.com

SERVICES IN APPLIED BEHAVIORAL ANALYSIS

Our team provides a range of services to help your child and your family. All programs are created from research-based strategies and developmentally appropriate curriculum. All services provided utilize the data collection and review procedures required for evidence-based ABA practices. The teaching of treatment goals is done in a one on one or group setting in a natural environment (NET) while using the Learn Unit (LU). There is an emphasis on Verbal Behavior. These services include:

Social Skills Training:

- One-on-one settings
- Play dates - facilitated peer play
- Social groups - small groups customized for your child, his/her goals, with his/her peers, and in his/her community

Play Skills: Age-appropriate skills are taught

- Toy play
- Pretend/imaginative play
- Cooperative play
- Imitation

Communication Training: Strategies are used to increase appropriate communication. Strategies include:

- Mand Training (requesting)
- Picture Exchange Communication System (PECS)
- Assistive Technology (AAC Device)
- Vocal speech
- Conversational language
- Commenting
- Turn taking
- Staying on topic
- Decrease problematic behavior by teaching increasing functional language skills and teaching replacement behaviors.

Self Help Skills:

- Toileting
- Dressing
- Sleeping
- Feeding

Functional Behavior Assessment: Functional Behavior Analysis (FBA) is an attempt to identify the maintaining variables of a particular behavior and hypothesize what function it may be serving

for a child. Truly understanding why a child behaves the way he or she does is the first, best step to developing an effective intervention.

Behavior Intervention Plan: Behavior Intervention Plan (BIP) takes the observations made in an FBA or FA and turns them into a concrete plan of action for managing a child's behavior. A BIP may include ways to change the environment to keep behavior from starting in the first place, provide positive reinforcement to promote desired behavior, withhold reinforcement from undesired behavior.

Assessments: VB-MAPP, ABLLS-R, AFLS, Vineland, informal Parent / guardian(s)/ teacher interview & observation, social skills inventory, reinforcer inventory, sensory integration checklist and other developmental checklists. Assessments are used to guide program development. They are NOT used to diagnose.

Daily Living Skills: We assist in teaching your child day-to-day self-help skills; for example, dressing, eating, grooming, household chores, etc.

Other: We also can assist in community outings, family activities, doctor appointments, haircuts, developing schedules/routine, and improve sibling relations.

School Consultation:

- **Shadow Services:** one-on-one assistance in-group settings, such as private schools, daycares, camps and learning centers. Shadowing can assist with behavior, communication skills, social skills, etc. Shadow services are only optional per employee availability.
- **In School Facilitation:** help to collaborate with teachers and professionals to accomplish common goals .
- **Training Opportunities:** paraprofessional training, teacher workshops, etc.

IEP Review: Assist in creating IEP goals with the Parent / guardian (s), teacher, and administrator. We can also attend IEP meetings to help advocate in the best interest of the child. Collaborate with Parent / guardian (s) to understand how to navigate the IEP process.

Academic Assistance: Assist Parent / guardian (s) and teachers in identifying strengths, weaknesses, and possible skill deficits with academics and help to provide strategies and break down skills for your child to have more success with schoolwork and homework.

Program Development: This includes ongoing assessments, data compilation, task analysis, program updates, reports, review any given documents, development of treatment plans, and sometimes direct instruction training program management.

SECTION 1: HEALTH & SAFETY

OBLIGATION TO REPORT

Any suspected abuse and/or neglect of a child in our program will be reported in accordance with L.A.R.S. 14:403 to the local Child Protection Agency (Office of Child Services). If signs of suspected child abuse are present the staff will immediately notify an Executive Director and report to DCFS. Signs of injury are documented by staff as noticed upon a child's arrival or later during the day.

EVIDENCE-BASED ABA PRACTICES

EDC utilizes Evidence-Based Practices (EBP) as means for decision-making in order to integrate the best available evidence with client needs and circumstances, and clinical expertise. This practice allows EDC to provide services uniquely matched to each client and its framework provides behavior analysts with a structure for pervasive use of the best available evidence in the complex settings in which they work.

Through the use of EBP, EDC is able to clearly and explicitly recognize evidence supporting intervention options, understands the importance of contextual factors including client values that contribute to decision making, and the key role of clinical expertise in the conceptualization, intervention, and evaluation of cases.

WELLNESS POLICY

To minimize the spread of illness, EDC's wellness policy requires that a session is cancelled if the client or EDC employee displays one or more of the following symptoms and guidelines listed below. **The child must be picked up within one hour of being called.** Reschedules are only done in home settings, not center. If neither parent can be reached, other persons listed on your intake forms will be called. It is important that all telephone numbers and information be kept current.

Exclusion period = when child may return

Diarrhea Policy

- *Frequency:* 3 loose stools or watery bowel movements in one day
- *Exception for other symptoms:* 1 occurrence of diarrhea if combined with fever or vomiting
- *Exclusion Period:* must be 24 hours free of diarrhea without the use of medication

Eye Discharge Policy

- *Exclusion Criteria:* thick mucus or pus from eyes, when discharge is noticed, pinkish/red swollen or irritated eyes

- *Exclusion Period:* When exclusion criteria are resolved or with a doctor's note stating the child is not contagious and return date

Fever Policy

- *Temperature threshold:* greater than 100.4 degrees
- *Exclusion Period:* must be 24 hours fever free without the use of fever-reducing medicine.
- *Recurrence Policy:* If the child is sent home with fever for a second time within a 72 hour period, the child must have a doctor's note before returning.
- *Important:* Children are unable to return until fever is reduced **without** fever reducing medication for at least 24 hours.

Lice Policy

- *Exclusion Criteria:* Evidence of lice, not including nits.
- *Exclusion Period:* Students diagnosed with live head lice do not need to be sent home early from school (per the CDC); they can go home at the end of the day, be treated, and return to class after appropriate treatment has begun. Nits may persist after treatment, but successful treatment should kill crawling lice. If exposure occurs or possibly occurred, parent/guardian will be notified so precautions can be made.

Rash or Infection of the Skin Policy

- *Diaper Rash:* If sores are oozing and leak body fluids
- *Hand, foot & mouth syndrome:* spots/bumps/lesions are noticed or present in the following areas: hands, feet & mouth, diaper area, thigh/legs.
 - *Exclusion Period:* Fever free for 24 hours without fever reducing medication. If lesions/spots are still present, the child must have a doctor's note stating when the child is no longer contagious
- *Itching:* Suspected to be caused by any of the following: scabies, impetigo, or ringworm
 - *Exclusion Period:* when exclusion are resolved or with a doctor's note stating the child is not contagious
- *Rash (skin/scalp):* unidentified rash is noticed and is accompanied by behavior change, persistent itching, fever, oozing/open wound/sores, child is unable to participate in something they would typically participate in
 - *Exclusion Period:* when exclusion criterion is resolved or with a doctor's note stating the child is not contagious and return date
- *Chicken pox:* When lesions are noticed or present
 - *Exclusion period:* when all lesions are dried and crusted. Typically takes 6+ days and doctor's return date

Respiratory Symptoms Policy

- *Exclusion Criteria:* excessive coughing, rapid or shallow breathing, croup, or whooping sound after coughing, unable to lie comfortably due to continuous cough

- *Exclusion Period:* when exclusion period is resolved or with a doctor's note stating the child is not contagious and the child can cope with the daily routine activities

Strep Throat Policy

- *Exclusion Criteria:* child has positive strep culture
- *Exclusion Period:* after 24 hours of antibiotic medicine and note with return date

Vomiting Policy

- *Number of episodes:* 2 if no other symptoms are present
- *Exception for other symptoms:* 1 occurrence of vomiting if combined with fever or diarrhea
- *Exception:* gagging/minimal drool/spit-up due to excessive crying/anxiety does not constitute vomiting
- *Exclusion Period:* must be 24 hours vomit free without the use of medication

Parent / guardian (s) acknowledge that if their child exhibits any of these above symptoms, they should contact the employees at EDC to cancel and reschedule their child's session (if in-home). If for any reason your child did not attend school due to an illness or was sent home early due to an illness, there should be no therapy session that day. **Parent / guardian (s)** agree to notify the employees within 24 hours of the diagnosis of a serious contagious illness or parasitic infestation. **Parent / guardian (s)** acknowledge that in some instances sessions will be canceled until we have written permission from a doctor saying their child is well enough to resume therapy sessions. This is for the child's well-being, along with the well-being of the employees.

Please notify the Supervisor of any illness that your child, you, or other children in the home may have. We will also contact you if any therapist has any illnesses. In the case that your child's session is cancelled due to an illness of an employee, you will be contacted immediately.

AGGRESSIVE BEHAVIOR

EDC employees have the right to work and provide services in a safe environment that supports personal worth and dignity through mutual respect, cooperation, and understanding. As such, EDC will not tolerate any violent or aggressive behavior, discrimination, or harassment towards any of our workforce members.

Any adults in the home are expected to treat employees working in their home with dignity and respect and EDC will not tolerate behavior that would be considered offensive, intimidating, sexual, or unwelcome in any way.

Violence and aggression, such as physical force, threatening behavior, or verbal abuse are strictly prohibited toward the employee, client, or other members or animals within the household. If the employee feels discomfort or is concerned for their personal safety, they will leave the

premises and immediately notify the Supervisor or Director of Clinical Services who will then notify appropriate authorities if necessary. If the environment continues to remain unsafe or non-conducive to effective therapy, EDC may have to discontinue services and refer the client to another service provider.

EMERGENCY CONTACT

Parent's work phone numbers and other emergency contacts are kept on file in the office. It is the parent's responsibility to notify the office if any of the contact information changes.

AUTHORIZED PICK-UP

When parents are provided with service contracts, they are asked to complete and return an Authorized Pick-Up List (for center based clients). This form lists the people who may pick-up your child from the center. If it becomes necessary for someone to pick up your child that is not on the list, permission must be given in writing designating who the authorized person will be. Verbal communication is not sufficient for legal notification.

CUSTODY OF CHILDREN

EDC presumes that both biological parents have access to their children unless a parent provides legal evidence of sole custody rights. It is the custodial parent's responsibility to provide EDC with a court certified copy of a court order signed by the judge. Copies of legal documents (custody of the child, court approved guardianship or tutorship, or court approved visitation rights) must be on file in the office. Unless a court has ruled otherwise, non-custodial parents have the right to copies of the children's academic records and to discuss the child's progress with school personnel. Custody matters between parents or guardians are to be settled off campus.

MEDICAL EMERGENCIES

When a medical emergency arises, every effort will be made to contact Parent / guardian (s) or an emergency contact. If Parent / guardian (s) or emergency contacts cannot be reached, the Supervisor and Director of Clinical Services will decide the next step, which may consist of calling 911. In an extreme emergency, the employee may, at their discretion, call 911 before contacting the Parent / guardian (s) of the child. An authorized representative from the clinic will accompany the child and remain with him/her until their caregiver arrives. Our emergency information form, filled out at the time of enrollment, serves as consent for your child to be transported by ambulance to a local medical facility to receive emergency care. EDC assumes no responsibility for the costs associated with emergency care. EDC employees do not transport children to medical facilities at any time.

Designated employees in the center setting receive training in CPR and first aid. All employees are trained in fire and tornado procedures.

EMERGENCY PICK-UP POLICY

Parents should always be ready to pick up their child from the clinic within one hour's notice at all times, in the event of an unexpected emergency such as client illness or emergency closure. Parents should have also identified alternate emergency contacts that may pick up the child in the event of an emergency if the parents are unable to be reached. A therapist will remain with a client at all times until a parent or emergency contact arrives to pick up the child. If an alternate contact person is going to pick up the child, it must be sent to info@everydaycounts-aba.com in order to be released to the alternate person. An ID will be checked of the alternate contact before releasing the child to their care.

ACCIDENTS

In the case of minor accidents on site, there are First aid kits on site and designated employees are required to have up to date CPR and first aid training. Any non-emergency accidents will be documented on an incident report, including the date, time, place, and cause of any injury (if known); any treatment provided; name(s) of employees providing treatment, and persons contacted. The child's Parent / guardian (s) will be contacted if skin is broken such as from a scrap or scratch, a head injury occurs or if medical attention is needed.

ALLERGIES

If your child has allergies, please discuss them in detail with the Supervisor or Director of Clinical Services during the intake process. All food allergies are to be documented, including effects and treatment, and signed by both the Parent / guardian (s) and the child's doctor. This information must remain in the child's file, as well as in the food preparation area, and be updated annually. The employees of the clinic will take appropriate precautions based on information provided by the client. If at any time your child develops an allergy, please let us know immediately.

NUTS

EDC is NOT a nut-free facility. This includes peanuts, as well as tree nuts, such as almonds, cashews, walnuts, pine nuts, etc. Parent / guardian (s) should notify employees immediately if their child/children have any nut allergies for policies to be put in place.

INFECTIOUS DISEASES

When a communicable disease has been introduced, the clinic will report these occurrences to the state and local health departments when required. Parent / guardian (s) are urged to notify

the clinic when their child is known to have been exposed to a communicable disease outside the clinic.

The Supervisor or Director of Clinical Services may determine that a child who does not appear to be fully recovered from an illness cannot be readmitted to the clinic without a statement from a physician stating that the child can return and participate in the activities of the clinic or is no longer infectious.

We reserve the right to refuse care due to illness.

INJURIOUS BEHAVIOR

If at any time a child engages in injurious behavior to employees, his/herself, or other children, the Supervisor or Director of Clinical Services is notified, and an incident report is created. The Supervisor or Director of Clinical Services will decide how best to minimize the potential harm to the child, employees, and others. In some cases, the child can be removed from a group setting to a more traditional one-on-one therapy session. The Supervisor may reintroduce the child into the group setting at the point in time it is determined that the child needs more direct assistance. The Parent / guardian (s) will be notified of the change in treatment and any appropriate options that can be offered to remain in the group. If the Supervisor or Director of Clinical Services feels there is a possibility of serious harm to the child or others, the Parent / guardian (s) will be contacted to discuss immediate safety options such as picking up the child as soon as possible or going in to the break out room.

If behaviors continue, a Level 3 behavior plan will be written. Your child's BCBA/BCaBA will determine the frequency that meetings will be held in order to monitor progress. Lack of progress may result in dismissal from the program for the safety of the client(s) and or employees.

ELOPEMENT BEHAVIOR

If client has a history of engaging in elopement behavior, sessions should only take place in approved locations such as in the client's home or in the clinic setting, until the behavior has been effectively managed in these settings. Any employees working with clients who engage in elopement should be trained in safety to safely manage these behaviors. Any client who engages in potentially dangerous behaviors, must have a formal behavior intervention plan and crisis management plan in place that outlines all the protocols, procedures, and interventions to be utilized for that particular client. Any occurrence of elopement within the home, clinic or community settings must be reported immediately to the Supervisor and an incident report should be documented and provided to the Parent / guardian (s) indicating what strategies were utilized to intervene.

MEDICATIONS

EDC believes that children who are ill should remain out of the center until they are well enough to return to daily activities without posing health concerns to other children. However, in compliance with the American Disability Act, we recognize that sometimes children will need medication to help maintain their health and well-being and also to recover from an illness. In these circumstances, we agree to administer medication.

In order for any medication to be administered at EDC to any child, the following is required:

- a. Request for EDC Personnel to Administer Medication must be completed, signed by a parent or legal guardian and returned prior to medication administration and updated every year.
- b. The medication must be clearly labeled with the child's name, must have the original label still attached, and must not be expired.
- c. Medication dosage information on the label must match dosage information provided by the parent on Request for EDC Personnel to Administer Medication form. Any time there is a discrepancy or if the medication label reads, "Consult Physician", medication cannot be administered without a physician's note specifying dosage.
- d. The morning dose or initial dose of any medication should be given at home. A new medication should not be started at EDC because of possible reactions.
- e. For prescription medications given at the center or at home, a copy of the pharmacist's printout of information about the medication including possible adverse reactions must be turned in to the office. EDC will not administer any prescribed medication without this information.
- f. All medications must be delivered to the office and reviewed with the Supervising BCBA. Medication can NEVER be sent in the child's book bag or given to a line therapist or delivered during carpool. Any medication not delivered to the office will not be administered.
- g. Medication is given to a child at EDC only when the dosage schedule does not allow the medication to be given at home.
- h. Over the counter medications will be administered with a note from the physician showing medical necessity and directions on the Request for School Personnel to Administer Medication.
- i. EDC will only administer oral medications, skin creams, ointments and sprays, emergency inhalants, and emergency injections.
- j. Any parent/legal guardian that wishes to administer medications at EDC must follow the same protocol as staff. Including documentation, administration procedure, and completion of required forms.

Storage and dosage of Medication

- a. All medicines will be kept in a locked, designated area in the Front Office.
- b. Refrigerated medicine will be kept in a locked bag in the refrigerator to ensure it is separated from food products.
- c. Medicine will only be administered by the Clinical Director, Receptionist, or Trained Supervisor.

Administration of PRN Medication: Children sometimes have medical needs that can be met at EDC by administering over the counter medications. Parental consent and Request for School Personnel to Administer Medications form is required.

PANDEMIC

In the event of a pandemic within the area, EDC may close for an undetermined amount of time to ensure prevention of further spread of disease. We will follow any requirements issued by the Department of the Public Health.

SECTION 2: PARTICIPATION

Caregivers are integral to the success of each child. EDC includes Parent / guardian (s) in all aspects of therapy from goal and objective development to treatment strategies and behavior management skills. All treatment plans provided utilize the data collection and review procedures required for evidence-based ABA practices. The consistency of programming across settings is our ultimate goal. EDC's clinicians are available to train Parent / guardian (s) in the areas of behavior management and the application of intensive teaching procedures to enable Parent / guardian (s) to become part of their child's therapy team.

The level, intensity, and frequency of Parent / guardian (s) training will be included in your child's Individualized Treatment Plan (ITP).

Parent / guardian (s) **Commitment:** To ensure effective implementation of the treatment plan/programming, EDC requests the following commitments listed below as they are critical to your child's successful therapy and will attempt to correct an issue, otherwise the service plan may be terminated.

- Active participation in training regarding the child's programming and behavior reduction protocols.
- Consistency with the child's treatment plan and behavior reduction protocols.
- Immediate communication via info@everydaycounts-aba.com or 225-713-1442 (if necessary) with the Supervisor if unsure about how to implement a program/protocol.
- Immediate communication via email (phone if necessary) with the Supervisor from the Parent / guardian (s) if there is a concern that a program/protocol is not being implemented correctly or working effectively.

Procedure for Lack of Participation: The following is an explanation of the steps that will be taken if a Parent / guardian (s) is not participating in their child's programming.

The first time that a Parent / guardian (s) does not meet one of the participation requirements, the Supervisor will

1. Remind the Parent / guardian (s) of their required participation and try to determine what the barriers to service may be to encourage Parent / guardian (s) compliance.
2. The second time that a Parent / guardian (s) does not meet one of the participation requirements, the Supervisor or Director of Clinical Services will provide the Parent / guardian (s) with a written notice reminding the Parent / guardian (s) of the participation policy. The notice will clearly explain to the Parent / guardian (s) where their participation is lacking.
3. The third time that Parent / guardian (s) does not meet one of the participation requirements, the Supervisor and Director of Clinical Services will meet with the Parent / guardian (s) and provide them a final written notice reminding the Parent / guardian (s) of the participation policy. The notice will clearly explain to the Parent / guardian (s) where their participation is lacking. The Supervisor and Director of Clinical Services will work closely with the Parent / guardian (s) to provide the training necessary to correct the issue. Additionally, the notice will explain to the Parent / guardian (s) that if the Parent / guardian (s) does not meet the participation requirements again, the child's services will be discontinued.
4. The fourth time that a Parent / guardian (s) does not meet one of the participation requirements, the child's services will be discontinued on the grounds that EDC cannot provide effective treatment and the child will be referred to a different provider.

The ABA therapy team will work closely with every Parent / guardian (s) to ensure that Parent / guardian (s) training is both helpful and effective for every Parent / guardian (s). When issues arise, the Supervisor will work closely with the Parent / guardian (s) to determine how best to resolve the issue. When Parent / guardian (s) participate fully in their child's programming, they should see more progress from their child and have a better understanding of how to respond to various behaviors.

Participation Requirements: Please see your child's Individualized Treatment Plan (ITP).

COMMUNICATION

Communication is a vital role for many several reasons. Our goal at EDC is to respond to all emails, phone calls, or texts within 24 hours during regular business hours*. There may be times that we respond with a notification stating that we may need more time to respond.

Parent / guardian (s) acknowledge replying to phone calls or emails from employees within 24 hours or the next business day if over a weekend or holiday. If you do not have time to respond to the communication from an employee within 24 hours, email, call or text to indicate when you will be able to respond so that we are aware that you received the communication.

Point of Contact	Reason
BCBA Supervisor: <ul style="list-style-type: none"> • Cameron Brandt: 225-718-6425 • Kelly DeRoche: 225-718-6415 • Michaela Bergeron: 225-718-6423 	<ul style="list-style-type: none"> - Notify the team of an illness - Request schedule change - Ask questions about schedule - Notify team of dates/time your child is not available for reasons (i.e., dr. appt, vacation, etc.) - Schedule caregiver training - Discuss particular issues or ask questions regarding your child's program
Billing.edc.aba@gmail.com	<ul style="list-style-type: none"> - Ask questions or discuss concerns about your invoice, balance, etc. - Request tax documents invoices, statements, receipts - Discuss any issue regarding insurance, CPT codes, etc. - Invoices will be sent from this email.
info@everydaycounts-aba.com	<ul style="list-style-type: none"> - This email is only seen by the Directors - Voices concerns or discuss any matter in which you would like to keep confidential.
info@everydaycounts-aba.com	File a formal complaint

Business hours are from 8:00 am to 4:00 pm Monday-Friday

PARENT / GUARDIAN (S) INTERACTION WITH EMPLOYEES & DUAL RELATIONSHIPS

The nature of our profession often involves that we work intensively with the clients and families we serve. For this reason, we require that Parent / guardian (s) maintain a friendly relationship with employees, but not a personal relationship. Parent / guardian (s) acknowledge that any relationship outside the therapeutic one is completely inappropriate.

Dual relationships include, but are not limited to babysitting, acting as a nanny, bartering of services of goods, giving of gifts, friendships, sexual relationships, etc. This pertains to both past and present employees and dual relationships are also prohibited by the BACB's code of ethics. EDC strives to hire the best employees; however, as at-will employees, staff may leave our company for various reasons and with or without adequate notice. Due to the confidentiality, we hold with our employees and client, we cannot go into detail about why an employee left the

company. This is for the protection of EDC and for our clients, however, we will make every attempt to ensure that staff changes are not disruptive to a client's services.

Parent / guardian (s) acknowledge that EDC does not ever allow employees to transport clients or clients' family members in their personal vehicles. In addition, a Parent / guardian (s) or other adult (18 or over) must be present in the home at all times while services are taking place. Services cannot take place without a responsible adult present in the home.

SEMI-ANNUAL MEETINGS

Every six months, you'll be invited to meet with your child's BCBA supervisor. During this time, the current treatment plan will be reviewed as well as goals being working on in the home environment. This is a great time to share any issues occurring at home that you would like for us to help you address so that they can be incorporated into your child's program. Parents may request additional meetings at any time.

CANCELLATIONS AND MISSED APPOINTMENTS

Keeping your scheduled session appointments is a vital part of the treatment process. When you make an appointment at EDC, you are asking a professional to hold a specific block of time for you. To efficiently serve you and others, EDC has instituted a 24-hour notification policy for cancelling an appointment.

In order to be respectful of the medical needs of our clients, EDC requests that each client call the supervising BCBA promptly if you are unable to attend an appointment. If it is necessary to cancel/reschedule your appointment, we ask that you call us at least 24 hours in advance. To cancel any appointment, please call our office at 225-713-1442 or the supervising BCBA (numbers above).

If two (2) or more appointments are missed consecutively, EDC respectfully reserve the right to terminate our relationship, with the client.

SCHEDULE CHANGE REQUESTS

To request a general schedule change, go through your child's assigned BCBA Supervisor.

EMPLOYEE CANCELS OR RUNNING LATE (IN-HOME ONLY)

If your child's session will be canceled or rescheduled by EDC, you will be contacted. If the Line Technician assigned to the session is running more than 15 minutes late, you will be contacted as soon as possible. The Line Technician may stay later than scheduled to make up the time missed or make time up on time on another day if available. You will only be charged for the time we work with your child.

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UPDATED: 12/10/24

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Please notify your Supervisor or the Director of Clinical Services of excessive tardiness. We may need to re-evaluate schedules (re: drive time, traffic, time of day, etc.).

EXCESSIVE LATENESS/TARDINESS, NO-SHOWS, CANCELLATIONS

All sessions are by appointment only and scheduled with a specific therapist(s). It is the client's responsibility to attend all scheduled appointments.

Should an appointment need to be cancelled, a 24-hour notification is appreciated whenever possible. All cancellations MUST be made by call or text by 7:00 a.m. the day of your child's therapy session, 225-713-1442 or supervising BCBA (number above).

If a break in therapy lasting longer than 1 week, your child will be removed from the schedule, unless prior arrangements have been made. It is the parent's responsibility to make necessary arrangements and to notify the office of any scheduling conflicts.

If 85% or more *scheduled* therapy sessions are not kept within each calendar month, your child's therapy hours will be reduced or removed from the schedule. This includes late arrivals and early departures.

If 2 or more No Shows occur within a calendar month, your child will be removed from the schedule.

Therapy sessions are scheduled back-to-back. This makes timeliness at the start and end of each session very important. The parent or authorized person responsible for picking up the child at the end of his/her session should be in the lobby 5 minutes prior to the scheduled time end. Late Pick Up Fees will be accrued at \$5 per minute if late pick up is a consistent problem. These fees CANNOT be billed to the insurance provider and will be due at the time of the next scheduled appointment. Failure to pay late pick up fees may result in your child being removed from the schedule.

By my signature below, I acknowledge that I have read the terms outlined in the Cancellation, No Show, and Late Pick-Up Policy, and agree to honor the terms of this policy.

PHOTOS AND VIDEOS

EDC staff likes to take pictures and/or videos of the children routinely and will share them with EDC families and on Facebook. We provide each parent with a Photo Video Release form in order to obtain consent to take pictures of your child and use them on the EDC website, facebook page, clinic brochures, or other publications deemed appropriate by EDC. This signed form also grants EDC permission to take and use videos of your child for assessment and/or employee training purposes. If you do NOT want pictures to be taken and displayed of your child, please indicate this on the Photo Video Release form.

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SECTION 3: IN-HOME

PETS AND ANIMALS

EDC recognizes that some employees may have allergies or discomfort around certain animals. To prevent discomfort or distraction, we ask that you keep any non-service related animals in a secured separate room, space or area, or outside during all home visits.

This policy includes the arrival or departure of the therapist.

This policy refers to, but is not limited to: dogs, cats, birds, snakes, reptiles, rabbits, rats, hamsters, guinea pigs, etc.

This policy excludes service animals. For further information see handbook supplement.

In the case of non-compliance, the therapist has the right to leave the premises if there are repeated non-compliance issues, or the client is unable to follow this policy, then other arrangements may be discussed for sessions to occur outside of the home.

SMOKING

Smoking in a place of work poses serious health risks and fire hazards to workforce members. It is the employer's duty to ensure a safe, smoke-free environment for all employees.

During support services with EDC's therapist, the client's home automatically becomes a workplace for the duration of the visit. As such, smoking inside the home is strictly prohibited during, and at least 15 minutes before the provision of services. The term smoking includes, but is not limited to: cigarettes, tobacco, marijuana, e-cigarettes, pipes, etc.

In the case of non-compliance, the therapist will immediately leave the premises and notify the Supervisor or Director of Clinical Services and will not be able to return until this policy is adhered to. If there are repeated non-compliance issues, or the client is unable to follow this policy, then other arrangements will be made for sessions outside of the home.

ILLEGAL ACTIVITY

During services with EDC's therapist, the client's home automatically becomes a workplace for the duration of the visit. As such, any illegal activity inside the home is strictly prohibited during the provision of services. The term illegal activity includes, but is not limited to sale, possession of, or taking of illicit controlled substances, vandalism, prostitution, theft, assault, etc.

In the case where the therapist witnesses illegal activity in the client's home, the therapist will immediately leave the premises and notify the Supervisor or Director of Clinical Services, who will then notify the appropriate authorities.

Services in the home may be deemed inappropriate to continue and services outside of the home may be necessary.

SAFETY CHECKLIST

- ☐ Clean, clutter-free space with all hazards removed to provide therapy
- ☐ Adequate ventilation in room
- ☐ Adequate heating & AC
- ☐ Clean working restroom facilities
- ☐ Electricity / running water
- ☐ Free of insect, rodent, or animal infestations
- ☐ Adult, of sound mind, over 18 years of age
- ☐ Harassment free zone: o Sexual o Race o Religion o Gender o Sexual orientation
- ☐ Drug free during therapy sessions
- ☐ Animals allowed in session based on therapist's preference

Temperature: During support services with EDC's therapist, the client's home automatically becomes a workplace for the duration of the visit. As such, we ask that you respect the therapist's physical comfort level and ensure that the home is neither too hot, nor too cold during the duration of the visit. Between 68 degrees Fahrenheit (summer) and 74 degrees Fahrenheit (winter) is a comfortable temperature range to use as a reference point.

In the case of non-compliance, the therapist will notify the Supervisor or Director of Clinical Services and will not be able to return until this policy is followed. If there are repeated non-compliance issues, or the client is unable to follow this policy, then other arrangements will be made for sessions outside of the home.

SECTION 4: CENTER BASED

FIRST DAY DROP OFF

Please park and walk in the center with your child. We want you to see where their classroom and where their day will be spent.

CARPOOL PROCEDURES

Carpool Tag- You will be given 2 upon starting services. Place in **passenger side window** when dropping off and picking up.

Drop Off: Your child should be on the passenger side of the car. Pull in the parking lot parallel to the building with the center on your RIGHT and Livonia High School on your LEFT. **We run**

two lines for carpool. Stay in your car and a teacher will come and get your child out. Exit the parking lot by *turning right*, **DO NOT TURN LEFT.**

Pick Up: This will begin 5 minutes before the scheduled ending time and run 5 minutes after the end time. If picking up outside of this 10-minute window, child must be picked up inside the center.

Late Arrival/Pick-Up: Call (225) 713-1442 or supervising BCBA to notify. You will bring your child into the waiting area in the front office. Therapists will only walk out to get your child if dropped off in the 10 minute window of carpool (5 min before and 5 min after). No exceptions.

LUNCH

Pack a lunchbox & directions on how the food needs to be served (if the food is only eaten a certain way). A cold pack should be packed if foods need to remain cool. Any foods that need to be served warm need to be heated at home and packed in a Thermos. Food will not be heated up, unless a feeding program is in place and approved by your child's BCBA. Please pack any utensils, straws, etc.

SNACKS/REINFORCERS

Bring at least 5 of your child's favorite snacks so that we can use them as reinforcers during the day. They will be labeled and kept in the breakroom.

COMMUNICATION FOLDER

A blue folder will be placed in your child's bookbag. There is a flap for HOME & CENTER. Please use it to communicate with your child's therapists and BCBA. This is where you will find their carpool name tag on the first day. **Please check folder daily.** Important notices/reminders/monthly calendar will be sent home and placed in this folder.

EXTRA CLOTHES

There should always be a change of clothes in your child's bookbag (even if your child is toilet trained). Including but not limited to an extra shirt, pair of shorts/pants, pair of underwear, and a pair of socks. Each item should be labeled, stored in a Ziploc, and kept your child's bookbag at all times. If they have an accident and use the spare clothes, the dirty clothes will be placed in the Ziploc and sent home. *Replace the clean clothes for school the next day.* Failure to do so will result in a call home if spare items are not available when needed.

BELONGINGS

Anything brought into the center should have your name on it to prevent being sent home with the wrong student.

CLASSROOM SUPPLIES

Not required but appreciated.

- Kleenex x 2
- Paper towels x 2
- Pipe cleaners, pom poms, glue, construction paper etc.
- Sanitizing wipes x 2
- Sanitizing spray (for toys) x 2
- Baby wipes x 2
- Non-latex gloves x 2 boxes

TOUR/VISITOR POLICY

There are times where outside guests may be invited into the clinic. This may include prospective clients wanting to visit the center, a parent wanting to show the clinic to another family member or an employee interviewing for a position with the company. Outside guests may come in contact with clients and potentially see private health information (PHI) inadvertently during their visit. All visits should be scheduled in advance so staff can ensure that PHI is secure. Guests are also required to sign a release form prior to their visit, letting them know that they may come in contact with private information.

FOOTWEAR

Closed toe shoes are required for all students in the center. EDC employees will take the necessary steps to prevent accidents and injuries to any client by requiring appropriate footwear during activities or outings. Employees will manage and monitor all activities closely to ensure compliance with all EDC safety policies as required.

BIRTHDAY PARTIES

We love to celebrate birthdays at the center! On the day you would like to observe your child's birthday, you may send cookies, cupcakes, or some other treats. We normally celebrate the child's birthday 20 minutes before leaving for the day. If you would like to celebrate with us, please let your child's supervising BCBA know.

If you would like to have birthday party invitations passed out, please contact your child's supervising BCBA for the number of invitation to send. We'll make sure the invitations go home in the children's backpacks.

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SECTION 5: GENERAL

TRANSITIONING AND FADING OF SERVICES

Transitions can be the result of either the client's mastery of the established goal criteria, resulting in a transition to the next higher-level goal, or due to the client's deficiency or inability to reach current goal objectives, moving the client to a lower-level goal.

When situations occur where clients are moved to lower-level goals the prerequisite goals are re-evaluated and a new goal criteria set is established. Once the client is able to master the new goal criteria set, the original goals will be revisited, and the client will be eligible to move to the next higher-level set of goal criteria.

Fading refers to decreasing the level of assistance needed to complete a task or activity. When teaching a skill, the overall goal is for the student to eventually engage in the skill as independently as possible. The process of fading and shaping incorporate the use and withdrawal of various prompts.

Discharge and transition planning from one or all treatment programs will involve a gradual step down in services. Discharge from a comprehensive ABA treatment program occurs over several months. Treatment plans will be reviewed and evaluated, and discharge planning will begin when the child has achieved specific treatment goals, as measured by appropriate standardized protocols.

The process of fading will begin once the child's progress meets specific predetermined goals.

Caregiver Training: We also offer intensive one-on-one caregiver training. This consists of basic principles and techniques of ABA specific to your child's current needs to increase your child's independence, daily living skills, and communication as well as providing for an opportunity for the child to generalize skills across their different environments. We coach you through behavior interventions and provide guidance and assistance on the implementation of ABA strategies. This service is an integral part of your child's therapy and participation is required as part of the treatment process.

DISCONTINUING SERVICES

If at any time, a parent/guardian wishes to terminate services with EDC, written notice must be submitted to info@everydaycounts-aba.com or by fax to (225) 638-2030 **thirty days** in advance of the effective date of termination.

EDC reserves the right to terminate the Commitment Agreement and Policies with any client at any time, including but not limited to the following:

- Client no longer needs the service, is not benefiting or is being harmed by continued

service;

- Noncompliance with therapy and related treatments recommended by EDC
- Failure to pay, consistent with EDC's Payment Agreement
- Disruptive, threatening or abusive behavior directed at EDC's staff, or therapists, other clients, guests or visitors
- Excessive absences
- Noncompliance with Client Obligations under the Applied Behavior Analysis Service and Payment Agreement
- Other instances where EDC considers that the Client relationship is impaired or EDC can no longer provide services required by the Client.
- Unknown change in insurance plan or provider

EDC will provide written notice of the termination to the Client and provide other assistance to Client as appropriate under the circumstances, including, with the agreement and authorization of the Client, information regarding terminating treatment and referral information as needed.

NON-REFUNDABLE PAYMENTS

All payments made to EDC are non-refundable.

ANTIDISCRIMINATION/ ANTIHARASSMENT POLICY

EDC does not discriminate on the basis of race, sex, gender, religion, sexual orientation or disability. EDC does not condone discrimination on the basis of race, sex, gender, religion, sexual education or disability by any of its employees, volunteers or clients.

EDC also does not condone harassment on the basis of race, sex, gender, religion, sexual orientation or disability. Employees, volunteers, and/or clients feel that they are being discriminated against or harassed should report the behavior immediately as a creative and unsafe work environment.

Harassment is defined to as including but not limited to unwanted propositions, touching cruder and assesses jokes. Comments about a person's appearance or beliefs and generally making a person feel unsafe in their work or therapy environment.

Any person found to have violated this policy can be subject to discipline up to and including termination if an employee or being asked to leave the program if they are a client or volunteer

GIFTS

EDC's employees, volunteers or workforce members may not accept any gifts of any kind in connection with their service to EDC in accordance with the BACB's code of ethics.

A gift refers to the following:

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- Money
- any item of value, service, loan, or promise
- discount or rebate for which something of equal or greater value is not exchanged.
- Payments for travel, entertainment, and food

The term “gift” does not include:

- handmade items by and from children, such as a drawing or painting
- edible gifts of nominal value that are shared with a wide range of colleagues at EDC
- any discount or rebate made in the regular course of business and offered to the general public without regard to the individual’s connection with {Company Name}
- plaques or trophies
- campaign contributions

If an employee or workforce member receives a gift prohibited by this policy, the gift giver will be reminded of this policy and the employee will graciously decline or return the gift. If the gift is anonymous, the recipient must deliver the gift to the Director of Clinical Services, who will convey the gift to a charitable organization.

BEHAVIOR ANALYST CERTIFICATION BOARD (BACB) GUIDELINES

EDC follows the Behavior Analyst Certification Board (BACB)’s ethical guidelines. Within these guidelines, clients have the right to effective behavior treatment, which includes individual’s rights, professional relationship, and informed consent.

An individual has a right to....

- Evidence-based and effective interventions
- Involvement and consent in the treatment planning process
- Services rendered or supervised by a competent behavior analyst working within their scope of training.
- Programs that teach socially significant and functional skills that are tailored for the individual client.
- A behavioral assessment and ongoing evaluation
- Interventions that are free of harm and aversive.

A professional relationship requires:

- Confidentiality
- Protecting the client's dignity, health, and safety
- Helping the client select outcomes and behavior change targets
- Maintaining records
- Advocating for the client

- Providing necessary and needed services
- Evidence-based practice and least restrictive alternatives
- Not a conflict of Interest

GUIDELINE FOR "INFORMED CONSENT" IS AS FOLLOWS:

Informed consent means that the potential recipient of services gives his/her (in our case the Parent / guardian (s)) explicit permission before any assessment or treatment is provided. Informed consent requires more than obtaining permission. Permission must come following full disclosure and information is provided to the participant. For consent to be valid:

- a. The person must demonstrate the capacity to decide
- b. The person's decision must be voluntary
- c. The person must have adequate knowledge of all salient aspects of the treatment.

More information can be found at www.BACB.com

HIPPA & PRIVACY POLICY

This notice describes how medical information about you or your child may be used and disclosed and how you can get access to this information. Please review it carefully. We keep record of the health care services we provide you. You may ask us to see and copy that record. You may also ask us to correct that record. We will not disclose your record to others unless you direct us to do so or unless the law authorizes or compels us to do so. You may see your record or get more information about it by contacting us via email at info@everydaycounts-aba.com.

Every Day Counts is dedicated to maintaining the privacy of our Clients' individually identifiable health information (PHI). In conducting our business, we will create records regarding the Client and the treatment and services we provide. We are required by law to maintain the confidentiality of health information that identifies Clients. We are also required by law to provide this notice of our legal duties and the privacy practices that we maintain in our practice concerning Client's PHI. By federal and state law, we must follow the terms of the Notice of Privacy Practices that we have in effect at the time.

We realize that these laws are complicated, but we must provide you with the following important information:

How we may use and disclose a Client's PHI/Privacy rights in PHI/our obligations concerning the use of disclosure of PHI.

The terms of this notice apply to all records containing a Client's PHI that are created or retained by EDC. We reserve the right to revise or amend this Notice of Privacy Practices. Any revision or amendment to this notice will be effective for all our records created or maintained

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in the past, and for any records that we may create or maintain in the future. You may request a copy of our most current Notice at any time.

How EDC will use and disclose PHI. EDC may use and disclose a Client's PHI for many different reasons. Some of the uses or disclosures will require your prior written authorization; others however will not. Below you will find the different categories of our uses and disclosures, with some examples.

Uses and Disclosures Related to Treatment, Payment, or Health Care Operations Do Not Require Prior Written Consent. EDC may use and disclose a Client's PHI without consent for the following reasons:

- For treatment, EDC may disclose PHI to physicians, psychiatrists, psychologists, behavior interventionists and other licensed health care providers who provide a Client with health care services or are otherwise involved in his or her care. Example: If a psychiatrist is treating a Client, EDC may disclose PHI to her/him in order to coordinate services.
- For health care operations. EDC may disclose PHI to facilitate the efficient and correct operation of the services it provides. Examples: Quality control – EDC might use PHI in the evaluation of the quality of services that a Client receives or to evaluate the performance of the Behavior Interventionists who provide these services. EDC may also provide PHI to company attorney, accountants, consultants, and others to make sure the EDC is in compliance with applicable laws.
- To obtain payment for treatment. EDC may use and disclose PHI to bill and collect payment for the treatment and services EDC provided.
 - Example: We might send PHI to the insurance company in order to get payment for the services the EDC has provided. EDC could also provide PHI to business associated that provide services for EDC.

Certain Other Uses and Disclosures Do not Require Consent. EDC may use/or disclose PHI without consent or authorization for the following reasons:

- **Required By Law.** When disclosure is (a) required by federal, state, or local law; judicial, board, or administrative proceedings; or, law enforcement; (b) compelled by a party to a proceeding before a court, arbitration panel or an administrative agency pursuant to its lawful authority; (c) required by a search warrant lawfully issued to a governmental law enforcement agency; or (d) compelled by the patient or the patient's representative pursuant to state or federal statutes of regulations, such as the Privacy Rule that requires this Notice.
- **To avoid harm.** When disclosure: (a) to law enforcement personnel or persons may be able to prevent or mitigate a serious threat to the health or safety of a person or the public; (b) is compelled or permitted by the fact that the Client is in such mental or emotional condition as to be dangerous to him or herself or the person or property of others, and if EDC determines that disclosure is necessary to prevent the threatened

danger; (c) is mandated by state child abuse and neglect reporting laws (for example, if we have a reasonable suspicion of child abuse or neglect); (d) is mandated by state elder/dependent abuse reporting law (for example, if we have a reasonable suspicion of elder abuse or dependent adult abuse); and (e) if disclosure is compelled or permitted by the fact that you or your child tells us of a serious/imminent threat of physical violence against a reasonably identifiable victim or victims.

- For public health activities. When disclosure is for: (a) maintaining vital records, such as births and deaths; (b) preventing or controlling disease, injury or disability, (c) notifying a person regarding potential exposure to a communicable disease; (d) notifying a person regarding a potential risk for spreading or contracting a disease or condition; (d) reporting reactions to drugs or problems with products or devices; or (e) notifying individuals if a product or device they may be using has been recalled.
- For health oversight activities. EDC may disclose PHI to a health oversight agency for activities authorized by law. Oversight activities can include, for example, investigation, inspections, audits, surveys, licensure and disciplinary actions; civil, administrative and criminal procedures or actions; or other activities necessary for the government to monitor government programs, compliance with civil rights laws and the health care system in general.
- For specific government function. Examples: EDC may disclose PHI of military personnel and veterans under certain circumstances.
- For Workers' Compensation purposes. EDC may provide PHI in order to comply with Workers' Compensation laws.
- Appointment reminders and health related benefits or services. EDC is permitted to contact you, without prior authorization, to provide appointment reminders or information about alternative or other health-related benefits and services that may be of interest.

Certain Uses and Disclosures Require You to Have the Opportunity to Object.

- Disclosures to family, friends, or others. EDC may provide PHI to a family member, friend or other individual who you indicate is involved in the Client's care or responsible for the payment of health care, unless you object in whole or in part. Retroactive consent may be obtained in emergency situations.

Other Uses and Disclosures Require Your Prior Written Authorization. The following uses and disclosures will only be made if EDC has obtained written authorization from the Client or the Client's parent or guardian: uses and disclosures for marketing purposes; uses and disclosures that constitute the sale of PHI; most uses and disclosures of psychotherapy notes; and other uses and disclosures not described in this Notice.

Session Notes: EDC keeps "session notes." Any use or disclosure of such notes requires your authorization unless the use or disclosure is:

- For our use in treating you.

- For our use in training or supervising other mental health practitioners to help them improve their skills in group, joint, family, or individual counseling or therapy.
- For our use in defending myself in a legal proceedings instituted by you.
- For use by the Secretary of Health and Human Services to investigate our compliance with HIPPA.
- Required by law, and the use or disclosure is limited to the requirements of such law.
- Required by law for certain health oversight activities pertaining to the originator of the psychotherapy notes.
- Required by a coroner who is performing duties authorized by law.
- Required to help avert a serious threat to the health and safety of others.

EDC will not release your information for fundraising purposes.

RIGHTS REGARDING PHI. These are your rights with respect to PHI:

The Right to See and Get Copies of PHI. In general, you have the right to see PHI that is in EDC's possession, or to get copies of it; however, you must request it in writing. EDC will provide access to the PHI within five (5) days of receipt of the written request. If EDC does not have the PHI, but EDC knows who does, EDC will advise you how you can get it. You will receive a response from EDC within 5 days of receipt of your written request. Under certain circumstances, EDC may deny your request, but EDC will give you, in writing, the reasons for the denial. EDC will also explain your right to have the denial reviewed. If you ask for copies of PHI, EDC will charge you a reasonable fee, not to exceed \$0.25 per page. EDC will provide copies of PHI within fifteen (15) days of receipt of the request. EDC may elect to provide you with a summary or explanation of the PHI, but only if you agree to it, as well as to the cost, in advance.

The Right to Request Limits on Uses and Disclosures of PHI. You have the right to ask that EDC limit how it uses and discloses PHI. While EDC will consider your request, EDC is not legally bound to agree. If EDC does agree to your request, EDC will put those limits in writing and abide by them except in emergency situations. You do not have the right to limit the uses and disclosures that EDC is legally required or permitted to make. You have the right to restrict EDC's disclosure of PHI to health plans if you (or a third party on your behalf) has paid for the services out of pocket and in full.

The Right to Choose How EDC Sends PHI to You. It is your right to ask that PHI be sent to you at an alternate address (for example, sending information to your work address rather than your home address) or by an alternate method (for example, via email instead of by regular mail). EDC is obliged to agree to your request providing that EDC can give you the PHI, in the format you requested, as long as the format is readily producible.

The Right to Get a List of the Disclosures EDC Has Made. You are entitled to a list of disclosures of PHI that EDC has made. The list will not include uses or disclosures to which you have already consented, i.e., those for treatment, payment, or health care operations, sent directly to you, or to your family; neither will the list include disclosures made for national security purposes, to

corrections or law enforcement personnel. Disclosure records will be held for seven years. EDC will respond to your request for an accounting of disclosures within 60 days of receiving your request. The list EDC gives you will include disclosures made in the previous six years (the first seven year period being 2020) unless you indicate a shorter period. The list will include the date of the disclosure, to whom PHI was disclosed (including their address, if known), a description of the information disclosed, and the reason for the disclosure. EDC will provide the list to you at no cost, unless you make more than one request in the same year, in which case EDC will charge you a reasonable sum based on a set fee for each additional request.

The Right to Amend Your PHI. If you believe that there is some error in your PHI or that important information has been omitted, it is your right to request that EDC correct the existing information or add the missing information. Your request and the reason for the request must be made in writing. You will receive a response within ten (10) days of my receipt of your request. EDC may deny your request, in writing, if EDC finds that: the PHI is (a) correct and complete, (b) forbidden to be disclosed, (c) not part of my records, or (d) written by someone other than EDC. The denial must be in writing and must state the reasons for the denial. It must also explain your right to file a written statement objecting to the denial. If you do not file a written objection, you still have the right to ask that your request and my denial be attached to any future disclosures of your PHI. If EDC approves your request, EDC will make the change(s) to your PHI. Additionally, EDC will tell you that the changes have been made, and EDC will advise all others who need to know about the change(s) to your PHI.

The Right to Receive Breach Notification. You have a right to receive notice in the event that your PHI is acquired, accessed, used, or disclosed in a manner not permitted by law which compromises the security or privacy of the PHI. This includes your right to be notified following a data breach. **The Right to Get This Notice by Email.** You have the right to get this notice by email or to obtain a paper copy.

HOW TO COMPLAIN ABOUT EDC PRIVACY PRACTICES. If, in your opinion, EDC may have violated the Client's privacy rights, or if you object to a decision EDC made about access to PHI, you are entitled to file a complaint with the person listed in Section IV below. You may also send a written complaint to the Secretary of the Department of Health and Human Services at 200 Independence Avenue S.W. Washington, D.C. 20201. If you file a complaint about EDC's privacy practices, EDC will take no retaliatory action against you.

1. **PERSON TO CONTACT FOR INFORMATION ABOUT THIS NOTICE OR TO COMPLAIN ABOUT EDC'S PRIVACY PRACTICES.** If you have any questions about this notice or any complaints about EDC's privacy practices, or would like to know how to file a complaint with the Secretary of the Department of Health and Human Services, please contact us at: Every Day Counts, 4140 Private Dr, Torbert, LA 70762 Ph: 225-713-1442, info@everydaycounts-aba.com
2. **EFFECTIVE DATE OF THIS NOTICE OF PRIVACY PRACTICES.** This Notice of Privacy Practice is updated as of March 22, 2021. EDC may change the terms of this Notice at

any time. EDC may, at its discretion, make the new terms effective for all PHI in our possession, including any PHI created or received before the new Notice is issued.

PERSONAL HEALTH INFORMATION (PHI) STORAGE

EDC understands that we deal in highly personal and sensitive information regarding both you and the child in your care. We want to reassure you that your information is securely held in accordance with HIPAA and only accessible and available to those employees on your child's team.

GRIEVANCE POLICY

Situations may occur where a difference of opinion, dispute, or controversy between a client or family/caregiver or client representative and Every Day Counts, concerning any aspect of services or the application of policies or procedures.

What is a Grievance? A grievance is a complaint about something you do not like or feel that something is unfair.

- A grievance should be first communicated to the Owner by calling 225-713-1442 or via email at info@everydaycounts-aba.com
- The complaint will be discussed and investigated verbally and in writing. It is of the utmost importance to resolve the grievance to the client's satisfaction. Response to the client regarding the complaint will occur within ten (10) days of receipt.
- If the client feels his/her grievance has not been resolved after working with Every Day Counts personnel and it pertains to the clients program, the following state agency can be contacted.

*Louisiana Behavior Analyst Board
4334 S. Sherwood Forest Dr. Suite 150
Baton Rouge, LA 70816
(225) 295-8413*

- Corrective action will be specified and related to the complaint.
- Resolution information will be communicated in writing to the client or his/her representative filing the complaint.
- All complaints from the clients who believe their privacy rights have been violated will be forwarded for review to the designated organization personnel or officed specified in the organization's Notice of Privacy Practices.
- All complaints will be logged, tracked, trended, and filed in the performance improvement office.

If you have any questions about our grievance process, please contact our office.

CLIENT RIGHTS & RESPONSIBILITIES

Every Day Counts – ABA Therapy Center

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UPDATED: 12/10/24

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The purpose of this section is to promote the interests and wellbeing of patients and to promote better communication between the patient and the health care provider.

A patient has the right to:

- Be treated with courtesy and respect, with appreciation of his or her dignity, and with protection of privacy.
- Receive a prompt and reasonable response to questions and requests.
- Know who is providing medical services and who is responsible for his or her care.
- Know what patient support services are available, including if an interpreter is available if the patient does not speak English.
- Be given by the health care provider information such as diagnosis, treatment plan, alternatives, risks, and prognosis.
- Refuse any treatment, except as otherwise provided by law.
- Be given full information and necessary counseling on the availability of known financial resources for care.
- Know whether the health care provider or facility accepts the Medicare assignment rate, if the patient is covered by Medicare.
- Receive prior to treatment, a reasonable estimate of charges for medical care.
- Receive a copy of an understandable itemized bill and, if requested, to have the charges explained.
- Receive medical treatment or accommodations, regardless of race, national origin, religion, handicap, or source of payment.
- Know if medical treatment is for purposes of experimental research and to give his or her consent or refusal to participate in such research.
- Express complaints regarding any violation of his or her rights.

Client is responsible for:

- Giving the health care provider accurate information about present complaints, past illnesses, hospitalization, medication, and any other information about his or her health.
- Reporting unexpected changes in his or her condition to the health care provider.
- Reporting to the health care provider whether he or she understands the planned course of action and what is expected of him or her.
- Following the treatment plan recommended by the health care provider.
- Keeping appointments and, when unable to do so, notifying the health care provider or facility.
- His or her actions if treatment is refused or if the patient does not follow the health care provider's instructions.
- Making sure financial responsibilities are carried out.
- Following health care facility conduct rules and regulations.

PATIENT BILL OF RIGHTS

State of Louisiana Louisiana Department of Health

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Office of Behavioral Health Rights of Patient

(LA Revised Statutes 28: Sec 171; 53; 55)

§171. Enumerations of rights guaranteed

A. No patient in a treatment facility pursuant to this Chapter shall be deprived of any rights, benefits, or privileges guaranteed by law, the Constitution of the state of Louisiana, or the Constitution of the United States solely because of his status as a patient in a treatment facility. These rights, benefits, and privileges include, but are not limited to, civil service status; the right to vote; the right to privacy; rights relating to the granting, renewal, forfeiture, or denial of a license or permit for which the patient is otherwise eligible; and the right to enter contractual relationships and to manage property.

B. No patient in a treatment facility shall be presumed incompetent, nor shall such person be held incompetent except as determined by a court of competent jurisdiction. The determination of incompetence shall be separate from the judicial determination of whether the person is a proper subject for involuntary commitment.

C.(1) The patient in a treatment facility shall be permitted unimpeded, private, and uncensored communication with persons of his choice by mail, telephone, and visitation. These rights may be restricted by the director of the treatment facility if sufficient cause exists and is so documented in the patient's medical records. The patient's legal counsel, as well as his next of kin or responsible party must be notified in writing of any such restrictions and the reasons therefor. When the cause for any restriction ceases to exist, the patient's full rights shall be reinstated. A patient shall have the right to communicate in any manner in private with his attorney at all times.

(2) The director of a treatment facility shall ensure that correspondence can be conveniently received and mailed, that telephones are reasonably accessible, and that space for visits is available. Writing materials, postage, and telephone usage funds shall be provided in reasonable amounts to recipients who are unable to procure such items.

(3) Reasonable times and places for the use of telephones and for visits may be established in writing by the director of any treatment facility. However, the times and places established by the director must allow patients, at a minimum, reasonable daily communication by telephone and visitation. These rights may be restricted by the director of the treatment facility if sufficient cause exists and is so documented in the patient's medical records. The patient's legal counsel, as well as his next of kin or responsible party, must be notified in writing of any such restrictions and the reasons therefor. When the cause for any restriction ceases to exist, the patient's full rights shall be reinstated.

(4)(a) The director of any substance abuse treatment facility may restrict the visitation rights of a patient who is voluntarily admitted to such treatment facility under the provisions of R.S. 28:52, 52.1, 52.2, 52.3, and 52.4 for the initial phase of treatment but no longer than seven days unless good cause exists to extend the restriction and is so documented in the patient's record. This restriction shall not apply to visitation by the patient's attorney, or if he is not represented by counsel, the mental health advocate, or the patient's

minister. This restriction shall also not apply to a parent or legal guardian of a patient who is a minor unless the director determines that good cause exists that such restriction shall be in the best interest of the patient and is so documented in the patient's record. When the facility director determines the need to restrict visitation of new patients he shall post notice of such restriction in places prominent to all new admissions, and shall inform each new patient of the restriction prior to the admission of the patient, and the length and duration thereof, and further, that such restriction may be extended on an individual basis as determined to be in the patient's interest by the treatment staff with the concurrence of the medical director.

(b) Nothing herein shall be construed to further restrict other forms of patient communication as permitted in this Section, nor shall this restriction apply to mental health treatment facilities.

D. Seclusion or restraint shall only be used to prevent a patient from physically injuring himself or others. Seclusion or restraint may not be used to punish or discipline a patient or used as a convenience to the staff of the treatment facility. Seclusion or restraint shall be used only in accordance with the following standards:

(1) Seclusion or restraint shall only be used when verbal intervention or less restrictive measures fail. Use of seclusion or restraint shall require documentation in the patient's record of the clinical justification for such use as well as the inadequacy of less restrictive intervention techniques.

(2) Seclusion or restraint shall only be used in an emergency. An emergency occurs when there is either substantial risk of self-destructive behavior, as evidenced by clinically significant threats or attempts to commit suicide or to inflict serious harm to self, or a substantial risk or serious physical assault on another person, as evidenced by dangerous actions or clinically significant threats that the patient has the apparent ability to carry out.

(3) A written order from a physician, psychologist, medical psychologist, or psychiatric mental health nurse practitioner acting within the scope of his institutional privileges shall be required for any use of seclusion or restraint. If, however, no physician, psychologist, medical psychologist, or psychiatric mental health nurse practitioner is immediately available, a registered nurse who has been trained in management of disturbed

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behavior may utilize seclusion or restraint. The nurse or the nursing supervisor shall then immediately notify a physician, psychologist, medical psychologist, or psychiatric mental health nurse practitioner with institutional authority to order seclusion or restraint and provide him with sufficient information to determine whether seclusion is necessary and whether less restrictive interventions have been tried or considered. The physician, psychologist, medical psychologist, or psychiatric mental health nurse practitioner may issue a telephone order for seclusion or restraint, if such order is indicated.

(4) Written orders for the use of seclusion or restraint shall be time limited and not more than twelve hours in duration. The written order shall include the date and time of the actual examination of the patient, the date and time that the patient was placed in seclusion or restraint, and the date and time that the order was signed.

(5) A renewal order for up to twelve hours of seclusion or restraint may be issued by a physician, psychologist, medical psychologist, or psychiatric mental health nurse practitioner with institutional authority to order seclusion or restraint after determining that there is no less restrictive means of preventing injury to the patient or others. If any patient is held in seclusion or restraint for twenty-four hours, the physician, psychologist, medical psychologist, or psychiatric mental health nurse practitioner with institutional authority shall conduct an actual examination of the patient and document the reason why the use of seclusion or restraint beyond twenty-four hours is necessary, and the next of kin or responsible party shall be notified by the twenty-sixth hour.

(6) Staff who implement written orders for seclusion or restraint shall have documented training in the proper use of the procedure for which the order was written.

(7) Periodic monitoring and care of the patient shall be provided by responsible staff. A patient in seclusion or restraint shall be evaluated every fifteen minutes, especially in regard to regular meals, water, and snacks, bathing, the need for motion and exercise, and use of the bathroom, and documentation of these evaluations shall be entered in the patient's record.

(8) Patients shall be released from seclusion or restraint as soon as the reasons justifying the use of seclusion or restraint subside. If at any time during the period of seclusion or restraint a registered nurse determines that the emergency which justified the seclusion or restraint has subsided and a physician, psychologist, medical psychologist, or psychiatric mental health nurse practitioner with institutional authority to order seclusion or restraint is not immediately available, the patient shall be released. At the end of the period of seclusion or restraint ordered by the physician, psychologist, medical psychologist, or psychiatric mental health nurse practitioner the patient shall be released unless a renewal order is issued.

(9) Mechanical restraints shall be designed and used so as not to cause physical injury to the patient and so as to cause the least possible discomfort.

(10) Facilities using seclusion or restraint shall have written policies concerning their use in place before they can be used. These policies shall include standards and procedures for placing a patient in seclusion or restraint, and for informing him of the reason he was put in seclusion or restraint and the means of terminating such seclusion or restraint.

(11) Nothing in this Section shall be construed to expand the scope of practice of psychology as defined in R.S. 37:2351 et seq. to authorize the ordering, administering, or dispensing of medications, or to authorize any practice not permitted under the privileges granted by the institution.

(12) The department shall adopt rules and regulations in accordance with the Administrative Procedure Act to govern the use of seclusion and restraint. Such rules and regulations shall respect the patient's individual rights, protect the patient's health, safety, and welfare, and be the least restrictive of the patient's liberty. The department shall adopt rules and regulations to provide for enforcement procedures and penalties applicable to a person who violates the requirements of this Section.

E. A patient may be placed alone in a room or other area pursuant to behavior shaping techniques such as "time-out". Such confinement may only be used as part of a written treatment plan, shall not be used for the convenience of staff, and may be used only according to the following standards and procedures:

(1) Placement alone in a room or other area shall be imposed only when less restrictive measures are inadequate.

(2) Placement alone in a room or other area shall only be ordered by a qualified professional trained in behavior-shaping techniques and authorized in accordance with the written policies and procedures of the facility to order the use of behavioral-shaping techniques.

(3) The period of placement alone in a room or other area shall not exceed thirty minutes.

(4) The patient shall be observed and supervised by a staff member.

(5) The period of placement alone in a room or other area shall not exceed a total of three hours in any twenty-four-hour time period. If the placement alone in a room or other area exceeds a total of three hours in any twenty-four-hour time period, it shall then be considered seclusion and shall be governed by the procedures and standards set forth in Subsection D of this Section.

(6) The date, time, and duration of the placement shall be documented.

(7) In treatment facilities where patients are placed alone in a room or other area as a behavior-shaping technique, there shall be written policies and procedures governing use of such behavior-shaping technique.

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F. No patient confined by emergency certificate, judicial commitment, or non-contested status shall receive major surgical procedures or electroshock therapy without the written consent of a court of competent jurisdiction after a hearing. If the director of the treatment facility, in consultation with two physicians, determines that the condition of such a patient is of such a critical nature that it may be life threatening unless major surgical procedures or electroshock therapy are administered, such emergency measures may be performed without the consent otherwise provided for in this Section. No physician shall be liable for a good faith determination that a medical emergency exists.

G. Every patient shall have the right to wear his own clothes; to keep and use his personal possessions, including toilet articles, unless determined by a physician, medical psychologist, or psychiatric mental health nurse practitioner that these are medically inappropriate and the reasons therefor are documented in his medical record. The patient shall also be allowed to spend a reasonable sum of his own money for canteen expenses and small purchases, and to have access to individual storage spaces for his private use. If the patient is financially unable to provide these articles for himself, the treatment facility shall provide a reasonable supply of clothing and toiletries.

H. Every patient shall have the right to be employed at a useful occupation depending upon his condition and available facilities.

I. Every patient shall have the right to sell the products of his personal skill and labor at the discretion of the director of the treatment facility and to keep or spend the proceeds thereof or to send them to his family.

J. Every patient shall have the right to be discharged from a treatment facility when his condition has changed or improved to the extent that confinement and treatment at the treatment facility are no longer required. The director of the treatment facility shall have the authority to discharge a patient admitted by judicial commitment without the approval of the court which committed him to the treatment facility. The court shall be advised of any such discharge. The director shall not be legally responsible to any person for the subsequent acts or behavior of a patient discharged by him in good faith.

K. Every patient shall have the right to engage a private attorney. If a patient is indigent, he shall be provided an attorney by the mental health advocacy service, if he so requests. The attorneys provided by the mental health advocacy service or appointed by a court shall be interested in and qualified by training and/or experience in the field of mental health statutes and jurisprudence.

L. Every patient shall have the right to request an informal court hearing to be held at the discretion of the court within five days of the receipt of the request by the court. If the court determines that a hearing is appropriate and if the patient is not represented by an attorney of his own or from the mental health advocacy service, the court shall appoint an attorney to represent the patient. The purpose of the hearing shall be to determine whether or not the patient should be discharged from the treatment facility or transferred to a less restrictive and medically suitable treatment facility.

M. No provision hereof shall abridge or diminish the right of any patient to avail himself of the right of habeas corpus at any time.

N. Every patient shall have the right to be visited and examined at his own expense by a physician, psychologist, medical psychologist, or a psychiatric mental health nurse practitioner designated by him or a member of his family or an interested party. The physician, psychologist, medical psychologist, or psychiatric mental health nurse practitioner may consult and confer with the medical staff of the treatment facility and have the benefit of all information contained in the patient's medical record.

O. Prefrontal lobotomy shall be prohibited as a treatment solely for mental or emotional illness.

P. No medication may be administered to a patient pursuant to the provisions of this Chapter except upon the order of a physician, medical psychologist, or psychiatric mental health nurse practitioner. The physician, medical psychologist, or psychiatric mental health nurse practitioner is responsible for all medications which he has ordered and which are administered to a patient. A record of medications administered to each patient shall be kept in his medical record including all instances when a patient is administered medication without his consent. Medication shall not be used for nonmedical reasons such as punishment or for convenience of the staff.

Q. A person admitted to a treatment facility has the right to an individualized treatment plan and periodic review to determine his progress. The appropriate staff of the facility shall review the person's progress at least at intervals of thirty days. The staff shall enter into the person's medical record his response to medical treatment, his current mental status, and specific reasons why continued treatment is necessary in the current setting or whether a treatment facility is available which is medically suitable and less restrictive of the patient's liberty.

R. A person admitted to a treatment facility has the right to have available such treatment as is medically appropriate to his condition. Should the treatment facility be unable to provide an active and appropriate medical treatment program, the patient shall be discharged.

S. Any patient known by a director of a treatment facility to be practicing a well-recognized religious method of healing under the care of a duly accredited practitioner thereof shall not be ordered medically treated, unless he is, as a result of a mental disorder, a danger to himself or to others.

Further Conditions of Which Patient is to be informed:

(Pursuant to LA Revised Statutes 28: Sec 53, Sec 55)

Statute 28: Section 53: Subsection I – Emergency Certificate

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Every patient admitted by emergency certificate shall be informed in writing at the time of his admission of the procedures of requesting release from the treatment facility, the availability of counsel, information about the mental health advocacy service, the rights enumerated in R.S. 28:171 and the rules and regulations applicable to or concerning his conduct while a patient in the treatment facility. If the person is illiterate or does not read or understand English, appropriate provisions should be made to supply him this information. In addition, a copy of the information mentioned in this Subsection must be posted in any area where patients are confined and treated.

Statute 28: Section 55: Subsection H – Judicial Hearings

Every patient admitted by judicial commitment shall be informed in writing at the time of admission of the procedures for requesting release from the treatment facility, the availability of counsel, information about the mental health advocacy service, the rights enumerated in R.S. 28:171, and the rules and regulations applicable to or concerning his conduct while a patient in the treatment facility. If the person is illiterate or does not read or understand English, appropriate provisions should be made to supply him this information. In addition, a copy of the information listed in this Subsection must be posted in any area where patients are confined and treated.

For information regarding Rights of Minor Patients, please review Louisiana Children's Code, Article 140

ACKNOWLEDGMENT OF RECEIPT OF HANDBOOK

The Client Handbook contains important information about Every Day Counts - ABA Therapy Center's (EDC) policies and procedures for clients that receive services in-home, school, or center. I understand that I should consult the Executive Director or my child's Supervising BCBA regarding any questions not answered in the handbook.

I understand I can find the handbook, in its entirety, on the EDC website listed as www.everydaycounts-aba.com. I understand that I am expected to read the entire handbook and refer to it periodically. I also understand that EDC will adhere to any Louisiana law that conflicts with the content herein.

Please sign this Acknowledgment of Receipt and return back to EDC's representative as soon as possible. A copy of this form will be retained in your client file.

Signature of Parent/Guardian

Date

Print Name

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By signing this form, you agree you have read the entire client handbook.

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