A picture containing flower

Description automatically generated

FAMILY HANDBOOK

September 2020

Table of Contents

[OUR PHILOSOPHY 2](#_Toc51311997)

[OUR SERVICES 3](#_Toc51311998)

[STAFF QUALIFICATIONS 4](#_Toc51311999)

[ADMISSION 4](#_Toc51312000)

[HOURS OF OPERATION AND HOLIDAYS 5](#_Toc51312001)

[MEALS AND SNACKS 5](#_Toc51312002)

[BEGINNING THERAPY SERVICES 6](#_Toc51312003)

[INDIVIDUALIZED TREATMENT PLAN FOR INTERVENTION SERVICES 6](#_Toc51312004)

[SAFETY PLANS 7](#_Toc51312005)

[PROFESSIONAL BOUNDARIES 7](#_Toc51312006)

[TRANSPORTATION POLICY 8](#_Toc51312007)

[SICK POLICY 8](#_Toc51312008)

[MEDICATION POLICY 10](#_Toc51312009)

[ATTENDANCE AND CANCELATION POLICY 10](#_Toc51312010)

[LATE PICK UP 11](#_Toc51312011)

[CLIENT RIGHTS 11](#_Toc51312012)

[GRIEVANCE PROCEDURE 12](#_Toc51312013)

[MANDATORY REPORTING 13](#_Toc51312014)

[COMMUNICATION & CONTACT INFORMATION 13](#_Toc51312015)

[ACKNOWLEDGMENT OF RECEIPT OF PARENT HANDBOOK 15](#_Toc51312016)

## OUR PHILOSOPHY

Our program strives to provide inclusive developmentally appropriate evidence-informed interventions for children. We believe that children require nurturing and supportive natural environments to master skills that will support them with daily routines in their homes, schools and communities. Partnering with families to understand the individual and personal needs of each child, allows us to support each child in achieving goals and maximizing their potential.

## OUR SERVICES

We provide the following services for children ages Birth to 21 who are eligible for Medicaid services. We can provide therapy services in clients’ homes, community locations, and in our Moscow center tailored to the individual needs of each child.

**Behavioral Intervention (BI):** Behavior Intervention teaches new skills to children and ensures they can use these skills in their natural environments. This 1:1 service can be provided in the home, community or center by a therapist credentialed as a Behavior Intervention (BI) Specialist. The BI Specialist holds a bachelor’s degree in a human service field, at least 1040 hours of experience with children with functional or behavioral needs and has completed a 40-hour course for the Registered Behavior Technician.

**Interdisciplinary Training (IT):** This is a companion service to behavioral intervention and is used to assist with implementing a participant’s health and medication monitoring, physical and mobility supports, use of assistive equipment, and intervention techniques. This is a collaborative service with the participant present and can be provided by the intervention specialist with a SLP, PT, OT, medical professional, or mental health professional.

**Community Based Supports (CBS):** This is a direct intervention service that includes techniques used to develop, improve and maintain developmentally appropriate functional abilities and daily living of the child. Habilitative skill can be provided individually or in a group. Group ratios are as follows 1 qualified staff providing direct service for two or three children. Group services will only be offered when all children’s objectives relate to benefiting from group interactions.

**Family Education (FE):** educates families on therapy topics of their choice. This can be individual or group education with other families.

## STAFF QUALIFICATIONS

All staff providing therapy services will maintain the following certifications and/or trainings:

* First Aid/CPR
* Crisis Prevention Institute
* Criminal history background check and fingerprinting through the Idaho Department of Health and Welfare
* IDHW Credentialing

## ADMISSION

We will admit new clients on a first come, first serve basis depending on our available staff, training and qualifications as well as client needs. Clients must first have determined eligibility for Intervention services or Community Based Supports. This can be obtained through Liberty Healthcare or from our agency. In order to receive services, a client must have Medicaid insurance, eligibility on the Vineland-3 Screening tool (a standard deviation of at least 1.5 in three areas of the assessment) and a recommendation from his/her primary care physician. If we do not have available staff, parents or guardians may choose to place their child on our wait list until appropriate staff become available. If your child is on the wait list, LEL staff will contact you will inform you as soon as therapy services are available. Family education may be available if the child’s needs are immediate while waiting for 1:1 intervention or community based support services to begin. Community based supports and family education services will require enrollment in the Idaho Department of Health and Welfare Developmental Disabilities Program.

## HOURS OF OPERATION AND HOLIDAYS

Hours of operation are from 8 a.m. to 5 p.m. Monday-Friday.

Therapy services will be scheduled with each family and agreed upon prior to service. Written notice in the need to change service hours are required 7 days prior to change in service. Emergency situations are described below under the attendance policy.

LEL will be closed on federal and state holidays. If the holiday falls on a weekend, we will be closed either the Friday prior or the Monday after. We will be closed the three business days the weeks of Thanksgiving and Christmas.

Additionally, we will be closed for staff work-days and therapist training 2 times per year. Each year, families will be given a calendar of planned closures and holidays.

LEL will follow the Moscow School District with severe weather closures. You may check with local news channels to determine if inclement weather permits a closure of our center. Power outages may also result in unexpected closure.

## MEALS AND SNACKS

**Nutrition:** Children’s development and learning are reliant on healthy nutritious meals. At LEL we will follow USDA guidelines for meals and snacks. We offer a variety of foods including fresh fruits and vegetables, whole grains and unprocessed proteins. Children will be taught about foods, how they support our growth and development, and how to prepare foods. This helps particularly if children have limited food exposure or are averse to certain foods.

**Mealtimes:** Social interactions, communication and motor skills are a few of the important skills we work on during mealtimes. We will serve lunch at 11:30 am and snack at 2:30 pm. Children will be encouraged to sit and join us for meals. Children will be offered a small snack outside of these times if they have a hunger need.

**Dietary Restrictions:** We will work to accommodate dietary restrictions due to religious and medical necessity. If your child has medical dietary restrictions, we require a note from a physician.

## BEGINNING THERAPY SERVICES

When you begin services with LEL, we will provide you with the necessary paperwork and releases to sign to allow us to communicate with your child’s other providers, gather information, and begin services. We will begin by interviewing your family, gathering your child’s records, and completing assessments. This allows us to get to know your child and understand their therapy needs. Following our initial assessment, a Program Implementation Plan will be developed for intervention services based on the needs you identified through the assessment process.

## INDIVIDUALIZED TREATMENT PLAN FOR INTERVENTION SERVICES

Every child will have an individualized treatment plan based on the needs identified by your family. This plan will include how our staff will teach replacement behaviors for problem behaviors your child may use to meet his/her need(s). The plan will also teach critical social skills and will include positive ways to prevent behavior. Your child’s therapist will take data on specific skills to make sure that your child is making progress. Each client’s parent, guardian, and/or the client will authorize the plan before the plan is finalized.

## SAFETY PLANS

All staff will receive annual fire safety training, and the agency center will hold fire drills every quarter. Your child’s therapist will be aware of emergency exits and routes to those exits if they are providing therapy in a community location.

When a child is going to receive therapy services at home, the staff and family will discuss safety needs and will create a safety plan for emergencies as needed to maintain the safety of clients and staff.

Handwashing is one of the most important tasks in our daily routine. Children, staff and parents will be required to wash their hands any time they enter the center. The children and staff will also wash before and after meals, using the restroom or diapering, and anytime there is contact with bodily fluids including saliva, mucus, vomit, etc.

Our facility is sanitized and disinfected daily. In each room of our center are daily cleaning, disinfecting and sanitizing checklists. Having a clean environment and practicing good hand hygiene prevents the spread of illness.

In the event your child gets minor injuries such as bumps, bruises or scrapes, we will administer first aid and document each incident. Parents will be asked to sign each incident report and will be given a copy upon request.

Release of children will be limited to those who are listed on the registration form as emergency contacts or authorized to release to. We will require photo identification for anyone who are unfamiliar to our staff. In the event that someone not listed needs to pick up your child, we require written permission in advance.

## PROFESSIONAL BOUNDARIES

When LEL staff work with your child, specifically for in-home services, it is important to develop a positive and professional relationship. We want our therapists to be focused on providing the best services to your child; for that reason, our staff are not allowed to engage in other activities with your family, such as babysitting or to engage in a dual relationship, such as a business relationship.

## TRANSPORTATION POLICY

If you choose to sign a transportation release, LEL staff may transport your child in a privately-owned vehicle to access community locations if required by your child’s plan. All therapists who drive clients will have a current driver’s license, training on car seat safety, and insurance information on file at LEL.

Clients will only ride in approved car seats and booster seats according to Idaho State Law, and staff will be expected to follow all safety laws and regulations.

Parents will provide transportation to and from the center, except in special circumstances.

## SICK POLICY

All clients and staff will be required to report any communicable disease to the director. When appropriate the director will report to staff and clients when exposure to an infectious disease has occurred.

To protect clients, families, and other staff members, clients and staff members will notify the director when they have or have had the potential to spread infectious disease.

Staff members will not work with clients when they are aware of their potential to spread illness. Therapy services may be cancelled or postponed preventing the spread of illness.

If a child or staff has any of the following signs and symptoms of illness, they must be kept/sent home from services. If symptoms are severe or persist, parents should contact their medical professional.

* Appearance/Behavior: Child looks or acts differently than usual: unusually tired, pale, loss of appetite, confused, irritable, difficult to awaken plus has a temperature of 100º F or above.
* Diarrhea: An increased number and/or abnormally loose stools in the previous 24 hours.
* Eye/Nose Drainage: Red or pink appearing eyes/thick mucus or pus draining from the eye or nose.
* Fever: Remember that temperatures taken under the arm are one degree lower than oral temperatures. Therefore, one degree Fahrenheit will be added to the armpit reading. Any child with an oral temperature of 100º F or above is considered to have a significant fever. Children should not return to services until they have been fever free for 24 hours.
* Respiratory Symptoms: Difficult or rapid breathing, severe cough, high-pitched croupy, wheezing or whooping sound after cough.
* Skin Problems: Undiagnosed skin rashes are possibly contagious. Be alert to rashes or sores with crusty, yellow or green drainage. Rashes with fevers can be serious and need to be discussed with the child’s health care provider.
* Sore Throat/Earache: Sore throat and/or difficulty swallowing, especially when fever or swollen glands in the neck are present.
* Unusual color Eyes or skin – yellow (jaundice) Stool – gray or white Urine- dark, or tea colored. The above symptoms can be found in hepatitis and should be evaluated by the child’s health care provider.
* Nausea/Vomiting: Two or more episodes of vomiting within the previous 24 hours.
* Diarrhea, vomiting, undiagnosed rashes, fever, pallor, irritability, excessive sleepiness and change of behavior are signs of illness that must be noted.
* Lice or Nits

Children or staff who have symptoms listed should be excluded from the services until:

* The symptoms have been gone for a minimum of 24 hours.

-or-

* A health care provider notes the child may return to the program without danger to himself or other children and staff.

-and

* The child is well enough to participate fully in the therapy routine.

Parents will be notified when a child has a sign or symptom requiring exclusion from the facility as described above.

If parents cannot be reached, the emergency contact will be called. A parent/legal guardian or authorized designee should pick up the child within an hour. If the child’s condition warrants immediate medical attention, 911 will be called.

The administrator may cancel services after an absence of three or more days due to illness, without first receiving a written statement from the parent or physician stating that the child may return to a regular schedule. If a child sustains a serious illness or injury or is hospitalized for any reason, a doctor’s readmit certificate is required.

## MEDICATION POLICY

LEL will administer medications only if your child needs it to treat a life-threatening symptom. If this is necessary, LEL staff will make sure that staff have the training they need to administer the medication and all procedures for storage, use, and administration will be followed. A physician order for the medication must be kept on file for your child.

Any exemptions from this policy must follow the requirements of the Idaho Department of Health and Welfare and must be approved by the director in writing.

## ATTENDANCE AND CANCELATION POLICY

Please let the director know as soon as possible when your child will not be able to make it to his or her therapy session.

LEL is dedicated to the success of our clients. For our clients to be successful, attendance by both the LEL staff and the clients are required. Our policy is to maintain both staff and client attendance at 90% or above. If attendance falls below 90%, a discussion regarding the need to reduce schedule will occur.

“No shows” affect the overall performance of LEL. To ensure that no shows only occur during emergency situations, LEL will only allow a client to have two “no show” appointments. If a client has two no show appointments, a discussion of placing client services on hold must occur.

If a therapist needs to cancel a therapy session, he or she will attempt to schedule a time to make up the therapy hours with your child if possible.

## LATE PICK UP

If the person responsible for pick-up of a client does not arrive at the designated pick-up time, the agency will attempt to contact all provided numbers on the Client Profile sheet. If the agency is unable to contact a responsible party, they will attempt to reach all emergency contacts. If the agency cannot reach the parent/guardian(s) and emergency contacts, the agency will contact law enforcement after 20 minutes have passed without pick-up or notification of when pick up will occur.

## CLIENT RIGHTS

You and your child have the right to:

1. Humane Care and Treatment

2. Free from Isolation

3. Free from restraints, unless necessary for the safety of that person or for the safety of others

4. Free from mental and physical abuse

5. Voice grievances and recommend changes in policies or services being offered

6. Practice own religion

7. Wear own clothing and retain use of personal possessions

8. Be informed of medical and habilitative condition of services available at the agency and the charges for the services

9. Reasonable access to all records concerning self

10. Refuse services

11. Exercise all civil rights, unless limited by prior court order

12. Privacy and confidentiality

13. Courteous treatment

14. A response from the agency to any requests made within a reasonable time frame

15. Receive services that enhance social image and personal competencies and promote inclusion in the community

16. Refuse to perform services for the agency

17. Receive wages consistent with state and federal law when employed

18. Review results of the most recent survey conducted by the Department and any accompanying plan of correction

19. All other rights established by law

20. Be protected from harm

If you believe you or your child’s rights are being violated, you may contact:

Child Protection Services: Idaho Care Line by dialing 2-1-1 or 1-800-926-2588 Council on Developmental Disabilities: 1-208-334-2178

Disability Rights of Idaho: 1-866-262-3462

Family and Community Services Program Supervisor Pete Petersen: 208-798-4117 or Toll Free: 1-855-334-5512

## GRIEVANCE PROCEDURE

LEL wants to make sure that each client or client’s parent or guardian can communicate any grievances and/or make recommendations for changes in how we deliver services. Each family will be given the number of the agency director.

In case of a grievance, the first step is for the client or family to take the issue to the person with whom they have a grievance. If the grievance has not been settled with direct communication the family may move on to the next step of our procedure.

The next step is to fill out a grievance form and give it to the clinical supervisor or agency director, providing specific information on how the grievance can be resolved. We can provide help with filling out the grievance form if needed.

The agency director will be responsible to respond to the written grievance within 3 business days.

If no resolution is made through this process, the grievance will be brought to a team meeting to discuss how to resolve the grievance.

## MANDATORY REPORTING

Staff employed by LEL are required by the Child Protective Act to report any suspected child abuse or neglect to Child Protective Services and/or Law Enforcement as appropriate. This includes any suspected or confirmed incidents of mistreatments, neglect, exploitation, or abuse.

The safety and welfare of our clients is crucially important to LEL. To ensure our client’s safety, LEL staff will not release any client to an adult who appears to be intoxicated or impaired at pick up time. In the event of this occurring, LEL staff will attempt to provide support to the family by asking to contact another person to pick up their child. Further support and education will be provided to ensure the safety and well-being of our clients and their families.

## COMMUNICATION & CONTACT INFORMATION

We want to encourage frequent communication about your child’s therapy needs and progress. You will have frequent opportunities to be updated on your child’s progress by their therapist.

If you have any questions or concerns, please contact us.

Jessie Davis, Clinical Director/Owner,

Phone: (208) 582-3281

Email: [jessied@lotusearlylearning.org](mailto:jessied@lotusearlylearning.org)

## ACKNOWLEDGMENT OF RECEIPT OF PARENT HANDBOOK

Parent or guardian:

I acknowledge that I have received a copy of the Lotus Early Learning family handbook, and that a LEL staff member has gone over the contents and answered any of my questions regarding information in the handbook.

I understand that the agency may change policies and/or procedures at any time, as well as vary them or interpret them as the agency deems appropriate. I understand that I will be notified if policies and/or procedures change.

Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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