Mission Statement

Therapy Associates ABA Services, LLC ("Agency" or "TA") provides high quality pediatric therapy services. Therapy Associates ABA Services refers providers for ABA services through insurance companies.

Our goal is to help children with autism achieve an age appropriate level across the developmental domains, to become socially appropriate, initiating actions with their peers and with adults, and to be self-regulated and self-managed to the extent possible. We support a family training model which emphasizes learning and cooperation between practitioners and family members and focuses on family priorities and concerns.

Our agency supports the right of families to have their cultural and religious priorities respected and we make every effort to accommodate a family's individual needs.

To the maximum extent possible TA services its client families in their natural environments, including the home and community settings that are natural and typical for all children of the child’s age. TA supports therapeutic methods that emphasize using materials and equipment that are found in these environments, so that the family can learn techniques to carry over to the child's normally occurring routines. Families and therapists are encouraged to call or write to the Agency to communicate concerns, difficulties or requests. TA will endeavor to solve all problems to the best of its ability.

Non-Discrimination Policy
TA services children and families without discrimination based on race, color, religion, sex, national origin, age, or disability.

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I. **Therapist Assignment**

A. Families the Agency serves are encouraged to contact TA via phone, fax, mail or email at any time with any concerns as well as with positive feedback about its providers.

B. If a parent has a concern or complaint about a provider, the Agency will endeavor to remedy the situation. If the problem continues without amelioration, and a parent/caregiver is still dissatisfied with the therapist the Agency has assigned to them, s/he may request a change in provider. This can be done by contacting the Agency.
   1. The parent should give the reason for his/her dissatisfaction.
   2. After a review of the parent's concern, a new provider may be assigned based on the availability of alternate providers.

II. **Family Involvement**

A. TA seeks to empower and enable YOU – the parent(s)/guardian(s) -- to facilitate the growth and development of your children. Practitioners are sent to families to educate you and your other caregivers how to promote this development. Therefore services are provided in your child's natural environment, using the child's toys and surroundings.

B. Depending on the age of the child who is being serviced, s/he will be encouraged to participate in his/her treatment/behavior plan to the extent possible.

III. **Safety and Hygiene**

A. The parent is responsible to provide a clean and safe environment for the therapist to conduct services. A therapist may never stay in a place or situation which s/he deems unsafe and may not return to the premises unless or until safety provisions are made. A therapist must immediately leave an unsafe place. The determination of what is unsafe is at the therapist's discretion.

B. When there is one or more male adults in the home, TA suggests that a female therapist should request that the front door to the home remain ajar for the duration of the therapy session; similarly, TA suggests that male therapists work with an open door to the home when there is only a female adult present in the home.

C. A therapist is not obligated to work in a hygienically compromised or unclean environment. If cleanliness is not maintained to the therapist's satisfaction, s/he may request to be removed from the case and the Agency will respect that request. Depending on the nature of the situation, the agency reserves the right to discontinue all services if cleanliness is not maintained.

D. A therapist is not obligated to work if the child or another resident of the house has a contagious illness. It is in the therapist's discretion whether to temporarily discontinue services depending on the nature of the illness. The parent is responsible for informing the therapist if there is a contagious illness in the home. Depending on the nature of the illness, the therapist may not be obligated to return to the home until a letter of medical clearance signed by a physician is forwarded to the Agency.
E. As set out in the state of New Jersey's Administrative code, there are specific infectious diseases that must be reported to local health officials if there is a confirmed or suspected case. TA Practitioners and/or Agency administrator must report all communicable diseases in accordance with N.J.A.C. 8:57-1.5,6 to the proper health authorities. (See Appendix http://www.nj.gov/nj/community/health for list of diseases).

F. A therapist should not service any child when the therapist is harboring a contagious illness.

G. Services may never be provided in therapist's home.

H. A therapist may not transport a client in the therapist's car.

I. A therapist may not be left alone with a client child.

J. When it is time for the practitioner to write the progress note, s/he must hand over the complete responsibility for watching the child to the parent or babysitter, and it is understood that the parent or babysitter will ensure proper supervision at that point. Practitioner cannot safely watch the child and write the note at the same time.

K. If a parent/caregiver wants a third party to observe and/or record a session by an Agency therapist, this must be pre-approved by the therapist and the Agency office. Please call the Agency if you have any questions about having another person attend a therapy session.

L. TA retains the right at all times to have one of its supervisors observe the therapist as a way of ensuring quality services.

IV. **Policy on Makeup Sessions**

A. If a parent cancels a session for any reason, the therapist is not obligated to make up that session. However, the therapist may make up the session if s/he can, subject to the limitations of the insurance company authorizations and limitations.

B. Similarly, if a treatment day falls on a religious or national holiday as enumerated below, the therapist is not required to provide a makeup session.

C. The Agency office may be closed, and our therapists may elect not to provide services on the following holidays: New Year's Day, Presidents' Day, Purim, Easter, Passover (1st two days and last two days), Memorial Day, Shavuos, Labor Day, Rosh Hashana, Yom Kippur, Sukkos, Shmini Atzeres, Thanksgiving, Christmas. There is no requirement to provide makeup sessions for these holidays. If a therapist observes religious holidays other than those mentioned above, s/he is permitted to take them as excused holidays as well.

D. A therapist may be excused for canceling up to two consecutive weeks of sessions. However, the therapist is required to make up any sessions s/he misses beyond this.

E. If a therapist needs to cancel sessions after two consecutive weeks of missed or cancelled sessions, and cannot find the time to provide makeups, a substitute therapist will be offered to the parent to provide the makeups (see section VII).
F. Makeups can be done before or after the missed session, subject to insurance authorizations. Questions about specific cases may be addressed by calling the TA offices.

G. If a parent repeatedly cancels service sessions, the practitioner has the option of asking to be transferred off the case. Agency will generally honor that request, and depending on the reasons for the multiple cancellations, reserves the right to discontinue servicing the case.

H. Cancellation of a scheduled service session less than 24 hours in advance can be considered a “no show.”

V. Policy on No Shows

A. Definitions:

A “no show” means either:

1. that a therapist does not appear at a prearranged time and location for a scheduled therapy session, when no communication about cancellation has taken place prior to the scheduled session. Being more than 15 minutes late for a scheduled session can be called a no show. (“therapist no show”); or

2. that a child is not available to receive therapy at the prearranged time and location for a scheduled therapy session, when no communication about cancellation has taken place prior to the scheduled session (“parent no show”). A child’s being more than 15 minutes late for a scheduled session can be called a no show. Examples of a child ‘not being available’ are:

   - s/he is sleeping;
   - that s/he is awake but too groggy or sick to receive therapy,
   - the child is busy with another activity, such as eating, bathing or another therapy session, and is not ready for therapy by 15 minutes after the scheduled time;
   - there is no adult over the age of 18 with the child;
   - that the parent plans another activity at the time of the therapy session such as a trip to a doctor;
   - the child/parent is not home or doesn't answer the door;
   - A parent’s calling a therapist to cancel while s/he is en route to the house.

B. Policy:

TA recognizes that on a rare occasion, a parent or therapist may experience an emergency situation that requires missing a session without being able to notify the other party, or may on a rare occasion forget to cancel a session. When a no-show occurs, Agency policy is as follows:

1. Therapist ‘no show’:

   In the event a therapist misses a prescheduled session without prior explanation, the parent should call the therapist to clarify the situation. Often, what is perceived as a no-show is in actuality a miscommunication about the agreed-upon schedule. If a therapist no show happens more than once, the parent should contact TA to notify us of the
situation. The Agency will then confer with the therapist, and if necessary, counsel the 
therapist to be in touch with the parent at all times. If the therapist subsequently 
misses another session without prior notice or explanation (for a total of three no-
shows), the parent may request another therapist and the Agency will respect that 
request.

2. Parent ‘no show’:

If a parent/caregiver misses a prescheduled therapy session without prior notification, 
the therapist should contact the parent to clarify why s/he missed the session. In 
addition, the therapist should call the Agency to notify them. Agency will clarify that no 
miscommunication about the schedule occurred and will establish that the 
parent/caregiver will be available in the future or will call to cancel at least 24 hours 
prior to the scheduled session or at least several hours if a sudden situation arises. 

Agency policy is that if there is a documented parent no-show two times within any four 
week period, a therapist may request to be taken off the case and the Agency may 
respect that request. In addition, if a parent does not show three times over a more 
extended time period, a therapist may request to be taken off the case and Agency will 
respect that request. Depending on the frequency of the no shows, the offered 
explanations, and the parent’s response to Agency concerns, TA reserves the right to 
discontinue servicing that child altogether. Family will then be referred back to their 
insurance carrier to seek an alternate agency to provide services for their child. 

All parents of children receiving therapy must inform the Agency when they move or get a 
new phone number. Failure to do so may impede the therapist’s ability to provide services, 
and sessions missed as a result will be considered as parent no shows.

VI. Documentation

A. Each service “session” consists of working with the child, giving follow-through instructions 
to the parent/guardian/caregiver, and writing the clinical note. The note should be written 
in the home during the session. The therapist should review the note before s/he leaves. If 
the therapist sees a child out of the home, individual arrangements may be made to receive 
the note.

B. The parent should sign the note if present at the session.

C. In addition to the clinical note, parent/caregiver must sign a log form, which documents 
attendance and duration of session, after each session. If the therapist sees a child out of 
the home, the babysitter or day care personnel should sign the log at the end of every 
session. It is improper to ask a therapist to wait for some future time to get the caregiver’s 
signature on the form.

VII. Therapist Substitution

A. Definition: a “substitution” shall mean the temporary replacement of a therapist with a 
similarly qualified therapist for a period not to exceed three weeks.
B. A parent/guardian has the option of requesting that a substitute therapist be placed in the home when the regular therapist is unable to provide services for more than two consecutive weeks or has missed more than two consecutive weeks of sessions and cannot provide makeups.

C. Where services are/must be missed for longer than three weeks, the Agency will provide a replacement, not a substitute therapist. In some situations, such as maternity leave, the therapist is entitled to return to her caseload at the end of the leave of absence. If a parent prefers otherwise, they may make that request to the Agency office and it will be considered.

VIII. Ensuring Fully Informed Consent

A. Parents/guardians have the right to choose which interventions, if any, they want for their child from those determined by the Team to be appropriate. They are never required to receive services, and if they choose to reject one or more services offered, it is without prejudice to their receipt of other services. Therefore, parents must consent to all services given to their child prior to the first service provision.

B. If during the course of treatment, the parent or caregiver decides not to continue any particular therapy, the parent must alert the Agency. TA will then notify the therapist to stop seeing the child.

C. It is not acceptable for a parent to simply not show up for therapy sessions if s/he doesn't want a practitioner to continue.

D. If additional assessments are requested subsequent to the development of the Treatment/Behavior plan, the therapist must obtain the parent's consent prior to the assessment.

IX. Ensuring Confidentiality

A. All children and their families enrolled in the Early Intervention system have a right to privacy and to have their personal information kept strictly confidential, according to federal and state law and professional ethics. All therapists contracting with TA are instructed about confidentiality rules under federal law in detail, and are contractually obligated to follow them.

B. Should a parent elect that a child be seen at a babysitter's house or in a daycare, the therapist may not speak to the caretaker about the child’s development nor show them the progress note, without written consent of the parent.

C. Similarly, a therapist may not converse with any other third party about the child's development, such as a pediatrician or other doctor, without the parent's written consent.

D. Should the parent wish to give written consent for the therapist to speak to a third party, a legal consent form should be obtained from the therapist or the TA offices for the parent to sign.
X.  **Suspected Child Abuse/ Neglect**

A. Any therapist, support personnel, or paraprofessional who has reasonable cause to believe that a child has been or is being subjected to any form of hitting, corporal punishment, abusive language, ridicule, harsh, humiliating or frightening treatment, or any other kind of child abuse, neglect or exploitation by any adult, is required by State Law to report the concern immediately to the **Division of Youth and Family Services (DYFS) Office of Child Abuse Control 24 hour hotline (English & Spanish) 1-877-NJABUSE**; or to any county DYFS District Office.

B. New Jersey law states that any therapist making a report in good faith of child abuse and neglect shall have immunity from any civil or criminal liability. (N.J. S.A. 9:6-8.13).