



Clinic Policies & Therapist-Client Agreement

Client/Child's Name:

Date:

Mission and Program Philosophy

Paper Airplane Behavioral Services was established on premise that children, much like paper airplanes, need a guiding hand and driving force in order to reach their full potential. We believe that in addition to encouraging and nurturing environment, early identification of needs and services are essential to a child's healthy development. It is the mission of Paper Airplane Behavioral Services to provide quality and evidence-based behavioral services for children and families in an effort to maximize each child's potential and help them soar to new heights. As such, therapeutic treatment and auxiliary programs are tailored to each child's individual needs and are developed and maintained through initial and on-going assessments and frequent analysis of progress. Additionally, Paper Airplane Behavioral Services believes the involvement of parents and caregivers is a critical component of treatment and promotes on-going collaboration with all individuals involved (e.g. parents, case managers, therapists, tutors) to provide a strong and effective team for each client.

Contact Information

Paper Airplane Behavioral Services, PA
3503 Kernan Blvd S, Suite 1
Jacksonville, Florida 32224

info@paperairplanebehavioral.com
O. 904-900-1664
F. 844.231.8895

**Therapists also provide clients with their individual work cell numbers for ease of communication. Therapists and/or case supervisors should be contacted directly via phone, text, and/or email as appropriate. Clients are welcome to leave a message on the main office line but should note that the number is not a live line and the message may not be received right away. Messages left on the main line are checked periodically through the week and could take 48-72 hours for response.*

Hours of Operation

Generally, sessions are available between hours of 8:30am and 5:30pm, Monday through Thursday and between 8:30am and 2:30pm on Friday. Occasionally or recurring, early morning or late evening sessions may be provided as needed if therapists are available.

Treatment Location(s)

Our services are available at our Kernan Plaza clinic address. Services may on occasion be provided off-site (e.g., home, school, community) in accordance with each child's treatment needs. Consideration of off-site services will be determined by medical necessity as well as stipulations and/or restrictions identified by any third party payors/insurance companies. It is expected that a portion of the clinic hours be maintained regardless of off-site service provision. Paper Airplane reserves the right to charge clients for therapist travel time to non-clinic locations, as insurance will not cover this service. As a courtesy, we will refrain from implementing charges for travel time until it becomes financially necessary to do so. This will be discussed with clients beforehand in the event that any changes to the travel fee policy is anticipated in the future

Services

Paper Airplane Behavioral Services provides a number of therapeutic and academic services. While our primary staff is made up of Applied Behavior Analysis service providers, we often contract providers of other disciplines in order to best meet our client's needs. These auxiliary services are offered with limited availability as they depend on schedules of independent contractors. When a client utilizes these services, we do our best to coordinate "stacked scheduling" when possible and appropriate.

Applied Behavior Analysis
Social Skills Groups
Homeschool Support Programs

Academic Tutoring
Speech Therapy*
Occupational Therapy*

*Subject to Availability



Clinic Policies & Therapist-Client Agreement

Confidentiality

Pursuant to HIPAA, Protected Health Information is separated into two sets of professional records. The Clinical Record consisting of administrative information (e.g., insurance and billing details, etc.) and basic therapeutic information including each client's:

- Reason for seeking services his/her diagnosis
- Description of ways in which the problem impacts his/her life
- Treatment goals and progress toward treatment goals
- Medical/treatment/and social history and past treatment records received from other providers
- Reports of professional consultations
- Billing records
- Reports sent to outside providers, third-party payor, and insurance carriers

In addition to the Clinical Record, Paper Airplane Behavioral Services keeps a Working File for each client. These notes are for our own use and are designed to assist us in providing each client with the best treatment. While the contents of the Working File may vary from client to client, they can include the contents of conversations, an analysis of those conversations, and how they impact individual therapy. They may also contain particularly sensitive information that is revealed but not required to be included in the Clinical Record. The Working File is not available to the client and cannot be sent or shared with anyone including insurance companies without written and signed authorization of the client. Insurance companies cannot require authorization of release as a condition of coverage nor penalize the beneficiary in any way of authorization is refused.

Any emails, texts, and notes taken during phone conversations and from voicemails are considered to be a part of the medical record. Please understand that depending on the type of record request and the reason for the record request, such information may be disclosed if requested.

All records will remain on file for a minimum of seven years after the last contact with the client and, if the client is a minor, the records will be maintained until three years after the age of majority. In the event of the closing of Paper Airplane Behavioral Services, all active clients will be notified by letter, and inactive clients may contact Marcelle Medina-Smester through the Behavior Analyst Certification Board Registry. Certain records may be requested with requests for records acknowledged within a 30 day period when reasonably possible. All records will be kept in a secure location, and disposed of after the legally specified time. A written, signed, and dated request must be submitted in order to access Clinical Records. There are, however, other situations that require only written advance consent be provided. Please note some of the following are legal limitations of confidentiality.

1. We may occasionally find it helpful to consult other healthcare professionals about a case. During a consultation, every effort to avoid revealing the identity of the client is made. The other professionals are also legally bound to keep the information confidential.
2. Disclosures about services and related information are provided to health insurers or to collect overdue fees, such as through a collection agency.
3. In the event of client involvement in court proceedings, a request may be made for information concerning the professional services provided by Paper Airplane Behavioral Services. If you are involved in or contemplating litigation, you should consult with your attorney to determine whether a court would be likely to order Paper Airplane Behavioral Services to disclose information and keep us informed. Please be aware that significant additional costs will be incurred by the client (that must be paid out of pocket and is not covered by health insurance) for any time that a therapist is required to spend related to involvement in any court proceedings (e.g., extensive documentation preparation, time spent attending court hearings and/or consulting with lawyers or individuals related to the legal proceedings, etc.). These rates can be provided upon request.
4. If a government agency is requesting the information for health oversight activities, we may be required to provide it to them, In these cases your identity is protected.
5. If a client files a complaint or lawsuit against Paper Airplane Behavioral Services, we may disclose relevant information regarding that client as a part of the defense.



Clinic Policies & Therapist-Client Agreement

6. If there's is cause to suspect that a child under 18 is abused or neglected, or if there is reasonably cause to believe that a disabled adult is in need of protective services, the law requires that we file a report with the County Director of Social Services and/or provide information if contacted by the department.

NOTE: Every staff member of Paper Airplane Behavioral Services is a mandated reporter by law. We are legally bound to report any known or suspected instance of abuse or neglect.

7. If a client presents an imminent danger to the health and safety of themselves or someone else, Paper Airplane Behavioral Services may be required to disclose information in order to take protective actions, including initiating hospitalization, providing warning to relevant individuals, and or/calling the police or emergency personnel.
8. We have Business Associates with whom we may share your Protected Health Information. Examples include answering services as necessary, collection agencies or collection attorneys, or technicians who may need to service equipment where necessary information is stored. Agreements with business associates include a HIPAA compliance clause such that they are also obligated to respect the privacy of your Protected Health Information
9. Unless otherwise stated by the client or legal guardian, messages may be left on an answering machine or voicemail inbox regarding contacting our office for scheduling or payment.
10. If a client is seen in group or in family therapy, we ask that each member of the therapy promise to keep whatever happens in treatment confidential; however, we cannot guarantee this to occur.

While this written summary of exceptions to confidentiality should prove helpful in informing our clients about potential problems, it is important that any current or future questions or concerns be brought to the attention of the provider or clinical director for discussion.

Release of Records

A client may examine or receive a copy of his/her Clinical Record at any time. Because these are professional records, they can be misinterpreted and/or upsetting to untrained readers. If a client wishes to access records, it is recommended that they be initially reviewed with the Clinical Supervisor or that they be sent directly to another health professional to be reviewed discussed with you. A complete and signed written *Request and Authorization for Release of Health Information Form* is required before any documents are released. The form must be completed, dated, and signed by the client and specific desired components of the medical records identified. The client is defined as the patient if over 18 years of age, unless deemed mentally incompetent to understand their rights regarding limitations of confidentiality. Otherwise, the client is the parent or legal guardian of the patient.

Requests will be processed within 30 days of submission. Depending on the number of documents requested and the manner in which the documents are to be provided, a small fee may apply. Additionally at times, as summary of services may be determined to be most appropriate rather than a complete copy of each individual document; this will be discussed with the client on a case by case basis.

Parental/Custody Arrangements

When a child's biological parents are separated, divorced, or never married, Paper Airplane Behavioral Services requires that legal documentation is kept in the client's confidential file regarding custody agreements and parental rights (specifically regarding access to the child's medical information and parent rights to make medical decisions). Please note, these records will be kept separate from the client's Clinical Record and will not be shared with other agencies or individuals unless it is deemed necessary and prior authorization has been provided.

Additionally, in cases where parents are not together/divorced, BOTH parents must provide consent before a child can be seen beyond the initial new client intake. The parent that attends the initial intake appointment IS RESPONSIBLE for obtaining consent from the other parent, if the other parent is unable to attend the first appointment. Further, the parent present for the initial intake MUST ATTST ON THE CLIENT INFORMATION FORM THAT BOTH PARENTS ARE AWARE OF AND CONSENTING TO SERVICES. Additionally, it is the responsibility of the parent whom schedules/attends any sessions at Paper Airplane Behavioral Services to inform the other parent of scheduled sessions, provide the other parent with the contact information for the therapist, and provide progress updates, etc. If both parents have legal custody of the child,



Clinic Policies & Therapist-Client Agreement

then BOTH parents are welcome and encouraged to contact the therapist at any time. It is NOT the responsibility of Paper Airplane Behavioral Services to initiate this contact or the sharing of information with the non-attending parent.

Scheduling/Attendance Policy

Treatment services are scheduled in accordance with recommendations by medical necessity determined by the Supervising Behavior Analyst and, when applicable, as authorized by the client's insurance provider. Paper Airplane Behavioral Services uses Aloha Practice Management for the scheduling of all client services. Client Portal access is granted to the parent/guardian identified at intake as the "responsible party." Scheduled appointments and authorizations may be viewed by accessing the Client Portal.

Sessions must be cancelled for child illness to prevent the spread of germs. In order to return to therapy, the client must be symptom free without symptom-reducing medication or on antibiotics for 24 hours or a doctor's note must be provided attesting the child is not contagious. Illness is defined as fever of 100 degrees or higher, vomiting and/or diarrhea, displaying inhibiting signs of congestion or having eye or respiratory discharge, open sores that are not able to be covered, lice, communicable diseases, and/or having known bacterial infections. If a child is in session but unable to participate in therapy due to signs of illness or impairing fatigue (e.g., sleeping for more than 5 minutes, inability to prevent falling asleep/difficulty waking) parents will be called and required to pick up the child within 30 minutes of the call.

- ✈ *Cancellations.* Cancellations must be made at least 24 hours in advance. In most cases, failure to provide notification 24 hours in advance will result in a \$60 fee charged to the client account. Cancellations made due to illness may be excused from advance notice with provision of a doctor's note. At the discretion of Paper Airplane Behavioral Services, P.A. chief operating staff, additional circumstances resulting in a cancellation with failure to provide advance notice may also be excused (See ABA Client Handbook). Each client is allowed 3 excused cancellations made per quarter (Jan-Mar, Apr-Jun, Jul-Sep, Oct-Dec). Excused cancellations in excess of 3 per quarter will be charged \$60 per missed appointment. Under special circumstances, additional cancellations with prior notification or a leave of absence from treatment may not incur such charges with pre-approval from chief operating staff.
- ✈ *Drop-off/Pick-up.* Our providers often have back-to-back sessions, and it is important that a session begin and end at scheduled times allowing time for feedback to be provided to the parent or caregiver.
 - *Late Arrival.* We request that clients arrive shortly before a scheduled session time to ensure the benefit of participation in entire session. If a client is more than 15 minutes late for the session, a charge at a rate of \$15 per 15 minutes late will be added to the client account. If late arrival is anticipated, please contact Paper Airplane Behavioral Services or the provider to confirm the client will be present for treatment. After 15 minutes without contact from the scheduled session time, a call will be made to the primary number on file to confirm the session or cancel the appointment. If contact is not made, the provider will leave a voicemail cancelling the session. No-show or confirmed cancellation will be considered late cancellations and a late cancellation fee will be applied. This policy is also in effect for offsite sessions if the child is not present at the stated session start time.
 - *Late Pick-Up.* If a parent or caregiver does not remain on-site for treatment sessions at the clinic, they must arrive on-site no less than 5-minutes prior to the end of the session time. \$12.50 for each 15-minute period will be charged to the client account. If a parent or caregiver is more than 15-minutes late, more than twice, we reserve the right to require a parent to be on-site for all sessions.

Clients that display a persistent or repeated pattern of attendance issues, including cancellations, no-shows, and/or late arrivals, may forfeit their scheduled time slot(s) and will be unable to reserve recurring times and/or schedule appointments in preferred time slots (e.g., 2:00pm or later during the school year). Please understand that these policies are in place in order for our staff to best implement the programs prescribed for all of our clients. We understand that emergency situations arise, on both ends (staff and parents), and these situations will be handled on a case-by-case basis.

Note: Our providers are also expected to give 24 hours notice for cancellations and are expected to call if they will be late to offsite sessions due to traffic or other unforeseen circumstances. If you feel that provider cancellations or late sessions are becoming "excessive", please contact your Supervising BCBA or directly contact the office to discuss your concerns.



Clinic Policies & Therapist-Client Agreement

Conduct

All staff at Paper Airplane Behavioral Services adhere ethical guidelines set for by the governing body of their discipline as well as to ethical guidelines of American Psychological Association and Florida laws as they pertain to client-therapist relationships and other areas of ethical concern. Please bring any concerns immediately to the attention of the Executive Director, Marcelle Medina-Smester. Additionally, please be advised that if you have any ethical complaints, these may also be addressed with the Behavior Analyst Certification Board.

- Behavior Analyst Certification Board (BACB) – https://www.bacb.com/wp-content/uploads/2020/05/BACB-Compliance-Code-english_190318.pdf
- American Speech-Language Hearing Association (ASHA) – <https://www.asha.org/Code-of-Ethics/>
- The American Occupational Therapy Association, Inc. (AOTA) – <https://www.aota.org/Practice/Ethics.aspx>
- Florida Department of Education (FDOE) - <http://www.fldoe.org/teaching/professional-practices/code-of-ethics-principles-of-professio.stml>

PLEASE COMPLETE, SIGN, AND ATTEST TO THE FOLLOWING

Client/Child Name: _____

Name of Parent(s)/Guardian(s) Completing this Agreement: _____

Name of any additional Parent(s)/Legal Guardian(s): _____

ACKNOWLEDGEMENT OF CONTRACT TERMS:

I hereby acknowledge that I have read the information in this Therapist/Client Agreement and agree to abide by its terms.

Signature

Date

ATTESTATION ON ACCURACY OF INFORMATION PROVIDED:

I attest that the information that I have provided to Paper Airplane Behavioral Services is true and accurate.

Signature

Date

CONSENT FOR SERVICES:

I hereby give consent and authorize for my child to receive services through Paper Airplane Behavioral Services. I attest that I have legal authority to consent for such services and/or if my child has any additional legal guardian/parent that is not present, I attest that this individual is aware of and agrees to the initiation of these services. Further, I attest that my initiation of services does not violate the legal rights or agreements with any other legal guardian/parent of my child and Paper Airplane Behavioral Services will not be held liable for any misinformation provided or for failure to provide Paper Airplane Behavioral Services with relevant details regarding custody/legal rights to medical decision making for my child.

Signature

Date