

POLICY STATEMENT

ILLNESS

Initial

If your child is ill, please cancel your appointment. Your child will not receive the full benefit of the therapy session if they are too ill to fully participate. Additionally, they may infect other children. **Your child should be free of symptoms, contagion, fever or vomiting for 24 hours before returning to therapy.** We will follow the CDC recommendations regarding restrictions to prevent the spread of Covid-19. We are committed to ensuring a healthy environment for all our families.

BAD WEATHER

Initial

In the event of severe weather, we will follow the **Keller ISD Weather Cancellation Policy** (Keller clinic) or **Northwest ISD Weather Cancellation** (Justin clinic), not the school calendar. Please watch your local news stations for this information.

TREATMENT SESSIONS

Initial

Each session will include communication with your therapist regarding your child's progress or your concerns, direct one-on-one therapy with the therapist, and instruction for home activities. **Your child may be dismissed during the last 5 minutes of the session** in order for the therapist to have the opportunity to document progress toward goals and to plan for the next visit.

THERAPIST CANCELLATIONS

Initial

Sometimes there are reasons that your therapist is not available. If your therapist is ill or out of the office, your child will be rescheduled with another therapist at the same time. The covering therapist has access to your child's goals and treatment plans. If the same time is not available, you will be contacted to reschedule for a different day/time.

PRIVACY POLICY

initial

I acknowledge that I have received and reviewed information on the Notice of Privacy Practices (HIPAA Notice).

TREATMENT AREAS

Initial

In order to ensure that patients have access to all areas needed for their care, and to ensure the safety of all guests within our building, children other than the patient are not permitted into treatment areas. They should remain in the lobby with supervision of a parent or guardian. Parents are permitted into the session in order to observe and for instruction in home programs. Please limit the number of adults observing a session to one.

PARENT/GUARDIAN ON THE PREMISES

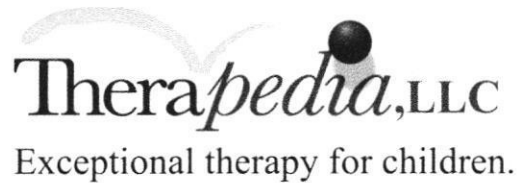
Initial

For the safety of your child, we require that a parent or guardian remain on the premises at all times that the child is in a therapy session. Children in the lobby must be accompanied by an adult. Please do not plan to drop off your child or run errands during their appointment time.

I acknowledge that I have reviewed and accept the above policies.

Parent Signature

Date



ATTENDANCE POLICY

Your therapy team at Therapedia, LLC is committed to helping your child meet their therapy goals. In order to achieve goals and make steady progress, consistent attendance is very important. Consistent attendance at the prescribed frequency results in greater success and shorter overall duration of therapy.

Purpose of the attendance policy: To ensure improved outcomes and accommodate scheduling availability for clients that are committed to attending.

Please note: Occupational, physical and speech therapy are considered medical services. Poor attendance can result in your services no longer being covered by insurance.

Attendance: Attendance rates of at least 75% are required in order to maintain a recurring appointment. If attendance rates fall below 75% over a 3 month period, your recurring appointment will be removed and scheduling will be available only on a week to week basis. In order to resume recurrent appointment scheduling, attendance of greater than 75% over the following three months will be required.

Cancellations: Prior notice is necessary. Please provide at least 24 hours notice if your child will not be able to attend. Call 817-562-3111(Keller Clinic) or 940-654-4011(Justin Clinic) as soon as possible. Leave a message and provide a reason for the cancellation.

Missed appointments / No shows: A fee of \$50 will be charged to you for any appointment that is missed without cancellation, including appointments for evaluations. If the missed appointment is rescheduled, the fee will be applied to the rescheduled appointment once it has been attended.

Vacations: We appreciate a 2 week notice of vacation plans. Families who are planning to be absent for more than 2 weeks will be removed from the schedule and placed on their therapist's waiting list.

Late arrivals: If you will be more than 10 minutes late for an appointment, please call to verify that your therapist can still see you. If you are 15 or more minutes late for an appointment, your appointment may be canceled and considered as a missed appointment/no show. A consistent pattern of late arrivals may result in a discontinuation of services.

I have read and understand the Therapedia, LLC attendance policy.

Signature

Date