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# Sendan Center ABA Services Parent Manual

## Program Guidelines & Policies

## Program Guidelines

**T**hank you for choosing us to provide behavioral consultation/ABA services for your child. The following guide will outline program guidelines and administrative policies and procedures. Please read it thoroughly and keep it handy for future reference. Please sign the last two pages and return the signed originals to Sendan, keeping a copy for yourself.

### Teaching Technique

Behavioral Therapy (BT) is a comprehensive treatment program for children with autism and other neurodevelopmental disorders, as well as for typically developing children with disruptive behaviors. The basis of BT intervention involves the principles and application of applied behavior analysis. The following concepts and techniques may be used: discrete trial teaching, differential reinforcement, shaping, chaining, extinction, DRO, DRI, DRA and generalization training. All interventions used with your child will also be governed by the ethics and protocols set forth by the Behavior Analyst Certification Board, and the American Psychological Association.

### Curriculum

The particular curriculum used with your child is based on your child's current level of functioning as well as developmental standards. The curriculum will be determined by ongoing assessment of your child and will be individualized based on his/her on-going performance. In some instances your child may be taught things that a typically developing child may learn on his/her own.

### Parent Participation

Parent/Guardian will be trained to implement intervention techniques, to demonstrate understanding of generalization programs, and to generalize the child's skills, behaviors and behavior plans to the natural environment. Parent/Guardian is expected to carry out all recommendations made to the best of their ability. Parent/Guardian shall attend all training and work in a collaborative manner with the Behavior Specialist. Parent/Guardian shall remain informed about the child's current program status on a regular basis in order to demonstrate knowledge of the concepts being taught and to assist with generalization across environments.

Sendan Center staff are not permitted to transport clients. The Parent /Guardian must remain in the home at all times when ABA Services are provided, and accompany children on community outings.

## Acclimation to Therapy

During therapy session, the child will be required to work and comply with instructions that s/he may at times not want to participate in. In these instances, the child may tantrum, scream and/or become aggressive. This response is typical of a child who has never been required to comply with such requests. Some children take several weeks before they adjust to his therapy format and cooperate. During the adaptation phase, the child will still be required to participate in the therapy sessions.

## Behavioral Techniques

Procedures such as extinction, DRO, DRI and DRA, may be used to reduce unwanted behaviors at any stage of therapy. Procedures such as time-out, over-correction extinction, and physical prompting procedures may be used as a consequence to inappropriate behaviors, to teach the child attending skills, and to increase the child's compliance. These procedures will only be implemented if less restrictive measures have not been effective. These procedures will not be implemented without the approval of the parent/guardian. All necessary measures should be taken to avoid injury to the therapist or child from self-injurious behavior, aggression or tantruming. Any injury to the child or therapist should be reported to the Behavior Specialist within 24 hours so as to determine whether the current behavioral plan is sufficient to address the child's behavioral concerns. Sendan Center Policy prohibits restraint of a child.

## Reinforcement/Rewards

In order to help the child differentiate appropriate and inappropriate response and behaviors, rewards will be used. Which rewards will be used will depend on the child's individual preference. Some examples of common rewards include, food (crackers, candy, juice) toys, (bubbles, tops, wind-up toys), music and breaks. If the child correctly responds to an instruction that s/he has not previously performed, the child will receive a significant reward; either an immediate break, a treat, or a toy to play with at the table. Initially the child will be rewarded for all correct responses. Over time, the child will earn greater rewards for demonstrating new and harder skills than for mastered/known skills. Parent/Guardian may be asked to withhold **specific** toys or treats upon the request of the Behavior Specialist. Requests for withholding food, or drink items **will not be made on the child's meal items**, but rather on items that would be considered a treat. If this type of program is implemented, the parent/guardian will be asked to sign a list of items that parent/guardian agrees can be used as reinforcers and that will be used only during treatment. Parent/Guardian is expected to update and sign this list once a month. Reinforcement is a key component to the child's program. Parent/Guardian may be asked to prevent access to these items that s/he has approved.

## Peer Play

Your Behavior Specialist may recommend peer play when appropriate and determine the frequency of peer play sessions. Parent/Guardian is responsible for identifying

appropriate peers and arranging for the scheduling of the peer sessions (including transportation) with the peer's parents. Siblings may not be used *instead* of peers. However, siblings may be used in therapy in addition to other peers.

## **Community Outings**

Community outings may also be recommended by your Behavior Specialist as deemed appropriate for the child. The Behavior Specialist will recommend the frequency at which community outings should occur. The community outings are not intended for personal shopping trips or errands. Please note that a parent or guardian must provide transportation for the child and accompany them on all community outings.

## **School-Based Programming**

Your Behavior Specialist may complete classroom observations and/or consultations when deemed appropriate. Such observations will be done with permission of both the parent/guardian and school administration. The school district or the parent / guardian may be responsible for bearing the cost of the school observation, as appropriate to the individual child's circumstance. If the school does not pay for the school observation, payment for school-based services will be the responsibility of the parent/guardian.

## **Collaboration with other Professionals and Supplementary Interventions**

Your Behavior Specialist will make every effort to collaborate with all professionals involved in working with the child. It is the parent/guardian's responsibility to inform the Behavior Specialist of all professionals currently working with the child, as well as to keep the Behavior Specialist informed of any new professionals who provide the child with therapeutic services in the future. Additionally, a signed release of information will be required in order to correspond with all professionals outside of the child's Sendan therapy team.

# Definition of Roles

## Parent/Guardian

- Receives training from Behavior Specialist on running generalization procedures for all programs
- Conducts generalization procedures for specified programs
- One parent/guardian will attend all clinical review meetings
- Follow through with appropriate behavior plans as specified in home environment
- Maintain open communication with Senior Behavior Technician or Behavior Specialist regarding challenges with behavior interventions
- Maintain professional relationships with all staff members

## Behavior Technician

- Delivers 2-12 hours per week of 1:1 hours
- Attend all Clinical Review meetings (team meetings)
- Meet clinical competencies through assessment and observation by Senior Behavior Technician and/or Behavior Specialist
- Maintain professional relationship with parents/guardians and all other staff members

## Junior Behavior Technician

- Maintains filing, moving completed data sheets into filing binders, backs up on-line data system
- Sets up maintenance and generalization when programs completed in teaching phases
- Creates, gathers, organizes or maintains stimuli
- Ensures all photocopying is up to date
- Delivers 2-12 hours per week of 1:1 hours
- Attend all clinical review meetings (team meetings)
- Meet clinical competencies through assessment and observation by Senior Behavior Therapist and/or Behavior Specialist
- Maintain professional relationship with parents/guardians and all other staff members

## **Senior Behavior Technician**

- Delivers 2-4 hours per week of 1:1 hours
- 2-8 hours of staff overlap per month as needed
- 1-3 hours of parent/guardian overlap per month as needed
- 2-5 hours per week of administrative work as required; will vary from team to team depending on data collection methods, status of program, experience levels of team members, number of programs, teaching stage of client
- Monitor and track acquisition rates
- Monitor and track program progress
- Contact Behavior Specialist to resolve programmatic issues
- Monitor Junior Behavior Technician responsibilities
- Collect and prepare summary notes for clinical review meetings.
- Provide training on terminology and procedures for all new trainees
- Attend all clinical review meetings (team meetings)
- Meet clinical competencies through assessment by Behavior Specialist
- Maintain professional relationship with parents/guardians and all other staff members

## **MA Level Behavior Technician**

- Conduct 2 hour clinical review meeting 1-2x per month
- Assess child periodically to determine necessity of new programming
- Monitor acquisition rates
- Monitor program progress
- Overlap with Senior Behavior Technician 1x per month, providing quantifiable assessments of progress
- Overlap with each Behavior Technician 1x every 2-3 months providing quantifiable assessments of progress
- Observe client in school as needed
- Meet clinical competencies
- Maintain professional relationship with parents/guardians and all other staff members

## **MA/BA Level Behavior Specialist**

- Conduct 2 hour clinical review meeting 1-2x per month
- Develop behavioral and educational programming
- Assess child periodically to determine necessity of new programming
- Monitor acquisition rates
- Monitor program progress

- Overlap with Senior Behavior Technician 1x per month, providing quantifiable assessments of progress
- Overlap with each Behavior Technician 1x every 2-3 months providing quantifiable assessments of progress
- Observe client in school as needed
- Meet clinical competencies
- Maintain professional relationship with parents/guardians and all other staff members

## **PhD Level Behavior Specialist**

- Attend or conduct a portion of the 2 hour clinical review meeting 1x per month
- Supervise and assist in behavioral and educational program development
- Supervise assessment of the child to determine necessity of new programming
- Supervise monitoring of acquisition rates and program progress
- Attend school meetings or discuss child's progress with other professionals working with the child at the request of the parent/guardian and/or MA Level Behavior Specialist
- Maintain professional relationship with parents/guardians and all other staff members

## **Determination of Staffing**

Parents/guardians will be informed at the beginning of the consultation services if a MA Level Behavior Technician and/or MA Level Behavior Specialist will be used in addition to a PhD Level Behavior Specialist. Generally services would include the use of either a MA Level Behavior Technician or a MA Behavior Specialist; however, in specific cases the PhD Level Behavior Specialist may recommend the use of both.

There may also be instances where the PhD Level Behavior Specialist makes a request to add a MA Level Behavior Technician and/or MA Level Behavior Specialist to a specific child's team. If the recommendation to add these staff members is made after the initial agreement for consultation services, parents/guardians are asked to consider carefully the reason(s) for the recommendation as made by the PhD Level Behavior Specialist. However, given that the recommendation is being made after the initial agreement for services, parents/guardians do have the right to refuse the use of additional staff if they so choose.

In all cases, parents/guardians will be given clinician disclosure information, and have the opportunity to review the professional qualifications for the MA Level Behavior Technician and/or MA Level Behavior Specialist and conduct interviews if they so wish.

## **Quality Control**

Parent/guardian has the right to inform (in writing) the Behavior Specialist of any concerns that s/he has regarding staff performance. The Behavior Specialist will make every attempt to ensure that all staff members working with the child have adequate training. Overlapping sessions for the purposes of staff training may occur at the request of the parent/guardian and upon the availability of the Behavior Specialist.

## **Details of Service**

Our service model is based upon a research-proven approach, providing supervision to staff, high levels of training and a dynamic approach, which allows for constant evaluation, change and progress monitoring. The following outlines the process for starting up a typical in-home program. The specifics of service may vary depending on your child and their specific program.

## **On-going Services**

While services will be individually tailored to meet the needs of individual clients, generally services will include:

- 2-4 hours of overlap training within the home per month
- 2-4 hours of observation in the school setting (where applicable) per two months
- 4 hours of program supervision through team meetings per month provided by the MA Level Behavior Technician, MA Level Behavior Specialist and/or PhD Level Behavior Specialist. (Can be decreased to 2 hours of program supervision through team meetings per month for teams being supervised by a skilled Senior Behavior Therapist). Team meetings may be lead via web conferencing if necessary.
- Additional programming and administrative time as required. This will vary from program to program due to the individualized nature of services.
- Additional clinic meetings will take place between the MA Level Behavior Technician or MA Level Behavior Specialist and PhD Level Behavior Specialist on a monthly basis. These meetings will be brief and be used to discuss progress and to allow for quality monitoring.

The frequency of services will be based upon consultant availability, staff experience and training, child's rate of progress, and/or financial situation of the



parent/guardian. However, regardless of the situation, it is recommended that consultation take place minimally once per month. I regret that we are unable to provide workshop model services at this time for reasons of quality control.

## **Operating Hours**

General operating hours for treatment and assessment related services are 8:00 AM to 7:00 PM Monday through Friday. Though phone calls and emails may be returned outside of these hours, a response should not be expected until the next business day for communication that happens outside of business hours. Additionally, it may take up to 48 hours for phone calls or emails to be returned, depending on the volume of correspondence that has been received during that time period. Thus, for urgent clinical matters, please contact the office of your child's physician. In case of emergency, please dial 911 or proceed to the nearest emergency room.

## **Emailing and Text Message**

Parents sometimes ask to use email and text messaging as a form of communication. Parents should be aware that these forms of communication, though convenient, may not always be technically secure. All efforts will be made to maintain confidentiality via email communication (e.g., only using initials to refer to clients in email communication). Sendan Center ABA clinicians use an encrypted, HIPAA-compliant email service to communicate with parents. Sendan Center policy prohibits the communication of PHI (protected health information) in email. If you are interested in communicating with your clinician via email please complete the Informed Consent signature sheet at the end of this document.

# **SENDAN CENTER ABA SERVICES STATEMENT OF INDIVIDUAL PARTICIPANT RIGHTS**

## **(WAC 388-877-0600)**

You have the right to

- (a) Receive services without regard to race, creed, national origin, religion, gender, sexual orientation, age or disability;
- (b); Be reasonably accommodated in case of sensory or physical disability, limited ability to communicate, limited English proficiency, and cultural differences;
- (c) Be treated with respect, dignity and privacy, except that staff may conduct reasonable searches to detect and prevent possession of contraband on the premises;
- (d) Be free of sexual harassment;
- (e) Be free of exploitation, including physical and financial exploitation;
- (f) Have all clinical and personal information treated in accord with state and federal confidentiality regulations;
- (g) Review your clinical record in the presence of the administrator or the designee and be given an opportunity to request amendments or correction;
- (h) Receive a copy of agency complaint and grievance procedures upon request and to lodge a complaint or grievance with the agency, or Regional Support Network (RSN), if applicable, if you believe your rights have been violated; and
- (i) File a complaint with the department (Washington State DSHS) if you feel the agency has violated a WAC requirement regulating behavior health agencies.

# Family Request and Informed Consent for Use of Email or Text Message to Communicate with Staff at Sendan Center

Patient name:

DOB:

Requested email address of parent:

Requested text message number of parent:

\_\_\_\_\_ I will not put protected health information as defined by HIPAA in emails or text messages. (please initial)

\_\_\_\_\_ I will use HIPAA-compliant technology, as identified by Sendan, for file storage and transfer . (please initial)I, the undersigned, certify that I am requesting communication with Sendan Center staff via electronic mail (email) and text message. Risk definitely exists that any protected health information contained in such email may be disclosed to, or intercepted by, authorized (e.g. Google in the case of Gmail) and unauthorized third parties. By signing this document, I acknowledge and understand this risk. I also acknowledge and understand that other, more secure methods of communication with Sendan Center staff exist, including communication via telephone or non-electronic written communication. Finally, I acknowledge and understand that Sendan Center staff does not guarantee response to emails within a certain period of time and that all urgent clinical messages must be conveyed to my child’s physician, and that in case of emergency I will contact 911 or proceed to the nearest emergency room.

Email communication with Sendan Center ABA staff is only for the purposes of scheduling, or routine questions about behavioral plans, not for the communication of urgent or emergent clinical issues.

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SIGNATURE / NAME OF PATIENT DATE

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SIGNATURE OF PARENT/LEGAL GUARDIAN DATE

## Declaration

I have read, understand, and agree to all of the Sendan Center ABA Services Guidelines and Policies:

- Teaching Technique
- Curriculum
- Parent Participation
- Acclimation to Therapy
- Behavioral Techniques
- Reinforcement / Rewards
- Peer Play
- Community Outings
- School-Based Programming
- Collaboration with other Professionals
- Definition of Roles
- Determination of Staffing
- Quality Control
- Details of Service
- Ongoing Services
- Operating Hours
- Emailing and Text Messaging Request

By signing below I am also acknowledging that I have received a copy of this manual, including a statement of consumer rights, for my reference.

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Print Name

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Print Child's Name

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Relationship to child

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**Signature**

**Date**