



## Introduction

Welcome to Beautiful Beginnings Child Development Services LLC! We are always looking for passionate and talented team members to join our mission to provide exceptional services to our children and their families. This manual is a living document of policies and procedures that form the foundation of Beautiful Beginnings Child Development Services delivery program. West Virginia policies continue to evolve and it is our responsibility to ensure that our team members are updated with that regard. This manual will be revised and updated as the policies change. The holder of this manual is responsible for the addition of the relevant updates as they become available.

Beautiful Beginnings Child Development Services LLC is an Early Intervention Agency through a unique collaboration between the Department of Health and Human Resources, through the Bureau for Public Health and the Office of Maternal, Child and Family Health. Beautiful Beginnings Child Development Services LLC's primary mission is to provide the highest quality Service Coordination, Evaluations and Provision of services to children under our program in accordance with the Patients' Bill of Rights. Children's families are integral members in the process of establishing a plan of care. Beautiful Beginnings Child Development Services LLC always respects the special nature of services provided in the home. All services are provided without regards to race, color, age, sex, national origin, handicap or sexual orientation. Patients have the right to be provided with competent, safe and individualized care that is sensitive to their cultural, ethnic and language needs. Our mission is to render services that help address the needs of the entire family so that they are better able to meet the needs of their child. Our primary dedication is to deliver the most timely and highest quality of care, individualized to meet each child's specific needs. We are dedicated to the provision of services in the child's most natural setting. It is our goal to provide comprehensive one on one service to help each child develop to his or her fullest potential.

Beautiful Beginnings Child Development Services LLC encourages parents to take an active role in their child's preventative and rehabilitative services. Our trained staff assists the families in all phases of the program. To accomplish these goals, we recruit experts in the fields involved in the care of the child. Our professionally trained staff are

experienced specialists who use a collaborative process to plan, assess and implement our high quality, goal orientated care. Our professionals work closely with family members and each other to meet the child's developmental and health care needs. Beautiful Beginnings Child Development Services LLC welcomes the opportunity to be a part of the child's progression to age appropriate development. In this way, each child's potential is realized as he/she is given the opportunity to achieve the highest level of independence possible. Beautiful Beginnings Child Development Services LLC is dedicated to the principles of Equal Opportunity Employment for all, without regard to race, color, religion, sex, national origin, age, physical handicap; marital status or sexual orientation. Because these principles have been and continue to be a foundation for growth, we pledge to actively support Equal Opportunity Employment practices in each facet of our daily activities.

## **Professional Standards**

In a health care environment, a professional relationship with each client/family is the primary key to continuing growth and business success. For this reason, it is extremely important that all employees conduct themselves in a positive and professional manner. A successful employee must have thorough knowledge of his or her job functions and area of expertise. To be truly effective in maintaining a professional relationship, expertise is only one factor. Attitude and behavior are equally important factors in maintaining this relationship. Attitude and behavior are those personal attributes that along with superior skills make a truly effective professional. Common courtesy will maintain a pleasant working atmosphere. Beautiful Beginnings Child Development Services LLC has certain expectations of how its employees will behave toward each other.

Employees must not work in a manner that willfully obstructs or hinders another employee from completing his or her assigned duties. Employees must also conduct themselves so that the safety of both themselves and their fellow workers is preserved. Personal problems between employees are not to be pursued at work. It is expected that office personnel show the utmost respect to all field professionals and office staff. Clinical concerns should be passed immediately to a professional supervisor. Interdisciplinary concerns that cannot be resolved must be forwarded to your supervisor. Never raise your voice. Instead, all problems must be resolved in a mutually respectful manner.

## Code of Conduct

Beautiful Beginnings Child Development Services LLC has a zero tolerance for Medicaid fraud or Medicaid abuse by employees and independent contractors. Examples of such unacceptable actions include but are not limited to:

- Providing services in a manner that is not consistent with the "method" and "frequency" on the child's current IFSP.
  - Requesting parent/caregiver to sign a single or multiple "blank" session note forms.
  - Requesting parent/caregiver to sign a session note without "time in" and "time out" written in.
  - Conducting a make-up session, the same day as a regularly scheduled session.
  - Writing letters of justification to increase services when not clinically appropriate.
- If you encounter any of these situations, please contact our director. Your report of any acts of suspected Medicaid fraud or Medicaid abuse will immediately result in an investigation and will not affect your child's Early Intervention services.

### **Mission and Values:**

Beautiful Beginnings Child Development Services LLC is dedicated to providing exceptional services to children with special needs. We specialize in Special Instruction, Occupational Therapy, Physical Therapy, Speech & Language and Nutrition Services. Beautiful Beginnings' licensed and committed professionals will use research based approaches to work diligently with families to create the best individualized plan to guide every child in achieving his/her highest social and academic potential.

### **Honesty and Truthfulness:**

All employees, independent contractors, agents and officers and directors must be honest and truthful in all their dealings, both within and without our organization. The principles of honesty and truthfulness must be reflected in all activities in which the individual person engages in, including but not limited to the following:

- Provision of early intervention services
- Documentation of services (e.g. session notes, progress reports, letters of justification)
- Dates and times of services (session or activity notes must match information entered in computer program)
- Billing of Services

- Evaluation/assessment of children
- Discussions with parents, service coordinators, colleagues, staff, city and state officials

**Lawful Conduct:**

All employees, independent contractors, agents and officers and directors must avoid doing anything that is, or might be, against the law. If any staff is unsure whether an action is lawful, he or she should check with his or her supervisor or the Compliance Officer prior to making any decisions.

**Cooperation with the Corporate Compliance Program:**

All employees, independent contractors, agents and officers and directors must cooperate fully with all inquiries concerning possible compliance issues and actively work to correct any improper practices that are identified.

**General Business Practices:**

Beautiful Beginnings Child Development Services LLC will forego any business transaction or opportunity that can be obtained by improper or illegal means, and will not make any unethical or illegal payments to anyone to induce the use of our services.

- All business records must be accurate and truthful with no material omissions.

**Payments and Gifts:**

Beautiful Beginnings Child Development Services LLC staff may not accept any gifts or other favors from anyone outside of Beautiful Beginnings Child Development Services LLC that are intended, or could be seen as intending, to influence staff's actions and decisions as Beautiful Beginnings Child Development Services LLC's employee or independent contractor. Nor, they may give anything of value, including bribes, kickbacks, or pay-offs, to any government representative, contractor, vendor, or any other person able to benefit Beautiful Beginnings Child Development Services LLC in any way. Staff may provide or receive, however, ordinary and reasonable gifts of nominal values not to exceed \$10, if those gifts are not given for influencing business behavior of the recipient.

**Marketing Activities:**

In marketing, Beautiful Beginnings Child Development Services LLC, staff must be truthful and honest in all representations they make about the agency and never agree to offer anything of value in return for referrals.

**Contractors:**

To the extent practicable, all persons and entities with which Beautiful Beginnings Child Development Services LLC has business relationships will be asked to cooperate with the agency's policies.

**Conflict of Interest Rules:**

All employees, officers and directors owe a duty of loyalty to Beautiful Beginnings Child Development Services LLC and any potential conflict of interest must be disclosed to ensure that an appearance of impropriety is not created and that the integrity of the agency operations are not compromised. All employees, officers and directors must thus disclose to the Compliance Officer any financial interest they or a member of their family has in any enterprise that does business or competes with the agency in any manner.

**Responsibilities of the CEO Program Director and Financial Officer:**

These employees have the responsibility to help maintain a work environment in which ethical concerns can be raised and openly discussed. They are also responsible to ensure that the staff they supervise understand the importance of federal, state, city and Beautiful Beginnings Child Development Services LLC policies and procedures.

**Responsibilities of All Employees and Independent Contractors:**

All employees and independent contractors are expected to comply and be familiar with all federal and state laws, rules and regulations that govern their job within the agency. All employees and independent contractors are also expected to comply with the standards set forth in this Policies and Procedures Handbook and with applicable compliance protocols. Strict compliance with these legal and compliance standards is a condition of employment or contract, and violation of any of these standards of conduct will result in discipline being imposed.

**Philosophical and Theoretical Approach to Serving Children Birth to three and their Families:**

One of the most important steps in the development of a sound pediatric home care program or early intervention is the organization of the "home team". The composition of the team varies however, it must include the family. The role of the team is to ensure that the family takes increasing responsibility of the care of their child. The team begins its task when the child is considered a client for home based early intervention. Parents are involved in the formulation of goals for their child. Each discipline in the home-based

team carefully reviews the parents' concerns and formulates and develops daily programs to meet these goals in their home. Thereafter, all disciplines meet to collaboratively formulate an integrated home-based plan and decide for its implementation.

### **Staff and /or Independent Contractors**

Beautiful Beginnings Child Development Services LLC is approved to provide Early Intervention Services in West Virginia. Beautiful Beginnings Child Development Services LLC will continue to seek qualified individuals who meet the requirements of the Early Intervention Regulations. Beautiful Beginnings Child Development Services LLC will employ and contract providers. All providers will receive a 1099 and employees will receive a W2 at the end of the year. All independent contractors will sign and agree to the terms as outlined in the "Independent Contractor Agreement". Recipients of 1099 will not have taxes withheld and it will be their responsibility to make payment with the IRS. Beautiful Beginnings Child Development Services LLC will conduct background checks, verify references provided and history of previous employment. Part of the background check will include a "West Virginia Employer Criminal Background Check" through <https://www.identogo.com> prior to employment. If misrepresentation, falsification, omission of relevant information is found, employment may be rescinded and withdrawn.

### **Orientation of New Hires**

All providers will undergo a thorough orientation of the company's policies and procedures to familiarize them with the WV's Early Intervention regulation, policies and procedures before they begin work. In addition, providers must review WV Birth to Three guidance and written policies and procedures for the provision of services, including and not limited to guidance regarding referral, eligibility, evaluations, provision of services, general confidentiality, health and safety standards, record keeping and billing on the following website: <http://www.wvdhhr.org/birth23>

Beautiful Beginnings Child Development Services LLC will provide specific training as mandated by the WV Birth to Three. All employees and contractors will be trained according to the WV Birth to Three Policy and Procedures. Resources from their website will be utilized to train staff during orientation and mandated annual training.

Any employee or independent contractor who has established a relationship with Beautiful Beginnings Child Development Services LLC must have a personnel file. Upon completion of the interview process, the director creates an individual folder which includes the original signed Service Contract, Employment Eligibility Verification Form i-9 (<https://www.uscis.gov/i-9>), Medical Form, Child Abuse Course Completion, WV Birth to Three Approval Letter, etc. The Human Resource Coordinator will make a copy from

the therapist's original WV License/Certification. On completion of the interview process, the Human Resource Coordinator receives the packet containing everything the therapist brought to Beautiful Beginnings Child Development Services LLC. The interviewer makes a copy of the therapists' original WV License/Certification and then initials the back, for the therapists' file. Independent Contractors must have their own Photo ID badge. Employees will be given a Beautiful Beginnings Child Development Services LLC ID badge which is made from one of the two photos. The other photo is kept in the employee's file. Photo ID badges must be worn always while providing services.

All new hires will give a copy of the Beautiful Beginnings Child Development Services LLC Policies and Procedures Handbook, including Health & Safety, Confidentiality, and Billing Information. Beautiful Beginnings Child Development Services LLC will require that all its employees, whether they are Mandated Reporters, Completion Education Coursework/Training in Violence Prevention and Intervention <https://dhhr.wv.gov/bcf/Services/Pages/Centralized-Intake-for-Abuse-and-Neglect.aspx>.

Providers are evaluated annually as part of their annual performance review to ensure that health and safety including policies and procedures for identifying and reporting child abuse and maltreatment or neglect and confidentiality procedures is being followed. The completed AUTHORIZATION and RELEASE for PROTECTIVE SERVICES RECORD CHECK <https://dhhr.wv.gov/bcf/Providers/Documents/AUTHORIZATIONRELEASERECORDCHECK.pdf> . Until an acceptable response is received from the WVDHHS, providers may only provide services when supervised by an employee who is in the same physical location and within direct visual contact of the child receiving early intervention services.

If services are provided at home, the Parent cannot supervise services. The Clearance letter received from the WV Department of Health and Human Resources is placed in the therapist's folder. Any employee or independent contractor who changes their name (ex. marriage or divorce) must complete a new Clearance form. If notice is received from the Registry that a person is the subject of an indicated report of child abuse or maltreatment, Beautiful Beginnings Child Development Services LLC will contact the WV Department of Health and Human Services (304) 558-0628 to seek guidance for determination as to whether to allow provider to have regular or substantial contact with a child receiving early intervention services. All employees and independent contractors are required to complete a new Protective Services Clearance Form every 3 years.

The Director will complete the criminal check online at: <https://dhhr.wv.gov/bcf/Providers/Pages/CIB.aspx> and enter the therapist's last name and zip code. The therapist's license is checked at <http://www.wvlicensingboards.com/boards.cfm> by entering last name, first name, and

license number. These forms are then printed out and placed in the therapist's folder. Prior to beginning employment or an independent contractor relationship at Beautiful Beginnings Child Development Services LLC, the Company requires all individuals who will be working directly with clients to have a physical exam by a licensed WV state physician to ensure that they are free of communicable or infectious diseases. Current employees and contractors are required to have a physical exam on an annual basis. In addition, all employees and contractors are required to have the following tests and immunizations: PPD - annually; measles, mumps, and rubella - proof of vaccination or titer, (Hepatitis B vaccine, Tetanus immunization within the past 10 years, Diphtheria, Pertussis, Varicella, and Influenza - either proof of vaccination or documentation of refusal) and a yearly physical. Written records of pre-employment and annual physicals will be kept in the employee's personnel file.

Emergency contact numbers for therapists are kept on record at the Beautiful Beginnings Child Development Services LLC offices. All providers are required to complete the <https://www.eikids.com/wv/matrix/docs/docindex.asp> . If approval is not granted because the provider does not meet the experience criteria to be able to provide Early Intervention services in West Virginia, providers may be offered employment opportunities through Beautiful Beginnings Child Development Services LLC. Beautiful Beginnings Child Development Services LLC will provide the required BCBA certified supervisor to monitor and supervise staff.

## **HIRING PROCEDURES**

Beautiful Beginnings Child Development Services LLC is an equal opportunity employer. The decision about hiring new employees and consultants is made based upon openings/availability, qualifications of the interested person, experience, education, credentials, skills, references and salary requirements. Beautiful Beginnings Child Development Services LLC does not discriminate based on race, nationality, religion, gender, sexual orientation, and age and/or health status. Beautiful Beginnings Child Development Services LLC has developed compliance policies and procedures to assure that the therapists/physicians, whether they are independent contractors or employees, will conduct business in compliance with WV DHHR/DOE and WV Birth to Three rules and regulations as well as compliance with False Claim Act, Mail Fraud, Medicaid, Insurance regulations and WV Codes regulations. To ensure that Beautiful Beginnings Child Development Services LLC has appropriately licensed/certified personnel to provide services to the populations we serve, Beautiful Beginnings Child Development Services LLC recruits therapists by attending job fairs, placing ads in professional publications, and through clinician referrals. Additionally, many therapists seek out Beautiful Beginnings Child Development Services LLC for employment opportunities.



Beautiful Beginnings Child Development Services LLC is responsible for the supervision of all service providers who are hired or contracted by the agency. At the time of hire, the prospective clinician receives an orientation that will include an overview of Early Intervention and describes Beautiful Beginnings Child Development Services LLC's philosophy. Beautiful Beginnings Child Development Services LLC hires only licensed, fully-credentialed and qualified therapists. Prior to employment, each prospective employee must complete the West Virginia Child Abuse History Clearance Check (child abuse and maltreatment screening) and complete the Criminal Background Information Form (see appendix). No clinician/therapist/personnel are assigned cases until the Abuse Check has been cleared. Beautiful Beginnings Child Development Services LLC Director schedules an interview with the prospective employee after "<https://dhhr.wv.gov/bcf/Providers/Pages/CIB.aspx>" Form is submitted via mail or fax to the main office. Upon receipt, a letter of clearance from DHHR Child Abuse Verification Unit and a list of necessary documents will be sent to the prospective employee/consultant. The prospective employee is asked to come to the interview with a complete documentation packet. The interview will not be conducted if any of the necessary documentation is missing.

Beautiful Beginnings Child Development Services LLC must have the following documentation for all interventionists prior to being assigned to any children: Licensure/Certification (Original is required at interview), prospective employees must provide Director with their original license/certification. Copies will not be accepted. The copy will be made and initialed by the Director to be placed in a personnel file. The prospective employee's license/certification is verified, upon interview, with WV Department of State via the official websites to ensure that the license/certification being presented is valid. The print out is placed in personnel file. The prospective employee's last name must match the name, as written, on the license/certification. In the event the name does not match (due to marriage or legal name change), the prospective employee must show proof of the name change (marriage certificate, legal documentation) and submit a request to the state to have the name changed on the certification prior to being hired.

If clinician/therapist/other personnel change his/her name while employed/contracted, that person must inform the Director of the change and provide proof of name change as well as proof that a request to change name on license/certification has been submitted. If the therapist/clinician/other personnel do not provide proof, the clinician will continue to be reimbursed to the name matched to WV Department of State print out. If the employee/consultant provider will not agree his/her contract will be suspended until such time that the necessary and appropriate proof is furnished.

- <https://www.eikids.com/wv/matrix/docs/docindex.asp>
- Malpractice Insurance (minimum \$1,000,000.00-\$3,000,000 of coverage)

- Worker Compensation Insurance
- Annual Physical Examination
- WV DHHR State Approval for Independent EI Provider
- Letter of Agreement between Beautiful Beginnings Child Development Services LLC and the Contracting Therapist
- Policy and Procedures Agreement for Employed Therapists
- Employment Eligibility Verification
- Application for Employment
- Resume
- Three References (Reference Request Form will be sent to previous employer)
- WV Child Abuse History Clearance Check
- Copy of Social Security Card
- Copy of a Photo Identification
- Proof of Legal Residency

**Please note:** DHHR approval and licensure are verified on a semi-annual basis.

**Remember:** Updating the information in your personnel file prior to expiration dates are imperative for maintaining the caseload and employment with Beautiful Beginnings Child Development Services LLC. Each employee/contracting therapist will have an individual personnel file. Each clinician's license/certification is verified via WV Department of State website upon hire, annually (i.e. during each January), and upon expiration. A print-out verifying continuing licensure/certification is placed in the employee's file.

The reports of expiring documents are done on a monthly-basis by the Director. Director notifies the therapists of the upcoming expiration of the required to maintain employment documents in writing. The "Missing/Expired Documents" Form will be enclosed with the monthly payment one month prior to expiration. Therefore, each therapist will be notified of all expired/missing documents during the upcoming month. HR Department prints a monthly report of all upcoming license/certification expiration dates. Any employee whose license/certification is expiring within 30 days is notified via email, phone, or other written notification and must submit proof (including original updated license/certification with new expiration date) that his/her license/certification Department of State website. Bi-annually, employees are required to apply to the DHHR Child Abuse Verification Unit (Child Abuse Screening). HR Department prints a monthly report of all upcoming renewal dates and notifies employees whose renewal is due. Employees must submit the application to the HR Department for processing. If an employee's application has not been cleared before the previous clearance's expiration date, that employee's contract is suspended until clearance is given.

The HR Department will oversee and notify the Director if therapist's pertinent documents are expired prior to assignment of cases for service provision. The Director will make a final decision to terminate the therapist's employment if the therapist has not submitted the appropriate current documentation. A non-compliant employee/contractor will be notified of their termination both verbally and in writing. A copy of the termination letter will be placed in the employee's personnel file for record keeping. Under no circumstances are therapists permitted to see children on their caseload without updated credentials in the personnel file (i.e. annual physical documentation, professional liability insurance, licensure or certification, etc.).

Beautiful Beginnings Child Development Services LLC Program Director will conduct a formal face-to-face interview and orientation of WVEI Rules and Regulations. At the interview, the clinician will receive copies of all documents required by WV Birth To Three, WV DHHR and Beautiful Beginnings Child Development Services LLC: Daily Session Notes, Progress Reports, Justification Letters, Change in Service/Location Forms, and billing forms that need to be submitted by the 1st and 15th of every month. Once the interview has been completed, those therapists chosen for employment will be asked to fill out a "Registration Package."

At the interview, the Program Directors also provides a complete overview of the Early Intervention Program and Beautiful Beginnings Child Development Services LLC role and notifies prospective employees/therapists of available support to them on an ongoing basis through the respective Supervisors. When therapists are approved by the Program Director, followed by their background check and on-line verifications, the file is then passed to the Director of Quality Assurance who completes the hiring procedure. He/She is responsible for compliance with WV Department of Labor and other governmental State and Federal Agencies' rules and regulations. Upon approval, the prospective employee will be notified and officially welcomed to Beautiful Beginnings Child Development Services LLC.

### **Additional Procedures for Hiring ABA Therapists**

In addition to passing the formal interview by the Program Director and reviewing the WV EI system and documents required for service provision, the ABA therapists will be required to show proof of additional ABA training, credits, and/or experience.

For ABA Supervisor, the prospective employee must:

- Possess BCBA or have 15 credits toward BCBA;
  - Have at least 2 years' experience as an ABA lead teacher;
  - Provide proof (certificates) of ongoing annual training
- For ABA Lead Teacher, the prospective employee must:
- Provide proof of coursework (completed credits) toward BCBA;

- Have at least 2 years' experience as an ABA teacher;
- Provide proof (certificates) of EI-sponsored training, as well as ongoing trainings provided by other EI Provider Agencies

For ABA teachers, the prospective employee must:

- Have experience as an EI special instructor;
- Register for the EI-sponsored trainings;
- Receive the ABA supervisor's approval to start;
- Work under the supervision of a lead teacher.

Beautiful Beginnings Child Development Services LLC will provide yearly in-service trainings for ABA therapists, lead teachers, and supervisors.

### **Personnel Practices**

Beautiful Beginnings Child Development Services LLC offers an orientation program for all new qualified personnel. The orientation meetings occur within 4 weeks of the date of hire. The purpose of these meetings, led by the Director of Quality Assurance, is to educate the new hires regarding Early Intervention policies, procedures, and regulations, as well as Beautiful Beginnings Child Development Services LLC policies and procedures. Each new hire is given all necessary paperwork and is trained in how to complete and submit such paperwork. Department supervisors in each discipline are available to meet with the new hires, particularly those of their discipline.

All new hires are subject to a 3-month probationary period. During that time, their performance is assessed by the Program Director, Director of Quality Assurance, Staffing Coordinator, and Department Supervisor. Any therapists deemed unsatisfactory are terminated. All therapists can meet and discuss any issues or concerns with their department supervisor.

### **Requirements to Maintain Employment**

Beautiful Beginnings Child Development Services LLC maintains individual employees' personnel file as required by local, state, and federal regulatory agencies. Each employee is responsible for notifying the executive office in writing of any relevant changes, such as address, phone numbers, marital status, etc. Each employee and/or contracted therapist must demonstrate:

- Proper Licensure
- Approval from the WV Department of Human Resources to be an independent provider
- Malpractice (liability) Insurance - renewed annually
- Worker's Compensation Insurance - renewed annually (if applicable)

- Annual Health Assessment- inclusive of Mantoux testing and Vaccinations Update.
  - Complete progress notes, billing information and summary of services provided - properly completed and submitted in a timely manner.
  - Completion of In-service Educational Programs - at least 4 per year
- Use of Alcohol/Drugs/Cigarettes (all smoking) on the job is strictly prohibited and is a cause of immediate dismissal

## **PROBATION PERIOD**

Continued employment for all new employees/independent consultants, or for employed or contracted therapists assuming a new position is contingent upon a satisfactory completion of a three-month (3) probation period.

During the first 90 days of employment, the therapist must demonstrate the capability of fulfilling the job responsibilities as determined by Beautiful Beginnings Child Development Services LLC requirements. The QA Professionals in each department are responsible for the close supervision of newly hired clinicians, which may include reviewing paperwork (i.e. "session notes", "progress reports", other documents submitted for the child's file) and conducting field supervised visits upon their discretion. The Supervisor of each respective department is responsible for reporting to the Program Director and Director of Quality Assurance whether the clinician passed the 3-month probationary period or if the probation period should be extended due to the need of improvement to a maximum 6 months period. Additionally, if warranted, any provider can be placed back on probation upon complaint, suspicion of fraud, misconduct, insubordination, or any other actions that are deemed to be inappropriate and out of compliance with Beautiful Beginnings Child Development Services LLC's policies and procedures.

This in no way implies that an employee or independent contractor/consultant who is performing unsatisfactorily after completing the probation period cannot be terminated. If, at any time, an existing therapist demonstrates unsatisfactory job performance he/she may be given a warning, regardless of their length of service at Beautiful Beginnings Child Development Services LLC. The warning will be a written document, which will be confidential and held in the employee's personnel file. If that employee's actions do not improve after the warning within the specified period indicated in the written warning, Beautiful Beginnings Child Development Services LLC reserves the right to terminate that employee due to willful misconduct or unsatisfactory job performance.

## **TERMINATION**

Beautiful Beginnings Child Development Services LLC may terminate any therapist's employment/contract at any time upon the occurrence of any of the following events:

- Failure of the therapist to maintain the necessary certification in the jurisdiction where services are to be rendered or to supply proof of certification to Beautiful Beginnings Child Development Services LLC.
- Failure of the therapist to maintain insurance coverage or to supply proof of insurance to Beautiful Beginnings Child Development Services LLC.
- Failure of the therapist to provide proof of good health and absence of communicable disease annually or upon request of us.
- Determination by Internal QA Committee that any of the representations and/or warranties by the therapist contained herein is false.
- Conviction of a crime (misdemeanor or felony).
- Falsification of patient records, invoices, including: time and place of delivery, extent of service, combining of sessions, fraudulent signatures of parents or caregivers, misrepresentations of client's level of functioning.
- Abuse, mistreatment of patients or the violation of ethical and professional standards of care in your profession. Specifically, corporal punishment and emotional or physical abuse or maltreatment is prohibited. The use of aversive or restraints of any form are strictly prohibited.
  
- **MEDICAL/HEALTH REQUIREMENTS**  
Based on WV DHHR and accepted health practice for healthcare personnel, Beautiful Beginnings Child Development Services LLC has established the following criteria to ensure that Beautiful Beginnings Child Development Services LLC employees and subcontractors are free from any health impairment that is of potential risk to clients, their families and other caregivers, or that may interfere with their ability to perform required duties.

### **Pre-Employment**

Physical exams, lab/diagnostic results, medical clearance letters and completion of medical questionnaires are required prior to employment and must be repeated annually. Beautiful Beginnings Child Development Services LLC can assist in arranging for this physical exam or an employee can go to his/her own practitioner. In addition, there must also be documentation of:

- a) A PPD skin test with negative findings done within the last 12 months. For any positive results, appropriate clinical follow-up must be documented, usually in the form of a chest x-ray.
- b) Measles, Mumps, and Rubella titer with immunity status. New therapists with

nonimmunity must have proof of vaccination. This is required of all therapists, regardless of gender or age.

c) Rubella (measles) titer with proof of immunity for anyone born after January 1, 1957. Employees with non-immunity must have proof of vaccination. Measles vaccine is given in two doses, one month apart. WV DHHR guidelines require that employees cannot work until receiving the second dose or unless blood titers indicate immunity after the first dose.

d) DT immunization is required for all new employees, regardless of gender or age. It is recommended that DT immunization be repeated every 10 years.

e) Influenza vaccine, as well as Novel H1N1 vaccine (when available), is required for all therapists/employees who are in contact with children. Only those personnel with a medical exception documented by a physician do not have to fulfill this requirement.

f) Recommended vaccinations or documented refusal of: Hepatitis B vaccine; Pertussis; and Varicella. Medical information is deemed confidential and is maintained in Beautiful Beginnings Child Development Services LLC personnel file. All prospective contract providers must adhere to these pre-employment requirements. Failure to do so will void any pending contracts.

### **Annual Requirements:**

The following are required on an annual basis to maintain eligibility for continued employment:

a) Completion of a physical exam or Beautiful Beginnings Child Development Services LLC Health Assessment with clinical follow-up if indicated.

b) PPD skin test with negative results. For positive results, appropriate clinical follow-up must be documented.

Providers should consult with their own physician as to the advisability of receiving other immunizations. The employee's medical forms are confidential and will be kept in a file in the office. They are accessible only to the Directors of the Agency and to the Department of Health, which monitors for compliance with health requirements. Any contracted provider who fails to provide follow-up documentation may be subject to the termination of the contract.

### **AGENCY CALENDAR**

Beautiful Beginnings Child Development Services LLC is open Monday thru Friday 8:30am to 4:30pm. Service provision takes place on a twelve-month basis including

holidays, weekends and evenings to meet with our children's and families' needs and availability. During off business hours, the staff at Beautiful Beginnings Child Development Services LLC can serve clients by checking e-mail and the voice mails.

Beautiful Beginnings Child Development Services LLC is closed for the following holidays: New Year's Day, President's Day, Good Friday, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, and Christmas Day.

## **STAFF TRAINING/IN-SERVICE REQUIREMENTS**

Beautiful Beginnings Child Development Services LLC is responsible for the continuous and ongoing training of all staff and contract employees. In-services and other trainings are provided on a regular basis.

- All new directly employed and contracted therapists are provided with the Agency's Policies and Procedures and job descriptions at the orientation interview with the Program Director.
- Program Director, Director of Quality Assurance, and Department Supervisors are responsible for training new employees/contractors respectively.
- Director of Quality Assurance is responsible for training the Monitoring and Staffing Coordinators
- Program Director is responsible for training the clerical and billing and collection staff.
- Program Director and Director of Quality Assurance are responsible for training clinical supervisors and service providers. (Please refer to "Hiring/Probation" Section of the Policy and Procedures). At the orientation interview, all therapists interested in providing services receive a registration package which includes, but is not limited to, forms to be signed and returned for a personal file, Agency's policies and procedures, description of Health and Safety Standards, Confidentiality Policy, and a list of required documents.

Director of QA meets with clerical staff, intake coordinator, monitoring and staffing coordinator, QA supervisor, evaluation department coordinators, supervisors of the respective departments, and billing department on a monthly basis to ensure the continuity and appropriateness of the program, and to assure that WV Early Intervention regulations and compliance are met.

If the Director of Quality Assurance, in collaboration with Beautiful Beginnings Child Development Services LLC staff, identifies areas in need of improvement, the Director of Quality Assurance will address those areas of need by offering additional trainings, sending a newsletter, and/or discussing the issue with the clinicians in question.



Four times a year, Beautiful Beginnings Child Development Services LLC conducts mandatory staff developmental meetings between directors, staff and service providers to discuss any updates in regulations of WV Birth to Three and staff concerns.

Beautiful Beginnings Child Development Services LLC directors update and apprise their personnel of any changes regarding therapeutic standards and WV Birth to Three regulations, and provide clinically oriented workshops by the departments (i.e. as per discipline) to relate the new information about infants and toddlers.

All providers are required to participate in the professional training and continuing education seminars on a quarterly basis.

## **INTERNAL QUALITY ASSURANCE**

Beautiful Beginnings Child Development Services LLC, Compliance Officer/Director of Quality Assurance and Improvement is responsible for the QA Program, which is designed to establish and oversee the agency's standards of care.

- The QA Committee, which consists of the Director of QA, the Program Director, Clinical Director, Department Supervisors, Director of Operations, Director of Human Resources, General Manager, and the Supervisor of the Billing/Collection, meets monthly to discuss agency's strengths and weaknesses, and to relay them to the Beautiful Beginnings Child Development Services LLC members during the monthly staff meetings. Random clinical and child record reviews are conducted to assess and monitor the safety, adequacy, type and quality of the agency's services.
- The Director of QA reviews all company policies and procedures and amends them in accordance with Committee's recommendations, results of monthly performed parental surveys and WV Birth to Three updates on a semi-annual basis.
- The Director of QA randomly audits the appropriateness of content of individual records (i.e. session notes, progress reports, justification letters, service coordination log notes, evaluation reports, etc.). (Please refer to Compliance Policy about appropriate levels of QA).
- The Supervisor of the Billing and Collection Department audits submitted billing invoices, supported by daily session notes, to assure compliance with WV Birth to Three billing regulations.
- Annual Performance reviews are conducted to improve the quality of service provision. Supervisors of the respective Departments are responsible for preparation of such review. The therapist receives a copy of such review, which is placed in each therapist's file.

- The Parental Satisfaction Surveys are reviewed and areas of concern are determined. The Director of QA will discuss the finding with the Program Director. If deemed necessary, the Director of QA and the Case Manager will call the parents and request more input and incorporate that information into our Quality Improvement Process.
- Beautiful Beginnings Child Development Services LLC ensures that we are reaching our target populations by continuously reviewing our demographic and hiring clinicians who can provide bilingual services and/or services to special populations or geographic locations. If there is a need for additional clinicians to serve these areas/populations, Beautiful Beginnings Child Development Services LLC immediately seeks out new clinicians through our recruitment process.

## **CONFIDENTIALITY**

Beautiful Beginnings Child Development Services LLC has implemented procedures to ensure that all staff whether employed or contracted follows confidentiality procedures, which adhere to Title 34 of the code of Federal Regulations, WV Birth To Three Early Intervention Program , and other applicable legal requirements for confidentiality. A child's early intervention clinical record is considered an educational, not medical, record and is governed by the Federal Family Educational Rights and Privacy Act (FERPA) and by Part C of IDEA. EIP billing/claiming records must also meet the requirements of the Federal Health Insurance Portability and Accountability Act (HIPAA). EI providers who are licensed, registered, or certified, as well as the employees of the company, under DHHR must retain the records in accordance with the laws and regulations that apply to their profession and must meet the following requirements:

### **Confidential Information**

Beautiful Beginnings Child Development Services LLC staff may not disclose or release without the prior authorization of the appropriate supervisor any confidential information relating to the following: Agency operations, pending or contemplated business transactions, payroll and other personnel records or client information. All confidential information pertaining to the agency is to be used for the benefit of the agency and clients, and is not to be used for the personal benefit of the agency staff, their families or friends. Please see and sign Beautiful Beginnings Child Development Services LLC "Confidentiality Agreement" for more specifics.

## Confidentiality Statement

Beautiful Beginnings Child Development Services LLC is dedicated to guaranteeing the protection of personal confidential information and will follow all legal requirements to assure the confidentiality and protection of records that contain sensitive information (i.e. medical records, sexual or physical abuse, mental illness, HIV status, communicable diseases status, the child's parentage, etc.). Personal identifiable data, information, or records are not to be disclosed by any Beautiful Beginnings Child Development Services LLC employees or independent contractors to follow the confidentiality procedures and requirements stated here and included in "Attachment on Confidentiality", that is signed by each therapist and placed in their personnel file. Beautiful Beginnings Child Development Services LLC, Program Director, is responsible for the protection of the confidentiality of records.(FERPA)

Beautiful Beginnings Child Development Services LLC provides training to all employees/subcontractors regarding rules of confidentiality at their orientation meeting by the Program Director and/or Director of Quality Assurance and are asked to sign an Orientation Checklist as a commitment to maintain client's confidentiality. Such Orientation Checklist is placed in their personnel files.

Beautiful Beginnings Child Development Services LLC ensures that each child's file only contains that child's name. No other names or personally identifiable information are ever included in a child's file. To ensure that another child's name is not included in the file, Beautiful Beginnings Child Development Services LLC follows the following procedure:

- Each child's file is read and reviewed by the office manager upon creation of the file in order to ensure that no other child's name or any other personally identifiable information is included in the record. Additionally, as any new documentation is added to the record, that information is also reviewed by the office manager to ensure that no other child's name or any other personally identifiable information is included in the record.
- If another child's name or personally identifiable information is included in the record, the office manager, if possible, will remove the information from the record. If the information is included in documentation regarding the child's whose record it is, the office manager will then use a black permanent marker and cross out all instances where another child's name or personally identifiable information is included in the record.

Beautiful Beginnings Child Development Services LLC requires all staff members who are directly or indirectly involved with the child or family not to discuss any information about the family or child with colleagues, other parents,

providers, and/or friends.

### **Security/Access to Clients Records**

Beautiful Beginnings Child Development Services LLC children's records are securely stored in a lock-accessible room in individual folders to protect the access of multiple files. The Office Manager, who is in possession of the key to the children files cabinets, oversees who accesses the records and ensures that they follow the procedures stated below:

- Authorized personnel (i.e. Directors, Case Manager, Staffing Coordinator, Supervisor of Billing and Collection) who have routine access to files are stated in the "Record Access" form and are not required to sign in such form.
- An appointment to review a child's record must be scheduled with Beautiful Beginnings Child Development Services LLC Office Manager prior to accessing the record in the event contracted/employed therapist, working directly with a child, wishes to review the file.
- The therapist may only collect or use information for the express purpose of facilitating the child's family's participation in the EI Program and must be identified within Beautiful Beginnings Child Development Services LLC . These individuals are informed and required to obey to all legal requirements that protect EIP records containing sensitive information (such as sexual abuse, HIV status, treatment for mental illness or mental health problems, child's parentage, etc.).
- When allowed access, the therapist must sign "in" and "out" the "Record Access" form located in the front of the child's folder, stating his/her name/title, purpose for accessing the file, and date and time "in/out".
- If a person reviewing the file is not directly employed by the agency (i.e. independent consultant, auditor etc.), he/she must state his/her name, title and purpose for accessing the file in the "Record Access" form located on the first page of each individual file.
- The file placeholder is to be completed by the Office Manager and placed in the drawer instead of the file (i.e., this will document who is in current possession of the file). One professional will use the child's file at a time.
- The file is being signed "in" and "out" and returned to its place before the end of the day. No documents are to be removed from the file; the same order of the file must be maintained upon the file's return. The records will be reviewed on premises, not leaving the Program Director's room.
- All necessary information can be copied only if authorized by Beautiful Beginnings Child Development Services LLC and with parental consents. Only

information appropriate to a request/consent form should be released. Any sensitive information about the child or his/her family must be excluded.

- Written parental consent must be obtained before personally identifiable information is disclosed to anyone other than authorized individuals on the list. If the purpose is for any other reason, (e.g. record review for quality assurance by individuals not directly involved in the child/family's participation in the EI Program), the parent must be informed via phone or letter of the names of the individuals that request access and the purpose for the access, and provide written consent for such access. Such written parental consent must be obtained and placed in the file.
- In the event of parental decision to deny the release of information, Beautiful Beginnings Child Development Services LLC will offer specific information (i.e., name and category of a professional requesting the information). The "Record Access" form in each individual file located on the front of the file will include such entrees for parental inspection. If consent is given, those individuals must also be informed.

### **Parental Consent for Requested Records**

Any requests for access to or information from a child's record must be approved by the parent/guardian prior to the release of the requested information. The Parental Consent to Obtain/Release Information Form must be completed by the parent, signed, and dated and kept in the child's file. No information can be released without this form completed in its entirety. The form must be completed and include the following information:

- Child's EI number
- Child's date of birth
- Child's name and address
- Parent's name or the name of the person/provider releasing the information
- The name and address of the person/provider requesting the information
- A list of the specific records being requested and the purpose for which the records are being requested, parent's signature with the date signed.

### **Court Requested Records/Documents**

If child records/documents are requested by the courts because of a malpractice claim, Beautiful Beginnings Child Development Services LLC must be provided with the appropriate written request, specifying the records needed. The parent must be made aware of the request and, when appropriate, must give his/ her consent. Files being requested as part of malpractice suits will be secured in the Quality Assurance office. The Director of Quality Assurance is responsible for maintaining these documents,

allowing access, and preparing documents for submission to the courts. Original documents cannot be removed from the files. Only copies will be supplied.

### **Use of E-Mail and/or Fax:**

It is our policy to only use email for the following purpose: interoffice email for Beautiful Beginnings Child Development Services LLC. The use of e-mail is inherently unsecure. Protecting records in computer systems begins by identifying potential threats to the system. Unauthorized access to confidential information can occur at an unattended workstation that has not been locked and password protected, during transit when communication can be intercepted, and from unapproved access from outside an unprotected network. One risk is that unauthorized users may gain access to e-mail stored on servers. Password protection helps restrict access to authorized users at the workstation. In addition to any security measures designed specifically for e-mail, a network-based computing system needs to have in place standard pieces of information security such as a firewall. During transmission, encryption can ensure that the contents of an e-mail remain secret and unreadable, even if an outside party captures the e-mail. For these reasons, the Department requires that, to ensure confidentiality when sending personally identifiable information via e-mail or e-mail attachments, providers must use:

1. password protection
2. firewall software
3. encryption

Protecting all records is of paramount importance to our agency. While technology provides us with quicker and easier ways to transmit information, it also allows for a variety of ways in which that information can be transmitted without authorization or regard to the confidential nature of the information. Our commitment to protecting the confidentiality of our records, therefore, prohibits the use of email to transmit any records or information regarding any child or family that we serve.

**Inter-office email** regarding any child in Early Intervention does not contain any personally identifiable information about the child or his/her family. This includes the child's initials. Confidentiality statements are also attached to each inter-office email. All computers at Beautiful Beginnings Child Development Services LLC have a password and screen savers are set and locked after 30 seconds of inactivity. To return to the screen, the password must be reentered. Symantec firewalls are used to prevent unauthorized access into the network.

**Faxing of documents is accepted.** All faxes must be accompanied by a fax cover sheet which contains only the child's identification number with the confidentiality

statement attached. In the even the information requires submission to an authorized party by the parent (i.e. Service Coordinator, Pediatrician, etc.), safeguarding of faxed information is required. The use of a fax cover sheet that includes the confidentiality statement (see below) is required. The provider must ensure that the fax recipient maintains a secure site, where faxed information is not accessible to unauthorized personnel. Additionally, the person sending the fax must call the intended recipient to verify receipt of the faxed document. Confidentiality Statement to be included in the fax cover:

*"The information contained in this transmission may contain privileged and confidential information. It is intended only for the use of the person(s) named above. If you are not the intended recipient, you are hereby notified that any review, dissemination, distribution or duplication of this communication is strictly prohibited. If you are not the intended recipient, please contact the sender by reply phone call and destroy all copies of the original message."*

### **Use of Electronic Signatures**

Beautiful Beginnings Child Development Services LLC does not permit use of electronic signatures.

### **Access and Amending of Records**

At the time, a case is accepted for service provision, Beautiful Beginnings Child Development Services LLC assures that the parents and/or family's representatives on behalf of the parent understand that they have a right to review their child's records, including the "Record Access" form with the names of individuals or organizations that have accessed the files. The introductory letter (i.e. "Welcome Letter"), with a list of personnel authorized to routinely access a child's record, is sent to the parent at the time the assignment for a therapist is mailed. The letter describes procedures for parents to access a child's record and obtain copies of any documents pertaining to their child from the file at no cost. The therapist assigned to the case receives an "Assignment of Services" form which includes information regarding parent's right to access their child's record and obtain copies at no cost. The therapist is responsible for relaying the information to the parent during the first therapy session.

Beautiful Beginnings Child Development Services LLC assures that the parent is not prohibited from access under state or federal law (i.e., guardianship, and custody of local social services/agency, separation and divorce). In case of parental request to review the child's file, they are to be instructed to contact the Case Manager. An appointment will be scheduled as soon as possible for such access. Parents will review their child's individual record without removing it from the premises. The record review

must occur in the presence of a Beautiful Beginnings Child Development Services LLC representative.

- Parents have the right to access their child's records after the case has been closed with Beautiful Beginnings Child Development Services LLC for a period of six years from the last date of service provision. The request to review the record must be in writing. If a parent is unable to make the request in writing, a verbal request will be accepted. Parents are notified about their rights to inspect and amend records in the "Welcome Letter" they receive upon initiation of therapy.
- Parents have a right to obtain copies of their child's record within ten working days of the receipt of the written request; and within five working days if the written request is made as a part of a mediation or impartial hearing at no cost to the parents.
- Parents have the right to request an amendment to their child's record when the parents believe the information contained in the record is inaccurate, misleading, or violates the privacy or any other rights of their child. The request for an amendment to the child's record must be in writing and given to the Service Coordinator or Case Manager.
- If the provider/therapist decides not to amend the record as requested, Beautiful Beginnings Child Development Services LLC must be informed so that the Service Coordinator or Early Intervention program representative can be notified and the parent can be notified regarding his/her right for a hearing. The hearing will be conducted by an individual designated by the municipality who does not have a direct interest in the outcome of the hearing.
- If the provider agrees with the request to amend the record, both Beautiful Beginnings Child Development Services LLC and the parent must be notified in writing. If the provider agrees with the request to amend the child's record and the child service coordinator is employed by Beautiful Beginnings Child Development Services LLC, the provider must notify the Service Coordinator that the changes have been made..

### **Maintenance and Retention of Records**

All therapists must adhere to the WV Birth to Three/DHHR rules and regulations, as well as other federal regulations, regarding the preparation, maintenance, and retention of records.

- All therapists/providers agree to protect all records pertaining to children enrolled in EIP confidentiality when off site.
- Copies of the eligible child's documentation (IFSP, Progress Reports, Session Notes, etc.) must be secured and contained in individual folders, in a fireproof portable locked box/file when transported.



- Providers are responsible for maintaining copies of the documentation for six years after the last day of service has been provided. Additionally, providers who are Licensed, registered, or certified under WV State Law must retain records in accordance with the laws and regulations that apply to their professions.
- All confidential information in the records must be shredded when the records are to be disposed of.
- Beautiful Beginnings Child Development Services LLC has a designated person, the Case Manager, who is responsible for appropriate disposal of documents that contain any confidential information via shredding on a weekly basis.

### **HIV /Sensitive Information Confidentiality**

Information regarding a client or worker with HIV status is strictly confidential. By law, only "certain" people may have access to this knowledge. All others would require written permission of the HIV (+) person or that person's parent or guardian to be informed. Additionally, sensitive information, such as sexual or physical abuse, treatment for mental illness or mental health problems, communicable disease status, the child's parentage, etc., is also strictly confidential and must be protected. Written consent by the parent or guardian must be given to release this information. This information is kept in a locked file in the Program Director's office.

The "certain" people allowed by law to be privy to this information would be those who routinely handle medical records as part of the normal course of business and those who plan the delivery of health services to the protected individual. Anyone who becomes aware of an individual's HIV status through performance of his/her job is required by law to protect that information and subject to jail and monetary fines should he/she not have written permission to pass it along from the HIV (+) individual. The law does not require that all healthcare workers be told that clients have AIDS- HIV. Since there is no reliable way to know day to day if a person is positive or not, it would serve no purpose for the client's status to be made known.

Universal Precautions protect you from exposure to HIV-AIDS, as well as many other communicable diseases. Use them and make them a habit! No information on any of Beautiful Beginnings Child Development Services LLC clients is to be freely discussed elsewhere. This constitutes unethical conduct and may be a cause for termination.

### **HIV-Related Information**

As required by law, Beautiful Beginnings Child Development Services LLC is permitted to disclose HIV information only when knowledge of this information is necessary to provide appropriate care or treatment to clients. When this situation arises, Beautiful Beginnings Child Development Services LLC must have written consent from the client

to whom it pertains or as otherwise permitted by law (WV Code §16-3C-3. Confidentiality of records; permitted disclosure; no duty to notify.)

The following written statement must appear in any/all client records this pertains to, as well as on any form utilized when releasing this information to anyone requiring it. "This information has been disclosed to you from coresidential records which are protected by state laws. State law prohibits you from making any further disclosure of this information without the specific written consent of the person to whom it pertains, or as otherwise permitted by law.

Any unauthorized further disclosure in violation of state law may result in a fine or jail sentence or both. A general authorization for the release of medical or other information is not sufficient authorization for further disclosure. Disclosure of confidential HIV information that occurs because of a general authorization for the release of medical or other information will be in violation of the state law and may result in a fine or jail sentence or both.

Beautiful Beginnings Child Development Services LLC subscribes to the utilization of Standard Precautions as an infection control policy in the care of all clients. Therefore HIV-related information is not required to be given to each individual therapist assigned to any specifically diagnosed client assignment. All therapists are oriented to Standard Precautions at hire. In accordance with WV law, the following measures will be instituted to assure absolute confidentiality for any HIV-related information:

- Informed consents are obtained for communication of information for the sole purpose of providing health care services.
- Disclosure of HIV related information would only be allowed to Case Coordinator.
- Permission and disclosure will be documented in client's records.
- Confidential information may not be given solely for infection control purposes.
- Home care service Plans of Care indicate that Standard Precautions are required.
- Anyone requesting confidential HIV information from Beautiful Beginnings Child Development Services LLC representatives must contact the Program Director.

## **HEALTH AND SAFETY STANDARDS**

Beautiful Beginnings Child Development Services LLC follows the guidelines developed by the WV Birth to Three/DHHR and assures strict adherence to health and safety standards. The following policies have been developed to ensure that employees and contracted therapists are knowledgeable about the health and safety standards of the WVDHHR and Beautiful Beginnings Child Development Services LLC:

- At orientation, the Program Director conducts training for employed and/or contracted clinicians who provide home and community-based services on how to apply the health, safety and sanitation standards to their practices and how to exercise the infection control procedures, as well as universal precautions.
- At the orientation interview, a copy of Beautiful Beginnings Child Development Services LLC ' Health and Safety Policies and Procedures is given to the employee/contracted provider.
- All employees and contracted providers will be notified in a timely manner when any changes are made to WV DHHR/WV Birth to Three Health and Safety Standards and/or Beautiful Beginnings Child Development Services LLC Health and Safety Policies and Procedures. Necessary training will be provided and documented in the personnel files.
- Subsequent quarterly In-Service trainings address health and safety issues. Parental surveys, which include a section on appropriate implementation of health and safety practices, are sent to parents on a quarterly-basis.
- Monthly, the General Manager conducts random Parent Satisfaction phone surveys to evaluate the appropriate implementation of Beautiful Beginnings Child Development Services LLC Health and Safety Policies and Procedures.

Beautiful Beginnings Child Development Services LLC stresses the importance of providing services in a way that protects the health and safety of children and other persons involved in the delivery of services. The prevention of the spread of infectious disease and the use of universal infection controls go hand in hand.

### **Infection Control Using Standard Precautions**

To prevent the possible transmission of any infectious diseases all Providers should follow guidelines for Standard Precautions and hygiene practices, which address hand washing, the use of gloves, toy washing and hazardous objects.

### **Hand Washing**

Hand washing is the first line of defense against the spread of infectious diseases. All staff members must adhere to the proper hand washing techniques. This includes washing before and after service provision, after using the bathroom, after toileting or after handling soiled garments, after contact with any bodily secretions, (e.g. nasal or mouth secretions, stool, blood, urine, vomit, or skin lesions), after sneezing or coughing, after cleaning up any mess or dirt, etc. Proper procedure for hand washing is outlined below:

### **Hand washing Guidelines**

- Turn water on

- Rinse hands
- Apply liquid soap
- Wash vigorously - working into lather
- Rinse hands with fingers pointing down
- Take paper towel and dry hands
- Using towel, turn off faucet
- Open door using paper towel
- Turn off light using paper towel
- Discard paper into wastebasket

Remember: To control the spread of disease and infection, we must interrupt the disease chain. This can be accomplished when everyone follows correct procedures by washing hands upon entering the building, after toileting, sneezing, coughing, and before eating which is a Department of Health regulation.

### **Gloves**

Use of disposable latex gloves in specific circumstances can help prevent the spread of infectious diseases. Staff members should be sure to always have gloves available to them when working with children.

### **Glove-use Guidelines**

Gloves must be used in the following situations:

- When cleaning with bleach
- During the provision of feeding therapy and other oral motor exercises
- Cleaning up blood spills or other bodily fluids, including nose bleeds
- In any situation where there is a probability of exposure to any contact with bodily fluid (blood or excrement)
- Gloves should not be used when assisting a child to wipe tears or blow his/her nose.
- A different pair of gloves must be used for each incident; never re-use a pair of gloves.
- Disposable gloves do not need to be sterile; they can be put on like any other type of glove.

### **Removing Disposable Gloves**

- Pinch with two fingers the outside of one glove with the other hand. Turn the glove inside out as you pull it off. The soiled side of the glove is now on the inside.
- Discard the glove into a waste receptacle.
- Reach inside the second glove with two fingers of your bare hand, and pinch it.

- Turn the glove inside out as you pull it off. Discard the glove.
- Wash hands carefully with soap and water after gloves have been removed.
- Discard all contaminated material and used gloves in a receptacle.
- Disinfect contaminated surfaces with bleach solution.

### **Toy/Equipment Washing**

Toy and equipment washing is an important and necessary defense against the spread of infectious diseases. All toys and equipment that are carried from one home or community site to another should be disinfected after each use. All staff members must adhere to the proper toy/equipment washing techniques.

### **Toy Washing Guidelines**

- Put on disposable latex gloves to prevent skin irritation.
- Apply a solution of bleach and water on a toy (1 ounce of bleach in 9 ounces of water).
- If solution is not readily available, wipe a toy with antibacterial wipes;
- Wash off residue with warm water.
- Pat the toy dries with a paper towel.

Please note, for newborns and infants, whenever possible, ask mother to provide you with their own toys, since newborns are particularly vulnerable to harmful bacteria.

Therapists' Note: Toys and equipment must be developmentally appropriate, in good condition, cleaned between uses, and sanitized weekly or after use with children who are ill or in contact with bodily fluids. Additionally, therapists are responsible for ensuring that the toys/materials they have purchased have not been recalled for lead or other safety issues. Therapists should make regular inquiries with the manufacturer to obtain recall information. Therapists will regularly check the following websites for lead hazard product recalls: [www.cpsc.gov](http://www.cpsc.gov) (main site; can conduct searches).

### **CHILD HEALTH AND SAFETY**

As providers of home and community EI services, we are responsible for protecting the general health and safety of children. with respect to illness, injury, and emergencies. Children must be supervised always. The following guidelines must be adhered to ensure the well-being of the children. Abuse, mistreatment of patients or the violation of ethical and professional standards of care in your professional specifically, corporal punishment and emotional or physical abuse or maltreatment is

prohibited. The use of aversive or restraints of any form, including high chairs and strollers, are strictly prohibited.

### **Child Illness Guidelines**

- If a child becomes sick during a session, the therapist must notify the parent immediately.
- It is the parent's responsibility to notify the therapist if the child is sick on the day of a session.
- If a child is sick with fever, vomiting or diarrhea the session must be rescheduled according to the EI make-up policy.
- If the parent has not notified the therapist and the child is sick when the therapist arrives, the session must be rescheduled. Parents are notified of this requirement in the "Welcome Letter" sent to them when Beautiful Beginnings Child Development Services LLC accepts their child's case.

### **Child Injury Guidelines**

- If a child is injured during a session the therapist must immediately tend to the injury by either administering basic first aid or calling for emergency medical assistance.
- If any injury to a child occurs, the therapist must complete the Record of Injury form as soon as possible, but no later than 24 hours after the injury occurred.
- Three copies of the Record of injury form must be completed. A copy must be given to the parent, a copy must be kept in the child's record and a copy must be retained by the agency or individual provider (subcontractor).

### **Child Emergency Guidelines**

- Providers are required to carry a cell phone to report emergency situations.
- Providers are required to have emergency contact numbers for medical assistance and transportation available in the event of an emergency.
- In the event of an emergency, the provider must respond immediately. The provider must determine the severity of the emergency and act. If certified the provider must administer any necessary first aid and/or CPR, and immediately call for emergency medical assistance.
- If the provider is not certified in first aid/CPR he/she must immediately call for emergency medical assistance.

- Any emergency that occurs must be documented on the Incident Report form within 24 hours of the incident. If an injury was involved, the Record of Injury must also be completed. Within their service coordinator, along with the therapist, is responsible for completing the Incident Report form.

### **Abuse and Neglect Guidelines**

WV state defines abuse as physical abuse, sexual abuse and emotional abuse. If there is a reasonable suspicion of child abuse, it is required by WV State law (**WV Child Protective Services Law §48 and §49**) that a therapist reports by calling the DHHR Centralized Intake Line 1-800-352-6513. This is necessary to protect the child and help the parents solve problems, which are leading to abuse or maltreatment.

In addition to the mandated reporters outlined above, any person over the age of eighteen who receives a disclosure from a credible witness or observes any sexual abuse or sexual assault of a child, shall immediately and not more than twenty-four (24) hours after receiving such a disclosure or observing the sexual abuse or sexual assault, report the circumstances or cause a report to be made to the Department or the State Police or other law-enforcement agency having jurisdiction to investigate the report. If the reporter feels that reporting the alleged sexual abuse will expose themselves, the child, thereporter's children or other children in the subject's household to an increased threat of serious bodily injury, the individual may delay making the report while he or she undertakes measures to remove themselves or the affected children from the perceived threat of additional harm. The individual must make the report as soon as practical after the threat of harm has been reduced. The law enforcement agency that receives a report regarding sexual abuse must report the allegations to the Department.

### **DEFINITIONS:**

1. **"Abused child"** means a child whose health or welfare is harmed or threatened by: A parent, guardian or custodian who knowingly or intentionally inflicts, attempts to inflict or knowingly allows another person to inflict, physical injury or mental or emotional injury, upon the child or another child in the home. Physical injury may include injury to the child as a result of excessive corporal punishment; Sexual abuse or sexual exploitation;

The sale or attempted sale of a child by a parent, guardian or custodian; Domestic violence; or Human trafficking or attempted human trafficking.

2. **Neglected child**” means a child: Whose physical or mental health is harmed or threatened by a present refusal, failure or inability of the child’s parent, guardian or custodian to supply the child with necessary food, clothing, shelter, supervision, medical care or education, when that refusal, failure or inability is not due primarily to a lack of financial means on the part of the parent, guardian or custodian; or Who is presently without necessary food, clothing, shelter, medical care, education or supervision because of the disappearance or absence of the child’s parent or custodian. “Neglected child” does not mean a child whose education is conducted within the provisions of the W. Va. Code (Sec. 1, Art. 8, Ch. 18). or, by any other acts of a similarly serious nature requiring the aid of Family Court; or, abandonment.

## **REPORTING PROCEDURES:**

1. Reports of child abuse or neglect, including sexual abuse or sexual assault, must be made by phone immediately, and not more than 24 hours after suspecting abuse or neglect.

If requested, must be followed up within 48 hours by a written report.

The following information should be provided:

- Demographic information of the victim(s)
- Type of abuse or neglect suspected
- Whether the victim in imminent danger
- Location of the victim and caregivers
- Whether there a protective caregiver present
- Whether the alleged perpetrator has access to the victim
- General functioning of victim and caregivers Any safety threats for first responders

2. The therapist should also immediately inform Beautiful Beginnings Child Development Services LLC that a report has been made.

## **PENALTIES FOR FAILURE TO REPORT:**

1. If a required reporter knowingly fails to report suspected or known child abuse or neglect or knowingly prevents another person acting reasonably from doing so, that person shall be guilty of a misdemeanor and, upon conviction, shall be confined in the county jail for not more than 90 days or fined not more than \$5,000, or both.



Any person, official or institution required to report a case involving a child known or suspected to be sexually assaulted or sexually abused, or student known or suspected to have been a victim of any non-consensual sexual contact, sexual intercourse or sexual intrusion on school premises, who knowingly fails to do so or knowingly prevents another person acting reasonably from doing so, is guilty of a misdemeanor and, upon conviction thereof, shall be confined in jail not more than 6 months or fined not more than \$10,000, or both.

2. Any person required by law to report a case of suspected child abuse, maltreatment, nor neglect who knowingly and willfully fails to do so shall be reported to the Department of Health and Human Resources

3. Abuse and neglect is a growing concern and recognized as a potential problem Therapists are encouraged to discuss observation of dysfunctional, unusual or changes in family dynamics with the Director of Quality Assurance. Reporting and recording of reasonable suspicious situations will be discussed with the Clinical Director and Director of QA. It is important to note that there is no mandated reporting for domestic violence and that we must have the victim's consent before making any such report. Although you are not mandated to report domestic violence situations, it is important to know the signs so that you may assist the family and ensure the safety of those involved. When working with a family, you may observe some of the following signs of domestic violence:

- Fear of the abusive person
- Anxiousness
- Noticeable injuries
- Deferring to partner for even simple decisions
- Substance abuse
- Limited supports outside of the household
- Repeated separations and reconciliations with abusive partner

If you have observed any of the above signs, it is important for you to make attempts to discuss your concerns with the parent. In addition, the child's service coordinator will be contacted to discuss your concerns and ask for assistance. Observing, screening and reporting abuse and neglect is presented at orientation for new therapists.

### **FALSE CLAIMS & PAYMENT FRAUD PREVENTION POLICY**

As a contracted agency with the WV DHHR and Birth to Three, Beautiful Beginnings Child Development Services LLC is bound by their policy on false claims and payment fraud prevention regarding Medicaid billing. Beautiful Beginnings Child Development Services LLC has developed its own policy regarding false claims and payment fraud

prevention, based on the regulations set forth by the WV DHHR and Birth to Three program. This policy is directly related to the submission of all documentation pertaining to the provision of services by therapists. All providers are responsible for the submission of true and accurate documentation and will be held liable for any inaccuracies, falsities, or fraudulent claims.

There are several federal and WV statutes that relate to filing false claims. These statutes delineate the rules and regulations regarding the filing of false claims, including criminal laws, civil laws, and whistleblower protection.

### **Federal False Claims Act (31 USC Section 3729-3733)**

The Federal False Claims Act provides that:

- Any person who knowingly presents, or causes to be presented, a false or fraudulent claim for payment or approval; knowingly makes, uses, or causes to be made or used, a false record or statement to get a false or fraudulent claim paid or approved by the government; conspires to defraud the government by getting a false or fraudulent claim paid or approved by the government; or knowingly makes, uses, or causes to be made or used, a false record or statement to conceal, avoid, or decrease an obligation to pay or transmit money to the government is liable for a civil penalty of not less than \$5,000 and not more than \$10,000, plus 3 times the amount of damages sustained by the government.
- Regarding the terms "knowing" and "knowingly", they mean that a person has actual knowledge of the information; acts in deliberate ignorance of the truth or falsity of the information; or acts in reckless disregard of the truth or falsity of the information, and no proof of specific intent to defraud is required.
- A private party may bring an action on behalf of the United States and may share in a percentage of the proceeds from a Federal False Claims action or settlement. The private parties who file such lawsuits are called "qui tam relators" or "whistle blowers".

### **Program Fraud Civil Remedies Act (31 USC Section 3801-3812)**

The Federal Program Fraud Civil Remedies Act is like the Federal False Claims Act. It provides administrative (monetary) remedies against persons who make or cause to be made a false claim for money, property, or services to certain federal agencies, including HHS, which operates the Medicaid program. This act provides that any person making, presenting, submitting, or causing to submit a claim that the person knows or has reason to believe is false or fraudulent is subject to civil monetary penalties of up to

\$5,000 per false claim and up to twice the amount of the fraudulent claim.

## **Fraud Enforcement and Recovery Act**

The Fraud Enforcement and Recovery Act of 2009 (FERA) was passed by Congress to enhance the criminal enforcement of federal fraud laws, including the False Claims Act (FCA). Penalties for violations of FERA are comparable to penalties for violation of the FCA. FERA does the following:

- Expands potential liability under the FCA for government contractors
- Expands the definition of false/fraudulent claim to include claims presented not only to the government itself, but also to a government contractors
- Expands the definition of false record to include any record that is material to a false/fraudulent claim
- Expands whistleblower protections to include contractors and agents who claim they were retaliated against for reporting potential fraud violations

## **Social Services Law Section 145-b: False Statements**

This states that it is a violation to knowingly obtain payment for services furnished under Medicaid (and other Social Services programs) by using false statements, deliberate concealment, or fraudulent schemes. A civil monetary penalty may be imposed on those engaging in such conduct.

## **WEST VIRGINIA MEDICAID ANTI-FRAUD STATUTES**

CHAPTER 9. HUMAN SERVICES.

ARTICLE 7. FRAUD AND ABUSE IN THE MEDICAID PROGRAM.

### **§9-7-5. Bribery; false claims; conspiracy; criminal penalties; failure to maintain records.**

(a) A person shall not solicit, offer, pay, or receive any unlawful remuneration, including any kickback, rebate or bribe, directly or indirectly, with the intent of causing an expenditure of moneys from the medical services fund established pursuant to §9-4-2 of this code, which is not authorized by applicable laws or rules and regulations.

(b) A person shall not make or present or cause to be made or presented to the Department of Health and Human Resources a claim under the medical programs of the Department of Health and Human Resources knowing the claim to be false, fraudulent, or fictitious.

(c) A person shall not enter into an agreement, combination or conspiracy to obtain or aid another to obtain the payment or allowance of a false, fraudulent, or fictitious claim under the medical programs of the Department of Health and Human Resources.

(d) Any person found to be in violation of §9-7-5(a), §9-7-5(b) or §9-7-5(c) of this code is guilty of a felony and, upon conviction, shall be imprisoned in a state correctional facility not less than one nor more than 10 years or shall be fined not to exceed \$10,000, or both fined and imprisoned.

(e) Any provider who, having submitted a claim for or received a benefit, payment, or allowance under the medical programs of the Department of Health and Human Resources, knowingly fails to maintain such records as are necessary to disclose fully the nature of a good or service for which a claim was submitted or benefit, payment, or allowance was received, or such records as are necessary to disclose fully all income and expenditures upon which rate of payment were based, for a period of at least five years following the date on which payment was received, shall be guilty of a misdemeanor and, upon conviction, may be imprisoned in a state correctional facility not to exceed one year or may be fined up to \$1,000, or both fined and imprisoned. Any person who knowingly destroys such records within five years from the date the benefit, payment, or allowance was received, shall be guilty of a felony, and may be imprisoned in a state correctional facility not less than one nor more than 10 years or may be fined not to exceed \$10,000, or both fined and imprisoned.

## **Compliance Expectations**

Beautiful Beginnings Child Development Services LLC is responsible for submitting documentation verifying the delivery of Early Intervention services to the WV Early Intervention Program, under the auspices of the WV DHHR/WV Birth to Three Health and Medicaid, for payment. As an employee (contracted therapist/agency), you are subject to all rules and regulations regarding compliance.

For therapists providing services, you are bound by the following compliance expectations:

- All billing documentation must be accurate, and indicate the date and time of service provision, as well as all other required information as delineated in Service Provision section (under Documentation Requirements) of this Policies and Procedures Manual.
- All session notes must be accurate and fully completed, with parent/caregiver signatures for each session.
- Under no circumstances should a parent/caregiver be asked to sign a blank or incomplete session note. Such action may result in placement on probation or termination of employment.
- All mandated services agreed to be performed by you must be administered as written in the child's IFSP, unless otherwise directed by Service Coordinator and/or Director.
- All confidentiality procedures, as delineated in this Policy and Procedures Manual Confidentiality, must be adhered to.

- If you are aware of any fraudulent acts or false claims regarding the provision of services, you must report such information to Beautiful Beginnings Child Development Services LLC Director.
- For office personnel and administration, you are bound by the following compliance expectations: If you are aware of any fraudulent acts or false claims regarding the provision of services, documentation of services, or billing of services, you must report such information to Beautiful Beginnings Child Development Services LLC Director.
- In reviewing any documentation of the provision of services, including session notes and billing forms, you must make note of any questionable activities and report them to the billing department as well as the Director.

### **Detecting and Preventing Fraud and Abuse**

Beautiful Beginnings Child Development Services LLC ensures that all documentation is accurate and that services are billed in compliance with the WV DHHR/WV Birth to Three Health and Medicaid rules and regulations. It is incumbent upon our administrators, employees, therapists, and contracted providers to assist us in our duties as providers of Early Intervention services.

Beautiful Beginnings Child Development Services LLC has implemented policies and procedures, as well as checks and balances, to assist us in detecting any fraudulent activity, waste, or abuse. The Quality Assurance Unit, under the supervision of the Director of Quality Assurance, has been assigned the task of reviewing all submitted documentation and adheres to the following procedures:

- All documentation regarding the provision of services submitted by therapists is forwarded to the Quality Assurance Unit for review.
- Each document is reviewed for quality, content, and accuracy by a member of the QA unit and a QA team member will indicate any errors, problems, or questions regarding the submitted documentation.
- The QA reviews the documentation in question and contacts the therapist responsible. Depending on the problem, QA will either ask the therapist to make a correction or submit further documentation, if necessary. The documents in question will not be submitted for payment until the respective supervisor is satisfied with the therapist's follow-up.
- If a therapist made an error on the date or time of the session and has subsequently crossed out and initialed the information on the session note, the parent/caregiver of the child will be contacted by QA and asked to verify the correct date and time of the session to avoid fraud. The session will only be billed/submitted for payment to WV DHHR/WV Birth to Three Health fiscal agent if the parent/caregiver verifies the information. If the parent/caregiver cannot be reached, the session is not billed.

- If the Director/QA deems that the documents submitted are inappropriate, they will inform the therapist responsible that the services will not be submitted for payment, resulting in the non-payment of that therapist.
- Monthly internal audits verify that services billed are matched with the appropriate billing and session note documentation. Any services that are billed incorrectly will be adjusted or voided immediately.
- Parent Surveys, pertaining to the provision of a child's services, are sent on a regular Quarterly basis. Parents can inform us of any problems or issues that may have arisen regarding the child's services. Any issues brought to us by a parent are forwarded to Quality Assurance.
- Random phone calls are made to parents to ask about the provision of the child's services. Any information given by the parent concerning questionable practices is forwarded to Quality Assurance for further investigation.
- Under the WV EIS system, provider billing across all agencies is tracked and Beautiful Beginnings Child Development Services LLC is notified if there is an overlap for a provider's billing between agencies.
- Any provider whose billing overlaps between agencies will be automatically placed on probation. The provider (i.e. employee or subcontractor) will be under direct QA supervision for the following 3 months (i.e. all paperwork reviewed, announced observation conducted, parent satisfaction phone calls conducted etc.). Any subsequent occurrence in overlaps will result in termination.

### **Communication Regarding Compliance Issues**

Anyone with concerns regarding compliance issues may contact Beautiful Beginnings Child Development Services LLC QA department Monday through Friday, 830 a.m. to 4:30p.m. at 878-208-4322. If you call during non-business hours, you will be able to leave a message.

### **Disciplinary Policies**

Any employee or contracted therapist who does not abide by the policies and procedures regarding compliance as set forth in this manual is subject to disciplinary action. Such action will be determined based on the severity of the offense and may include, but is not limited to, return to probationary status or termination. Beautiful Beginnings Child Development Services LLC will employ the following sanctions:

- For failure to report suspected problems: return to probationary status
- Any subsequent failures to report suspected problems: termination
- Participation in non-compliant behavior: termination

- Encouraging, directing, facilitating, or permitting non-compliant behavior: termination

### **Training and Support**

Beautiful Beginnings Child Development Services LLC will provide training and support to all staff and contracted therapists to ensure their ability to adhere to these Compliance Procedures. The training will consist of:

- A review and explanation of all applicable laws, articles, and statutes-both civil and criminal-in regard to the WV DHHR/WV Birth to Three Health False Claims and Payment Fraud Prevention Policy;
- A review of documentation requirements and submission guidelines; a review of Beautiful Beginnings Child Development Services LLC Policies and Procedures as they pertain to compliance issues and guidelines;
- A review of the ramifications and penalties of any questionable or fraudulent activities, or false claims.
- A "question and answer" session to address any questions, concerns, ideas, etc. that may be raised during the training session.

### **INCIDENT REPORTING**

#### Incident Reporting/ Record of Injury

Beautiful Beginnings Child Development Services LLC defines an incident as an occurrence that results, or has the potential to result, in injury to the client, client's family or therapist. The incident policy has been designed to allow for reporting, investigating, tracking and documenting all client and therapist incidents, whether they be accidents, injuries or safety hazards related to the care and service provided, including the use of Medical Equipment. Additionally, if an injury to the child (client) occurred, the Record of Injury form must also be completed.

Beautiful Beginnings Child Development Services LLC therapist, client, or client's family member can report an incident. All therapists are instructed on the responsibility and procedure for notifying the Director and QA of any incident involving the client, client's family, and/or therapist immediately, but no later than 24 hours after the accident. Incident reporting includes any incidents involving the client during non-service hours. An Incident Report is initiated by Beautiful Beginnings Child Development Services LLC staff member to whom the incident was reported and includes information such as date and time of the incident, persons involved, and a complete description of the occurrence. The report is completed by the therapist, who documents any medical/administrative follow-up action(s). Supporting documentation, (e.g. therapist

and/or witness statement) is also attached to the report. The incident is logged in the Incident Book at Beautiful Beginnings Child Development Services LLC and a copy of the report, along with any supporting documentation is placed in the client's file. When an injury to the child (client) has occurred, the Record of Injury form must be completed. This report includes information such as the date and time of the injury, a witness description of how the injury occurred, the child's description of how the injury occurred, body parts and consumer products involved, actions taken on behalf of the child, and recommendations of preventative strategies.

### **Safe Medical Devices Act:**

Any equipment or medical device failure that results in serious injury or potential harm to a patient, family member or therapist is reported through the incident reporting process described above. The Case Manager is responsible for contacting the client and EI Administrator so they can notify the equipment supplier (vendor). The Supplier Company is notified and is responsible for reporting serious injuries to the manufacturer. If the incident involves a device-related death, or the manufacturer is not known, the vendor is also responsible for completing form 3500A (mandatory MedWatch form) and submitting it to the FDA as per Safe Medical Devices Act of 1996. All documentation relating to a medical device failure incident is to be kept with the Incident Report. As per record retention policy, all patient records are retained for no less than six years from date of discharge, and authorized FDA employees can have access to these records if requested.

## **SCREENING, CORE & SUPPLEMENTAL EVALUATIONS**

As a provider of Early Intervention Evaluations, Beautiful Beginnings Child Development Services LLC realizes the importance of administering evaluations in a timely fashion, using highly qualified therapists, and including parents in the entire evaluation process.

### **SCREENING REQUIREMENTS**

The evaluator may, with parental consent, perform a screening to assess the child's developmental status to determine what type of evaluation, if any, is warranted. A screening should ordinarily be conducted when no screening has been done in the previous 90 days or when the results of recent (within the past 90 days) screening are not available. However, a screening should not be conducted when a child is known to have a diagnosed condition with a high probability of developmental delay or disability or when there is an obvious indication that a multidisciplinary evaluation is needed. Screenings shall be performed by approved evaluators using appropriate instruments such as the Ages and Stages Questionnaire - 3 (ASQ-3), and Modified Checklist for Autism in Toddlers (M-CHAT – R/F) for children 16 months of age and older as part of



the Child Assessment that begins at the Initial Home Visit. Screening shall be brief, efficient, objective, multidimensional and appropriate for the child's age and/or developmental status. The Service Coordinator will ensure that the screening information is shared before or during the MDE meeting and incorporated into the evaluation report as part of the child's assessment and in the IFSP, if the child is eligible. Unless they choose not to participate, parent(s) should always be present and take part in the screening. You may request a multidisciplinary evaluation at any point during the screening process.

## **AUTHORIZATION OF EVALUATIONS**

Part C requires a timely, comprehensive, multidisciplinary evaluation of each child, birth through age two. If the child is determined eligible, a child assessment is conducted. Evaluation and assessment ([34 CFR 303.321](#), page 125) are considered processes that have different purposes under Part C. Evaluation is defined as the "procedures used by appropriate qualified personnel to determine a child's initial and continuing eligibility, consistent with the state definition of infants and toddlers with disabilities. " Assessment is defined as "the ongoing procedures used by qualified personnel to identify the child's unique strengths and needs and the services appropriate to meet those needs and includes the assessment of the child and the assessment of the child's family." A family-directed assessment is conducted to identify the resources, priorities, concerns and the support, and services necessary to enhance the family's capacity to meet the needs of their child. Qualified personnel must use informed clinical opinion and multiple procedures when conducting evaluations and assessments. While a "child's medical or other records may be used to establish eligibility (if those records indicate that the child's level of functioning in one or more of the developmental areas constitutes a developmental delay or that the child otherwise meets the criteria for an infant or toddler with a disability)", an assessment still must be conducted. The initial family assessment must be conducted within the 45-day timeline if the parent concurs and even if other family members are unavailable.

## **EVALUATION REQUIREMENTS**

A Multidisciplinary Evaluation(MDE) shall be performed to determine the child's initial or ongoing eligibility for early intervention services and service needs. The multidisciplinary team must include two or more qualified personnel from different disciplines and one must be the Service Coordinator. If, because of the core evaluation, the evaluator and parent(s) agree that supplemental evaluations are necessary to gather the information to develop the Initial IFSP, up to four (4) supplemental evaluations may be conducted. The core evaluation team should include a professional in the child's suspected delay. The core evaluation should fully assess the suspected delay and supplemental evaluations should assess other areas that have been identified during the core

evaluation. Evaluations will be conducted in environments that are appropriate to the needs of the child, are conducive to accurate results, and consider the preferences of the parent(s). The EI law and regulations emphasize rights and responsibilities of parents or designated surrogates to participate in all aspects of the evaluation. The local designee may be present at the screening or evaluation of a child in his or her care and custody, or custody and guardianship, in lieu of a parent who elects not to participate. The evaluation must be based on informed clinical opinion and employ age appropriate instruments and procedures. Instruments used as part of a multidisciplinary evaluation, whether norm or criterion referenced, shall be reliable and valid; have appropriate level of sensitivity and specificity; be sensitive to the child and parent's culture and dominant language or other mode of communication.

### **Purpose of the Multidisciplinary Evaluations**

According to WV Birth to Three, the Multidisciplinary Evaluation (MDE) is necessary to:

- Determine a child's eligibility for the Early Intervention Program.
- Assess the status of a child's cognitive, communication, physical, social-emotional, and adaptive development.
- Identify areas of developmental strengths and needs.
- Learn and understand the parent's resources, priorities, and concerns related to their child's development.

### **Requirements for the Evaluation Process**

The WV Birth to Three imposes certain responsibilities on those professionals who conduct evaluations, assessments, and screenings to establish a child's eligibility for the Early Intervention Program. The following is a list of those responsibilities:

- Local Infant/Toddler EI Programs shall ensure that any screening, initial evaluation and initial assessment of the infant or toddler and family and initial IFSP meeting be completed within 45 days from the date the Infant/Toddler EI Program receives the referral of the infant or toddler. There may be exceptional family circumstances where a program may not be able to meet the 45 days timeline. These circumstances include:

-the infant or toddler or parent is unavailable to complete the screening, the initial evaluation, the initial assessments of the infant or toddler and family, or the initial IFSP meeting due to exceptional family circumstances that are documented in the infant or toddler's EI records; or

-the parent has not provided consent for the screening, the initial evaluation, or the initial assessment of the infant or toddler, despite documented, repeated attempts by the Infant/Toddler EI Program to obtain parental consent.

- The local Infant/Toddler EI Program must develop procedures to ensure that if an exceptional family circumstance exists, the local Infant/Toddler EI Program:

-documents in the infant or toddler's EI records the exceptional family circumstances or repeated attempts to obtain parental consent;

-completes the screening, the initial evaluation, the initial assessments (of the child and family), and the initial IFSP meeting as soon as possible after the documented exceptional family circumstances no longer exist or parental consent is obtained.

- unless clearly not feasible to do so, all evaluations and assessments of an infant or toddler shall be conducted in the native language
- No single instrument may be used as the sole criterion or indicator of eligibility.
- Evaluations must be conducted by personnel trained to utilize appropriate methods and procedures.
- Evaluations must be based on informed clinical opinion.
- Evaluations must include a review of pertinent records related to the child's health status and medical history.
- Evaluations include a health assessment, including a physical examination, vision and hearing screening, and, where appropriate, a neurological assessment.
- Evaluations must be conducted in a professional, objective manner and must:

-Consider the unique characteristics of the child.

-Use several sources of information about the child (with parental consent) including, but not limited to, the primary health care provider, relatives, day care providers, etc.

-Employ appropriate instruments and procedures. Instruments must be reliable and valid and must be sensitive to the child's and parent's culture and dominant language

-Be conducted in a setting conducive to ensuring accurate results. The parent's input regarding the setting should be considered.

-The evaluator, or knowledgeable, authorized representative, must participate in the IFSP meeting.

## **Composition of the Evaluation Team**

Beautiful Beginnings Child Development Services LLC MDE teams include two or more qualified personnel from different disciplines who are trained to utilize appropriate tools, methods, procedures, include informal clinical opinion, have sufficient expertise in child's development to evaluate all required domains, and at least one of whom shall be a specialist in child's suspected area of delay. All infants and toddlers suspected of having a developmental delay will be entitled to a Multi-Disciplinary Evaluation (MDE), conducted by no less than two evaluators. Nondiscriminatory evaluation and procedures will be employed in all aspects of the evaluation and assessment process.

## **Required Components of the Multidisciplinary Evaluation**

Under WV Birth to Three regulations, the following components must be included in the performance of The MDE:

- A parent interview about the families' concerns, priorities, and resources related to the child's development and progress. With parental consent, interviews may be conducted with other family members or those people knowledgeable about the child.
- A review of records regarding the child's current health status and medical history, with parental consent.
- An evaluation of the child's level of functioning in each of the 5 developmental domains: cognitive, communication, physical, adaptive, and social-emotional development. The evaluation of the child's physical development must include a health assessment.
- With parent consent, findings from current examinations, evaluations, or assessments, in addition to health assessments, may be used to augment the MDE to determine eligibility, if the assessments have been performed in a manner consistent with the requirements for MDEs.
- An assessment of the unique needs of a child in each developmental domain, including identification of services appropriate to meet those needs. It is appropriate for evaluators to identify the types of interventions and services that are indicated for the child and family based on the results of the evaluations. However, the evaluators cannot make any references to a specific early intervention provider. Additionally, the evaluators cannot make recommendations regarding frequency and duration of specific services.
- An evaluation of the transportation needs of the child, which must include the parent's ability or inability to provide transportation; the child's special needs related to transportation; and safety issues and parent concerns about transportation.

## **Initial Referral**

Beautiful Beginnings Child Development Services LLC strives to keep parents involved throughout the entire evaluation process. The Service Coordinator, upon receiving a referral for an evaluation, immediately contacts the family. During the initial contact, the Service Coordinator introduces parents' rights under the EI program, describes the program, reviews the family's concerns, and discusses the evaluation process, including, but not limited to, timelines, types of evaluations, scheduling, team members, and expectations. The Service Coordinator also explains to the parent the importance of obtaining the child's medical records and/or recent physical exam prior to the completion of the evaluations.

## **Assignment of Evaluators**

The Service Coordinator is responsible for assigning the appropriate evaluators to each MDE team. Based on the reason for referral (area of concern), language of the family, medical or other special needs of the child, and/or location of the family, the Service Coordinator assigns two (2) evaluators as the Core team: a specialist who will assess the child's functioning in all 5 domains using informed clinical opinion and age appropriate instruments and a specialist who will evaluate the child in the area of concern.

## **Service Coordination**

Once the Service Coordinator has assigned the evaluators to perform the necessary evaluations, it is her/his responsibility to do the following:

- Follow up with the child's family to ensure that the appointments are scheduled within required timelines.
- Obtain physical examination from the parent and forward it to the evaluator. If requested by the parent, upon obtaining the consent to release or obtain information from a primary physician, the Service Coordinator will contact the primary physician to explain the necessity of obtaining the medical form.
- The Service Coordinator discusses the necessity of having the child's medical records submitted to Beautiful Beginnings Child Development Services LLC with the parent upon the initial phone call.
- The medical records/physical examination records will be reviewed for completeness and accuracy.
- Ensure that, during the evaluation process, the parents are involved.
- Each evaluator will discuss the reasons for the evaluation and address any questions the parents may have regarding the evaluation process and/or the specific testing that is taking place.

- The evaluators will also have a discussion with the parents after the evaluation is completed to address any questions or concerns the parents have regarding the evaluation process, including their child's performance, and the results of the evaluation.
- The parents will have the opportunity to have all of their questions answered in order to ensure complete understanding of the evaluation results and recommendations. Parental input is sought to ascertain that the child's performance during the evaluation was optimal. This statement by the parent will be included in the written reports of the multidisciplinary evaluation summary. If a child is being evaluated in the day care, the parents will be invited to participate in the evaluation at the daycare.
- If the parent is unable to attend, the evaluators will contact the parents after the evaluation has been conducted to review the evaluation results with the parents and discuss the child's performance. After the battery of evaluations has been completed, the evaluator will contact the parents to review the entire evaluation packet and address any questions or concerns the parents may have.
- If delays in the evaluation process occur, it is the responsibility of the Evaluating Agency to obtain and forward to the Service Coordinator, indicating the reason for delay (i.e. child's sickness, vacation, etc.) on or before the 30th day from the child's initial referral to the IFSP.
- Once the MDE process is complete, the file is reviewed to ensure that all necessary documentation regarding the completed MDE is contained in the file.

### **Conducting Evaluations**

Once the evaluators have been assigned, they are responsible for the following:

- Contacting the parents and scheduling an appointment. It is important for the evaluator to introduce him/herself to the parent and explain his/her role in the evaluation process.
- The evaluator should schedule the appointment at a time that is conducive to each party's needs and, most importantly, at an optimal time of day for the child.
- If a time cannot be agreed upon, the evaluator must contact the Service Coordinator immediately so that a new evaluator can be assigned.
- When scheduling the evaluation, the evaluator must arrange with the parent to conduct the evaluation in the child's natural environment (home, day care, etc.).
- The evaluator must obtain written informed parental consent prior to the evaluation and/or screening.
- Conducting the Parent Interview to obtain information regarding the concerns, priorities, and resources of the parents/families.

- Obtaining pertinent background information from the parents/family. With parental consent, the evaluator may review pertinent records related to the child's current health status and medical history as part of the MDE.
- Assessing the child's level of functioning in the child's natural environment by no later than the 14th day after the date of referral.
- Reviewing the child's performance with the family and recommending any other evaluations which may be necessary.
- Communicating with the Service Coordinator regarding the need for any other evaluations.
- Adhering to all parameters of the Evaluation Timeline (below)

### **Evaluation Documentation Requirements**

To ensure that the completed evaluation packet is submitted to WV Birth to Three within the 45-day timeline, all evaluators must submit their written evaluation reports by no later than 14th day after the date of referral. According to WV Birth to Three regulations, the written report and summary must include the following information:

- The names, titles, and qualifications of the evaluators performing the evaluation and assessment.
- A description of the assessment process.
- The child's responses to the procedures and instruments used as part of the evaluation process, and the family's belief about whether the responses were optimal.
- The developmental status of the child in each of the 5 developmental domains, including strengths and needs in each area.
- Documentation of how clinical opinion was used by the evaluation team in evaluating and assessing the child's developmental status and potential eligibility for the Early Intervention Program.
- Measures and scores that were used, if any; and an explanation of these measures and scores.
- A clear statement of the child's eligibility, based on regulatory criteria.
- If the evaluation is conducted bilingually, each evaluation summary must be translated into the family's dominant language.

Additionally, all evaluation reports must be written in parent-friendly language, without technical terms. Evaluation reports can be mailed, hand-delivered, or faxed to the office. Emailing evaluation reports is strictly prohibited. Protecting all records is of paramount importance to our agency. While technology provides us with quicker and easier ways to transmit information, it also allows for a variety of ways in which that information can be transmitted without authorization or regard to the confidential nature of the information. Our commitment to protecting the

confidentiality of our records, therefore, prohibits the use of email to transmit any records or information regarding any child or family that we serve.

## **MDE Summary**

The purpose of the MDE Summary is to provide parents with a concise, written statement which explains their child's strengths and needs and eligibility for the WV Birth to Three Program. One of the core evaluators, who has been assigned by the Service Coordinator, is responsible for completing the summary. It must be written in parent-friendly language, without technical jargon, and translated into the family's preferred language. The core evaluator must complete the MDE Clinical Checklist to ensure that all the critical elements that had been included in the MDE reports are included in the MDE summary.

### **The summary must contain:**

- Description of the assessment process and conditions, the child's responses and the family belief about whether the responses were optimal; how informed clinical opinion was used by the evaluation team in assessing the child's developmental status and the potential eligibility for the EIP.
- A clear statement of the child's eligibility; the child's developmental status in the five developmental domains, including the unique strengths and needs in each area; the child's demographic information (name, age, gender, date of birth) in the MDE and all evaluations; the integration of clinical clues and predictors used to substantiate a significant communication delay; and/or the MDE team did not include at least two qualified personnel, one of whom specialized in the developmental area of concern.
- Once the MDE is complete and the MDE summary has been submitted, the Evaluation Department Director will review the summary and verify that the MDE Clinical Checklist was completed appropriately by the MDE team member.
- The core evaluator also has the responsibility of reviewing the summary and evaluation results with the parents/family prior to the IFSP meeting. The parents/families are also provided with a copy of all evaluation reports and the MDE summary.
- The evaluation summary must be sent to: the parent, the initial service coordinator, foster care worker, and the Early Intervention Official for review before the IFSP meeting. With parental consent, the reports will be sent to the primary health care provider.
- It is the responsibility of the Evaluation Coordinator to ensure that the evaluation packet is mailed to the parent, service coordinator, and, when consented to, the primary health care provider.



- If the EIP review of the MDE results in changes in eligibility determination, the change will be discussed with the family by a member of the evaluation team.

### Evaluation Timeline

To ensure that evaluations are conducted in a timely fashion and MDEs are submitted within 30 days of the date of referral, Beautiful Beginnings Child Development Services LLC adheres to the following timeline:

### Evaluation Timeline

<b>Day in Process</b>	<b>Activity Required</b>	<b>Person Responsible</b>
1-3	Receive referral & Assign to Evaluator	Evaluation Coordinator
4-8	Schedule & Conduct Core Evaluations	Evaluators
8-12	Schedule & Conduct Supplemental Evaluations	Evaluators
13-17	Evaluation Reports Submitted	Evaluators submit reports to the Evaluation Coordinator
17-19	Review Reports and Request Revisions	Evaluation Coordinator
19-21	Receive Revisions, Write Summaries, Compile Packages	Evaluation Coordinator; Core Evaluator
22-23	Packet submitted to & reviewed by Evaluation Director	Evaluation Coordinator submit to Evaluation Director

24-25	Results of evaluations reviewed with parents	Core Evaluator
26-27	Evaluation packet submitted to regional and mailed to parent	Evaluation Coordinator

## **THE ROLE OF THE EVALUATION TEAM AT THE IFSP MEETING**

The principal contact person, a designated member of the evaluation team shall participate in the child's Individualized Family Services Plan (IFSP) meeting along with the parent(s), the Service Coordinator and others requested by the parent(s). The evaluator must be fully familiar with the evaluation reports, results and recommendations. He/she must have conferred with the entire evaluation team and be prepared to help families develop outcomes and oriented strategies for their child's IFSP. Parental permissions must be obtained for attendance by any non-evaluation team representative and WV EI Agency must be so notified.

## **SERVICE DELIVERY STANDARDS**

Based on WV Health and Safety Standards

As providers of Early Intervention services, it is our responsibility to ensure that the physical environments in which we provide services are maintained in a manner that protects the health and safety of the children while they are receiving EI services.

## **COMMUNITY SITES**

It is the provider's responsibility to directly observe and assess all sites that will be used to provide EI services on a regular basis, and where the parent will not be present during service delivery, to ensure that there are no potential hazards to the health and safety of children during the provision of services. During the assessment of the community site, the provider may be accompanied by the parent. If the parent is not able or chooses not to participate, once the assessment has been completed, the provider should discuss the results of the assessment with the parent if the site was deemed inappropriate for the provision of services.

If the parent is or will be present during service delivery, the provider is still responsible for ensuring that the physical environment is maintained in a manner that will ensure the health and safety of children during the provision of services. If a provider chooses to access a different community site, on rare occasions, for the provision of services, the

provider should take a common-sense approach in the judgment of potential health and safety hazards. Such settings might include a park.

### Supervision Guidelines in the Community-based Site

- It is the provider's responsibility to ensure that adequate staffing, procedures, and physical controls ensure that the children are maintained securely within the designated service areas and prevent children from wandering into unsafe areas.
- The provider must always know the location of all EI children in the community setting.
- Daily attendance and sign-out procedures must be utilized.

### **HOME-BASED SITES**

When providing services in a child's home, it remains the provider's responsibility to ensure that the home environment is maintained in a manner that protects the health and safety of the child during the provision of EI services.

#### **Assessing the Home Environment**

Assessing the home environment can be a difficult task. However, the child's safety is of the utmost importance, and any concerns that the provider may have regarding the child's health and safety while in the home environment must be addressed with the appropriate parties. Providers should take note of any unsafe conditions in the home that could pose harm to the child during service delivery and notify the Service Coordinator. Such conditions may include, but are not limited to, peeling or chipped paint, leaking ceilings, hanging electrical wires, open chemicals, and broken windows. If the provider believes that the home environment poses a potential threat to the health and safety of the child, it is the provider's responsibility to either discuss the situation with the family and educate them as to ways to correct the hazardous situation, refer the parent to the Service Coordinator, who can offer educational resources, and/or recommend an alternate service location to the parent. If the provider determines that the home environment poses danger to the child, it is the provider's responsibility to notify the Service Coordinator, the agency and provide parent education. If circumstances warrant, the provider should make a report to the child abuse hotline.

#### **Guidelines for Reporting Abuse, Maltreatment, and Neglect**

Examples of abuse, maltreatment, and neglect, which would require a report to the child abuse

- When a parent or other person legally responsible for care inflicts serious physical injury upon a child or commits a sex offense against a child;
- Situations where a parent or other persons legally responsible knowingly allows someone else to inflict such harm on a child;

- Failure to provide sufficient food, clothing, or shelter;
- Failure to provide proper supervision, guardianship, or care;
- Misusing alcohol or other drugs to the extent that the child is placed in imminent danger.

## **SERVICE PROVISION**

Beautiful Beginnings Child Development Services LLC's goal is to ensure that our clients receive the highest quality services by providing provides home and community EI services that are designed to meet the developmental needs of children, eligible under WV Birth to Three, and the needs of the family, related to enhancing the child's development in accordance with the desired outcomes specified in the Individualized Family Service Plan, "IFSP", (i.e. method, frequency, duration, location, etc.).

These services are selected in collaboration with the parent/guardian in compliance with the DHHR and WV Birth to Three I standards by qualified personnel (i.e. licensed/certified in their respective discipline and demonstrated pediatric experience) under supervision of the respective department supervisors on a twelve (12) months basis, including weekends and holidays.

Beautiful Beginnings Child Development Services LLC receives service referrals for Early Intervention cases from Service Coordinators. These referrals come from several different sources, County Offices, parents, pediatricians, through the REFERRAL Line etc. Therapists have access to new cases by contacting the Staffing Coordinator. The Staffing Coordinator (please refer to the "Organizational Chart" for the name) receives the referrals and is responsible for staffing/matching each case with appropriate therapists.

Beautiful Beginnings Child Development Services LLC providers will have policies and procedures in place to ensure the home/community environment is maintained in a manner that protects the health and safety of children during the provision of EI services. Beautiful Beginnings Child Development Services LLC provides services in the child's home, day care, other natural settings selected by the parent, Beautiful Beginnings Child Development Services LLC clinicians must adhere to the following requirements to ensure appropriate service provision:

### **Case Assignment Procedures:**

When a referral is received, the Staffing Coordinator has a limited amount of time to staff the case. To adhere to the timeline, the following procedures are followed:

- When a Service Coordinator contacts the Staffing Coordinator to request services, the Staffing Coordinator must first complete the Intake Form,

documenting all pertinent information regarding the case, as well as all contact with the service coordinator regarding Beautiful Beginnings Child Development Services LLC ability to staff the case. The Staffing Coordinator will also indicate which therapists were contacted and their response (accept/decline).

- The Staffing Coordinator contacts (via phone, fax or e-mail) several therapists in each of the needed disciplines. Only those therapists who are considered a "match" for the case are contacted (i.e. available in the area the child resides, have expertise in child's delays, fluent in child/family's primary language, if applicable, etc.).
- Each therapist is given pertinent case information. Beautiful Beginnings Child Development Services LLC gives each therapist up to 24 hours to communicate their interest to the Staffing Coordinator.

Please note: Cases are staffed on a first come first serve basis. In the event the referral source requests to expedite the confirmation prior to 24 hours (i.e. during all Initial IFSP, or immediately pre-IFSP), the Staffing Coordinator will accept or reject a case based on the availability of the therapist.

- Once the therapist confirms his/her agreement to accept a case, the Staffing Coordinator will contact the referral source and accept the case. Please note: All cases are tentative until the Staffing Coordinator receives the service authorization forms authorizing Beautiful Beginnings Child Development Services LLC to provide services. There are times when even though the Staffing Coordinator could find the appropriate therapist(s), may not receive the case for various reasons (i.e. IFSP was cancelled, service was not authorized, etc.).
- If none of the therapists responded to accept the case within 24 hours, the Staffing Coordinator will inform the referral source that Beautiful Beginnings Child Development Services LLC cannot fulfill the mandate, and request an extension to continue searching. Therefore, please make every effort to respond as quickly as possible.
- When requesting an extension to continue the search, Beautiful Beginnings Child Development Services also requests that the Service Coordinator continue her own search for a provider. The Staffing Coordinator will update the Service Coordinator at the end of each week until a therapist has been found (by either Beautiful Beginnings Child Development Services LLC or by the SC). Otherwise, Beautiful Beginnings Child Development Services LLC will continue searching until the Service Coordinator informs us otherwise.
- Once the Staffing Coordinator has notified the referral source that Beautiful Beginnings Child Development Services LLC is accepting the case, the therapists are required to hold a "spot" for the accepted case until further notice (i.e. the case is authorized for Beautiful Beginnings Child Development Services LLC and the agency has received all the documentation).

- When a request for ABA services is received, the Staffing Coordinator will first contact the ABA Supervisor to ascertain if both a lead teacher and teacher are available to service the child. On approval by the ABA Supervisor, the Staffing Coordinator will then offer the case to the appropriate teachers.
- Once the case has been accepted by the ABA lead teacher and teacher, the Staffing Coordinator notifies the ABA Supervisor that Beautiful Beginnings Child Development Services LLC has agreed to provide ABA service to a child. The Staffing Coordinator further informs the ABA Supervisor that, once the IFSP takes place and the services are approved, Staffing Coordinator will provide ABA Supervisor with pertinent case history so that ABA Supervisor can develop an appropriate behavioral plan.

### **Assignment and Planning of ABA Cases:**

When accepting a case for ABA services, Beautiful Beginnings Child Development Services LLC is fully aware of its responsibility to assist the family in understanding ABA therapy and the role of the ABA Supervisor and to help the family to become and remain involved in their child's services. Beautiful Beginnings Child Development Services LLC understands its responsibility to assign an ABA Supervisor, lead teacher, and teacher to the case to ensure proper oversight. Once a case is accepted and authorized for services:

- The ABA Supervisor assigned to the case receives all pertinent background information for the child including, but not limited to, IFSP, evaluations, and information regarding any prior services received.
- The ABA supervisor contacts the family to discuss the child's services, explaining the supervisor's role, the lead teacher's role, and the teacher's role. The ABA Supervisor will also explain the role of any other therapists involved. The supervisor explains to the parents the importance of their involvement and ensures them that they will be taught the techniques necessary to carry over the work the therapists are doing with their child.
- The ABA supervisor will ensure the assignment of the appropriate lead teacher and teacher based on the child's language, culture, special needs, etc.
- The ABA teacher will develop a written behavioral program for the child. With the use of Discrete Trial Instruction and anecdotal notations, each child will receive comprehensive therapeutic delivery of Applied Behavioral Analysis learning techniques to address and remediate delays and deficiencies in each of the functional domains, cognitive, self-help, gross motor, fine motor, expressive language, and receptive comprehension skills.
- A portfolio will be created streamlining preliminary programs to maintain and collect accurate data that will monitor and gauge learning patterns and address developmental delays to effect change and reduce symptoms of ASD. Each

child's performance portfolio will be reviewed and monitored monthly to adjust program step delivery according to the rate of skill acquisition of new material.

### **Receipt of the Approved Case/Initial Contact with Family**

When accepting an assignment, the qualified clinician will receive all pertinent information related to the child from the Staffing Coordinator. Upon receipt of the authorization, Staffing Coordinator contacts each therapist by phone, confirms availability and officially assigns the case. Each Service Provider is given the following information upon initial verification of accepting the case:

- Child's name
- Parent/guardian's name and phone numbers
- Service address
- IFSP mandate

Once the therapist accepts the case, he/she contacts the family immediately to confirm to an ongoing schedule. The therapist must notify the Staffing Coordinator no later than 12:00pm the following day that a schedule has been coordinated with the family.

The Case Manager (please refer to the "Organization Chart" for the name of person responsible) creates an individual folder for each new case and mails (or e-mails; faxes as per therapist's preference) an Assignment of Services Form, along with a package, which contains the child's information, as well as:

- The list and information of the other Beautiful Beginnings Child Development Services therapists servicing the child.
- Child's most recent IFSP, including Authorization Worksheet, and family desired outcomes; etc. Therapists must review the IFSP to ensure proper delivery of services and understand the outcomes that have been designated for the child.
- Evaluation(s)
- Prescription from the Physician for the provision of PT, OT, and Feeding therapy; and if applicable.
- All available Progress Reports.
- Pre-Printed Record of Services Attendance Sheet (i.e. Session Note Form) indicating the due dates for upcoming Progress Reports.  
If the therapist has not received the appropriate paperwork within 3 days of confirming the acceptance of a case, the therapist must notify Beautiful Beginnings Case Manager immediately.
- The Assignment of Services Form must be signed, dated with the first service provision date after the first session is conducted, and returned to the Case Manager in a timely manner and in accordance with IFSP start date, but no later than 10 days from the approved start date. Receipt of this form officially confirms

the assignment. This Assignment of Services Form will be placed in a child's file/record. If this form is not returned, you will not be paid for your services until the form is submitted. Case Manager then notifies the Site Coordinator in writing with the date the therapy was initiated.

The therapists are required to inform the Staffing Coordinator if any difficulties are encountered in contacting the family (i.e. leaving messages and getting no response; child is not in day care upon therapist's arrival; phone is disconnected, etc.). If services are not initiated within 10 days from the authorized start day, the "Explanation for Delay in Start/Interruption Form" must be submitted via fax to the Staffing Coordinator, who will notify the Service Coordinator in writing of the reason for delay in starting therapy provision by faxing the "Notification of Delay in Start of Services Form" by the 14th day from the authorized start date. All attempts to contact family must be documented in the Explanation for Delay in Start/Interruption Form.

If the therapist has not initiated services by the 7th day from the authorized start date, the therapist must inform the Staffing Coordinator.

- If the Staffing Coordinator is not notified by the therapist with an acceptable reason for the delay in writing via submitted "Explanation for Delay in Start/Interruption Form" form, the Staffing Coordinator will then notify the Program Director or Director of Quality Assurance.

- The Program Director or Director of Quality Assurance contacts the therapist to discuss the situation.
- If the Program Director or Director of Quality Assurance determines that there was no acceptable reason for the delay (according to WV EIP guidelines), the therapist is issued a warning and a letter is placed in the therapist's permanent file. Additionally, the therapist is placed back on probation for a period of 3 months. This probation period will be supervised by the Program Director, Quality Assurance Director and respective supervisor.
- If the therapist is unable to complete the probation period without a second warning, the Program Director may extend the probation period or terminate the therapist's employment.

### **Scheduling of Appointments**

It is each therapist's responsibility to set up an ongoing therapy schedule with the child's parent/caregiver. Each therapist should remember that sessions should be scheduled with the child's best interest at heart (i.e. adjusted to child's routine).

When scheduling, each therapist must:



- Collaborate with the parent in determining an appropriate schedule. The therapist's availability, the parent's schedule, and the child's schedule must all be taken into consideration. If a time convenient for all parties cannot be agreed upon, the therapist must inform the Staffing Coordinator immediately, no later than 24 hours after the receipt of the assignment.
- Give the parent a regular therapy schedule. This means that each therapist must set up specific days and times for therapy. Under no circumstances is a therapist permitted to change scheduled appointments each week. Children must have consistency. If a therapist does not give a parent a consistent schedule, that therapist will be asked to give up the case.
- Be aware of the other therapists' schedules. Unless a Waiver is given, under no other circumstances is a child to receive more than 3 therapy sessions on the same day. The therapist must check with the other therapists on the case and the parent to ensure that the child has not received more than 3 therapy sessions.
- If a child has received more than 3 services on any given day, the therapist providing the 4<sup>th</sup> session of the day will not be paid, as per WV Birth to Three rules and regulations. Service provision of TSHH and SI services are not allowed on the same day (if a waiver is issued to allow more than three types of therapy per day or more than one type of the same therapy per day, the Case Manager will notify you at the time you accept the case).
- Be considerate of the family and child's daily routine/schedule by notifying them at least 2 hours in advance of any cancellations.

### **Service Delivery: Home and Community**

Beautiful Beginnings Child Development Services LLC providers will protect the general health, safety, and welfare of children with respect to the direct supervision of and interaction with children while receiving EI services. Once a therapist is assigned to a case, it is his/her responsibility to provide appropriate services to the child. Regarding performing services, each therapist must:

- Perform services as specified in the child's IFSP. A therapist must provide therapy in accordance with the child's mandate. Under no circumstances is the therapist to change the frequency and/or duration of the mandated service (i.e. increase, decrease, termination, etc.).
- Provide therapy for the full time allotted. Shortening therapy sessions is not permitted.
- Permit and invite parents to sit in on therapy sessions. Parents have the right and should be encouraged to engage in therapy with their child. However, use your

judgment. If a child's performance/progress will be hindered due the parent's participation, explain your concerns to the parent after the session and ask the parents to, if not participate, then to observe the therapy.

- Inform parents of the child's performance/progress after each session and provide with carryover activities (i.e. homework, related to the activities performed during the session). Parents have the right to know about their child's progress and should be explained that without carrying over your techniques and activities into the child's everyday routine child will not make any progress. Include the recommendations and the suggested carry over activities in the "parent carry over" part of each session note.
- Keep an accurate record of attendance and absence of each eligible child in conformity with the IFSP. Remember the attendance records/session notes are kept in the eligible child's individual case file and are available to be inspected by parents as well as other authorized personnel (please refer to the procedure for accessing records to the "Confidentiality" section).
- Providers will be required to observe all community-based sites that they identify as the desired setting for EI service delivery on a regular basis, to ensure there are no potential hazards to the health and safety of children during the provision of services.
- Providers must have procedures in place to report to the parent, and SC/ISC any concerns the provider has with such setting, and if necessary, discuss an alternate location for services.

If a therapist feels that the child needs a change in the frequency and/or duration of a particular service, the therapist must:

- Inform the Service Coordinator and submit the "Change in Services, Method/Location" Form to the Staffing Coordinator.
- The Staffing Coordinator will forward this request to amend IFSP to Service Coordinator who will forward it for a review/approval. The therapist is expected to continue providing services as per assignment/IFSP authorization until such recommended change/amended IFSP will go into effect.
- Upon receipt of the amended IFSP, the Case Manager will mail the therapist a new "Assignment of Services" along with all pertinent information. Original records are required to be submitted to Beautiful Beginnings Child Development Services LLC twice a month. It is of the utmost importance that any attendance issues, both child and therapist, be documented and addressed. The following procedures must be followed to ensure appropriate documentation and handling of absences:
- Therapists are required to inform the Case Manager if a child has missed 3 or more sessions in a row in writing within 48 hours from the 3rd missed session via submitting the "Reason for Interruption" Form. If the missed sessions are due to

the therapist's absence, the Case Manager informs the Program Director and Quality Assurance and Improvement Unit.

- Therapists are required to notify Beautiful Beginnings Child Development Services LLC Case Manager of any scheduled absences (vacations, etc.) at least 5 days prior to the absence so that the family and service coordinator can be notified via submitting "5-Day Notification of Upcoming Interruption of Services" Form. The therapist is required to indicate the period of interruption, including the dates of absences and the date the service is scheduled to resume, as well as the reason for the interruption. If the services are not resumed on the date indicated on the form, the therapist is required to notify the Case Manager and submit follow-up "5-Day Notification of Upcoming Interruption of Services" form, indicating the new date for resumption of services.
- The Program Director and/or Director of Quality Assurance Unit contact the therapist to discuss the situation.
- If the Program Director determines that there was no acceptable reason for the absences, the therapist is issued a warning and a letter is placed in the therapist's permanent file.

Additionally, the therapist is placed on probation for a period of 3 months. This probation period will be supervised by the Program Director. If the therapist is unable to complete the probation period without incident, the Program Director may extend the probation period or terminate the therapist.

### **Implementation of the IFSP Using Team Approach**

Individualized Family Service Plan ("IFSP") is a written plan for providing Early Intervention Services to an eligible child and family. The IFSP is developed jointly by the parents, the SC, OSC, the evaluation site representative, at least one service provider (currently servicing the child), and any other persons such as the child's primary health provider, whom parents/caregiver may invite.

The purpose of the Six Month and Annual IFSPs is:

- To determine the degree to which the progress towards achieving IFSP desired outcomes is being made.
- To decide whether there is a need to modify or revise the services being provided or to change the outcomes.
- To reassess what is the natural environment for service provision.

It is the goal of Beautiful Beginnings Child Development Services LLC to fulfill all mandated services as specified on the child's IFSP. In our efforts to ensure that services are provided in accordance with a child's IFSP, Beautiful Beginnings Child Development Services LLC staff works collaboratively to monitor all services provided by our therapists. Beautiful Beginnings Child Development

Services LLC provides continuous monitoring of service delivery that includes, but is not limited to the following:

- Case Manager conducts monthly "parent surveys" via phone calls to randomly chosen families to assure parental satisfaction with service delivery and compliance with Beautiful Beginnings Child Development Services LLC' rules and regulations. Anonymous parent surveys will be placed in the therapist's personnel file.
- Case Manager mails the families a Parental Survey every three month from the day the therapy was authorized for Beautiful Beginnings Child Development Services LLC. The returned surveys are placed in the child's individual file after the review of such survey by a Clinical Director.
- If the phone survey or written survey reveals a significant issue with a therapist's provision of services, the Case Manager immediately notifies the Director of Quality Assurance and the Program Director, who will then contact the therapist to address the parent's complaints. Based on the review of the issues, including the parent's opinion, the Program Director and the Director of Quality Assurance will determine the appropriate course of action, which may include the therapist's removal from the case, verbal warning, or written warning.
- The Director of QA audits providers' paperwork (such as "Session Notes", "Justifications for Change in Services/ Additional Evaluation") to assure appropriateness of recommendations, quality of content, ongoing assessment of progress, and cohesiveness with child's IFSP. The Case Manager completes a QA Checklist for Service Provision, which will play an important role during a clinician's Annual Performance Review.
- The Supervisor of the Billing Department generates a report monthly from the billing software to identify interruptions in services of two weeks or more to comply with WB BTT regulations. If unexplained interruptions in service provision are identified the Supervisor of Billing Department notifies the Case Manager, who contacts the provider to request the explanation of interruption in writing. The contact is indicated in the customer notes of each individual child's file.

## **IFSP ATTENDANCE**

It is Beautiful Beginnings Child Development Services LLC's policy to request the in-person presence of at least one current therapist to attend the Six Months and Annual Reviews/IFSPs. The following are the steps the agency takes to assure the participation of the current therapist during the 6/12 Months Reviews:

- On the 1<sup>st</sup> of each month, the Case Manager produces a report of upcoming Six and Annual Reviews during this month and forwards the report to the Program Director

- Case Manager contacts the Service Coordinator via phone to inquire of the date, time and location of the meeting after assuring that the progress reports were submitted to the Service Coordinator in a timely manner.
- Upon learning of the scheduled day and time of the IFSP, the Case Manager contacts the current therapists and locates at least one current therapist available to attend a meeting and then notifies the Service Coordinator of the name and title of the therapist.
- In rare circumstances, participation via phone is allowed with the approval of the Program or Clinical Director. In such instances, the Case Manager will notify the Service Coordinator in writing of such phone conference and provide therapist's contact information.
- The therapist is required to contact Beautiful Beginnings Child Development Services LLC Case Manager in the event you are contacted by child's Service Coordinator requesting to attend the Annual IFSP.

### **Team Approach to Service Provision**

Professionals delivering of IFSP services through Beautiful Beginnings Child Development Services LLC are strongly encouraged to utilize a multidisciplinary and family centered approach to communicate with each other on a regular basis.

- The Case Manager, when forwarding the case to you, will include the disciplines and therapists involved in the case contact phone number (as per therapists' prior approval) in "Assignment for Services".
- In addition, to fulfill the goal of multidisciplinary approach in service provision, telephone conferences are to be scheduled at least three weeks prior to the six months and/or annual IFSPs. These telephone conferences are to be conducted by Case Manager to discuss child's progress towards the desired outcomes, recommendations for the next six months, as well as the child's additional needs and family's concerns.
- If therapists from other agencies are involved in the child's case, Case Manager will attempt to acquire the names and phone numbers of those therapists from the Service Coordinator. If Beautiful Beginnings Child Development Services LLC can acquire such information, it is your responsibility as a therapist to contact the 'outside" providers/therapists to discuss the child s case including therapy plans progress to date, carry-over techniques, and any other pertinent information.
- If Beautiful Beginnings Child Development Services LLC is unable to acquire names and phone numbers of outside therapists from their respective agencies the therapist must make an attempt to secure the information from the parent, or via communication notebook. Additionally, the parent survey has a section where parents can provide that information to Beautiful Beginnings Child Development

Services LLC. Any information received by a Case Manager will be forwarded to the necessary therapists.

- Regarding ABA services: ABA supervisors will convene 2 team meetings per month with all qualified personnel who deliver services to the child for: reviewing the child's progress; identifying problems or concerns; and modifying intervention strategies as necessary to enhance the child's development, behavior, and functioning.

### **Documentation Requirements/Record Detention**

In fulfilling mandated services each service provider will be required to maintain documentation of each visit. Please note: all paperwork must adhere to the following guidelines as the proper completion of these forms is a Medicaid requirement and necessary for reimbursement. Any forms that are not filled out completely and correctly will be returned to the therapist before they can be billed. The following documentation must be completed and submitted by therapists to Beautiful Beginnings Child Development Services LLC.

- **Record of Services Attendance Sheet (i.e. Daily Session Notes)** must be completed, dated by therapist and signed by both caregiver and therapist after each session via Fax and/or email.

Daily Session Notes that are sent along with the "Assignment of services", include:

- Certification statement, child's name
- Child's local EI ID Number
- IFSP type
- Date and time of service, indicating "pm" or "am"
- ICD-10 Code
- CPT Code (must be consistent with time spent with child)
- Full therapist's name, discipline, and credentials (i.e. SI, MS. Sp. Ed.)
- IFSP Outcomes Addressed
- Minimum of 3 activities and responses to each activity in measurable terms
- Activities with parent/caregiver during session
- Family Plan/Calendar activity for the next session
- Parent/caregiver's and therapist's signatures (if service is provided at the daycare care center or other setting selected by the parent, the title of a person signing for the caregiver is asked to be written next to the caregiver's signature).

**Progress Reports/Justifications to Amend IFSP** Beautiful Beginnings Child Development Services LLC service providers are required to submit Three, Six, Nine and Annual Progress reports designed by WV BTT in a timely fashion in preparation for

IFSP meetings, as well as other pertinent documentation (i.e. justification letters, change in frequency/location, etc.) as per WV BTT requirements.

- The Three, Six, Nine and Annual Progress Reports must be submitted according to the due dates indicated on the Assignment of Services. For the most part, the Clinical Director Assistant will forward via e-mail, mail or fax Respective Progress Report for your convenience two weeks prior to the In-House due dates stated on therapists "Assignment of Services" and "Session Note" forms.
- The 3 & 9 months Progress Reports In-House Due date- 2 weeks prior to its actual date, and 6 Months & Annual Progress Reports-In-House Due date-8 weeks prior to its actual IFSP due date.
- In case of any amendments to the IFSP, Request for A Change in Frequency, Method or Location of Service form must be completed and submitted to Beautiful Beginnings. It is recommended to submit such a request along with 3/6/9/12 Progress reports.
- If you suspect delays in domain(s) other than the one currently addressed, please submit a Justification for Additional Evaluations form.

### **Please note that there are different types of Justification Letters**

There are different types of justification letters that a service provider may be called upon to write. The content of these letters and the strength of the clinically based arguments used will determine whether the RAU approves or denies the request.

### **Justification for Additional Evaluation**

Based upon the providers' sessions how exactly are the child's deficits in the yet unevaluated area affecting the provider's work with the child. Low tone will impact play or feeding for the teacher or speech pathologist, attention or cognitive deficits will affect a child's ability to follow directions for the occupational or physical therapist. Always state what service is being provided, how long that service has been provided and that it is being provided as authorized. Include a statement as to whether the child has ever had an evaluation in that area and if so what were the results. If the child has a medical diagnosis, make sure to include that as it may have an impact or increase the probability of a delay in that area. This should be done in a narrative form and typewritten. It should:

1. State what service you are providing and for how long you have been providing it. State that you are providing the service as authorized.
2. State whether the child ever had an evaluation in this area, and if so, what the results were.
3. State why you are requesting this evaluation and how the child's deficit in this area is affecting your sessions, for example: a deficit in cognition or attention

span will impact a child's ability to focus on tasks presented by OT/PT. Sensory issues will impact a teacher's ability to touch a child or work with certain materials. Tone or postural instability will impact play and ability to manipulate objects.

4. If there is a medical diagnosis, please be sure to include it in your documentation.

### **Justification for Increase in Frequency or Length of Service**

At the time of the IFSP meeting, the EI Coordinator felt strongly that the frequency and duration of the sessions were appropriate. To change that, the provider must prove otherwise by clearly documenting why, the current outcomes cannot be met with this frequency/duration, how the additional time would be used and what other developmentally appropriate activities the child should be engaged in. If the child has a medical diagnosis, make sure to include that as it may have an impact or increase the probability of a delay in that area. The *Request for a Change in Frequency, Intensity or Method of Services form* must be completed and signed. See attached form and instructions. This report must be typewritten.

### **Justification for Transfer from Home Based Program to Center-Based Program**

The EI Coordinator will approve the request only if it is based on a cognitive delay that the current home based program is not able to address. Be very specific about it.

### **Justification for Assistive Technology**

Please submit the Assistive Technology forms and send all your requests to the Director by mail or by fax.

### **Documentation**

The content of your Records of Services, Progress Reports, Justification Letters and Request for a Change in Frequency, Method or Location of Service is very important. The Case Manager requests the required report/document 2 weeks prior to the in-house due date and submits to the Director of QA for the review. The Director of QA may return progress notes to you if they are incomplete, need to be revised, and are not in accordance with the WV EI rules and regulations. To avoid the return of your paperwork, please note the following:

All progress and session notes must be printed legibly in black ink. Your signature is required on the progress note. Do not forget to print your name, then sign with full credentials (i.e. indicating last degree earned: MS. ED, TSHH; MA, CCC-SLP, etc.)



If you make an error, cross it out with black ink using one line (use of white-out is prohibited, and is considered non-billable). Initial the cross-out, re-write the correct information near the error and initial the change. Do not use white out. If there are any cross-outs, the QA Department will call the parent to verify that the session took place. Cross-outs will be carefully reviewed and verified by QAPs w/parents before they are processed for billing.

Notes must be comprehensive and legible. Each note must contain the child's name, date of birth, EI Number, location of service, interventionist's name, discipline, "IFSP Outcomes Addressed", "Progress by Child/Family", "Activities During Session/Child/Family Response", "Activity with Parent/Caregiver", "Family Plan/Calendar Activity", CPT Code for licensed therapists, and ICD-10 Codes. Under no circumstances is a therapist permitted to write "N/A" or "Same as Above" or "See Above" on any part of a session note.

Parent/Caregiver must read and sign the session note immediately following the provision of the service. The therapist must never ask a parent to sign notes other than immediately following a session. It is against Beautiful Beginnings Child Development Services LLC policy to have a parent sign several notes at one time after sessions have been conducted or prior to conducting sessions. Any therapist who asks a parent to sign a blank session note or session notes prior to conducting the therapy session will be terminated immediately.

Outcomes must be objective and correspond with the IFSP Outcomes, and written in functional terms with target time frames. To promote family centeredness, each session note must include the parent activities related to the activities above and state who was present during the therapy provision if not a legal guardian.

Absences must be recorded. Indicate the Session #, counting from the beginning of current IFSP, and whether this is a make-up session. If the session was cancelled indicate "canceled by parent" or "canceled by therapist". In the event, there is an interruption in service (i.e. three or more consecutive sessions missed), it must be documented on the "Session Note" Form. An "Explanation of Interruption/Delay" Form must be submitted along with such "canceled" session notes.

The Record of Services/Session Note must be signed by the parent/caregiver and the therapist at the end of each session.

### **Documentation of Absences/Gaps in Services/Other Difficulties**

Gaps/Interruptions may occur for a variety of reasons, including illness of a child, illness of therapist, family vacation, therapist's vacation, difficulty in scheduling, contacting family, etc. Service providers/therapists are required by WV BTT to notify Beautiful

Beginnings Child Development Services LLC if the child has missed more than three (3) consecutive sessions and are asked to submit via fax an internal Reason/Explanation for Interruptions of Services within 24 hours from the 3<sup>rd</sup> consecutive missed session, and the original no later than the next billing cycle. The Case Manager then notifies Site Coordinator in writing of such interruption within 48 hours from the 3<sup>rd</sup> consecutive missed session.

- When a child has missed a session, it is the therapist's responsibility to document the missed session on the session note. If the therapist must cancel a session, it is the therapist's responsibility to document the cancelled session on the session note. Additionally, it is the therapist's responsibility to attempt to make-up the missed sessions, if deemed educationally appropriate, within 2 weeks (14 days) of the missed session.

- It is the therapist's responsibility to keep Beautiful Beginnings Child Development Services LLC informed of a child's absences. If a child's absences become more frequent, Beautiful Beginnings Child Development Services LLC will notify the service coordinator to assist the family in keeping services consistent. Additionally, if necessary, Beautiful Beginnings Child Development Services LLC may contact the family to discuss their satisfaction with the therapist and assess whether any changes are necessary.
- Notes must be filled out in their entirety. Do not leave any part of the note blank. Incomplete notes will be returned to the therapist.
- In the event the therapist is requesting a vacation/leave of absence, a written request within two weeks prior to vacation is required. The request must include the dates the therapist intends to be absent and whether the parents of the children on his/her caseload were notified. The "Reason for Interruption Form" must be submitted for each child on the case load, indicating if the parents agreed to make up sessions upon the therapist's return or requested a replacement. This form will be forwarded to the child's OSC and then placed in the child's individual file.
- Provider will notify the child's parent and Service Coordinator at least 5 days before any scheduled absence (i.e. vacation, professional conference, planned medical leave, observance of religious holidays) using our notification form, attached, and create a plan to make up missed sessions when possible.
- During family vacations, provider must document such occurrence/s in the session notes. For visit cancellations, provider will make reasonable efforts to notify the child's parent/caregiver prior to the scheduled visit and/or within one hour prior to the time on which service is to be delivered, of any temporary inability to deliver such service due to circumstances such as illness, emergencies, hazardous weather, car trouble or other circumstances which impede the provider's ability to deliver service.

- If circumstances prevent such notification prior to a visit, notification should be provided as soon as possible following the missed visit.
- When running late, the provider will call the child's parent/caregiver if the provider will be more than 15 minutes late for a scheduled session, due to uncontrollable circumstances. Parents have a right to choose a new provider if the provider's absence exceeds 2 weeks or they can opt to wait for the return of the current provider. However, a child cannot go for a period of more than 3 weeks without services. At that time, the provider must be replaced.

### **Make-Up Sessions**

Make-Up sessions are permitted under WV BTT, if these make-up sessions are not medically or therapeutically contradicted, and if scheduling of the make-up session does not exceed any WV DHHR billing rules for a day (refer to "Billing Rules and Requirements" Section). As per revised by, DHHR, WV BTT rules and regulations, these make ups are only allowed within 2 weeks from missed session. Please see DHHR, WV BTT "Policy and Procedures" to best serve children, Beautiful Beginnings Child Development Services LLC follows these guidelines attempting to make-up missed sessions:

- Make-up sessions must be conducted within 2 weeks (14 days) of the missed session.
- Make-up sessions are encouraged but are not mandatory.
- Make- up sessions cannot exceed the total authorized units on the child's IFSP.
- Make-up sessions may be conducted only after sessions are missed. A therapist cannot make-up sessions in anticipation of missing sessions.
- Make-up sessions must be documented as such on both billing timesheets and session notes.
- Make-up sessions cannot be conducted on the same day as a regularly scheduled session of the same service type or discipline.
- Make-up sessions cannot violate the billing regulations (i.e. cannot be the 4th session of the day, cannot be past 14 days of the missed session, and cannot be contraindicated) A session cannot be made longer to make- up for missed sessions. For example, if speech therapy is approved for a half-hour, it cannot be made-up as an hour session.
- Parents will be provided a written copy of the IFSP make-up policy.

### **Terminating Services/Dropping the Case**

Any therapist who is seeking to either "drop" a case or terminate a child's services must immediately inform the Case Manager. The following procedures must be followed:

1. If the therapist is seeking to drop the case, or in the event the therapist is no longer available, the therapist must give Beautiful Beginnings Child Development Services LLC 30 days' notice and is responsible for providing services for 30 days after the date of such notice.

2. When the Case Manager has been notified, he/she will inquire from the Staffing Coordinator if Beautiful Beginnings Child Development Services LLC has another available and suitable therapist. The Staffing Coordinator is responsible for locating another therapist within 24 hours and providing the Case Manager with the response. The Case Manager will keep the service coordinator abreast of the situation to ensure continuity of services.
3. The Case Manager contacts the Service Coordinator within 48 hours of the therapist's notice of dropping the case, and inquiries about the parent/caregiver's decision for a replacement therapist and whether the OSC has located a therapist from another EI Provider, as per parent/caregiver's preference.
4. If Service Coordinator notifies that parent/caregiver accepts the replacement therapist, the Case Manager forwards the request to send an "Assignment of Services" to the General Manager. If another therapist cannot be found, the Staffing Coordinator will give the Service Coordinator 48 hours' notice via phone call and written letter.
5. If a therapist is unable to give 30 days' notice due to either a medical or family emergency, the therapist is required to call the Case Manager immediately. The Case Manager will then request the Staffing Coordinator to attempt to find a replacement for the therapist within 24 hours. If the Case Manager is unable to replace the therapist, the Case Manager will immediately notify the child's parents/caregiver and Service Coordinator of the situation. The Case Manager will continue to look for a replacement therapist unless the Service Coordinator advises her to discontinue the search.
6. If the therapist is seeking to terminate a child's services because the child's delays have resolved and the skills in the respective domain are age-appropriate, the therapist must adhere to the following procedures:
  - The decision must be discussed and explained to parents.
  - The Case Manager must be notified immediately.
  - The therapist must submit to the Case Manager a justification letter for termination of services, "Change in Services/Location/Method Form", indicating whether the parents agreed with therapist's opinion, and stating the effective date for termination
  - The Case Manager will forward the above form, upon approval of the Director of QA, to the child's Service Coordinator.
  - The therapist must continue to service the child until the effective date specified in the above form.

### **Provision of Services in Languages Other than English**

Beautiful Beginnings Child Development Services LLC can provide services in languages other than English. If the IFSP mandates bilingual services, it is our policy to provide a therapist who is fluent in the mandated language. If Beautiful Beginnings

Child Development Services LLC does not have a therapist available who is fluent in the mandated language, they will not accept the case. If a family whose dominant language is one other than English and the parent chooses to have services provided in English, due to a general shortage/lack of therapists fluent in that language, Beautiful Beginnings Child Development Services LLC will staff the case with competent therapists and have a translator/interpreter available to communicate with the parent on a regular basis (upon receiving a written consent to communicate with such person). Parents will be able to call the translator/interpreter to discuss their child's case or ask any questions they may have. It is the therapist's responsibility to keep the translator informed regarding the child's case, so that the translator can effectively communicate with the family. If the parties involved find that the situation is not conducive to helping the child, the Case Manager will notify the Service Coordinator to locate another therapist through a different provider and ask that the service is terminated from Beautiful Beginnings Child Development Services LLC.

### **Parent Participation**

Beautiful Beginnings Child Development Services LLC is committed to keeping parents involved in their child's therapy and in our Quality Improvement Process. To help us attain our goals:

- Parents are provided with all the necessary information to contact us in our Welcome Letter.
- The parent is also sent an information packet which contains information regarding support groups, child care agencies, and other important numbers.
- Service coordinators and therapists all discuss with parents the "Embedded Coaching" approach. They educate parents on ways to help their children learn and impress upon them how important their involvement in therapy is. The therapists work with the parents during the child's routine activities to assist the parents and to help the child learn in new ways.
- Additionally, if parents offer a suggestion or comment, they are contacted as well. All surveys are placed in the child's file and are incorporated into the therapists' Annual Performance Review.
- Case Manager monthly calls the parents at random to discuss their child's services.

### **Role of Parents**

Beautiful Beginnings Child Development Services LLC believes that the key to success is parental involvement, not only in the Early Intervention process, but in the therapeutic situation as well. We believe that each parent's opinion should be heard to help us to provide the highest quality services to their children. All questions, comments, concerns, and suggestions made by parents are reviewed and addressed

in a timely fashion. Beautiful Beginnings Child Development Services LLC considers these offerings and makes every attempt to incorporate them into our quality improvement process.

For parents/families of children w/ASD receiving ABA services, it is of the utmost importance that the parents/families remain involved and have a clear understanding of the program. For this reason, it is incumbent upon the ABA Supervisor to assist the families in understanding the meaning of ABA versus other methods, working with the teachers to develop an appropriate plan for their child, carrying over activities and exercises that the teachers assign the families, and continually helping the families to express their concerns regarding the program or any of the therapies their child is receiving.

### **Supervision of Service Provision**

To maintain and ensure the highest quality services, as well as adhere to all State regulations, Beautiful Beginnings Child Development Services LLC has implemented a supervision timeline for the provision of services. The supervision includes, but is not limited to, trainings, review of session notes, parent satisfaction, team meetings, and performance reviews, all on a regular basis.

As per Beautiful Beginnings Child Development Services LLC policy and procedures with regards to the execution of ABA therapeutic services all staff, employees, independent contractors will be held to the highest standards in the delivery of services, ongoing professional development, supervised collaborative team meetings, and parental/ caregiver follow-through assistance trainings.

The standing commitment for excellence will be the benchmark upon which children and their families will be provided with a strong educationally therapeutic baseline foundation upon which the child will grow. Our ABA program portfolios are 'living' documents that will grow along with the child's functional advancement. Below is the timeline adhered to by Beautiful Beginnings Child Development Services LLC:

### **Provision of Supervision Services**

<b>Description</b>	<b>Time</b>	<b>Supervisor</b>
Review of Session Notes, & Progress Reports	Bi-weekly	Case Manager & Quality Assurance Professionals

Review of Interruptions in Services	Monthly	Case Manager
Training of Assessment Tools	Upon hiring & In-services	Quality Assurance
Timely Submission of Paperwork	Bi-weekly	Case Manager
Participation in 6 months & Annual Reviews	Monthly	Case Manager
Parent Satisfaction	Monthly	Quality Assurance
Mandatory Quarterly In-Service-Prof. Development	Quarterly	Program Director & Quality Assurance
Team Meetings	Monthly	Department Supervisors
Implementation of IFSP	Monthly	Case Manager
Quality Improvement	Monthly	Program Director, Quality Assurance & Department Supervisors
Quality Assurance Checklist	Monthly	Quality Assurance Professional & Billing Director

Performance Review	Upon Completing Probation (3 months) & Annually	Program and Clinical Directors, Quality Assurance & QAI Committee
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## **Billing Requirements and Procedures for Service Providers**

Beautiful Beginnings Child Development Services LLC has instituted billing procedures that ensure adherence to V rules/regulations. Therefore, session notes are to be submitted with billing (invoices) with supporting documents (i.e. original session notes and reason for interruption in services) to Beautiful Beginnings Child Development Services LLC on the 3<sup>rd</sup> and 16<sup>th</sup> of every month and payments will be issued on the last date of every month. Please note that any billing submitted after the due dates will be processed and paid in the next billing cycle. Session notes should be sent to Beautiful Beginnings Child Development Services LLC. Submission on the 16<sup>th</sup> day includes services for the first half of the month while services for the second half are due on the 3<sup>rd</sup> day of the following month. Independent Contractors and employees will not be paid for any notes that are three months late. Further, Independent Contractors and employees shall not be paid for any visits made without appropriate service authorization.

For contracted therapists (1099), you have an option of either keeping your original timesheets and submitting copies or submitting your originals to be kept on file with Beautiful Beginnings Child Development Services LLC. If you choose to keep your originals, you must first submit the originals, so that they can be copied and verified. We will then return your original paperwork to you once all billing has been processed. If you choose to submit your originals for Beautiful Beginnings Child Development Services LLC to keep on file, you will continue to submit your paperwork as usual. In the event you need your originals, you must submit a written request to Beautiful Beginnings Child Development Services LLC, via invoice, giving 10 days advance notice. We will ensure that your originals are available to you 10 days from the date of your request. If whenever Beautiful Beginnings Child Development Services LLC has learned or knows that it has received payments for which it was not entitled to receive, the payments will be refunded to the WV BTT as soon.

## **Policy on Late Billing**

One of the problems inherent in a home-based agency is the issue of late billing. While therapists may believe that the only consequence of late billing is a delay in their paychecks, the ramifications go much further. Late billing results in delayed payment or non-payment from the WV BTT, as well as threatening our compliance with State Regulations. To minimize late billing, the following rules have been put into place:



- All billing, including original "Daily Session Notes", must be submitted on or before 5 p.m. on the 1<sup>st</sup> and 15<sup>th</sup> of each following month.
- Computer generated or typed daily progress notes will not be accepted and accordingly will not be reimbursed by the Agency.
- Any incomplete billing will be returned to the therapist, and may result in a delay of payment.
- Any billing submitted after the 1<sup>st</sup> or 15<sup>th</sup> of the month will not be paid until the following pay period.
- Any billing submitted more than 30 days from the date of service will not be accepted.

### **Billing Forms**

Beautiful Beginnings Child Development Services LLC will continue to use its preprinted session notes, timesheets and progress reports. Session Notes are to be completed according to the following guidelines:

- All child/therapist information must be completed on the form.
- Start and End times must be logged on the timesheet. Indicate a.m. or p.m. Any billing forms listing only the duration of the session will be returned to the therapist, resulting in a delay of payment.
- A parent/guardian's signature is required on all Notes.
- The therapists must sign the Note.
- WV BTT/ DHHR billing rules must be followed
- Up to three disciplines a day only.
- Each of the three disciplines may include one visit per discipline per day. Therefore, the provision of TSHH and SI therapy in one day is not allowed. It is both therapists' responsibility to come to an agreement on a schedule.
- As an exception, a billing waiver may be issued to provide more than 3 services a day or more than one per the same discipline a day. In the event the IFSP may not be implemented without violating the WV BTT/ DHHR regulation, (i.e. child is receiving a lot of intensive services at home, or parents will allow only certain days for therapy provision, etc.), contact Case Manager. The Case Manager will notify the Service Coordinator of the scheduling conflict.
- Co-Visits are not permitted unless approved in the IFSP.
- Make Up sessions will be reimbursed only if they are verified by a session note indicating the reason for missed session within 2 weeks. Upon receipt of billing invoices, the billing clerk will check the session notes for billing rules violations, using the software to determine any overlaps within a therapist's schedule and within the child's schedule. Co-visits or overlaps in

therapy provision, or any other fraudulent billing will result in immediate termination!

### **Pay Periods:**

Therapists are paid at the end of each month.

### **Employee Forms**

All Beautiful Beginnings Child Development Services LLC forms regarding employees are included in this appendix to the Policies and Procedures Manual. The forms included in this appendix are the following:

- Criminal Background Information Form
- Recommended Vaccinations Acceptance/Declination Form
- Influenza Vaccination Form
- Drug/Alcohol Abuse Disclaimer

### **Quality Assurance Plan**

Beautiful Beginnings Child Development Services LLC is an Early Intervention agency whose main objective is to respond to the needs of children with disabilities, as well as the families who care for them. We are unwavering in our commitment to provide the highest quality services to our children and families.

Beautiful Beginnings Child Development Services LLC provides a multitude of services in a variety of settings. Speech and language therapy, physical therapy, occupational therapy, special education, and nutrition, are offered at home, daycares, and community settings, as well as service coordination. In our quest to achieve our goals, Beautiful Beginnings Child Development Services LLC has developed a Quality Assurance Plan to ensure that our therapists provide the highest quality services while adhering to the rules, regulations, policies, and procedures of WV Early Intervention as well as the requirements of each of the respective professions. Quality Assurance Supervisor, is responsible for the Quality Assurance Plan, which is designed to establish and oversee the agency's standards of care. The plan is implemented and enforced by the Quality Assurance Committee which consists of the Quality Assurance Professionals, along with the Program Director, Director of Quality Assurance, Case Manager, Supervisor of the Billing/Collections Department, and the Service Coordination Supervisor.

The QA Committee meets monthly to discuss agency's strengths and weaknesses, and to relay them to the Beautiful Beginnings Child Development Services LLC members during the monthly staff meetings. Random clinical and child record reviews are conducted to assess and monitor the safety, adequacy, type and quality of the agency's services. The Quality Assurance Professionals review the session notes and communication between the therapists, office staff, and parents. If the review finds any

aspect lacking, the QA Committee will determine what action is necessary and appropriate. Trainings are generally provided quarterly, but will be conducted on an as needed or emergency basis whenever necessary. Beautiful Beginnings Child Development Services LLC has employed experienced professionals to oversee the provision of therapy services in each discipline.

The Quality Assurance Professionals are experienced individuals who are licensed/certified in each of the following areas: speech and language pathology, occupational therapy, physical therapy, and special education. They are required to have at least 3 years' experience working with children aged birth through 5 years, as well as at least 1 year of experience as a supervisor. The Quality Assurance Professionals are required to know what the expected practice standards/guidelines are for their profession, as well as the expectations for that profession, and know and understand the scope of practice for their respective professions to assist the agency in maintaining and, at times if necessary, improve the quality of services provided by Beautiful Beginnings Child Development Services LLC therapists. The QA Professionals will maintain and improve the quality of services by conducting supervisory home visits with each therapist. Visits will be made within the first month of new cases, as well as on an ongoing basis at random intervals.

Visits will also be made semi-annually to coincide with the 6-month and Annual IFSP review periods. The QA Professionals are also responsible for reviewing session notes, progress reports, letters of justification for evaluations, changes in frequency, and termination of services, and evaluations. Upon review of the documentation, the QA Professional is required to critique and correct the documentation and meet with the therapist to discuss the issues and ensure that the changes will be made by and followed-through with by the therapist. The QA Professionals are responsible for reporting their findings to the Director of Quality Assurance. Monthly, the QA Committee will meet to assess the effectiveness of the plan, including the overall functioning of plan, the ease of implementation, and the quality of notes and services. At these monthly meetings, the QA Professionals will offer their input and findings regarding the delivery of services and documentation of those services to the QA Committee. The QA Professionals will have the opportunity to offer their recommendations for change and improvement. Upon review of those recommendations, as well as the ongoing assessment of the plan, the QA Committee will then determine if changes are necessary and should be implemented.

Additionally, Beautiful Beginnings Child Development Services LLC adheres to the following Quality Assurance protocol to ensure the quality provision of services:

- The Director of QA reviews all company policies and procedures and amends them in accordance with Committee's recommendations, results of

monthly-performed parental surveys and WV BTT/ DHHR updates on a semi-annual basis.

- The Director of QA randomly audits the appropriateness of content of individual records (i.e. session notes, progress reports, justification letters, service coordination log notes, evaluation reports, etc.).
- The Supervisor of the Billing and Collection Department audits submitted billing invoices, supported by daily session notes, to assure compliance with WV BTT/ DHHR billing regulations. Semi-Annual Performance reviews are conducted to improve the quality of service provision. Supervisors of the respective Departments are responsible for preparation of such review. The therapist receives a copy of such review, which is placed in each therapist's file.
- The Parental Satisfaction Surveys are reviewed and areas of concern are determined. The QA Supervisor will discuss the finding with the Program Director. If deemed necessary, the QA Supervisor and the Case Manager will call the parents and request more input. then incorporates that information into our Quality Improvement Process.
- Beautiful Beginnings Child Development Services LLC ensures that we are reaching our target populations by continuously reviewing our demographic and hiring clinicians who can provide bilingual services and/or services to special populations or geographic locations. If there is a need for additional clinicians to serve these areas/populations, Beautiful Beginnings Child Development Services LLC immediately seeks out new clinicians through our recruitment process. Beautiful Beginnings Child Development Services LLC takes the utmost care to ensure that all documentation is accurate and that services are billed in compliance with the WV BTT/ DHHR and Medicaid rules and regulations. Beautiful Beginnings Child Development Services LLC has implemented policies and procedures, as well as checks and balances, to assist us in detecting any fraudulent activity, waste, or abuse. The Quality Assurance Unit, under the supervision of the Quality Assurance Supervisor, has been assigned the task of reviewing all submitted documentation and adheres to the following procedures:
  - All documentation regarding the provision of services submitted by therapists, as well as service coordination logs submitted by service coordinators, is forwarded to the Quality Assurance Unit for review.
  - Each document is reviewed for quality, content, and accuracy by a member of the unit.
  - Using the Quality Assurance Session Note Checklist and, for service coordination log notes, the SC Performance Checklist, the QAI team member indicates any errors, problems, or questions regarding the submitted documentation.
- The checklist is then forwarded to the Quality Assurance Supervisor for further review.

- The QA Supervisor reviews the documentation in question and contacts the therapist responsible. Depending on the problem, the QA Supervisor will either ask the therapist/service coordinator to make a correction or submit further documentation, if necessary. The documents in question will not be submitted for payment until the respective supervisor is satisfied with the therapist's follow-up.
  - If a therapist made an error on the date or time of the session and has subsequently crossed out and initialed the information on the session note, the parent/caregiver of the child will be contacted and asked to verify the correct date and time of the session. The session will only be billed if the parent/caregiver verifies the information. If the parent/caregiver cannot be reached, the session is not billed.
  - If the Billing Director deems that the documents submitted are inappropriate, the QA Supervisor will inform the therapist responsible that the services will not be submitted for payment, resulting in the non-payment of that therapist.
  - Monthly internal audits verify that services billed are matched with the appropriate billing and session note documentation. Any services that are billed incorrectly will be adjusted immediately.
  - Parent Surveys, pertaining to the provision of a child's services, are sent on a regular Quarterly basis. Parents can inform us of any problems or issues that may have arisen regarding the child's services. Any issues brought to us by a parent are forwarded to the Quality Assurance Supervisor.
  - Random phone calls are made to parents to ask about the provision of the child's services. Any information given by the parent concerning questionable practices is forwarded to the Quality Assurance Supervisor for further investigation.
- Beautiful Beginnings Child Development Services LLC Quality Assurance Plan is shared with all employees and contracted therapists. A copy of the plan is distributed to each therapist and to all newly hired therapists. Additionally, the QA Plan is attached to the Policy and Procedures manual. Copies of the plan are kept in the Program Director's office and the Quality Assurance Supervisor's office.

### **Beautiful Beginnings Child Development Services LLC ABA program**

Beautiful Beginnings Child Development Services LLC supports evidence based treatment methods based on the principles and procedures of Applied Behavior Analysis including but not limited to Verbal Behavior strategies, Natural Environment Teaching, Precision Teaching, Fluency Based Instruction and Direct Instruction in the support of children aged 0-3 diagnosed with Autism, Pervasive Development Disorder and other learning disabilities. It incorporates recommendations from the WV BTT/ DHHR Clinical Practice Guideline Beautiful Beginnings Child Development Services

LLC seeks to provide children ages 0-3 with quality, effective evidence based intervention based on the child's and family's needs.

It seeks to utilize at its core the six elements reported to be common to effective early intervention programs. (Dawson and Osterling, 1997). These are:

1. Curriculum content: addressing attending to the elements of the environment that are essential for learning, to imitate others, to understand and use language, to play appropriately with toys and to interact socially.
2. Supportive and structured environment that includes strategies for generalization to more complex, natural environments.
3. Predictability and routine to assist the child from one activity to another.
4. Functional approach to problem behaviors that includes recording the behavior, developing a hypothesis about the function of the behavior for the child, changing the environment to support appropriate behavior and teaching appropriate behaviors to replace problem behaviors.
5. Plans for transition from pre-school classroom by teaching "survival" skills that children will need later.
6. Family involvement: Incorporating family through the introduction of family to techniques and approach utilized during therapy sessions. Soliciting family input for goals and objectives to assist child's progress towards age appropriate development. (WV Early Intervention Clinical Practice Guidelines) Specific items addressed below:

(1) **Curriculum:** The main curriculum to be used was designed by Adrienne Robek, PhD BCBAD. It is entitled "Autism ABA Curriculum." Various curriculums were reviewed and this one stood out for its ease of understanding for parents. It is designed with parents in mind and specifically, for parents to read and use. It incorporates the elements advised in the WV BTT/ DHHR Clinical Practice Guidelines. It follows the ABBLS protocol. It includes programs in the areas of requesting, labeling, fine motor skills, attending skills, imitation skills, language comprehension, reciprocal conversation, self-help skills, and social skills. Programs can easily be adapted to learning level.

In addition, "A Work in Progress Behavior Management Strategies and a Curriculum for Intensive Treatment of Autism" (Leaf, R. Mc Eachin, John & Harsh, J.D.) will also be incorporated as needed. It provides insight and methods for dealing with difficult behaviors and self-stimulation to aid in the management and reduction of disruptive behavior. It is also parent friendly and offers guidelines on how to address and manage sleep problems, toileting issues, eating problems as well as how to incorporate social skills and play skills. It companions, a detailed curriculum entitled Autism Partnership

Curriculum for Discrete Trial Teaching with Autistic Children (Leaf, Mc Eachin & Harsh) will also be utilized as necessary.

This curriculum is currently used with a variety of WV Early Intervention programs. It addresses skills such as play, receptive and expressive labeling, emotions, functions, categories, sequencing, peer interaction and more. Programs will always be based on assessment. Assessments used for programs include the ABLLS, VB-MAPP as well as a preference assessment to indicate reinforcer effectiveness. Programs will be basic in the beginning (based on assessments) and include: Requesting (mending) to teach the power of communication, attending, and non-verbal imitation/gross motor imitation, object imitation, play programs, NET and ADL skills.

(2) **Supportive and Structured Environment:** Based on assessments, a structured and supportive environment will usually include Discrete Trial Training, NET play, and opportunities for generalization. Generalization is the spreading or expansion of teaching beyond what was directly or intentionally done. Generalization is built into each program first in isolation by requiring the program to be run by more than one person. For example, a program can be run by two different therapists and a parent. The programs will seek to generalize across people, settings and behaviors. Stimulus generalization across people is shown when a child learns to greet one person (therapist) and then is taught to greet other people as well.

Stimulus generalization across settings will be taught and an example is teaching a child to wash her hands at home and then she washes her hands outside the home (school, relative's house, public bathroom). Generalization across behaviors (response generalization) is shown when a child can add an "s" to the ends of words when referring to more than one and then does so with other nouns without having to be taught each noun individually. These are examples of how generalization will be built into each program. Functional play skills learned in isolation (on the floor at home, at the table) will also be taught in the natural environment (playground, park).

(3) **Predictability and routine:** Predictability and routine will be implemented using activity schedules and the Premack Principle. The Premack Principle states that any high probability activity may serve as a positive reinforcer for any low probability activity, i.e. writing activity then play-doh. Pairing procedures (process by which one stimulus is paired with another stimulus and will in the future take on those same reinforcing properties) will be implemented for the period it takes for the child to associate the therapist with positive responses.

(4) **Managing problem behaviors:** A problem behavior is any behavior that interferes with a child's learning; one that a parent feels they would like addressed or at least assessed, any behavior that is particularly harmful to the child, peers or other persons in

his environment or any behavior that inhibits the child from being in the least restrictive environment. To reduce problem behaviors, it is critical that a challenging behavior is given a good operational definition. Defining behaviors effectively uses observation and measurement. Agreement on when it is happening and it can be demonstrated. Typically, data is collected on ABC sheets and the Antecedent-Behavior- Consequence model is followed. We will use indirect assessment (interviews), direct assessment (observing the behavior and collecting data).

Direct assessment measures will include ABC data, time sampling, duration, frequency, etc. From the data on the ABC sheets a function of the behavior can be determined. The functions are: Medical, Escape/Avoidance, Attention, Tangible, Sensory and Combinations. A written version of these observations called an FBA (Functional Behavior Assessment) will be produced and include: strengths of the child, individualized information about the child, previously implemented interventions, target behavior including frequency, duration, latency or intensity (based on the data). In addition, conditions under which the behavior occurs and the hypothesized function of the behavior based on the data will be reported. From the FBA, a Behavior Intervention Plan will be formed. The BIP will include the behavior operationally defined in as much detail as possible. It will also include what behaviors will be taught to replace target behaviors. It will indicate the type of data collection that will be used to collect data on the target behaviors, amount of improvement expected (percentage increase or decrease) and the schedule for review-how often the data will be reviewed. The BIP will also include what kind of differential reinforcement program will be used (DRA, DRI, DRO).

**(5) Transitioning from Early Intervention to Pre-School:** Through the ABA programs "survival skills" will be taught. These skills include requesting, labeling, play skills, self-care and attention as applicable to the child's capability. It is one of the goals of the program to be able to have children transition smoothly to a pre-school setting.

**(6) Family involvement and Family Centered coaching:** Family-centered coaching addresses organizational program goals AND it addresses the parents' goals and desired results for their children and family. Families will be coached and guided in understanding the child's diagnosis. Family will be guided with treatment plans for the family and assisted in carrying over behavior plans. Families will be coached in behavioral techniques to ensure child's greater independence. Families will be encouraged and coached to incorporate the family's priorities and goals into the plan at home as well as ABA programming in the home. Parents will be taught to generalize skills in natural routines. Parents will understand service provision protocols (Absence policy, Make-Ups and Log Notes). Parents will be encouraged/guided to have input with the setting up developmentally and age appropriate programs and goals in the home.



ABA Supervision will be provided by Beautiful Beginnings Child Development Services LLC Quality Assurance Supervisors and ABA Clinical Supervisor, Special Education who have many years of collective experience servicing the special needs community as Special Education teachers and ABA therapists. Therapists will be supervised using self-evaluation, direct observation, parent report and child's data book. Data books will be constructed by Clinical Supervisor in accordance with current practice guidelines and use of assessment tools such as the ABBLIS and VB-MAPP. In addition, Clinical supervisor will review data monthly and address program changes as child's functioning level changes.

### **Assignment and Planning of ABA Cases:**

When accepting a case for ABA services, Beautiful Beginnings Child Development Services LLC is fully aware of its responsibility to assist the family in understanding ABA therapy and the role of the ABA Supervisor and to help the family to become and remain involved in their child's services. Beautiful Beginnings Child Development Services LLC understands its responsibility to assign an ABA Supervisor, lead teacher, and teacher to the case to ensure proper oversight. Once a case is accepted and authorized for services:

- The ABA Supervisor assigned to the case receives all pertinent background information for the child including, but not limited to, IFSP, evaluations, and information regarding any prior services received.
- The ABA supervisor contacts the family to discuss the child's services, explaining the supervisor's role, the lead teacher's role, and the teacher's role.
- The ABA Supervisor will also explain the role of any other therapists involved.
- The supervisor explains to the parents the importance of their involvement and ensures them that they will be taught the techniques necessary to carry over the work the therapists are doing with their child.
- The ABA supervisor will ensure the assignment of the appropriate lead teacher and teacher based on the child's language, culture, special needs, etc.
- The ABA teacher will develop a written behavioral program for the child. With the use of Discrete Trial Instruction and anecdotal notations, each child will receive comprehensive therapeutic delivery of Applied Behavioral Analysis learning techniques to address and remediate delays and deficiencies in each of the functional domains, cognitive, self-help, gross motor, fine motor, expressive language, and receptive comprehension skills.
- A portfolio will be created streamlining preliminary programs to maintain and collect accurate data that will monitor and gauge learning patterns and address developmental delays to effect change and reduce symptoms of ASD. Each

child's performance portfolio will be reviewed and monitored monthly to adjust program step delivery according to the rate of skill acquisition of new material.

## **SERVICE COORDINATION**

As providers of service coordination services, Beautiful Beginnings Child Development Services LLC believes that each family deserves the finest care, consideration, and understanding during their child's time in the Early Intervention Program. The process, at times, can be difficult for parents and guardians. It is the service coordinator's responsibility to walk each family through the process, helping them to understand each step and empowering them to make informed-decisions regarding their child's therapy and educational services. It is because of these beliefs that we hire only qualified and highly motivated personnel to serve as the Supervisor of Service Coordination and Service Coordinators. In addition to exceptional training, mentoring, and supervision that we provide to the Service Coordination staff.

**Hiring Procedures Service Coordinators:** To be considered for the position of Service Coordinator, each applicant must submit a resume and proof of credentials to the Program Director and Supervisor of Beautiful Beginnings Child Development Services LLC and meet the following criteria:

- 1.** Possess a minimum of one of the following educational or service coordination experience credentials: Two years of experience in service coordination activities; or one year of service coordination experience and an additional year of experience in a service setting with infants and toddlers. with developmental delays or disabilities; or one year of service coordination experience and an Associate's degree in a health or human service field; or Bachelor's degree in a health or human service field.
- 2.** Demonstrate knowledge and understanding in the following areas: Infants and toddlers who may be eligible for early intervention services; State and federal laws and regulations pertaining to the Early Intervention Program; Principles of family-centered services; The nature and scope of services available under the Early Intervention Program and the system of payments for services in the State; and any other pertinent information.
- 3.** Additionally, Beautiful Beginnings Child Development Services LLC requires that all Service Coordinators complete a three-month probationary period, supervised by the Supervisor of Service Coordination. SC are required to participate in the introductory service coordination training sponsored by WV DHS This requirement will be met within the first three months but no later than one year after the service coordinator's employment with our agency.

**Supervisor of Service Coordination:** To be considered for the position of Supervisor of Service Coordination, the applicant must submit a resume and proof of credentials to Beautiful Beginnings Child Development Services LLC Program Director and have at least two years' experience as a Service Coordinator.

All new Service Coordination personnel must complete a three-month probation period, during which time their performance will be monitored and reviewed. Upon review, an extension of probation may be given if the Supervisor of SC and the Director of QA and the Program Director, determine that the SC has met most, but not all the requirements to pass probation. If an extension is deemed appropriate, the SC will be given the new date by which his/her performance will be reviewed. Additional training will be given to assist the SC in acquiring the skills necessary to pass probation. At the end of the extended probationary period, another review will be conducted. An unsatisfactory rating may lead to retraining, further probation, or termination.

### **Job Roles and Responsibilities**

**Supervisor of Service Coordination:** The Supervisor of Service Coordination reports directly to the Program Director and/or Director of Quality Assurance. Additionally, the Supervisor of Service Coordination must maintain consistent collaboration with the Director of Quality Assurance, the Billing Director, and the Evaluation Department Supervisor.

The responsibilities of the Supervisor of Service Coordination include, but are not limited to, the following:

- To oversee the Service Coordination Department, including all mentors and initial and ongoing service coordinators in collaboration with Director of Quality Assurance.
- To be familiar with all Early Intervention requirements regarding service coordination, evaluations, and service provision.
- To ensure compliance with all city and state mandates regarding service coordination.
- To monitor service coordinators and mentors on a bi-weekly basis.
- To assign the appropriate caseloads to each service coordinator and mentor, taking into account each child's/family's needs, language, geographic location, and the service coordinator's current caseload.
- To review all service coordination paperwork on a weekly basis to ensure compliance and to determine billable and non-billable activities.
- To ensure that all 6-month and Annual Reviews are conducted and completed within the guidelines for Early intervention (at least 4 weeks prior to due date).

- To assist all service coordinators and mentors in obtaining necessary paperwork, monitoring services, and complying with all regulations.
- To participate in monthly meetings with the Director of Assurance and Improvement, the Clinical Director, the Billing Director, and the Evaluation Department Supervisor.

**Service Coordinators:** Service Coordinators report directly to the Supervisor of Service Coordinator.

The responsibilities of the Service Coordinator include, but are not limited to, the following:

- To coordinate all services for infants, toddlers and their families.
- To serve as the single point of contact in helping parents to obtain the services and/or assist the family's need.
- To provide an overview of the WV Early Intervention Program and obtain pertinent information.
- To assist families in planning and arranging all aspects of their children's evaluations.
- To track the evaluation process and ensure that it is completed within 30 days of the referral and that the IFSP is convened within 45 days of the referral.
- To ensure that the families understand the results of the evaluations as explained by the MDE team.
- If the child is found ineligible or the family decides to withdraw from the program, SC will discuss closure of the Early Intervention case with the families and make any referrals needed by the child/family to non-Early Intervention services .
- To schedule the IFSP meeting and conduct a Pr-IFSP with parent to ensure that the parent understands the IFSP process.
- To confirm the attendance of all IFSP team members prior to the initial IFSP meeting.
- To Submit IFSP Meeting Request/Confirmation Form to EI Scheduler within 48 hours of confirming with the parent.
- To confirm the attendance of all IFSP team members at least 24 hours prior to the initial IFSP. If any of the members cannot participate in person and is available via phone, the Service Coordinator will notify the Regional Office 24 hours before the meeting by completing and faxing the IFSP Meeting Request/Confirmation Form. The copy of this form will be placed in child's file, as well as brought to the IFSP by the Service Coordinator.
- To prepare the families for the IFSP meeting by informing them about who will be there, what will happen, their due process rights, and any other information.

- To ensure, when necessary, that the families get any mandated prescriptions after the IFSP meeting.
- To ensure that the families receive a written copy of the IFSP within ten (10) days of the IFSP meeting.
- To ensure that the IFSP is being implemented by maintaining regular contact with the families, maintaining regular contact with the service providers and assisting the family in obtaining non-Early Intervention services necessary to meet the family's basic needs including all Early Intervention and non-Early Intervention services.
- To coordinate the process of modifying, updating, and reviewing the IFSP.
- To provide the family information about various transition options and help them plan for their children after they age out of Early Intervention.
- Once the transition plan has been developed at the IFSP meeting, assist the families in carrying it out.
- When warranted, obtain written parental consent for Pre School EI notification/referral and transfer of relevant Early Intervention records.
- To assist families whose children are dually eligible for early Intervention and Pre School EI in deciding the appropriate time of transition into PS EI.
- To submit completed Closure Forms to the Regional EI Office and service providers once the child has begun to receive services through Pre School EI, or for any other reason the families choose to terminate services.
- To understand the difference between billable and non-billable activities and to bill units in accordance with the rules and regulations of WV BTT, and DHHR..

## **Supervision**

Due to the nature and importance of Service Coordination, Beautiful Beginnings Child Development Services LLC has designed a specific and highly structured program of supervision, training and direction of service coordinators to ensure that required activities and responsibilities are being implemented.

The following procedures are in effect:

All service coordinators are required to attend the Introductory service coordinator training and maintain documentation of attendance. Upon receipt of an approval by the Department, the Supervisor of Service Coordination, in collaboration with Director of Quality Assurance, will conduct three months of training for newly hired Service Coordinators.

Our training curriculum includes, but is not limited to:

- EIP rules and regulations, eligibility requirements, family involvement, community resources for toddlers and families and description of ISC and OSC responsibility.

- Documentation required by WV BTT, IFSP preparation, process, and observation (upon parental approval); case reviews, daily activities log writing, etc.
- During the probation training period with the Supervisor of Service Coordination and Director of Quality Assurance, the service coordinator will be gradually assigned cases for ongoing or initial service coordination.
- During this period of direct supervision, the Supervisor of Service Coordination reviews all service coordination activities, including daily notes, before transferring them to our billing department, reviews charts, IFSP implementation, family preparation and participation in IFSP, reviews all paperwork that is submitted to Regional Offices, attends IFSP reviews as a part of training, conducts parental surveys on parental satisfaction, ensures that all of the families' and children's needs, as well as desired outcomes, are addressed.
- All Service Coordinators will maintain service coordination logs, which will document direct and indirect activities. These logs will be written daily and reflect activities concerning the IFSP process, receipt of services contained in IFSP and 6 month and/or annual reviews of the IFSP.
- All contacts with parents, evaluators, service providers, primary health care providers, etc. will be documented in the service coordination logs and maintained in the child's record. During the probationary period, the service coordination logs will be reviewed by the Supervisor of Service Coordination.
- A Performance Checklist is completed monthly for each new service coordinator throughout the three months of training. Upon the recommendation of the Supervisor of Service Coordination and Director of Quality Assurance and the random review of cases, the new Service Coordinator's readiness is reviewed by the Program Director for approval.
- Once the Service Coordinator completes formal training, the letter of training completion is signed by the Supervisor of Service Coordination and the Program Director, placed in Service Coordinator's personnel file.
- Weekly supervisory meetings will be conducted by the Supervisor of Service Coordination to review cases, and discuss concerns and address questions that might arise.
- The implementation of WV EIP policies, procedures, forms, as per Policy and Procedures Manual, and all current memoranda will also be reviewed. Meetings will focus on service coordinators' activities to assure the IFSP process is being implemented to respect the rights of families, promote implementation of Family As Partners and a multi-disciplinary approach, be responsive to the cultural and linguistic backgrounds of infant/toddlers and their families, ensure that Service Coordinators are fulfilling their obligation to coordinate and monitor the provision of services.
- All Service Coordinators will maintain service coordination logs, which will document direct and indirect activities. These logs will reflect activities

concerning the IFSP process, receipt of services contained in IFSP and 6 month and/or annual reviews of the IFSP. All contacts with parents, evaluators, service providers, primary health care providers, etc. will be documented in the service coordination logs and maintained in the child's record.

- Bi-Weekly meetings between Supervisor of Service Coordination and Director of Quality Assurance will be conducted to determine the areas in need of improvement to plan on the upcoming training topic for all or specific SCs.

### **Probation Period Guidelines**

During the probation period, Beautiful Beginnings Child Development Services LLC will ensure that the following guidelines are followed:

- Newly hired Service Coordinators will only be assigned ongoing cases during the first month of probation.
- During the first month of probation, the Service coordinator will be assigned to a maximum of 10 ongoing cases. The Supervisor will review the child's IFSP with Service Coordination.
- During the second month of probation, the Service Coordinator will continue to be assigned ongoing cases, not to exceed a total of 20 cases by the end of the second month. Additionally, during this time, the Service Coordinator will attend Initial IFSP meetings as an observer.
- During the third month of probation, the Service Coordinator will be assigned additional 5-10 initial cases, not to exceed a maximum of 30 cases by the end of the third month of probation.
- At the end of the 3-month probationary period, the Supervisor of Service Coordination will complete the 3-month Probation Checklist. Upon review, the Service Coordinator will either pass the probationary period or remain on probation with further training.
- All Service Coordinators are expected to complete the probationary period within 3 months of their date of hire. On occasion, probationary periods may be extended, but may not exceed six months. Any Service Coordinator who does not successfully complete the probationary period within 6 months from the date of hire will be a subject to termination.

Beautiful Beginnings Child Development Services LLC reserves the right to terminate a Service Coordinator at any time during the probationary period due to unsatisfactory performance or failure to adhere to the policies and procedures of Beautiful Beginnings Child Development Services LLC and the WV Early Intervention Program.

## **Caseload Management/Case Assignments**

To ensure the highest quality Service Coordination, Beautiful Beginnings Child Development Services LLC has implemented a caseload management plan. Once the probation period has been successfully completed, each Service Coordinator will gradually be assigned to an average of 40-50 cases. All caseloads will depend on the degree of need and/or the complexity of the diagnosis for each child. Each service coordinator's caseload is assigned by the Supervisor of Service Coordination, who will review each referred case, and assign it to the appropriate service coordinator, based on the service coordinator's current caseload, the degree of need for the child and family, cultural and language aspects, and any other pertinent issues that may affect assignment.

The Program Director and Director of Quality Assurance will periodically review both the performance and caseloads of the service coordinators with the Supervisor of Service Coordination. This review will take into the consideration the needs of the family and the child, their cultural background, and any other issues which may impact on the average number of the families on a caseload. The Internal Quality Assurance Checklist will be filled out at the time of the review and placed in the child's file.

## **Accepting, Assigning, and Transferring Cases**

The Supervisor of Service Coordination is responsible for the acceptance, assignment, and transfer of all service coordination cases referred to Beautiful Beginnings Child Development Services LLC and accepts all cases referred for service coordination, unless there is a mitigating factor (such as language) that we cannot accommodate. The following procedures are followed:

- Upon receipt, all referrals are forwarded to the Supervisor of Service Coordination who reviews and verifies (referral source, phone numbers, etc.) the referral; Based on caseload, language, needs of the family, location, and any special factors, the Supervisor of Service Coordination immediately assigns each case to the appropriate service coordinator.
- The assigned service coordinator then contacts the family within 24-48 hours to introduce themselves as their Service Coordinator and schedule the In Home Visit within 7 days of referral.
- If another agency has asked Beautiful Beginnings Child Development Services LLC to accept a transfer case, the Supervisor of Service Coordination first discusses the case with the agency representative (current SC, SC Supervisor, etc.) to ensure that there are no mitigating factors and that we can accept the case. Once the Supervisor of Service Coordination obtains all pertinent information regarding the case, she informs the "transfer" agency that the case will be accepted. The Supervisor then decides which service coordinator will be



assigned the case and gives that information to the "transfer" agency. The Supervisor requests a copy of the Request for Change of Service Coordination form to ensure appropriate follow-up.

- If one of the service coordinators needs to transfer a case, the service coordinator must first discuss the reasons for the transfer with the Supervisor of Service Coordination to ensure proper handling of the case. The Supervisor will ascertain if the parent requested a specific service coordinator and/or agency.
- The Supervisor will then direct the service coordinator to complete the Request for Change in Service Coordination form. The Supervisor will keep the forms until the approved copy is received. Once the approved copy is received, the Supervisor notifies the service coordinator that the case has been officially transferred and a copy will be put in child's file.

### **Communication Procedures**

To ensure that Beautiful Beginnings Child Development Services LLC policies and procedures, as well as WV BTT policies and procedures are followed, we have developed these communication protocols:

- All Service Coordinators are responsible for maintaining consistent contact with their families and supervisors. This contact should include, but is not limited to contacting all new referrals within 24-48 hours of receipt of the referral from Early Intervention.
- During the initial contact, informing parents that there is a 30-day timeframe in which all evaluations must be completed and submitted to WF BTT.
- Upon initial contact with the family, the service coordinator must schedule a face-to-face visit with the family within 4 days of the initial contact. If the face-to-face meeting will not be conducted by the 7 days from the date of referral, the service coordinator must mail the first letter to the family, and document it in their notes and obtain a reason for delay form signed by parent at the schedule IHV.
- During the Initial Home Visit, again reviewing with the parent that there is a 30-day timeframe in which all evaluations must be completed and submitted to WV BTT and Informing parents of their options for choosing an evaluation site.
- The Service Coordinator must review all evaluation sites and assist the parent in choosing an appropriate site, discussing specialty, location, language, and availability of each evaluation site.
- Introducing the parent to the WV BTT by reviewing with them the Parents' Rights Handbook, informing them of all timelines and procedures, explaining services available through Early Intervention, as well as non-EI services, and assisting them throughout the process.

- Explaining in detail the "Embedded Coaching" approach so that parents can be actively involved in their children's therapy sessions and understand the importance of parent involvement.
- Making weekly contact with families to ensure that all needs are being met and services are being provided as mandated per IFSP.
- If there has been an interruption in services of three or more consecutive sessions, the Service Coordinator must contact the provider agency to ascertain the reason for interruption and determine the need for a new therapist.
- If a new therapist is needed for the case, the Service Coordinator must request a new therapist from the provider agency. If the provider agency cannot fulfill the request, the Service Coordinator must continue to call other provider agencies approved by WV BTT to obtain a new therapist. If a new therapist cannot be found within 7 days, the Service Coordinator must inform the Technical Assistance Specialist in writing of the situation and request assistance with the matter.
- Recording all contacts in the service coordination notes daily and documenting all contacts made regarding each case.
- Checking voicemail and e-mails throughout the day, making sure to check first thing in the morning and just prior to leaving for the day and returning messages from their families within 24 hours of receiving the message.
- The Service Coordination is responsible for scheduling all IFSP meetings with the Regional Office and notifying Supervisor of Service Coordination of the schedule. The Supervisor of Service Coordination must also be notified of all IFSP meetings.
- The Supervisor of Service Coordination is responsible for communicating any changes in policies, procedures, documentation requirements, schedules, and meetings to the Service Coordinators.
- The Supervisor of Service Coordination is responsible for communicating with the Director of Quality Assurance and the Program Director on a regular basis.

### **Weekly Charting System**

To ensure that files are managed and closed properly, a weekly charting system has been implemented. The Supervisor of Service Coordination is responsible for producing a weekly list of cases that have closed and forwarding it to the Director of Quality Assurance and Program Director. The Service Coordinator is responsible for reviewing the file to ensure that all necessary documentation is present and correct in the file. The review ensures that the file contains all the necessary consent forms, including closure forms, evaluations, IFSPs, medical forms, and prescriptions, service coordination logs, session notes, progress reports, and any other necessary documents. During the probationary period, the Supervisor of Service Coordination is responsible for reviewing

the closed files with the Service Coordinator. Once the file has been reviewed, the Service Coordinator forwards the file to the Quality Assurance Department for final documentation review. After the Quality Assurance Department has conducted its review, the file is ready for closure. It is the responsibility of the Service Coordinator, along with the Supervisor of the Service Coordination Department, to ensure that family involvement is implemented according to the regulations set for by WV BTT/ DHHR.

The Service Coordinator is responsible for the following:

- Promptly arranging a contact with the parent in a time, place, and manner reasonably convenient for the parent and consistent with the applicable timeliness requirements .
- At the Initial Home Visit, providing parents with a complete overview of EIP by discussing all the required relevant issues including, but not limited to:
  - Voluntary nature of the program, Parents' concerns, priorities, and resources.
  - The fact that EIP is without cost to families and the use of insurance for EIP.
  - The role of the Service Coordinator
  - Natural environments or other possible settings of service delivery.
  - Whether the family needs and/or is receiving services from systems or programs other than EI.
  - What to expect at the initial IFSP meeting.
  - Parental involvement in the EIP and in the services the child receives.
  - The EI handbook (including provision of a hard copy of the handbook to the parent).
  - The list of EI provider evaluation sites.
  - The 30- and 45-day timelines for evaluation and IFSP.
  - Confidentiality and due process and the transition process and options.
- Completing the Initial Home Visit Checklist to ensure that all relevant required issues were discussed with the family. This checklist must be signed by the service coordinator, verifying that all points were reviewed with the parent.
- Providing parents with information regarding rights and entitlements under the Early Intervention Program and documenting the information provided in the child's record.
- Assisting the parent in identifying and applying for benefit programs for which the family may be eligible, including: Medical Assistance Program, Supplemental Social Security Income Program, HIPPP, WIC, CHIP EPSD, and Social Security Disability Income.
- Reviewing all options for evaluations and screenings from the list of approved and contracted evaluators provided by the municipality. The SC must assist the

family in selecting an evaluator or screener by providing objective information regarding all options, including location, types of evaluations performed, and settings for evaluations.

- Providing parents with information regarding funding of EI services, i.e., at no cost to the parents, and use of Medicaid/third party insurance, including protections when Medicaid and/or third-party insurance are used.
- Obtaining the child's Medicaid/third party insurance information.
- After the evaluation process, preparing the family for the IFSP meeting. The SC must discuss the IFSP process with the parents and provide the required information and document that the information was provided in the child's record.
- Facilitating and participating in the development of the IFSP.

The Service Coordinator is also responsible for the following:

- Facilitating the timely start of services within 2 weeks following the IFSP. All services must begin within 2 weeks (14 days) of the authorized start date. SC's have been advised to inform the EI office of any services that do not begin within the mandatory 2 weeks and SC have been advised to locate a different service provider for any services that do not begin within 2 weeks.
- Coordinating and monitoring the delivery of services.
- Ensuring that parents and therapists are working collaboratively to implement the Embedded Coaching philosophy
- Facilitating and participating in the development of the IFSP.
- Facilitating the development of a transition plan within the required timeframes
- Obtaining parental consent for transfer of evaluations, IFSPs, and other pertinent records to the Pre School EI, when appropriate).
- Collect and file and uploads all progress reports (3, 6, 9, 12) from provider and send reports to main Office at least 4 weeks prior to scheduled meeting.
- At 6 months, attend and record the 6-month IFSP with the family, submit for approval and once approved mail copy to parent and confirm received.
- At the 12 months attend and record IFSP.
- Monitoring the IFSP as written and check for information changes as well as monitoring co-visits, if authorized, and reschedule as needed.
- Maintain contact with the family and reinforce the family involvement with services.
- Monitoring transition options for children 2 years of age including referral to Preschool EI or other programs, assist with evaluation process and with EI extension if child is eligible for Preschool EI prior to child's 3<sup>rd</sup> birthday.
- Offer parent other transition options if they decline PreSchool EI.

All early intervention service coordinators must fulfill those functions and activities necessary to assist and enable an eligible child and parent to receive the rights, procedural safeguards and services that are authorized to be provided under State and federal law, including other services not required under EI, but for which the family may be eligible.

### **Service Coordination Quality Assurance**

Service Coordination requires continual oversight to ensure appropriate billing and maintain the highest quality services. Beautiful Beginnings Child Development Services LLC have implemented the following quality control system:

- The Director of QA and the Supervisor of Service Coordination are responsible for reviewing service coordination files randomly monthly to ensure appropriate handling and documentation of all cases. It is their responsibility to identify areas in need of improvement. Once those areas are identified, all SCs will be re-trained and monitored until their skills are proven satisfactory.
- After the initial home visits, the SC must complete the Initial Service Coordination Checklist" and sign it.
- The SC must complete the section of the Ongoing Service Coordination Checklist at the first meeting within 4 days from the acceptance of the assignment. If the SC is unable to conduct a face-to-face meeting with the parent, the SC must schedule a phone conference to give an overview of EIP, discuss SC's responsibilities, and ensure that the parent has a written copy of the IFSP. These checklists will be attached to the child's file for supervisor to review.
- Regarding billing, it is understood that all units billed are appropriately documented. Any billing that is not appropriately documented will be disallowed. If there is any indication that the units have been documented/ billed fraudulently, the service coordinator will be subject to termination.

### **Service Coordination Quality Assurance Plan**

The Birth To Three is a statewide program that provides services to infants and toddlers, birth to 3 years old with developmental disabilities or delays under the federal Individuals with Disabilities Education Act (IDEA) and WV §303.111 through §303.126.

These disabilities may include developmental delays or Preexisting conditions that automatically qualify a child for services.

### **Services Proposed/ Services Location: Services Coordination (Certain States)**

Beautiful Beginnings Child Development Services LLC will have an SC serving the identified catchment areas. Beautiful Beginnings Child Development Services LLC will

have a professional on a full-time basis who will serve as a program director for the agency whose duties include EI program services delivery in addition to administration and oversight. There is an SC Supervisor and QA professional for service coordination. The Program Director and SC Supervisor will be responsible for WV EIS management user role, who will be responsible for accepting and rejecting service authorizations and the assignment of cases to the service coordinators. Specific to the EI program, and the quality and delivery of services coordination, the CEO, Program Director and SC Supervisor will be responsible for management of the WV EIS System, and will be working collaboratively with the Agency's QA committee on quality indicators.

The agency will increase the number of service coordinators as needed. Each service coordinator will carry a maximum of 45 to 50 cases. As service coordinators are processed they will be entered into the WV EIS System within 5 days of hire. All service coordinators will be required to attend bi-weekly supervision sessions included but not limited to staff meetings. Each staff will have individual supervision sessions with the SC Supervisor. During the supervision sessions, there will be discussions on activities, transition plans, challenges, and technical assistance will be provided as needed. In addition, service coordinators will be required to submit a weekly schedule to the Supervisor.

As it relates to service coordination notes, service delivery must be simultaneous in coordination with documentation of notes in a manner that details the elements and activities for each child/family and will be completed and filed monthly in child's record. This will be monitored by the Program Director monthly and randomly checked by QA. The QA plan is to promote clear communication and continuity of service provision among service providers, and encourage consistency in record keeping practices. This will be to ensure service authorization and utilization practices are adhered to ongoing. Examine and review the quality of services rendered to each child referred and in our service system.

All service coordinators will be trained intensively prior to service being assigned a case within 5 days of hire and ongoing on:

- WV EI policies and procedures - At hire and every 6 months
- Ensuring that staff understands policy
- Role of ISC and OSC and the elements which should be discussed with parents (i.e. contents insurances etc.) at hire and ongoing every 6 months
- Ensuring that all referrals and listing of such are documented in child's file
- Monitoring of Access Record log
- Transition Planning
- Attending the Initial and advanced Services coordination Training (prior to assignment of a case and 60 days thereafter)

- How to monitor and ensure that services are implemented as they are authorized - ongoing by QA professional and Program Director
- Timeliness of ISC meeting from Referral - at hire and ongoing at staff meeting and formal training every 6 months. Toolkit- at hire and ongoing
- Understanding and usage of WV EIS System and working with EIOD - ongoing
- Service coordinator responsibilities relative to understanding the WV EIS and steps to ensure that each child's recorded is comprehensive and stored in chart.
- Access log and maintenance of it.
- What is Billable and Non-Billable Activities - ongoing
- Modeling of initial meetings and preparing parents for IFSP meeting and documentation of such after the meeting - ongoing
- How to refer a child to the EIP using the WV EIS System at hire and ongoing
- Surrogacy Determination before each case is assigned
- The ISC initial home visit- before each new case is assigned
- The role of ISC in assisting the parent to select and evaluation Site
- How to Develop (six 6) part Functional outcome ongoing
- Scheduling and holding IFSP meetings at hire and ongoing
- Working with Families to ensure that they receive copies of MDE's IFSP and explanation of the contents of such documents- at hire and on going
- How to request an amendment to an IFSP using the WV EIS system
- Transition out of the EIP/ Transition tool kit- at hire and ongoing
- Writing and documentation of a case notes- at hire and ongoing
- State required training
- Intro to service coordination - prior to accepting any cases
- Advance service coordination- within 45 days of hire
- All appropriate forms
- Insurance information
- All information relative to compliance and intake.
- For each SC prior to being assigned a case will be re-oriented on the role and requirement of the SC and what is required including consents, tool kits, insurance, parent rights, etc.

Other trainings will be conducted as necessary throughout the year to ensure employees have access to the necessary information needed. After the training, employees receive an evaluation to determine their level of understanding of the concepts covered in the session. All employees will be required to attend all EI Learning trainings given relative to Service Coordination, and the supervisor will train all EI service coordinators on Policy & Procedures to ensure compliance with WV EI regulations Coordination Tool Kits. All service coordinators will be required to participate and complete the five (5) family centered training modules and the quiz.

The director of the EI program and SC Supervisor will ensure that all services coordinators are familiar with WV policies and Procedures. All service coordinators will attend the mandated trainings annually. The Director of the program will randomly quiz staff to ensure competency. Furthermore, prior to rendering services, service coordinators shall complete introductory service coordination training sponsored or approved by the Department of Health. The Quality Professional, supervisor and the program director will monitor the provision of services as it relates to and in compliance with WV EI. Moreover, to ensure competence, the service coordinator will be administered a competency quiz where 80% accuracy will be required. Also, ongoing training on the roles and responsibilities of the SC, and WV policy and procedures, including but not limited to billable and non-billable services.

Furthermore, the agency will develop a checklist and will monitor and measure compliance by reviewing the checklist which will capture information from date of referral to ensure compliance in this area of services. In addition, part of the training and efforts to ensure quality delivery of services, all SC will be required to participate in the Embedded Coaching training which will be monitored by the Program Director and monitored by the QA professional. The Supervisor is responsible for reviewing all Service coordination notes prior to claiming; evaluating participant progress, quality performances, accuracy of their record keeping and services delivery- weekly the Program Director, along with QA professional and will review all notes prior to claiming. In addition, the QA professional will be responsible for conducting monthly Quality Assurance reviews by selecting 30% of the active service coordination cases and auditing the documentation in those records to ensure compliance with policy and procedures.

The Program Director will make calls to every family for whom there was an initial meeting as close as possible to provision of services monthly to monitor the provision of services delivery and to resolve any issues and all concerns. Also, to families that may have expressed concerns in prior phone call Furthermore, the QA professional will select 10% of a sample not inclusive of the 100% and converse with parents and or professionals on the delivery of services to the children. The financial health of our organization is important to our successful operations. We will perform quarterly internal reviews of our fiscal health and annual external audits. Billing Audits will be done on a quarterly basis by the fiscal department and the QA professional against notes/services delivery. In the event of discovery of any wrongdoing by providers WV Early Intervention Department in writing and via telephone call within 24 hours of the discovery. The discovery will be detailed and investigated and reported to the compliance committee. At Beautiful Beginnings Child Development Services LLC we believe that Faith is confidence, but Trust is commitment. From its inception the organization has operated on the principle that regulations are minimum standards to be met or exceeded. As an organization, we define Trust as the provision of excellent services with an expectation



of continuous improvement and commitment. Outstanding service is defined by safe, effective, goal-oriented service delivery.

Our mission: Beautiful Beginnings Child Development Services LLC believes that every person, regardless of his or her race, ethnicity or disability, should be treated with dignity and respect. Because of this belief, we will ensure that every person be afforded the opportunity to achieve his or her full potential through appropriate and individualized programming. Our primary goal is to educate, serve, and support individuals who are diagnosed with developmental or emotional disabilities. We believe that excellence, professionalism, leadership and creativity is the foundation of our success. The agency is committed to promoting individual growth through ongoing training and support. To achieve these goals, Beautiful Beginnings Child Development Services LLC will seek input from families and professionals to continue to improve and enhance the quality of services that we provide as an organization, we strive to maintain high staff retention.

We also implement person-centered policies throughout the organization to help individual participants and their families achieve their individual goals. Part of our Quality Improvement process is to ensure that QA surveys are reviewed upon receipt by Beautiful Beginnings Child Development Services LLC QA staff. Any significant problems will be flagged and brought to the attention of the Quality Assurance Department. Upon review, Quality Assurance will address any issues that need immediate attention based on the comments provided in the survey. The summary of the all survey results, along with a list of comments made are then distributed to senior management for review. Results are discussed and corrective actions are decided upon to improve the quality of services delivered by Beautiful Beginnings Child Development Services LLC. A summary of all survey findings is shared with the supervisors, directors and staff as necessary.

### **Initial Service Coordination Billing Activities (Yes/ No)**

A face-to-face ISC meeting is held with the family within seven calendar days of the referral.

\_\_\_\_\_ All required consents were in the file and signed by the appropriate person.

\_\_\_\_\_ All applicable issues were discussed with the family.

\_\_\_\_\_ The family's third-party insurance coverage (or lack thereof) and Medicaid status was discussed and documented.

\_\_\_\_\_ The ISC has reviewed all options for evaluation and screening with the parent.

\_\_\_\_\_ When referring a family to an evaluation agency, the ISC proactively addresses applicable issues with the family.

\_\_\_\_\_ Once children are found eligible for EIP, the family is given a thorough and timely orientation to the initial IFSP process.

\_\_\_\_\_ The ISC ensured that the initial IFSP meeting was held within 45 days of the child's referral

\_\_\_\_\_ The ISC ensured that the families of non-eligible children received full and timely information about other service options, including Developmental Monitoring.

\_\_\_\_\_ Information provided shall be in the dominant language.

\_\_\_\_\_ Is there written correspondence with or regarding the child/family and documentation of any relevant discussion with parents, other providers, or municipalities regarding the child and family?

### **Ongoing Service Coordination Billing Activities (Yes/ No)**

\_\_\_\_\_ After each IFSP meeting (including initial, amendment IFSP and ongoing IFSP meetings) the OSC ensured that a copy of the IFSP was given to the family.

\_\_\_\_\_ The OSC monitored (at least monthly) that each service type was provided at the frequency and duration listed in the IFSP.

\_\_\_\_\_ The OSC identified gaps in service of more than three consecutive missed sessions and acted to address these gaps.

\_\_\_\_\_ The OSC addressed any situation in which services were not being provided, or when a parent expressed dissatisfaction with the provision of a service.

\_\_\_\_\_ The OSC addressed any instances in which issues were identified in the additional comments section of the IFSP or in the OSC notes.

\_\_\_\_\_ Progress notes and amendments to the IFSP were uploaded into NYEIS prior to the IFSP meeting; if not, there was documentation showing several attempts to obtain them and inform the RO.

\_\_\_\_\_ The OSC informed families of availability of advocacy of services coordinating and monitoring the delivery of services.

\_\_\_\_\_ The OSC updated the family's insurance and Medicaid information.

\_\_\_\_\_The OSC informed families of availability of advocacy of services coordinating and monitoring the delivery of services.

### **Service Provision (Yes/ No)**

\_\_\_\_\_Services started within 14 calendar days

\_\_\_\_\_Documentation showed that the provider notified the service coordinator (SC) in the event of a late start in services.

\_\_\_\_\_The type, frequency and duration of the services were delivered as per the IFSP and if not, there was appropriate documentation that the reason was family driven, or was an event outside the provider's control.

\_\_\_\_\_Services were provided as authorized with no gaps, or there was a documented family driven reason.

\_\_\_\_\_If there was a documented gap in service, documentation showed that the SC was notified of the gap and reason.

\_\_\_\_\_The child's parent and SC were notified at least five days prior to a scheduled absence.

\_\_\_\_\_The SC was notified of the dates of absence and the date on which services would resume. Medical providers and/or speech therapists wrote prescriptions, orders and recommendations for services that were valid for the frequency and duration of the current IFSP.

\_\_\_\_\_The appropriate progress notes were forwarded to the service coordinator at least 4 to 6 weeks prior to the expiration of the IFSP.

\_\_\_\_\_Session notes are completed by the assigned qualified personnel and contain all required information.

\_\_\_\_\_If a provider is unable to deliver 3 scheduled sessions of services, the service coordinator documents contact with child's parent/family to determine the reason and will notify the EIOD and document such.

### **Transition or other Transition Options (Yes/ No)**

\_\_\_\_\_The families of children who are 30 months or older when referred to EIP (dually age-eligible) are given full information about their options.

\_\_\_\_\_The SC begins the transition process with the family in a through and timely manner

\_\_\_\_\_The SC had a discussion with the family about transition prior to the IFSP meeting closest to child's second birthday.

\_\_\_\_\_All applicable issues were discussed with the family including other transition options (OPWDD, Health Home, etc.).

\_\_\_\_\_The SC ensures that parents are given full information about the consent to notify CPSE of eligibility and consent for the transfer of appropriate evaluations, assessments, IFSP and other pertinent records.

\_\_\_\_\_The SC prepares for a transition conference, including the appropriate parties.

\_\_\_\_\_Transition plan is in place for children leaving EIP for any reason before the age of three (not CPSE).

### **Child Record Keeping (Yes/ No)**

\_\_\_\_\_Name and license, certification, or registration number of the professional who directly delivered the diagnostic or treatment service.

\_\_\_\_\_A copy of the Individualized Family Service Plan (IFSP)-Documentation of IFSP meeting andAuthorization from the municipality to deliver the service.

\_\_\_\_\_Evaluations as needed (Core and Supplemental)

\_\_\_\_\_Written orders or recommendations from specific medical professionals when required for the service being provided (OT, PT ST/Feeding).

### **SC Caseload (Yes/No)**

\_\_\_\_\_If the SC is full time, SC caseload does not exceed 50.

### **Training/Education Requirements (Yes/ No)**

\_\_\_\_\_Does the SC meet one of the minimum service coordination experience credentials?

- Two years' experience in service coordination activities as delineated in regulation (voluntary or part-time experience which
- can be verified will be accepted on a pro-rated basis); or,

- One year of service coordination experience and an additional year of experience in a service setting with infants and toddlers with developmental delays or disabilities; or,
- One year of service coordination experience and an Associate's degree in a health or human service field; or
- A bachelor's degree in a health or human service field.

Did the SC attend introductory service coordination training prior to providing services?

Has the SC completed the five family centered training modules?

10 hours of Professional Development training annually for SC

Has the SC met all the SDOH regulatory trainings?

Documentation of training records (must have certifications from training classes)

Training year starts on start date and ends on anniversary date.

**Non-Billable SC Activities (Yes/ No)**

\_\_\_\_\_ Coping, faxing, preparing letters, reviewing session notes, case recording, leaving messages, emails and or progress reports

\_\_\_\_\_ Usage of WV EI and Database System

\_\_\_\_\_ Time Spent waiting for an individual and does not ensure contact with a child and or the collateral Travel time in any manner either to or from IFSP meetings

\_\_\_\_\_ Conducting Family Assessment

\_\_\_\_\_ Discussion evaluation results with child's medical provider

\_\_\_\_\_ Providing written notice to families regarding such denial of eligibility, upcoming IFSP meetings, proposals to change IFSP Services

\_\_\_\_\_ Taking Steps to appoint a surrogacy parent for a child in foster care

\_\_\_\_\_ Writing rationale for an increase or decrease in services

\_\_\_\_\_ Observing providers working with children for evaluating the quality of services

\_\_\_\_\_ Contacts that are less than 6 minutes

\_\_\_\_\_ Leaving a message that does not add up to 6 minutes

\_\_\_\_\_ Contact information for Parent or caregiver

\_\_\_\_\_ Section for correspondence

### **Family Centered Services (Yes/ No)**

\_\_\_\_\_ Have the SC coordinators been trained on how the value outcomes are developed.

\_\_\_\_\_ Upon interview (via phone) was the individual able to recite what their outcomes are and if they were involved in the process?

\_\_\_\_\_ Upon interview (via phone) was the individual's family/advocate/guardian aware of their outcomes?

\_\_\_\_\_ Is there documentation confirming that a family member/surrogate was present at their IFSP meeting?

\_\_\_\_\_ Are all valued outcomes sufficiently clarified in the profile section of the IFSP?

\_\_\_\_\_ Do the monthly summaries reflect satisfaction, health & safety needs, significant changes, and necessary follow up?

\_\_\_\_\_ Is the team balancing the individual desires/choices while ensuring protections & safeguards?

\_\_\_\_\_ Upon interview did the individual state who they wanted or didn't want to attend IFSP meetings? Are there invites to validate this.

\_\_\_\_\_ Is the IFSP valued outcome checklist/tool being completed prior to meeting.

\_\_\_\_\_ How are the outcomes being supported?

\_\_\_\_\_ Has the SC advocated at an individual's semiannual IFSP meeting the progression with outcomes? Is there documentation within the IFSP review discussion progression with regards to identified outcomes?

\_\_\_\_\_ Are the IFSP's conducted in parent language.

\_\_\_\_\_ Are there satisfaction survey's regarding SC services and address areas of concern.

### **Service Coordination Notes (Yes/ No)**

\_\_\_\_\_ Written in chronological order and contemporaneous

\_\_\_\_\_ Twice annually a written statement must be present stating the IFSP.

\_\_\_\_\_ Notes include type of service, time start and time ending, and a detailed summary of services provided relative to the IFSP.

\_\_\_\_\_ Is there documentation that progress notes are transmitted to the Regional Office prior to the IFSP meeting.

\_\_\_\_\_ SC name, signature, title and date.

\_\_\_\_\_ Maintains original session/service coordination notes that include minimum content requirements. Is there documentation of 3, 6, 9, 12 provider progress notes.

\_\_\_\_\_ Maintain documentation in case notes of all efforts to identify providers to deliver services.

\_\_\_\_\_ Document in service coordination notes all circumstances related to the start of IFSP services including all factors that affect timeliness, especially family circumstances and all steps taken to facilitate timeliness.