Early Intervention Guidebook

Leading the way to ensure individuals and families affected by disabilities can live, learn, work and play to their full potential.
WELCOME

Welcome to Easterseals Northern California (ESNorCal). If you received this Guidebook, you are probably the parent of a child receiving Early Intervention services directly from ESNorCal.

OUR PROMISE TO YOU
We will provide exceptional, individualized, family-centered services to empower children ages 0-3 with disabilities or whom are at risk to achieve their goals and meet developmental milestones.

WE PROMISE TO:
• listen to and respect your perspectives and choices.
• provide clear and transparent communication.
• communicate and share complete and unbiased information with you in ways that are useful.
• integrate your knowledge, experiences, values, beliefs and cultural backgrounds into the planning and delivery of services.
• encourage and support your participation in your child’s care.

WHO IS A “PARENT”?
We know that parenting sometimes involves more people than just biological parents. We use the word “Parent” for any caregiver who provides parenting and care to someone.

Set aside quiet time to review the Guidebook. The information in this Guidebook is important. Take time to read all of the information and sign the forms.
EARLY INTERVENTION GUIDEBOOK
CONTENT AND ORGANIZATION

In this Guidebook, you will find information about:

• ESNorCal Clinical Services
• Early Intervention treatment
• Your role in treatment planning

WHEN YOU HAVE QUESTIONS
If you have any questions, contact a member of your child’s supervision team. We want to make sure all Clients, Parents and others in a Client’s life understand how ESNorCal can improve the lives of people with disabilities.

WHAT’S NEXT?

STEP 1: Review the contents of this Guidebook.
STEP 2: Review, sign, date and return the following forms in order to receive services.

• Consent to Services
• Consent to Photography and/or Video Recording, Authorization to Use/Disclose Photograph(s)

IMPORTANT:
Throughout this Guidebook, you will see “Tip” sections. Tips offered in the Guidebook include helpful information and proven parenting strategies.
AN INTRODUCTION TO OUR CLINICAL SERVICES

WHO IS EASTERSEALS NORTHERN CALIFORNIA?
Easterseals Northern California (ESNorCal) is an affiliate of Easterseals, Inc. We have proudly served thousands of individuals and families in many Northern California counties. ESNorCal is a 501(c)(3) nonprofit organization with a mission to lead the way to ensure individuals and families affected by disabilities can live, learn, work and play to their full potential.

ESNorCal provides comprehensive, evidence-based therapies to individuals living with disabilities from birth through adulthood and their families.

WHAT FUNDING SOURCES DO WE ACCEPT?
ESNorCal partners with Kaiser Permanente, the California Regional Centers and other Funding Sources. Together with these partners, we provide treatment services. For a complete list of services that we offer, please visit esnorcal.org.

key terms

Key Terms used in the Guidebook help explain important topics throughout. You can also find the Key Terms at the end of the Guidebook.

Early Intervention
Early Intervention is a play-based, inter-disciplinary, and family-centered model for children age 0-3 diagnosed with or showing signs or risk of a developmental delay.

Client
Any individual who receives necessary treatment services from ESNorCal.

Evidence-Based Therapies
Treatments that are:
• Shown to be effective
• Part of well-designed research

Funding Source
The organization that is responsible for some or all of the payment for services which are provided through ESNorCal.
WHAT IS THE NATURE OF THE SERVICES?
Everyone is unique. That's why Clients at ESNorCal receive services that are personalized and designed specially to meet their particular needs. A treatment team is assigned to each Client. This team is responsible for creating each Client's treatment plan.

ESNorCal teams include professionals called Practitioners. These Practitioners are experts in working with individuals 0-3. The Lead Early Interventionist is responsible for addressing your concerns or questions, and may occasionally visit a session.

Every practitioner at ESNorCal has advanced training and/or is certified according to the laws and regulations for providing EI.

TYPES OF SERVICES
There are three types of EI services offered to Regional Center clients:
- Direct Infant Development Services 1 to 1
- Learning Focus Groups 3 to 1
- Speech 1 to 1

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**key terms**

**Lead Early Interventionist**
Oversees the Early Interventionist (EI).

**Early Interventionist (EI)**
Any individual who provides EI services to ESNorCal Clients.

**Sessions**
The time during which a Client receives services from ESNorCal.

**Services**
Any clinical service (direct or indirect) provided to Clients.
CAN I GET INTERPRETER SERVICES?
Yes! We work with your funding source to provide interpreter services.

PRACTITIONER BACKGROUND CHECK REQUIREMENTS
As a direct care services provider, we must take measures to ensure Client safety. ESNorCal recognizes this fact. To work at ESNorCal, employees are fingerprinted, which is part of the guidelines of the California Department of Social Services. The Department of Justice will notify ESNorCal if any violations occur. This is in effect during the entire time that a Practitioner has a job with ESNorCal. In addition, ESNorCal performs routine screening of all employees to ensure that new hires and existing employees are not on any state or federal exclusion lists.
HIGH STANDARDS AND EXCELLENCE
We are committed to excellence and high standards of clinical care for our Clients. Our Clinical Practitioners are experienced in working with Clients with disabilities.

ESNorCal follows all laws and regulations required for each of our Practitioners’ positions. In addition, we require all Practitioners to participate in ongoing training about:

• the latest research in the field,
• up-to-date treatment approaches and
• cultural awareness and understanding of the diverse populations that ESNorCal serves.

Practitioners also receive direct training through supervision and observation during sessions.

INNOVATION
One of our core values is innovation, or to try out new ways of working. We do this in order to continuously improve our quality of care. We also do this so that our Clients and families will be satisfied. Throughout treatment we may ask you to use one of our apps. For example, we have smartphone and tablet apps. These apps can help you and your loved one who is receiving services stay informed about treatment.

PHOTOGRAPHY AND VIDEO RECORDING
When it is possible, ESNorCal uses technology to raise the level of care that we offer to Clients and families. This means using video or photography during treatment—or both. They are important tools to improve the quality of care. Video and photography enable Practitioners to train and share information with Clients or Parents. We strive to use every available and appropriate way to improve services and achieve treatment goals. Your consent to photograph and video record treatment is an important step to help us accomplish this goal. However, this is voluntary. You may decline to sign this consent or have the right to revoke consent at any time without impact on treatment, payment or eligibility for benefits.

Please see the form called Consent to Photography/Video Recording Authorization to Use/Disclose Photograph(s).
AN INTRODUCTION TO EARLY INTERVENTION

OUR SPECIALITY
Our early intervention services offer a comprehensive, research-based treatment program for children from birth to three years of age diagnosed with or showing signs of developmental delay, or who may be considered high risk of having a developmental delay. We use a collaborative and family-centered model of early intervention providers. All services are provided in the child’s natural environment, including the child’s home, family daycare, childcare center, or other community-based site, including one of ESNorCal’s clinical offices.
OUR CLIENT-CENTERED AND FAMILY-INVOLVED APPROACH

We believe in a Family-centered philosophy

Each Client, family member and caregiver is an important member of the treatment team.

You know your child best, so we try to recognize your knowledge and experience. This will help us reach better outcomes for someone with a disability like ASD.

In order for treatment to work well, Parents and others who are close to the Client need to participate in treatment.

All caregivers should understand all treatments. It is helpful for everyone involved in your child’s care to understand all the treatments being delivered. If your child gets medical or educational services from several providers, let us know what other services are being received.
CLIENT’S VOICE
Every Client has a voice. Our young Clients may not be able to say directly what they want and need. Others may communicate through their behavior, but not with words. No matter how a Client expresses his or her wants and needs, we believe it is very important to listen to the Client’s voice. As a Client goes through assessment and treatment, the ESNorCal treatment team will always listen to the Client’s voice.

COLLABORATIVE APPROACH
How do we serve Clients better? We encourage Practitioners from different professional disciplines to work together and share their skills. Through this collaboration, we are able to help Clients and families reach the goals that they desire. Besides input from the ESNorCal team, we may ask other professionals in a Client’s life, like a daycare provider or pediatrician, for their suggestions. Professionals, family members, friends and the Client all share valuable information. We want to hear about the Client from all the important people in his or her life.

tip
Don’t go it alone! Join a parent support group online or in person. Reach out to friends, family or your religious community for support.

key terms

Responsible Adult
A person who is a guardian or any individual who is:
• 18 years old or older
• capable of providing care for the Client in the Parent’s absence
• approved by the Parent to provide care for the Client in the Parent’s absence

Guardian
Someone who is authorized to make medical decisions for a Client or on behalf of a Client. This could be a parent. It may also be another person responsible for the Client’s medical decisions – like a grandparent or legal guardian.
SIBLINGS, FRIENDS AND PEERS
At ESNorCal we believe brothers and sisters, friends and peers also matter. We may involve siblings, friends and others who are important in a Client’s life in treatment. Our Practitioners will ensure treatment sessions include appropriate people who will benefit the Client. It is important for ESNorCal Practitioners to be able to focus attention on the treatment of the Client and Parent or caregiver. For that reason, a Responsible Adult must supervise the Client’s siblings and peers at each session.

INDIVIDUALIZED TREATMENT AND FAMILIES
We try hard to create a unique treatment plan to serve the needs of the Client. Sessions are focused on not only improving Client skills, but also on empowering the family and caregivers. We encourage families and caregivers to be active participants during the entire treatment process. This includes each and every session. Our evidence-based treatment is based on the Family Guided Routines Based Intervention model, which encourages families to address goals within their daily routines.

FAMILY COACHING
Practitioners who are assigned to the Client’s case will work with the Client, family and caregivers. Caregivers are expected to fully participate in weekly sessions. Practitioners will offer training and coaching on how Clients and caregivers can work on treatment during and outside of sessions. Participation may include coaching on how to facilitate development by integrating strategies into the family’s daily routine and strengthening the relationships between the child and caregiver.
EARLY INTERVENTION ASSESSMENT & TREATMENT PLAN DEVELOPMENT

As part of your child’s EI Treatment Plan, we will perform assessments over several appointments with you and your child in order to better understand his or her current medical needs. You are a very important part of this process and we will ask for your feedback about your child and their treatment plan, and also talk to you about when your child will graduate or transition from EI treatment.

**ASSESSMENT**
- Assess Client’s Current Developmental Needs

**TREATMENT PLAN**
- Establish Treatment Objectives
- Submit to Regional Center
- Review with Guardian

**TREATMENT**
- Treatment Sessions
- Guardian and Client Provide Feedback

**FEEDBACK**
- Update Treatment Plan with Feedback

**GRADUATION**
- Discuss Graduation / Transition from Treatment
YOUR CHILD’S TREATMENT PATH WITH ESNORCAL

WHAT IS TREATMENT?
- a short-term opportunity
- intended for gaining skills and resources that are needed in order to manage the developmental delays
- an important time for Clients and families to build their skills
- different for every Client who comes to ESNorCal for treatment

TREATMENT
The first treatment period usually lasts about six months.
During treatment, the team working with your child will follow the treatment plan developed during the IFSP — Individual Family Service Plan.
If you are concerned about the treatment plan at any time, or if your child is not making progress, please talk with your supervising team.

REASSESSMENT
Every six months we reassess your child. At this reassessment, we look at the same measures we used during the first assessment. This is how we can see how much progress your child has made. At each reassessment, we will talk about graduation from treatment or transition to another type of treatment.

Don’t forget to schedule time for your child’s sessions. When beginning services, look at your family’s daily schedule and determine if it needs to be changed in order to make time for your child’s treatment sessions.
YOUR CHILD'S TREATMENT PATH WITH ESNORCAL-REGIONAL CENTER AS FUNDING SOURCE

WHAT IS TREATMENT?
• short-term opportunity to address needs outlined by the initial assessment
• intended for gaining skills and resources that are needed in order to manage symptoms of autism, other developmental disabilities, or speech and language disorders
• an important time for Clients and families to build their skills
• different for every client who comes to ESNorCal for treatment

TREATMENT
The first treatment period typically lasts until the client’s 3rd birthday, when they are either moved to another program or discharged from ESNorCal treatment.

During treatment, the speech therapist working with your child will follow the treatment plan developed during the assessment.

If you are concerned about the treatment plan at any time or if your child is not making progress, please talk directly with your treating therapist or the lead speech therapist.

PROGRESS REPORTING
Every 6 months we monitor progress informally or through formal assessment measures. At this time, we look at how much progress your child has made. We will talk about when graduation from treatment or transition to another type of treatment may occur.
YOUR CHILD’S TREATMENT TEAM

ESNorCal uses a tiered Practitioner Treatment Team approach, an industry best practice. We encourage you to interact with all members of your child’s treatment team.

YOUR CHILD’S PRACTITIONERS

Early Interventionist
• Provides direct treatment based on your child’s treatment plan

Lead Early Interventionist
• Supervises the clinical work
• Oversees all practitioners who are on the team

ESNORCAL CLINICAL LEADERSHIP
• Oversees service delivery quality and manages employees
• Oversees program operations and clinical quality
• Oversees a region’s office and services
• Provides clinical consultation for high needs cases
• Supervises Practitioners and ensures service quality
• Acts as an escalation point for any concerns or questions
DISCHARGE
Being discharged means leaving the program. Planning for the discharge process starts as soon as the Client begins receiving services. A Client graduates or is discharged when he or she reaches the age of three.

In some cases, however, we may need to discharge a Client for other reasons, such as not following ESNorCal or funding source policies and requirements. We also may discharge or transfer to another vendor if treatment is not progressing as recommended.

Here are some examples of why a Client may be discharged:

• Attends/participates in sessions inconsistently and/or cancels too many sessions
• Often arrives late to treatment sessions or leaves sessions early
• Is unresponsive to contact attempts (by phone, email, etc.)
• Does not provide needed documentation related to consent, custody or other issues that affect our ability to provide treatment
• Refuses clinically recommended treatment
• Tells ESNorCal that they do not want services anymore
• Moves to a home that is not in ESNorCal’s or the Funding Source’s coverage area, and can no longer access services provided within the coverage area

ESNorCal works with Clients and Parents as much as possible to take care of any issues before any Client is discharged. When it is possible and is recommended, the BHPN may work with the Regional Center to connect a Client to another vendor for treatment.

Understand the plan. Understanding the treatment plan is important for your child’s success. Just ask us if you don’t understand part of the plan. Your child’s supervising team is here to help you understand your child’s treatment plan.
AN IN-DEPTH LOOK AT TREATMENT SESSIONS

TREATMENT SESSIONS
A Responsible Adult over the age of 18 must be present at all sessions.

A Responsible Adult must take care of:
• feeding
• bathroom routines
• monitoring the health and safety of the Client
• monitoring the health and safety of any peer or sibling under their supervision
• the Client’s safety during an emergency or crisis situation

The Responsible Adult is also responsible for communicating feedback and information about treatment to the Client’s Parent if the Parent is not present at the session.

IMPORTANT: RESPONSIBLE ADULT REQUIRED
Your session will be cancelled if no Responsible Adult is present at any time during a session outside of ESNorCal clinic sessions

SCHEDULING A TREATMENT SESSION
We want the Client and the Client’s family to be satisfied. We will make every effort to work around the Client or the family’s scheduling needs the home, community, daycare, preschool, family homes, etc. However, because ESNorCal provides services to a large number of Clients, we can’t always accommodate every scheduling preference. Please read our scheduling policy and let us know if you have any questions.

Keep phone numbers handy. Add the phone numbers for each of your child’s supervising team members to your phone.
IMPORTANT: PRACTICE, PRACTICE, PRACTICE!
Treatment is not a long-term solution but rather a short-term opportunity to obtain the skills and resources needed to manage the symptoms of autism or other developmental disabilities. The more you help your child practice new skills, the more independent your child will become.

IN-BETWEEN SESSIONS
Your Early Intervention team will give you things to work on between sessions and throughout the treatment periods. Working on skills between sessions will make a big difference in your child’s response to treatment.

Practice the skills your child is learning in treatment. Make them part of your child’s everyday routine. For example, you can read picture books at home and have your child point to various pictures in the book if the treatment team is working on increasing your child’s ability to identify objects.

WORKING WITH YOUR CHILD BETWEEN SESSIONS
• Set aside time to work on skills
• If you have other young children in the home, find someone who can watch them while you are interacting with your child receiving EI services
• Work in small amounts of time. Stop if you or your child get tired
• Take advantage of incidental opportunities. This is something that happens while you and your child are doing daily tasks. For example, perhaps your child is working on asking for items or requesting. If you know they want something, like a cookie, keep it just out of reach so they have the opportunity to ask for it when they want it
• Ask us if you run into a problem and aren’t sure how to handle it! Your child’s treatment team will help you find a solution that works for you and your child

Focus on the desired behavior. Explaining or trying to reason with an upset child is difficult. For many parents, this goes against how we would want to respond. For example, we tend to want to reason, explain and force. Instead, focus on the behavior you want to see. Simple prompts such as, “When you are calm, we will go to the park,” can help.
TREATMENT SESSION SETTINGS AND LOCATIONS
One way that we can build a Client’s skills is to provide treatment services in the Client’s natural environment. ESNorCal may offer sessions at the Client’s home, community parks, daycare, preschool or family homes. When it is clinically appropriate and when it is safe and possible, we will hold sessions in community settings such as a park. The session location must be built into the Client’s treatment plan and align with the Client’s treatment goals.

TREATMENT SESSION SETTINGS AND ENVIRONMENT
We care about the safety of our Clients and staff. We reserve the right to evaluate any setting before approving it. We also reserve the right to re-evaluate to determine if the location is suitable at any time. The setting can be rejected at the sole discretion of the staff member if an ESNorCal employee feels an environment is unsafe, poses a health hazard or could subject the Client or staff to any kind of harassment.

ESNorCal reserves the right to discontinue providing services in a home or in any other environment. In these cases, a supervisor or manager will directly address the problem with the Client, Parents or other Responsible Adult who can help resolve the safety issue.

SPECIAL COSTS
When a Client or Parent requests the participation of Practitioners during a session in an activity or setting that is outside of the home or clinic, the Client or Parent is responsible for any cost required for the Practitioner’s participation (example: zoo or park entrance fee, etc.). This cost is to be paid at the time of the activity.

In addition, ESNorCal and Practitioners are not financially responsible for any property damage incurred during the course of, or as a result of, treatment in the home or another setting.

TRANSITION TO SCHOOL SETTINGS
ESNorCal Practitioners may participate in any IFSP meetings but not IEP meetings. The Client or Parent may request reports from ESNorCal to share with preschools or other programs when needed.
IMPORTANT: LIMITS ON ESNORCAL’S PRESENCE

Allowing a Client to attend or participate in any particular setting such as preschool, daycare, school, lesson or class cannot be dependent on ESNorCal’s presence at that location.

SCHEDULING

We understand how busy life can get at times. Please review policies to learn about how we schedule sessions for our Clients and if there is flexibility to fit your family’s schedule. If you have any questions about our policies, contact your Senior Clinical Manager.

Availability: When your child is able to have services outside of any legally mandated activities, such as school.

Preference: Any preference for schedule times will be considered based on clinical needs and treatment plan recommendations.

Declined Hours: Any scheduled hours offered to meet authorized treatment hours that are not accepted by the Client and Parent due to preference will count as declined hours. Just because hours are declined once does not mean they have to be declined in the future. If you initially decline hours but later on can accept the declined hours, you may do so.

Session Times: Each EI session is 1 to 1.25 hours long.

Schedule Changes: Contact your EI to reschedule or cancel ASAP.
IMPORTANT: SCHEDULE CHANGES
Sometimes ESNorCal needs to make a schedule change. When this happens, the scheduler and/or supervisor/manager will contact the Client or Parents.

CANCELLATION POLICY
Continued progress to achieve treatment goals is important to ESNorCal. Depending on your Funding Source, progress may also be a requirement to continue receiving funding for treatment. Frequent cancellations can have a negative effect on our ability to help a Client make progress. We understand that either the Client or ESNorCal may need to cancel sessions on occasion. For example, a session may need to be cancelled due to illness. However, when the number of cancellations, for any reason, interferes with the treatment progress, ESNorCal will make a reasonable effort to work with the Client or Parents to find the most appropriate solution. We may also consult with the Funding Source regarding ending treatment if the cancellations are excessive or if they interfere with the progress of treatment.

WHAT TO DO IF YOU HAVE TO CANCEL A TREATMENT SESSION
Follow these guidelines when cancelling a session:

• Provide as much notice as possible. Keep in mind that 24 hours or more is required
• Provide details regarding the cancellation(s) – the number of sessions, dates, time, and reason
• When asking for a make-up session, refer to the guidelines for make-up sessions
WHEN A PRACTITIONER CANCELS A TREATMENT SESSION
We want to ensure cancellations on the part of the Practitioner don’t affect Client treatment in an adverse way. We encourage Clients and Parents to notify the assigned supervisor or manager of any unplanned gaps in treatment sessions, including a Practitioner’s tardiness.

MAKE-UP SESSION GUIDELINES
All make-up sessions are subject to the expectations of your specific Funding Source as well as the availability of the Practitioners.

For Client-initiated cancellations, ESNorCal will offer a make-up session only if the required advance notice is provided and Practitioners are available. Keep in mind that 24 hours or more advance notice is required.

For ESNorCal Practitioner-initiated cancellations, ESNorCal will make every effort to provide a make-up session when possible.
SAFETY COMES FIRST

ENSURING THE SAFETY OF CLIENTS AND PRACTITIONERS
We want to ensure the health and safety of all Clients and Practitioners. To reduce health and safety risks during treatment, it’s important to follow all policies, laws and regulations related to health and safety, including our Sick Policy.

SICK POLICY
ESNorCal will use its best judgment to decide if treatment should continue when a Client or Practitioner is ill. Sessions must be cancelled when a Client is ill. The Client should be free of symptoms for 24 hours before resuming scheduled sessions. Sessions should be cancelled if a Client is sent home or stays home from school, daycare or work due to signs of illness, unless there is documentation provided by a medical provider stating that the Client is well enough for a session.

If anyone else in the family, home or session environment is experiencing any signs of illness, we ask that a safe distance be maintained between the individual and Practitioner to prevent transmission of any illness.

If the Client or anyone in the Client’s home has a highly contagious disease, such as but not limited to, Pink Eye, Strep, Impetigo (skin infection) or Hand-Foot-Mouth Disease, sessions must be cancelled. A note from a medical provider may be requested by ESNorCal prior to resuming services.

If anyone in the home has head lice, please let us know and cancel sessions until it can be treated and cleared.

IMPORTANT: SICK POLICY
ESNorCal requires all Clients and Practitioners to strictly abide by the terms of the Sick Policy. Sessions will be cancelled and rescheduled if there is a risk of spreading illness and/or infection.
RESPONSE TO UNSAFE CLIENT OR FAMILY BEHAVIOR
With input from Parents, Practitioners develop treatment goals. They may also provide coaching on how to respond to unsafe and unhealthy behavior in the most effective way. If more support is needed, we’ll refer for alternate or additional services.

If Client behavior escalates to a point that makes Practitioners feel unsafe, ESNorCal encourages Practitioners to remove themselves from any perceived danger. In the event a Client is in immediate danger to themselves or others, ESNorCal staff will call 911.

TRANSPORTATION GUIDELINES
ESNorCal Practitioners are responsible for their own transportation. Our Practitioners can neither provide transportation to Clients and Parents nor can they accept transportation from Clients and Parents.
YOUR RIGHTS AND RESPONSIBILITIES

YOU HAVE THE FOLLOWING RIGHTS

• To receive services in a manner free from abuse, retaliation, humiliation, neglect, financial exploitation or any other type of exploitation

• To receive services that are sensitive to age, gender, race, cultural or religious preferences, health status and physical ability

• To receive information that allows Clients and Parents to make informed consent before starting services

• To refuse services offered after being notified of the benefits, alternatives and consequences

• To be an informed participant by receiving information regarding services in a reasonably prompt and confidential manner

• To have the Client’s records protected as required by applicable privacy law at all times, outlined in the Notice of Privacy Practices

• To receive relevant information about individuals providing services as allowed by organizational policies and applicable privacy laws

• To contact the BHPN Customer Service Department to file a complaint or grievance without fear of retaliation or barrier to service

PARTICIPATION IN LEGAL MATTERS

Sometimes families who come to ESNorCal for services are involved in legal matters such as divorce. While we understand that these situations can be stressful for Clients and Parents, it is important to know that we will remain neutral and not participate in any legal matters or disputes, including those involving Clients, unless required by law.
MANDATED REPORTING LAWS IN CALIFORNIA
Child Abuse and Neglect Reporting Act (CANRA) requires any ESNorCal Practitioner to report any suspected abuse or neglect of any child. This could include a Client’s siblings.

Elder Abuse and Dependent Adult Civil Protection Act requires any ESNorCal Practitioner to report any suspected abuse or neglect of a dependent adult. A dependent adult is anyone who, because of their physical or mental limitations, cannot care for themselves. This includes some adults with ASD.

CONSENT TO SERVICES
Obtaining valid, informed consent for services is a necessary step in providing services to our Clients. This is especially true when services may be based on a medical model and medical necessity. Clients and Parents must provide written consent for the services prior to receiving them.

Because obtaining accurate and complete documentation is essential to starting and/or continuing services, it is the responsibility of the Parent to:

• Provide current, accurate information and/or documentation
• Notify ESNorCal about any custody or decision-making authority issues
• Update ESNorCal with relevant information if it changes
• Young clients are not able to make their own treatment decisions. Under California law, family and/or other caregiver participation becomes part of all treatment plans. In addition, depending on the Funding Source of treatment, family or caregiver participation may be required for continued funding.

JOINT CUSTODY/DECISION-MAKING AUTHORITY
In cases involving joint custody and decision-making authority of a Client, ESNorCal will assume either party with joint custody has independent authority to make medical decisions for the Client and will primarily rely on the consent of the Parent referring the Client for treatment.

We will not suspend services due to the inability to contact a party holding joint custody. However, if ESNorCal is informed or otherwise reasonably believes that there is a disagreement related to medical decision-making between parties with joint medical decision-making authority, ESNorCal may suspend services for the party until the disagreements are resolved. ESNorCal may, in its sole discretion, require the Parent or any other party who asserts joint decision-making authority to provide a certified copy of the document that establishes that party’s decision-making authority, such as a court order regarding joint legal custody.
HOW TO AUTHORIZE ESNORCAL TO SHARE PROTECTED HEALTH INFORMATION (PHI) AND REQUEST RECORDS

It’s our policy to only send records to Clients or Parents unless we are authorized to send to other parties.

TO GET AUTHORIZATION FORMS:

• Ask your EI treatment team via email, phone call or postal mail

Clients or Parents may authorize ESNorCal to share PHI with an individual or entity by completing the Authorization to Disclose PHI Form.

Clients or Parents may fill out a request to obtain a copy of the Client’s records by completing the Authorization to Release Form.

Clients or Parents may revoke an authorization to disclose PHI except:

1. to the extent that we have already acted in reliance on the authorization or

2. the authorization was obtained as a condition of obtaining insurance coverage and another law provides the insurer with the right to contest a claim under the policy or the policy itself.
FILING A COMPLAINT OR GRIEVANCE
Clients and/or Parents may file a complaint at any time without fear of retaliation. When we receive a complaint, ESNorCal staff works to remedy the concern and prevent an issue from happening again.

STEPS TO FOLLOW IF YOU HAVE A COMPLAINT OR GRIEVANCE

STEP 1
Ask to meet with a member of your child’s supervising team to discuss your concerns. Usually, this is the only step you need to take. We are committed to resolving issues quickly. If you are not satisfied after meeting with a supervisor or manager, please move onto the second step below.

STEP 2
If the discussion with a supervisor or manager does not resolve the issue, talk to a member of ESNorCal’s clinical leadership team.

STEP 3
If the issue is not resolved by the clinical leadership team, contact ESNorCal’s Customer Service Department at CustomerService@esnorcal.org. The Customer Service Department will work with ESNorCal’s Quality Department, you and the treatment team to resolve the issue in an unbiased and ethical manner.

You may also contact the Compliance Help Line at 1-833-44-PROTECT to report any concerns.
COMMON TERMS USED DURING TREATMENT SESSIONS

The following are definitions of commonly used terms found in this Guidebook.

**ASSESSMENTS:** Every six months a development assessment will be administered by the Early Interventionist in order to monitor the child’s progress and current developmental levels.

**AVAILABILITY:** When the Client is able to have services.

**CLIENT:** An individual who receives treatment services from ESNorCal.

**EARLY INTERVENTION:** The ESNorCal Early Intervention program provides services to infants and toddlers (birth to age 3) with developmental delays or who are at risk for delay.

_Early interventionists_ monitor a young child's developmental milestones and support the family and caregivers in providing developmentally appropriate activities, materials and environments to best support the child's overall development and well-being.

**EVIDENCE-BASED THERAPIES:** Treatments that have been shown to be effective through peer-reviewed, well-designed research.

**PARENTS:** A Client’s Parent, Guardian or Legal Representative.

**PRACTITIONER:** Any professional who provides services to ESNorCal Clients.

**PREFERENCE:** Any preference for schedule times. These will be considered based on clinical needs and Treatment Plan recommendations.

**REGIONAL CENTER:** Early intervention services are funded through the local Regional Center. ESNorCal contracts with the Regional Centers to provide in-home services for all eligible clients.

**RESPONSIBLE ADULT:** A person, other than the Parent(s), who is: (1) 18 years of age or older; (2) capable of providing care for the Client in the Parent’s absence; and (3) approved by the Parent(s) to provide care for the Client in the Parent’s absence.
**SCHEDULE CHANGES**: ESNorCal will periodically give you the opportunity to update your schedule preferences and availability.

**SERVICES**: Any clinical service (direct or indirect) provided to Clients.

**SESSIONS**: The scheduled time during which a Client receives direct Services from ESNorCal.

**SESSION NOTE**: At each Session, Practitioners will complete a Session Note. A Parent or Responsible Adult must sign each session note. This signature is only a verification that the Session occurred at the times documented. It does not indicate that the Parent or Responsible Adult has reviewed or agreed with the content of the note.

**SESSION TIMES**: Schedules will be offered in specific blocks of time in order to meet the demand for services in the most efficient manner.
ESNORCAL RESPONSIBILITIES & PATIENT/CLIENT INFORMATION AND RIGHTS

The Notice of Privacy Practices, outlined below, identifies:

1) how medical information about you and/or your child may be Used or Disclosed;

2) your rights to access your child's medical information, amend your child's medical information, request an accounting of Disclosures of your child's medical information, and request additional restrictions on our Uses and Disclosures of that information;

3) your rights to complain if you believe your child's privacy rights have been violated; and

4) our responsibilities for maintaining the privacy of your child's medical information.

NOTICE OF PRIVACY PRACTICES

This notice describes how medical information about you may be used and disclosed, and how you can get access to this information. Please review it carefully.

UNDERSTANDING PROTECTED HEALTH INFORMATION AND THE HEALTH RECORD

Medical and mental health treatment information and records are personal and private. The medical and treatment information we create and maintain is known as protected health information, or PHI. We are committed to protecting health information that belongs to you and the Patient/Client.

Medical and mental health treatment information and records are personal and private. ESNorCal is committed to protecting your health information. We are required by Federal and State laws to protect the privacy of your medical information and obtain a signed authorization before we make certain Disclosures.
ESNORCAL'S RESPONSIBILITY FOR YOUR HEALTH INFORMATION

Information Privacy and Security
ESNorCal is required to provide this Notice of our legal duties and privacy practices with respect to medical information. This Notice explains how we may legally Use and Disclose your child's protected health information and your rights regarding the privacy of your child's protected health information. We are required to follow all the terms of this Notice. ESNorCal will post and make the Notice available at all locations, and make it available on the ESNorCal website. ESNorCal reserves the right to change the provisions of this Notice and make it effective for all health information we maintain.

For any questions or additional information, please contact the BHPN Customer Service Department at 855-theBHPN (855-843-2476) or CustomerService@esnorcal.org.

YOUR RIGHTS RELATED TO HEALTH INFORMATION
We are required to follow the terms of this Notice and give you a copy of the Notice. We will post and make the Notice available at all locations and on the ESNorCal website.

Choose a Representative
You have the right to assign medical power of attorney or to have a legally authorized representative exercise these rights on your behalf, and otherwise make choices about your child's health information.

Inspect or receive an electronic or paper copy of the medical record
Upon request, you may inspect and/or receive an electronic or paper copy of the medical records, billing records, and other records that we Use to make decisions about your child's care. We will provide a copy or a summary of your child's health information, usually within 30 days of your request. You also may ask us to forward a copy of your child's health information to a third party. A reasonable copying/labor charge may apply.

Revoke an Authorization to Share or Disclose Health Information
At any time, you may revoke a written authorization that allows us to Use and Disclose your protected health information. The revocation must be in writing. When we receive a revocation of authorization, we will stop sharing your protected health information. Such a revocation will not apply to any information that we have already shared in reliance on your authorization.

We are required by law to retain your medical treatment records, regardless of any authorization to Use or share the information.
Request Confidential Communications
You may request to receive communications related to medical information and services in a confidential manner, and may request that contact is made in a specific way (e.g., phone, email, specific numbers or addresses to send information to, etc.). All reasonable requests will be honored.

Breach Notification
You have the right to receive notification of a breach of unsecured health information, to the extent that it affects your personal health information.

Request to Correct or Amend Paper or Electronic Health Record
You may ask us to correct or amend protected health information about your child that you believe is incorrect or incomplete. We may deny this request after providing a reason in writing within 60 days, if we determine that the protected health information or record that is the subject of the request:

• Was not created by us, unless you provide a reasonable basis to believe that the originator of the protected health information is no longer available to act on the requested amendment;
• Is not part of your medical or billing records;
• Is not available for inspection as set forth above; and/or
• Is accurate and complete.

You do not have the right to have accurate information removed from your record. Any amendments will be an addition to, and not a replacement of, already existing records.

Ask to Limit the Information Used and Shared
You may request restrictions on how we use or Disclose certain health information for treatment, payment or operations.

If health care services are paid in full out-of-pocket, we will abide by a request to not share information about such services, for the purposes of payment or operations, with your health insurer, unless otherwise required by law. We have and reserve the right not to agree to any other requested restriction on Use/Disclosure of the information.

Receive a Copy of this Privacy Notice
You may receive this Notice of Privacy Practices at the time of enrollment, and at any other time by request.
Receive an Accounting of Disclosures of Shared Information
You or your legally authorized representative may request an accounting of all the times we have shared your health information with other persons or organizations, for up to six years prior to the request. The accounting will identify to whom the information was shared, and the purpose for sharing, except for Disclosures made:

- To carry out treatment, payment and health care operations;
- To persons involved in your care or for other notification purposes as provided by law;
- To correctional institutions or law enforcement officials as provided by law;
- For national security or intelligence purposes;
- Incidental to other permissible Uses or Disclosures; or
- Involving only a limited data set (information where certain direct personal identifiers have been removed).

File a Complaint for any Perceived Violation of Privacy Rights
Complaints may be filed for any perceived violation of your privacy rights by contacting ESNorCal’s Clinical Leadership Team or your local Regional Center. No retaliation will result from you making any complaint.

Complaints to ESNorCal may be Filed with:
ESNorCal Compliance HelpLine
1-833-44-PROTECT
(1-833-447-7683)
Online: https://secure.ethicspoint.com/domain/media/en/gui/57698/index.html
Or by email: compliance@esnorcal.org

Complaints to the Department of Health and Human Services may be Filed with:
Office for Civil Rights
1-877-696-6775
Online: https://www.hhs.gov/hipaa/filing-a-complaint/complaint-process/index.html
Or by email: OCRComplaint@hhs.gov
YOUR CHOICES IN REGARD TO YOUR HEALTH INFORMATION
For certain health information, you or your legally authorized representative can choose what ESNorCal can share.

You or your legally authorized representative have both the right and choice to tell us to:

- Share information with family, close friends or others involved in the care
- Share information in disaster relief situations

In the event that you or your legally authorized representative is not able to tell us your choice preference, we may share health information if we believe doing so is in your best interests.

Written Authorization Required Prior to Sharing
You or your legally authorized representative must give us written authorization before we may share your information for the purposes of marketing, sale of your information for any purpose or for most Disclosures of your psychotherapy notes.

TYPICAL REASONS THAT WE MAY USE OR DISCLOSE YOUR HEALTH INFORMATION
Below are the most common instances when we may Use or Disclose your health information.

For Treatment Purposes
Our staff may use and share your health information with others (e.g. primary care doctors) in the provision, coordination or management of your health care.

- Example: An ESNorCal practitioner asks another practitioner about your overall health.

For Health Care Operations
We may use and share your health information to run the organization and improve care.

- Example: Using health information to identify what treatments are most effective in order to improve our services.

Billing for Service
We may share your health information to bill and obtain payment from health plans or other entities, including for determinations of eligibility and coverage and other utilization review activities.

- Example: Giving your information to your health insurance plan in order to obtain payment for services.
Contact for Fundraising Purposes
We may contact you for our fundraising efforts, unless you or your legally authorized representative has requested that you not be contacted.

OTHER REASONS WE MAY USE OR DISCLOSE YOUR HEALTH INFORMATION
We are allowed or required to share your health information as follows, after meeting any applicable laws.

Help with Public Health and Safety Issues
We may share your health information in certain situations for public health or safety, such as to:
- Prevent the spread of disease
- Help with product recalls
- Report adverse reactions to medications
- Report suspected abuse, neglect, or domestic violence, and
- Prevent or reduce a serious threat to anyone’s health or safety.

Research Purposes
We may Use or Share your information for health research.

Complying with Law
We will share information about you if state or federal laws require it, including with the Department of Health and Human Services to ensure compliance with federal privacy law.

Responding to Lawsuits and Legal Actions
We may share health information about you in response to a court or administrative order, or in response to a subpoena.

Addressing Workers’ Compensation, Law Enforcement, Health Oversight and Other Government Requests
We may Use or share your health information for:
- Workers’ compensation claims
- Law enforcement purposes or with a law enforcement official
- Health oversight activities authorized by law
- Special government functions such as military, national security and presidential protective services

Work with a Medical Examiner or Funeral Director
We may share your health information with a coroner, medical examiner or funeral director if you are deceased.
Business Associate Communication

Some of the services we provide are carried out by other people or companies who are known as our business associates. Examples include patient satisfaction surveyors, accountants and lawyers. We may Disclose certain portions of your health information to these business associates so they can do their jobs for us. Each of our business associates are also required by law to safeguard your information.

Your Authorization For Us to Use and Disclose Your Health Information

ESNorCal will obtain written authorization for other Uses and Disclosures of your health information not covered by this Notice. You or your legally authorized representative may revoke such an authorization in writing at any time and we will stop Disclosing your health information that was permitted by the authorization. Any Disclosures made prior to the revocation will not be affected by the revocation.