

Shining Star Therapy

Exceptional Kids deserve Exceptional Therapists!



13400 S. Rt. 59 Suite 116-326
Plainfield, IL 60585-5696
Phone: (815) 267-7334 Fax #: (630) 429-9411

Family Agreement for EI Services with Shining Star Therapy

As parents and caregivers, you are part of your child's Early Intervention team. We want you to be part of the therapy session to the best of your comfort level. We are here for support and education as well as for direct service. Your follow through, carry over and participation in suggested activities is the most important key to success. We want you to voice concern and ask questions. If you have ideas, concerns, or suggestions, please bring them up during our session, or write them down. Communication between the entire team is important. The policies below are meant to keep your services running smoothly as possible.

Sick Policy:

We are aware that children can become sick very quickly and your child's health status may be a factor in how often you will need to cancel or reschedule therapy. We understand this and just would like as much notice as possible. The following is a guideline for what I would consider a time when you need to call and cancel:

- A fever
- Congestion; chest and head congestion and/or other flu like symptoms that are impacting behavior or normal demeanor
- Pink-eye or a body rash
- A severe cry; red or blue in the face and makes a high-pitched whooping noise after coughing
- A known contagious illness
- With all the above symptoms, please be symptom free for at least 24 hours or call and cancel our appointment
- Diarrhea and/or vomiting; Please be symptom free for 48 hours or cancel session

If your child is experiencing any of these situations, they are not going to want to participate in therapy, and it will be a very unproductive session. If you are *unsure*, please call and discuss it with your therapist so they can make a final judgment based on information shared.

Because we work with other children that may be unusually susceptible to germs, this is a very important policy. *In turn, if your therapist is ill, they will call you as soon as possible to cancel and reschedule if possible. We try very hard to prevent being the individual bringing germs into any ones home.*

Cancellations:

We know that situations will come up that make canceling a session necessary. Please call your therapist at least 24 hours before your appointment to allow for adjustments in the travel schedule, or for opportunity to reschedule another child. You can call your therapist directly or the office at (815) 267-7334.

Your therapist will try to reschedule if possible.

If we need to cancel, we will show the same courtesy and call at least 24 hours in advance, unless there is an emergency. We will also call if we are running more than 15 minutes late.

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No Shows:

Not being at home for your pre-scheduled sessions is unacceptable. One time in this situation will be a warning. The second no show will jeopardize your current therapy time. The third will possibly mean being dropped from the therapist's schedule. We want to do everything possible to make therapy a resource and not a burden. Please let us know of any problems you are having with the schedule. We know that a variety of reasons may lead to a schedule difficulty and we would be happy to work through concerns with you.

Billing/Payment:

You will NOT receive any bill for the services and are not responsible for the portion not paid by the insurance. Your family fee through EI system is all you are responsible for during your child's time in the Early Intervention system for the sessions.

If you receive any payments from your insurance company for the services, it is your responsibility to reimburse Shining Star Therapy within 30 days of receipt of payment for that amount and call the office at 815-267-7334. Failure to comply will jeopardize continuity of care.

If your insurance information changes, policy, company, benefits, etc., please let us know as soon as possible for continuity of services.

If you have any questions regarding the explanation of benefits you receive for the services from your insurance company or the central billing office (CBO), please let us know.

Home Carryover Suggestions:

Every session, you will be given ideas for activities to work on with your child until our next visit. These are suggestions which will continue to focus on the areas being addressed in therapy. Follow through with these ideas will help your child to progress. If you do not understand what is being suggested, or it is not going as you expected please talk to your therapist or call Mylene Braggs (owner) at 815-267-7334.

Parent Support:

Sometimes parents feel overwhelmed, angry, sad, or anxious when learning that their child may need early intervention services. It can be a very stressful and confusing time for families. If you feel you need more support as a family over and above your child's therapy, please let us know or call your service coordinator and ask about support groups or individualized support that is available from specialists through early intervention system.

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I, _____ parents/caregiver of _____,
have read the above agreement and all items have been explained to me. I fully understand and agree to all of the
terms and beliefs.

Parent Signature

Date

This message is for the designated recipient only and may contain privileged, proprietary, or otherwise private information. If you have received it in error, please notify the sender immediately and delete the original. Any unauthorized use of this email is prohibited.