Leading the way to ensure individuals and families affected by disabilities can live, learn, work and play to their full potential.
Welcome to Easterseals Hawaii (ESH). If you have received this Handbook, you are likely the parent or caregiver of a child receiving autism services directly from ESH.

Our Promise to You:
We will provide exceptional, individualized, family-centered services to empower people with disabilities or special needs to achieve their goals and live independent, fulfilling lives.

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.
• 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 Handbook to read its important information. Take time to read everything and complete the required forms.
AUTISM SERVICES HANDBOOK
CONTENT AND ORGANIZATION

• In this Handbook, you will find information about:
  • ESH Clinical Services
  • Services that ESH provides
  • Applied Behavior Analysis (ABA) treatment
  • Your role in treatment planning

WHEN YOU HAVE QUESTIONS
If you have any questions, contact a member of your child’s Supervising Team. We want to make sure all Clients, Parents and others in a client’s life understand how ESH can improve the lives of people with disabilities – especially those with ASD.

WHAT’S NEXT?

STEP 1: Review the contents of this Handbook.

STEP 2: Review, sign, date and return the following forms:
  • Consent to Services
  • Client Information
  • Financial Responsibility
  • Scheduling
  • Authorization to Use/Disclose Video Health Information (optional)
  • Authorization to Release Video Recordings containing Protected Health Information (optional)
  • Authorization to Disclose Protected Health Information (optional)
  • Family Survey

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

WHO IS EASTERSEALS HAWAII?
Easterseals Hawaii (ESH) is an affiliate of Easterseals, Inc. We have proudly served thousands of individuals and families across the State of Hawaii for over 70 years. We are part of the Behavioral Health Provider Network™ (the BHPN™), a behavioral health and therapy provider network. ESH 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.

WHAT FUNDING SOURCES DO WE ACCEPT?
ESH partners with HMSA, UHA, UHC, Kaiser Permanente and Tricare. Together with these partners, we provide treatment services. For a complete list of services that we offer, you can visit eastersealshawaii.org.

Key Terms
Key Terms used in this Handbook help explain different topics. You can also find the Key Terms at the end of the Handbook.

**Applied Behavior Analysis (ABA)**
ABA is a process used to help us understand how learning takes place. A wide variety of ABA techniques are used to help Clients with Autism Spectrum Disorder (ASD) learn new skills.

**Client**
Anyone who receives necessary treatment services from ESH.

**Evidence-Based Therapies**
Treatments that are:
- Shown to be effective
- Part of research and evidence-based strategies

**Funding Source**
The organization responsible for paying for some or all of the services a Client receives.
WHAT IS THE NATURE OF THE SERVICES?
Everyone is unique. That’s why Clients at ESH receive personalized and designed services to meet their individual needs. A Treatment Team is assigned to each Client and is responsible for creating each Client’s treatment plan.

At least one member of the ESH Supervising Team leads the Treatment Team. This team may also include professionals called Practitioners. Practitioners are experts in working with individuals with ASD.

TYPES OF SERVICES
There are five types of clinical services your child may receive:

• Parent-Led ABA
• Direct (face-to-face)
• Indirect (treatment development and oversight)
• Telehealth (services via video call)
• Social Skills Groups

Key Terms

Supervising Team
A Clinical Manager (CM), Clinical Supervisor (CS) and Clinical Leadership Team make up the Supervising Team. Every member of this team has advanced training and is a Board-Certified Behavior Analyst® (BCBA®) and a Licensed Behavior Analyst® (LBA®) in the State of Hawaii. In addition, they each work according to the laws and regulations for providing Autism Services. Together, this team makes sure of three things: developing your child's treatment plan, that your child’s treatment plan is followed, and that your child is making progress.

Practitioner
A practitioner is a Board-Certified Behavior Analyst® (BCBA®) or a Registered Behavior Technician® (RBT®) who provides services to ESH Clients.

Sessions
The time during which a Client receives services from ESH.

Services
Any clinical service (direct or indirect) provided to Clients.
PRACTITIONER BACKGROUND CHECK REQUIREMENTS

Consistent with federal and state laws, all ESH employees are subject to background checks and exclusion screening. These checks verify that our employees have no involvement in adverse actions related to fraud, patient abuse, suspension, or other healthcare program-related crimes. ESH also conducts a reasonable and careful background investigation for employees, including a reference check, fingerprinting, and more, as part of the application and hiring process.
HIGH STANDARDS AND EXCELLENCE
We are committed to excellence and high standards of clinical care for our Clients. Our Clinical Practitioners are certified, credentialed/licensed, and experienced in working with Clients with disabilities.

ESH follows all laws and regulations required for each of our Practitioners’ positions. We also require all Practitioners to participate in ongoing training about:
- The latest research in the field
- Up-to-date treatment approaches
- Cultural awareness and understanding of the diverse populations that ESH 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 to improve our continuous 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 with ASD stay informed about treatment.

PHOTOGRAPHY AND VIDEO RECORDING
Whenever possible, ESH uses technology to raise the level of care 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 and families. 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 Consent to Photography/Video Recording Authorization to Use/Disclose Photograph(s) Form).
AN INTRODUCTION TO APPLIED BEHAVIOR ANALYSIS (ABA)

For many Clients who have ASD, a common treatment option is ABA. ABA is a scientific discipline that focuses on the principles of how learning takes place. Many factors can contribute to determining our behavior. One set of characteristics includes both our past and our current environments. Others are biological factors, such as genetics. For example, by rewarding (positively reinforcing) a child who sits at the table with their family at dinnertime, that child will more likely want to sit at the table in the future. Similarly, if a child behaves poorly, the adults that are present can ignore this behavior. The result is that child will be less likely to repeat the action over time.

ABA has consistently been shown to increase skill sets and decrease challenging behavior associated with ASD. Specifically, there is strong evidence supporting ABA’s ability to improve communication and social skills and reduce challenging behaviors.

To support our families, we offer two different approaches to Applied Behavioral Analysis (ABA): Parent-Led ABA and 2-Tier ABA. Let’s explore these more!

- Parent-Led Applied Behavior Analysis puts parents in the driver’s seat of their child’s care and their family’s schedule. With the support of a comprehensive care team, we will train caregivers to support their child with tried and tested ABA disciplines. A Board-Certified Behavior Analyst® (BCBA®) will guide, supervise and teach caregivers how to apply skills during everyday life, making teachable moments more relevant and fun.

- 2-Tier ABA, or paraprofessional-delivered ABA, is a common treatment method for children with ASD that focuses on increasing communication skills, social abilities and decreasing difficult behaviors. At Easterseals Hawaii, this model of ABA is provided by a Registered Behavior Technician (RBT®) who will work directly with your child under the supervision and guidance of a BCBA®.

For both models of ABA, we offer a variety of flexible treatment options, including Parent-Led ABA via telehealth, home-based and community-based 2-Tier ABA to communities around our Honolulu and Kapolei locations, as well as center-based 2-Tier ABA at our center located in Honolulu.
OUR CLIENT-CENTERED AND FAMILY-INVOLVED APPROACH

*We believe in a Client-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. Your input will help us reach better outcomes for someone with a disability like ASD.

Parents and others close to the Client need to participate in treatment in order for it to work well.

**tip**

*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 received.
COLLABORATIVE APPROACH
How do we serve Clients better? First, we encourage Practitioners from different professional disciplines to work together and share their skills. Through this collaboration, we can help Clients and families reach the goals that they desire.

Besides input from the ESH team, we may ask other professionals in a Client’s life, like a teacher or pediatrician for their suggestions. Professionals, family members, friends, and the Client all share valuable information. We want to hear from the Client and all the important people in their life.

CLIENT’S VOICE
While every Client has a voice, some Clients may not have the ability to say what they want and need. Others may communicate through their behavior, but not with words. No matter how a Client expresses their wants and needs, we believe it is very important to listen to their voice. As a Client goes through assessment and treatment, the ESH Treatment Team will always listen to the Client’s voice.

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
A guardian is someone authorized to make medical decisions for a Client or on behalf of a Client. This person 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 ESH, we believe brothers and sisters, friends, and peers also matter. This view means that we may involve siblings, friends, and others significant in a Client’s life in their treatment. Our Practitioners will ensure treatment sessions include appropriate people who will benefit the Client. ESH Practitioners need to be able to focus attention on the treatment of the Client. 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.

FAMILY COACHING
Practitioners assigned to the Client’s case will work with the Client, family, and caregivers to decide the right level of participation to reach the treatment goals. Practitioners will offer training and coaching on how the Clients and caregivers can work on treatment during and between sessions. For example, participation may include coaching on how to respond or when not to respond to certain Client behaviors.
ABA ASSESSMENT AND TREATMENT PLAN DEVELOPMENT

As part of your child's ABA Assessment and Treatment Plan, we will spread assessments over several appointments with you and your child. This method will allow us to understand their current medical needs better. You are an essential part of this process. We will ask you for your feedback about your child, their treatment plan and talk to you about when your child will graduate or transition from ABA treatment.

ASSESSMENT
- Assess Client’s Current Medical Needs

TREATMENT PLAN
- Establish Treatment Objectives
- Review with Parent or Client

TREATMENT
- Treatment Sessions
- Parent or Client Provide Feedback

FEEDBACK & REASSESSMENT
- Update Treatment Plan with Feedback
- Reassessment Based on Clinical Needs and Funder Requirements

GRADUATION
- Discuss Graduation / Transition from Treatment
Don’t forget to schedule enough time for your child’s sessions. When beginning services, look at your family’s daily schedule and determine if it needs to be changed to make time for your child’s treatment sessions.
YOUR CHILD’S TREATMENT TEAM

ESH 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
The following Practitioners may be assigned to your child’s treatment team to work directly with them or supervise their treatment.

Registered Behavior Technician® (RBT®)
- Provides direct treatment based on your child’s treatment plan

Program Supervisor
- Is a Board-Certified Assistant Behavior Analyst® (BCaBA®)
- Supports your child’s treatment plan with regular session visits
- Supervises the RBT’s clinical work

Clinical Supervisor or Clinical Manager
- Is a Board-Certified Behavior Analyst® (BCBA®)
- Meets with the Clients and Parents each month to discuss progress and review treatment plans
- Oversees all Practitioners who are on the team
- Responsible for the development, implementation and overall success of your child’s treatment plan

Clinical Leadership Team (Program Director or Program Manager)
- Is either a BCBA® or Board-Certified Behavior Analyst-Doctoral® (BCBA-D®)
- Oversees a region’s office and services
- Provides clinical consultation for high needs cases
-Suppresses Practitioners and ensures service quality
DISCHARGE

Leaving the program is considered being discharged. The process for planning for the Client’s discharge starts as soon as they begin receiving services. A Client “graduates” or is discharged from the program when we feel that the Client and their family have the skills and resources needed to maintain or continue improvement without our services.

However, in some instances, we may need to discharge a Client for other reasons, such as not following ESH or Funding Source policies and requirements. We also may discharge Clients if treatment is not progressing as recommended.

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

• Attends/participates in sessions inconsistently 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 ESH that they do not want services anymore.
• Moves to a home that is not in ESH’s or the Funding Source’s coverage area, and can no longer access services provided within the coverage area.
• Your child needs services other than the services ESH provides, such as a residential or another type of program.

ESH works with Clients and Parents whenever possible to take care of any issues before any Client is discharged. In addition, when feasible and recommended, we may facilitate a Client’s transition to another provider for treatment.

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

TREATMENT SESSIONS
A Responsible Adult must be present at all sessions, whether they are Home or Community-Based or In-Person or via Telehealth:

• When a Client is under the age of 18
• When a Client is an adult but needs supervision
• Whenever any siblings, peers, or other children under 18 are present, including at the Client's home
• To reinforce your child and to learn strategies used with your child

IMPORTANT: RESPONSIBLE ADULT REQUIRED
We will cancel your session if a Responsible Adult is not present at any time during a session outside of ESH center 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 peers or siblings under their supervision
• The Client’s safety during an emergency or crisis

The Responsible Adult is also responsible for communicating feedback and information about treatment to the Client’s Parent.

Keep phone numbers handy. Add the phone numbers for each member of your child’s supervising team to your phone, along with the ESH Autism Services front desk number 808-523-8188, the BHPN’s Customer Service number 855-the-BHPN (855-843-2476) and email address customerservice@theBHPN.org.
CENTER-BASED TREATMENT SESSIONS
ESH provides center-based treatment services at its center in Honolulu. A Parent or Responsible Adult is not required to be present during center sessions after signing in their child unless the session includes any siblings, peers, or other children under 18.

ESH Honolulu Autism Services Center
Aloha United Way Building A
200 North Vineyard Boulevard, Suite A-600
Honolulu, HI 96817
808-523-8188

When dropping off your child at our Honolulu center: Please escort your child into the building and sign in at the front desk for safety and security reasons.

When picking up your child at our Honolulu center: A Parent Signature is required on each completed Session Note. A Parent or Responsible Adult must come upstairs to the center 5-15 minutes before the end of their child’s scheduled session to sign the Session Note and sign out their child. We reserve this time for regular communication about your child’s progress, essential to maximizing ABA treatment. When a Parent drops off a client at the center for sessions, they must return to pick up their child at the scheduled pick-up time. A Parent must arrive 5-15 minutes before the end of their child’s session. Timely pick-up is very important so that the Practitioner’s next scheduled responsibilities or sessions can start on time.

SCHEDULING A TREATMENT SESSION
We want you and your child to be satisfied. Therefore, we will make every effort to work around the Client or the family’s scheduling needs. However, because ESH provides services to many Clients, we can’t always accommodate every scheduling preference. Please read our scheduling policy and let us know if you have any questions.

In addition to scheduling sessions at convenient times, ESH also schedules the number of sessions that the Funding Source has authorized. Doing this is called a “full schedule.” Sometimes a Client or family is unable to accept all the hours that are authorized. When this happens, we will consider your needs and schedule fewer hours. Occasionally ESH may not be able to accommodate a full schedule due to your scheduling limitations.
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 disability. Also, the more you help your child practice new skills, the more independent they will become.

IN-BETWEEN SESSIONS

Your treatment team will give you things to work on between sessions and throughout the treatment period. Working on skills in between sessions will make a big difference in your child’s response to treatment.

Practice the skills your child is learning in treatment. If you can, 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.

Key Terms

**Session Note**
At each session, Practitioners will write a Session Note. A Parent or Responsible Adult must sign each session note. This signature is simply a verification that the session occurred at the documented times. It does not indicate that the Parent or Responsible Adult has reviewed or agreed with the Note’s content.

**Full Schedule**
A Full Schedule is the complete number of sessions authorized by the Funding Source.
WORKING WITH YOUR CHILD BETWEEN SESSIONS
• Set aside time to work on skills.
• If you have other young children in the home, find someone to watch them while you are interacting with your child receiving ABA services.
• Work in small amounts of time. Stop if you or your child gets tired.
• Take advantage of unexpected opportunities that happen when you and your child are doing daily tasks. For example, perhaps your child is working on asking for items or requesting. If you know that 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.

Tip
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 want to reason, explain, and force. So 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 to build a Client’s skills is to provide sessions in various settings and locations. For example, ESH may offer sessions at both your home and also one of our centers. In addition, when clinically appropriate, 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 your child’s treatment goals. The supervising team must approve all requests to consider a service location for treatment sessions at least one week before delivering service at that location. We base location approval on treatment plan alignment and staff availability, including all settings outside your home or an ESH center.
TREATMENT SESSION SETTINGS AND ENVIRONMENT
We care about the safety of our Clients and staff. We reserve the right to evaluate any treatment session 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 ESH employee feels an environment is unsafe, possesses a health hazard or could subject the Client or staff to any kind of harassment.

ESH reserves the right to discontinue providing sessions in a home or any other environment. A Supervising Team member will directly address any safety concerns with the Client, Parent, or another Responsible Adult who can help resolve the issue.

Mix up the location of sessions. Some families find that a mix of sessions at home, the community, and the center works very well. Center sessions may give your child the chance to interact and practice social skills with other children. For some Clients, having most or all sessions in the center works well. Discuss these options with your child’s supervising team.

EMERGENCY CONTACTS
In addition to the Client’s Parent(s), we must have at least two Emergency Contacts for each Client. Emergency Contacts should be able to travel to the program site within 45 minutes of being contacted.

In case of an emergency, if we cannot contact the Parent, we will call the first designated Emergency Contact. If we cannot get in touch with the first selected Emergency Contact, we will call the second designated Emergency Contact. If we cannot reach an Emergency Contact, we will call local law enforcement.

You must notify ESH immediately of any changes to your contact information or the designated Emergency Contacts and their contact information.
SPECIAL COSTS
Sometimes a Client or Parent may request their Practitioner to participate during a session with an activity or setting outside the home or center that requires an admission fee. The Client or Parent is responsible for any cost and payment required for this participation at the activity time.

Also, ESH and Practitioners are not financially responsible for any property damage incurred during, or as a result of, treatment in the home or other setting.

PARTICIPATION IN SCHOOL SETTINGS
ABA services may be provided in a school setting during specific times and depending on the Funding Source requirements. As a regular part of medically funded treatment, ESH Practitioners do not participate in Individualized Education Program (IEP) meetings. However, our practitioners may participate in IEP meetings for Clients with prior approval from the Clinical Leadership Team when clinically indicated for continuity of care.

Our practitioners cannot participate as part of the school team; however, they can collaborate with the school team to support a Client across settings. ESH Practitioners may participate only in the portion of the IEP meeting dedicated to discussing the Client’s behavioral programming.

The Client or Parent may also request ESH reports to share with schools or other programs by following the Release of Information process.
IMPORTANT: LIMITS ON ESH’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 ESH’s presence at that location.

SCHEDULING POLICY

We understand how busy life can get at times. Please review our Scheduling Policy below to learn about how we schedule sessions for our Clients. We will make every effort to meet your scheduling preference. However, at times based on practitioner availability, we may not be able to meet that preference. We promise that we will work with you to offer a full schedule that includes all authorized/accepted hours during your child’s times of availability. We update schedules regularly, and we will do our best to make accommodations.

**Availability:** The time when your child can have services outside of any legally mandated activities, such as school.

**Preference:** We will consider any preferred schedule times based on clinical needs and treatment plan recommendations.

**Session Times:** Schedules will be offered in specific blocks to meet the demand for services efficiently.

**Full Schedule:** A full schedule is the number of hours authorized by the Funding Source.

**Declined Hours:** Any scheduled hours in a Full Schedule that the Client or Parent does not accept due to their preference. Just because hours are declined once does not mean they have to be declined in the future. For example, if you initially refuse hours but later can accept the declined hours, you may do so.

**Schedule Changes:** ESH will periodically allow you to update your schedule preferences and availability.

**Approval of Changes:** Changes will be made based on scheduling guidelines and when the Practitioner is available. Requests for schedule changes are never guaranteed. The Scheduler or Supervising Team will contact the Client or Parent regarding any schedule changes requested.

**Treating Practitioners:** The practitioners assigned to your case will be changed regularly. These changes support ongoing generalization of your child’s skill development.
CANCELLATION POLICY
Continued progress in achieving treatment goals is essential to ESH. Depending on your Funding Source, progress may also be a requirement to continue receiving funding for treatment. Frequent cancellations can negatively affect our ability to help your child make progress. We understand that either Clients or ESH may sometimes need to cancel sessions. For example, a session may need to be canceled due to illness. When the number of cancellations, for any reason, interferes with the treatment progress, ESH will make a reasonable effort to work with you and your child to find the most appropriate solution. We may also consult with the Funding Source regarding ending treatment if the cancellations are excessive or interfere with treatment progress.

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

• Provide as much notice as possible. Remember that we require a minimum of 24 hours' notice except for an unforeseen illness or emergency.

• Let the Scheduler at ABAscheduling@eastersealshawaii.org or 808-990-5294 know about the cancellation. Do not communicate cancellations directly to RBT®s and BCBA®s because they do not manage schedules.

• Provide details regarding the cancellation(s) – the number of sessions, dates, time and reason.

• Refer to the guidelines when asking for a make-up session.

WHEN A PRACTITIONER CANCELS A TREATMENT SESSION
We want to ensure cancellations by the Practitioner don't adversely affect a Client’s treatment. Therefore, Clients and Parents are encouraged to notify the Supervising Team of any unplanned gaps in treatment sessions, including a practitioner’s tardiness. ESH will make every effort to either send another practitioner or make up sessions canceled by a Practitioner.

IMPORTANT: SCHEDULE CHANGES
Sometimes ESH needs to make a schedule change. When this happens, the Scheduler or Supervising Team will contact the Client or Parent.

NEED TO CANCEL A SESSION?
Email ABAscheduling@eastersealshawaii.org or call 808-990-5294 to let the Scheduler know about the cancellation.
MAKE-UP SESSION GUIDELINES

All make-up sessions are subject to your specific Funding Source’s expectations and the availability of practitioners.

For Client-initiated cancellations, ESH will offer a make-up session only if the required 24 hours advance notice is given and practitioners are available.

If an ESH Practitioner cancels a session, we will make every effort to provide a make-up session if another practitioner can fill the regular session time. If a Client or Parent declines an offered make-up session for any reason, these hours will be designated as declined.
SAFETY COMES FIRST

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

SICK POLICY
ESH will use its best judgment to decide if treatment should continue when a Client or Practitioner is ill. You must cancel sessions with us when your child is sick. Your child should be free of symptoms for 24 hours before resuming scheduled sessions. You should cancel sessions if your child is sent home or stays home from school, daycare, or work due to signs of illness. The only exception is if a medical provider gives documentation stating that your child is well enough for a session.

If anyone else in the family, home, or session environment is experiencing any signs of illness, keep a safe distance between that individual and the Practitioner to prevent it from being transmitted.

We follow the Centers for Disease Control’s and Hawaii’s Department of Health’s guidance when dealing with any illness or disease. If your child or anyone in your home has something highly contagious, you must cancel scheduled sessions. Examples include but are not limited to the Flu, Coronavirus, Pink Eye, Strep, Impetigo (skin infection), or Hand-Foot-Mouth Disease. ESH may request a note from a medical provider before resuming services.

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

IMPORTANT:
ESH requires all Clients and Practitioners to abide by the terms of the Sick Policy. Sessions will be canceled and rescheduled if there is a risk of spreading illness or infection.
RESPONSE TO UNSAFE CLIENT BEHAVIOR
With input from the Client and Parent, Practitioners develop treatment goals. They may also provide coaching on responding to unsafe and unhealthy behavior your child demonstrates most effectively. While Practitioners may use gentle physical prompting based on specific treatment guidelines, we prohibit them from using any physical restraint on your child. The only exception is if your child’s Treatment Plan specifically recommends it.

Using restraint during treatment is rare. A multidisciplinary team, including ESH Clinical Services Leadership and BHPN Clinical Leadership, must approve all use of restraint. Practitioners trained in safe and effective restraint are the only ones allowed to use this method.

ESH instructs Practitioners to remove themselves if a Client’s behavior escalates to the point that it makes them feel unsafe. If a Client is in immediate danger to themselves or others, ESH staff will call 911.

TRANSPORTATION GUIDELINES
ESH Practitioners are responsible for their own transportation. Therefore, our Practitioners can neither provide transportation to Clients and Parents nor accept rides from Clients and Parents.
YOUR RIGHTS AND RESPONSIBILITIES

We are committed to protecting the rights of our clients at all times. You have the following rights:

• To receive services in a manner free from abuse, retaliation, humiliation, neglect and financial or other exploitation.

• To receive services voluntarily and of your own free will.

• To receive services that are sensitive to age, sexual orientation and gender identity, race, cultural or religious preference, health status and physical ability.

• To receive information that allows Clients, Parents, or any Guardian to make informed consent before starting services.

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

• To be provided with access to or referral to self-help support services, advocacy services, and legal entities for appropriate representation, when applicable.

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

• To access information and records in sufficient time to facilitate decision making, as outlined in the Notice of Privacy Practices.

• To have your records protected as required by applicable privacy law, as described in our Notice of Privacy Practices.

• To receive relevant information regarding the individuals providing services, to the extent permitted by organizational policies and applicable privacy laws.

• To be provided on request, an accurate and current set of professional credentials of practitioners working with the client.

• To be provided with information on how to lodge complaints about professional practices of practitioners through the applicable professional licensing/credential board.

• To file a complaint without fear of retaliation or the imposition of any barrier to service.
PARTICIPATION IN LEGAL MATTERS
Sometimes families who come to ESH for services are involved in legal matters such as due process with the Department of Education (DOE) or divorce. We understand that these situations can be stressful for you and your child. It is important to know that we will remain neutral and not participate in any legal matters or disputes, including those involving your child unless required by law.

MANDATED REPORTING LAWS IN HAWAII
In Hawaii, we consider ESH staff and practitioners mandated reporters.

Child Abuse and Neglect: If an ESH staff member or practitioner believes that child abuse or neglect has occurred or that there is a substantial risk that may happen in the near future, they must immediately report their suspicions to the Hawaii Department of Health or the police department. (Hawaii Revised Statutes § 350-1.1)

Vulnerable Adult Abuse and Neglect: A mandatory reporter who, in the performance of his or her professional or official duties, knows or has reason to believe that a vulnerable adult has incurred abuse or is in danger of abuse if immediate action is not taken must promptly report the concern to the Hawaii Department of Health. (Hawaii Revised Statutes § 346-224)

A vulnerable adult is someone 18 years and older who, because of a mental, developmental, or physical impairment, is unable to:
• Communicate or make responsible decisions to manage the person’s care or resources.
• Carry out or arrange for essential activities of daily living.
• Protect oneself from abuse.

CONSENT TO SERVICES
Obtaining valid informed consent for services is a necessary step in providing services to our Clients. Any medical model and medical necessity-based services require approval. Clients or Parents must provide written consent for services before receiving them. Clients or Parents must also renew consent annually or when the Client’s Treatment Plan significantly changes.

Because obtaining accurate and complete documentation is essential to starting or continuing services, it is the Parent’s responsibility to:
• Provide current, accurate information and documentation.
• Notify ESH about any custody or decision-making authority issues or changes.
• Update ESH with relevant information changes.
HOW TO AUTHORIZE ESH TO SHARE PROTECTED HEALTH INFORMATION (PHI) OR REQUEST MEDICAL RECORDS
Our policy is to send medical records to only Clients or Parents unless authorized to send them to other parties.

TO GET AUTHORIZATION FORMS:
• Contact the ESH ABA Clinical Leadership Team (the Program Manager or Program Director).
• Ask a member of the Client’s Supervising Team (the BCBA® or BCaBA®).
• Clients or Parents may authorize ESH 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 medical records by completing the Authorization to Release PHI Form.
• Clients or Parents may revoke an authorization to disclose PHI except: to the extent that we have already acted in reliance on the authorization, or
• If the authorization obtained was a condition of getting 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 or Parents may file a complaint at any time without fear of retaliation. When we receive a complaint, our staff works to remedy the concern and prevent an issue from happening again.

IF YOU HAVE A COMPLAINT OR GRIEVANCE:

**STEP 1**
Ask to meet with a member of the Client’s Supervising Team (the BCBA®) 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 supervising team member, please move on to the second step below.

**STEP 2**
If the discussion with the Supervising Team does not resolve the issue, talk to a member of ESH’s Clinical Leadership Team (Program Manager/Program Director).

**STEP 3**
If the Clinical Leadership Team does not resolve the issue, contact the BHPN’s Customer Service Department at CustomerService@theBHPN.org or share your complaint at 855-the-BHPN (855-843-2476). The BHPN’s Customer Service Department will work with ESH’s Quality Department, you and the treatment team to resolve the issue unbiased and ethically. You may also contact the Compliance HelpLine at 1-833-PROTECT to report any concerns.
COMMON TERMS USED DURING TREATMENT SESSIONS

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

**APPLIED BEHAVIOR ANALYSIS (ABA):** ABA is a scientific discipline that focuses on the principles of how learning takes place. We use various ABA techniques to help clients with autism spectrum disorder (ASD) learn new skills.

**AVAILABILITY:** When your child can have services outside of any activities they have to participate in by law, such as school.

**CLIENT:** Someone receiving treatment services from ESH.

**EVIDENCE-BASED THERAPIES:** Treatments that are based on well-designed research and have shown to be effective.

**FULL SCHEDULE:** The complete number of sessions authorized by the Funding Source.

**FUNDING SOURCE:** The organization responsible for some or all of the payment for services ESH provides.

**PRACTITIONER:** Any professional who provides services to ESH 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.
SERVICES: Any clinical service provided to Clients by ESH.

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

SUPERVISING TEAM: A Clinical Supervisor and the Senior Clinical Manager make up the Supervising Team. This team is responsible for developing a Client’s treatment plan, that the Client is following this plan, and monitoring their progress. Every member of the Supervising Team has advanced training and is certified according to the laws and regulations for providing ABA.
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