



Early childhood specialists
losninos.com

Scott Mesh, Ph.D. Executive Director
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535 8th Ave. 2nd Fl, New York, NY 10018
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WELCOME LETTER TO PARENTS LOS NIÑOS SERVICES HOME AND COMMUNITY – BASED EARLY INTERVENTION SERVICES

Los Niños Services Home and Community-Based Early intervention Services is a comprehensive and inclusive program that brings therapeutic, case management and diagnostic services to children and their families in the least restrictive, most appropriate and natural environment. The services can take place in the home, daycare or other community settings. A critical aspect of this program is to provide intervention early so children can progress developmentally, especially in the earlier years when the brain development is crucial.

CONFIDENTIALITY AND RETENTION OF RECORDS

Our Early Intervention Program is funded and regulated by New York State Department of Health. Section 69-4.1(ak) of the regulations of the NYSEIP required us to notify you that services provided under the EIP is governed by the Federal Family Educational Rights and Privacy Act (FERPA) and the Federal Health Insurance Portability and Accountability Act (HIPAA). Our program has the obligation to retain documentation of the services provided to children and their families until the children turn age 21. You as a parent or guardian of a child who is presently receiving or had participated in the Early Intervention Program have the right to:

1. Inspect/review your child's Early Intervention records;
2. Request an amendment of your child's records to ensure that they are not inaccurate, misleading, or otherwise in violation of the student's privacy or other rights;
3. Add a statement to the record, should you wish;
4. Request a copy of our agency's formal policy statements on records access and confidentiality;
5. Consent to disclosures of all personally identifiable information contained in your child's record, except to the extent that the applicable act and the regulations authorize disclosure without consent;
6. File a complaint with the Early Intervention Program concerning alleged failures of this agency to comply with the requirements of the act and this part;
7. Obtain copies of your child's records from this agency. Upon request, these will be provided to you within ten (10) business days, without charge;
8. Request a review of your child's records by notifying a professional assigned to your child by our agency or by contacting the agency representative listed below. Arrangements will be made for you to review the record within ten (10) business days of your request;
9. Be provided with an explanation/interpretation by our agency of any material in your child's record.

Storage of Children records

Active Clinical Case records are currently stored at:

- Los Niños Services Corporate Office: 535 8th Avenue (2nd Floor) NY, NY 10018
- Los Niños Service Westchester Office: 503 Grasslands Road Valhalla, NY 10595
- Los Niños Services Staten Island Office: 4024 Amboy Road, Staten Island NY 10308

Closed Clinical Case Records are stored at:

- Iron Mountain: Route 9 West South, Port Ewen, NY 12466

SICKNESS POLICY

Child Sick Policy: When a child is too sick to receive therapy, we offer you the following guidelines for you to observe for the safety and health of the therapist serving your child and for the other multiple children these therapists serve.

Notify the therapist to cancel the therapy session if your child has:

1. **Rectal fever of over 100 degrees** in the morning. A child should not receive therapy until she/she has been fever free for 24 hrs, without fever reducer such as Tylenol or Motrin.
2. **Conjunctivitis**, which is an eye infection commonly referred to as pink eye. "the eye is generally red with some burning and secretion thick yellow mucus. This illness is very contagious.
3. **Rashes** that you cannot identify or that have not been diagnosed by a physician.
4. **Diarrhea** (watery or greenish bowel movements that look different from and are more frequent than usual).
5. **Vomit** more than a young child usually spitting up
6. **Severe Cold with fever**, sneezing and nose drainage.

If your child is being placed by his or her doctor on an antibiotic for an infection; the child should not receive therapy until he or she has had medication for at least 24 hrs.

Child Allergies: The parent must inform the LNS clinician of any child allergies. These allergies must be documented along with an allergy plan if a child has a reaction.

Incident Reports and Emergencies: When situations such as child or clinician illness, child or clinician injury, or any emergency situations occur, an incident report must be completed by the clinician and a copy can be offered to the parent. Emergency contact numbers and emergency plans for the child should also be provided by the parent and maintained by the LNS clinician.

Parent Notification of Child Illness: If a clinician or child exhibits an illness during a therapy session such as fever, vomiting, or diarrhea the EI service provider is required to reschedule the session. A make-up session will be offered to the parent. The parent, agency, LNS Services Coordinator and EIODs are notified of any significant clinician and/or child illness or emergency incidents which occur during service provision. Such incidents are also documented on Incident Report forms and forwarded to the above mentioned parties.

4 copies of the incident report shall be made. One copy is given to the parent, one copy given to the child's Service Coordinator, one copy given to the EIOD, and the last copy is placed in the child's file.

Providers must also be aware of procedures of how to handle emergency situations such as child allergic reactions; administration of first aid and CPR (if certified). Appropriate medical professionals such as the child's pediatrician or calling 911 must also be conducted by the provider in a medical emergency situation.

Health Care for Staff Members

All clinical staff and independent contractors, whose responsibility is working directly with children and their families, are required to undergo an annual physical and TB test. This Annual Medical Form contains information about conditions that require emergency care, medication taken on a long-term basis, and allergies, if any. All clinical staff, independent contractors and service coordinators are required to present documentation of immunization against mumps, measles, rubella, diphtheria, and tetanus. Evidence of history of disease may be substituted for measles and mumps immunization. Evidence of antibodies to rubella may be substituted for rubella vaccination. Staff members consult with their own physician as to the advisability of receiving other immunizations. Annual Medical Re-examinations must be completed

no later than ten days after the anniversary of the last physical examination. The Annual Medical form also contains the examining practitioner's statement confirming that the clinical employee, independent contractor or service coordinator is fit to perform her/his job duties.

Staff Exclusion Policy, Sick Leave, Substitutes

If a staff member cannot comfortably and capably perform their daily activities, they are excused from duty. Clinicians do not provide care to children if they or any family member have the following conditions:

- Chicken pox
- Meningitis
- Strep throat, impetigo (may resume duties 24 hours after treatment begins)
- Uncontrolled diarrhea (until physician determines it is not infectious)
- Vomiting (until physician determines it is not infectious)
- Pink eye (until 24 hours after treatment begins)
- Mumps (until 9 days after onset of gland swelling)
- Measles, rubella (until 6 days after rash appears)
- Hepatitis A (until 1 week after onset of illness)
- Tuberculosis (until physician states if person is non-infectious)
- Rash with fever (until physician determines it is non-communicable)

The staff member is required to inform his or her immediate Supervisor, the Program Director or Compliance Officer about her health situation and her/his inability to provide care for the children in her/his case load. The notification is required to be made immediately or within 24 hours of initial symptoms or diagnosis so that appropriate coverage can be found and appropriate individuals are notified.

The Compliance Officer or her Designee is responsible for notifying in writing about the clinician health status to the EIOD, the Family Service Coordinator and the children's parent. The letter sent to the above mentioned people contains a notification of the clinician's absenteeism and/ or a notice for possible exposure to the illness if it is applicable.

Procedure for Parent Notification of the Exposure to a Communicable Disease

If a child becomes exposed to a communicable disease while receiving home based services or attending in the group program, the staff will immediately inform the parent verbally, followed by a letter to the parent informing him/her of the child's exposure. This letter should include the date of exposure, an explanation of the illness and precautions to be taken.

If you have any questions about your rights, please call any of the following supervisors at Los Niños Services at 212-787-9700.

Scott Mesh, PhD, CEO, Early Intervention Program Director,

Edita Diaz, MS Ed, Compliance Officer

Damaris Santiago, LMSW, Assistant Program Director, Quality Assurance Chair.



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ATTESTATION STATEMENT for WELCOME LETTER

I _____, parent/guardian of _____
(print name of parent/guardian) (print name of child)

certify that I have received the **Welcome Letter** from Los Niños Services.

Parent's Signature

Date

Instructions: Please return signed/dated Attestation Page to LNS Office.