

2020-21

Caregiver Handbook and Informed Consent to Treatment

Services provided under SWWC Service Cooperative

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Welcome

On behalf of all of our staff, I take the pleasure in welcoming you to The READY Clinic. We provide intensive early intervention services, based upon the principles of applied behavior analysis to young children diagnosed with autism and other developmental disabilities.

Your child's treatment plan will be individualized to meet his/her needs with information gathered through direct assessments and caregiver interview. All treatment is evidence-based and implemented by our trained behavior therapists and behavior analysts that work on site.

You will note that the term 'caregiver' will be utilized throughout this document to define the caregiver, guardian, parent and/or provider that is responsible for the medical care and decisions of a child.

Caregivers are an important part of our programming with your child. We value your input and look forward to working together with you to make a meaningful difference in the life of your child and family.

Amber Bruns, MS, BCBA, LBA Clinical Director of Behavioral Health Services amber.bruns@swwc.org 507-337-2946

Who We Are

Mission

The mission of The READY Clinic is to provide effective early intervention services that enhances the learning and development of young children with autism and other developmental delays using the methods and principles of applied behavior analysis (ABA).

Philosophy

This medical model of behavioral health treatment is primarily conducted at The READY Clinic. It focuses on developmental and functional skills and on improving learning and social behavior across a variety of settings. Individualized treatment is primarily delivered 1:1, often resulting in multiple 15 to 20-minute intensive teaching intervals interspersed with reinforcement and play throughout each therapy session, with opportunities for group social skills training also included in the clinic-based treatment model.

Our Staff

- **Clinical Director:** The clinical director is responsible for providing leadership, supervision and employment functions of all staff. This position leads strategic development and manages the fiscal responsibility of the programs.
- Quality Assurance Analyst (QAA): The Quality Assurance Analyst is responsible
 for strategic support of The READY Clinics and developing systems to support The
 READY Clinic mission including clinical, administrative and operational elements of the
 clinic.
- Qualified Supervising Professionals (QSP): A licensed professional who assists in monitoring the treatment of an individual diagnosed with autism (ASD) or related disorder.
- **Behavior Analyst (BA):** Board Certified Behavior Analyst-Doctoral (BCBA-D), Board Certified Behavior Analyst (BCBA), or a Board Certified assistant Behavior Analyst (BCaBA) who may develop and supervise treatment, provide staff training and supervision, caregiver/caregiver training, and care coordination with a child's stakeholders in treatment.
- Behavior Therapist (BT) or Registered Behavior Technician (RBT): A practitioner with advanced education and experience with autism and related disorders. This provider regularly implements 1:1 or group treatment, assists caregiver training and receives monthly supervision from a BA or QSP.
- **Behavioral Therapy Aide (BTA)**: A person at least 18 years of age with a high school diploma or GED equivalent who has completed the required training and has at least one year of the required work experience. This provider regularly implements 1:1 treatment and receives monthly supervision from a BT, BA or QSP.
- Comprehensive Multi-Disciplinary Evaluation Provider (CMDE): A licensed professional who can conduct a comprehensive multi-disciplinary evaluation, including standardized evaluations, and brief and extended diagnostic assessment for commercial insurance and those who receive medical coverage through the state of Minnesota.
- **Revenue Cycle Specialist:** This position works with third party payers and caregivers to secure funding for services at The READY Clinic. This position also supports the work of the Clinical Director and Quality Assurance Analyst to maintain fiscal integrity.

The READY Clinic Locations

Intake Phone Number: 507-339-4933

TRC - Cosmos, 320 N Saturn Street, Suite A, Cosmos, MN 56228; 320-877-7074

TRC – Montevideo, 2419 Washington Ave, Montevideo, MN 56265; 320-321-1484

TRC – Pipestone, 1314 N Hiawatha, Suite 100, Pipestone, MN 56164; 507-825-5858

The READY Clinic Schedule

The most updated calendar and hours of operation can be found at www.swwc.org/readyclinic. Staff may be on site prior to or after the typical daily client schedule.

Typical Daily Schedule

Arrival: 8:00am

Therapy: 8:00am - 10:15am Snack: 10:15am - 10:30am Therapy: 10:30am - 12:30pm Lunch: 12:30pm - 1:00pm

Therapy and snack: 1:00pm – 4:00pm

Departure: 4:00pm

Treatment Development

Diagnostic Assessment

Children are required to receive standardized developmental and diagnostic assessment annually in order to receive ABA services. Caregivers may choose their child to receive standardized assessments from a provider of their choice, or from The READY Clinic's qualified licensed professional and QSP. The QSP also supervises assessments conducted by the Behavior Analyst as a component of the development of the initial Individualized Treatment Plan (ITP) and every six months of treatment thereafter. Assessment tools used to measure ongoing treatment may include the Learning Accomplishment Profile Birth – Kindergarten (LAP-BK) and the Verbal Behavior Milestones Assessment and Placement Program (VB-MAPP), The READY Clinic's Child and Parent Play Skills Assessment (CAPPSA), Functional Behavioral Assessments (FBA's), and behavioral surveys.

Individualized Treatment Plan

Following the review of a child's diagnostic assessment, the QSP and Behavior Analyst further assess the child to develop ITP. The ITP is designed to address family goals for a child's treatment, a child's developmental delays and interfering and challenging behavior. The ITP will include a list of short-term benchmark objectives to be accomplished each 6-month ITP interval, long-term discharge objectives, transition planning and criteria for discharge. The Behavior Analyst and caregivers together review the ITP frequently to continually plan treatment based on the child's needs and family's goals. At these reviews, written consent is required for ongoing treatment implementation.

Curriculum

A child's treatment team implements an individualized, evidence-based, developmental and behavioral curriculum that focuses maximizing a child's learning. The treatment team will use procedures that align with the principles of ABA, which may include functional communication and verbal behavior training, discrete trial training, pivotal response training, incidental and natural environment teaching, maintenance, and generalization training across people and environments.

Waitlist

Unfortunately, there are times when children need to be waitlisted for services. In the event that a child is waitlisted for a given location or locations, the family will be notified as to whether there is an anticipated date for the start of services or an indefinite timeline. Families will be notified of the waitlist status monthly. In the event that The READY Clinic cannot provide services within 45 days, additional referrals and resources will be provided to the family.

Possible Risks of ABA Treatment

The goal of The READY Clinic is to provide another treatment choice for children diagnosed with autism or a related disorder and their families. While the benefits of applied behavior analysis (ABA) are widely published, The READY Clinic and its clients recognize that there are potential risks for clients who are receiving ABA therapy.

These risks may include:

- I. Following intake, a delay in the start of treatment or delay in the full recommended treatment package due to challenges with funding, staffing, or limited enrollment availability.
- Temporary episodes of extreme upset, discomfort or regression in the home or clinic following the onset of therapy, even when techniques focus on using positive reinforcement.
- 3. Increases in challenging behavior due to a child's initial resistance to behavioral change and the changing of schedules of reinforcement for challenging behavior.
- 4. Changes in the child and family's daily schedules for therapy sessions or assessments, or due to clinically recommended staff or caregiver training in order to implement the agreed-upon and recommended ABA treatment plan.
- 5. Others who are involved in the child and family's life may also resist changing their approach to a child or reinforcing new skills or positive behaviors in other settings, and therefore progress made in the clinical setting won't generalize or result in meaningful change outside of the clinic.

The Surgeon General of the United States, the American Academy of Pediatrics, and the Centers for Disease Control have all recognized applied behavior analysis as the most effective way to meet the learning needs of people with autism and related developmental disabilities. ABA has been endorsed by both the National Institutes of Health and The Association for

Science in Autism Treatment. A reference list for the publication resources for risks and benefits of ABA treatment is available upon request.

Benefits of ABA Treatment

- 1. Access to a team of experts to help teach a child developmental skills to minimize symptoms of their diagnosis and provide support for the child's family.
- 2. An increase in appropriate, meaningful behavior and a reduction in challenging behavior across all settings.
- 3. Increase in communication skills and levels of social integration.
- 4. Research shows that 40-50 percent of children who receive early intensive ABA therapy can make gains that result in transitions into mainstream classroom placement. For any child and family, there is the potential for greater preparedness for transition to the educational setting with a set of known strategies that are effective when working with the child.
- 5. Gains in caregiver knowledge and training in the individualized specifics of autism for your child and the use of ABA principles that can continue beyond The READY Clinic.
- 6. Caregiver and family support and acquired skill sets in advocacy for your child.

Discontinuation of Services

At The READY Clinic, each child's progress toward the short and long-term ITP goals is regularly monitored. The Behavior Analyst reviews child data regularly with the QSP and caregivers. There are many reasons why transition to discharge may occur. Some examples include the child no longer benefitting from treatment, the client meeting all of their recommended short and long-term treatment objectives, discontinuation at the request of the child's caregiver or guardian or due to lack of adherence to the service agreement, or due to the child's 7-year-old birthday approaching.

At the onset of treatment, discharge planning is already underway, even in the initial ITP, when short and long-term goals are agreed on. The goals are established to assist clinicians in making the best predictions and recommendations for transition to discharge. The READY Clinic will make every effort to provide a formal notice of transition in conjunction with the ITP interval for the recommended discharge date to conduct discharge planning with caregivers. Goals for the transition, the recommended schedule of services for the transition, and reasons for discharge will be clearly documented in the child's ITP. The READY Clinic will attempt to schedule a coordination of care meeting with the child's stakeholders. A discharge summary is given to caregivers on the last date of service, and it will include an aftercare plan and referrals. In the event of unplanned termination of services, The READY Clinic will attempt to meet with the family for final documentation.

Communication

The READY Clinic does not offer on-call behavioral services. Caregivers may contact their Behavior Analyst with questions or comments by telephone or email, or schedule a time to meet in person. Please indicate availability if leaving message or sending email. Staff will return

emails and messages within two working business days. Concerns may also be directed to the Qualified Supervising Professional, Quality Assurance Analyst or Clinical Director of Behavioral Health Services. In the event of an emergency or crisis situation, caregivers should contact their county case manager, their primary physician, or call 911.

Mandated Reporting

All SWWC staff are considered mandatory reporters. Staff have a legal responsibility to report any suspected abuse, mistreatment or neglect to designated officials.

Professional Conduct

In accordance with clients, their families and caregivers, all members of The READY Clinic will adhere to the Professional Standards for Clinical Practice and maintain a professional relationship that omits sharing personal matters that extend beyond the scope of treatment and will limit their interactions to only professional activities, without development of dual relationships. Caregivers and staff will not exchange gifts, money, favors, services, or participate in each other's personal fundraising activities. Staff and caregivers will maintain a client-focused, respectful platform for all interactions.

Policy Communication

All agencies, caregivers, caregivers and clients will follow the policies outlined in SWWC's Family Handbook. This handbook is available for review upon request and can be found on our website at www.swwc.org/readyclinic.

There are several policies and documents required for The READY Clinic operations. As in everything, we strive to do our best to continue to revise policy and documentation to best meet the needs of all of the clinic's stakeholders. A copy of any of the individual policies and documents is available to you upon request.

Social Media

Social media includes websites and applications that allow users to create, share or access information. The READY Clinic may use social media to connect with the community. Policy prohibits any staff from soliciting, obtaining and distributing clients and families on any form of social media without explicit consent. Staff are prohibited from releasing any client information on personal social media and from personally connecting with families while they are employed with the SWWC and The READY Clinic. Caregivers and staff are strongly encouraged to uphold high ethical standards in their use of social media in relation to The READY Clinic. Caregivers will not post information about other clients. The READY Clinic expects online publishing posts to be a reflection of the respect, truth and honesty at the level that face-to-face interactions are conducted.

Some examples of social media include:

- social networking sites and geo-spatial tagging
- video and photo sharing websites
- blogs, including micro-blogging, and media, personal, and corporate blogs

- online collaborations, forums, discussion boards, and groups
- vod and podcasting, online multi-playing gaming platforms
- electronic messaging, including email and SMS

Transportation

Caregivers are responsible for providing transportation to and from the clinic. Caregivers may authorize other regular care providers to transport their child by completing the Authorization to Pick Up Child form. Persons authorized to pick up a child must be at least 18 years old and may be asked to provide a photo ID to the staff. If a person picking up a child is not someone listed in the authorization, the caregiver may leave the name and number of the person picking up by either handing off a note during a child's arrival, or by calling The READY Clinic staff. Text or email is not an acceptable form of communicating this information. The person picking up will be required to present photo ID before departing with the child. Caregivers may also contact their county case manager to apply for funded transportation services.

Parents are responsible for informing transportation companies of changes to a child's drop off and pick up schedule.

Lockdown

In an event of a lockdown or a crisis in or near the entrance of the school, staff will call the caregiver picking a child up and inform them of the alternate plan. If the staff cannot reach the caregiver, staff will attempt to wait for the caregiver and child in the main office.

In the event that the caregiver arrives at the entrance of the school during a crisis management situation that is interfering with their ability to enter the building, the caregiver will call The READY Clinic classroom phone to notify staff of the plan to pick up their child at the identified alternative location.

School Closings and Late Starts

When the school district is scheduled for late start due to inclement weather, The READY Clinic will also be open on an adjusted schedule. In such instances, children should arrive between 10:00am and 10:15am in order to begin the 10:30am therapy session.

Early dismissals will be determined based on the timing of the announced closure. School announcements/updates are announced by:

- Alerts through the school district
- Local radio or television announcements
- Text or phone call from The READY Clinic staff
- Honeywell Instant Alert System

Honeywell Instant Alert System

Honeywell Instant Alert is an essential tool for notification and communication. Within the minutes of an emergency, clinic officials can use Honeywell Instant Alert to deliver a single, clear message to the client's caregivers or guardians by telephone, cell phone, e-mail, pager or

PDA in any combination. This system will also be used to notify you of a clinic closing due to inclement weather.

Information regarding the Honeywell Instant Alert System is included in your child's intake packet. Please read this information carefully and take the time to update your family's online profile.

Session Attendance Requirements

Caregivers will provide a schedule of availability for their child that meets the recommendations outlined in the diagnostic assessment and recommended Individualized Treatment Plan (ITP). Clients and families are expected to attend at least 80% of their scheduled hours per calendar month. If attendance, on-time arrival or end of the day departure falls below 80% in a given month, an interim ITP meeting will be held with caregivers in person or via telemedicine to review the treatment package. During the meeting, staff and caregivers will work together to achieve an agreed-upon schedule to best meet the child's prescribed behavioral treatment hours.

With early intensive behavioral intervention, every treatment hour is an hour of progress made. Child vacations should not exceed more than one week beyond The READY Clinic's school district calendar during the service year. The schedule is published by the second Friday of the month prior. Caregivers must notify the center at least 14 days in advance of a planned child absence so that proper staffing may be achieved.

Caregiver Participation

Family and caregiver engagement is a vital component of early intensive behavioral intervention. ABA requires family members to be active in the child's treatment to make the best progress. Family and caregivers are crucial components in the evaluation, planning and treatment processes, and must agree to participate at the medically recommended intensity and as agreed upon in the child's ITP.

Based on the diagnostic assessment and the medically recommended ITP, caregiver participation generally includes:

- Minimum of 1.5 hours per week of caregiver coaching at the clinic. Siblings will not attend unless specified in the ITP and proactively scheduled.
- 30-minute weekly or bi-weekly clinical review at the clinic or via telemedicine. Siblings will not attend unless specified in the ITP and proactively scheduled.
- Caregiver coaching at home via telemedicine at the prescribed and recommended level.
- Caregiver implementation of effective schedules of reinforcement that result in progress in developmental skills and behavior reduction programming.
- Data collection, completion of client-related surveys, and weekly phone or email communication in timely fashion

In order to achieve optimal progress, The READY Clinic requires caregivers to implement the agreed-upon recommended treatment procedures consistently in the home and community settings. Caregivers receive ongoing behavior skills training to achieve a level of competency

that allows the successful implementation of procedures in order to achieve their child's best progress. If caregivers refuse to participate in the treatment plan services may be interrupted or terminated.

In order to maximize caregiver and client benefit during caregiver training sessions and weekly clinical reviews, The READY Clinic recommends that siblings do not attend caregiver coaching appointments. Unless pre-scheduled and planned as part of the ITP process, siblings do not attend caregiver coaching and weekly clinical review meetings. Please note that The READY Clinic does not provide childcare to clients or siblings.

Illness Policy and Injury Forms

Staff will complete a Daily Health Record (DHR) upon the child's arrival. If a child or family member scheduled to be at The READY Clinic has a contagious illness, caregivers will notify The READY Clinic immediately. If a child becomes ill during the therapy day, the DHR will be updated and the child will remain in the nurse's office until signed out by a caregiver or caregiver.

For the protection of the child and family, as well as other clients and staff, a person who exhibits any of the following contagious illness symptoms will be unable to participate at The READY Clinic:

- A temperature of at least 100.4 degrees Fahrenheit.
- Thick and frequent green or yellow discharge from the nose or eye
- Vomiting or diarrhea in the past 24 hours, whether it may be stomach flu or reaction to antibiotics
- Unexplained skin rash, skin sores with puss or discharge
- Head lice or evidence of lice nits
- Ring worm, pin worm, or scabies
- Mumps, measles, impetigo, chicken pox, or hand foot mouth disease
- Persistent cough or cough producing green or yellow phlegm
- Strep throat or swollen glands
- Any symptoms outlined by the Centers for Disease Control or Minnesota Department of Health that are deemed exclusionary.

Generally, clients need to be able to participate in the regular part of the daily schedule of treatment. Persons with a diagnosis of a contagious illness that can be treated with antibiotics may be considered for return if the illness has been treated consistently for the past 24 hours i.e., strep throat, pink eye. Children, family members and staff may return to the clinic once they are symptom free for 24 hours and without fever-reducing medication such as ibuprofen or acetaminophen. In some instances, a doctor's note stating that the client can return to The READY Clinic may be requested.

In the event that a child may incur an injury while receiving services or arrives with an observed injury, an injury form will be completed and uploaded into the child's online program management system. For non-emergent matters, caregivers will be notified at pick up or via

email or phone at the end of the day. Caregivers or emergency contacts will be notified if emergency measures are needed.

Cancellations

It is The READY Clinic's cancellation policy for caregivers to contact their assigned Behavior Analyst directly to cancel or reschedule a session. To avoid any misunderstanding, the Behavior Analysts must be contacted in person or via phone. Please make every attempt to give at least 24-hour notice when cancelling an appointment.

Other Policies and Operations

Meals/Snacks

Caregivers are responsible for sending lunch and snack for their child. Snack is served up to two times every day and must be tree/nut free or it will not be served. The clinic does not provide any silverware or dishes and does not have the capacity to clean dishes. A child's food can be refrigerated for the day; however, food will not be kept overnight. A child cannot attend therapy sessions at The READY Clinic if they arrive without the required lunch or snack for that day.

Toileting

Children attending The READY Clinic are not required to be toilet trained. Caregivers must send diapers or pull-ups, wipes and two extra changes of clothing to be kept at the center. Toilet training may be a part of an ABA treatment. A child cannot attend therapy sessions if the child does not have sufficient toileting items for the day of service.

Medications

Caregivers will notify the Behavior Analyst their child's medication needs and complete the Permission for Non-Prescription Medication or the Medication/Treatment Authorization Form. Medications must be provided to the nurse in the original pharmacy bottle, which includes instructions on administration dosage amount, method and frequency. A physician's note may also be required. The nurse or trained staff will administer medications. Caregivers are responsible for delivering and picking up medications from the nurse as needed.

HIPAA Compliance

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) requires that certain covered entities establish policies and procedures to protect the privacy and security of protected health information. SWWC has developed policies and procedures to be in compliance. Policies are provided during the intake process. Any concerns regarding the privacy and confidentiality of protected health information the HIPAA Privacy Officer can be contacted.

Observer Confidentiality

SWWC may have students, interns, employees and other professionals that may ask to observe the work that is conducted at the clinic. There is a legal and ethical duty to protect the privacy of all children and family members and their health information. Observers are required to sign

a confidentiality agreement. Caregivers should contact their Behavior Analyst if they have special requests for their child being observed.

TITLE IX SEX NONDISCRIMINATION

SWWC does not discriminate on the basis of sex in its education programs or activities, and it is required by Title IX of the Education Amendments Act of 1972, and it's implementing regulations, not to discriminate in such a manner. The requirement not to discriminate in its education program or activity extends to admission and employment. SWWC is committed to maintaining an education and work environment that is free from discrimination based on sex, including sexual harassment.

SWWC prohibits sexual harassment that occurs within its education programs and activities. When SWWC has actual knowledge of sexual harassment in its education program or activity against a person in the United States, it shall promptly respond in a manner that is not deliberately indifferent.

This policy applies to sexual harassment that occurs within the SWWC's education programs and activities and that is committed by a SWWC employee, student or other members of the school community. This policy does not apply to sexual harassment that occurs off school grounds, in a private setting, and outside the scope of SWWC's education programs and activities. This policy does not apply to sexual harassment that occurs outside the geographic boundaries of the United States, even if the sexual harassment occurs in the SWWC's education programs or activities.

Any student, caregiver or guardian having questions regarding the application of Title IX and its regulations and/or this policy and grievance process should discuss them with the Title IX Coordinator.

SWWC's Title IX Coordinator(s)

Primary: Abby Polzine, Director of Human Resources P: 507-537-2243; E: <u>Abby.Polzine@swwc.org</u> Address: I420 E College Drive Marshall, MN 56258

Alternate: Cliff Carmody, Executive Director P: 507-537-2251; E: Cliff.Carmody@swwc.org Address: 1420 E College Drive Marshall, MN 56258

Questions relating solely to Title IX and its regulations may be referred to the Title IX Coordinator(s), the Assistant Secretary for Civil Rights of the United States Department of Education, or both.

The effective date of this policy is August 14, 2020, and applies to alleged violations of this policy occurring on or after August 14, 2020.

You can access our full Policy 522 – Title IX Sex Nondiscrimination Policy, Grievance Procedure and Process.

FUNDING AND FEES

Caregiver and Patient Responsibility

Caregivers are responsible for knowing their child's medical benefits for ABA treatment. While our billing specialists can provide some support and assistance, it is the responsibility of the policyholder and family to understand the child's coverage and to notify changes in coverage related to services at The READY Clinic. A child's diagnostic assessment report and ITP outline the prescribed and recommended levels of medically necessary ABA therapy for the treatment of a child's symptoms. A child's medical insurance plan determines the level of services they will reimburse to The READY Clinic. The READY Clinic will submit claims to payers to seek payment from any third-party payer submitted to The READY Clinic. Caregivers are ultimately responsible for payment of any balance remaining following the submission of claims for clinic services provided to the child, family and caregivers.

Private Insurance

The READY Clinic is required to submit claims to commercial insurance policies prior to billing MA. If a child has more than one medical insurance policy, the primary insurance policy must be invoiced prior to MA, regardless of whether or not the policy provides coverage for ABA therapy.

Medical Assistance (MA)

Funding for treatment may be accessed through the Minnesota Department of Human Services (DHS) for children diagnosed with ASD and related conditions under the Early Intensive Developmental and Behavioral Intervention (EIDBI) benefit.

Private Pay

Private payment options with a set discount on The READY Clinic's Usual and Customary Fees are available for families who request this option. In choosing this option, recommendations found in the child's ITP for treatment hours, staff supervision, regular assessment, ITP development, and annual diagnostic assessment will continue to be upheld by The READY Clinic, as these prescriptions are deemed the medically-necessary for a child's treatment. A copy of the fee schedule is available upon request.

Payment Options

Invoices are sent on or about the first of each month, with some variation during the intake process. The READY Clinic accepts cash, check or money order. A \$25 late fee will be assessed for accounts that are in arrears past the due date on the invoice. Contact Tracy Kramer, Administrative Assistant, at 320-877-7074 ext. 2404 for payment questions.

Returned Check or Insufficient Funds

A fee of \$35 is charged for each returned check or notice of insufficient funds.

Copies of Policies Upon Request

There are several policies and documents required for The READY Clinic operations. As in everything, we strive to do our best to continue to revise policy and documentation to best meet the needs of all of the clinic's stakeholders. A copy of any of the policies and documents is available to you upon request.



Service Agreement and **Informed Consent** to Treatment

Date

I consent to the terms in The READY Clinic Caregiver Handbook and its related policies for the purpose of my child receiving behavior therapy services through SWWC. Print Parent/Guardian Name Parent/Guardian Signature Date Parent Email Parent Phone Print Parent/Guardian Name Parent/Guardian Signature Date Parent Phone Parent Email The READY Clinic Representative Title Date I do not consent to the terms of The READY Clinic Caregiver Handbook. I understand this refusal prevents SWWC from evaluating needs, developing and implementing treatment, and obtaining payment for medically necessary services, and therefore services may not be conducted. Print Parent/Guardian Name Parent/Guardian Signature Date Parent Phone Parent Email Print Parent/Guardian Name Parent/Guardian Signature Date Parent Phone Parent Email The READY Clinic Representative Title