ABILITY KC®

Medical Rehabilitation • Therapeutic Preschool • Employment Services

HANDBOOK

For

Preschool Therapy Outpatient Program

(Revised February 2024)

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Welcome

Welcome to Ability KC. We are pleased that you've chosen us to provide your rehabilitation services and will do our best to ensure that your time with us is productive, positive and worthwhile. Our professional staff is committed to your success and will provide the support, encouragement and education needed to help you meet your goals.

Our Mission –

To build brighter futures for children with disabilities by providing therapeutic and educational services. We do this by:

- Providing excellent and results driven services
- Maintaining a highly trained and effective professional staff dedicated to serving individuals with disabilities.
- Offering programs that reflect a respectful, compassionate commitment to individuals served and their families/support providers.
- Presenting educational and treatment environments tailored to individual client needs throughout their continuum of care.
- Celebrating the successes of individuals served by creating clear, concise communication regarding the impact and outcomes of our programs.
- Maintaining financial viability

About Ability KC -

Ability KC builds brighter futures for children and adults with disabilities by helping them achieve their goals. While Ability KC serves a large number of diagnostic groups, it has the reputation as the "place to go" for the most challenging conditions, injuries and disabilities such as spinal cord injury, brain injury, concussion, stroke, amputation, birth defect, developmental delay, and neurological disorders.

With over 75 years of experience and more than 175 medical and vocational professionals on staff, we provide the most comprehensive rehabilitation services in the region. Our programs are highly individualized, goal-oriented and assist individuals at all stages in life, from birth to the elderly. Whether it is achieving success at home, school or work, we have the outpatient medical services and employment programs in place to help build brighter futures for individuals with complex conditions, injuries and disabilities.

Accreditation and Certifications –

Ability KC is accredited by CARF - The Commission on Accreditation of Rehabilitation Facilities. We are also certified by CMS (Centers for Medicare and Medicaid Services) as a Comprehensive Outpatient Rehabilitation Facility (a CORF) and by NAEYC (the National Association for the Education of Young Children). Our programs receive support from the Heart of America United Way, EITAS, Platte County Board of Services, Jackson County Children's Services Fund and Clay County Board of Services.

Privacy Policy -

Our organization is in full compliance with HIPAA (the Health Insurance Portability and Accountability Act) and HITECH. Upon admission, you will receive a copy of our Notice of Privacy Practices. You may also access a copy on our website at www.abilitykc.org. Out of respect for our patients' and clients' privacy, staff will conduct conversations about your services in private settings.

Non-Discrimination -

Ability KC does not discriminate in admission or access to programs or activities based on age, race, color, ethnicity, religion, national origin, pregnancy, sexual orientation, gender identity, genetic information, sex, marital status, disability or US veteran status.

Accessibility Policy –

Ability KC is an equal opportunity / affirmative action employer. Please refer to individual program descriptions for more information concerning the scope of services available and specific entrance criteria.

We are committed to providing a barrier-free environment and accessibility to the services you desire. Free accessible parking is available at all of our locations. If you encounter a barrier or need accommodations, please inform the staff member coordinating your program.

Access to Records -

All requests for copies of records will be handled by our Medical Records Department. An authorization signed by you or your authorized representative must be submitted prior to releasing records. At least 72 hours notice may be required to fulfill your request and a reasonable fee may apply.

Ethical Conduct and Grievance Procedure-

As a participant in a program at Ability KC, you or your representative (guardian, legal representative, family member or friend) have the right to file a formal complaint or grievance, without fear of retaliation or barrier to services, if you feel you have been treated unfairly or disagree with a decision that has been made about you or your program and services. Please follow these steps:

1. Discuss your concerns with the staff person responsible for the decision or action you are unhappy with. Or you may choose to discuss the issue with their supervisor. In most cases, a discussion between you and one of these individuals should resolve the problem.

2. If you are not satisfied with the outcome of those discussions, you may speak to the patient representative (816-751-7754) or your social worker and decide if you want to file a formal grievance. If you choose to file a formal grievance, you will be given the paperwork to complete. You may request assistance to complete the form.

3. The appropriate supervisor will contact you within 3 business days of receipt of the formal grievance. They will gather information and contact you with an appropriate resolution within 7 business days of receiving the grievance.

4. If you are not satisfied with the resolution, you may appeal the decision to the Director of the Program involved within 10 business days. You will be informed of his/her decision in writing within 5 business days of his/her receiving your request to continue the grievance process.

5. If you are not satisfied with the decision of the Director, you may appeal the decision to the President/CEO within 10 business days. You will be informed of his/her decision in writing within 5 business days of receiving your request to continue the grievance process.

6. If you are not satisfied with the President's decision and would like an external review of the situation, we will provide contact information so that you may request a review by the licensing agency of the person or organization you are filing a grievance about (when applicable).

Involvement of Family Members and Significant Others -

The involvement of family members, friends and other community supports can be a critical factor in your success. Preschool program families are asked to participate in therapy sessions, team meetings, parent meetings and educational events in order to ensure the best outcomes for your family. At your request, persons other than

parents/legal guardians will be included in planning meetings and conferences related to your program.

The Treatment Process -

Under the direction of the treating physician's prescription, a complete evaluation will be performed during initial therapy sessions. The evaluations help to determine the nature and extent of the problem and identify the best treatment approach to improve function.

Goals are set for the therapy program in consultation with you and your family/caregiver after the evaluations are complete. At that time, a tentative date is established for achievement of goals and discharge from the program. The duration of therapy depends on the progress made toward achieving these goals.

Under current Medicare, Medicaid and private insurance carrier guidelines, documented gains in therapy must be shown for a treatment program to continue. Periodic treatment team meetings and family conferences are held to review progress and modify the treatment and discharge plan. Communication with your referring physician and insurance company is ongoing as appropriate throughout your rehabilitation program.

Recommendations for a home program, periodic re-check, or referral to another agency may be made at the time of discharge.

Satisfaction Surveys and Outcomes -

We value your feedback and suggestions for improving our services. At the initiation of your program, each May during your care, and at the conclusion of your program, we will ask you to rate the services and overall experience. A staff member may also contact you approximately 90 days and 1 year after leaving our program to check on your status.

We regularly gather data concerning the impact of our services and the results achieved by people who participate in our programs. That information is summarized and available on our website. Additional information is available upon request.

Holidays and Cancellations during Bad Weather -

Ability KC Therapeutic Preschool Outpatient Program observes the following holidays when our programs will be closed:

New Year's Day	Memorial Day	Labor Day	Day after Thanksgiving
Martin Luther King	Independence Day	Thanksgiving Day	Christmas Day
Juneteenth			

Throughout the year, there are additional Professional Development days in which programs are closed for the continuing education of our staff. These days are determined yearly and will be noted on the program calendar which follows a typical school year (August to July).

If the weather prevents you from attending your scheduled program, please contact us as early as possible by calling our cancellation line at 816-751-7701. If you are scheduled to attend in the morning, please call by 8:00 AM. If you are scheduled to attend in the afternoon, please call by 11:00 AM. That gives us adequate time to reschedule other appointments.

Attendance Policy -

Because regular attendance is important for your child to receive the full benefit from therapy program and due to the demand for therapy services within the community, consistent attendance is required to be enrolled in our program. To retain your enrollment in our program, you must exceed 85% attendance at all appointments. If you must cancel a session, please notify us by calling the cancellation line at 816-751-7701 no later than 8:00 am of the day of the appointment.

If you fail to call, your absence will be recorded as an unannounced absence. You may be charged for unannounced absences. Your Child will be discharged following 2 unannounced absences. Frequent unannounced absences will also be cause for discharge. You will be notified by phone or letter if this is the case.

You may also be discharged if a change in your condition impacts on your ability to participate in the therapy program.

Safety Issues -

We conduct routine safety drills which may occur during your time at our facility. Staff will instruct you on where to go and how to respond. Our facilities and campuses are smoke free. You must leave the property to smoke. We encourage you not to bring large amounts of cash or valuables with you to program activities, as staff cannot assume responsibility for those items. Out of courtesy to others, we ask that you turn off cell phones and other electronic devices while involved in program activities.

We are a child friendly environment and welcome children under the supervision of their parents/guardians. As an exception we would ask that if you are scheduled to attend a therapy session with your child, other children should not be in attendance. This request is to maintain the integrity of the therapy session. Outside the therapy time for your child, all children are expected to be under the supervision of their parent/guardian.

Rights and Responsibilities of Persons Served -

Recognizing your right to quality care, we believe that our mutual respect for rights and responsibilities will contribute to an improved outcome and greater satisfaction with your care. We encourage you to speak openly with your therapy team, be well informed, and take part in care decisions and treatment choices.

RIGHTS OF PERSONS SERVED (Adults and Children)

As a patient, you or your designee have the right to:

RESPECTFUL AND SAFE CARE:

- Be given considerate, respectful and compassionate treatment, care and services.
- Be given care in a safe environment, free from physical, sexual, or psychological abuse, physical or psychological neglect or physical punishment, humiliation, threats, exploitative actions (financial or otherwise) or retaliation from employees of Ability KC.
- Understand the reason for the use of treatment approaches including restrictive procedures. You have the right to freedom from restraint.
- Know the names and jobs of the people who care for you.
- Know when students or other trainees are involved in your care.
- Have your culture and personal values, beliefs and wishes respected.
- Discuss your concerns, questions, and needs with the Patient Representative or other appropriate staff without fear of retaliation. Presenting a concern will not affect your ability to receive quality care.
- Be treated without discrimination based on race, color, age, national origin, age, gender, sexual orientation, gender identity or expression, physical or mental disability, religion, ethnicity, language, or your ability to pay for your care.
- Be given a list of legal representation, self-help and advocacy services, when needed. These services help certain patients (e.g. children, elderly, disabled) exercise their rights and protect them from abuse and neglect.
- Ask for an estimate of charges before care is provided.

EFFECTIVE COMMUNICATION AND PARTICIPATION IN YOUR CARE

- Receive information in a way you can understand. Availability of language interpretive services or assistive devices such as TDD machines for the hearing impaired.
- Obtain from your physician, treatment team or case manager complete current information concerning your diagnosis, treatment and outcomes of care (anticipated and unanticipated) in terms that you can reasonably be expected to understand.
- Participate in the planning of your own program and/or composition of the service delivery team. The individualized program plan developed jointly with the treatment team should tell you how the staff expects to help you reach your goals.

- To receive, except in an emergency, from your treatment team information necessary to give informed consent prior to the start of any procedure, treatment or scheduled program of service.
- To meet regularly with staff to talk about your program. Ask questions and get a timely response to your questions or requests
- Involve your family in decisions about care.
- Refuse care.
- Have someone with you for emotional support, unless that person interferes with your or others' rights, safety or health.

INFORMED CONSENT

- Give permission (informed consent) before any non-emergency care is provided including risks and benefits of your treatment, alternatives to that treatment, and risks and benefits of those alternatives.
- To choose to or refuse to participate in research projects. Staff of Ability KC will adhere to research guidelines and ethics involving research projects.
- Agree or refuse to allow photos or videos for purposes other than your care.

YOUR MEDICAL RECORDS:

- To review your medical records and receive copies of the records at a reasonable photocopying fee. At least 72 hours notice may be required to prepare copies.
- To refuse the release of information from your medical records, understanding that if your insurance company refuses payment because of your refusal to release information, you will be responsible for payment for services.

PRIVACY AND CONFIDENTIALITY

- Have privacy and confidential treatment and communication about your care.
- Be given a copy of the HIPAA Notice of Privacy Practices.

COMPLAINTS AND GRIEVANCES

- You have the right to complain and have your complaint reviewed without affecting your care. If you have a problem or complaint, you may talk to the patient representative or your social worker.
- You have the right to file a formal grievance without fear of punishment, retaliation, or barriers to services, and to expect that your grievance will be investigated and resolved to the best of our ability.

RESPONSIBILITIES OF THE PERSON SERVED (Adults and Children)

We recognize that the personal relationships between the patient, therapists, physicians, nurses and other staff are important for the best medical care. These are your partners in the healthcare team. As part of this team, we expect you to assume the following responsibilities:

You have the responsibility to:

- Provide to the best of your knowledge accurate and complete information about your health, address, telephone number, date of birth, insurance carrier and employer.
- Assist in the development and implementation of your or your child's rehabilitation program.
- Call our cancellation line if you cannot keep an appointment (816-751-7701).
- Provide a copy of documents supporting guardianship or custody when requested.
- Comply with instructions and follow the rehabilitation program plan recommended by your or your child's physician and treatment team.
- Take responsibility for actions or consequences if you refuse treatment(s).
- Ask questions if you do not understand something.
- Be alert to the safety of other patients who maneuver through the hallways
- ***If you bring other children who are not receiving care, we require that you supervise them at all times.***
- Respect the rights of staff members, other patients and visitors regarding noise, cell phone use, inappropriate language, etc.
- Do not bring valuables with you. ABILITY KC CANNOT BE RESPONSIBLE FOR THEM.
- Keep all information about Ability KC staff or other patients private.
- Do not take pictures, videos or recordings without permission from staff.
- Pay your bills or work with us to find funding to meet your financial obligations.

If you have any questions regarding these rights or wish to voice a concern about a possible violation of your rights, please contact the Director of Professional Standards at 816-751-7832.

Attachments

- Scope of Practice
- Staff Contact
- Calendar