



Family Handbook

University of Arkansas for Medical Sciences
Department of Pediatrics

An Academic Center of Excellence for Young Children with Special Needs

Revised 2019

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About UAMS Kids First

UAMS Kids First provides Early Intervention Day Treatment Services to young children with developmental delays or medical needs.

UAMS Kids First is proud to also serve as the training ground for future doctors, nurses, therapists, social workers and early childhood specialists through the University of Arkansas's Interdisciplinary Education initiative. Born of a research project demonstrating the benefits of our unique model of care, UAMS Kids First continues to support research into innovative programming and intervention techniques, serving as the university's "lab school" to advance the science of care for children with special needs.

Mission: To create a better state of health for young children with special needs by:

- Partnering with families and professionals to provide high quality services that enhance health, growth, and development of young children in their local communities;
- Education of future professionals and the public; and
- Advancing knowledge in the field through research.

Vision: UAMS Kids First is an Academic Center of Excellence for young children with special needs that will:

- Provide high quality, evidence-based clinical services to young children with special needs
- Engage, support, and encourage families choices in planning of treatment for their child;
- Train knowledgeable, confident staff to care for the needs of the families and children served;
- Extend support to young children with special needs in the community through working together with programs with like missions and values;
- Support students training in health professions and early childhood education as a
- clinical education site;
- Develop research and educational and technical assistance expertise for young children with special healthcare needs.

UAMS Kids First Core Values (adapted from UAMS Core Values)

- **Integrity** – We encourage and expect honesty. We expect staff to “do the right thing” and follow the rules.
- **Respect** – We believe that every person has something valuable to add and plays an important role in the care of the child.
- **Diversity** – We want to create a place where all employees, families, and children are welcomed regardless of race, ethnicity, class, creed, or sexual orientation.
- **Teamwork** – We work together in a way that is flexible, making sure everyone is included, to help the child.
- **Creativity** – We think outside the box. We're open to new ideas and suggestions.
- **Excellence** – We want to be the best we can be and we're always looking for ways to improve.



Program History

In 1986, our medical director Dr. Patrick Casey became primary investigator for one of 8 sites for the Infant Health and Development Project (IHDP). This national, multisite, randomized controlled intervention study pioneered services for low-birth-weight preterm infants, and the Arkansas site demonstrated outstanding difference in I.Q. scores and behavioral measures between the intervention and control group children.

These findings were reported first in the Journal of the American Medical Association in June, 1990, and continue to be well described in the literature of early intervention. This longitudinal data continues to be a source of academic interest, generating many scholarly articles, as recently as the November 2016 issue of Pediatrics, the journal of the American Academy of Pediatrics.

As the research ended, there was interest in offering this opportunity to other children at risk. Arkansas state government stepped forward to fund the continuation of the model, through Medicaid. Other children's programs have since accessed these funds, but UAMS Kids First is the only academic program of its type in Arkansas. In 2018, the state reorganized services for individuals with developmental disabilities and created the Early Intervention Day Treatment Model.

The first clinic outside of Little Rock was located in Morrilton in 1992. Nine other locations were added between 1992 and 1997, as communities expressed interest in having these services located in their areas of need. Today, UAMS Kids First has capacity to service about 700 children at any time in 11 clinics across Arkansas.

In addition to our high quality clinical services, as a program of UAMS, Kids First is dedicated to the training of future health care professionals and advancing knowledge as related to the care of young children with special health care needs through ongoing research and participation in special projects that move the needle forward for young children in Arkansas.



Program Administration:

UAMS Kids First is a program of the University of Arkansas for Medical Sciences, Department of Pediatrics.

UAMS Kids First Administrative Offices
333 Executive Court
Little Rock, AR 72205
501-526-8700

Licensure and Accreditation

UAMS Kids First is licensed/accredited by:

Developmental Disability Services (DDS),
Division of Provider Services and Quality Assurance (DPSQA)
PO Box 8059 Slot, S408
Little Rock, AR 72203-8059
501-320-6233

Family Centered Care

At UAMS Kids First, our goal is to create clinics where all children, parents, and their families feel welcomed and valued. Children participate in a program of developmentally challenging activities and supportive personal interactions planned to help their social, physical, emotional and intellectual development. All staff are responsible for working with children, parents, their important family members, and others in the spirit of teamwork and what's best for the child.

Our philosophy is that young children develop and learn best when they have opportunities to:

- **Observe and be part of respectful, supportive and friendly interactions with adults and other children;**
- **Use play to experiment, explore, learn, and grow alongside children of all abilities;**
- **Eat healthy foods and be physically active;**
- **Make choices;**
- **And that families are:**
 - **Children's first and most important teachers**
 - **The experts in their child**

UAMS Kids First supports a **child and family-centered culture** that includes children and families directly into the planning, delivery, and evaluation of the care we provide.



Core Concepts of Family Centered Care:

- All people are treated with **respect and dignity**.
- UAMS Kids First staff and contractors communicate and **share complete and clear information** with families in ways that are supportive and useful.
- Families are encouraged and supported in **participating in care** and decision-making at the level they choose.
- **Collaboration** among families and providers is key for a child's success.
- **What can you expect from us (our code of ethics)?**
 - To be listened to, taken seriously, and respected as partner in planning your child's treatment.
 - To have your family and child treated the same.
 - To participate in decision-making for your child at the level you choose.
 - To be always told the truth.
 - To have things explained to you fully and clearly.
 - To receive an explanation and apology if things go wrong.
 - To have information communicated to your child's care team.
 - To have your child's care provided timely and well documented.
 - To have these records made available to you if requested.
 - To be supported emotionally.
 - To receive high quality, safe care, by trained individuals.

Services We Provide

At UAMS Kids First, we offer evidence-based high quality early learning experiences for young children. As an Early Intervention Day Treatment Provider, we offer the following services:

Day Habilitation

Each child's individualized treatment plan helps direct the services and daily activities for the child while at UAMS Kids First. While we hope that children think they've just come to play with their friends in our treatment rooms and playgrounds, Early Childhood Developmental Specialists and nurturing Caregivers have strategically designed activities that target each child's strengths and help children reach their developmental milestones.



Services Include:

- Evidence-based curriculum and assessment tools to help identify each child's strengths and needs
- Are adapted to each child's developmental level
- Encourage the development of functional skills and independence
- Offer daily movement, physical activity, and outdoor play for children of all abilities
- Serve breakfast, lunch, and afternoon snack
- Daily nap or rest time
- Feature a very low adult to child ratios in each treatment room

Daily activities and routines help children learn and develop:

- **Fine Motor Skills:** dressing, feeding, caring for self (like brushing teeth and combing hair), pre-writing, hand-eye coordination
- **Gross Motor Skills:** getting from place to place, interacting with the world around them, kicking, throwing, balancing, using their bodies
- **Communication Skills:** talking, signing, picture communication, tone, pragmatics, pre-reading skills
- **Cognitive/Problem Solving Skills:** learning about numbers, shapes, and colors, how things work, and what to do when things don't work
- **Social/Emotional Skills:** turn taking, cooperation, coping with frustration, developing relationships with adults and other children, trusting others

Our Curriculum:

Developmentally appropriate curriculum, assessment and individualized programming produces high quality, long lasting benefits.

UAMS Kids First utilizes the Arkansas approved early childhood curricula *Adventures in Learning* and *Adventures for Toddlers*. Every day within our treatment rooms, the curriculum is modified to meet individual needs while challenging and engaging our young learners. Early Childhood Development Specialists and nurturing Caregivers incorporate other materials and activities to promote positive outcomes for children birth to preschool age.

Therapy Services

Specialized therapeutic services emphasize the development of basic skills, and support each child's ability to interact with family, friends and community. Early and regular assessments identify the needs and strengths of each child.

Speech-language pathologists work to improve children's speech and language skills and oral motor abilities such as those used in eating.

Occupational therapists work to improve the coordination of small muscles of the body, including those of the hands and face. They also understand the importance of sensations such as touch, movement, sight, sound, smell and the pull of gravity.

Physical therapists work to improve the coordination of large muscle groups such as those in the arms, legs and trunk of the body. Coordination with specialized agencies facilitates securing support and adaptive equipment such as braces, walkers, wheel chairs and communication devices.



Therapy Services are provided by a mixture of UAMS Staff and contracted community therapists with pediatric experience. Therapists work closely with Day Habilitation Staff and families to develop routines that support development in the treatment room and at home.

Nursing

Each UAMS Kids First clinic has one or more Registered Nurses, called Clinical Coordinators, who provide pediatric nursing care for children enrolled at Kids First.

Nursing Services Include:

- Medication administration or performing procedures
- Growth measurements and monitoring
- Periodic hearing and vision screening
- Case Management
- Health assessments as needed: at intake, if your child were to be sick or injured, and periodically throughout their time at Kids First

All of our nurses are American Heart Association Basic Life Support instructors who teach CPR and First Aid courses for all of our staff.



Other Services Available:

Nutrition

Good nutrition is essential for healthy development of young children with special health care needs. UAMS Kids First serves breakfast, lunch, and an afternoon snack at each location that meets the USDA Child Nutrition guidelines. Nutrition staff includes Masters-Level Registered, Licensed Dietitians who travel to all UAMS Kids First clinics.

Social Work

We know that parenting a child with medical and developmental concerns can be a stressful experience. While many people believe Social Workers only step in when problems arise, UAMS Kids First Social Workers are there from the beginning, working in partnership with families as they address the challenges of everyday life. As members of the interdisciplinary health care team, UAMS Kids First Social Workers are licensed professionals who provide a range of psychosocial services to enhance the quality of life for children and their families. Services provided depend on the unique needs of each child or family, and may include counseling and assistance with issues such as: coping with illness and maintaining health, problem solving, parenting and care-giving, life changes, trauma, partnering with families to advocate for their child, the impact of having a young child with special needs on family members, and identifying community resources.



Behavioral Consultation and Support Plans

UAMS Kids First developmental services aim to help children enrolled with the emotional and social skills to succeed at UAMS Kids First, throughout childhood, and into adult life.

Trained staff consult with families and staff to assist in addressing the needs of children with challenging behaviors, Autism Spectrum Disorders, or other behavioral needs through the development of the child's behavioral support plan to encourage developmental progress. Staff and families partner in supporting developmentally appropriate behavior so that each child is surrounded by encouragement in all of their living environments. Services are implemented in such a way that the child is encouraged to learn new skills and strategies, which the child can then begin using on their own to function successfully in their daily activities.

Services that we don't provide at Kids First:

The following services are not provided by UAMS Kids First, but may be available by another community provider:

Transportation: UAMS Kids First does not provide transportation. Transportation via Medicaid can be arranged to/from Kids First as services are medical appointments. Families are responsible for establishing/coordinating Medicaid transportation with local providers. Medicaid Transportation providers are not Kids First staff, or affiliated with the Kids First program. If you'd like to discuss setting up transportation for your clinic, please speak with you clinic social worker or clinic director. To report concerns with Medicaid transportation, call the NET (Non-Emergency Transport) Helpline at 1-888-987-1200.

24/7 Services: Kids First does not provide crisis management or emergency medical services. If you have an emergency, please call 911.

Enrollment/Eligibility

At UAMS Kids First, eligibility is based on two things:

- The needs of the child and family.
- Our ability to serve those needs.

Each of our 11 clinics has a different capacity, typically mirroring the size of the community they serve. From less than 40 in Warren to almost 100 in Pine Bluff, each clinic must limit enrollment to the number of children they can safely and effectively serve.

Children and families seek services at Kids First for a number of reasons. However, every child served at Kids First has the following in common:

- Are 6 weeks-5 years of age
- Has documented medical or social risks or developmental delays
- Is medically stable and is not at significant increased medical risk by attending a group care setting, as determined by the Kids First Medical Director
- Services at Kids First require referral from a primary care physician and a prescription for treatment.
- Lives close enough to attend daily, 5 days a week.
- Has an identified funding source for payment of care. Our staff are available to help you identify and maintain a funding source. This may include private insurance, Medicaid, private payment, or a combination.

Enrollment at Kids First begins with a developmental screening that is completed by a third party contracted by the state. Through the intake process, our interprofessional team of early childhood professionals, occupational, speech, and physical therapists, dietitians, nurses, and social workers work with families to conduct evaluations and collect input from families to determine the child and family's strengths and needs.

Results from the assessments are reviewed by our program medical director, a Pediatrician and faculty member at University of Arkansas, Department of Pediatrics. At this point, the medical director completes a medical assessment of the child. The decision to enroll rests with the medical director's informed clinical opinion of the needs of each child.

Individualized Plan of Care/Individual Family Services Plan

An individualized treatment plan is developed for each child enrolled at UAMS Kids First based on the results of the intake assessments, the observations of staff, and family input. The goals and objectives in this plan help determine the services and daily activities each child will participate in while at Kids First. At UAMS Kids First, families play a key role in planning their child's treatment, and are encouraged to observe and participate in activities at each clinic. Kids First staff are available to work with families to plan activities and routines at home that continue to support their child's healthy development.

Progress toward the treatment plan is formally reviewed at least every 6 months at a team meeting. It is very important that you attend this meeting. We'll work with you to schedule the meeting at time you can attend, and we'll do our best to give you at least 10 days' notice of the day and time of the meeting.

Continued Enrollment/Re-evaluation

Periodically, children's development may be reassessed including Speech, Occupational, and Physical Therapy Evaluations, Hearing and Vision Screens, Cognitive Evaluations or other evaluations deemed necessary by the treatment team. Continued enrollment for each child depends on their need for services.

Referrals to Outside Services

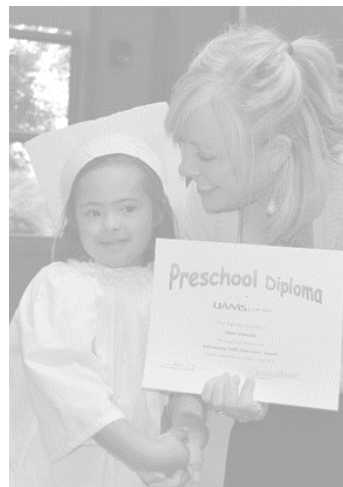
The federal and state government provides funding for specialized services for children who meet their definition of “children with special needs.” Kids First will provide you with information and referrals to these programs. We want to help you obtain all of the services your child may need.

Occasionally, your child or family may present with needs that can't be addressed by Kids First. For example, family therapy services are not provided at Kids First. In the event your family needs these services, our social worker will help make these referrals to these programs.

Transition and Discharge

One question that many families ask is, “When will I know that my child is ready to leave Kids First?” Just as each child's services are unique at Kids First, each child's plan for transition is as well. Children leave Kids First for a number of reasons:

- Reaches kindergarten eligibility age. We celebrate this “graduation”!
- Achieves their treatment objectives
- Child's care needs exceed our ability to safely care for them and others within a group setting
- Change in medical condition
- Child/Family's needs are better served by another provider in the community
- Inability to obtain a referral and prescription from the primary care physician
- Loss of funding source for payment of care. This sometimes happens for a number of reasons: change in family job status or income, change in child's clinical needs, or child's age are a few common examples.



To help your family prepare for the future, we start talking with you early about how to answer this question specifically for your child. To prevent surprises to your family and interruptions in services for your child, we work together to create a “transition plan” that includes where your child might go if they no longer receive services at Kids First, an estimated date that may happen, what we can do to ensure a smooth transition, and other community sources that may be able to support your family in addition to Kids First.

Fees and Payment Schedule

Your child's prescribed developmental services in the treatment room and therapy services at Kids First make up what is called a “Therapeutic Day.” The length of this “Therapeutic Day” is determined for each child when enrolled based on their unique needs.

Payment for all or some of your child's “Therapeutic Day” may be covered by:

- Medicaid (ArKids A, TEFRA, SSI)
- Private Insurance
- PASSE

If no payment source is available for your child's services, you will be charged a fee. Fees are determined on a sliding scale according to family size and income. If you need care for your child outside your child's therapeutic day, please speak with your clinic director. It is possible that additional hours of care may be available for a fee.

If your family pays fees, it is important that you arrange a payment schedule with the clinic director. Payment plans are available weekly, bi-weekly, and monthly for your convenience. If payment is not received within 10 days of due

date, services may be terminated. There is a \$30.00 fee for returned checks. Any fees for which you are responsible, will continue to be due when your child is absent so that we may hold a place for them.

Child and Family Rights and Responsibilities

KIDS-FIRST UAMS Kids First is committed to providing quality care to every child served and their families. It is our policy to respect individuality and dignity. We support your family's right to know about your child's care and your right to participate in the decisions that affect their well-being. We have adopted the following regarding patient rights and responsibilities:

At UAMS Kids First, children and families of children served, as allowed by law, have the right:

- To receive care that is respectful of your personal beliefs and cultural and spiritual values;
- To receive treatment based only on your child's clinical need;
- To request and receive treatment and services within our program's capabilities;
- To be informed of the nature of your child's developmental needs and treatment options, including risks, benefits, and other choices you have, in understandable terms;
- To be involved in decisions about your child's care and treatment plan, including the right to refuse treatment;
- To participate in the development and implementation of your child's care plan and treatment plan;
- To receive information regarding outcomes of care, treatment and services;
- To impartial care regardless of race, color, national origin, religion/cultural beliefs, sex, gender identity, sexual orientation, disability or financial status;
- To an interpreter as necessary to understand communications;
- To maintain communication with family, friends, legal representatives and significant others;
- To be free from any form of restraint, seclusion, physical punishment, or humiliation as a means of coercion, discipline, convenience or retaliation by staff;
- To be free from abuse or harassment;
- To be free of financial or other exploitation;
- To receive care in a developmentally appropriate environment that encourages positive behavior and social emotional development;
- To receive care in a safe environment while maintaining your personal privacy;
- To the confidentiality of records about your child's care unless a disclosure is allowed by law;
- To access your child's medical records within a reasonable time frame and have them explained unless restricted by law;
- To know the names of your child's caregivers and other individuals providing services;
- To know that Kids First is a program of UAMS, a teaching institution that participates in research;
- To be informed and to give or withhold consent if Kids First proposes to engage in or perform research associated with your child's care or treatment;
- To be informed of available care options when care at Kids First is no longer appropriate;
- To access state and community protective services;
- To exclude any or all family members from participating in care decisions for your child, as allowed by law;
- To formulate advance directives and have them followed;
- To involve family and other decision-makers in resolving questions about care decisions;
- To have these rights explained prior to the start of services and annually thereafter;
- To express any concerns or grievances orally or in writing without fear of reprisal.

Your Rights:

- Considerate, Respectful Care
- Privacy
- Confidentiality
- Responsive Service
- Understanding
- Access to Records
- Interpreter Service
- Explanation of Fees
- Express a Concern
- Physical Safety and Comfort
- To give consent to research, recordings, filming, and photos
- Social Services and other resources for your family

Family members or guardians of children served have responsibilities to:

- Provide accurate information about the child's present conditions and past medical history, including medications;
- Ask questions when information or instructions are not understood;
- Participate in making decisions about the child's treatment and carry out the plan of care agreed upon by the family and Kids First team;
- Participate in a developing a plan to address the child's behavioral needs;
- Be respectful and considerate of others. Threats, verbal abuse, violence or harassment towards others will not be tolerated;
- Help keep everyone healthy and safe. Kids First is a smoke-free/tobacco-free facility. Smoking, chewing tobacco, vaping or other tobacco products are not allowed on UAMS grounds, including the parking lot. Weapons or Firearms are not allowed.
- Observe facility policies and procedures, including safety, and those prohibiting the use of physical punishment inside a Kids First Clinic;
- Respect facility property and the property of other children and staff;
- Accept the financial obligations associated with your child's care and request financial assistance if needed;
- Be reasonable in requests for care, treatment, and other services.

Your Responsibilities:

- Answer Questions Fully
- Make sure you understand
- Be Open
- Follow the Plan
- Report Changes
- Keep Appointments
- Arrive on Time
- Be Safe
- Respect Fellow Families, Children, and Staff
- Pay Your Bill

Solicitation Policy

As the child's parent or guardian, we know that you have many choices for selecting your child's care.

DDS policy 1091 prevents providers from attempting to unduly influence a family's decision to change from one EIDT provider to another.

Examples of solicitation include:

- Staff or contractors asking you to transfer to other providers if they change employers
- Offering you money, gifts, or services to transfer to another provider
- Refusing services to you in the future if you select another service provider now
- Speaking negatively about other service providers

Discipline Policy

We use the following strategies to encourage acceptable behavior:

- Modeling the behavior we want to see
- Setting clear, consistent limits
- Encouraging and praising acceptable behavior
- Using positive language. In general, we try not to say 'no' and 'don't'. We try to give directions in a way that tells children what we want them to do (for example, instead of "don't run", we say "walk, please").
- Redirecting unacceptable behavior
- Teaching social skills
- Offering choices

It is strongly against our policy to physically discipline children (no spanking, hitting or shaking). We do not threaten, shame or belittle children for misbehavior. We never withhold or threaten to withhold food as a form of discipline, nor do we bribe children with food or any other treat in order to get them to do what we want. Group behavior charts are not used, nor are forms of *seclusion or restraint*.

Should concerns about your child's behavior arise, we'll talk with you. We have staff within our program and outside resources that can help make a plan to support behavior challenges, if needed. Our primary goal is to make sure that all children are safe and cared for in a way that promotes their physical, social, and emotional growth.

Child Pick-Up Authorization

Children are only permitted to be picked up by those the enrolling family member(s) authorize. These persons are listed on the pick-up card. Keep the list up-to-date. We appreciate it when you supply photographs of these people so we can have them on file. If you need to ask someone to pick up your child who is NOT on the card, please notify us ahead of time, either in person or by telephone. Anyone picking up a child should be prepared to show photo identification.

When dropping off or picking up your child, NEVER leave your child unattended. DO NOT leave children of any age unattended in parked vehicles. All children must be directly supervised (within eyesight) of an adult family member or one of our staff members.

It is required that children be signed in and out of the clinic each day. As you arrive, be sure to sign in before taking your child to the treatment room. Place any extra clothing, diapers, etc. in your child's cubby. When you arrive to pick up your child, let staff in the treatment room know, check your child's cubby for items to take home, and then be sure to sign out.

Record-Keeping

It is extremely important to tell us about changes in home address, home phone number, workplace (or school), work (or school) address, work (school) telephone, and cell phone of family in the home, emergency contacts and all those authorized to pick up the child. For your child's safety, we must be able to reach you (or your alternative emergency contacts), all day, every day. Keep us informed daily of phone number changes.

All information related to your child's health should be updated regularly, including allergies, food restrictions, medical procedures, health conditions, your child's doctor's name, address and phone number. This also includes any changes in your child's health care coverage or changes in your family situation that may affect your healthcare coverage (examples: new jobs, loss of job, loss of private insurance, custody change, etc).

Privacy and Confidentiality

Types of information which are kept confidential and shared only with those who need it to carry out their jobs include: medical history including any current or suspected medical problems; family status; financial information; and other personal issues like family matters or children's behaviors.

Access to written records is restricted to administrative staff, state monitors, and the treatment team directly responsible for the child. In order for records to be released to any other person, school or agency, written permission is needed from the child's parent/guardian. You may request an appointment to see your child's file, or if requested in writing, receive a copy. You may also file a request to have the record amended if you feel the information is incomplete or incorrect.

Areas of concern, like problem behavior or other special needs, are discussed with families in private and in a problem-solving manner, respecting the roles we all can play in helping children grow and successfully become part of the group. During the intake process, you received a copy of the UAMS Notices of Privacy Practices that explain in further detail your rights to privacy.

Supplies to Send

- Change of clothes labeled with child's name appropriate for current season: shirt, pants, socks, underwear. Weather permitting, we play outside daily—even if just for a few minutes. Please remember a jacket, hat, mittens/gloves in the cooler months. Closed toe, rubber soled shoes (like tennis shoes) work best for play and keep children safe from tripping.
- Disposable diapers or pull ups (if needed). These will be kept in your child's cubby and will not be used for other children.
- Wipes/Diaper Ointment if you have a brand preference

- You're welcome to send a small bag or backpack with your child so that we may send items home for you.

Additional items that may be need for your child's special situation:

- Prescription medications that will need to be administered while at Kids First. Please send in original prescription bottles.
- Supplies and equipment for medical procedures to be performed at Kids First (portable suction, tube feeding bags, catheters, etc.)
- Comfort item or family photo to help with transition
- Nutritional Supplements (ex. Boost KidsEssentials), Thickener
- Any adaptive equipment your child may use daily: braces, shoes, wheelchairs, standers, chairs, etc.
- Extra changes of clothing if your child is potty training

Meals

Kids First provides breakfast, lunch, and an afternoon snack to all children enrolled. Times of meals and a copy of the menu is posted in each clinic. If you'd like, we can also provide you with a copy for home. Because some of the children we serve have food allergies, we do ask that outside food and snacks aren't brought into the clinic.



CACFP Participation

UAMS Kids First participates in the Child and Adult Food Care Program (CACFP). In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW Washington, D.C. 20250-9410;
fax: (202) 690-7442
email: program.intake@usda.gov.

This institution is an equal opportunity provider.

Special Diets and Food Allergies

If your child requires a special diet, menus will be written by a registered dietitian to allow your child's food to be as similar as possible to other children's food. A doctor's prescription is required before starting a special diet. Food and Nutrition Services follow the recommended guidelines of USDA, American Academy of Pediatrics and the Academy of Nutrition and Dietetics. **Kids First clinics are peanut free facilities.**

Infants

Breastfeeding is encouraged at Kids First, and nursing mothers are always welcome at feeding times to nurse their infants. If you would like to send breastmilk for your infant, the container should be labeled with the infant's full name and the date and time the milk was expressed. If you have any additional questions, please speak with our clinic nurse or dietitian.

If your child takes an infant formula, please provide a written description of the usual amount the child drinks and what formula is used (Similac, Enfamil, etc.) Kids First will furnish a store brand iron fortified infant formula for infants less than one year. However, if you wish your child to have a different formula, you must provide a sufficient amount, in original containers, for your child's needs at the clinic. Unopened containers are preferred, but we understand this isn't always possible.

Solid foods are introduced to the infant according to the child's developmental level and age and in compliance with the American Academy of Pediatrics. When your child starts on baby food, these foods will be provided by our clinic.

Items from Home (including Birthday Parties)

Comfort toys and family photographs can help a child feel more secure away from home. Other toys from home can create problems at Kids First. We would hate for your child's favorite toy to be lost or damaged accidentally. If you are wondering about what your child can bring to school, and what should stay home, talk to your child's Early Childhood Development Specialist (ECDS).

Birthdays are important to every child and their family. It's a big milestone and we enjoy celebrating with your child. However, at Kids First we must celebrate in ways that are healthy and safe.

Many of our children have serious health problems that require a special diet. For some of the children, certain foods can even be dangerous. It isn't fair to bring in birthday food treats that all of the children can't enjoy. **For this reason, no food treats may be brought to Kids First for children's birthdays.** This includes birthday cake, ice cream, chips, cupcakes, snacks, or any other food treats.

But this doesn't mean we don't celebrate! We can enjoy all kinds of **special activities** for the children's birthdays at Kids First. Here are some examples:

- Let your child be King/Queen for the Day: send a special banner, T-shirt, sash, birthday button, superhero cape, hat or crown for the birthday child to wear that day.
- Parents may come to the classroom to do a craft with the children. For example, you could help the class to decorate birthday cards for your child.
- You could bring your child's favorite book and read it to the class.
- We can have a birthday parade led by your child and have everyone sing Happy Birthday.
- Your child could bring a few favorite things from home for show-and-tell.
- "All About Me" poster: You can help your child glue photos or cut out pictures of foods, books, activities, pets that your child enjoys onto a poster. You could do this at home if your child rides the van, or you could make it at Kids First. We can then display it on our wall.
- Parents may visit us to enjoy a Kids First lunch or snack with their child on their birthday.

Rest Time

Sleep is important to healthy development and learning. Daily routines allow opportunities for rest or nap. For infants, nap time occurs on the infant's natural schedule. As children get older, we work to establish a daily routine that includes the opportunity to rest. Children are provided with at least one hour of rest time daily. Children who don't nap, are allowed to play quietly or are provided with other activities. Kids First will provide a crib or cot (as age appropriate), a sheet, and for older children a blanket. If your child has a special lightweight blanket that they prefer, you are welcome to send it.

Clinic Closures and Holiday Celebrations

Our clinics will be closed on the following days:

- New Year's Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day and day after if declared a holiday by the Governor.
- Winter Break (1 Week)

Sometimes, our daily activities include discussing upcoming holidays and clinic celebrations. Please discuss your family's preferences and traditions for celebrating holidays with us.

Occasionally it becomes necessary to close a clinic for other reasons, such as staff training. If this occurs, you will be provided a minimum of three weeks' notice.

Attendance: Late Arrivals, Vacations and Absences

It is understandable that at times families get busy and a late arrival is unavoidable. Where at all possible, please be sure to drop-off your child on time. Late arrivals can disrupt daily routines for your child. If you know your child will be more than 15 minutes late, please phone our office directly to notify your child's developmental staff. Remember, Kids First services are prescribed by your child's doctor. Research tells us that children do the best when they receive services consistently. We worry about your child when they're not here. Please give us a call if your child is going to be home sick or at another appointment. See the information on the next page about when to keep your child at home.

Kids First services are provided year-round. We understand that this may conflict with planned family trips. Please let us know about vacation absences. Remember, our services for children are presented in the form of play. For that reason, it's not necessary for children enrolled to have a "Summer Break."

Weather-related Closures

We do not automatically close when area schools close because of bad weather. The decision will be made individually at each clinic. **If the clinic will be closed, and your local radio or TV station accepts announcements of closings, we will ask them to include Kids First. Clinic closures are also posted on our Facebook Page.**

Should bad weather happen when children are already at the clinic, parents will be called to pick up their children. Staff will remain at the clinic until all children have been picked up.

For families using Medicaid transportation: The decision to run vans is made by the transportation provider. Sometimes, vans may not run even though we are open. At clinics where children are transported, families and van drivers will be notified that the clinic is closing. They will take children home immediately. If families cannot be reached, van drivers will be instructed to take children to the alternate address listed on emergency forms.

Emergency Response Plan

Whether a crisis takes the form of a family emergency, local disaster or a national event, follow your usual family routines as closely as possible. Eat meals, go to bed and spend your time together in much the same way as you typically do.

If an emergency strikes when children are at Kids First, we will follow our daily program with as little disruption as possible, too. Children feel secure with familiar routines. It helps them sort out what has changed, and what will stay the same. If children can count on their families and Kids First Staff to remain calm, answer their questions openly and honestly and respond reassuringly to their anxiety and fear, they will learn how to cope with crisis situations.



How we handle emergency situations:

- The director contacts local, state, and federal officials, and listens to the news to stay on top of what is happening and how we should respond. As soon as we receive instructions from the authorities, the director meets with the team to execute the recommended course of action.
- Administrators will quietly inform staff of the situation. We ask all adults – staff and families – to limit discussion of traumatic events around the children.
- Likewise, we suggest you limit children's exposure to news reports of disasters on TV or on the radio at home. We respond to questions openly and honestly, but with comfort and reassurance.
- Administrators will talk with staff about developing plans and ensure that usual routines with children are followed with as little disruption as possible.
- We will remain available to field incoming phone calls.
- We practice what to do in the event of an emergency. Children and staff participate in monthly fire and tornado drills. Staff practice annually how to evacuate the building, what to do if we lose utilities, what to do in the event of a security threat, and how to handle medical emergencies.

Immediate Emergency Evacuation

If building occupants are in any immediate danger, we will evacuate immediately. We will follow the usual evacuations routine that we practice. We always bring attendance sheets and emergency information for all enrolled children whenever we evacuate. On the rare occasion that we evacuate and can't return to the center, we telephone parents and ask that children be picked up from our emergency location.

If you arrive to drop off or pick up your child and we're in the midst of an evacuation, you may not know if this is practice or a real emergency. It is critical that we keep track of each and every child in our care during evacuations. Therefore, do not drop off or pick up your child until you have spoken with staff.

In the event of a tornado warning, we will take shelter as we have practiced. If you are at the clinic when this happens, please join us. We will leave our safe zones when the warning is lifted.

Boo-Boos and Accidents

Sometimes when children are learning to walk, or groups of children come together, boo-boos happen. For minor incidents, you'll receive an Oops! Note letting you know what happened. For more significant events like injuries that need to be checked out by your child's doctor, or require follow up at home, we'll call you.

So that we can reach you in the event of an emergency, please make sure that we have good phone numbers and emergency contact information.

Medication

If your child will attend the clinic program but requires medication, a permission slip for each medication must be completed and signed before it can be given. The form must be very clear as to dosage, frequency, refrigeration, etc.



Clinic nurses can give medication only with the physician's advice. Prescription medicine **MUST** be in the ORIGINAL container. Also, if your child requires emergency medications (such as an Epi-Pen or Diastat) these medications must be available in the clinic at all times your child is present. Some children's medical conditions require a nurse be present when they are in attendance.

If you are sending medication via Medicaid Transportation, please give us a call so we can look for it as soon as your child arrives.

Immunizations

State law requires that your child be kept current with his or her immunizations. A copy of the child's shot record must be in our files. As shots are updated, please give an updated copy to the clinic nurse.

Well-Child Checks

Pediatrician visits are just as important for healthy children as they are when children are sick. The American Academy of Pediatrics recommends well child checks at intervals described in the table to the right.

Because services at Kids First require a referral from a primary care physician, it is important that you keep your child's scheduled appointments to avoid any interruptions in their care.

Sick Kids—When to stay home?

While we wish children could be well enough to attend every day, sometimes they are too sick and need to stay home, or may have to come home early. This list may help you decide if your child is too sick to come to the clinic.

- FEVER: If over 101 degrees or child acts sick
- SIGNS OF SEVERE ILLNESS: Very weak, unusual crying, breathing hard or fast
- DIARRHEA: Watery stools, more often than usual, especially if not contained in the diaper
- VOMITING: More than once a day, unless you know it is not due to illness
- PAIN: Stomach ache, earache, toothache, headache, or other severe pain
- MOUTH SORES: If child is drooling or acts sick
- RASH: Except diaper rash, heat rash, or allergic rash
- PINKEYE: If eyes are matted, or have yellow or green drainage, or child has fever
- HEAD LICE: Until after treatment started
- SCABIS, RINGWORM, IMPETIGO: Until after treatment has been started and if the area can be covered
- STREP THROAT: Until 24 hours after treatment started and fever gone for 24 hours
- CHICKEN POX: Until 6 days after rash starts and all sores are dry and crusted

Recommended Well Child Checks:

- 2 to 5 days old
- 1 month old
- 2 months old
- 4 months old
- 6 months old
- 9 months old
- 12 months old
- 15 months old
- 18 months old
- 2 years old
- 2 ½ years old
- 3 years old
- Once a year after the third birthday.

Please make sure we have a telephone number where you can be reached if your child gets sick during the day. If you cannot be reached, be sure we know who else we can call. We want your child to be at Kids First unless he or she is too sick. If you have questions about this list or need help deciding if your child should come to the clinic, please call us before you send your child.

Child Abuse/Neglect

If there is any abuse or neglect suspected of any children in our care, our team is required by law to report it to the Department of Child and Family Services (DCFS) or the Arkansas Child Abuse Hotline (1-800-482-5964), as appropriate.

Please be aware also that children will not be released to impaired individuals. If our team has reason to believe that any family member or guardian picking up a child is under the influence of drugs or alcohol, an emergency contact will be called to pick up the child and the incident will be reported.

According to Arkansas state law, your child may be subject to interview by Child Care Licensing personnel, DCFS Special Investigators, and/or law enforcement. This regulation is meant for the protection of children. Should one of these agencies receive a complaint such as child maltreatment or inappropriate discipline of a child in the clinic, it is their responsibility to investigate the situation. This could include talking to children enrolled at Kids First individually or as a group. Should such a situation occur, you will be notified that day of the circumstances which prompted the interview, as allowed by law. Confidentiality of any interview will be maintained.

Family Communication and Participation in Care

Your participation in planning your child's care is very important. We ask that you attend treatment planning sessions at 2-4 times a year (or more if your child needs). This is where you can speak with the individuals working with your child daily, share your concerns for your child, and tell us what you'd like your child to work on at Kids First.

Call at any time to discuss concerns, ask questions, etc. Sometimes treatment staff are working with children and you may have to leave a message, but we will make sure to call you back as soon as possible.

You will receive a red communication folder on your child's first day. This is where we will send home daily notes or your child's work for you to keep, and you can also send us things, too. Occasionally there may be things that require your signature. If your child's folder is lost or damaged, please let us know.

Grievance/Complaint Procedure

It's always our goal to address things informally as they come up. Please let us know about any concerns that you have about your child's care so that we can work together to solve the issue. You are always welcome to call or drop by to speak with your child's treatment room staff, therapists, social worker, or clinic director. Remember, if we don't know about a problem, we can't fix it.

Sometimes things can't be addressed informally, and we understand that. Should you wish to initiate a formal grievance/complaint, please follow these steps:

1. A parent or guardian may initiate a grievance or complaint by bringing it first to the attention of the clinic's director who will attempt to resolve the issue within 10 working days.
2. If the issue cannot be resolved satisfactorily within that time frame, the director shall refer the parent or guardian to the Program Operations Manager (501-526-8700) who will, after investigating the complaint, discuss the findings and recommendations for resolution within 10 working days.
3. Should this matter still not be resolved to the satisfaction of the parent or guardian, the Program Administrator shall be notified, and again after talking to all persons involved, will offer a decision within 20 working days.
4. At this point, the internal procedure will have been exhausted. Should there continue to be a grievance, a written appeal should be made to the Grievance Committee at:

**Kids First, UAMS Department of Pediatrics,
#1 Children's Way, Slot 512-39, Little Rock, AR 72202**

5. Decision of the Grievance Committee will be rendered in 30 working days and provided to the family/parent in writing along with information on external appeal processes that might apply. The UAMS Legal Department may also be contacted.
6. Parents/families are assured that lodging of a grievance will not result in retaliation or barriers to service.
7. Formal complaints received within a fiscal year will be reviewed annually by a committee of program managers. Any trends noted regarding individual clinics or specific incidents will be investigated to determine actions to be taken to improve performance.

Right to Appeal under DDS Policy 1076

Parents/guardians, Community Programs, Service Providers, Care Coordinators, other interested parties and all DDS employees have the right to appeal decisions made by DDS under DDS policy 1076.

The Board of Developmental Disabilities Services, according to DDS Board Policy 1003, has delegated its authority to hear appeals to the DDS Director. The DDS Director hereby adopts this Appeal Policy to apply to *all* appeals of DDS services.

- A. All reconsiderations and appeals of DDS decisions shall be made in accordance with the Administrative Procedures Act, Ark. Code Ann. § 25-15-201 et seq.; the Medicaid Fairness Act, Ark. Code Ann. § 20-77-1701 et seq.; and the Medicaid Provider Manual §§ 160.000, 190.000, and 191.000.
- B. Reconsiderations will be heard by the DDS Director or their designee, and must be filed within fifteen (15) business days of receipt of the denial notice. Reconsideration Requests should be mailed to:

DDS Director's Office
P.O. Box 1437, Slot N501
Little Rock, AR 72201-1437

Family Advisory Council

The UAMS Kids First Family Advisory Council (FAC) is a group of parents and staff who work as partners to improve patient care and family experiences. Meetings are held at each clinic, and connected regionally by video conferencing:

- Northeast: Pocahontas, Searcy, Newport, & Mountain View
- Northwest: Lowell, Ft. Smith, & Morrilton
- Southcentral: Magnolia, Warren, Pine Bluff & Little Rock

For information about meeting times, please see your clinic director.

Education/Training Sessions

Each clinic hosts at least 4 family education or training sessions each year. Taught by our staff or others in the community these sessions focus on topics related to early childhood development, managing behaviors, other services in the community for children with special health care needs, planning for kindergarten transition, or other topics requested by families. If you have an idea for training, please let us know.

Family/Community Events

Periodically the clinic hosts activities for families to celebrate special milestones with their children. This may include holidays, Special Olympics Field Days, Arkansas Children's Week, Graduation, or other fun events. Attendance at these events is voluntary, but are usually fun for everyone.

Family Surveys

Once a year, we send out a survey to all families to find out how you think we are doing. You don't have to wait for the survey though, please let us know at any time if you have concerns or questions.

Follow us on Facebook

Please follow UAMS Kids First on Facebook for program updates, notices, and activities to do with your child. We do ask our staff not to “friend” families served on their personal Facebook pages. This is to protect your child and family’s confidentiality. There are lots of other ways to reach our staff though:

- Calling the clinic phone number
- UAMS Email
- Leaving a message at the front desk

Observations

Parents are welcome to visit or call the clinic at any time. Your interest and involvement are important to your child's development. To make sure that you get the most out of your visit, we do ask that extended visits (more than 15 minutes) be scheduled in advance. Please let us know if there is a particular service that you'd like to observe. Our staff are available to demonstrate things we are working on with your child and ways that you can support their care at home. The more we work together, the better it is for your child.

We do ask that you help keep your child and others healthy and safe during observations by:

- Not bringing other persons with you unless you have first cleared it with the director. This is particularly true of other children not enrolled in the clinic.
- Reschedule if you are feeling ill or when you have been around others who have been sick
- Securing purses, medications, outside food or drink, or other personal items in a locked area of the clinic or in your car
- Washing hands
- Remaining with your child's group
- Diapering/Feeding only your own baby

Please understand that in the same way we protect your child’s confidentiality, we have to protect the other children’s too. We’re not able to discuss another child’s diagnosis or other protected health information with you.

Volunteer

Volunteering your time or service to Kids First is a great way to help support our mission. Volunteers often help us by sharing their special talents with children enrolled (like playing an instrument or sharing about their job), reading, or assisting staff with special events. Contact the clinic director at your location for more details.

External Advocacy Services:

Sometimes it is necessary to seek additional support in advocating for you child’s needs. Here are some external services that you may find useful.

Disability Rights Services, Inc.
400 W Capitol Ave #1200, Little Rock, AR 72201
(501) 296-1775

Arkansas Advocates for Children and Families
1400 W Markham St, Little Rock, AR 72201
(501) 371-9678

Medical-Legal Partnership (available for Arkansas Children’s Hospital patients)
1 Children’s Way, Slot 695 Little Rock, AR 72202
(501) 364-1541