



Family Service Agreement (RCOC)

Welcome to TLC Speech and Language; Talking, Language, and Communication. We are happy to have you join our TLC family!

The following information emphasizes the importance of family/caregiver involvement in the early intervention process. Please read carefully, as this is an agreement between therapist and family/caregivers to ensure goals, outcomes, and needs are being addressed in an effective and beneficial manner. This document will be reviewed and signed prior to or at the beginning of the initial session. This is to ensure that concerns and questions can be addressed, that all parties are in agreement. A copy will be made for your records. It is my hope that these therapy services will be of benefit to your child, and family as a whole. We are available by phone, text, or email should you need to discuss any questions or concerns.

Pre-Intervention Questionnaire

A simple questionnaire will be given to caregiver/s prior to initiation of services in order to gain understanding of needs, goals, concerns, questions, etc. There is a sibling questionnaire as well, so that they may also be involved in this process. This is to help in the formation of plan-of-care to ensure child and family are at the center of the therapeutic process.

Initial Consultation

Generally, a one-hour consultation is conducted to meet the child and family/caregivers. The needs of the child and family will be discussed as well as therapy goals and desired outcomes. A one-month verbal commitment is mandatory prior to initiating the therapy program.

Therapy

Goals will be set at the initiation of therapy, with ongoing assessment and changes made as needed. The caregiver/s is encouraged to be involved in the goal-setting process. It is essential that the family be involved with carry-over of goals and skills addressed during therapy. Family is welcomed and encouraged to attend and participate in therapy sessions, including siblings! Involvement may include, but is not limited to: session observation, participation in session activities/tasks (including siblings, other family members, close friends, or any other person family deems important to the process), practice and carryover of skills on non-therapy days, post-session active-listening discussions with family/caregiver, and family/caregiver education provided by therapist or other community resources.

Periodic consultations may be scheduled to further discuss goals, progress, and any changes being made to the therapy program. Other professionals involved with your child may be contacted in order to maintain continuity of his/her entire program.

Cancellations

A 24-hour cancellation notice is appreciated, although it is understood that sudden illnesses and emergencies may occur. For planned cancellations, a 2-week notice is requested. Make-up sessions will be scheduled when possible. If frequent cancellations become a pattern, the therapy program may need to be altered or discontinued.

Discontinuation of services

At least 2-weeks notice is needed prior to termination or transition from therapy. Otherwise, the patient may be billed for those scheduled sessions.

Please do not hesitate to contact me with any questions or concerns. Maintaining an open line of communication is imperative to your child's progress, so please know I am available to you.



I understand and concur with this Family Service Agreement, as described above:

_____	_____	_____	_____
Signature	Caregiver Name	Relationship	Date
_____	_____	_____	_____
Signature	Caregiver Name	Relationship	Date
_____	_____	_____	_____
Signature	Caregiver Name	Relationship	Date
_____	_____	_____	_____
Signature	Family Member Name	Relationship	Date
_____	_____	_____	_____
Signature	Family Member Name	Relationship	Date