

Outpatient PT & OT Therapy Department Guidelines

<u>Family Centered Care</u>: Families and children have an active role in identifying outcomes and goals based their individual needs.

<u>Therapy sessions</u>: The last 10 minutes of a treatment session may be used to discuss your child's progress, homework and to ask questions until the session time has ended.

<u>Illness:</u> These guidelines apply to <u>ALL visitors:</u>

- Anyone with mild illness of cold, cough, earaches, allergies can come to therapy
- All visitors must be fever free <u>without medication</u> for 24 hours before attending therapy
- All visitors with MRSA or ringworm must have area bandaged/covered
- <u>NO visitors will be able to attend therapy if you have: Chicken pox, whooping cough,</u> <u>diarrhea, vomiting, strep throat, pink eye, lice or scabies !</u>

Gym and treatment areas:

- All patients and caregivers need to wait in the reception area. The therapist will take you and your child to the treatment area.
- <u>Cell phone use is not allowed in treatment areas to protect the privacy of every patient.</u>
- All patients must remain with the treating therapists or caregiver at all times.
- No more than 1 family members/visitors are allowed to attend therapy with the patient.
- Only therapists are allowed on rolling stools
- Family and visitors are not allowed on equipment or to play with toys due to safety and infection control

<u>Equipment:</u> Please bring all equipment needed for therapy (splints, walkers, cups, etc) to each therapy session. Otherwise, we may not be able to provide treatment and the session will be recorded as cancelled

Discharge: A child may be discharged from therapy for the following reasons:

- Outcomes/goals are attained.
- Age appropriate skills are met.
- Policies on the Caregiver Commitment Form are violated.
- Lack of measured progress toward goals
- Non-compliant behavior: Biting, punching, kicking or causing harm to therapists/others
- Attempts to damage Children's of Alabama equipment and/or property

I understand that these guidelines are to assure a safe environment and treatment for all of our patients and therapists.

Parent signature

Date

Therapist signature

Date