



The Dream Guide

Therapist Edition

We are a group of dreamers who believe that we can help children and families and have fun doing it! We believe that we should strive for excellence in all we do and because of that we are constantly updating *how* we do, *what* we do. We created this guide so that you, the Dreamer, would know how we do, what we do. Distance may separate us, but together we are changing lives and making dreams come true.

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WHO WE ARE

Our Mission

To improve the lives of children and families through early intervention services that are inclusive, innovative and individualized. To provide a fun, safe and inclusive play center where all children can learn and grow.

Our Core Values



Our Core Focus

Dream Big offers exceptional in-home and center based Early Intervention and Autism Services. Our centers are welcoming, play based environments that feature playgroups for inclusive learning and fun!

Our 3 Uniques

1

Empathy and Compassion focused care for clients and their families

2

Inclusive play-based learning central to growth in our Boutique Centers and Home Sessions

3

Exceptional staff training and culture on all levels

Our Commitment

Your child will be matched with a therapist that is **caring** and **trained for excellence**

Your child will enjoy their time in our **unique centers** where safety and health are paramount, or in the **comfort of their homes**

Your child will **experience fun and joy** as they **meet their goals** and **make meaningful progress**

The team



Vision Day, February 2020

Cristina Cordeiro, CEO/Executive Director

Hi! I'm Cristina, I started Dream Big in 2016 because I believe that everyone should aspire for more. Parents should have hope for their children's futures, children should be in a space where their imaginations can take flight and where they can learn while having fun. I want every person on the Dream Big team to believe in their dreams and constantly reach for more. I am married to my high school sweetheart and I have two young children, Nick and Lili who have taught me endless lessons. I love travelling, boating, being near the ocean, fishing, reading and spa time!



Lyre Fribourg Psychologist, PhD, BCBA-D Chief Clinical Officer

I am a Licensed Clinical Psychologist and a Board Certified Behavior Analyst. For more than 25 years, I have worked with children and families in homes, schools, and in diverse communities.

I have vast experience utilizing evidence-based interventions and my genuine approach helps me make meaningful connections with families. I come from a large family and have a sensitive understanding of the complexities of behavior and family dynamics. Outside of work, I enjoy spending time with my children who give me even more perspective on childhood and the challenges that come with parenting.



Stephanie Garkow, Sr. Regional Director

Hi! I'm Stephanie, I have been in the field of supporting families for the past 13 years. Since I was young I had the passion and desire to support and provide resources to both children and adults with special needs. In my free time, I love hiking, dirt bike riding, and taking cycling/spin classes. I have a three year old daughter who is my pride and joy. I have the honor of leading the Dream Big Children's family. I am grateful for our passionate and dedicated team.



Elena Briceno, Regional Director

Hi! I'm Elena, I've been in the human services field since 2008. I started working with adults with special needs and furthered my career working with children. I have a passion to teach, guide, and help others in need. I love to see the impact we make on the children we support and the parents' participation within this growth. At Dream Big we love to play and have fun! I have two young children that are 18 months apart. Amalie and Leo motivate me to wake up and be a better version of myself. They keep me active, and we love to be out. I love to workout, run, hike, skate, snowboard, and travel.



Deanna Bishop, Director of Centers

Hi. I am Deanna, I have been a part of the ABA field for over 18 years and a part of the Dream Big Family from the 1st day we opened our doors. It has been an honor to be a part of this amazing company and to watch the children, families and staff learn and grow with us. I have three children, 2 grown daughters and a teenage son. I also have 10 grandchildren. I enjoy spending as much time with all of them as I can. I also love to travel, go to concerts, getting muddy in jeeps and spending time at the beach. I am blessed to have a job I love, a life with incredible people in it and a passion to make a difference in the lives of others.



Katie Quesada, Brand + Culture

Hi, I'm Katie!
I have the joy of leading the storytelling + marketing department here at Dream Big. I have two little kids of my own and love being a part of a female-founded company where mothers (like myself) can thrive at work. Although I don't have any experience in ABA, I understand the support and care we need as parents first hand. As a part of my role here at Dream Big- I also get to train the staff on our incredible culture of inclusion, fun, growth, care, and excellence.



HOW WE MAKE THE DREAM WORK

CLINICAL

These are the processes for the clinical aspects of the organization.

Training

Our new hire training program is designed to prepare therapists to provide excellent clinical services while demonstrating the Dream Big core values. Dream Big Orientation days contain information that you'll need to know about working at Dream Big such as HR practices, professionalism, payroll, administrative policies and procedures and also to familiarize you with our core values and culture. Shadow days will allow you to observe sessions, practice data collection and familiarize you with how we run sessions. During the field training sessions, you will implement the skills that you have learned throughout the training process with an experienced trainer observing you and providing feedback. At the end of the training process, you will take a written test on ABA principles and implementation and Dream Big policies and values. Lastly, you will have a field test in which you will demonstrate your mastery of the skills needed to independently deliver ABA services.

Our training process is separated into different levels, and each agenda is linked below:

1. [Bootcamp Therapist](#)
2. [Experienced Therapist](#)

Data Collection

Data is collected through the Catalyst online platform. Data is the foundation of ABA and how we base all of our clinical decisions, therefore data is crucial to our program.

Starting Session + Collecting Skill Data

1. Review previous notes and data
2. In most cases, data is collected for every trial however this may vary depending on the individual and the goal
3. Provide a note for each program indicating what prompts were used, what the target was, what stimuli and/or any information pertinent to the data (demonstrate)

Behavior Data

1. Review previous notes and data
2. Data is collected on every behavior that occurs as specified in behavior plan
3. If a significant behavior occurs, write a note in the notes section (below)

Daily Notes + Team Communication Notes

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1. At the end of each session, write a note summarizing the session. You can use the SOAP format as a guide.

Summary of session- note if behaviors were higher or lower, identify new behaviors, significant occurrences, etc.

Objectives targeted- What goals did you focus on?

Analysis of performance

Plan for next session and address parent concerns

Video

We use video to show progress over time and to allow team members to review progress when they are not present during the session. Clients must have signed video releases prior to video being taken.

1. Therapist lets parents know that they would like to collect video for the purpose of (supervisor asked for it/progress tracking, etc) and asks for consent.
2. Therapist uses Catalyst function on tablet to record video. It is important to use the Catalyst function and not regular video because Catalyst is HIPAA compliant.
3. Therapist records video and saves on Catalyst
4. BC/BCBA review video

Case oversight

Behavior consultants are expected to supervise therapists in the field at least once every two weeks on each case they are assigned to. Supervision sessions should be at least one hour. In addition to field supervision, BC completes non-direct case oversight hours such as data analysis, updating goals, creating new goals, and making updates to behavior plan.

Therapists can reach out to BC at any time if they have any concerns or need any clinical support on a case. BC can be reached via email, text, or phone call.

Communication with parents

Communication is key in every relationship and so we believe that our communication with parents is essential. Therapists may give parents their cell phone number, or provide them with the office phone number and let them know all messages will be forwarded to them. Communication with parents should occur during session time. We ask that parent's only reach out to therapists for last minute scheduling purposes. For all other purposes, parents should call the office or their assigned BC.

Communication with parents is important, near the end of each session, the therapist should provide the family with a quick update (no more than 5 minutes) on how the session went, progress of the goals, and any session updates needed. If parents have concerns about staffing, scheduling or programming, the therapist will kindly redirect the family to the scheduling and or clinical team.

Keep in mind our core value of “Caring” we want to understand, empathize and stand together with parents. When you are communicating with families, try to understand their perspective and use statements that reflect that understanding.

Parent participation

We believe that parents are vital to the success of our program and the child’s progress. Parents trust us with their child’s future and we take that trust seriously. We work hard to collaborate with parents and ensure that they are a part of the clinical team.

Parents participate in the ABA program by attending sessions, observing therapists, meeting with the behavior consultant and implementing the child’s treatment plan.

Below is the progression of parent participation in the ABA program. Dream Big requires parent participation during at least one session per week. In some cases, parents have work or extreme circumstances that prevent them from participating. In this case, other arrangements are made. In cases where there are other caregivers (a grandparent, nanny, respite worker etc) who provide a significant amount of care, the caregivers (in addition to parents) should also participate in the manner listed below. Funding sources may have additional requirements for parent participation.

1. Attend session and observe therapist implementing ABA therapy strategies
2. Implement goals during session with therapist present, therapist provides feedback and tracks data
3. Implement “parent goals” that are written in the child’s treatment plan/progress report
4. Generalize goals throughout child’s day
5. Meet with behavior consultant/BCBA for parent training sessions

Client Attendance

The following policy is directly from the parent handbook.

We understand that there are circumstances in which you need to cancel a session. When you need to cancel, please call the office as soon as possible. If it is a cancellation for a session within 24 hours, please notify the therapist and behavior consultant directly. If you contact the office, there will be a delay in relaying that information to the therapist and behavior consultant and they may not receive the message in time. To avoid this, please keep therapist and behavior

consultant phone numbers handy so that you can contact them when you have a same-day cancellation. If it is a pre planned absence (e.g., vacations, school field trips, etc.), please notify the office one month in advance so that therapists can be scheduled in order to maximize your child's hours. When a session is cancelled by the family, we will attempt to make up the session whenever possible as allowed by the funding source.

If more than 10% of sessions are cancelled for reasons other than illness, we will schedule a consulting session to determine the reason for the excessive number of missed sessions and decide if adjustments to the schedule and/or program will help eliminate or significantly reduce service cancellations. Additionally, we will notify the funding source of the absenteeism and will cooperate with the funding source to reinforce the importance of consistent attendance.

If your child continues to record more than 10% of missed sessions, after attempts to work with and inform you as to the importance of continuity of care, it may be necessary to end services. If the clinical team concludes services should be terminated, the parents and funding source will be given a written 30-day notice of termination of services.

Center Based Sessions

The goal of center based sessions is for children to receive ABA in a natural, fun, and inclusive community location. Our center is unique in that it is open to the public and also has private space for ABA sessions. Our clients/children who receive center based services benefit from having the opportunity to engage in social interaction with children who come to play at our center. The open play children benefit from playing with children who are diverse in many aspects. Through inclusive play, children become more compassionate, better problem solvers, and are more open to discovering and appreciating what makes us unique.

Format of sessions

1. Therapists arrive for sessions 5 minutes before the session start time to ensure they are on time and ready to receive the child.
2. Therapist should leave their personal belongings stored away in the designated area.
3. Therapist waits at front desk for child. To avoid overcrowding of the front desk area, therapists may also wait nearby at the entrance to the play area or the clinic room (depending on location).
4. When the child arrives, therapist greets him/her and his parent/caregiver.
5. Parent signs child in.
6. Child puts their personal items away.
7. Child says goodbye to parent and parent leaves. Some parents may stay for a portion of the session or all of the session.

8. Therapist leads child to their assigned clinic room (if applicable) or to the play center area for play.
9. In the clinic rooms, therapists should target goals that are being taught with structured teaching methods (such as DTT) goals that require specific stimuli, goals that are new, challenging, or require extra attention.
10. In the play center space, therapist should target social goals and naturalistic teaching goals.
11. Catalyst should indicate which goals can be targeted in the play center and which should be targeted in the clinic rooms.
12. When children are receiving ABA services in the play area, therapists should attempt to blend in. This time is similar to being on an outing. Therapists should use natural language, avoid “therapist voice” and focus on generalization and interaction with children.
13. The amount of time the child should spend in the play center area and in the clinic room is specific to the child.

This chart provides an overview of the clinic room and play center

	In clinic room	In play center
Collecting Data	On tablet as occurs	No tablet, record data when you return to clinic room
Stimuli	The preferred stimuli is natural objects, toys, books that are shared and available in rooms. Specific stimuli, if needed, can be saved in child’s box.	Use objects, toys, books, in play center. Do not carry a bag or tablet around the play center, leave all items in the clinic room. <i>Personalized stimuli and token boards should be kept in clinic room.</i>
Goals	New goals, goals that require structured teaching, stimuli, specific SD’s, and DTT	Social interaction, play, communication goals. Goals that are being targeted for generalization, PRT/naturalistic goals
Stimulus Response/ Reinforcement	Specific to the child’s preference.	Should be natural
PECS/Communication book	Should be targeted in all areas as this is the child’s communication modality. Teach initial phases that require prompting and structured teaching in the clinic room and then generalize to all environments as soon as	Should be targeted in all areas as this is the child’s communication modality



	possible	
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Cleaning

The child should clean up after themselves when they play. This is a valuable skill to learn and should always be a target for the child to gain independence. When the child is done playing in an area, they should clean up. Therapists are responsible for making sure the child has picked up. If the child spills something or otherwise makes a mess that the child cannot pick up on their own, the therapist should clean it whenever possible. If the therapist is unable to clean the area because of behavior or safety concerns, the therapist should ask the front desk for assistance. If a toy is broken, the therapist should turn it in to the front desk and/or notify the front desk staff.

In the clinic rooms, therapists are responsible for returning all of the supplies they used to the location that they were originally stored.

The 3 I's

The focus of our center based sessions is on the 3 I's, Inclusion, Independence and Interaction.

Inclusion

Inclusion is the idea that everyone belongs. We believe that creating an inclusive play environment leads to an inclusive world. We invite all children to play and engage together. We want to see the children we are supporting in our early intervention center based services playing together with open play children in our DB center and also in their communities.

Here are 5 tips to increase inclusion:

1. Be natural- say hi to the parent, don't force greetings between kids- typical children don't usually greet each other until they are much older. Preschool and early school age children will typically just start playing next to each other. They don't usually introduce themselves or formally greet other children.
2. Be the life of the party! Attract the children- Make your activity more fun than what is otherwise going on- be creative, enthusiastic and use the children's interests to motivate them to play together.
3. Be subtle with prompting- use least intrusive prompts
4. Be positive....but normal! Use verbal praise for the big stuff and don't overuse "good _".
5. Be on the hunt for opportunities to include. Look at what the other children are playing and find children who might have the same interests as the child you're supporting. Start activities that can

include others such as duck duck goose, treasure hunt, picnic, dinosaur excavations in sand room, art projects, sensory play, etc.

Independence

We focus on teaching developmentally appropriate independence skills. This includes self help skills such as toileting, eating, dressing and self-care. In the center this is targeted by taking off and putting on shoes, toileting, washing hands, eating snack, wiping their nose and cleaning their faces as needed and other activities that naturally occur throughout the day. Additionally, we teach independence by following the schedule, engaging in activities and engaging in interaction with others with minimal prompting. Therapists should focus on increasing independence by systematically fading prompts.

Interaction

One of the unique advantages of having sessions in our inclusive play centers is that children can learn social interaction skills. Therapists should focus on increasing interaction amongst children by encouraging parallel play, turn taking, sharing and interactive activities.

Social Skills Groups

Throughout the day, we have group times that are dedicated to targeting specific social skills. The social skills groups will run for 15-30 minutes per day. Children will be grouped according to their skill levels. 3 children will be assigned to a group together at a time. The groupings will be determined by the BC/BCBA and may change as needed.

Social skills group time may be during circle time, snack time and small group time.

Staffing

Groups will have 1-2 therapists leading the group at a time. Initially, there will be two therapists to allow time for the children and staff to adjust to the group setting. When there are two therapists present, one can lead and the other can provide prompting and support and collect data. Therapists will take turns taking their 10 minute break during the group time. Each therapist will take their 10 minute break during the 30 minute group time. When you are leading the group, you will lead the activity and implement the goals as written in the child's treatment plan.

Data Collection

Each group will have a clipboard with each client's goals and a data sheet to collect data during the group time.

Activities

- Art project- target sharing supplies, passing needed materials amongst each other, showing other children each other's artwork (show and tell style)
- Board games- practice turn taking, waiting for your turn, knowing whose turn it is, learning each other's names ("whose turn is it?"), playing the game
- Interactive games- hot potato, musical chairs, simon says
- Cooperative activity- block building
- Snack time- target conversational skills such as making reciprocal statements ("I like goldfish snacks/I like cookies" or "My favorite animal is a dog/My favorite animal is a pig"), statement question ("I like Skittles, what kind of candy do you like?")
- Circle time- target fading physical presence and prompting of therapist, participation

ADMINISTRATIVE

Scheduling

Initial Scheduling

1. We use [NPA works](#) for scheduling, billing and payroll. During new hire orientation, you will be given a username and password.
2. When you were hired, you provided your availability. It is critical that you do not change that availability as you were hired for cases that need that time.
3. Please use the "Therapist Availability" google form to confirm your availability
 - a. Therapist Availability Google Form
 - i. [Monrovia](#)
 - ii. [Ontario](#)
 - iii. [Rancho Mirage](#)
 - iv. [Riverside](#)
4. You will be sent an email from the scheduling team when you are assigned a case.
5. Your schedule will be added to NPA works and from there you will see your scheduled work days and hours, the client address, phone number, and relevant client notes.

Therapist Availability Changes

1. If you need to change your regular schedule due to an availability change such as school or family needs, please request that change as soon as possible and no later than the 15th of the month prior (i.e April 15th: report all availability changes for May). Please use the "Therapist Availability" google form to make changes to your availability (linked above).
2. All changes must be approved by BC and RD.
3. Please note that changes in availability may lead to change in hours.

Therapist Tardies

Center

1. If you are going to be late to a session, please call the center manager and text the behavior consultant on the case.
2. Center manager or assistant will start the session until the therapist arrives.
3. If you are more than 10 minutes late, the person covering will need to bill for the time that they started the session. Please put this request in the Schedule Change Google form. For example, "I was late and Cindy covered from 8:00-8:25. Please add her to NPA works for that time and I will adjust my NPA session start time to 8:25."
4. Adjust the NPA time with the session start time indicating the actual time you started with the client. Include details in the "Office Notes" section. For example, "Session started at 8:05 due to traffic."
5. Scheduler will double check the adjusted times when the office note section was included.
6. If any information is missing, the scheduler will contact you to update NPA if necessary.

Home Sessions

1. If you are going to be late to a session, please contact the parent and the behavior consultant on the case. Plan to make up time at the end of session if possible, or within the same week.
2. Adjust the NPA time with the session start time indicating the actual time you started with the client. Include details in the "Office Notes" section.
3. Complete the "Scheduling Request" google sheet if needed.
4. Scheduler will double check the times were changed and the office notes were included.
5. If any information is missing, the scheduler will contact you to update NPA if necessary.

Client Tardies/No Shows

Center

1. Call/text the parent and ask them if they are coming and when they plan to arrive.
2. If the family's arrival time is within 30 minutes, plan to wait for them.
3. If there is a special circumstance, ask the center manager for guidance.
4. If you wait longer than 10 minutes, add the wait time under "non-billable"/blue appointment and adjust the start time to the time the child arrives.
5. While you are waiting for the child to arrive, let the center manager know you are waiting and can help with breaks or admin work. We have a basket with admin tasks that need to be completed. Find ways to be helpful :)
6. **No Show**- If the parent does not respond to calls/texts after 30 minutes, the session will be considered cancelled. Ask the center manager if you can assist with breaks or subbing a session.

If the CM does not have work for you, then you are paid for the one hour “last minute cancellation” time in blue/non-billable and you may leave.

7. Make the changes to NPA and complete the “Scheduling Request” google form.
8. For the next session, the parents will be required to confirm with you that they will be attending at least 2 hours before the session occurs (or by 7:00am for morning sessions). If there is no confirmation by the parent, the session will be cancelled.
9. Inform the BC of what occurred so that they may follow up with the family. If there are repeated instances of no-shows, the parent will be placed on an attendance improvement plan.

In-home:

1. If you arrive at the home and no one is there or the child is not present, allow for a 15 minute grace period for the child to arrive and contact the parent.
2. If the child is on their way, you can wait for them to arrive. If they are not on their way, then determine if they will be coming and how soon they will arrive. If they can arrive within 30 minutes, plan to wait.
3. If there is a special circumstance, ask the BC for guidance.
4. If you wait longer than 10 minutes, add the wait time under “non-billable”/blue appointment and adjust the start time to the time the child arrives.
5. While you are waiting for the child to arrive, you can review notes/data in NPA works, make updates to your schedule and complete other admin related tasks.
6. **No Show**-If the parent does not respond to calls/texts after 15 minutes, the session will be considered cancelled. You are paid for the one hour “last minute cancellation” time in blue/non-billable and you may leave.
7. For the next session, the parents will be required to confirm with you that they will be attending at least 2 hours before the session occurs (or by 7:00am for morning sessions). If there is no confirmation by the parent, the session will be cancelled.
8. Make the changes to NPA and complete the “Scheduling Request” google form.
9. Inform the BC of what occurred so that they may follow up with the family. If there are repeated instances of no-shows, the parent will be placed on an attendance improvement plan.

Client Cancellations

1. Client Cancellation Center

- a. Parents will contact the center / scheduler to cancel the session. Scheduler will notify you, the behavior consultant and center manager of the cancellation.
- b. Scheduler will:
 - i. Reassign you for that day if possible
 - ii. Update NPA works as needed

2. Client Cancellation In-Home

- a. If the cancellation is in advance (more than 24 hours) the parent will email

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- scheduling and the scheduler will notify you and update NPA works.
 - b. If the cancellation is within 24 hours, parents will contact you directly.
 - c. Submit a scheduling request for the scheduling team to mark the session as cancelled.
 - d. Scheduler will follow up to reschedule the session with the family, if needed.
 - e. Scheduler will attempt to assign any make-up sessions or fill-ins on a case nearby for that same day.

3. Last Minute Cancellations

- a. When a parent cancels a session with less than 2 hours notice, this is considered a last minute cancellation.
- b. For center sessions, you will still go to the center as scheduled and you will be reassigned to work with another child. If there is no sub needed that day, then you will be given other work to complete for at least one hour and then sent home early if there is no additional work.
- c. For home sessions, you can get paid for up to one hour for the last minute cancellation if you complete a catalyst data review or meet with your BC during that time. If you would prefer to take this as unpaid time, you would just need to submit a scheduling request for the cancellation and let the scheduler know you did not work the one hour LMC time.
- d. Submit a scheduling request in order to have the session marked as cancelled and the time that you worked updated. Be sure to include the time that the parent cancelled and indicate that it was a "LMC" last minute cancellation.

Therapist Cancellation- Center Sessions

1. As soon as you know or suspect you will need to cancel, it's crucial that you communicate with the scheduling team. If you are sick and you have a session the next morning, it's better to be cautious and inform scheduling the night before so that a substitute can be found.
2. Email scheduler, BC, center manager with "URGENT- CENTER CANCELLATION" as subject line. Inform them of the cancellation date/time/client name/location of service and reason for cancellation.
3. Complete the google form for a scheduling change so that NPA can be updated.
4. We understand that there are times when you have to cancel without 24 hours notice because you are sick or there is an urgent situation. When you have more than one LMC (less than 4 hours notice) within a 60 day period, we will have a meeting with you and place you on a performance improvement plan. If you have more than one LMC within a 30 day period, you may have your center sessions reassigned to another therapist.

Therapist Cancellation- Home Sessions

1. Remember that when you cancel a session last minute you are changing the child and family's entire day. Please only cancel sessions when it is absolutely necessary. If you need time off in advance, please make a request so that we can notify parents ahead of time.

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2. Call/text parents to inform them of the cancellation and the reason for the cancellation. Offer date/time for makeup of the hours. For example, "Hi Kathy, I'm sorry I need to cancel today's session because I am sick. I am available for a makeup session on Saturday from 9-12 or I can ask the office to request a substitute. Please let me know that you got this text and what you would like to do. I am sorry for any inconvenience."
 3. Make sure that the parent confirms that they know the session is cancelled. If you leave a voicemail, ask for a return call for a confirmation and call back if you do not get a response. If you text, ask for a confirmation that the text was received.
 4. Inform Behavior Consultant immediately after informing parents by calling or texting. Also ask for a confirmation in case they were planning on having a field visit.
 5. Complete the scheduling request form. Indicate plans for makeup sessions and confirm parent's response. For example "Cancelled due to illness. Parent confirmed cancellation at 4:02pm and we have scheduled a makeup for Saturday at 9am. BC was also notified and confirmed."

Time Off Requests

1. To request time off for non-illness or non-emergency requests, please complete the Time Off Request form at least two weeks before the desired time off. If there are previous requests that conflict with your request, your request may be denied. Advance requests are preferred to avoid denials.
2. Therapist Time Off Request Form
 - i. [Monrovia](#)
 - ii. [Ontario](#)
 - iii. [Rancho Mirage](#)
 - iv. [Riverside](#)
 - v. [Apple Valley](#)
3. The scheduler and BC's will review your request and the scheduler will inform you when it has been approved.
4. For center sessions, the scheduler will find a substitute and inform the family of your time off and the sub.
5. For home sessions, once the request has been approved, you (therapist) will notify parents of the days off/cancellations. Ask the parent if they want a sub or if they want to make up sessions (if the therapist chooses to do this, it is not required).
6. If you opt not to provide make-ups, then the scheduler will attempt to schedule fill-ins, if desired by the client.
7. Scheduler will mark appointments as cancelled by staff in NPA works.

Therapist Sick Pay

Therapists are allotted 24 hours of sick pay per calendar year.

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1. Follow the therapist cancellation process above.
 2. Complete the scheduling request form and indicate that you want to use any sick hours that you have available.

Payroll

1. At the end of each session, you must render your appointments on NPA works using your tablet. Update the time of session to match the actual time you were there and have the parent sign the verification section.
2. At the end of each day, review NPA and make sure that all of your appointments have been rendered or cancelled. If you had a session that was cancelled, mark it as cancelled and in the notes indicate the reason for the cancellation. See [cancellation](#) section for more information.
3. Review your schedule every Friday and the day pay period ends (15th and last day of month) to ensure that all of your hours have been entered including all billable service hours. Ensure that all billable hours have been rendered (all should appear dark green on NPA works to show that they were rendered). Ensure that all of your payroll time has been entered. Any hours worked should be entered on your schedule/timesheet.

Mileage and Drive Time

Dream Big employees may be required to use their personal car for business purposes. Reimbursement for the operating expenses of the vehicle will be calculated by multiplying the number of miles traveled by the currently approved Standard Mileage Rate published by the IRS. The costs of standard commuting (travel between home and the work site) will not be reimbursed.

All Dream Big employees who use their vehicles for business purposes must have current and up-to-date automobile/liability insurance coverage. Employees must not transport clients in their personal vehicles.

1. The scheduling team will add your mileage to your schedule based on the miles calculated from Google maps.
2. Mileage and drive time is paid between client appointments and authorized trips to the office/center for purposes of training, meetings or picking up pre-approved materials.
3. Mileage and drive time are not paid for from your home to your first appointment or from your last appointment home.
4. If your mileage differs from what is entered into NPA, report it to the scheduling team by completing the scheduling request form.
5. If your drive time differs from what is entered into NPA, report it to the scheduling team by completing the scheduling request form. You should always check the drive time and

ensure that it is accurate and reflects the time you spent driving. If it is more or less than what was entered, ask the scheduling team to adjust it to reflect the actual time spent.

6. It is your responsibility to ensure that all of your mileage and drive time have been entered into NPA works at the end of each pay period.
7. Check your pay stub to ensure that your mileage and drive time was paid accordingly.

Quality Assurance

One of our core values is excellence in all that we do. We want to ensure that our services are not only adequate, but superb. To assure that our services are of the highest quality, we have implemented a quality assurance program.

360 Feedback Surveys

1. [Parent Feedback Surveys](#)- Sent from the Monrovia office to every parent via mail and email in January and July. Feedback is then shared with the management team and issues are addressed.
2. [Therapist Feedback Surveys](#)- Therapists receive an email with a link to a survey monkey survey in January and July. Feedback is then shared with the management team and issues are addressed.

[Session Evaluations](#)- Once per quarter each Behavior Consultant completes a session evaluation for each therapist in their caseload.

[Staff Performance Review](#)- Completed by the Behavior Consultant for therapist annually before the therapist annual review

Dress Code

All team members are a representation of Dream Big in our center, offices and community. As such, your dress and physical appearance should reflect Dream Big in a professional and modest manner.

1. **Pants**- Clean jeans and comfortable pants are acceptable. Pants should be modest and allow you to move freely. Avoid pants that are low cut in the back or are too tight.
2. **Shorts**- Shorts that are modest, loose, and not shorter than 3 inches from the knee are acceptable. Capri pants are encouraged as an alternative to shorts in hotter months.
3. **Dresses**- Dresses that are at or longer than knee length are acceptable as long as they are modest and easy to move in. Tight dresses and dresses above the knee are not acceptable as you cannot comfortably move and complete your job.
4. **Shirts, Tops, Blouses, and Jackets**- Solid color or patterned T-shirts, blouses, button shirts, and sweaters are acceptable. Graphic t-shirts, hoodies, low cut shirts, and shirts with midriff showing are not acceptable.

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5. **Inappropriate attire for work includes:** tank tops, midriff tops, shirts with potentially offensive words, terms, logos, pictures, cartoons, or slogans; halter-tops; tops with bare shoulders, and sweatshirts.
 6. **Shoes and Footwear-** Closed toe flats, tennis shoes, and boots are acceptable. High heels are not appropriate.
 7. Jewelry, makeup, perfume, and cologne should be in good taste, with limited visible body piercings. Remember that some clients are allergic to the chemicals in perfumes and make-up and should be used sparingly.
 8. **Tattoos-** tattoos that are tasteful and appropriate for children are acceptable.
 9. **Hats** are not appropriate while working. Head covers that are required for religious purposes or to honor cultural tradition are allowed.

No dress code can cover all contingencies so employees must exert a certain amount of judgment in their choice of clothing to wear to work. If you experience uncertainty about acceptable, professional casual attire for work, please ask your supervisor.

Mentor Program

Central to our core value of being growth oriented, we have a mentor program designed to support all Dreamers. When you join the Dream Big family, you will be assigned a mentor, typically a Behavior Consultant. The goal of these meetings is to offer you support with your position and also with your career goals.

1. You will meet with your mentor once per quarter for 30 minutes (non-billable, payroll time).
2. You will work with your mentor to set goals for yourself
3. Your mentor will check in with you every few weeks to see how you are doing with your goals, within your position, and in general.
4. If you have specific clinical questions, you will direct those to the assigned Behavior Consultant.
5. If you have specific scheduling questions, you direct those to the scheduler@dreambigchildren.com email or call the office.
6. If you have general employee related questions, please reach out to the Regional Director.
7. If you have general career questions or would like advice on meeting your goals or how you can advance in your position, please reach out to your mentor.

Abuse Prevention

To protect Dream Big clients, therapists and other staff are not to be alone with a single child where he or she cannot be observed by others.

1. In homes, leave the door ajar at all times. Therapists should not be in closed rooms alone with children.

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2. Avoid physical affection that can be misinterpreted. Limit affection to pats on the shoulder, high-fives, and handshakes.
 3. Document and immediately report any unusual incidents, including disclosures of abuse or maltreatment, behavior problems and how they were handled, injuries, or any interactions that might be misinterpreted.
 4. Restroom supervision: Staff will make sure the restroom is not occupied by suspicious or unknown individuals before allowing children to use the facilities. Staff will monitor the restroom area while it is being occupied by children. This policy allows privacy for the children and protection for the staff (not being alone with a child). If staff are assisting younger children, doors to the facility must remain open.
 5. Staff will supervise private activities with parent or another Dream Big staff member in the following instances: diapering, toileting, or changing clothes. When this is not feasible, staff will be positioned so that they are visible to others (standing in doorway while child changes).
 6. Staff will take note of any bumps, bruises, burns, and all symptoms or issues that are visible on a child. Questions or comments will be addressed to the parent or child in a non-threatening way. If a child states that the parent caused an injury, staff will contact the program director immediately. Staff will document any questionable marks or responses.
 7. Staff will respond to children in a respectful manner and treat all children equally, regardless of sex, race, religion, culture, economic level of the family, or disability.
 8. Staff may not have dual relationships with children/parents who are Dream Big clients outside of Dream Big. This includes babysitting, sleepovers, driving or riding in cars, and inviting children to their homes.
 9. Staff are to report to a supervisor any observation or suspicion of another staff in violation of these policies.
 10. Dream Big expressly prohibits and will not tolerate abuse of any form; the following actions are subject to immediate termination and reporting to legal authorities:
 - Physical Abuse — striking, spanking, shaking, or slapping
 - Verbal Abuse — humiliating, degrading, or threatening
 - Sexual Abuse — touching or speaking inappropriately
 - Mental Abuse — shaming, withholding kindness, or being cruel
 - Neglect — withholding food, water, or basic care

CPS Visits

Child Protective Services conducts unannounced visits to children's homes, schools and anywhere that the child is cared for or receives services at which may include our centers.

Center CPS Visits

1. When the CPS representative arrives, the center manager will have them sign-in (include check-in and check out time).
2. After the representative has signed in, the CM will ask to see their badge and ensure that their name matches the sign-in information.
3. CM will provide representative with a visitor badge and escort representative to the child
4. After the visit, send an email to BC, BCBA, and regional director with a brief summary of the visit.
5. At pick-up time, inform the parent of the CPS representative visit.

Home CPS Visits

1. CPS worker will observe the session. Therapist should direct any questions they cannot answer to the BC.
2. After the observation, the therapist should notify the BC and BCBA of the visit.

Reporting misconduct

This policy applies in the event that any employee of Dream Big has reason to believe that another employee, client (family) or any other person affiliated with Dream Big has engaged in questionable conduct involving financial improprieties, misuse of the organization's assets, incorrect billing, or other fraudulent, dishonest, or illegal conduct detrimental to the interests of Dream Big and our affiliates. This misconduct may include but is not limited to entering inaccurate information in timesheets, altering timesheets or billing records, theft of equipment or cash, fraudulent expense reports, misstatements of any accounts, or a conflict of interest that may result in financial harm or public discredit to Dream Big. Dream Big encourages its employees to report such questionable conduct through the following process.

1. Employees may make a confidential report at any time to the CEO, Cristina Cordeiro, in writing or in person. This report may be submitted anonymously by mail to our Dream Big Headquarters 137 E Colorado Blvd Monrovia CA 91016 or emailed to dreamersupport@dreambigchildren.com or cristina@dreambigchildren.com
2. Our ethics committee will promptly conduct an investigation into the matter. The committee will keep the reporting employee's identity confidential at all times to the full extent permitted by law, unless the employee submitting the report indicates otherwise. Employees making such reports will be informed of the results of that investigation.
3. Upon completion of the investigation, the committee will recommend to the CEO the appropriate action to be taken. If Dream Big concludes that fraudulent time or billing, financial improprieties, misuse of the organization assets, or other fraudulent, dishonest, or illegal conduct detrimental to the interests of Dream Big has occurred, the offender will be subject to appropriate disciplinary action, which may include verbal or written reprimand, suspension or

termination. The employee making the report will be informed of the disciplinary action taken. Dream Big will complete necessary steps to remediate the situation with funding sources and legal steps needed.

Retaliation

If, having made a report of suspicious conduct, an employee subsequently believes that he or she has been subjected to retaliation of any kind by any Dream Big employee, the employee should immediately report it to the investigating committee and the CEO, if applicable. Reports of retaliation will be investigated promptly in a manner intended to protect confidentiality, consistent with a full and fair investigation. Dream Big strongly disapproves of and will not tolerate any form of retaliation against employees who report concerns in good faith regarding Dream Big's operations. Any employee who engages in such retaliation will be subject to disciplinary action up to and including termination. The committee conducting the investigation will notify the reporting employee of the results of the investigation.

In all instances, a prompt, thorough, and fair investigation will take place, giving careful consideration to protecting the rights and dignity of all people involved. No retaliation of any kind will occur because an employee has, in good faith, reported an incident of suspect fraudulent behavior.

Reporting bias/discrimination

We don't just dream of inclusive and equal environments- we create them. Dream Big is passionate about building an inclusive work and play space where everyone is celebrated. We are proud to be an Equal Opportunity Employer. Dream Big does not discriminate based upon race, religion, gender, sexual orientation, color, age, status as an individual with a disability, or other applicable legally protected characteristics. We celebrate each uniqueness in our clients and staff- we know we are better together.

If you feel that you have been discriminated against or have experienced bias within Dream Big, we want you to report that to our Dreamer Support team right away. We will keep your report confidential and assure that your report is addressed.

Reporting Bias/Discrimination Incidents

1. Notify Dreamer Support via email (dreamersupport@dreambigchildren.com), phone 800-207-0272, or in person at our Headquarters 137 E Colorado Blvd. Monrovia CA.
2. Describe the incident and your concerns, we are here to help you and want to hear about your experience.
3. We will take your report and complete an investigation into the matter.
4. Once we have completed the investigation, we will inform you of the actionable steps we will take.

Conflict Resolution

Employee disputes are best resolved informally directly between an employee and the supervisor. However, we recognize that there are situations when a formal process may be beneficial and additional perspectives may be needed to review a dispute. Successful resolution of a dispute requires an open and honest exchange of information, a willingness to see a situation from a different perspective, an appreciation for the challenges and expectations of the jobs of both the employee and the manager, appropriate use of flexibility and an understanding of the business needs of the company.

The following is a process that Dreamers can use to internally resolve disputes.

1. Discuss the issue directly with the person/people involved.
2. If a resolution cannot be reached in the initial conversation, contact HR/Dreamer Support. Send an email to dreamersupport@gmail.com and describe the situation and what you have done to resolve the issue so far.
3. HR/Dreamer Support will set up a meeting with everyone involved.
4. In the dispute resolution meeting, HR/Dreamer Support will help each person to express their thoughts and concerns and work together to find a resolution.
5. If a suitable resolution was not able to be reached, the employee who raised the issue may request another meeting with the HR Director, Regional Director and/or CEO.

Ethical Considerations

As an organization, we follow the guidelines set forth by the Behavior Analyst Certification Board. While you may not be certified under the BACB, we expect you to abide by the ethical guidelines set forth. Below are some of the ethical situations that frequently arise. This is not an exhaustive list. If there is a situation that arises that you are unsure about, you should immediately reach out to your supervisor.

Dual relationships

Dual relationships exist when multiple roles exist between a therapist/clinician and the client/client's family members/guardians. Examples of dual relationships would include working for the family in any capacity, gathering with the family outside of sessions, becoming "friends" on social media, friendships and relationships outside of the working relationship all constitute dual relationships and should not occur.

Gifts

Clients/parents may want to express their gratitude or appreciation by giving you a gift. You may accept small gifts that are under \$10 value if they are infrequent. Parents/clients are made aware of this policy

and are encouraged to express their gratitude and appreciation with a card, handmade gift from their child etc.

Driving Clients

At no time should a Dream Big employee drive a client or client's family members. This would constitute a dual relationship and would also be a liability for driving.

Photos/Video

Dream Big employees may not take photos or videos of clients on their personal phones or devices. Photos/videos that are pertinent to the child's progress, data collection, video review for clinical purposes should be collected on the company issued devices only. Photos/videos should only be shared within Dream Big email addresses and should be sent using a secure email or within the Catalyst data collection app. At no time, should any photos be shared via social media or otherwise distributed.

Social Media

We know that you are a dreamer on and offline. Because of that, we want to represent Dream Big well in all that we say and do. Here are our Dream Big Social Media Guidelines:

Our families' privacy is very important to us! As you learned in your training- we cannot share any names, images, locations, or any other information about the children we serve. The BACB says it this way, "Behavior analysts must not share or create situations likely to result in the sharing of any identifying information (written, photographic, or video) about current clients and supervisees within social media contexts."

If any of your social networking channels are public, imagine the families of the kids you serve following you. Would they be thrilled to have you as their child's therapist based on what they saw? We hope you will use your best judgement to ensure this is true!

We are INCLUSIVE! Here at Dream Big we honor our differences on and offline. We will not engage in speech or behavior that discriminates based on age, race, color, sexual orientation, or ability in any way.

HEALTH AND SAFETY

Safety is of the utmost concern for all of the Dream Big's staff, clients and families. We believe in approaching safety from a proactive perspective to keep incidents from occurring.

Personal Protective Equipment

1. All Dreamers must wear masks at all times while working or in a Dream Big location or in a client's home.
2. Dream Big provides masks, face shields, hand sanitizer, gloves, and sanitizing spray in each location. If you work in home cases only, you may pick PPE/sanitation supplies as needed from the nearest center.
3. Children are encouraged to wear masks when possible and are required to wear masks when they are interacting directly with another child within 3 feet.

Health Screenings

Employees

1. If you have any COVID-19 symptoms (fever or chills, cough, shortness of breath, fatigue, muscle and body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea) or are sick with other symptoms, do not come in to work. Call your supervisor and follow sick policy protocols.
2. You will have your temperature taken when you arrive at the center. If you are working at a client's home, please take your own temperature before leaving for work. If you have a temperature of 100.4 or higher, you will be sent home for a sick day and follow medical guidelines. If this occurs, please follow cancellation protocols.
3. Before you start your daily work, complete the Daily Health Screening online form
4. Notify your immediate supervisor, regional director and scheduler immediately if you or anyone in your household has any signs of COVID-19 as outlined by the CDC (fever, cough, shortness of breath, etc).

Children/Clients

1. If the child has any COVID-19 symptoms (fever or chills, cough, shortness of breath, fatigue, muscle and body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea) or is sick with other symptoms, they should not come into the center or cancel the home session. Parent should be directed to follow sick policy protocols.
2. Center Based- therapists will take the child's temperature using a contactless thermometer during drop off. If the child has a temperature of 100.4 or higher, they will be sent home with their parent and the session will be cancelled.

Disinfection of work area/materials

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1. We provide hand sanitizer and cleaning supplies for all therapists and staff. You may stop by your nearest center at any time to pick up your needed supplies and refills.
 2. For home sessions, we ask parents to clean and sanitize the area you will be working in, but as an added precaution, you should use your Dream Big issued sanitizing cleaner and wipe the table and any other porous surface you will be working on/near.
 3. For center sessions, therapists should wipe their table/work area before and after they use it. We provide time before and after your session for this.
 4. Therapists should clean all items brought into the home and at the center before and after use.
 5. At the center, there are designated baskets for used toys that need to be sanitized. Therapists should sanitize toys and materials after using them.
 6. Therapists should also sanitize all toys and materials at the end of their session for both home and center.
 7. Therapists should not share items/materials between clients. If bringing in toys/materials it should be used for that child only.
 8. If you need additional materials, ask your BC.

Physical Distancing

Given the transferability of airborne viruses, we encourage physical distancing between employees and parents/caregivers/other adults.

1. Therapist/DB staff should maintain physical distance from parents, siblings and other family members present at home and in the center. Distance should be 4-6 feet. When closer contact is made it should be brief and with masks.
2. In the center, staff should maintain 4 feet distance in between each other and avoid any sustained close contact.
3. If close contact is made, the therapist should keep it brief and under a total of 15 minutes within a 24 hour time frame.

Emergency Cards

1. Children entering for open play will have a valid waiver on file and parent/guardian must stay on premises with that child while at the play center.
2. Children attending for ABA services will be signed in daily and an emergency contact list can be found in the binder that includes the daily sign-in sheet.
3. When you (DB staff) enter the center for the first time, you will be asked to fill out an emergency contact form and it will be kept on file with the center manager.

Allergies

Parents/guardians will inform DB if their child has any allergies. This information will be contained within the emergency card as well.

4. Therapists will be informed if they are assigned to work with a child who has a known allergy.
5. A list of children who have allergies will be posted in the kitchen area for staff to see.
6. In case of an allergic reaction:
 - a. If you see signs of a mild allergic reaction, the therapist should call parents and ask them to pick up the child.
 - b. If you see signs of anaphylaxis, including difficulty breathing, dizziness, hives, swelling of the face and vomiting, IMMEDIATELY call 911.
 - c. Center staff will call parents and regional director.
 - d. Follow medical professionals advice, deliver CPR if needed.
 - e. Following the incident, complete an [incident report](#).

Sick Policy

The sick policy below is included in the parent handbook and reviewed with parents when they begin at Dream Big. You can refer to this policy when needed and if you have any questions or concerns, ask your immediate supervisor.

Center- Sick Policy

Dear parents,

It's important to us that your child and our staff stay healthy. Here are the guidelines for handling health in our centers:

1. Please monitor your child's symptoms/health on a daily basis. If you notice any symptoms that may be Covid related or contagious, please cancel your child's ABA session and keep your child home. Symptoms may include fever or chills, cough, shortness of breath or difficulty breathing, fatigue, low energy, body aches, sore throat, congestion or runny nose, vomiting, diarrhea.
2. We check all staff and children's temperatures when they arrive. If they have a temperature above 100 degrees, the ABA session will be canceled and you will be asked to take your child home and cancel sessions until they are fever free for 24 hours.
3. If your child has allergies, please provide a doctor's note that describes your child's symptoms.
4. Any child experiencing vomiting or diarrhea will be sent home and asked to stay home 24 hours after the last incident.
5. Your child must be fever free for 24 hours before returning to the center.
6. If your child has been sick with a lingering cold or cough, please provide a doctor's note stating that the child is not contagious, and is cleared to return to school/ center.
7. If your child has green mucus running from their nose, we will need to send them home*.

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8. Please follow the current CDC recommendations for a Covid 19 positive exposure. If someone in the household has COVID-19 exposure and is ill, the person with symptoms should self-quarantine pending the test results. That individual should also separate themselves from everyone in their household, so they do not transmit the virus to any family members in the home. They should wear a mask and social distance if they must be in the same room as a household member. We encourage you to communicate with us every step of the way to keep everyone safe and healthy.

*If we call to ask you to pick up your child early due to health reasons, we will provide your child with a comfortable place where they can wait for you. The ABA session will be canceled and the child will be supervised by center staff. We ask that you pick up your child as soon as possible and no later than one hour after.

Home Services- Sick Policy

It's important to us that your child and our staff stay healthy. Here are the guidelines for handling health during home based ABA Services:

1. Please monitor your child's symptoms/health on a daily basis. If you notice any symptoms that may be Covid related or contagious, please cancel your child's ABA session. Symptoms include but not all, fever or chills, cough, shortness of breath or difficulty breathing, fatigue, low energy, body aches, sore throat, congestion or runny nose, vomiting, diarrhea.
2. If your child has allergies, please provide a doctor's note that describes your child's symptoms.
3. If your child becomes sick while the therapist is present, they will cancel the session and leave your home. This may include vomiting, diarrhea, green mucus running from their nose or persistent coughing.
4. Your child must be fever, vomiting and diarrhea free for 24 hours before sessions can resume.
5. If your child has been sick with a lingering cold or cough, please provide a doctor's note stating that the child is not contagious, and cleared to resume services.
6. Please follow the current CDC recommendations for a Covid 19 positive exposure. If someone in the household has COVID-19 exposure and is ill, the person with symptoms should self-quarantine pending the test results. That individual should also separate themselves from everyone in their household, so they do not transmit the virus to any family members in the home. They should wear a mask and social distance if they must be in the same room as a household member. We encourage you to communicate with us every step of the way to keep everyone safe and healthy.

Emergency Medical Situations

If there is a situation that requires immediate medical attention, the first available/closest person will call emergency services to respond.

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1. First available person will dial 911 immediately.
 2. The center manager or therapist, whomever is not attending to the child, will then call the child's emergency contacts if the parent is not present.
 3. If the emergency is with a staff member, the staff's emergency contact will be called and HR will be notified.
 4. Clear the area where the child/adult with the medical emergency is located and ask all other staff/children present to remain out of the area and to clear the area that the emergency medical services will need.
 5. Notify the on-site clinician and Regional Director.
 6. The child's therapist and a manager (CM, RD, OSC) will be assigned to go with the child to the hospital if needed and coverage will be assigned.
 7. Management will remain with the child at the hospital until their parent/guardian arrives and will debrief the parent, offer support and remain as needed.
 8. Once the incident has moved out of the emergency state, the staff who witnessed the incident will complete the [incident report](#).

Intoxication of Parent/Guardian

1. If a parent/guardian or emergency contact who appears to be intoxicated arrives at the center to pick up a child; the staff will not release the child.
2. Offer to call a relative or friend to pick up the parent and child.
3. Inform the parent that if he/she chooses to drive with or without the child, staff will inform the police immediately.
4. Call CPS if the child if the clinical team deems this a reportable incident.
5. If you arrive at an in-home session and a parent/guardian appears to be intoxicated or under the influence of substances, you should cancel the session and let the parent know you cannot conduct the session under the circumstances.
6. If there is no other adult present, you should ask the parent if there is another caregiver who can care for the child.
7. Contact your supervisor immediately to discuss next steps.

Medication

1. Dream Big employees are not authorized to dispense any medication to a child.
2. Parent/guardian may dispense medication at home as prescribed by a medical professional.
3. If a child needs medication while they are at the center, the parent can arrange to come in and dispense the medication depending on what the medication is for. The regional director would approve this based on the specifics.

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4. Staff cannot bring medications into Dream Big unless it is an essential medication such as an epi pen. In this case, please inform the regional director and center manager.

Emergency Preparedness Plan

In case of emergency, we have an Emergency Preparedness kit in each center. This kit contains enough emergency supplies to take care of all the children and staff for at least 72 hours. First Aid kits, ice packs and flashlights are also readily available.

Evacuation

1. In the unlikely event of an evacuation, center manager will take the emergency kit, the binder with the clients sign in sheets, and the emergency contact cards to the emergency meeting place.
 - a. Monrovia location will meet in the back parking lot. Use care when walking out of the building and stay close to the gate by the restaurant. Meet at the back part of the parking lot by the hair salon and big house.
 - b. Ontario location will use the stairs to exit the building. Meet in the parking lot in the area past the sushi restaurant.
 - c. Rancho Mirage location will exit the building and go toward the right hand side of the parking lot closest to the hill.
 - d. Riverside location will exit through the back of the building if safe and meet in the parking lot near the far wall. If the emergency is in the back then exit safely through the front door and meet on the grass.
 - e. Apple Valley location will exit safely through the front door and meet in the parking lot under the tree at the front of the driveway.
2. Center manager/staff will take attendance to make sure that all children and staff are accounted for.
3. Parents who are present may sign their child out and leave when it is safe to do so.
4. Therapists will call parents, give a status update, and, if necessary, ask them to pick up their child.
5. When a parent/guardian arrives, they will sign their child out. When all children have left, the therapist may leave as well.

Emergency Drills

Our emergency plan will be tested at least once a quarter and will be documented.

Other Disasters

1. If there is a bomb threat everyone will immediately evacuate the building.

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2. Staff will take the children to the parking lot closest to the center.
 3. If, within one hour, the fire department determines that the center is safe to enter, we will return to the center.
 4. If weather does not permit going outside during the hour, parents will be called immediately for pick up.
 5. Staff may call parents at any time for pickup if a child's safety is compromised.
 6. For power outages, the power company will be called and the estimated time for the outage will determine if the center will need to close early. Management will make the call either way, for each location.

Earthquakes

1. Instruct the children to get down and cover their heads.
2. Try to find a table or doorway to go under, if possible.
3. Keep children away from glass.
4. After the shaking stops and it is safe to do so, follow the emergency procedures plan in place. (see above)
5. Once again, staff will stay with clients until they are picked up by a parent or guardian.

Missing Child

1. Remain calm.
2. Assigned therapist, center staff, and all management present will immediately start looking for the child. Split up and assign different areas for searching.
3. Center manager will inform the regional director, director of ABA services, and CEO.
4. Remaining staff will stay calm and continue with their sessions.
5. Call 911 if necessary.

Safety

Safety is of the utmost concern for both our clients and our team members.

Client Safety

1. To ensure client/therapist safety, we have a hands-off policy. We do not carry or pick up clients.
2. If a child is needing physical support during home based sessions, ask the parent/caregiver to support you. For example, if the child wants to get up on a swing and they cannot get up themselves, then you should ask the parent/caregiver to assist.
3. If the child is having a tantrum, refer to the behavior plan for more detailed steps to take. In general, when a child is having a tantrum it is best to wait for the child to calm down rather than place any additional demands on them to help them de-escalate.

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4. If the child engages in aggressive behaviors, refer to the behavior plan for more detailed steps. In general, if the child is engaging in aggressive behavior, the first step is to take precautions to keep yourself, the child and others around you safe. Use physical boundaries to separate yourself and the child. Evade and avoid contact. Keep at least an arm's distance from the child. Prompt the child to engage in coping behavior and to de-escalate. Do not attempt to restrain or hold the child as this is unsafe and may escalate the behavior. If there are any objects in the way, move them to secure the location as much as possible. If this is a home session, call the parent/caregiver to assist. If this is a center session, ask a center staff, intern, or co-worker to assist. For center based sessions, if the child is engaging in aggressive behaviors, ask other children/parents to please give the child some space "Johnny is having a hard time. Can you give us some space please?" Ask center staff to assist with keeping other children safe.

Client Injuries- Home sessions

1. Immediately notify parent/caregiver that the child has been hurt.
2. If parent is close enough, have parent start first aid. If parent is not close enough and the child requires immediate first aid, therapist should immediately begin first aid. For example, if the child falls and is bleeding, therapist should immediately locate a towel or paper to stop the bleeding and call out to the parent/caregiver for assistance. Once the parent/caregiver is present, they can continue first aid.
3. Report the injury in the daily notes section and state what caused the injury, what was done to help, and the outcome.
4. If the injury requires more than first aid, immediately notify the assigned Behavior Consultant and assist the parent/caregiver as needed. A [special incident report](#) should be completed.
5. The parent/caregiver is responsible for the child's treatment, however it is helpful for the therapist to stay and offer support until the child is doing better.

Client Injuries- Center based sessions

1. Immediately administer first aid. First aid kit and ice packs are available. Familiarize yourself in advance with their location.
2. Ask for support from front desk staff.
3. Allow child time to recover and comfort them until they feel better.
4. If child requires immediate medical attention and this is an emergency, immediately dial 911 for assistance. Center staff should notify parent immediately.

Team Member Safety

Safety can only be achieved through teamwork at our company. Each team member must practice safety awareness by thinking defensively, anticipating unsafe situations, and reporting unsafe conditions immediately. Since therapists work in children's homes and there are times when a supervisor is not

present, it is important for therapists to report any instances that feel unsafe or hazardous to their supervisor or Regional Director.

1. Full safety procedures can be found in the safety manual located in each office.
2. Be proactive. Be aware of your surroundings. Report any possible safety concerns to the Regional Director.
3. Keep arm's distance from clients to avoid being injured by an aggressive behavior.
4. Do not lift heavy items. Ask for assistance.
5. Do not carry or lift clients.
6. Do not restrain or hold down a child at any time.
7. Keep area clear of toys to allow you to safely walk around.
8. Drive cautiously and do not use the phone while driving.

Special Incident Reporting

There are times when incidents occur during session that require special reporting. Below is a list of some of these instances:

1. Client injury requiring more than first aid.
2. Employee injury
3. Suspected abuse