SCHREIBER PEDIATRIC REHAB CENTER OF LANCASTER COUNTY
SCOPE OF CARE

Characteristics of Persons Served

Ages: Children ages birth to 21 years of age may be served.

Cultural: All children, regardless of race or religion are open to receiving services. A staff member is available to translate for Spanish speaking families.

Medical Status: Schreiber Pediatric Rehab Center is an outpatient rehabilitation center that offers services to children who are medically stable to receive services on an outpatient basis.

Diagnosis(es): Services are offered but not limited to children who have disabilities / impairments that include: Global Developmental Delays, Cerebral Palsy, Autism, ADD/ADHD, Sensory Processing Disorder, Orthopedic Disorders, Speech and Language Delays / Disorders, Neurological Disorders, Aural Habilitation including Habilitation after Cochlear Implant, Genetic Disorders / Syndromes, Down Syndrome, Acute Traumas, Spina Bifida, and Feeding Concerns.

Behavior: All children are accepted into the programs offered at Schreiber Pediatric Rehab Center. However, if a child exhibits behaviors that affect his/her ability to function within a program or the safety / participation of other children and staff, a behavioral plan will be implemented, which may include a requirement for behavioral support personnel to ensure the safety of the child and others. In the event that the behavior plan is not successful in resolving the issue, the client may be discharged from supports at the Center.

Fee for Service: Most Schreiber Center services are provided on a fee for service basis. Direct intervention / therapeutic treatment in many cases is billable to third party payers including private insurance or Medical Assistance, as well as referral sources including but not limited to county and state agencies and charter schools. Many specialty services are billed directly to participant; however, some specialty services are provided as part of treatment and billed as above, and some, such as the Toy Lending Library, are provided with no fee. Based upon federal poverty guidelines, a sliding fee scale is available to families in need.

Financial Responsibility: Schreiber Pediatric Rehab Center contracts with Capital Blue Cross plans, Highmark plans, Health Assurance, Health America, AETNA, United Health Care, CoreSource, Geisinger, Coventry, and Medical Assistance plans. If your insurance is not listed, please call us and we may be able to assist you.

A family is responsible for any financial obligations their insurance carrier denies.

Attendance: Attendance procedures are outlined at initial intake process. Policy #501 outlines our attendance guidelines.

Referral Sources: Clients are referred to services at Schreiber Pediatric Rehab Center by various sources including but not limited to family / self-referral, direct referral from physician / prescriber, and through contracts with various agencies including but not limited to Early Intervention and Educational institutions.
Admission Criteria

General Criteria for Admission for All Programs:
- Birth to 21 years of age
- After evaluation, the client exhibits one or more of the following characteristics:
  - Developmental delay
  - Speech/language disorder
  - Physical impairments and limitations
  - Cognitive impairments and limitations
  - Sensory impairments and limitations
- Physician referral for physical, occupational and speech therapy services

Criteria for Admission to Speech/Language Services:
- Birth to 21 years of age
- Referral from physician
  - Delayed receptive and/or expressive language skills
  - Vocal quality inappropriate for child’s age / gender
  - Nondevelopmental dysfluency
  - Child exhibits a mild-moderate feeding disorder
  - Below age level articulation skills / phonological process delay
  - Child exhibits the need for augmentative communication
- Child has been evaluated by a licensed speech language pathologist in the past three months

Criteria for Admission to Physical Therapy Services:
- Birth to 21 years of age
- Referral from Physician
- Client must exhibit one or more of the following:
  - Need for splints or serial casting
  - Positioning or mobility needs
  - Orthopedic concerns
  - Neuromuscular concerns
- Client has been evaluated by a licensed and registered physical therapist within the past three months

Criteria for Admission to Occupational Therapy Services:
- Birth to 21 years of age
- Referral from physician
- Client must exhibit one or more of the following:
  - Fine motor, visual perceptual or coordination disorder
  - Self-care delay
  - Sensory impairment which affects child’s ability to function age appropriately in motor and self-care areas
  - Mild to moderate feeding disorder
  - Needs for splints or adaptive equipment
- Client has been evaluated by a licensed and registered occupational therapist within the past three months
Transition Criteria

A client can transition between various levels of support for various reasons including:

**Functional Status Improvement or Decline:**
- If a client improves or declines in performance of targeted skills, transition to more or less intensive treatment can be implemented.
- If a client undergoes surgical intervention, based upon physician instruction there will be a transition to a time off for healing followed by resumption of intervention at a frequency/duration recommended by physician to maximize results of surgery.
- If a client undergoes procedures such as Botox injections, there may be a transition to a more intensive course of treatment to maximize the results of the procedure.

**Transition into, out of, and between funding sources:**
- Based upon criterion of funding source, clients may transition between funding sources based upon their demographics including age, county of residence, or educational placement by public or private school. For instance, a child will transition out of the Birth to Three Early Intervention contract upon third birthday, but may be eligible to continue to receive supports through the IU#13 Early Intervention preschool contract.
- Based upon status of private and public insurance, clients may transition between funding sources due to exhaustion of private insurance benefits, acceptance into or ineligibility for Medical Assistance.

Discharge Criteria

A client is discharged from service(s) when one or more of the following criteria are met:

- Client is 21 years of age
- Client is functioning at or about age level, according to standardized testing or informal observation / clinical opinion of therapist or teacher
- The established goals have been achieved
- The family requests discontinuation of service(s) for any reason; if due to economic reasons, staff is to advise family of charitable policy
- The client is referred to another facility (may be due to proximity to home, participation with insurance carrier, etc.)
- Client reaches age of Toddler Transition causing discontinuation of services through MH/ID/EI
- The client / family moves out of the area
- The client / family does not fulfill attendance requirements (refer to Client Attendance Policy #501)
- Client death
- The requested service has been completed (e.g., client referred for evaluation only)
- The client / family and service team reach a mutual decision that the child is appropriate for discharge (may continue with deficits that can be addressed in community recreational programming, etc.)
- Physician’s orders
- The client has reached the maximum benefit of treatment
- Inability to contact family – no response from family to attempts to schedule
- Client may be involuntarily discharged for not meeting responsibilities as outlined in Policy #116 – Client's Rights and Responsibilities including not meeting attendance requirements, not fulfilling financial obligations, demonstrating lack of respect for other clients, staff, or the facility, not adhering to rules concerning smoking, alcohol, or for any illegal activity while on Center property.
Outpatient Therapy Services

Therapeutic evaluation and intervention is provided by state licensed and appropriately credentialed occupational therapists, occupational therapy assistants, physical therapists, physical therapy assistants, and speech language pathologists. Physical therapy assistants provide services under the supervision of a physical therapist. Occupational therapy assistants provide services under the supervision of an occupational therapist. In a collaborative process with the child and his/her caregiver, outcomes for therapeutic intervention are created and reassessed every 12 sessions / 3 months to determine frequency and duration of services.

Occupational Therapy evaluation and intervention focuses on factors affecting a child's independence in their occupations in the home, school and play environments. A child's occupation includes play, learning, peer interaction, and self-care skills development. Intervention techniques utilized are based upon clinical reasoning, theories of occupational therapy practice, and evidenced based practice. Intervention techniques include but are not limited to:

- Neurodevelopmental Treatment Approach
- Sensory Integration Techniques
- Aquatic Therapy
- Normal Development For Fine Motor Skill Activities
- Visual Motor Development Tasks
- Adaptive Equipment
- Positioning Equipment
- Oral Motor Intervention
- Education of Caregivers, Client and Family Members

Physical Therapy evaluation and intervention focuses on factors affecting a child's mobility in the home, school, and play environments. Intervention techniques utilized are based on clinical reasoning, theories of physical therapy practice, and evidenced based practice. Intervention techniques include but are not limited to:

- Neurodevelopmental Treatment Approach
- Aquatic Therapy
- Normal Development Of Gross Motor Movement Activities
- Adaptive Equipment
- Positioning Equipment
- Orthotic Development
- Education of Caregivers, Client and Family Members

Speech Therapy evaluation and intervention focuses on factors affecting a child's speech, language, and feeding skills in the home, school, and play environments. Intervention techniques utilized are based on clinical reasoning, theories of speech therapy practice, and evidenced based practice. Intervention techniques include but are not limited to:

- Normal Developmental Sequences of Expressive and Receptive Communication
- Oral Motor Intervention for Feeding and Swallowing Safety
- Articulation Intervention Techniques
- Augmentative Device Selection and Design
- Education of Caregivers, Client and Family Members
**Specialty Services**

**Sensory Integration Praxis Testing:** A Certified Occupational Therapist is on staff to conduct the specialized testing for Sensory Motor issues.

**Activities of Daily Living Area:** A functional living area set up to resemble a small apartment to help clients learn activities of daily living for transition into independent living.

**Therapeutic Listening Program:** A specialized listening program is available to families who are interested in exploring this modality for their child. Certified staff assists with set up of the program.

**Serial Casting:** A four-week casting program offered by our licensed Physical Therapists for those clients who may benefit from achieving range of motion through this modality.

**Aquatics Therapy:** The therapy pool is used by both Occupational and Physical Therapy personnel trained in Aquatic Therapy to promote movement and achieve goals that may not be suitable for land. Medically fragile children must obtain clearance from their physician before beginning therapy in the pool.

**Water Safety Instruction:** Adapted swimming lessons are offered by a certified WSI instructor.

**Recreational Programs and Respite:** The Center offers a number of recreational programs for both younger and older clients coordinated by a certified Recreation Therapist on staff, as well as respite care six times a year for families who desire a night out.

**Toy Lending Library:** The Center offers adapted toys, switches and software for families to try before purchasing.

**Assistive Technology Services:** The Center has on staff active members of the Dynavox Dream Team to evaluate and access clients' need for Dynavox communication devices. The Center also uses various technology, including iPads / apps to access for communication and other functional purposes. We also provide access to the Pennsylvania Institute of Assistive Technology (PIAT) resource library.

**Cochlear Implant Habilitation:** Trained personnel provide specialized auditory training post-surgery for clients post cochlear implant.

**Clinical Fieldwork Site:** The Center is affiliated with a number of surrounding colleges as a clinical fieldwork site for occupational therapy, physical therapy, speech therapy candidates as well as students seeking certification as educators.

**Preschool:** S.T.A.R.S. Preschool is open to all children ages 3-school age, and is one of only a few preschools based on 'reverse-mainstreaming,' a term which refers to expanding what once was a program exclusively designed for children with special needs to include all children.

**Daycare:** The day care is open to children ages 18 months to 7 years and is one of the few day care centers based on an 'inclusional setting,' a term which refers to expanding what once was a program exclusively designed for children with special needs to include children of all abilities. By playing together, children can learn to understand, accept and value human diversity.
Here are Some Important Facts about Therapy Services

- Physical Therapy works on improving gross motor skills. Gross motor skill development is important for sitting, standing, walking, balance, strength, and coordination.
- Occupational Therapy addresses fine motor skill development necessary for playing, handwriting, self-feeding, and dressing. In addition, sensory processing is assessed and treated to improve attention span and behaviors.
- Speech Therapy works to improve a child's ability to understand what is said to them and to express their wants and needs verbally and nonverbally. Oral motor concerns are also addressed as they affect the child's ability to speak clearly and to eat independently.
- We serve thousands of children each year through our diversified programming.
- The top five diagnoses we serve include: Developmental Delay, Speech Delay, Cerebral Palsy/Neurological Disorders, Genetic Syndromes, and Sensory Processing Disorders related to Autism/Behaviors/ADHD.
- Depending upon your child's diagnosis, medical concerns, and therapeutic needs, therapy can last anywhere from a few weeks to several years.
- Children typically come for therapy one time a week for anywhere from 30- to 45-minute sessions.
- Children will remain in therapy until it is determined that they have the skills they need to be as independent as possible.
- 95% of children participating in therapy services at Schreiber Pediatric Rehab Center of Lancaster County achieve increased independence in speech/language skills, gross motor skills, fine motor skills, and self-care skills that are a prerequisite for school readiness and social/emotional health.
- 97% of parents receiving services who responded to our satisfaction survey indicate that Schreiber has helped their family.
- Schreiber Pediatric Rehab has been accredited by the Commission on Accreditation of Rehabilitation Facilities since 1999, which means that we have met a number of service and quality standards set forth by CARF, demonstrating that the Center conforms to nationally recognized standards in order to provide the most favorable service to your family.
- Thousands of volunteers from the community assist each year with direct programming, fund raising as well as building maintenance and improvement.

Our Mission Statement
Schreiber Pediatric Rehab Center of Lancaster County is a not-for-profit organization that provides a family-centered education and therapy program for infants, children and adolescents with developmental delays and disabilities in the Lancaster County area.
Our goal-oriented approach maximizes each child's ability to function as independently as possible within the community.

Our Vision Statement
Enriching and supporting the lives of children and adolescents as the community's premier provider of rehabilitation services.

Our Guiding Principles
- There will be continued improvement toward improved quality in all areas of service delivery.
- Our efforts will be customer driven to provide high quality, cost effective services.
- All children need to have timely access to development and rehabilitative services regardless of financial status.
- Service will be provided in a customer-oriented environment that is sensitive to parents' and children's needs.
- Delivery of service will be made using the most effective method that is appropriate for the child's needs.

Setting, Hours and Days of Service
Services are provided at the Outpatient Rehab Center located at 625 Community Way, Lancaster PA. Our hours of operation include 7:30am to 7:00 pm Monday through Thursday, and 7:30am to 5:00pm Fridays.

Clients may also be served in their natural environments (home visits, community sessions, daycare setting, etc.) These services are provided during the same hours of operation as center-based sessions, and are dependent upon referral source, payer source, and/or documented inability of client to participate in center-based treatment. Caregiver presence is required for community-based sessions.