Parent Responsibilities for Advocacy Services

Throughout this document, you will be asked to initial to confirm that you read and understand the information that is being presented. Please initial all of the appropriate places and submit this document with your packet in order to complete your client registration.

MEETING ATTENDANCE AND DOCUMENT RETENTION:

Please note that advocacy services or scheduling any school based or off-site appointments cannot be rendered without a signed Advocacy Contract submitted to the FHF offices and subject to the advocates availability. Contracts must be accompanied by a start-up packet and a packet review fee as defined in the Fee Schedule. A mandatory in-office consultation is required for all new clients (see fee schedule). All paperwork must be hard copies; for security and liability reasons we cannot accept any documents via email attachments or fax. Please do not send us original documents. Please provide us with photo-copies only.
 Regarding in-office consultations, please be advised that you, as the parent, are expected to bring the accompanying documents to your consultation with the advocate and are also expected to take detailed notes on the recommendations made by the advocate during your meeting. Tape recording the advocate is permissible but you must notify the advocate of your intent to record her first.

HOURS OF OPERATION:

- In most cases, our Office Staff will be available starting at 9:00am and ending at 2:00pm Monday-Friday (public school days only). During this time, clients may call for office matters such as scheduling, billing, and general questions and concerns.
- Due to staff limitations, all email and voice mail messages will be returned by an FHF staff member no later than three public school days from when the message was left.

- For immediate issues, or simple yes/no questions, it is recommended that clients email the office-fhf@fhfnyc.org.

  • PLEASE NOTE: Due to the high volume of phone calls and messages, parents are limited to leaving only one phone voice mail message per day and one email per day.
  Please do not email the advocates personal email or call their personal cell/home phone. Please only use FHF’s office email (fhf@fhfnyc.org) and office phone (718-227-2171)
  - The advocates are usually in the field from 8:30am – 5:00pm and have limited phone availability during the business day.
  It is always the parent’s responsibility to follow up the next business day after leaving a message.

CONSULTATIONS:

- Clients will be seen by appointment only.
- Clients are responsible to take notes, the FHF paralegal sits in on all new client in office consultations. The notes taken by the paralegal are for internal use. The paralegal will not be sending a summary of all issues and/or recommendations discussed.
- “Walk-In” appointments are NOT permitted.
- Non-clients may schedule phone consultations.
- Children are NOT permitted to attend meetings at the FHF office.
- Please alert the staff if you have any allergies/fears of dogs or cats.
• Sometimes, meetings are held in the main part of the home, and specific arrangements need to be made in advance.

-Please review fee schedule for costs and times for in-office and phone consultations. ALL SERVICES MUST BE PAID IN ADVANCE
*See Fee Schedule*

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APPPOINTMENTS AND MEETINGS:

First and foremost, if you want an advocate to accompany you to your child's IEP meeting or any other school-based meetings, do NOT accept the appointment date offered to you by the school without first checking the advocate's availability. **Please be aware that, in most cases, the advocate is booked at least 2 months in advance. Please be proactive and ask your school-based team to give you available meeting dates to choose from.** If you intend for the advocate to attend your child's annual review, please notify your child's teacher/provider at least three months before the IEP annual review date (listed in the upper right-hand corner of the IEP), requesting several meeting dates so that the office staff can check the advocate's availability. Please request at least three dates to better the chances of finding a mutually available date. You may also give permission to the school to contact our office directly to assist in scheduling a meeting. In certain circumstances the advocate will authorize the FHF Paralegal to attend some school-based meetings. The fee for the paralegal is a reduced rate from the advocate's fee. The paralegal cannot be directly requested or booked for any meetings without advocate approval. Please remember all meetings are scheduled to the advocate's availability.

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CLIENT STANDING

Please be advised that current clients who choose not to bring the advocate to their child’s school-based meeting are subject to a mandatory 45 minute in office appointment before being accepted back a client. There are exceptions to this rule, but those exceptions are determined by the advocate on a case by case basis. This rule is intended to prevent complications with your child’s case and to keep FHF informed and involved with all aspects of the case. Failure to comply with this rule can result in termination of your client status. FHF reserves the right not to take back clients who do not abide by these rules.

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FEE POLICY:

In order to understand the cost of each service, please see the document titled “Fee Schedule” and review it thoroughly prior to signing the contract. Payment is due in advance of ALL service. Please note that an invoice will be sent to you upon scheduling your services with FHF. Payment is due upon receipt of the invoice. Please note that your appointment can be cancelled and booked over if FHF does not receive timely payment. This payment will serve as confirmation of your appointment. All school based / CSE / CPSE / EI meetings will be billed at a “Level One” meeting (see Fee schedule), and the balance (if any) will be billed after the conclusion of the meeting. A “Fee Cancellation” charge of $35.00 will apply to all bounced checks or canceled payments. A $50 cancellation fee will apply for in-office and school based cancellations when FHF is given fewer than 24 hours notice in advance of the cancellation. If a check bounces or the fee is canceled, all future payments must be made by cash, money order, or a certified teller’s check. All checks and money orders must be made payable to “Families Helping Families” or “FHF.”

Sliding fees and/or fee waivers are available upon evidence of financial need (tax returns, federal assistance statements, etc.). FHF follows the Federal Income Guideline standards to determine which families can qualify for free or reduced rate services. Please note that there is a limit to the amount of pro-bono cases the FHF office can accept, and therefore there is no guarantee that FHF will accept your case. Executive Board approval is required prior to FHF accepting any pro-bono cases. Board approval may require an in-person interview and/or home visit.

Signature:

OFF-SITE MEETING PROTOCOL:

The FHF advocate has severe physical and medical disabilities which prevents her from walking more than 80 feet. This disability, compounded by the parking challenges in areas around school buildings present a significant challenge to walk from a parking spot to the meeting site. Therefore, it is your responsibility to provide her transportation from her parking spot to the front door of the school. You must also notify the school that the advocate requires a handicapped accessible entrance, and if the building does not have an elevator you must request a ground level meeting room. Transportation arrangements for the advocate must be made when booking the meeting with the FHF office, and confirmed one week prior to your meeting date. If for some reason, you the client, cannot accommodate this a fee (see Fee Schedule) will be incurred to cover the costs of a staff member driving the advocate to and from your child’s meeting.

Signature:
CANCELLATION POLICY:

We ask that you notify FHF immediately if you need to reschedule an appointment. All fees are non-refundable if the meeting is canceled. Any change in appointment dates and times are subject to advocate availability. A fee paid for one date can be transferred to another date as long as the advocate is available on the alternate date and time.

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INFORMATION PACKET:

Please note that all documents that you send to the FHF office must be PHOTOCOPIES ONLY (no original documents). Also note that all documents will be shredded within 3 months of receipt if you do not have a fully executed current school year contract on file. It is your responsibility to call during business hours to ensure that your documents were received. Please allow 2 business days for the office to process the packet. Do not expect an FHF staff member to call you to confirm receipt of your child’s documents.

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SUGGESTED PACKET DOCUMENTS:

- A cover letter stating your concerns.
- Copies of your child's IEPs for the last 2 years, including the most recent IEP.
- Copies of your child's last 2 years of report cards.
- If applicable, copies of all New York State testing scores and graphs, as available at school or on the mystudent.nyc website.
- Copy of your child's most recent evaluations.
- Copy of medical reports, including diagnosis.
- Copy of any other relevant information pertaining to your child’s educational needs.

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PACKET DELIVERY:

Please mail or hand-deliver the packet directly to the FHF office address.
When hand delivering: Place packet directly in the locked white mailbox (the pull-down handle faces the street). Do NOT ring bell. Do not call the office to notify staff of your packet delivery. When mailing packet: To ensure timely receipt, do NOT make delivery contingent upon a signature. 

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As the parent, you are your child’s primary advocate and case manager. Please understand that you are contracting FHF to co-advocate with you for your child.

You need to consider yourself a partner in the roles and responsibilities in obtaining your child’s free and appropriate public education.

Please sign here to confirm that you have read the information above and that you understand the roles of the advocate and the parent.

Childs Name: ____________________________  Parents Name: ____________________________

Parents Signature: ____________________________  Date: ____________________________