



STAVANGER SPEECH THERAPY

Hilary Page Stautzenberger, M.S., CCC-SLP • Tananger, Norway
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CLIENT CONTRACT 2024-2025 School Year

Missed Visits/Cancellation Policy

- Please notify me (via email/text) by 8:00 AM if your child will be absent from school. If you do not notify me the appointment will be considered a missed visit.
- More than 3 missed visits in a 6 week period may result in your child's services being placed on hold until scheduling conflicts are resolved.
- I will notify you as soon as possible if I must cancel a session due to illness or other unforeseen circumstances.
- Make-up sessions for cancellations may be offered if my schedule permits, but are not guaranteed.

Financial Policy

- Invoices are sent at the end of each month either directly to your bank via eFaktura or via email.
- Payment is due in full 14 days from invoice date. If for any reason you are unable to make the payment before the due date, please contact me before the due date.
- I can no longer accept international electronic bank transfers so please make arrangements to make payments from a local bank.
- You are responsible for submitting all claims to your insurance company should you wish to receive reimbursement for ST services.

Session Policies and Procedures

- Speech therapy (ST) services are provided based on goals agreed upon between myself and families.
- Session length will be tailored towards what would best serve the needs of your individual child. Session length may be adjusted during the school year if needed.
- Sessions are scheduled based on the school calendar.
- Daily progress will be written in the log at the back of the speech folder.
- Progress reports will be sent home 2x per year.
- Sessions are booked for a term-by-term basis. As an agreement of therapy you agree to a regular weekly session (unless other arrangements are made) for a term at a time. Before the end of each term, we will make a decision about continuation of therapy.

Discharge from Speech Therapy

The ideal situation is for the team—consisting of the child, the family, and the SLP—to come to a mutual decision to exit ST, as in the following situations:

1. The communication disorder is now defined within normal limits.

2. The goals and objectives of ST have been met.
3. The child's communication skills no longer adversely affect their educational, social, emotional, or health status.

Discharge is also appropriate in the following situations:

4. The child is unwilling to participate in sessions; attendance has been inconsistent or poor, and efforts to address these factors have not been successful.
5. The child and/or family requests to be discharged
6. The child moves to a location where ongoing service from the current provider is not reasonably available.

Additional reasons for discharge may include:

7. ST no longer results in measurable benefits or there does not appear to be any reasonable prognosis for improvement with continued treatment.
8. The child is unable to tolerate ST because of a serious medical, psychological, or other condition.
9. The child demonstrates behavior that interferes with improvement or participation in treatment (e.g., noncompliance, physical aggression)

Privacy Policies/Consent to Communicate with School Staff

I am committed to maintaining the security and confidentiality of your child's personal information. I will not release your information to any third party without first seeking your consent, unless required by law.

Personal information is collected, stored, and used for the purpose of delivering your child's speech and language intervention. It is used in order to prepare, plan and provide ST services appropriate for your child's needs.

I may also share relevant information, where appropriate, with school staff who work closely with your child in order to provide information on how best to support your child during their school day. By signing below, you consent to this communication. If you do not wish me to communicate with school staff about your child please notify me at stavangerspeech@gmail.com.

Final notes

I am proud of the positive relationships I have established with schools throughout this region and I am grateful that it allows me the opportunity to offer such convenient services to families. Your child benefits from this arrangement as well, by being able to receive high-quality, private speech therapy services during the school day with minimal disruption to their academic schedule. It also fosters collaboration between myself and the school staff. However, It is important to note that this agreement is contingent upon the school's permission, and they have the right to revoke it at any time. So I thank you for your support in maintaining these positive relationships. I value your input and encourage you to reach out to me if there are any concerns regarding school staff or school policies relating to my service.

Please keep this contract for your records and return a signed copy of the form below to me.

Looking forward to a wonderful year!

Hilary Page Stautzenberger, SLP
Owner, Stavanger Speech Therapy



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PLEASE SIGN AND RETURN THIS FORM

By my signature, I acknowledge that I have read, understand, and agree to the policies and procedures of speech therapy in the 2024-2025 Client Contract I received.

Those policies and procedures include:

- ☒ Missed visit/Cancellation policy
- ☒ Financial Policy
- ☒ Session Policies and Procedures
- ☒ Discharge from Speech Therapy
- ☒ Privacy Policy/Consent to communicate with school staff

Signature

Date