

**PROFESSIONAL PARENTING PROGRAM AGREEMENT
BETWEEN
THE INSTITUTE OF PROFESSIONAL PRACTICE, INC.
AND
PROFESSIONAL PARENT(S) NAME**

Non-Discrimination Statement

The Professional Parenting Program believes that diversity enriches our lives. We will not discriminate on the basis of age, race, ethnicity, disability, religion, gender, sexual orientation, gender identity and expression, and embrace people from all background as part of our organizational community.

This Agreement is made and entered into between The Institute of Professional Practice, Inc., hereinafter called "IPP", and Provider" or "You", to provide the following services to, called the "Child", in the Professional Parenting Program of IPP, as of .

I. Responsibilities of the Provider

1. To provide a safe, therapeutic, and structured home environment for the Child.
2. To maintain a supportive home environment.
3. To inform IPP of any change in the Child's residence.
4. To implement and follow all aspects of the Child's Overall Plan of Service ("OPS").
5. To be an active participant and a team player in the OPS process.
6. To ensure that the Child attends all treatment sessions.
7. To understand and implement all of the Child's habilitative and behavior programs.
8. To maintain open and professional communication with all treatment team members.
9. To make Yourself and the Child available to IPP staff on a weekly basis.
10. To keep appropriate documentation such as data collection, journals, incident reports, medication logs, etc.
11. To attend all meetings regarding the Child (i.e., OPS, Inter-Disciplinary Team, and Pupil Personnel Team (PPT), etc.).
12. To report all incidents, accidents, protective holds, negative community involvement, etc. to IPP on call staff and the Department of Children and Families ("DCF")/Department of Developmental Disabilities (DDS) representative immediately.
13. To notify IPP/PPP within 12 hours of learning that they or any household member, or the child in their care is the subject of a DCF investigation.
14. To provide all transportation for the Child.

15. To schedule and transport child to all medical and therapy appointments. In the event that your child is brought to an emergency room, it is the responsibility of the PP to remain with the child for the duration of the ER stay. Should the PP be unable to transport and/or remain in the ER with the child, it is required that the PP contact the emergency pager/cell phone as soon as possible.
16. To coordinate, schedule, and pay for respite in accordance with IPP policy.
17. To arrange all activities, therapies, and appointments identified by the treatment team in the OPS.
18. To attend all required Professional Parent Training classes. IPP and DCF mandate that all primary Professional Parents complete 32 annual hours of training. The secondary parent is required to complete 16 annual hours of training. This includes maintaining certification in CPR, 1st Aid, PMT and Human Rights and Abuse.
19. To provide [adequate] home and automobile insurance.
20. To protect the legal rights of the Child.
21. To coordinate, schedule, and pay for community activities.
22. To preserve the confidentiality of all records concerning the care of the Child. The Provider understands that all such information is confidential, that all such records are the property of IPP and may only be disclosed to IPP or as permitted by law.
23. To abide by all policies and procedures established by IPP relating to the Professional Parenting Program.
24. In the event the Child is in need of any services listed in (a)-(c) below, You will obtain those services only as directed by IPP. It is understood that You will not attempt to secure any of the following services except in conjunction with IPP:
 - a. Ancillary services, as determined by IPP, in the following areas: psychological, psychiatric, and social work;
 - b. Consultation services as determined by IPP; and
 - c. Assessment tools, data system, teaching materials and research materials, when available.
25. You must notify IPP in advance of any additional persons residing in the home, whatever the length of time. IPP will then have the right to evaluate the person and situation and to either approve or disapprove the addition, as it will affect the care and treatment of the Child. The home environment is extremely important to the welfare of the Child, as are the characteristics, needs and strengths of those persons living within the home environment. All individuals are selected as Providers based on the type of home and the persons living in that home at the time of placement. Notwithstanding that the usual period prior to termination notice is thirty days after written notification, IPP reserves the right to terminate this Agreement immediately if You fail to notify or obtain the approval of IPP for the additional person. Immediate termination shall be allowed in this case because the care and safety of the Child may be in jeopardy as a result of the addition of the person.

II. Payment

1. In consideration for the services provided under this Professional Parenting Program Agreement, You shall be paid **\$0,000.00** per month for an annual stipend of **\$00,000.00**. The annual stipend shall be prorated on a daily basis for the period of time services are provided under the Agreement.
2. If You are providing professional parenting services to a child funded by DCF, IPP will make all stipend payments directly to You.
3. If You are providing professional parenting services to a child funded by DDS, DDS will make stipend payments directly to You.
4. In the event that services for the Child are terminated, IPP shall not be liable to You for payment beyond the date of termination of the services.

III. Term and Termination

1. This Agreement shall be effective as of **SEPTEMBER 3, 2010** and will terminate no later than **JUNE 30, 2012**.
2. Either party may terminate this Agreement with or without cause upon thirty -(30) days written notice to the other party. IPP may terminate this Agreement immediately without notice if in its sole discretion it determines that the termination of this Agreement is in the best interests of the Child's health, welfare or safety or any state agency determines that the Child should be removed from Your care. In the event of termination of this Agreement, You shall deliver the Child to IPP in accordance with IPP's instructions.
3. In case of death of either or both Provider, IPP will assume responsibility for the replacement of the Child.
4. In case of a disability of either or both Provider or of the destruction of the home in which the Child resides, or some other emergency whereby it is not possible for You to fulfill the responsibilities set out above, then upon notice to IPP, IPP will assume responsibility for the placement of the Child and will receive all monies designated for placement and foster care services. Within thirty (30) days after said disability, destruction or emergency, Your capacity to resume responsibilities under this Agreement will be re-evaluated. If You are deemed capable of resuming those responsibilities and if proper facilities are available, this Agreement will again take effect without re-negotiation unless otherwise terminated.

IV. Miscellaneous

1. You are providing these services as an independent contractor and You may be responsible for taxes associated with respite payments.
2. All medical, dental, physical therapy, occupational therapy, or other medical related expenses are the responsibility of the birth parents, legal guardians, state agencies or corporations, other than the Provider or IPP.
3. This Agreement is subject to the current regulations of the DDS, DCF and the legal rights of birth parents and/or legal guardians of the Child, if applicable.
4. In construing this Agreement, the gender and the number of any word shall be construed to include another gender or number wherever appropriate.

Provider

Date

Provider

Date

The Institute of Professional
Practice, Inc.

By: _____
Its State Director

Date