



# **AmTryke® Therapeutic Tricycle Evaluation Site Program Guide Phase IV**

Effective July 4, 2006

The National Board is pleased to present the fourth phase of the AmTryke® therapeutic tricycle Evaluation Site Program. The Evaluation Site program was created to provide children with places to be evaluated for an AmTryke by licensed therapists. The program has seen many successes and grown to include Evaluation Sites throughout the country.

## **What is an Evaluation Site?**

An Evaluation Site is a pediatric therapy facility (hospital, clinic, etc.) or school, which receives AmTrykes and accessories through a donation by an AMBUCS chapter. The Evaluation Site agrees to use the equipment with their clients in therapy and recommend children for AmTrykes of their own. Many Evaluation Sites agree to evaluate other children, in addition to their clients or students, who are in need of an evaluation. The Evaluation Site program encourages “prescriptive intervention” by therapy professionals.

## **Why are Evaluation Sites important to chapters?**

Establishing and maintaining a relationship with a local therapists/pediatric therapy center is the most important aspect of a successful chapter AmTryke project. This is where you identify children who need AmTrykes and where you obtain support and advice from therapists.

## **The focus of Phase IV is two fold:**

### **1. Provide established Evaluation Sites with the newest generation of AmTrykes and accessories.**

The newest generation of AmTrykes and accessories are the best yet! Previously established Evaluation Sites need this equipment to use with their clients and to more accurately evaluate children on the AmTryke. It is important that Evaluation Sites receive the newest and best equipment, as well as be educated on the full range of accessories.

If there is a Evaluation Site your chapter works with regularly, visit with them, show them the newest AmTryke product flyer and find out what equipment best meets their needs. You can order the appropriate equipment, have it sent directly to the Evaluation Site and receive a special discount!

There are also several Evaluation Sites in non-AMBUCS areas that are active in the AmTryke Project. The AMBUCS Resource Center has evaluated each of these facilities to find out their equipment needs. Your chapter can also sponsor one of these Evaluation Sites at the special discount price when the equipment is shipped directly to the facility.

## **2. Provide interested facilities with the necessary AmTrykes and accessories to become a Evaluation Site.**

The AMBUCS Resource Center often receives requests from facilities to become an AmTryke Evaluation Site. Why not consider sponsoring one of these facilities this year? AMBUCS has seen great opportunity in establishing new Friends chapters around new Evaluation Sites. That could mean even more credit for your chapter.

Or, if your chapter has yet to establish a relationship with a local therapist, why not sponsor a local Evaluation Site? A local Evaluation Site can bring great things to your chapter and its AmTryke Project.

### **Chapter Incentives for Phase IV**

- Scorecard Points for Chapters
  - Sponsor a new Evaluation Site 10 points, plus 5 points for each demonstrator AmTryke furnished for the site's use. (Does not apply to trykes given away through site.) Plus 5 points for every \$500 accessory order for Evaluation site.
  - Sponsor new equipment into established Demo Site 5 points for each demonstrator AmTryke furnished for the site's use. (Does not apply to trykes given away through site.) Plus 5 points for every \$500 accessory order for Evaluation site.
- Scorecard Points for Governors
  - If 1/2 of the district participates in the fourth phase of the program 25 points
- Banner medallions and recognition at the national conference
  - Banner medallions given to every chapter participating in the fourth phase of the program
- Chapter/District Recognition in *AMBUCS* magazine



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# AmTryke Evaluation Site Sponsorship Form

*\*To be filled out by AMBUCS chapter\**

Sponsoring AMBUCS™ Chapter \_\_\_\_\_

Chapter Contact Name \_\_\_\_\_

Chapter Contact Phone number \_\_\_\_\_

Chapter Contact E-mail \_\_\_\_\_

## Please select from the following:

\_\_\_ We do not have a specific facility in mind but would like to sponsor a Evaluation Site from the list of applicants received by the AMBUCS Resource Center.

\_\_\_ We would like to sponsor the following facility as a Evaluation Site:

Name of Facility \_\_\_\_\_

Type of Facility (pediatric therapy center, hospital, school, etc) \_\_\_\_\_

Address:

Address 1 \_\_\_\_\_

Address 2 \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Facility Contact Person \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

The AMBUCS Resource Center will coordinate with your chapter and the facility to match your sponsorship with the facilities needs.

Is there a specific amount that your chapter is willing to sponsor? If so, please specify: \$\_\_\_\_\_.

**If sponsoring a specific facility in your area, they *must* submit an AmTryke Evaluation Site Application before sponsorship can be complete. Be sure review the FAQ page of the Evaluation Site Phase IV guide for more information.**



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# **AmTryke Evaluation Site Phase IV**

## **Frequently Asked Questions**

**There is a facility in our chapter area that we would like to sponsor as an Evaluation Site. What do we do?**

Your chapter needs to fill out the AmTryke Evaluation Site Sponsorship Form. The facility must submit a completed AmTryke Evaluation Site Application as well. Once both forms are completed your chapter will be awarded 10 scorecard points.

The AMBUCS Resource Center will coordinate with you and the facility to determine what AmTrykes and accessories will be ordered. Remember you receive 5 scorecards per AmTryke for the facility and 5 points per \$500 accessory order. AmTrykes and accessories MUST be used as demonstrators, not for AmTryke requests or referrals for children.

**Can my chapter still sponsor an Evaluation Site if we do not have a specific facility in mind?**

Yes! The AMBUCS Resource Center has a list of facilities that have filled out applications to become Evaluation Sites. Your chapter should simply fill out the Evaluation Site sponsorship form and note the amount you are willing to sponsor. Once a facility is selected, you will receive 10 scorecard points.

The AMBUCS Resource Center will coordinate with you and the facility to determine what AmTrykes and accessories will be ordered. Remember you receive 5 scorecards per AmTryke for the facility and 5 points per \$500 accessory order. AmTrykes and accessories MUST be used as demonstrators, not for AmTryke requests or referrals for children

**My chapter wants to purchase updated equipment for one of our Evaluation sites. How do we do this?**

Just contact Jeff at the AMBUCS Resource Center at 1-800-838-1845 ext.14 and identify your chapter's established Evaluation Site that you want to provide new equipment. Place the AmTryke and accessory order.

Remember you receive 5 scorecards per AmTryke for the facility and 5 points per \$500 accessory order. AmTrykes and accessories MUST be used as demonstrators, not for AmTryke requests or referrals for children.

**Can my chapter get credit for sponsoring new equipment into a facility outside of our area?**

Yes! Just like new Evaluation Sites, the AMBUCS Resource Center has a list of facilities that need updated equipment. Just contact Jeff at the AMBUCS Resource Center at 1-800-838-1845 ext.14. He will work with you to find a facility that meets your chapter's financial capability.

**Where do you ship equipment that we sponsor for an Evaluation Site?**

In most cases the AMBUCS Resource Center prefers to ship equipment to the facility directly. If you'd like equipment shipped to your chapter for a special presentation to the facility, contact the Resource Center and arrangements can be made.

**Do facilities outside of our area know that we sponsored them?**

Yes, the Resource Center will submit them with that information so they may thank you. Remember, you could have on-going requests from that Evaluation Site for AmTrykes to the children they serve. Why not build a relationship and encourage them to start their own supporting AMBUCS chapter?

**AmTryke Evaluation Site Application**

\*to be filled out by Facility\*

Name of Facility \_\_\_\_\_

**Address:**

Address 1 \_\_\_\_\_

Address 2 \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Facility Contact Name/Title \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Ext. \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

E-mail \_\_\_\_\_ Facility Web site address \_\_\_\_\_

Type of Facility (pediatric therapy center, hospital, school, etc) \_\_\_\_\_

National AMBUCS, Inc. policy states that AmTrykes will not be given away without a licensed PT or OT evaluation. **Do you have licensed PT or OT that will perform the evaluation?**      Yes                      No

**Ages of clients: (please circle all that apply)**      0-3 yrs      3- 8 yrs      8-14 yrs      14 yrs or older

Average number of children receiving therapy per week: \_\_\_\_\_

**Is your facility able to assess children not current clients of the facility on the AmTryke therapeutic tricycle? (please be sure to check with your legal department or other authorized department)**                      Yes                      No

**Is your facility able to conduct free assessments for clients?**                      Yes                      No

**Is your facility able to conduct free assessments for children who are not current clients of the facility?**      Yes                      No

**Is there ample space in your facility for the AmTryke equipment?**      Yes                      No

**Please tell us more about your facility and the children you serve. Why do you feel your facility would make a good AmTryke Evaluation Site?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Facility name) \_\_\_\_\_ accepts a donation of an AmTryke therapeutic tricycle(s) and accessories to become an AmTryke Evaluation Site. In doing so, the facility agrees with the terms listed in the Evaluation Site program guide.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



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