



ALLIANCE OF INFORMATION AND REFERRAL SYSTEMS

Accreditation Manual

Manual and Criteria: February 2022 Update

**Drawn from the AIRS Standards for
Professional Information and Referral, 9.0 Edition, July 2020**



The Alliance of Information and Referral Systems (AIRS at www.airs.org) is a membership organization whose mission is: **"To provide leadership and support to our membership and affiliates to advance the capacity of a Standards driven Information and Referral industry that brings people and services together."**

The criteria of the AIRS Accreditation Program are drawn from the AIRS Standards and Quality Indicators for Professional Information and Referral. However, it is important to note that they are not an exact replica. In some areas, the accreditation criteria may be more specific than the Standards, while in other areas, the accreditation criteria may not include a requirement for a certain Standard.

For further information about AIRS, AIRS Accreditation, and our other products and its services, contact:

AIRS

11240 Waples Mill Road, Suite 200

Fairfax, Virginia 22030

(703) 218-AIRS (2477)

info@airs.org

www.airs.org

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AIRS ACCREDITATION PROGRAM OVERVIEW

The purpose of the AIRS Accreditation Program is to determine the compliance of Information and Referral (I&R) programs with accepted professional practices as defined by the [AIRS Standards and Quality Indicators for Professional Information and Referral](#).

The AIRS Accreditation Program establishes a strong foundation upon which an I&R program can continue to build and grow. An organization considering accreditation should first assess its goals and its readiness. The process is collegial, but the AIRS assessment is focused on compliance. Agencies must meet the requirements outlined in this manual to become accredited. Accreditation awards are made for a period of five years.

In some states and provinces, organizations are cooperating formally within an '*I&R system*' sharing certain delivery components. Organizations may consider applying for Accreditation *as a system* if they meet the criteria outlined in this manual.

The cost is \$6,000 USD for AIRS members and \$9,000 USD for non-members. AIRS has held this price for more than a decade. Payment is made when the application is submitted. An applicant may choose to break this into two separate payments of \$3,100 USD each for members and \$4,600 USD each for non-members. All payments are non-refundable.

The AIRS Accreditation process has five stages:

1. A **Consultative Review** of your overall policies, processes, and procedures
2. An online **Community Survey** of organizations within your resource database
3. A virtual **Resource Database Review**
4. A **Call Review Process** of your direct service
5. A virtual **Site Visit**

Confidentiality

All transactions between the AIRS Accreditation staff, reviewers and the accrediting agency, and all materials submitted by the agency, are confidential. AIRS will only share this information with the express authorization of the applicant agency.

We do not provide public information about whether or not an agency is "in process". An organization either is or is not AIRS Accredited. If an accredited agency does not re-accredit, then their name is removed from the public list of AIRS Accredited organizations/programs. If a new organization begins accreditation but does not complete it for any reason, that information remains confidential.

TIMELINE OVERVIEW

The accreditation process must be completed within 12 months for existing holders of AIRS Accreditation. First time applicants have 18 months to complete the process.

Work on each of the first four stages can begin simultaneously.

By the end of the 10th month for existing holders of AIRS accreditation, all outstanding materials, documentation, and resource database work must be completed. First time applicants have until the end of the 16th month.

The virtual site visit should be completed by the end of the 12th month for existing holders of AIRS accreditation. First time applicants have until the end of the 18th month to complete the virtual site visit. Occasionally, this timeline may go over by a grace period of a couple of weeks for a variety of reasons.

If you are seeking re-accreditation, then your application and payment should be submitted at least 6 months before your current expiry date. Earlier still is fine as it gives you more time. Please contact accreditation@airs.org to check on your situation.

If you apply late, you lose time from your process. For example, if you apply 2 months late, you only have 10 months to complete the process instead of 12 months.

The first 4 components of the AIRS Accreditation process must be completed before a virtual site visit is scheduled. You can start any of the four components at any time before the specified deadlines and there is no specific order in which that they need to be completed in.

IMPORTANT: AIRS strongly recommends that the first 4 components should be commenced as soon as possible. You do not need to await the completion of one component before starting another. This is particularly true with scheduling your database review to allow more time for corrections.

First Time Accreditation Timing Guideline

<p>Core Stages: First time Accreditation (Please note that all stages can be scheduled earlier to allow more time for corrections)</p>	<p>Completion Deadline: First time Accreditation</p>	<p>Use this column to enter your months for each deadline</p>
<p>Applicant receives accreditation packet after sending application and payment to AIRS – 18-month timeline starts when AIRS emails you the accreditation packet</p>		
<p>AIRS conducts call review calls</p>	<p>3rd month</p>	
<p>AIRS sends call review reports to applicant</p>	<p>Within one month of receipt</p>	
<p>Applicant sends Excel file of agencies listed in the resource database for the community survey</p>	<p>5th month</p>	
<p>AIRS schedules review of resource database</p>	<p>5th month</p>	
<p>AIRS conducts a community survey of organizations within your database</p>	<p>6th month</p>	
<p>AIRS conducts online review of resource database</p>	<p>6th month</p>	
<p>AIRS sends first resource database review report that outlines any corrections needed</p>	<p>Within one month of receipt</p>	
<p>Applicant submits narrative responses and documentation for Consultative Review</p>	<p>8th month</p>	
<p>AIRS sends first consultation report to applicant with any corrections needed</p>	<p>Within one month of receipt</p>	
<p>Applicant completes final submissions for outstanding requirements (This includes all submissions of corrections for consultation reports and database review reports if needed)</p>	<p>16th month</p>	
<p>Applicant schedules virtual site visit</p>	<p>16th month</p>	
<p>AIRS conducts virtual site visit</p>	<p>17th month</p>	
<p>AIRS makes award determination</p>	<p>18th month</p>	

Reaccreditation Timing Guideline

Core Stages: Reaccreditation (Please note that all stages can be scheduled earlier to allow more time for corrections)	Completion Deadline: Reaccreditation	Use this column to fill in your months for each deadline
Applicant is notified 12 months before accreditation expires that they need to apply within one year.	12 months before Accreditation expiration date	
Applicant receives accreditation packet email after sending application and payment to AIRS – 12-month timeline starts when AIRS emails the accreditation packet	6 months before Accreditation expiration date	
AIRS schedules review of resource database	2 nd month	
AIRS conducts call review calls	3 rd month	
AIRS conducts online review of resource database	3 rd month	
AIRS sends call review reports to applicant	Within one month of receipt	
AIRS sends first resource database review report with any corrections needed	Within one month of receipt	
Applicant sends Excel file of agencies listed in the resource database for the community survey	5 th month	
AIRS conducts a community survey of organizations within your database	6 th month	
Applicant submits narrative responses and documentation for Consultative Review	6 th month	
AIRS sends first consultation report to applicant with any corrections needed	Within one month of receipt	
Applicant completes final submissions for outstanding requirements (This includes all submissions of corrections for consultation reports and database review reports if needed)	10 th month	
Applicant schedules virtual site visit	10 th month	
AIRS conducts virtual site visit	11 th month	
AIRS makes award determination	12 th month	

To achieve AIRS accreditation, you must complete Stages 1- 4 before the virtual site visit is conducted. An agency may choose to stop the accreditation process at any point, but if you do so, you will not be considered accredited. If you decide to reinitiate the accreditation process after stopping, you must file another application, pay another fee and submit updated documentation.

We are aware that circumstances change, and an agency within the AIRS accreditation process is permitted to request a single extension of up to four months. Possible reasons for an extension include a) loss of key staff, b) move to a new facility, c) change to a new software platform, d) major organizational change such as a merger, or e) agency is impacted by a major disaster.

I&R SYSTEM

In some states and provinces, organizations are cooperating formally within an *I&R System* sharing certain delivery components. Organizations may consider applying for Accreditation *as a system* if they meet the following criteria:

1. There is an agency that can demonstrate that some core elements of the accreditation criteria (such as resource database, training, and reporting) are implemented centrally for the system as a whole (i.e., the answers provided by an accrediting agency would be identical). In this case, the other accreditation applicants in the system do not have to individually demonstrate that they meet the requirements of these core components.
2. The agency responsible for the core elements must be accredited first. If successful, other agencies can apply for their own accreditation and have the benefit of the prior approval for those common components *within a three-year window*. Reaccreditation must follow the same pattern.
3. Before an I&R System may begin the application process, AIRS must receive an Agreement/MOU signed by all parties in the system that describes the structure of the system (i.e., the roles, responsibilities and governance within the network).

Please note: Collaborations unified under a public banner (such as 211 Greenstate) that have varying components across multiple organizations (e.g., training, reporting or a statewide database that is maintained by multiple agencies in the system) *cannot apply for accreditation as a system*.

For example, if there are 8 agencies within a state, sharing the same software platforms, with the same database style guide and shared training programs – if each still maintains its own regional data and primarily answers calls within their own region – then each needs to be separately accredited.

There may also be occasions where an accrediting agency has sub-contracted a key element of its work to a non-accredited agency – in which case, all elements must be reviewed regardless of where it is housed.

GENERAL ADVICE

Before starting:

- Read the [AIRS Standards and Quality Indicators!](#)
- You can find general information as well as an accreditation readiness assessment and a resource database self-assessment on the Accreditation page of our website: www.airs.org/accreditation. The assessment documents are particularly useful as an indicator on whether you are ready to start the process.
- You do not have to be perfect to apply – you have time to adjust as the process unfolds.
- However, on the other hand, please do not apply if you are a new program – focus on getting your operation functioning smoothly while using the AIRS Standards as a guide.

During the process:

- Have a single person coordinate the work.
- Thoroughly absorb the Accreditation Manual.
- Stick to Basics. Create documentation that reflects reality ... not what you think will impress the reviewers.
- Don't hesitate to reach out to the Accreditation Director at accreditation@airs.org if you have any questions.
- You can start any of the four components at any time before the specified deadlines and there is no specific order of completion. AIRS strongly recommends that the first four components should be commenced as soon as possible. Starting one component does not involve waiting until another is complete. Scheduling your database review as soon as possible will allow more time for corrections if needed.
- Carefully follow the Guidelines for Electronic Submission of Materials located in this document. This ultimately saves time for all parties.
- Immediately notify the Accreditation Director if any changes happen that may have implications for the accreditation process or if you have a change of accreditation contacts.

Tips and tricks

- Google Docs allows you to assign sections of the document to specific staff members and allows you to make comments on the documents. See the directions here: tinyurl.com/yxv7fcdn
- Plan your time and make a schedule. Assign different staff members to the parts that they can best accomplish.
- Common problems to watch out for on the Consultation Review:
 - Inserting documentation into descriptions or responses.
 - Referencing documents rather than providing a response or description.
 - Not reading carefully or not contacting the Accreditation Director to explain questions not

- fully understood.
 - Assigning parts to different staff without having someone to bring all the pieces together.
 - Missing pieces, especially items on the documentation list.
- Database Review Tips
 - Review the AIRS database standards and make sure you are following each of the standards.
 - The process is designed to be consultative. It is not “all or nothing”. You will have time to address any recommendations.
 - Your database reviewer can answer any questions that come up throughout the process.

STAGE 1: CONSULTATIVE REVIEW

NOTE that the Stage 1 review covers all the AIRS Standards EXCEPT for those within the resource database area.

1. For existing holders of AIRS Accreditation, you should have completed the following within 6 months (first time applicants must complete within 8 months):
 - Review the Accreditation Criteria and contact the AIRS Accreditation Director with questions as needed.
 - Complete and have the Board President or other Chief Officer and the Executive Director/I&R Program Manager sign the “Certification of Accreditation Documentation” form (check table of contents) and submit this with your initial documentation.
 - Submit an electronic copy of the consultation materials, including the Certification of Documentation Agreement form on the pre-formatted Google Drive as directed by AIRS staff. (Refer to Guidelines for Electronic Submission of Accreditation Materials below).
 - All materials must be current at the time of submission.

2. Within one month of receipt of submitted documentation, AIRS will:
 - Analyze the submitted materials and write a consultation assessment report identifying where requirements have been met and where they have not been met.
 - Send a copy of the consultation assessment report to the applying agency.
 - **NOTE:** Most agencies will need to submit additional documentation during the Consultation Component. Please allow for this contingency in your plans.
 - Please review the consultation assessment report and contact the Accreditation Director with any questions. You must fully complete the consultation report and provide supporting documentation by the end of the 10th month for existing holders of AIRS accreditation. First time applicants have until the end of the 16th month to submit all needed materials. This includes all submissions of corrections for consultation reports.

GUIDELINES FOR ELECTRONIC SUBMISSION OF MATERIALS

The following will help present your information in the best possible light. It is detailed because it must be detailed. Please review it carefully. Always email accreditation@airs.org if you have questions or need further clarification.

- Your documents should be **submitted within the folders on the provided confidential, pre-formatted Google Drive**. For example, all of the documents required for the Consultative Review should be placed in that folder.
- You must have or create a Gmail address so that we can provide full access to key folders.
- When creating the initial and subsequence responses for the main Consultative Review, please enter your responses in a **blue colored font**. **Only submit this as a Word file and not as a PDF**.
- For the documentation checklists, it is helpful for the reviewers if you check off these items after they are added to your folder. If the boxes are not easily checked, please place a checkmark or an X next to the box.
- Place all requested documentation files inside the main Consultative Review folder or Resource Database folder. In each folder give the files a number and name. The numbers on the files should match the numbers next to that documentation item in the manual (For example, 001 Service Delivery Responses; 002 MOU for After Hours; 003 Confidentiality Policy; etc.). Give your files names that a reviewer can easily recognize. They can be in PDF and/or Microsoft Word/Excel format. PDF documents should be in a "searchable" rather than "image-only" PDF format. (Copiers typically produce image-only PDF files.) The reviewer needs to be able to search your documents as well as use the copy-and-paste function. Do not compile all your material into a single file. The narrative and documentation parts need to be separate files.
- If more than one document fulfills a specific requirement, such as multiple Job Descriptions, label documents by number and letter – i.e., 004a, 004b, 004c etc.
- If one document meets the need for more than one required documentation item, please submit it multiple times for each required item.
- Save your work in this Google Drive folder and notify accreditation@airs.org when it is complete and ready for review. Your materials will not be reviewed until you confirm that they are ready.

Remember, responses and descriptions in the narrative part need to be complete and stand on their own. This is very important! Again, do not insert documentation in the narrative section even if you believe it answers a question, and do not reference other material (for example, "See Personnel Policies, page 12.").

General Approach:

A careful balance of narration (explanation), checklist responses, and documentation is needed to establish that you have satisfied a component. It is very important that you give full responses for every component.

Be sure to read the minimum expectations, requests for narrative descriptions and the list of required documentation carefully and provide exactly what is asked for. In most instances, one sentence narrative responses are not adequate. Make sure your descriptions are concise, informative and complete. This cannot be emphasized too strongly.

Keep in mind that clarity, conciseness and coherence are keys to a successful application!

Review:

We recommend that you have at least two people review your material before submitting it. Check for thoroughness, clarity, coherence, and readability. Use spell-check. Here's to your successful efforts!

STAGE 2: COMMUNITY SURVEY

The Community Survey provides the applicant with a snapshot of the awareness and perceptions of human service agencies within your resource database towards the I&R service.

- By the end of the 5th month of the process, AIRS will request a one-time Excel file of all the agencies listed in the resource database including organization name, city, state/province, Executive Director name, and Executive Director email. Please note that if your agency does not want to provide the agency emails to AIRS based on an internal privacy policy, then your agency can choose to send the emails to the agencies directly from your email. AIRS will provide the outgoing message and the link to the survey.
- 500 random email addresses drawn from the Excel file will be entered into the AIRS SurveyMonkey account. Please note that if the agency has less than 500 agencies then the email count sent will be lower. The agency is not required to secure a minimum number of responses.
- Community agencies will receive an email announcing that your organization is seeking national accreditation through AIRS. They are requested to assist you by providing a survey response within two weeks.

The questions include:

- What is your organization's relationship to the agency/program applying?
- To what extent do you agree with the following statements?

- Their staff are responsive and helpful
 - The wait time for a call to be answered is acceptable
 - Their resource database is current, accurate and relevant
 - The organization is collaborative
 - They refer eligible clients to currently available programs or resources
- When service/program information changes at your organization, do you contact the organization/program to provide them the updated information, or do you wait until they contact you?
 - How would you rate the overall service provided by the agency to your community?
 - Do you have any additional comments you would like to share about the agency?
- The results are downloaded and sent to the accrediting agency without comment. *Note that the process is part of AIRS Accreditation, but the survey results are not a factor.*
 - When the agency receives accreditation, a thank you email will be sent to those 500 email addresses announcing that you have secured AIRS Accreditation. Please note that this will be sent directly by AIRS unless your agency prefers to handle it internally.

STAGE 3: RESOURCE DATABASE REVIEW

To verify that your I&R resource database meets AIRS accreditation criteria, an AIRS database reviewer will interview your resource database manager and conduct a remote online review of your resource database. The following topics are covered during the process:

- Online access to information
- Inclusion/Exclusion Criteria
- Data Elements
- Taxonomy
- Applying Style Guide Rules and Indexing
- Searching the Database
- Maintaining the Database
- Disaster Resources
- Data Collection and Reporting
- Quality Assurance

To prepare for the review, the following documents must be sent to the AIRS database reviewer:

- 001 - Inclusion/Exclusion Policy
- 002 - Style Guide
- 003 - Customized list of Taxonomy terms used (In Excel format)

- 004 - Database maintenance procedures
 - 005 - Description of service area (including counties, towns, or regions)
 - 006 - Report showing formal update dates (In Excel format if possible)
 - 007 - List of agency names and their legal status type or agency types (In Excel format)
 - 008 - Your Target Term Use policy
- The review will be conducted via Google Meet software, enabling the reviewer to see the applicant's database online.
 - The length of the review varies, but on average it is about four hours total, and divided into two separate Google Meet sessions.
 - The database reviewer prepares a report and sends it to AIRS, which is then sent to the applicant.
 - If corrections are required, applicants must respond to the database review report and provide details of corrective actions. Additional documentation may be requested. All rounds of corrections are due by the end of the 10th month for existing holders of AIRS accreditation. First time applicants have until the end of the 16th month to submit all needed materials.

For more information about the remote database review and what it will include, see the Remote Database Review section of this document.

STAGE 4: CALL REVIEW PROCESS

A third-party contractor conducts 10 calls during a variety of operating hours.

- The contractor provides a score for each call based on the standard monitoring sheet used in most I&Rs (i.e., marks given on various call elements resulting in a score such as 75% or 92%).
- Community resource specialists are expected to:
 - Use an appropriate greeting
 - Demonstrate active listening throughout the call
 - Establish dialogue and ask correct questions to determine client needs
 - Demonstrate a willingness to help
 - Use appropriate tone, pace, volume, and inflection throughout the call
 - Use short, simple sentences where possible
 - Inspire confidence and trust
 - Demonstrate politeness and courtesy
 - Show empathy throughout the call
 - Avoid slang, personal opinions, religious or political statements

- Control silence gaps but avoid irrelevant conversation
 - Avoid talking over the caller
 - Appropriately gather customer demographic for assistance
 - Explain reasons/provide context for asking demographic and other questions
 - Use proper hold procedures
 - Give context for referrals before providing.
 - Provide resources and/or information that matches the client's need
 - Provide appropriate level of detail on resource(s) offered
 - Confirm caller's understanding of resources provided and the plan for moving forward
 - Offer a follow-up call if applicable
 - Use appropriate closing
- Two AIRS reviewers listen to a minimum of 6 of those recordings (3 different ones each) with the selection geared to listening to a range of quality and agency community resource specialists. They mark the call independently on the AIRS Call Calibration scale (see below) and these marks take precedent. They also make informal notes on the elements of each call.

A -- Excellent Performance

The Specialist provided excellent service in all aspects of the call

Community Resource Specialist welcomes the client in a clear voice with good tone. Rapport continues when exploring the reason for the call. Questions are relevant. The communication is friendly, appropriate and empathetic. The assessment feels like a natural conversation. Clarification takes place to ensure the Specialist understands the client's needs. Helpful resources are retrieved and shared with the caller in the context of informed choice. If no resources exist, the Specialist explains the situation and engages in problem-solving. If demographic questions are asked, their purpose is explained to the caller, and they will be placed at an appropriate moment. The call ends in a respectful and supportive manner that optimizes success and encourages future trust/calls.

B – Good Performance

The Specialist was clear and consistent, and went above expectations

Exhibits most of the components listed above but may fail to rise to the level of an "A" call because a few of the key features are missing and/or not conducted properly. For example, there may be unneeded and unexplained early questions, the clarification step may be missed, the call may not end properly, etc. However, there is a clear sense that the caller received good help in a professional manner.

C – Satisfactory Performance

The Specialist met requirements but did not exceed them

Similar to a "B" call but missing more components. At the end, there may be some uncertainty about whether the client experienced a solid process but did not get the best possible information; or else, the client received the right information, but the Specialist does not quite engage the client in the way the I&R prefers.

D -- Unsatisfactory Performance

The Specialist mismanaged the call and did not meet most of the requirements

This is a call missing nearly all the components of good I&R. The tone comes across as disinterested and intrusive. Irrelevant questions are asked. The client is not heard. There is an absence of clarification. Referrals do not come quickly and are not the best ones to share, and there is a sense that the Specialist is glad to end the call. Essentially, there is a clear sense that the caller did not receive any meaningful help.

- A third AIRS reviewer assesses those scores and the notes – and may also listen to the other 4 calls. A Summary document is prepared for the agency providing them with the marks, plus notes distilled from both reviewers. A Pass may still identify various areas for improvement.
- If the review does not merit a Pass -- the agency receives notification that a second batch of calls will be made in about 4-6 weeks' time. The Summary provides clear details on expectations and remedies. Steps 1 to 3 are repeated.

STAGE 5: VIRTUAL SITE VISIT REVIEW

- Following the completion of the first four stages of the accreditation process, the applicant and AIRS will schedule the 1.5 days required for this final stage.
- AIRS will introduce the reviewer who will conduct the virtual visit, and identify any outstanding documentation or completion issues that should be ready at the time of the visit.
- AIRS reviewer(s) will work with the agency to identify the agency staff and volunteers who will be interviewed and ensure that everyone receives a calendar invite to the correct session. All participants receive a document that shows the general questions that may be asked.

- At a minimum, the virtual site visit includes the following video meetings:
 - An initial introduction
 - A session with the resource database manager
 - Three individual sessions with different frontline community resource specialists
 - A session with the I&R director
 - A session with a volunteer Board member
 - A final debriefing session which will share the findings of the visit.
- However, accreditation is not approved at the time of the review. The reviewer(s) completes an assessment report with a recommendation which is reviewed by the Chair of the AIRS Accreditation Commission.
- The Chair makes the final decision, and the agency will receive an email from the AIRS Accreditation Director indicating the outcome. The result will involve either:
 - Granting full accreditation for five years
 - Granting conditional accreditation when an organization is in substantial compliance, but needs to take further action to comply with some criteria
 - Denying accreditation

AIRS may identify certain documents from your submission as 'promising practices' and request they be shared, with attribution, on the AIRS Networker.

- When accreditation is granted, AIRS will:
 - Provide the agency with a wall plaque
 - Activate a digital accreditation badge/certificate that can be used on the agency's website
 - Promote the award on AIRS social media
 - List the agency with other accredited organizations on the AIRS website
 - Feature the agency on the AIRS Networker
 - Include the agency in the annual AIRS Accreditation Yearbook
 - And send an announcement of your achievement to the 500 organizations from the agency's resource database who received the community survey

ACCREDITATION OUTCOMES AND RESPONSIBILITIES

Accreditation awards are made for a period of five years. Agencies will be up for renewal in the same month every 5 years. For agencies that are reaccrediting, the renewal date for the award will be exactly 5 years from the agencies last expiration date. For example, if an agency expires in February 2025 but doesn't (for whatever reason) complete the process until June 2025, their next accreditation would be valid through February 2030.

Following an accreditation award, the agency is required to:

- Respond to an annual update questionnaire reporting on the status of the organization and its activities.
- Notify AIRS of any changes that may impact continued compliance with the Accreditation Criteria.

Failure to submit the annual update questionnaire following three reminder emails and a phone call will result in a notation being appended to your organization's name on the list of Accredited agencies on the AIRS website. If the agency continues to be out of compliance in the following year, accreditation will be revoked.

IMPORTANT: Twelve months prior to expiration, agencies will be reminded to apply in one year. Agencies are required to apply six months prior to their accreditation expiration.

Causes for Termination/Revocation

To ensure the integrity of the Accreditation process, there may be situations in which termination of the process or revocation of the award is necessary.

Termination of the Accreditation process will occur if:

- An applicant agency does not comply with deadlines (see timeline above).
- An applicant agency is no longer able to comply with the Accreditation Criteria.

Accredited agencies who have not completed the re-accreditation process will be removed from the list of accredited agencies on the AIRS website upon their expiry date. The exception are accredited agencies that have started the re-accrediting process and are a few months away from completion.

Revocation of Accreditation will occur if:

- AIRS is notified and verifies, using multiple methods (other community agencies, newspapers) that an illegal act impacting on the integrity of its service has been committed by an agency which was awarded AIRS Accreditation.
- The organization does not apply for renewal of their accreditation by the expiration date.

- The agency does not submit an Annual Report (agency questionnaire) for two consecutive years.
- The agency does not complete the renewal process in a timely manner (see timeline above).
- An applicant agency is unable to comply with the Accreditation Criteria during the renewal.

ACCREDITATION APPEALS PROCESS

An agency may appeal the results of the Accreditation process and any decisions within that process. However, an agency cannot lodge an appeal based on a disagreement with the Accreditation criteria itself.

An agency may appeal an interpretation of a criterion by following these steps:

1. The appealing agency submits a certified letter to the AIRS Accreditation Commission within 30 days of notification of the decision, indicating the rationale for challenging the accreditation results.
2. The appealing agency includes with that letter any documentation it feels supports its position, as well as any documentation requested by the Accreditation Commission.
3. The Accreditation Commission chair may request a telephone consultation with the appealing agency and the virtual site visit team and/or AIRS staff to clarify any misunderstanding regarding the report findings.
4. Within 30 days of receipt of appeal, if it finds just cause, the Accreditation Commission may assign other reviewers to re-evaluate the agency.
5. In all cases, the decision of the Accreditation Commission is final.
6. Depending on the decision, the agency may re-apply for accreditation after one year.

AIRS SERVICE DELIVERY STANDARDS

The Service Delivery standards describe the functions that are essential for providing information and referral to optimize access for all, including an individual assessment of need; clarification of the situation; information and/or referrals or problem-solving assistance, as required; crisis intervention and advocacy, when warranted; and follow-up as necessary. The I&R service recognizes the inquirer's right to accurate, comprehensive, and unbiased information provided in a confidential and/or anonymous, nonjudgmental manner; and is a non-partisan, non-ideological and impartial information source for available nonprofit, government and for-profit services that meet the I&R service's inclusion/exclusion criteria. Service is provided by trained community resource specialists and is delivered in a variety of ways that support the mission of the I&R program, the accessibility requirements of the community and the communication preferences of inquirers (for example, a combination of telephone, in-person, email, instant messaging (IM), text/SMS messaging, online chat, video relay service, social media and other methods of communication). Although the medium of service delivery may affect the nature of the interaction with inquirers, the essential elements of the I&R process remain the same.

STANDARD 1 – Information, Assessment and Referral Provision: The I&R service establishes and maintains rapport, conducts an assessment in which the inquirer has one-to-one interaction with a community resource specialist and provides appropriate information and referrals. The I&R process consists of active listening and effective questioning to determine the needs of the inquirer, clarifying those needs, providing requested information and/or identifying appropriate resources, making referrals to organizations capable of meeting those needs, and providing enough information about each organization (for example, describing how intake works and required documentation) to help inquirers make an informed choice. In situations where services are unavailable, the I&R service engages in problem solving to help the inquirer identify alternative strategies and manage expectations.

STANDARD 2 – Client Advocacy: The I&R service offers advocacy, when necessary, to ensure that people receive the benefits and services for which they are eligible. Client advocacy seeks to meet individual needs without attempting to change social institutions and, for purposes of these standards, does not include system advocacy or legislative advocacy (lobbying). All advocacy efforts are consistent with written policies established by the governing body of the I&R service and proceed only with the permission of the inquirer.

STANDARD 3 – Crisis Intervention: The I&R service is prepared to assess and meet the immediate, short-term needs of inquirers who are experiencing a crisis and contact the I&R service for assistance. Included is assistance for individuals threatening suicide, homicide or assault; suicide survivors; victims of domestic abuse or other forms of violence, child abuse/neglect or elder/dependent adult abuse/neglect; sexual assault survivors; runaway youth; people experiencing a psychiatric emergency; people with a substance use disorder who are in crisis; survivors of a traumatic experience; and others in distress.

STANDARD 4 – Follow-Up: The I&R service has implemented a policy that addresses the conditions under which follow-up must be conducted. The policy mandates follow-up, when feasible, with inquirers who are at risk and/or vulnerable and in situations where the specialist believes that inquirers do not have the necessary capacity to follow through and resolve their problems. Additional assistance in locating or accessing services may be necessary.

STANDARD 5 – Independent Access to Resource Information: The I&R service provides community resource information in a variety of ways to facilitate independent access for the public and other human services professionals. These options extend the choice of preferred channels for inquirers and complement the alternative of mediated access through a community resource specialist.

STANDARD 6 – Service Delivery Data Collection, Analysis and Reporting: The delivery of I&R services generates valuable information about the problems/needs of a community and the availability of resources to meet those needs. The I&R service collects, analyzes and reports insightful data concerning inquirers and their needs in ways that are useful to themselves and their community partners. The I&R service establishes and uses a secure, confidential system for collecting and organizing inquirer data that provides a basis for describing requests for service and unmet needs, identifying service gaps and informing decisions about the scope of the resource database. Inquirer data includes information gathered during follow-up and customer satisfaction/quality assurance calls as well as data acquired during the original contact. The dynamics of the I&R process also reveal information relating to the internal patterns of service provision and illustrate opportunities to enhance both the quality and the productivity of each I&R service.

AIRS Service Delivery Standards: Accreditation Requirements

Overview Description: *It is very important for the reviewer to have a good understanding of your I&R service and its place in the community. Provide a description of your organization.* Is it independent or part of a larger organization such as a United Way, a government entity, an Area Agency on Aging or a 211? Is it comprehensive, specialized, a crisis line, or a combination? What is the annual budget for the agency and the I&R program? What is the population of the area served?

Include information about what I&R looks like in your service area, how many organizations are doing I&R, whether they are comprehensive or specialized, and your relationship with them. Also include a description of your organizational structure (administration, departments, services, etc.) with information about the range of your organization's activities. (Please keep your response to one page.)

Overview Description:

- 1. Call Handling:** During the review AIRS uses a call review process to evaluate the call handling component of your service. The calls are assessed on the AIRS Call Calibration categories (see above). The applicant will receive a report providing feedback within one month of the call review process being completed. **No response is needed on this item.**

What are your procedures for handling challenging inquirers? Such as:

- Procedures for addressing potentially offensive behaviors or disruptive behaviors
- Recognizing interactions should remain professional, nonjudgmental and culturally appropriate
- Addressing security issues, particularly in face-to-face settings

Description:

2. Accessibility:

- a. How does your agency provide access to information about services 24/7? Please check all that apply. Minimum expectation: People in the community have after-hours access to information about services.

- Your agency provides live answer, 24/7
- Your after- hours calls roll over to another organization (live answer 24/7)
- Your agency's voice/auto message provides the phone number of another organization for after-hours assistance.
- Your agency provides direct connection via IVR to another organization after hours
- Your database is available to the public after hours
- Other, please describe:

- b. What languages other than English are prevalent in your community? Describe community demographics and the steps you have taken to reach out to non-English speaking persons. What are the percentages of inquiries that you receive from non-English speaking persons? How do you handle inquiries from people who speak those languages? Minimum expectation: Staff speak the language(s), or they use an interpretation service or interpreters from the community. **Description:**

- c. What steps have you taken to ensure that your service is accessible to inquirers from the deaf/hard of hearing community or those who have speech impairments and need alternative arrangements? Minimum expectation: The service can be used by these groups without undue inconvenience; they have been consulted in the decision process regarding arrangements. **Description:**
- d. What accommodations are in place to assist inquirers who are seen face-to-face? Describe any limitations for people with disabilities who walk in for service and special provisions you have made to ensure that they have access. Minimum expectation: You must be able to accommodate walk-ins with disabilities who are seen face-to-face. **Description:**
- e. What steps have been taken to ensure that your telephone service is accessible from all telecommunications devices (e.g., wireless, competitive local exchanges) within your coverage area? Minimum expectation: Service is accessible to people using wireless devices and landlines. **Description:**
- f. Are your core service and multi-channel access options available at no cost to the inquirer? (Inquirers are responsible for cell phone minutes, landline fees, pay phone charges, tax charges, etc.)? Yes No **Description:**
- g. Is toll-free access provided to all people living within the area you serve? Yes No **Description:**
- h. What is your policy/procedure for handling transactions via IM/chat, text/SMS messaging or other forms of social media? Do you have guidelines for the number of simultaneous contacts staff can handle? **Description:**

Submit document 001 - Policy and procedures for handling transactions via IM/chat, text/SMS messaging or other forms of social media.

3. Confidentiality:

Submit document 002, your confidentiality policy.

Minimum expectation:

- Include an appropriate definition of “confidentiality”.
- Address any exceptions.
- Include an agreement form signed by staff (or other evidence) to indicate that staff are following the policy.
- Include a nondisclosure agreement form that is signed by others with access to confidential information.
- Address the issue of written versus verbal permission by the inquirer.
- Address confidentiality as it pertains to domestic violence or other endangerment situations.
- Have provisions for protecting and maintaining as confidential data collection forms and inquirer information. Organizations outside the I&R service see only aggregated data.
- Be reviewed with staff at least annually.
- If the agency is part of a cooperative service delivery arrangement under which client records are shared, restrict identifying information to those in the collaboration.
- When telephone technology allows for the collection of identifying information about inquirers without their explicit permission, protect the right of inquirers to privacy and anonymity while preserving community resource specialists’ ability to provide for the individual’s safety should personal identification become necessary.
- The principles of confidentiality remain applicable in cases involving independent access. In situations where online information can be gathered, relevant legislation is observed and information about individual activities is only made available in aggregate form. Privacy policies are clearly displayed and reflect the general trends in “cyber ethics.”

Submit document 003 - A sample of the form that is signed by I&R staff agreeing to the confidentiality policy. Do NOT send all the forms your staff have signed!

Submit document 004 - The nondisclosure form signed by others with access to confidential information.

4. Advocacy

Submit document 005, a copy of your advocacy policy and procedures and identify the role of advocacy in your organization.

Minimum expectation: the policy and procedures must authorize:

- Making the initial contact with a service provider to verify eligibility or service availability and notify them of the inquirer’s forthcoming contact or schedule an appointment.

- Initiating a warm transfer, i.e., using 3-way calling to contact an agency and introduce the inquirer and their situation before ending their participation in the call.
 - With the service provider's permission, listening in on a call or sitting in on an interview while the inquirer attempts to explain the situation, helping only when necessary.
 - Representing the inquirer with a service provider.
 - Negotiating on behalf of the inquirer and, when necessary, escalating the intervention by speaking with a senior manager regarding the inquirer's situation.
- a. What are the circumstances under which inquirer advocacy is undertaken? Minimum expectation: Advocacy must be an activity of the I&R service. Circumstances under which advocacy is mandated are documented in the procedures statement and are reasonable. **Description**:
- b. What are the conditions under which supervisory staff needs to become involved? Minimum expectation: Conditions are documented in their procedures and are reasonable. **Description**:
- c. What are your community resource specialists instructed to do in situations where the level of advocacy required by the inquirer exceeds the limits of your advocacy procedures or an effective use of your resources? Minimum expectation: Referral to an advocacy agency. **Description**:

5. Crisis Intervention:

What role does crisis intervention play in your organization? NOTE: if your I&R service is AAS Certified (American Association of Suicidology) or International Council for Helplines Accredited, you may skip this section (skip items 007, 008 and 009 in documentation list).

- We are a formal crisis intervention service, are AAS certified and/or International Council for Helplines Accredited and are skipping this section. *Submit document 006 Proof of your AAS certification or International Council for Helplines accreditation.*
- We are a formal crisis intervention service but are not AAS certified or International Council for Helplines Accredited.
- We do not provide formal crisis intervention services but have a prearranged agreement with an appropriate crisis center that does. *Submit document 007, the signed, written agreement and protocols you have with the crisis intervention center with which your I&R service has an arrangement.*

If your I&R service is NOT AAS Certified or International Council for Helplines Accredited, the following requirements apply:

Submit document 008, a copy of your crisis intervention policy and procedures. At a minimum, the policy and procedures must address:

- Lethality risk assessment procedures.
- Call handling procedures for specific types of emergencies
- A staff debriefing protocol.
- Rescue services (e.g., Caller ID, call tracing requirements) and protocol for connecting inquirers in crisis with ongoing assistance following stabilization.
- Mandatory reporting requirements for child abuse and elder/dependent adult abuse.
- Staff trained on crisis calls coming through various communication channels
- Staff aware of how a 'normal' call can escalate into a crisis call
- Annual crisis intervention training for staff

Submit document 009, the form your community resource specialists use to complete a lethality (risk) assessment. If your lethality assessments are in electronic format, submit a screen shot.

6. Follow-Up:

The purpose of follow-up is to ensure that the needs of people who are identified as at risk or vulnerable have been met.

Submit document 10, a copy of your follow-up policy and procedures. Also submit document 11, your Follow-up results report.

Minimum expectations: Follow-up generally is done within 1-3 days in endangerment situations and 7-14 days in non-endangerment situations. Situations in which follow-up is required are described and are reasonable. Obtaining permission to conduct follow-up is required. Additional referrals are provided when necessary. Situations under which follow-up is not allowed or must be conducted under special circumstances for safety reasons (e.g., domestic violence situations) are described and are reasonable.

7. Independent Access to Resource Information:

- Online Resource Database: What is the URL for the applicant's resource database?
- Other Channels for Access: What other forms of Independent Access do you provide? (e.g., mobile application, directory) **Description:**

- c. Timeliness of Response: What guidelines are in place for timely response through additional channels (e.g., email, Voicemail, Instant Messaging)? Minimum expectation: There are guidelines in place for “timeliness of response”. **Description:**
- d. Contacting a Community Resource Specialist: How may an inquirer using the online database contact a Community Resource specialist? Minimum expectation: When using the online database or other means of access, the public must be given information about how to contact a Community Resource Specialist for assistance including the toll-free number. **Description:**

8. Service Delivery Data Collection, Analysis, and Reporting:

- a. The agency must have an inquirer data collection form that has a standardized set of inquirer data elements that are used for reporting purposes.

Submit document 012, screenshots showing your data collection form.

Minimum expectation: The data collection form must allow the agency to record and distinguish the following types of required activities.

- Information
- Assessment and referral (met/unmet needs)
- Assessment without referral (met/unmet needs)
- Crisis intervention (met/unmet needs)
- Advocacy
- Follow-ups completed, including follow-up results

*NOTE: If your data collection terminology is different than above, **Define and Describe:***

- b. *Submit document 13, a copy of the procedures that describe the information that is collected and how it is used.*

Include the following:

- How personal information is protected
- Language used to explain reasons for collection of personal information (community reports, funder contracts etc.)
- What information is collected by the agency on individuals, what demographics are required under contracts, and the proportion of calls where demographics are collected (e.g., all calls or every 4th call)
- The stage of the call when the non-essential demographics are collected

- c. Do you collect data from sources other than your telephone service, e.g., from walk-ins, voicemail, or email contacts, website activity, staff presentations or distribution of publications? **Description:**
- d. *Submit a report, document 014 that shows the agency's complete I&R activity.*

It should be formatted and include an explanation of the meaning of the reports and the context in which it should be understood to make it useful to the agency and to community partners.

Minimum Expectation: the report should include the following:

- Total number of inquiries
 - Total number and type of problem/needs presented by inquirers (including unmet needs)
 - The number and/or percentage of types of inquiries (for example: Information only, Assessment and Referral, Assessment without Referral, Crisis intervention and Advocacy)
 - Geographic and other demographic information about inquirers in aggregate form to protect the confidentiality of inquirers
 - Service requests for specific programs and organizations
 - Trends in community service provision and/or gaps in service
- e. How are your agency's reports used in the community? To whom are they distributed? Whenever possible, it is expected that the agency will produce reports to support a range of community activities, such as:
- Human service needs of inquirers
 - Cross tabulations of types of problems/needs by geographic location and/or geographic locations and the problems/needs within them
 - Trends in the community service provision/gaps in service
 - System advocacy
 - Community needs assessment
 - Community planning
 - Allocation of funding
 - Research

Description:

Submit document 015 - An explanation or a user guide to the reports you provide for those on your distribution list

Submit documents 016 - Provide definitions of Terminology used to categorize contacts

AIRS Service Delivery Standards: Documentation Requirements

Summary

Submit copies of the following:

- 001 - Policy and procedures for handling transactions via IM/chat, text/SMS messaging or other forms of social media.
- 002 - Confidentiality policies that address confidentiality of client records or use of Caller ID or other applicable technology.
- 003 - A sample of the form that is signed by I&R staff agreeing to the confidentiality policy. Do NOT send all the forms your staff have signed!
- 004 - The nondisclosure form signed by others with access to confidential information.
- 005 - Your advocacy policy and procedures.
- 006 - Proof of your AAS certification or International Council for Helplines accreditation (if you are skipping the Crisis Intervention section).
- 007 - The signed, written agreement and protocols you have with the crisis intervention center with which your I&R service has an arrangement.
- 008 - Your crisis intervention policies and procedures which must address
 - Lethality risk assessment procedures.
 - Call handling procedures for specific types of emergencies
 - A staff debriefing protocol
 - Rescue services
 - Mandatory reporting requirements for child abuse and elder/dependent adult abuse.
 - Staff trained on crisis calls coming through various communication channels
 - Staff aware of how a 'normal' call can escalate into a crisis call
 - Annual crisis intervention training for staff
- 009 - The form your community resource specialists use to complete a lethality (risk) assessment. If your lethality assessments are in electronic format, submit a screen shot.
- 010 - Your follow-up policy and procedures
 - Your procedures regarding the information you collect about inquirers and how you use the information. Include the following:
 - How personal information is protected
 - Language used to explain reasons for collection of personal information (community reports, funder contracts etc.)
 - What information is collected by the agency on individuals, what demographics are required under contracts, and the proportion of calls where demographics are collected (e.g., all calls or every 4th call)
 - The stage of the call when the non-essential demographics are collected

- 011 - A Follow-up results report.
- 012 - Screenshots showing your data collection form.
- 013 - A copy of the procedures that describe the information that is collected and how it is used. Include the following:
 - How personal information is protected
 - Language used to explain reasons for collection of personal information (community reports, funder contracts etc.)
 - What information is collected by the agency on individuals, what demographics are required under contracts, and the proportion of calls where demographics are collected (e.g., all calls or every 4th call)
 - The stage of the call when the non-essential demographics are collected
- 014 - A complete and current, finished, and formatted report of your I&R activities. Here is an example of the type of information to include:
 - Total number of inquiries
 - Total number and type of problem/needs presented by inquirers (including unmet needs)
 - The number and/or percentage of inquiries involving categories such as Information only, Assessment and referral, Assessment without referral, Crisis intervention and Advocacy
 - Geographic and other demographic information about inquirers in aggregate form to protect the confidentiality of inquirers
 - Service requests for specific programs and organizations
 - Trends in community service provision and/or gaps in service
- 015 - An explanation or a user guide to the reports you provide for those on your distribution list.
- 016 - Provide definitions of Terminology used to categorize contacts (*Note: This refers to how you calculate your total monthly/annual client contacts. Typically, this is a list of definitions of the types of calls received and documented for reporting purposes, including information calls, advocacy calls, crisis intervention calls, information and assessment, or information and referral calls, etc. This is a check that the mandatory call types are being routinely collected according to your policy/procedures. It also includes any other pertinent information that clarifies what is included in a large total number – for example, if you state that you served 50,000 people last year – how was that number derived?)*)

AIRS COOPERATIVE RELATIONSHIP STANDARDS

An I&R service must work in a collaborative fashion with other I&R services at local, regional, state/provincial, and national levels while also participating in the broader service delivery system in their community. The Cooperative Relationships standards focus on the responsibilities of the I&R service to establish and maintain meaningful cooperative relationships at all relevant levels.

STANDARD 13 - Cooperative Relationships Within the I&R System: In communities that have comprehensive and specialized I&R providers, the I&R service develops cooperative and respectful working relationships to build a coordinated I&R system that ensures broad access to information and referral services, maximizes the utilization of existing I&R resources, avoids duplication of effort and encourages seamless access to community resource information. I&R services with broader geographic reach (e.g., statewide, province-wide, regional, or national level programs) strive to develop similar working relationships within the area they serve.

STANDARD 14 - Cooperative Relationships With Service Providers: The I&R service develops cooperative working relationships with local human service providers (e.g., food pantries and local homeless shelters) and larger service systems (e.g., those serving populations with mental health and substance use disorder issues) to build an integrated service delivery system that ensures broad access to community services, maximizes the use of existing resources and facilitates the ability of people who need services to easily find the most appropriate provider. I&R services with broader geographic reach (e.g., statewide, province-wide, regional, or national level programs) strive to develop similar working relationships within the area they serve.

AIRS Cooperative Relationship Standards: Accreditation Requirements

Identify and describe your relationships with other I&R services in your area and with service providers and other key organizations within the broader community. Because this section primarily requires written narratives, it is important that you read and fully respond to all aspects of each question.

1. Identify all the other I&R services in the communities you serve. Included might be:

- Aging and Disability Resource Center (ADRC)
- Aging I&R/A
- Child Care Resource and Referral
- Comprehensive I&R/211
- Comprehensive I&R/Non 211
- Library
- Mental Health/Crisis Service
- Military Family Service/Support Center
- N-1-1 services (e.g., 311 Program, 911 Service, etc.)
- Volunteer/Donations Management Center
- Other:

2. Describe the relationships you have with the I&R services you have checked above. What is the nature of each relationship? What are you doing to create relationships where none currently exist?

Minimum expectation: Comprehensive I&R services have a relationship with the Aging I&R/A, the ADRC and the Child Care Resource and Referral programs in their area; and, if applicable, a relationship with local Military Family Service/Support Center(s).

Minimum Expectation: Aging I&R/A and ADRC programs and other specialized I&R services have a relationship with the comprehensive I&R service in their area and with other specialized programs, as applicable.

Description:

3. Describe the ways your I&R service engages in cooperative planning and decision-making activities with other I&R services and/or through your AIRS affiliate for the purpose of eliminating duplication of I&R service in their community and ensuring that inquirers reach the I&R service that best meets their needs. Minimum expectation: The agency should:

- Be involved in I&R service delivery coordination.
- Maintain information about other I&R services and their activities.
- Participate in cooperative I&R efforts.
- Initiate new cooperative service arrangements if nothing currently is in place.
- Participate in resource database collaboration where it exists.

Description:

4. What is your I&R service doing to build cooperative working relationships with service providers and other key organizations in your community? Describe the community partnerships and/or projects that the agency is involved in as well as any networks, coalitions, task forces, boards, or other similar entities of which your I&R service is a member. In what community issues are you actively engaged? Housing? Transportation? Employment? Health Care? What has been accomplished? Minimum expectation: The I&R service has significant interaction with the larger community. **Description:**

AIRS Cooperative Relationship Standards: Documentation Requirements

Submit copies of the following:

- 001 - Copies of agreements with other I&R programs in your community (*a minimum of three agreements with other I&R programs*).

AIRS DISASTER PREPAREDNESS STANDARDS

I&R services assess their role in meeting the needs of their community during times of disaster, which may vary depending on the population they serve. The role I&R services play in disaster situations may also vary by the phase of the disaster, (i.e., preparedness, response, relief, and recovery).

Specialized I&R services may be more active in preparing the people they serve to be ready in advance of a disaster whereas comprehensive I&R programs/211s may be more frequently contacted for assistance in the relief and recovery phases of a disaster. The I&R service is prepared to assess and provide referrals for inquirers who are experiencing a crisis due to a disaster of natural or human origin, or who want to help and contact the I&R service for a means to do so.

Preparation includes development of an emergency operations and business contingency plan that enables the I&R service to continue to provide services if its own facility is damaged or destroyed; and to support its ability to effectively accumulate, validate and disseminate accurate disaster related information, provide information, assessment and referral assistance for individuals impacted by a disaster, and provide community reports regarding inquirer needs and referrals.

STANDARD 15 - Emergency Operations and Business Contingency Plan: The I&R service has a written emergency operations and business contingency plan that specifically addresses disasters common to the area, but one that also prepares for emergencies in general. The plan has two components:

- a) An emergency operations component that defines what constitutes a disaster as well as the organization's disaster response expectations, both internally and from the perspective of external stakeholders; and describes the steps the organization needs to take to meet the needs of the community in the aftermath of an event.
- b) A Continuity of Operations Plan (COOP) component that references emergency preparedness and mitigation activities such as structural alterations and changes in business operations; and delineates the steps to be taken before, during and after an emergency to prevent or minimize interruptions in business operations and ensure long-term recovery.

Some organizations have two separate plans to meet this requirement.

STANDARD 16 - Relationships with Emergency and Relief Operations: The I&R service participates in ongoing cooperative disaster response planning in the community and establishes relationships, as necessary, to become recognized as an integral part of the community's emergency preparedness and response network.

STANDARD 21 - Disaster Training and Exercise: The I&R service trains staff on emergency operations and business expectations upon hiring and provides ongoing training at least annually. The I&R service actively participates in community disaster exercises to test the organization's emergency operations plan.

AIRS Disaster Preparedness Standards: Accreditation Requirements

Please note: If your agency is working remotely during times of disaster please provide any supportive documentation such as your remote work policy. If any items below do not apply directly to you, please share your current policies and procedures.

Overview: Describe the role, both formal and informal, of your I&R service in your community during times of disaster. If applicable, provide examples of disasters/emergencies involving your organization over the past 5 years.

Overview Description:

1. Emergency Operations and Business Contingency Plan and Reporting:

The I&R service must have a plan that includes procedures for specific types of emergencies, contacting police/paramedics and maintaining service delivery during/after the incident; an evacuation plan; a description of designated roles and responsibilities; an increased demand plan for the telephone system and other technology; an employee preparedness strategy; steps taken to ensure facility preparedness; and provisions for drills to practice emergency procedures outlined in the plan.

- a. *Submit document 001, a copy of the agency's emergency operations and business contingency plan. Minimum expectation: The plan should include:*
 - Procedures for specific types of local and community-wide emergencies that could occur in your community.
 - Building evacuation plan.
 - Designated leadership description that outlines roles and responsibilities of managers

and staff before, during and after an incident.

- Staff training and preparation
 - Procedures for maintaining service delivery during and after an incident.
 - An increased demand plan, including telephone expansion and other hardware needs, that ensures you can respond to the high volume of inquiries that occur during and in the aftermath of an emergency.
 - An employee preparedness strategy that encourages staff to develop emergency preparedness plans for their own homes and families.
 - Post-emergency activities including procedures for providing critical incident stress debriefing for staff and after-action reporting.
- b. The I&R service should have a **mutual assistance agreement** with at least one I&R service outside the area for maintaining service delivery before, during, and after an emergency. The agreement should include protocols for activation, cooperative procedures for maintaining service delivery and training exercises and simulations. The agreement and protocols are updated annually and aligned with the I&R service's continuity of operations plan and emergency operations plan.

Submit document 002, your Mutual assistance Agreement

- c. Describe the steps you have taken to ensure that your facility is capable of handling and/or adapting to increased needs during a disaster, particularly in situations where many volunteers will be working at the facility. Include information about the plans you have in place for financial needs including petty cash, electrical power, air conditioning, cleanliness and sanitation, parking, security, and other issues that may arise. **Description:**
- d. Describe the drills your organization arranges for staff to practice the emergency procedures as outlined in the plan, including the activation of your mutual assistance agreement. Include information about how often they occur, what you have learned because of your drills, what changes you have made in the plan because of what you learned, and the date of your last drill. Minimum expectation: The drills occur at least annually. **Description:**
- e. Describe the preparations you have made to collect and distribute disaster-related service request information from inquirers. Include information about your plan for producing regular reports for the community regarding disaster-related referrals, service availability and unmet needs, as well as an after-action report that documents your agency's special activities before,

during and after the event with a focus on what worked well and what needs to be improved through revisions of your disaster plan and/or additional training for staff. Include a description of your distribution plan for reports. Minimum expectation: Must have the capacity to collect referral information, produce referral-related and after-action reports and distribute the reports to the community. **Description:**

Submit document 003, A disaster-related service request report form or actual report,

2. Formal Relationships with Government/Private Sector Agencies:

- a. Describe the efforts you have made to develop relationships with emergency management personnel at city, county and state/provincial levels and private sector organizations with a role in the disaster relief and recovery efforts in your community. Include information about the barriers you have encountered, areas where you have been successful, and your next steps. Minimum expectation: The I&R service has taken steps to develop necessary relationships. **Description:**

- b. Describe your participation and role in local, statewide/province-wide, multi-state/multi-province and/or national disaster exercises. Minimum expectation: The I&R service participates in community exercises. **Description:**

AIRS Disaster Preparedness Standards: Documentation Requirements

Submit copies of the following:

- 001 - Your Emergency Operations and Business Contingency Plans.
- 002 - Your Mutual Assistance Agreement
- 003 - A disaster-related service request form or actual report, *showing the volume of inquirer requests, and the met and unmet needs to emergency planners and the community.*

AIRS ORGANIZATIONAL EFFECTIVENESS STANDARDS

The Organizational Effectiveness standards describe the governance and operational structure an I&R service needs to fulfill its mission. Included are establishing itself as or within a legal entity, developing policies and procedures that guide the organization, developing an organizational code of ethics, establishing sound fiscal practices, providing a conducive physical environment, managing personnel, providing staff training, increasing public awareness regarding the availability of information and referral services and their value to the community and providing for ongoing program evaluation and quality assurance.

STANDARD 22 – Governance and Oversight: The auspices under which the I&R service operates ensures the achievement of the agency mission and I&R goals.

STANDARD 23 - Technology: The I&R service uses technology that improves access to information and enhances its ability to serve inquirers efficiently and effectively. The main role of technology is to enhance and strengthen information sharing while accommodating people’s communication preferences. “Technology” includes telephone systems, telecommunications, computer systems and applications, assistive technology for people with disabilities such as speech-to-text and text-to- speech applications, instant messaging (IM), text/SMS messaging, online chat, video relay/chat, social media, I&R software platforms, electronic directories and self-service mechanisms such as automated attendants/interactive voice response systems, video relay services, community kiosks and searchable I&R databases on the Internet.

STANDARD 24 - Personnel Management: The I&R service has in place a framework and mechanisms for program and personnel management that provide for the continuity and consistency required for effective service delivery.

STANDARD 25 - Staff Training: The I&R service makes training available to employees and volunteers.

STANDARD 26 - Promotion and Outreach: The I&R service establishes and maintains a program that increases public awareness of I&R services, their objectives, and their value to the community.

STANDARD 27- Program Evaluation and Quality Assurance: The I&R service can assess the quality and effectiveness of all aspects of its operation including its service delivery, resource database, reports and measures, cooperative relationships, disaster preparedness and organizational structure. These determinations are made through ongoing quality assurance procedures supported by the collection and utilization of information that can be used to manage and continuously improve resource database management and the service delivery process; and periodic, formal evaluations that are used to implement measurable improvements.

AIRS Organizational Effectiveness Standards: Accreditation

Requirements

1. Governance and Oversight:

- a. What is the legal status of your I&R service?
 - Private, nonprofit
 - Government
 - For-profit

- b. Describe the governance and oversight arrangements for your I&R service and use the checklist below to provide information about how each of the listed responsibilities is carried out by these bodies. Minimum expectation: All the responsibilities listed below are handled by either the Board of Directors or the Advisory Committee. **Description**:
 - Formally adopts policies of the I&R service and ensures that they are followed -- *Board or Advisory Group?*
 - Ensures that the I&R organization has an executive director or Program manager who is accountable for the operation of the I&R service -- Board or Advisory Group?
 - Assists in procuring financial and technical assistance to sustain the I&R service -- -- *Board or Advisory Group?*
 - Responsible for contracting, adopting an annual budget, maintaining financial records, and providing an annual audit by an independent certified public accountant -- *Board or Advisory Group?*
 - Promotes the I&R system throughout the community ensuring appropriate publicity, public relations & outreach -- *Board or Advisory Group?*
 - Oversees the evaluation of the I&R service -- *Board or Advisory Group?*
 - Maintains minutes of all official proceedings that any interested party can inspect -- *Board or Advisory Group?*

- c. I&R services need to have a Board of Directors (i.e., the governing body of an organization that is responsible for program planning and evaluation, policy setting, personnel administration, program oversight, and fiscal management) that is constituted according to the laws of its state or province, represents the diverse interests of the community and oversees implementation of program goals and objectives to assure quality of service. In situations where the I&R service is part of a larger organization and the Board is remote from oversight of the I&R service, an Advisory Committee (i.e., a formally constituted group of stakeholders that provides

information about community needs and issues, recommendations regarding program planning, and other forms of support that help to ensure that the agency maintains effective connections with the people it serves) handles these responsibilities.

Submit document 001, a copy of the roster for your Board of Directors/Advisory Committee.

- d. *Submit document 002 a copy of your organization's Governance and Administrative Policies and Procedures Manual (or other evidence) that a governance and administrative structure is in place that meets the standards for this section. The I&R service has formally adopted, dated, and regularly reviewed written policies that clearly articulate the general principles by which the I&R service is managed. Minimum expectation: The Policies and Procedures Manual must include:*

- Board/Governance Policies and Procedures
- Employee Policies and Procedures (made available to staff on request)
- Fiscal Policies and Procedures
- Hiring Policies and Procedures
- Policies that are formally adopted by the board, dated, and regularly reviewed.
- A process for registering and resolving complaints from inquirers and staff members including those specific to violations of privacy and confidentiality.
- A code of ethics that all staff receive and agree to follow.
- A nondiscrimination statement that prohibits all forms of discrimination.

Submit document 003, most recent audit or financial review for your organization

- e. Describe the public policy activities you have engaged in within your community and in response to requests from state/provincial and national I&R organizations that seek to further the overall goals of the I&R movement. Minimum expectation: The I&R service has implemented a policy that encourages advocacy on issues of importance to the I&R movement and access to community services. **Description:**
- f. Describe the system advocacy efforts you have engaged in during the last 12 months and what they achieved. Activities might include letter writing campaigns, visits to political representatives, testimony at public hearings, holding press conferences, writing articles for local newspapers, providing interviews to local media, speaking to groups, and working through coalitions. Minimum expectation: The I&R service identifies up to three system advocacy initiatives the organization, or their Board has participated in during the last 12 months. **Description:**

2. Technology:

- a. What process do you use to define your technology goals? How do you ensure that your technology goals reflect the contact needs and preferences of inquirers in your community? Minimum expectation: A technology plan is in place and is reviewed annually by your governing body. **Description:**
- b. If your I&R service has caller ID or other technology that allows your specialists to collect identifying information about inquirers without their permission, (e.g., on a crisis call involving threat of suicide), describe your policies for using the technology to preserve the person's confidential data while preventing access to the information in other circumstances. Minimum expectation: A procedure is in place to protect inquirer's identifying information while using technology to preserve the person's confidential data. **Description:**
- c. *Submit 004, a copy of your backup policies and procedures* which demonstrate how you safeguard critical data and systems. Policies and procedures should include:
- provisions for the storage, retrieval, use and ultimate disposition of all records.
 - address security arrangements for inquirer data, the resource database, and critical operational records such as payroll, personnel, reports, legal documents and email.
 - methods for testing data and system restoration protocols.
 - how to access backup in emergency situations.
- d. How do you ensure that your technology is appropriately maintained? Describe your provisions for ensuring a priority response to any breakdowns in key infrastructure. Minimum Expectation: A maintenance plan is in place including a priority response to breakdowns in key infrastructure. **Description:**
- e. Describe your organization's plan for regularly updating your technology based on the anticipated lifecycle of all systems that support effective service delivery. Has the plan been approved your governing body? Minimum Expectation: The I&R program's technology plan is annually updated and approved by your governing body. **Description:**

- f. Describe how your agency meets special needs of staff with respect to technology. Minimum Expectation: The organization provides reasonable technological accommodations for staff with special needs. **Description:**

3. Personnel Management:

- a. Describe the hiring process you have taken to recruit and hire service and administrative staff who are reflective of your community. Minimum expectation: The I&R service has taken steps to attract qualified and capable employees and volunteers who are reflective of the community they serve. **Description:**

Submit document 005, a copy of an organizational chart that shows all positions within the agency and/or I&R service.

Submit document 006, written job descriptions for all employees and volunteers of the I&R service. They should outline responsibilities, essential job functions and lines of accountability.

- b. Describe the screening procedure for evaluating candidate applications and/or resumes against position requirements. **Description:**

Submit document 007, your employment interview questions for each of the key positions within the I&R service (generally, community resource specialist, database curator, supervisor, manager) and the rating form used to evaluate responses.

- c. Describe how you provide ongoing performance monitoring for all staff. Minimum expectation: There is a clear mechanism for providing ongoing supervision and measuring employee performance. The agency uses a standardized observation form for community resource specialists and a standardized performance appraisal form specific to each job category. There is an evaluation for all staff that addresses specific responsibilities and job functions as outlined in the individual's job description. The agency uses call monitoring/remote listening in which live or recorded calls are randomly selected for review and feedback on a regular basis and uses mentoring/coaching. **Description:**
- d. When performance problems are identified, how are they addressed? Describe what you do. Minimum expectation: A clear way of dealing with performance problems is in place. **Description:**

Submit document 008 - Sample written supervision plan for I&R staff.

Submit document 009 - Observation forms that are used for I&R staff.

Submit document 010 - Performance appraisal forms that are used for I&R staff.

Submit document 011 - Rating sheet for I&R call monitoring.

Submit document 012 - Sample individualized performance improvement plan for I&R staff.

- e. Describe the call management system reports, measures, and other indicators you use to assess individual community resource specialist efficiency and productivity. Are you able to track the number of calls routed to and answered by a specialist? Average speed of answer? Call handling times? Schedule adherence? Minimum expectation: A system is in place for determining how well individual community resource specialists are helping the I&R service meet agency service goals. **Description:**

- f. What tools do you use to evaluate the work of your community resource specialists – database curators? Describe the indicators of quality and productivity measures you use. How many records do supervisors review each month? Minimum expectation: A system is in place for determining how well individual database curators are helping the I&R service meet agency service goals. **Description:**

- g. Describe your requirements for the arrangement if you have community resource specialists who work at home or in other off-site locations. Minimum expectation: Specialists have the ability to make three-way calls to connect inquirers to external services (including language translation services); contact emergency services while maintaining a connection with the inquirer; work in a distraction-free environment that allows confidential interviewing; access supervisory assistance, when required, and for supervisors to exercise quality assurance measures; and have personnel policies and training opportunities that reflect off-site circumstances. **Description:**

Submit document 013, Policies and procedures relating to the use of off-site I&R staff.

- h. What does your I&R service do to support staff regarding workplace health, wellness, and ergonomics? **Description:**

Submit document 014, Your succession plan for key staff.

4. Staff Training:

- a. Describe the structure and general contents of your training. Minimum expectation: Training is provided for all employees and volunteers; the training is based on predetermined, written training goals with written learning objectives; trainees are evaluated and must meet a minimum level of competency before assuming duties; there are procedures for addressing employees and volunteers who fail to demonstrate competency at the required level. **Description:**

Includes:

- Number of hours of training provided
- Number of hours for staff orientation
- Number of hours training for new community resource specialists
- Number of hours training for new database curators
- Number of hours of ongoing training required annually

Submit document 015, A detailed, day-by-day training agenda for both your community resource specialists and database curators that outlines objectives, training methods (how material is presented) and materials, timeframes, and outcomes for each section.

- b. What training methods do you use? Online courses? Lectures? Audio/visual materials? Reading assignments? Oral/written exercises? Role plays? Modeling by experienced workers? Other? **Description:**
- c. Is the content of the staff training program consistent with the *AIRS I&R Training Manual*? Are training objectives consistent with the tasks, knowledge and skill requirements of AIRS certification programs, CRS, CRS-A/D and CRS-DC? Are trainees evaluated using objective (e.g., written tests) and subjective (e.g., observation) measures. Do they demonstrate a minimum level of competency before assuming duties? **Description:**
- d. Describe when and how testing or assessment of stated competencies occurs. Describe your procedures for addressing trainees who do not demonstrate competency at the required level. **Description:**

Submit document 016, examples of subjective and/or objective evaluation tools used for measuring an I&R trainee's level of competency.

- e. What is covered in the orientation for all I&R staff, including community resource specialists, and database curators, managers, administrative staff? **Description:**

- f. What steps do you take to stay current with federal and state/provincial laws affecting service delivery? **Description:**

- g. What training do you provide that ensures that policies and procedures related to privacy and confidentiality are understood and observed? **Description:**

Submit document 017, a Table of Contents for your training manual that shows a detailed list of all topics covered in your community resource specialist training program.

Submit document 018, a Table of Contents for your training manual that shows a detailed list of all topics covered in your database curator training program.

- h. What do you do to evaluate the effectiveness of your training program and the performance of your trainers? **Description:**

Submit document 019, Your I&R training evaluation form.

Submit document 020, Your I&R trainer evaluation form.

- i. What ongoing training and professional development do you provide for I&R staff? Do you provide in-service training? What topics are covered? Do staff have opportunities to attend conferences and workshops? How do you track the type and amount of additional training that staff receive? Minimum expectation: Some type of ongoing training is provided for community resource specialists and database curators. **Description:**

- j. What percentage of community resource specialists and database curators hold professional I&R certification? Note that although this may not be AIRS Certification, it does involve a professional certification that relates to the filed & practice on Information & Referral, that is

acquired through an examination process, and is maintained through ongoing professional development. This is not the same as a curriculum-based 'certificate', obtained following the completion of a training course. (If unsure, please contact the AIRS Accreditation Director). Minimum expectation: 51% of eligible community resource specialists and 51% of database curators have professional certification or are scheduled to take the exam. Each category includes related managers that provide direct services to the public. (Note that you do not have to send us the actual Certificates).

Please complete the following table:

Service Delivery Staffing & Certifications	a) Total staff in each category	b) Total Certified and/or scheduled to be tested	c) Not eligible for certification (link to eligibility info)	d) Eligible for certification: <i>Column A minus Column C</i>	e) Percentage of staff Certified/scheduled to be tested: <i>Column B divided by Column D</i>
<i>CRS Example</i>	20	10	8	12	83%
Community Resource Specialists					
Community Resource Database Curators					

If Certifications **are not through AIRS**, please indicate name of the Certifying organization and name of credential(s) awarded:

5. Promotion and Outreach:

Use the questions below to verify that you meet the Promotion and Outreach standard. Minimum expectation: There is an outreach plan (essentially, how do you promote your service) that takes the demographics of the community into consideration. Steps have been taken to track and evaluate the effectiveness of the plan.

- a. Describe your outreach plan. Include information about its objectives, the populations, and the organizations in your community the plan targets, the methods you use and how the methods you use are targeted to meet the needs of diverse populations. Has the plan been successful? **Description:**

- b. Describe the steps you have taken to evaluate the efficiency and effectiveness of your plan. Indicate the sources you have used in the evaluation process, e.g., demographic data, tabulation of referral source data. Give examples of how you have modified your plan based on evaluation results. **Description:**

Submit document 021, an outreach report for the I&R service describing the plan, the outputs, and outcomes (what was accomplished).

6. Program Evaluation and Quality Assurance

Respond to the questions in this section to verify that your I&R service meets the Program Evaluation and Quality Assurance Standards.

- a. Is your agency able to create and use management reports that allow staff to evaluate the effectiveness of planning efforts including goals, strategic objectives, and outcomes in key operational areas; target the allocation of staff and other resources; and improve staff performance against operational targets? Minimum expectation: The agency can track the following:
- call volume/total calls answered
 - average speed of answer
 - average talk time
 - occupancy rates
 - service level
 - abandonment rate
 - average call-handling time
- b. What organizational changes have been made based on the analysis of these data reports? **Description:**

Submit document 022, Summary report from your call management system/ACD or the annual report you receive from your telephone company documenting call volume, number of abandoned calls. Average speed of answer and average call length.

- c. Do you conduct regular customer satisfaction/quality assurance surveys with a statistically significant number of inquirers to assess overall service performance and I&R service outcomes? Describe, in detail, what you do. Include information about when and how your surveys are conducted, your selection criteria for participants, the number and/or percentage

you target per year, the customer satisfaction and service outcome questions you ask and how you have used the results to improve your program. Minimum expectation: A structured way of measuring customer satisfaction/quality assurance has been implemented, and feedback from the process has been used to improve service delivery outcomes. **Description**:

- d. If, while conducting client satisfaction/quality assurance surveys, it is determined that the original need of the inquirer has not been met or that the inquirer has new needs, are your specialists able to provide additional information, referrals or advocacy? How do you handle this type of situation? **Description**:
- e. How do you use service outcomes information obtained during customer satisfaction/quality assurance surveys? Do you include information in reports on follow-up activity? How? **Description**:

Submit document 023, Most recent customer satisfaction/quality assurance report for the I&R service.

- f. Describe the process you use to evaluate your program's strengths, accomplishments and needed improvements. What steps do you take to ensure that your I&R service continues to meet the changing needs of your community? Is the evaluation conducted by your own staff or by an external contractor? What data sources do you use for input? What are your selection criteria for participation in the survey? What evaluation methods do you use? Minimum expectation: A program evaluation process is in place that allows the organization to examine the viability of its I&R program, the effectiveness of its services, its appropriate involvement in the community and its overall impact on the people it serves. Information gathered during the process has been used to improve service delivery outcomes. **Description**:
- g. Provide three examples of things you learned from an evaluation and the program changes you made in response. **Description**:

Submit document 024, Written goals, objectives, and I&R service work plan for the current year.

Submit document 025, The most recent evaluation report for the I&R service, generally based on your written goals and objectives

AIRS Organizational Effectiveness Standards: Documentation Requirements

Submit a copy of the following:

- 001 - The roster for your Board of Directors/Advisory Committee.
- 002 - Governance and Administrative policies and procedures manual(s).
- 003 - Most recent audit or review for the organization.
- 004 - Backup Policies and Procedures.
- 005 - An organization chart that reflects all the positions within your agency. If you are part of a larger organization, submit a functional organization chart for the I&R service. The organization chart must be aligned with the job descriptions requested below.
- 006 - Job descriptions for all the positions within the I&R service.
- 007 - Your employment interview questions for each of the positions within your I&R service and the rating form you use to evaluate responses.
- 008 - Sample written supervision plan for I&R staff.
- 009 - Observation forms that are used for I&R staff.
- 010 - Performance appraisal forms that are used for I&R staff.
- 011 - Rating sheet for I&R call monitoring.
- 012 - Sample individualized performance improvement plan for I&R staff.
- 013 - Policies and procedures relating to the use of off-site I&R staff.
- 014 - Your succession plan for key staff.
- 015 - A detailed, day-by-day training agenda for both your community resource specialists and database curators that outlines objectives, training methods (how material is presented) and materials, timeframes, and outcomes for each section.
- 016 - Examples of subjective and/or objective evaluation tools used for measuring an I&R trainee's level of competency.
- 017 - A Table of Contents for your training manual that shows a detailed list of all topics covered in your community resource specialist training program.
- 018 - A Table of Contents for your training manual that shows a detailed list of all topics covered in your database curator training program.
- 019 - Your I&R training evaluation form.
- 020 - Your I&R trainer evaluation form.
- 021 - An outreach report for the I&R service describing the plan, the outputs, and outcomes (what was accomplished)
- 022 - Summary report from your call management system/ACD or the annual report you receive

from your telephone company documenting call volume, number of abandoned calls, average speed of answer and average call length.

- 023 - Most recent customer satisfaction/quality assurance report for the I&R service.
- 024 - Written goals, objectives, and I&R service work plan for the current year.
- 025 - The most recent evaluation report for the I&R service, generally based on your written goals and objectives.

AIRS RESOURCE DATABASE STANDARDS

The Resource Database standards require that the I&R service develop, maintain, use, and disseminate an accurate, up-to-date online resource database that contains information about available community resources including details about the services provided and the conditions under which they are available. The database supports the inquirer's right to accurate, consistent, comprehensive, and unbiased information and the ability of the I&R service to be a non-partisan, non-ideological and impartial information source for available nonprofit, government and for-profit services that meet the organization's inclusion/exclusion criteria. The database is used internally by community resource specialists to identify resources for inquirers and is maintained by community resource specialist – database curators.

Resource data is also available externally to other human services organizations and the public via an online database that is structured to make searching as intuitive and user friendly as possible.

STANDARD 5 - Independent Access to Resource Information: The I&R service provides community resource information in a variety of ways to facilitate independent access for the public and other human services professionals. These options provide additional choices for inquirers and complement the alternative of one-to-one interaction with a community resource specialist.

STANDARD 7 - Inclusion/Exclusion Criteria: The I&R service develops criteria for the inclusion or exclusion of human services agencies and programs in the resource database. The criteria are uniformly applied and available so that staff and the public are aware of the scope and limitations of the database.

STANDARD 8 - Data Structure and Data Elements: The resource database contains data elements that provide information about organizations that meet criteria for inclusion, the services provided by each organization, and the locations (sites) where those services are available. Each resource database record has a resource profile that contains all mandatory data elements, where applicable (e.g., a mailing address is included only if one exists). However, the specific data elements that are seen by a particular group of users (e.g., resource database curators, community resource specialists, the public) may vary.

STANDARD 9 - Classification System/Taxonomy: The I&R service uses the 211 LA County Taxonomy of Human Services to index and facilitate retrieval of resource information, increase the reliability of

planning data, make evaluation processes consistent and reliable, and facilitate state/provincial and national aggregations and comparisons of data. If additional classification or indexing structures are used, these must be connected to the Taxonomy rather than functioning as independent indexing systems.

STANDARD 10 - Content Management and Indexing: Through training, database management procedures and supervision, the I&R service ensures that resource database curators organize information about human services into database records that accurately and concisely reflect the agency, its locations and its services/programs; index the services provided using the 211 LA County Taxonomy of Human Services in accordance with consistently applied practices; and assign other search methods or filters in a way that accurately reflects the conditions under which services are available.

STANDARD 11 - Database Quality Assurance: The I&R service has a quality assurance review process to ensure that information in the resource database is accurate and complete.

STANDARD 12 - Resource Database Data Collection, Analysis and Reporting: The I&R service's resource database is the primary source of information about the programs and services available to the community served. The I&R service collects, analyzes, and reports insightful information regarding the types of services available, the organizations that provide them, and the areas in which services are available (and unavailable) in ways that are useful to themselves and community partners. An analysis of the resource database maintenance process also reveals information that can enhance both the quality and productivity of each I&R service (for example, by identifying issues for staff training).

STANDARD 17 - Disaster Resources: The I&R service develops, maintains, and/or uses an accurate, up-to-date resource database that contains information about available community resources that provide services in times of disaster. Database records include descriptions of the services organizations provide and the conditions under which services are available; and are indexed and accessed using the 211 LA County Taxonomy of Human Services and complying with AIRS Resource Database Standards.

STANDARD 27 - Quality Assurance: The I&R service annually gathers feedback from organizations included in the resource database to measure the organization's level of satisfaction with the accuracy of the information contained in their record, their familiarity with the I&R service's resource database, and their assessment of interactions with the resource department.

NOTE: Compliance with resource database requirements is assessed via the Resource Database Review.

Resource Database Review Process

The AIRS Accreditation process involves an online database review to assess your organization's compliance with the Accreditation Criteria for the Resource Database. The review is conducted online software which enables the reviewer to view your database online and ask questions pertinent to the accreditation requirements. We estimate that the review may take up to four hours, which can be scheduled in two sessions.

AIRS will assign a reviewer who will reach out to you to schedule some dates. Once scheduled, the reviewer will request a list of documents to prepare for the review.

Existing AIRS Accreditation holders should have the database review completed no later than three months after you start the Accreditation process. First time applicants must have it completed six months after the start of the overall process.

When the database review has been completed, the reviewer will prepare a report and send it to AIRS for distribution.

To prepare for the review, please familiarize yourself with the report (see below) that will be used to communicate any issues identified during the interview. This will help you understand the elements that will be covered during the remote review and how compliance with each accreditation criterion will be verified.

AIRS Resource Database Standards: Accreditation Requirements

The following sections outline the questions that will be asked by the reviewer during the online interview. When the database review has been completed, the reviewer will prepare this report and send it to AIRS for distribution.

1. Independent access to resource information:

The I&R service provides community resource information in a variety of ways to facilitate independent access for the public and other human services professionals. These options provide additional choices for inquirers and complement the alternative of one-to-one interaction with a community resource specialist.

Minimum Expectation: The I&R service offers all or most of its resource database available on the Internet at no cost to the user. The online search page is mobile-friendly, clean, well-organized, easy to navigate, has a keyword search and a graphical guided search and a prominently displayed search button. Search options include the ability to search agency, site, program, and AKA names and the ability to filter by geographic location/area served. Search results include the data elements that are most helpful for inquirers to make informed choices about their options.

- a. All or most of the database is available online and easily located on the website.

- b. There are no fees to access the information.
- c. The online search page looks clean and is easy to navigate. Is it mobile-friendly?
- d. The online search page has a guided search option with pictures or graphic icons representing service concepts or similar strategies that promote 'hot topics' lists or other embedded 'user friendly' search strategies expressed in natural language.
- e. The online search page has a keyword search option that includes partial or full-word matching. (Entered text must appear at the beginning of words for the term to be retrieved. For example, a search on 'aging' would ignore words like 'managing')
- f. The results can be filtered by location or area served.
- g. The search results are cleanly-designed and include data elements that are most helpful in providing the details inquirers need to make informed choices about their options.

2. Inclusion/exclusion criteria:

The I&R service develops criteria for the inclusion or exclusion of human services agencies and programs in the resource database. The criteria are uniformly applied and available so that staff and the public are aware of the scope and limitations of the database.

Minimum Expectation: An Inclusion/Exclusion Criteria Policy exists, the I&R agency follows the criteria, database listings are impartial, and exceptions to the policy are applied consistently. The policy is reviewed and updated every 12 months. *NOTE: It was a deliberate decision of the Accreditation Commission to make this requirement stronger than what is reflected in the Standards.*

PRIOR TO THE INTERVIEW: The Database Reviewer will review the agency's inclusion/exclusion policy; taking note of what should be included and what should be excluded. Spot-check customized Taxonomy for terms that might contradict the policy. Check the list of Legal Status types used to code providers to see if any appear to conflict with policy.

- a. The database includes all provider types listed for inclusion.
- b. The database does not contain any provider types that should have been excluded.
- c. The database does not contain records that conflict with the policy. For example, if the database includes for-profit organizations, they meet conditions for inclusion in the policy, e.g., their services are free. The reviewer will spot check to verify compliance.

- d. The organizations in the database reflect the legal status types approved in the policy.
- e. Any exceptions to the policy are specified and appear to be consistently applied.
- f. Listings are impartial and non-partisan.
- g. The Inclusion/Exclusion policy has been reviewed within the last 12 months. What is the date of the last review?
- h. There is no fee for inclusion in the database. If there is a fee, under what circumstances?
 - Does the review process combine an internal and external focus, such as:
 - Incorporating information from reports assessing unmet needs.
 - Analyzing organizations according to their importance as referrals.
 - Discussions with community resource specialists.
 - Input from key stakeholders in the community.
- i. Steps have been taken to ensure that the database includes resources that meet community needs.
- j. The inclusion/exclusion policy is published or made public in some way.
- k. Records are kept for organizations that have been removed from the database or omitted because they do not meet your inclusion/exclusion criteria. Information about why the organizations removed/omitted is included in the records.

3. Data structure and data elements:

The database review will verify that a standardized profile has been developed for each organization that contains all mandatory data elements, where applicable (e.g., a mailing address is included only if one exists). The data elements match the schema used in the open-source Human Services Database Specification (HSDS) developed by Open Referral or the AIRS XSD Schema.

Minimum Expectation: The database review will verify that a standardized profile has been developed for each organization in the database, and at a minimum includes all the mandatory data elements required by the Standards. If an element is non-applicable, an explanation will be requested.

The Resource Manager will be asked to open one record, starting with the agency screens, moving to site screens, and then to service screens to verify that the software can accommodate all items on the checklist below. If an element is not populated, an explanation will be requested.

NOTE: 'Mandatory' means that a data element must be entered if that information is available (e.g., if you need to provide documentation to apply for a service, then that information must be added. If no documentation is required, the field can be left empty). In the chart below, 'X' is a designation for 'non-applicable.'

AIRS Data Elements	AIRS Data Record Category		
	Agency	Site	Service/Program
<i>Name</i>	Mandatory	Mandatory	Mandatory
<i>AKA (Also Known As) Name(s)</i>	Mandatory	Mandatory	Mandatory
<i>Legal Status</i>	Mandatory	x	x
<i>Federal Employer Identification Number</i>	Recommended	x	x
<i>Licenses or Accreditation</i>	Recommended	Recommended	Recommended
<i>Street/Physical Address(es)</i>	Recommended	Mandatory	x
<i>Mailing Address(es)</i>	Recommended	Mandatory	x
<i>Phone Number(s) and Types</i>	Mandatory	Mandatory	Mandatory
<i>Website URL(s) including Social Media</i>	Mandatory	Recommended	Recommended
<i>Email Address(es)</i>	Mandatory	Recommended	Recommended
<i>Name and Title of Director/Manager</i>	Mandatory	Recommended	Recommended
<i>Description</i>	Mandatory	Recommended	Mandatory
<i>Days/Hours of Operation</i>	Mandatory	Recommended	Mandatory
<i>Physical/Programmatic Access for People</i>	x	Recommended	Recommended
<i>Eligibility</i>	x	x	Mandatory
<i>Geographic Area Served</i>	x	x	Mandatory
<i>Languages Consistently Available</i>	x	x	Recommended
<i>Documents Required</i>	x	x	Mandatory
<i>Application/Intake Process</i>	x	x	Mandatory
<i>Fees/Payment Options</i>	x	x	Mandatory
<i>Taxonomy Term(s) for Services/Targets</i>	Recommended	Recommended	Mandatory

Database Record Administration Data Elements: Data elements that relate to the database record itself and are purely administrative in nature are included in a separate table. Most are automatically assigned by the software system and are not displayed when records are published. The exception is the date of last annual verification which some I&Rs choose to display.

AIRS Data Elements: Record Administration	
<i>Unique ID Number</i>	Mandatory
<i>Record Ownership Code</i>	Mandatory
<i>Date of Last Annual Verification</i>	Mandatory
<i>Date of Last Interim Change</i>	Mandatory
<i>Contact for Last Change</i>	Recommended
<i>Resource Database Curator for Last Change</i>	Recommended
<i>Record Status (Active/Inactive):</i>	Mandatory
<i>Record Inclusion (e.g., displayed online, in specific portals, directories, etc.)</i>	Mandatory

- a. All mandatory database elements are present and used where applicable.

4. Classification system/Taxonomy:

The I&R service uses the 211 LA County Taxonomy of Human Services to index and facilitate retrieval of resource information, increase the reliability of planning data, make evaluation processes consistent and reliable, and facilitate state/provincial and national aggregations and comparisons of data. Additional classification structures such as keywords, if used, are connected to the Taxonomy rather than functioning as independent indexing systems.

Minimum Expectations:

- The I&R service uses the 211 LA County Taxonomy of Human Services as the classification system for their resource database.
- If keywords are used, they are connected to Taxonomy terms.
- The Taxonomy has been customized, reflects the needs of the community, and updated within the last 12 months.

- a. The resource database indexed using the 211 LA County Taxonomy.

- b. The Taxonomy has been customized within the last 12 months. What is the date of the last review?
- c. The Taxonomy has been updated in the I&R software the last 12 months. What is the date of the last update?
- d. If keywords (sometimes known as alternate terms) are used, answer the following:
 - i. Keywords are connected to Taxonomy terms. How are the connections documented and displayed?
 - ii. A process is in place to ensure that keywords/alternate terms are used consistently, i.e., that when you assign a Taxonomy term to a record, that you also always assign the associated keyword/alternate term. *The reviewer will look at the Resource input side of the software to see how the Resource Specialist assigns keywords/alternate terms.*

5. Content management and indexing:

There are several sections to this stage of the review:

A. Adherence to Style Rules

1. The Reviewer will ask to see at least 5 multi-site agencies to verify that the structure of the organization is accurately reflected, the principal units of the agency are correctly identified, and the entry or series of entries accurately reflects the structure of the organization.
2. Style Guide naming rules for agencies and sites are applied consistently.
3. AKA style rules have been consistently applied.
4. Rules for structuring program and/or service names are applied consistently. Are program names and service names determined and assigned by the provider agency or the resource specialist?
5. Style rules are applied consistently in street addresses.
6. Style rules are applied consistently for hours of operation.
7. Narratives follow Style Guide rules that relate to format, writing style and content of narrative descriptions.
8. Narratives include information about the conditions under which services are provided, as specified in the Style Guide. (eligibility, fees, area served, payment methods, languages.)

B. Professional Appearance

1. The database is professional in appearance and free of spelling and grammatical errors.

C. Accurate and Consistent Indexing

During this section of the review, the reviewer will verify that Taxonomy indexing is sufficiently accurate and consistent to produce a good search results list. Consistent use of the same terms/targets is required. Run 6-10 Taxonomy searches to verify that service terms and target terms are used consistently.

Suggested types of searches:

- *Rent assistance*
- *Community clinics*
- *Food stamps*
- *WIC*
- *Senior centers*
- *Mental health services*
- *Tax preparation assistance*
- *If the I&R specializes, search within their specialty.*
- *Any other service that is much needed within the I&R's community.*

While searching with these terms, answer the following:

1. Indexing is consistent. (e.g., is the selected service always indexed using the same Taxonomy term? Is the selected service always coded at the appropriate level?)
2. Controls are in place to ensure that the resource specialist is indexing using only the customized set of service terms and targets.
3. The I&R service has a policy regarding use of Target terms, even if they are not used. The policy can state that Targets are not being used.
4. If target terms (Y terms) are used, answer the following:
 - i. A quality control process is in place to ensure consistent application of target terms. The reviewer will ask for a description of what is done.
 - ii. The reviewer will ask to see examples of targeted terms to verify consistent use. The reviewer will select the terms.

- iii. The reviewer will check to see if there are stand-alone targets, i.e., instances where a target term has been used without a service term.
 - iv. In situations where more than one target term is attached, they are added in a consistent order. (Is one group coded Health Related Support Groups * Lung Cancer * Women, while another group is coded Health Related Support Groups* Women * Lung Cancer.) What is the rule? Is the rule documented in the Target policy?
5. If other filters are used, they are applied consistently. The reviewer will ask what other filters (language, age, etc.) are used and will spot check for consistency.

D. Database Search Methods

The database review will verify that the database can be searched using names and associated AKAs, Taxonomy terms and associated use references (synonyms), target populations and area served; and that Taxonomy definitions and see also references can be displayed. Depending on the software used the reviewer will focus on the search capabilities for community resource specialists first and database curators second.

1. The database can be searched using organization names and related AKAs.
2. The database can be searched using site names and related AKAs.
3. The database can be searched using program names and related AKAs.
4. The database can be searched using Taxonomy terms.
5. The Taxonomy search retrieves terms based on associated Use References.
6. The Taxonomy search can display See Also references upon request.
7. The Taxonomy search can display Taxonomy definitions upon request.
8. Can the database be searched using target populations, where applicable?
9. The database can filter a search by area served (generally by entering the inquirer's ZIP code)
10. Any other filters used for searching return consistent results.

E. Data Maintenance

The database reviewer will verify that database maintenance procedures include a process for conducting an annual survey with all organizations in the database, collecting and entering interim changes, and identifying and verifying information about new agencies/services.

- a) Due dates for annual surveys (also known as “formal updates”) are tracked within the software or by some external system.
- b) The I&R service has a process for gathering information about changes that occur between surveys, verifying changes and integrating them into the workflow within an appropriate time frame. The reviewer will ask for a description of the process you use to incorporate interim updates.
- c) The I&R service has a process for identifying new agencies and services, ensuring that they meet inclusion/exclusion criteria, acquiring information about them and ensuring that the entries are verified by the provider agency upon inclusion in the database. The reviewer will ask you to describe the process.
- d) The I&R service has a process for managing records for seasonal agencies or services (e.g., Christmas and Thanksgiving baskets or meals).

6. Database quality assurance:

The I&R service has a quality assurance review process to ensure that information in the resource database is accurate and complete.

Minimum Expectation:

The I&R service uses a quality assurance process to evaluate records in the resource database for consistency and adherence to style guide requirements. There is a documented process for verifying information in the resource database that involves multiple attempts to achieve an 85% verification rate within a 12-month cycle. This includes a mechanism for tracking the response rate and a way of evaluating the success of the methods used (e.g., mail/electronic survey, fax, telephone, site visits, follow-up correspondence and the use of various messaging techniques).

- a. The I&R service has a documented quality assurance policy/process.
- b. The I&R service tracks update requests to organizations listed in the resource database and has a process for information that cannot be verified. The reviewer will ask for a description of the process you use to follow up with agencies who do not respond to the initial request.
- c. What is the oldest date of the last formal update for an organization’s entry in the database?
- d. All records have been updated in the last year. If not, approximately how many records have a formal update date that is older than one year? How many records have not been updated

in the last 18 months or longer? For updates older than 18 months, describe the process to bring the records up to date.

7. Resource database data collection, analysis, and reporting:

The creation and maintenance of I&R resource databases generates valuable information about the services and programs available within a community. The I&R service collects, analyzes, and reports insightful information regarding the types of services available, the organizations that provide them, and the areas in which services are available (and unavailable) in ways that are useful to themselves and community partners. An analysis of the resource database maintenance process also reveals information that can enhance both the quality and productivity of each I&R service (for example, by identifying issues for staff training).

Minimum Expectation: Documentation that shows instances of reports based on the resource database.

- a. The I&R service can provide examples of how the information within the resource database is incorporated into reports.

8. Disaster resources:

The I&R service develops, maintains and/or uses an accurate, up-to-date computerized resource database that contains information about available community resources that provide services in times of disaster. Database records include descriptions of the services organizations provide and the conditions under which services are available; and are indexed and accessed using the Disaster Services section of the 211 LA County Taxonomy of Human Services.

Minimum Expectation: The database includes permanent records for organizations active in disaster; the Taxonomy is used to index the records; there is a reasonable process for identifying, verifying, adding, and making available resources that emerge during a disaster.

- a. The database includes permanent records for organizations active in disaster.
- b. The 211 LA County Taxonomy is used to index disaster resources.
- c. Resources that emerge during an event are indexed.
- d. Procedures are in place for verifying information about disaster resources and the ongoing viability of information throughout the response, relief, and recovery phases of a disaster.

9. Quality assurance:

The I&R service annually gathers feedback from organizations included in the resource database to measure the organization's level of satisfaction with the accuracy of the information contained in their record, their familiarity with the I&R service's resource database, and their assessment of interactions with the resource department.

Minimum Expectation: Documentation that shows a mechanism is in place to collect and analyze feedback from organizations.

- a. The I&R service has a method to measure the level of satisfaction agencies (those listed in the database) have with the accuracy of the information contained in their record, their familiarity with and opinion of the I&R's online resource database, and any interaction with resource staff.

10. Agency audit/indexing best practices:

As a separate portion of the review, the reviewer will conduct a random audit on eight different types of organizations and note the key findings. The applicant along with the reviewer work together to identify the agencies. If the agency being accredited is a specialized service, the types of organizations will be reflective of the specialization.

- Agency 1: *A state/provincial or county agency*
- Agency 2: *a community health center*
- Agency 3: *a community mental health center*
- Agency 4: *a faith-based service provider*
- Agency 5: *an organization or service geared for veterans*
- Agency 6: *an organization focused on older adults*
- Agency 7: *a youth services organization*
- Agency 8: *a for-profit services provider*

NOTE: The questions below may not be asked directly by the reviewer but confirmed throughout the agency record audit process.

- a. Primary services are described and distinguished from secondary services.
- b. All primary services described in the narrative are indexed.
- c. Indexing for services is limited to those described in the narrative.
- d. Secondary, ancillary, phantom or indirect services are not indexed.
- e. Indexing is confined to terms within the customized set.
- f. Double indexing is avoided.

- g. Use of terms at multiple levels on the same Taxonomy branch is avoided.
- h. Geographic area served requirements are described and distinguished from the area in which the agency is located.
- i. Area served in service descriptions is accurately reflected in the geographic filter. The reviewer will compare narrative information to filter information.

Resource Database Documentation Requirements

The Remote Database Review Team will require the following documents prior to the review:

- 001 - Inclusion/Exclusion Policy
- 002 - Style Guide
- 003 - Customized List of Taxonomy terms used (In Excel format if possible)
- 004 - Database maintenance procedures
- 005 - Description of service area (including counties, towns, or regions)
- 006 - Report showing formal update dates (In Excel format if possible)
- 007 - List of agency names and their legal status type/agency type to compare types with your Inclusion/Exclusion policy (In Excel format if possible)
- 008 - Your Target Term Use policy

ANNUAL UPDATE FOR ACCREDITED AGENCIES

Once an agency is AIRS Accredited, they must complete an annual update in the form of an emailed online survey.

Accreditation awards are made for a period of five years. You are required to notify AIRS of any changes that negatively affect your compliance with the Accreditation Criteria; and to assure that your I&R Service continues to follow the Accreditation requirements, your program is required to respond to an annual questionnaire reporting on the status of your organization and its activities.

Failure to submit the annual update questionnaire following three reminder emails and a phone call will result in a notation being appended to your organization's name on the list of Accredited agencies on the AIRS website. If the agency continues to be out of compliance in the following year, accreditation will be revoked.

The required information includes questions such as:

- Name of Organization
- Name of Accredited Program
- Name, title, and email of person completing survey
- Have your hours of service changed over the past year?
- Has your program funding changed by more than 20% over the past year?
- Have there been any changes in your senior management over the past year? Please let us know the name, email, and position title for anyone who has left or been hired.
- Were there any problems identified in your last financial audit?
- Is your organization involved in any civil or criminal litigation?
- Provide details about 1-2 community initiatives that your I&R program has been involved in over the past 12 months.
- Please attach an annual report or similar program report provided by your organization. We appreciate that several accredited agencies do not produce annual reports. Instead, we are happy to accept any 'community report' or 'impact report' or even an accumulation of program statistics from the previous year. Reports can be a calendar year or fiscal year.
- Has your agency engaged in any specific activities to address diversity, equity, and inclusion issues over the past year? If so what are some examples of activities that your organization has done? Examples of activities could include establishing a staff/management committee, providing additional training, holding internal meetings, bringing in external consultants, etc. (A "No" answer would not affect your accreditation. We are just interested in what leading agencies are doing.)

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ACCREDITATION COMMISSION:

Jennie Pollak, Chair

Michigan 211
Lansing, Michigan

Brian DeAtley Ellyson

Franklin County Office on Aging
Columbus, Ohio

Cathleen Cooney

Epilepsy Foundation
Bowie, Maryland

Cheryl Stewart

United Way of Greater Atlanta
Atlanta, Georgia

Janice Decker

Aiken County Help Line
Aiken, South Carolina

Nancy Berg

Biddeford, Maine

AIRS STAFF:

**Amy Linsley, AIRS Accreditation
Director**

Sacramento, California

Clive Jones, AIRS Executive Director

Victoria, British Columbia

Sarah Pottelberg

Cold Lake, Alberta

AIRS ACCREDITATION REVIEWERS:

Bob McKown

Sand Lake, Michigan

Crystal Renew

Aiken, South Carolina

Faed Hendry

Toronto, Ontario

Hannah Newton

Seattle, Washington

Laura "LJ" James

Cary, North Carolina

Linda Daily

Oak Island, North Carolina

Vicki Mize

Arlington, Texas