ALLIANCE OF INFORMATION AND REFERRAL SYSTEMS

Accreditation Manual

Manual and Criteria December 2019 Update

Standards for Professional Information and Referral, 8.0 Edition, January 2016

Information & Referral
*connecting people to
community services*

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."**

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Based on the *AIRS Standards and Quality Indicators for Professional Information and Referral,* Version 8.0, January 2016, published by AIRS at www.airs.org.

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AIRS ACCREDITATION PROGRAM OVERVIEW

The purpose of the AIRS Accreditation Program is to determine the extent to which Information and Referral (I&R) organizations comply with accepted practices within the field as defined by the *AIRS Standards and Quality Indicators for Professional Information and Referral*.

The AIRS Accreditation Program is intended to establish a strong foundation on which an I&R program can 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, which includes all the costs of a site visit. 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.

Process Overview

The AIRS Accreditation process has five core elements:

1. A Consultative Review of your overall policies, processes and procedures
2. An online Community Survey of organizations within your resource database
3. An online Resource Database Review
4. A Secret Shopper testing of your direct service
5. An Onsite Review

All transactions between the AIRS Accreditation staff, reviewers and the applicant agency, and all materials submitted by the agency, are confidential. AIRS will only share this information with the express prior written 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, all of 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 elements should be done simultaneously. The first four elements should be completed within 6 months of receipt of the Application packet for existing holders of AIRS Accreditation. First time applicants have 8 months to complete the first four elements.

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. Existing holders of AIRS Accreditation have a total of 3 months for all submissions of corrections. First-time applicants have a total of 8 months for all submissions of corrections. AIRS strongly recommends that the 4 components before the onsite review should be commenced as soon as possible.

The onsite review should be completed by the end of the 11th month for existing holders of AIRS accreditation. First time applicants have until the end of the 16th month to complete the onsite review. Accreditation determination is made by the end of the 12th month for existing holders of AIRS accreditation. First time applicant's accreditation determination will be made by the end of the 18th month. (*Note: this is visually represented by a timeline table on the next page).

If you are seeking re-accreditation, then your application and payment should be submitted at least 6 months <u>before</u> your current expiry date. The implementation of this will be staggered for agencies due to re-accredit over the coming year. Please contact Amy Fish at amy@airs.org to check on your particular 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 an Onsite Review is scheduled. You can start any of the four components at any time before the specified deadlines and there is no specific order 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 TIMELINE

Core Elements: First time Accreditation (Please note that all elements can be scheduled earlier to allow more time for corrections)	Completion Deadline: First time Accreditation	Use this column to enter your months for each deadline
Applicant receives accreditation packet after sending application and payment to AIRS– 18 month timeline starts when AIRS emails you the accreditation packet		
AIRS conducts secret shopper calls	3rd month	
AIRS sends secret shopper reports to applicant	Within one month of receipt	
Applicant sends agencies listed in the resource database for the community survey	5th month	
AIRS schedules review of resource database	5th month	
AIRS conducts a community survey of organizations within your database	6th month	
AIRS conducts online review of resource database	6th month	
AIRS sends 1st resource database review report with corrections needed if any	Within one month of receipt	
Applicant submits narrative responses & documentation (Consultative Review)	8th month	
AIRS sends 1st consultation report to applicant with corrections needed if any	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)	16th month	
Applicant schedules onsite review	16th month	
AIRS conducts onsite review	17th month	
AIRS makes award determination	18th month	

REACCREDITATION TIMELINE

Core Elements: Reaccreditation (Please note that all elements 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 notified 18 months before accreditation expires that they need to apply within one year.	18 months before Accreditation expiration date	
Applicant receives accreditation packet email after sending application and payment to AIRS– 12 month timeline starts when AIRS emails you the accreditation packet	6 months before Accreditation expiration date	
AIRS schedules review of resource database	2nd month	
AIRS conducts secret shopper calls	3rd month	
AIRS sends secret shopper reports to applicant	Within one month of receipt	
AIRS conducts online review of resource database	3rd month	
AIRS sends 1st resource database review report with corrections needed if any	Within one month of receipt	
Applicant sends agencies listed in the resource database for the community survey	5th month	
AIRS conducts a community survey of organizations within your database	6th month	
Applicant submits narrative responses & documentation (Consultative Review)	6th month	
AIRS sends 1st consultation report to applicant with corrections needed if any	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)	10th month	
Applicant schedules onsite review	10th month	
AIRS conducts onsite review	11th month	
AIRS makes award determination	12th month	

To achieve AIRS accreditation, you must complete Core Elements 1- 4 before the Onsite Review 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 being implemented centrally for the system as a whole. The answers would be identical for any of the major components. In this case, the other accreditation applicants in the system do not have to individually demonstrate that they meet the requirements of these core or common components.

2. The agency with 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*. The organizations in this configuration must apply for accreditation individually. There may also be occasions where an accrediting agency has sub-contracted an element of the work to a non-accredited agency – in which case, all elements must be reviewed regardless of where it is housed.

General Advice

Before starting:

o   Read the [AIRS Standards and Quality Indicators](#)!
o   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.
o   You do not have to be perfect to apply – you have time to make adjustments as the process unfolds.
o   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:

o   Have a single person coordinate the process.
o   Do a complete read through of the Accreditation Manual.
o   Stick to Basics. Create documentation that reflects reality … not what you think will impress the reviewers.
o   Don't hesitate to reach out to the Accreditation Director, Amy Fish at amy@airs.org if you have any questions.
o   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 four components before the onsite review 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. Also complete your consultation review as soon as possible, again to allow more time for corrections if needed.
o   Strictly follow the Guidelines for Electronic Submission of Materials located in this document.
o   Immediately notify the Accreditation Director, Amy Fish at amy@airs.org if any changes happen that may have implications for the accreditation process.

Tips and tricks

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

d) Assigning parts to different staff without having someone to bring all of the pieces together.
e) Missing pieces, especially items on the documentation list.
o Database Review Tips
a) Review the database standards in the "AIRS Standards and Quality Indicators" document and make sure you are following each of the standards.
b) The process is designed to be consultative. It is not "all or nothing". You will have time to fix any deficiencies.
c) Your database reviewer can answer any questions that come up throughout the process.

After accreditation award:

o Thank your staff for all of their hard work and have a celebration.
o Take a picture with your plaque and send it to us so we can announce your award on the AIRS Networker and on our social media.
o Announce your award on your own social media and issue a press release.
o Add the AIRS Accreditation logo to your website to display your achievement.
o Attend the next AIRS Conference and have your success acknowledged. You will be added to that year's annual Accreditation Yearbook.
o Be sure to list your accomplishment in your grant proposals. You can link them to our accredited sites page of our website: www.airs.org/i4a/pages/index.cfm?pageid=3308
o Display your plaque in your office where visitors will see it and explain what it involved.

Consultative Review

1. For existing holders of AIRS Accreditation, you must have completed the following within 6 months (first time applicants must complete within 8 months):

   a. Review the Accreditation Criteria and contact the AIRS Accreditation Director with questions as needed.

   b. 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.

   c. Submit an electronic copy of the consultation materials, including the Certification of Documentation Agreement form on the preformatted Google Drive as directed by AIRS staff. (Refer to the Guidelines for Electronic Submission of Accreditation Materials detailed below).

   d. All materials must be current at the time of submission.

2. Within four weeks of receipt of submitted documentation, AIRS will:

   a. Analyze the submitted materials and write a consultation assessment report identifying where requirements have been met and where they have not been met.

   b. 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 Amy Fish, AIRS Accreditation Director with any questions. You must respond to the consultation report and provide supporting documentation and evidence of implementation 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. Always email the Accreditation Director, Amy Fish at amy@airs.org if you have questions or need further clarification.

- Your documents should be **submitted within the folders on the provided confidential, preformatted Google Drive**. The main folder in the Google Drive contains:
  - A copy of the most recent AIRS Accreditation Manual (PDF)
  - A "Read Me First document" with important information to review when beginning the process
  - A folder for your signed Certification of Documentation Agreement which is located on in this Accreditation Manual
  - Four numbered file folders for your documentation files (1- Service Delivery, 2- Cooperative Relationship, 3- Disaster Preparedness and 4- Organizational Effectiveness.) (Resource Database review documentation files are submitted directly to your database reviewer so there is no specific folder for this)
  - If you need to add subfolders to organize groups of documents that is permitted

- Inside each of the numbered folders is a corresponding Word file. The Word file should be opened and used to appropriately enter descriptions and mark checkboxes. Please enter your responses in a blue colored font. **Please only submit this as a Word file and not as a PDF.**

- There are documentation checklists at the end of each Word file in the numbered folders. 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.

- You must have a Gmail address or other email address connected to a Google Account in order to access the Google Drive folders.

- Place your requested documentation files inside each of the numbered files folders. Then, in each folder give the files a number and name so they appear in order. 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 of 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 Amy Fish at amy@airs.org when it is complete and ready for review. Your materials will not be reviewed until you notify her 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. The primary reviewer should be the program manager or responsible contact person. The second reviewer might be someone who is familiar with your I&R processes but not necessarily a manager. Check for thoroughness, clarity, coherence, and readability. Use spell-check. Here's to your successful efforts!

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.

1. 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.

2. 500 random email addresses drawn from the Excel file will be entered into 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 have a minimum amount of responses received back.

3. 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. Please review the list of the questions on page 64 of this document.

4. The results are downloaded and sent to the agency seeking accreditation without comment. *Note that the process is part of AIRS Accreditation but the survey results are not a factor.*

5. 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.

Resource Database Review

In order 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 Remote Database Review:

- o Inclusion/Exclusion Criteria
- o Data Elements
- o Taxonomy
- o Applying Style Guide Rules and Indexing
- o Disaster Resources
- o Searching the Database
- o Maintaining the Database

<u>Review steps</u>

1. In order to prepare for the review, the following documents must be sent to the AIRS database reviewer:

   - Inclusion/Exclusion Policy
   - Style Guide
   - Customized list of Taxonomy terms
   - Database maintenance procedures
   - Description of service area (including counties, towns, or regions)
   - Report showing formal updates
   - List of agency names and their legal status type/agency type for comparison with inclusion/exclusion policy
   - Target Term Use Policy

2. The review will be conducted via GoToMeeting software that enables the reviewer to see the applicant's database online.

3. The length of the review varies, but on average is about four hours total, which will be divided into two separate GoToMeeting sessions.

4. The database reviewer prepares a report and sends it to AIRS.

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

6. You need to respond to the database review report and provide details of your corrective actions. You also need to attach additional documentation if requested. This is 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. This includes all submissions of corrections for database review reports.

Secret Shopper

By the end of the 3rd month, AIRS will begin a series of third-party "Secret Shopper" calls. This process will assess your staff's call handling.

1. AIRS contractor "Spot Check" will conduct 10 calls during a variety of your open times.

2. A standard score card will be used to rate each encounter. The "pass score" will be an average of 80% for all calls scored. There is a copy of the score card in this manual (see table of contents).

3. Results will be shared with the applicant within one month via an online report.

4. AIRS will consult with applicant before the next series of calls if the average score is lower than 80%.

5. I&R programs that were part of United Way Worldwide's contract with Spot Check may be exempt from this component if their I&R service:

- has been scored by Spot Check within the past 12 months;
- the applicant emails Spot Check requesting their summary scores for the past year; and
- AIRS receives a copy of the report.
- AIRS will review the results and either approve report or begin Secret Shopper process.

Onsite Review

1. Following the final consultation report, the applicant will contact AIRS to schedule the onsite review.

2. All expenses related to travel (air, hotel, meals, etc.) are included in the application fee.

3. AIRS will work with the agency to schedule the review and identify the volunteer(s) reviewers. If there were any outstanding documentation issues, updated materials will need to be made ready.

4. AIRS volunteer(s) will conduct the onsite review. At a minimum, the site visit includes:

   ✓ A tour of the facility
   ✓ A meeting with the agency's volunteer leadership
   ✓ Interviews with key I&R staff
   ✓ Examination of documents per AIRS' request
   ✓ Listening to calls

5. At the end of the visit, the review team will debrief with the administrative team as selected by the Executive Director. Board members may be included.

6. Please note that accreditation is not approved onsite.

7. The review team will complete the onsite assessment report and send it to AIRS.

8. AIRS will send a copy of the onsite assessment report to the Accreditation Commission chair, who will review the report and finalize the accreditation decision.

9. AIRS will send you an email indicating the outcome of the accreditation process:

   a. Granting full accreditation for five years;

   b. Granting conditional accreditation when an organization is in substantial compliance, but needs to take further action to comply with some criteria;

   c. Denying accreditation.

10. AIRS may identify certain documents from your submission as 'best practices' and will request that they be shared, with attribution, with other AIRS members on the AIRS Networker.

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 negatively affect continued compliance with the Accreditation Criteria.

Failure to submit the annual update questionnaire following three reminder emails and a phone call will result in an asterisk 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: Eighteen 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 onsite review 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.

CERTIFICATION OF DOCUMENTATION AGREEMENT

By my signature, as Board President/Advisory Committee Chair, I certify that this documentation is

true to the best of my knowledge and provides an accurate representation of this agency/program. I

understand that the penalty for intentional misrepresentation is immediate revocation of AIRS

Accreditation.

_____

Agency/Program Name

_____

Chair of Board/Advisory Committee and Date

_____

Executive Director/I&R Program Manager and Date

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 I&R 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 general 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: *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.)

1. **Call Handling**: AIRS uses a Secret Shopper process to evaluate the call handling component of your service. We will focus on the extent to which your community resource specialists meet the following service delivery quality indicators (where applicable):

   Assessment and Referral Provision:

   - Identify themselves and their program per agency guidelines.
   - Establish rapport with the inquirer and use active listening skills and empathy to discern the presenting problem.
   - Respond to each inquirer in a professional, nonjudgmental, culturally appropriate and timely manner.
   - Use clear language and an appropriate tone of voice and inflection to convey empathy and engagement with the inquirer's situation.
   - Make an accurate assessment of the inquirer's problems and needs asking relevant questions to discover the information necessary for an accurate referral.
   - Explore when appropriate, to see if there is a more serious underlying or unstated problem.
   - Confirm whether there are specific preferences or requirements such as language needs, evening or weekend hours, proximity to public transportation, or disability access.
   - Clarify and confirm the inquirer's need(s) using techniques such as paraphrasing before providing referrals.
   - Provide the inquirer with various approaches to addressing their situation that give them a range of options.
   - Explore the inquirer's own resources (e.g., friends, family, faith-based community).
   - Effectively use the I&R's resource information system to identify resources to meet the inquirer's needs.
   - Where possible and practical, provide at least three referrals to give the inquirer a choice (and to protect the I&R service from being perceived as making a "recommendation") while being careful not to overwhelm the inquirer with too many options.
   - Suggest ways the inquirer can advocate for oneself when appropriate (empowerment).
   - If demographic information is being collected that is not directly relevant to the assessment, e.g., if required by contract or to enhance community reports, provide an explanation to the inquirer about why the information is needed. The primary goal of data collection is to gather enough information about the inquirers to help them address and/or resolve the problem.
   - Encourages the inquirer to call back.

2. **Accessibility:**

   a) How does your agency provide access to information about services 24/7? Please check all that apply. <u>Minimum expectation</u>: 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? <u>Minimum expectation</u>: 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? <u>Minimum expectation</u>: The service can be used by these groups without undue inconvenience; they have been consulted in the decision process regarding arrangements. **Description:**

d) Is your facility free of architectural barriers to people with physical disabilities per requirements such as ADA or other applicable legislation? [ ] Yes   [ ] No

   Describe any limitations for people with disabilities who walk in for service and special provisions you have made to ensure that they have access. <u>Minimum expectation</u>: The facility meets legislative requirements for accessibility or there is an alternative way of accommodating inquirers with disabilities. 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? <u>Minimum expectation</u>: 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:**

i) What are your procedures for managing challenging inquirers? **Description:**

3. Confidentiality: *Submit a copy of your confidentiality policy.* At a minimum, the policy must:

- Include an appropriate definition of "confidentiality".
- Address any exceptions.
- Include an agreement form signed by staff (or other evidence) to indicate that staff are in compliance with 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.

4. Advocacy: *Submit a copy of your advocacy policy and procedures* and identify the role of advocacy in your organization. At a minimum, 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, providing assistance 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 I&R 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 CONTACT USA Accredited, you may skip this section.

    ☐ We are a formal crisis intervention service, are AAS certified and/or CONTACT USA Accredited and are skipping this section.
    ☐ We are a formal crisis intervention service but are not AAS certified or CONTACT USA

Accredited.

☐ We do not provide formal crisis intervention services but have a prearranged agreement with an appropriate crisis center that does. *Provide a copy of your MOU or other agreement.*

If your I&R service is NOT AAS Certified or CONTACT USA Accredited, the following requirements apply:

Submit 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.

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 a copy of your follow-up policy and procedures.*

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:

a. Online Resource Database: If the I&R service makes all or a portion of its resource database available on the Internet at no cost, it must meet the following minimum expectations:

- An easy to remember URL
- A prominently displayed search button
- A search page that is clean, well-organized and easy to navigate
- A guided search with picture or graphic icons representing service concepts as the most prominent search option, or similar strategies that promote "hot topics" lists and other embedded "user friendly" search strategies framed in natural language
- A keyword search window placed below or to the side of the guided search…
- Keyword searches include partial and full-word matching. Entered text must appear at the beginning of the word, not somewhere in the middle, e.g., a search on "aging" will retrieve "aging information" but not "imaging"

- The ability to search agency, site, program and AKA names
- The ability to filter by geographic location/area served
- Cleanly designed search results list that include the data elements that are most important in providing inquirers with the details they need to make informed choices about their options.

The applicant's resource database is available on the Internet at: _____

b. Other Channels for Access: What other forms of Independent Access do you provide? (e.g. mobile application, directory) **Description:**

c. Timeliness of Response: Where the public can contact the I&R service through additional channels (e.g., email, Voicemail, Instant Messaging)? Minimum expectation: There are guidelines in place for "timeliness of response". **Describe your guidelines:**

d. Contacting a Community Resource Specialist: 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. **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 screenshots showing your data collection form. At a minimum, the data collection form must allow the agency to record and distinguish the following types of required activities.

- ☐ Information Only
- ☐ 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 a copy of the procedures that describe the information that is collected and how it is used*.

c. Do you collect data from sources other than your telephone service, e.g. from walk-ins, voicemail, or email contacts? **Description:**

d. in addition to I&R inquiries, what are other types of I&R activities about which you collect data for reports? For example, do you collect data regarding website activity, staff presentations or distribution of publications? **Description:**

e. *Submit a report 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. <u>Minimum</u> <u>Expectation:</u> the report should include the following:

- ☐ Total number of inquiries
- ☐ Total number and type of problem/needs presented by inquirers
- ☐ The number and/or percentage of inquiries involving Information only, Assessment and referral, Assessment without referral, Crisis intervention and Advocacy
- ☐ Follow-up results
- ☐ Geographic and other demographic information about inquirers in aggregate form to protect the confidentiality of inquirers

f. How are your agency's reports used in the community? 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:

AIRS Service Delivery Standards: Documentation Requirements

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 of 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 CONTACT USA accreditation (if you are skipping the Crisis Intervention section).

☐ 007 - The signed, written agreement 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.

☐ 009 - Crisis protocol per agreement with the local crisis center.

☐ 010 - The form your I&R specialists use to complete a lethality (risk) assessment. If your lethality assessments are in electronic format, submit a screen shot.

☐ 011 - Your follow-up policy and procedures

☐ 012 - Screen shots of your inquirer data collection form

☐ 013 - Your procedures regarding the information you collect about inquirers and how you use the information

☐ 014 - Follow-up results report

☐ 015 - A complete and current, finished and formatted report of your I&R activities including:

- Total number of inquiries
- Total number and type of problem/needs presented by inquirers
- The number and/or percentage of inquiries involving 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
- Met/unmet needs

☐ 016 - An explanation or a user guide to the reports you provide for those on your distribution list

☐ 017 - A list of agencies/organizations to which the reports were provided

☐ 018 - 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 calls 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?)*

The Onsite Review will check the following on-site:

☐ The form that is signed by I&R staff agreeing to the confidentiality policy

☐ The nondisclosure form signed by others with access to confidential information

☐ If there are walk-ins, accessibility of the agency's facilities

☐ Sample completed inquirer records

☐ Data collection methods for various caller data included on report

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 of the other I&R services in your community. 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? <u>Minimum expectation</u>: 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). 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. *Submit copies of agreements with other I&R programs in your community*. **Description:**

3. It is expected that the I&R service will engage in cooperative planning and decision making activities with other I&R services 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. <u>Minimum expectation</u>: 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. Do you have an AIRS Affiliate? [ ] Yes   [ ] No
   If yes, describe your organization's involvement over the last two years. <u>Minimum Expectation</u>: The I&R service participates in the activities of its state/provincial or regional I&R association.
   Description:

5. 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. Address your role and the range of activities in which you are regularly engaged. Explain the significance of the work and any noteworthy contributions your agency has made. <u>Minimum expectation</u>: The I&R service has significant interaction with the larger community. **Description:**

6. In what community issues are you actively engaged? Housing? Transportation? Employment? Health Care? Describe your activities and what has been accomplished. <u>Minimum expectation</u>: The I&R service is engaged in community issues. **Description:**

AIRS Cooperative Relationship Standards: Documentation Requirements

<u>**Submit copies of the following:**</u>

☐ 001 - Copies of agreements with other I&R programs in your community

AIRS DISASTER PREPARATION 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 offer assistance 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

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. **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 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.
      - 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.
- Procedures for providing critical incident stress debriefing for staff.

b. 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 a large number of 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:**

c. Describe the drills your organization arranges for staff to practice the emergency procedures as outlined in the plan. Include information about how often they occur, what you have learned as a result of your drills, what changes you have made in the plan as a result of what you learned, and the date of your last drill. <u>Minimum expectation</u>: The drills occur at least annually. **Description:**

d. 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. <u>Minimum expectation</u>: Must have the capacity to collect referral information, produce referral-related and after action reports and distribute the reports to the community. **Description:**

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. <u>Minimum expectation</u>: 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. <u>Minimum expectation</u>: 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 - A disaster-related service request report, if you have had occasion to produce one.

The Onsite Review will check the following on-site:

- ☐ Availability of Emergency Operations and Business Contingency Plans to staff.

- ☐ An emergency evacuation plan that is clearly posted.

- ☐ Evidence that the agency holds periodic practice drills.

AIRS ORGANIZATIONAL EFFECTIVENESS STANDARDS

The Organizational Effectiveness standards describe the governance and operational structure an I&R service needs in order 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 has the ability to 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 of the responsibilities listed below are handled by either the Board of Directors or the Advisory Committee.

c. I&R services need to have a Board of Directors [1] 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[2] handles these responsibilities. *Submit a copy of the roster for your Board of Directors/Advisory Committee.*

Board	Advisory	Responsibility
[ ]	[ ]	Formally adopts policies of the I&R service and ensures that they are followed.
[ ]	[ ]	Ensures that the I&R organization has an executive director or Program manager who is accountable for the operation of the I&R service.
[ ]	[ ]	Assists in procuring financial and technical assistance to sustain the I&R service.
[ ]	[ ]	Responsible for contracting, adopting an annual budget, maintaining financial records and providing an annual audit by an independent certified public accountant.
[ ]	[ ]	Promotes the I&R system throughout the community ensuring appropriate publicity, public relations & outreach.
[ ]	[ ]	Oversees the evaluation of the I&R service.
[ ]	[ ]	Maintains minutes of all official proceedings that any interested party can inspect.

d. *Submit 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. <u>Minimum expectation:</u> 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.

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[1] **Board of Directors:** The governing body of an organization that is responsible for program planning and evaluation, policy setting, personnel administration, program oversight, public relations and fiscal management.

[2] **Advisory Committee:** A formally constituted group of local stakeholders that provides information about community needs and issues, recommendations regarding program planning and development activities and other forms of support that help to

- A code of ethics that all staff receive and agree to follow.
- A nondiscrimination statement that prohibits all forms of discrimination.

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. <u>Minimum expectation</u>: 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:

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. <u>Minimum expectation</u>: 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? **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 safety while preventing access to the information in other circumstances. **Description:**

c. *Submit 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.
    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? **Description:**

f. Describe how your agency meets ADA requirements for staff with respect to technology.
    Description:

3. Personnel Management:

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

b. *Submit a copy of an organizational chart* that shows all positions within the agency and/or I&R service. *Submit written job descriptions for all employees and volunteers of the I&R service.* They should outline responsibilities, essential job functions and lines of accountability.

    Describe your hiring process, including a strategy for posting job listings for employee and volunteer positions that ensures the listings are broadly available throughout the community. **Description:**

c. Describe the screening procedure for evaluating candidate applications and/or resumes against position requirements. *Submit your employment interview questions for each of the positions within the I&R service and the rating form used to evaluate responses.*
    Description:

d. Describe how you provide ongoing performance monitoring for all staff. <u>Minimum expectation</u>: There is a clear mechanism for providing ongoing supervision and measuring employee performance. The agency uses a standardized observation form for I&R 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:**

When performance problems are identified, how are they addressed? Describe what you do. <u>Minimum expectation</u>: A clear way of dealing with performance problems is in place. **Description:**

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? <u>Minimum expectation</u>: 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 quality and productivity measures you use. <u>Minimum expectation</u>: A system is in place for determining how well individual database curators are helping the I&R service meet agency service goals. **Description:**

How do you review your resource database and evaluate the work of your resource specialists? How many records do supervisors review each month? What indicators of quality do you use? What quality/productivity measures do you use? **Description:**

g. If you have community resource specialists who work at home or in other off-site locations, describe your requirements for the arrangement. <u>Minimum expectation</u>: 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:**

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

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:**

How many hours of training do you provide? _____

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 a copy of your training goals with written learning objectives defining behavioral outcomes for each module.

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:**

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:**

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:**

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

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

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

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

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

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

f. 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? <u>Minimum expectation</u>: Some type of ongoing training is provided for community resource specialists and database curators. **Description:**

What percentage of community resource specialists and database curators and managers are certified? Minimum expectation: 51% of community resource specialists and managers and 51% of database curators and managers have professional certification or are in the process of becoming certified. This criterion only applies to staff eligible to test. So, if your staff person has not met the required work-time to be eligible, they would not be calculated in the number that needs to be certified. Tell us the number of eligible staff, number of ineligible staff, and how many of the eligible staff have current certificates for each of the two categories of staff. (Note you no longer have to send us the actual Certificates).
 Description:

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 that takes the demographics of the community into consideration. Steps have been taken to track and evaluate the effectiveness of the plan.

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

   b. What outreach methods have you used? **Description:**

   c. 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:**

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. The agency is 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. <u>Minimum expectation</u>: The agency is able to 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

What organizational changes have been made based on the analysis of these data reports? **Description:**

b.   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. <u>Minimum expectation</u>: 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:**

If, during the course of 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 you handle this type of situation? **Description:**

How do you use service outcomes information obtained during the course of customer satisfaction/quality assurance surveys in reports on follow-up activity? **Description:**

c.   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? <u>Minimum expectation</u>: 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:**

Provide three examples of things you learned from an evaluation and the program changes you made in response. **Description:**

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 - An organization chart that reflects all of 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.
- ☐ 005 - Job descriptions for all of the positions within the I&R service.
- ☐ 006 - The standardized form and screening procedure you use to evaluate each candidate's application or resume against the I&R staff position requirements.
- ☐ 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 - Your succession plan for key staff.
- ☐ Policies and procedures relating to the use of off-site I&R staff.
- ☐ 009 - Backup policies and procedures.
- ☐ 010 - A Table of Contents for your training manual that shows a detailed list of all topics covered in your community resource specialist training program.
- ☐ 011 - A Table of Contents for your training manual that shows a detailed list of all topics covered in your database curator training program.
- ☐ 012 - 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.

☐ 013 - Examples of subjective and/or objective evaluation tools used for measuring an I&R trainee's level of competency.

☐ 014 - Your I&R training evaluation form.

☐ 015 - Your I&R trainer evaluation form.

☐ 016 - An outreach report for the I&R service describing the plan, the outputs and outcomes (what was accomplished)

☐ 017 - Sample written supervision plan for I&R staff.

☐ 018 - Observation forms that are used for I&R staff.

☐ 019 - Performance appraisal forms that are used for I&R staff.

☐ 020 - Sample individualized performance improvement plan for I&R staff.

☐ 021 - 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.

☐ 022 - Rating sheet for I&R call monitoring.

☐ 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. (Note this is a 'self-reflection' report based on your own performance targets, but may incorporate other elements)

The Site Review Team will review the following:

☐ The office has space and furnishings to perform the work of the I&R service.

☐ A confidential space is available for interviewing people who walk in, where applicable.

☐ The agency has equipment and technology to perform the work of the I&R service.

☐ The workspace is able to accommodate staff with disabilities.

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 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 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 record contains all required 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., community resource specialists, database curators, the general public) may vary.

STANDARD 9 - Classification System/Taxonomy: The I&R service uses the 211 LA County Taxonomy of Human Services (formally titled A *Taxonomy of Human Services: A Conceptual Framework with Standardized Terminology and Definitions for the Field*) 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.

STANDARD 10 - Content Management and Indexing: The I&R service ensures through training, database management procedures and supervision that resource specialists 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 recognized and consistently applied practices; and assign other search keys 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 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).

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

Resource Database Review

The AIRS Accreditation process includes an online database review which allows us to ensure your organization's compliance with the Accreditation Criteria for the Resource Database. The review is conducted by telephone using GoToMeeting software which enables the reviewer to see 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.

In order to prepare for the review, AIRS will need the following documents:

- Inclusion/Exclusion policy
- Style Guide
- Customized list of Taxonomy terms used
- Database maintenance procedures
- Description of service area (including counties, towns, or regions)
- Report showing formal update dates
- List of agency names and their legal status type/agency type in order to compare types with your Inclusion/Exclusion policy.
- Your Target Term Use policy

AIRS will tell you who your reviewer is and you will send your documents directly to them.

We want to make sure that your database review is completed no later than three months after you begin the Accreditation process for existing holders of the AIRS Accreditation. First time applicants must have it completed six months after you begin the Accreditation process. AIRS will contact you to schedule your review.

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 summary of requirements for accreditation that will be the focus of the review and the form that will be used to record notes from the interview which shows, step-by-step, how the review will proceed. Both are located in separate sections below. Together, they will help you understand the elements that will be covered during the remote review and how compliance with each accreditation criterion will be verified.

INCLUSION/EXCLUSION CRITERIA: The database review will verify that the I&R agency follows its inclusion/exclusion criteria, that its database listings are impartial, and that exceptions to the policy are applied consistently.

Minimum Expectation: An Inclusion/Exclusion Criteria Policy exists and 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.

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

CLASSIFICATION SYSTEM/TAXONOMY: The database review will verify use of the Taxonomy; verify that if keywords are used, they are connected to the Taxonomy and used consistently; and verify that the Taxonomy has been updated within the last 12 months.

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 and reflects the needs of the community.

APPLYING STYLE GUIDE RULES / INDEXING: The database review will verify that Style Guide rules are applied consistently; that only primary services are indexed; that there are no "disconnects" between service descriptions and indexing relating to services that have been described; that service information supports the ability of community resource specialists to make accurate referrals; that there is differentiation between location of service and area served; that area served in service descriptions is accurately applied in the geographic search filter; that the Taxonomy customization is adhered to and applied consistently; that double indexing and using terms from multiple levels on the same Taxonomy branch are avoided; that indexing of service and target terms is sufficiently accurate and consistent to produce good search results; and that the database is professional in appearance and there are no spelling or grammatical errors.

Minimum Expectations:

- Includes rules for structuring resource database records into agency, site and service components.
- Addresses how to correctly identify the principal unit of the agency and how to configure an entry or series of entries to accurately reflect the structure of the organization.
- Includes rules for structuring agency, program and site names.
- Requires AKAs for agency, program and site names, when applicable.
- Includes rules for structuring program and service group names

- Includes rules for configuring address information.
- Provides rules for the format, writing style and content of narrative descriptions.

DISASTER RESOURCES: The I&R resource database that contains information about available community resources 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 in the course of a disaster.

SEARCHING THE DATABASE: 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.

MAINTAINING THE DATABASE: The database review 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.

Resource Database Interview

INCLUSION/EXCLUSION CRITERIA: The database review will verify that the I&R agency follows its inclusion/exclusion criteria, that its database listings are impartial, and that exceptions to the policy are applied consistently.

- o Does the database include all provider types listed for inclusion?

- o Does the database contain any provider types that should have been excluded?

- o Does the database contain or omit records that conflict with the policy? If the database includes for-profit organizations, for example, do they meet conditions for inclusion in the

policy, e.g., their services are free? The reviewer will spot check to verify compliance.

- o Do the organizations in the database reflect the legal status types approved in the policy?

- o If exceptions to the policy are specified, do they appear to be consistently applied?

- o Are the listings impartial and non-partisan?

- o Has the Inclusion/Exclusion policy been reviewed within the last 12 months? **And what is the date of the last review?**

- o Is there a fee for inclusion in the database, if yes, under what circumstances?

- o Does the review process combine an internal and external focus, such as:

   - Incorporating from their reports assessing unmet needs?

   - Analyzing organizations according to their importance as referrals?

   - Discussions with community resource specialists?

   - Input from key stakeholders in the community?

- o What steps have been taken to ensure that the database includes resources that meet community needs.

- o How is the inclusion/exclusion policy published?

DATA ELEMENTS: 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, which are listed below. 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 checklist below. If an element is not populated, an explanation will be requested.

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

AIRS Data Elements: Record Administration	
Unique ID Number	Mandatory
Record Ownership Code	Mandatory
Date of Last Formal Verification	Mandatory
Contact for Formal Verification	Mandatory
Date of Last Interim Change	Mandatory
Contact for Last Change	Mandatory
Resource Specialist for Last Change	Mandatory
Record Inclusion (e.g. displayed online, in specific portals, directories, etc.)	Mandatory

CLASSIFICATION SYSTEM/TAXONOMY: The database review will verify use of the Taxonomy; verify that if keywords are used, they are connected to the Taxonomy and used consistently; and verify that the Taxonomy has been updated within the last 12 months.

o   Is the resource database indexed using the 211 LA County Taxonomy?

o   Are keywords (sometimes known as alternate terms) used?

o   If the database uses a separate keyword/alternate term system, are the keywords connected to Taxonomy terms? How are the connections documented and displayed?

o   How do you 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.

APPLYING STYLE GUIDE RULES / INDEXING: The database review will verify that Style Guide rules are applied consistently; that only primary services are indexed; that there are no "disconnects" between service descriptions and indexing relating to services that have been described; that service information supports the ability of I&R specialists to make accurate referrals; that there is differentiation between location of service and area served; that area served in service descriptions

is accurately applied in the geographic search filter; that the Taxonomy customization is adhered to and applied consistently; that double indexing and using terms from multiple levels on the same Taxonomy branch are avoided; that indexing of service and target terms is sufficiently accurate and consistent to produce good search results; and that the database is professional in appearance and there are no spelling or grammatical errors.

There are several sections to this stage of the review:

1. ADHERENCE TO STYLE RULES

- o At least 5 multi-site agencies will be reviewed to verify that the structure of the organization is accurately reflected, the principle unit of the agency is correctly identified and the entry or series of entries accurately reflects the structure of the organization.

- o The reviewer will verify that Style Guide naming rules for agencies and sites are applied consistently.

- o The reviewer will spot check AKAs, noting whether style rules have been consistently applied.

- o The reviewer will verify that rules for structuring program and service group names are applied consistently. How are program names and service group names determined and assigned? By the provider agency or the resource specialist?

- o The reviewer will verify that style rules are applied consistently in street addresses.

- o Do narratives follow Style Guide rules that relate to format, writing style and content of narrative descriptions?

- o Do narratives include information about the conditions under which services are provided, as specified in the Style Guide? (eligibility, fees, area served, payment methods, languages.)

2. INDEXING TO BEST PRACTICES

During the second section of this component of the review, the reviewer will audit at least 8 records for indexing best practices. The Reviewer will select the agencies.

- Are primary services described and distinguished from secondary services?

- Are all primary services described in the narrative indexed?

- Is there indexing for services that are not described in the narrative?

- Are secondary, ancillary, phantom or indirect services indexed?

- Is indexing confined to terms within the customized set?

- Is double indexing avoided?

- Is use of terms at multiple levels on the same Taxonomy branch avoided?

- Are geographic area served requirements described and distinguished from the area in which the agency is located?

- Is area served in service descriptions accurately reflected in the geographic filter? The reviewer will compare narrative information to filter information.

3. ACCURATE AND CONSISTENT INDEXING

During the third section of this component 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.

- Is indexing consistent? (e.g., is the selected service always indexed using the same

Taxonomy term? Is the selected service always coded at the appropriate level?)

- What controls are in place to ensure that the resource specialist is indexing using only the customized set of service terms and targets?

- Are target terms (Y terms) used?

- What is your policy for use of target terms? NOTE: Your I&R service must have a policy regarding use of Target terms, even if they are not used. The policy can state that Targets are not being used.

- If target terms are used, how do you ensure that they are used consistently throughout the database? Is a quality control process in place to ensure consistency? The reviewer will ask for a description of what is done.

- The reviewer will ask to see examples of targeted terms to verify consistent use. The reviewer will select the terms.

- The reviewer will check to see if there are there stand- alone targets, i.e., instances where a target term has been used without a service term.

- In situations where more than one target term is attached, are they 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?

- If other filters are used, are they applied consistently? The reviewer will ask what other filters (language, age, etc.) are used and will spot check for consistency.

- What is the process you use for managing records for seasonal agencies or services (e.g. Christmas and Thanksgiving baskets or meals)?

- What is the process you use for identifying new agencies, ensuring that they meet inclusion/exclusion criteria, acquiring information about them, and ensuring that the entries are verified by the agencies upon inclusion in the database?

- What types of records do you keep for organizations that have been removed from the database or omitted because they do not meet your inclusion/exclusion criteria? Is information about why the organizations removed/omitted included in the records?

4. DISASTER INDEXING

- o Does the database include permanent records for organizations active in disaster?

- o Is the 211 LA County Taxonomy used to index disaster resources?

- o How are resources that emerge during the course of the event indexed?

- o Are there special procedures for verifying information about disaster resources; the ongoing   viability of information throughout the response, relief and recovery phases of the disaster?

5. PROFESSIONAL APPEARANCE

- o Is the database professional in appearance and free of spelling and grammatical errors?

6. 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.

- o Can the database be searched using organization names and related AKAs?

- o Can the database be searched using site names and related AKAs?

o Can the database be searched using program names and related AKAs?

o Can the database be searched using Taxonomy terms?

o Does the Taxonomy search retrieve terms based on associated use references?

o Does the Taxonomy search display See Also references upon request?

o Does Taxonomy search display Taxonomy definitions upon request?

o Can the database be searched using target populations, where applicable?

o Can the database filter search by area served (generally by entering the inquirer's ZIP code)?

o Can other filters be used for searching?

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7. MAINTAINING THE DATABASE

The database review 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.

o How does your I&R service pursue feedback from organizations that do not return surveys? How many times do you attempt to obtain feedback before taking other steps? What methods do you use when you have to pursue feedback?

o What steps do your resource specialists take when information cannot be verified?

o How do you track due dates for annual surveys (also known as "formal updates")?

o What is the oldest date of last formal update for an organization's entry in your database? Can

you produce a report of organizational records in the resource database whose date of last update is older than a specified date?

- o Approximately how many records have a date of last update that is older than one year?

- o Does your I&R service have 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 you to describe the process.

- o Does your I&R service have 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.

- o How does your I&R service measure the agency's level of satisfaction 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?

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
- ☐ 004 - Database maintenance procedures
- ☐ 005 - Description of service area (including counties, towns, or regions)
- ☐ 006 - Report showing formal update dates
- ☐ 007 - List of agency names and their legal status type/agency type in order to compare types with your Inclusion/Exclusion policy
- ☐ 008 - Your Target Term Use policy

The Onsite Review will check the following on-site:

- ☐ Products (Note: this refers to directories, websites, web portals, etc.)
- ☐ Outstanding issues from the remote database review

ASSESSMENT GUIDE FOR SECRET SHOPPER PROCESS

QUALITY ASSURANCE CALL MONITORING FORM via SPOT CHECK

SCALE: YES = 1   NO = 0   N/A = 1

INDICATORS DEMONSTRATING QUALITY PERFORMANCE SCORE

CONTACT PROCESS (5% of total call)

    a. Easy Navigation of Phone System: The call answered either by an I&R Specialist (i.e. no IVR button pressing) or by pressing two (2) or less buttons (IVR options) to reach the service.

    b. Appropriate IVR Greeting: The IVR greeting sounds professional, warm and welcoming. Uses proper tone, enunciation and volume.

    c. Comfortable IVR On-Hold Feature: On-hold music and/or messages sounds professional and appropriate. Music sounds relaxing, uplifting or calming. Messages provide useful information.

    d. Responsiveness/Speed of Answer for the Specialist to answer the incoming call.

    Comments on the Quality of Accessing Services (feedback should be specific about the indicators above; note significant strong points, high performance areas, areas needing improvement and recommended activities to assist with the Contact Center's development):

STAGE 1: RAPPORT/CONTACT (5% of total call)

    a. Answers incoming calls with the proper greeting: The Specialist's voice sounds warm and welcoming and the Specialist begins the call with a good pace (does not sound rushed). Uses proper tone, enunciation and volume. Does not sound disinterested.

    b. Uses appropriate greeting: The greeting must include the name of agency/program, the fact it is a 211 service or other type of service, and an invitation to help. Specialist must clearly state each part of the greeting, i.e. "Thank you for calling 'X 211', how may I help you?"
Additional greeting content: Did Specialists include their personal first name in the greeting?

    c. Establishes a good rapport with client: Starts the conversation in a personable manner at the

same time professional. Does not begin the assessment stage or collecting demographic information (i.e. asking for zip code) without establishing a connection first.

COMMUNICATION TECHNIQUES THROUGHOUT CALL (35% of total call)

a. Demonstrates empathy: The Specialist seems genuine, respectful, caring and sincere. Demonstrates clear understanding of the client's situation including the feelings.

b. Focuses on the client's feelings: Identifies client's feelings, i.e. "It sounds like you feel really worried."

c. Reflects key phrases used by client: Specialist must effectively listen to the client's concerns and respond accordingly. Paraphrases; avoids parroting; summary Demonstrates understanding; summary focuses on the presented issue.

d. Remains professional in a friendly manner: Tone of voice is friendly and patient; conveys willingness to help. Stays engaged and focused on the client. Nonjudgmental. Respectful and courteous during the entire call (uses phrases such as "please" and "thank you"). Used positive "willing to help" words throughout the call, i.e. "I am glad you called" or "I will try to help you."   Avoided language that demonstrated lack of interest (i.e. inappropriate tone when saying "yeah" or "uh huh"). Comment: The key here is that the Specialist must sound pleasant and use positive statements. If the Specialist sounds "short," abrupt, or completely disinterested in taking the call, then the score should be a "0."

e. Prioritizes problems: Breaks down a complex problem into manageable pieces. Uses phrases like "You seem most concerned about …." Guides the discussion. Does not make the decision for the client.

f. Focuses on simplicity: Uses short sentences whenever possible. Matches the client's vocabulary. Avoids the use of jargon, unless explanation of jargon given.

g. Utilizes minimal encouragers: Uses minimal encouragers such as "mmm," and "I see" that moves the conversation along and lets the client know the Specialist is still listening. The tone of the minimal encourager must be appropriate demonstrating that the Specialist is paying attention.

h. Avoids unexplained silence gaps: Clients must not experience any unexplained gaps of silence lasting 10 seconds or more at any given time during the call.

i. Allows the clients to steer the conversation and guides the calls when appropriate: Allows the clients to communicate their situation in their own style and in their own time. Exercises patience with clients. Does not unnecessarily interrupt clients. Guides the conversation back in the right

direction if no progress is being made in understanding the situation.

j. Appropriately places client on hold: Politely asks if the client will hold and waits for client's response. The Specialists explains the reason they are placing the client on hold and thanks client upon returning after hold.

STAGE 2: ASSESSMENT (10% of total call)

a. Effectively asks questions: Clarifies what the client is saying, i.e. asks open-ended and/or closed-ended questions; asks appropriate questions as needed encouraging clients to present their needs and to discover necessary information. Very important when asking more personal questions, explains why they are asking them, i.e. "In order to find the right service to help you, I need to better understand…"

b. Appropriately Probes: When necessary probes beyond the stated problem for additional needs. Gently explores if there is an underlying issue and stops once it becomes clear that the client does not want to go any further.

STAGE 3: CLARIFICATION (10% of total call)

a. Clarifies ensuring understanding of problem: The Specialist restates, confirms the purpose of the call; paraphrases the client's needs and asks clarifying questions about the needs; paraphrases the reason of call and specific information that helps with the information and referral giving process.

STAGE 4: INFORMATION AND REFERRAL PROVISION (30% of total call)

a. Provides appropriate information and/or referrals: Provides detailed information determining the appropriateness of the referrals, i.e. explains program details, etc; does not recommend, endorse or guarantee a service; does not make false promises; referrals provided to clients are based on their needs.   Accurately responds to client's direct questions. Does not provide referrals for programs that will not help with the needs identified.

b. Effectively provides information and/or referrals: Provides at least 1 appropriate referral for each of the needs and if no referrals available, the Specialist explored alternative solutions. Does not provide more than 4 referrals overwhelming the client. Comment: For Mystery Call Project 2013, it is important the Specialist clearly explores options for the "economic" and "crisis" aspect of the call.

STAGE 5: CLOSURE (5% of total call)

a. Asks the client if further assistance is needed: Clearly asks the client "Is there anything else I may help you with?"

b. Invites the client to call back: Encourages the clients to call anytime they need help or if the referral proves insufficient (i.e. "Please call us back 24 hours a day if you need any more help or if that information does not help you.").

c. Thanks client for calling while including 211 program name: (e.g. "Thank you for calling 211 Green County or 211 Helpline …").

d. Appropriately ends the call: Allows the client to hang up first and does not inappropriately hang up on the client (i.e. The Specialist hangs up after hearing the disconnecting click or after sufficient time after the final words).

OVERALL PERFORMANCE SCORE

Comments on the Quality of Service (note significant strong points, high performance areas, areas needing improvement and recommended activities to assist with the Contact Center's development). These performance indicators will not be included in the overall score of the Contact Center.

COMMUNITY SURVEY QUESTIONS

The questions provisionally include:

- What is your organization's relationship to the agency/program applying?

- To what extent do you agree with the following statements?

    - Staff are helpful and responsive

    - Staff are knowledgeable and well-trained

    - The database is current, accurate and relevant

    - The organization appears to be operated efficiently

    - The organization is collaborative by nature

    - How would you rate the service provided by the organization to your community?

    - What role does the agency/program play in the human services system in your community?

ANNUAL UPDATE FOR ACCREDITED AGENCIES

Once an agency is AIRS Accredited, they must complete an annual update. This is in the form on 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 be in compliance with the Accreditation requirements, your program is required to respond to an annual questionnaire reporting on the status of your organization and its activities.

If you fail to submit your report, following two emails and a reminder letter, your accreditation will be reduced from five years to three. If you continue to be out of compliance in year two, your award of accreditation will be either suspended or revoked.

The required information covers:

1. Name of Organization
2. Name of Accredited Program
3. City
4. State/Province (in full, as in Idaho)
5. Name of person completing this survey
6. Title of person completing this survey
7. Email address of person completing this survey
8. Have your hours of service changed over the past year?
9. Has your program funding changed by more than 10% over the past year?
10. Have there been any changes in your senior management over the past year?
11. Were there any problems identified in your last financial audit?
12. Is your organization involved in any civil or criminal litigation?
13. Provide details about 1-2 community initiatives that your I&R program has been involved in over the past 12 months.
14. Please attach an annual report or similar program report provided by your organization.

ACKNOWLEDGEMENTS