

Alabama Network of
FAMILY
RESOURCE CENTERS

MEMBERSHIP STANDARDS



Revised
November 2011

MEMBERSHIP STANDARDS

MEMBERSHIP LEVELS

Three levels of membership are recognized by the ANFRC

Full Membership

This level of membership indicates that the site submitted evidence of attainment of the standards outlined in the self-study and had no shortcomings in any of the critical areas of performance. Full members are authorized to participate in all meetings and training events of ANFRC and to participate in funding opportunities that may arise on behalf of ANFRC. Full members must periodically resubmit an ANFRC application to ensure continued attainment of membership standards.

Associate Membership

This level of membership indicates that the site submitted evidence of attainment of most of the standards outlined in the self-study and had limited shortcomings in any critical areas of performance. Sites accepted in this category may request an ANFRC mentor to advise/education the site in preparing for Full membership. Associate members are authorized to participate in all activities, meetings and training events of ANFRC. Associate members may reapply for membership status changes at least annually.

Provisional Membership

This level of membership indicates that the site submitted evidence of attainment of some of the standards outlined in the self-study and has moderate shortcomings in several critical areas of performance. Sites accepted in this category may request an ANFRC mentor to advise the site in preparing for Full membership. Provisional members are authorized to participate in all activities, meetings and training events of ANFRC. Provisional members may reapply for membership status changes at least annually. Provisional members do not have to achieve Associate member status before attaining Full membership.

DETERMINING LEVELS OF MEMBERSHIP

Membership status is determined by the level of standards attainment as indicated by the self-study, the evidence provided to substantiate ratings, and final ratings. The following scale (points received) will be utilized in accessing the level of standard attainment: Each evidence within the standards receives a point value of 1 except for standards 7, 8, 12, and 16 which are absolutes and have an assigned value of 1.25 points per standard. There are 100 possible points available for all 25 standards.

Fully Implemented	assigned points vary for each standard
Substantially Implemented	based on number of evidences per standard
Partially Implemented	
Not Implemented	

There are 25 standards that will be rated based on the scale above with a score of 100 being the highest possible rating. Membership attainment levels will be based on the following:

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Full Membership	90 – 100 (90%)
Associate Membership	80 – 89 (80%)
Provisional Membership	70 – 79 (70%)
Non-membership	Below 70 points

Standards 7, 8, 12, and 16 are referred to as the “absolutes”. A site must have met these 4 standards to qualify to begin the application process. Even if a site is able to score high on all other standards but does not meet these “absolutes” they will not be given consideration in the application process. No need to continue the application process if these “absolutes” are not met first.

Sites who score a “0” on any of the twenty-five standards will not be eligible for Full membership regardless of their total score instead they would be eligible for Associate Membership.

ANFRC membership decisions will be deferred if an application reflects serious programmatic and/or fiscal deficiencies. Additional information will be required prior to further membership consideration.

Although sites that score below 70 points will not be eligible for membership in ANFRC, they are invited to request technical assistance from the ANFC membership to develop and implement an action plan to support the attainment of the standards at a level that would result in the awarding of membership status.

MENTORING PROCESS

Mentors are to contact their assigned site(s) not later than four weeks after assignment. Initial contact should be made by telephone to the site’s executive or program director. This contact should introduce the mentor to the site, answer any preliminary questions and schedule a meeting between the mentor and the site’s director. The location and time of the meeting is up to the involved parties.

Mentors should provide the site director with copies of the following documents of the Alabama Network of Family Resource Centers. These can be sent via mail or provided at the first visit.

- **Self-Study...copy of the actual application standards**
- **Rating Form...scoring grid sheet used by independent application evaluators/reviewers**
- **Release Forms** (These are signed and sent by the mentor or site to the President of ANFRC for inclusion in their “site file”. All sites should sign the release allowing ANFRC to review their program. For example, if the center receives funding through the Children’s Trust Fund of Alabama the signed release form would allow CTF to release information to ANFRC).

After discussion of materials and self-study process the applicant is advised to compile the self-study to the best of their ability and the mentor will serve as an advisor during the process. This process will take a substantial amount of time and the applicant should prepare for an extensive commitment. After completion of the application, the applicant will submit the total self-study for review by the outside review team during the cycle for reviews which is held twice yearly.

Please note: The sites are responsible for determining and implementing all changes that will allow them to come into full compliance with all membership standards. It is not the responsibility of the mentor to

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ensure this happens. Mentors are there as a point of contact and information/education but do not hold responsibility in ensuring full membership for the site.

The process for full membership consideration starts when the site has completed the self-study and has submitted the application for review to the independent review team consisting of two or three members. This team reviews, scores, and submits questions to clarify the information contained within the application as needed. This score determines full, associate, or provisional membership status recommendation for the applicant. Once the independent review team recommends membership into ANFRC the general membership has final voting of acceptance or rejection of the applicant. Sites not achieving full membership may reapply, through the same process, at the next opportunity made available through the ANFRC. If the applicant is not awarded full membership then they can request the mentor to serve in a capacity of help until the standards are satisfactorily met.

If a site reviews the provided materials and determines that ANFRC membership is not one of their goals, they can withdraw from the mentoring and membership process. This can happen at any time as determined by the site. A letter from the site to this effect should be forwarded to the ANFRC Board.

All members, full through provisional, are invited to attend ANFRC meetings. Only Full members have voting rights in conducting ANFRC business.

Membership dues are as follows:

- Full membership \$200 annually
- Associate membership \$100 annually
- Provisional membership \$50 annually

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APPLICATION PROCESS

During the application process Family Resource Centers gather data and information pertaining to each standard and evidence to explain and verify services provided in each center. Some of the evidences are required within several standards. In order to eliminate redundancy and duplicated paper work a **Standards Appendices Master Copy Book** should be compiled to simplify the review and application process. ANFRC applicants are to follow the guidelines below in completing their application.

Compile an ANFRC Standards Appendices Master Copy notebook. Follow the list below to compile the book which will accompany the membership standards application for your site. Tab each topic for easy and clear review.

- A. **Mission Statement**....Clearly defined and consistent with the Charter and Values statement of ANFRC.
 - B. **Board Minutes and Sign in sheets** (for the past year)
 - C. **Staff meeting minutes** (12 copies representing the past year)
 - D. **Case file**....Mock file and actual file with names concealed. One file to represent all programs thoroughly.
 - E. **Board By-laws**
 - F. **Policy and Procedures**....Sampling of items requested throughout the application.
 - G. **Job Descriptions** of all positions
 - H. **Staff Evaluations**.....sampling with concealed names
 - I. **Staff Qualifications**.....Degrees, Licenses, etc.
 - J. **Audit and verifying letter** from last audit
 - K. **Annual Report** for the past year
 - L. **Forms** used by center... i.e. Releases, transportation agreements, confidentiality statements, memorandums, etc.)
- When compiling the application the absolutes (standards) should be brought to the front of the application for review.
 - Required evidences that refer to Master Copy Appendices should be simply noted on application allowing for cross referencing and ease of review for the review team.
 - Sites with Provisional and Associate status may reapply two times yearly (if need) before reaching membership status.
 - A scoring grid system is used by the independent reviewers to capture all scoring potential for applying sites.

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CHARTER

The Alabama Network of Family Resource Centers (ANFRC) is an organization of non-profit agencies or programs that provide a wide array of services designed to protect children and to strengthen and support families in Alabama. The purpose of ANFRC is to support the development, growth, and continuation of these services by providing technical assistance, training, advocacy, resources and networking opportunities. Membership in ANFRC is approved by vote of ANFRC members after examination of the applicant agency's policies, procedures and practices, which must be in keeping with the following philosophy in our values statement. (Section 31-8-2, Code of Alabama 1975.)

VALUES STATEMENT

We believe that children belong with their own families when they can live safely at home in a nurturing, healthy and stable environment. We believe that all children need to experience permanence in their lives and need family and community connections, even when it is not possible for them to live at home. In the effort to protect children from abuse and neglect, to strengthen families, and to assist families in securing needed supports, services are individualized, community-based and goal-directed in keeping with the following ideals:

1. We treat families as partners in parenting and protecting their children.
2. We focus on the strengths of the family as a whole, while showing respect for family members as individuals.
3. We seek to meet identified needs of families which may vary in levels of intensity needed to keep children safe.
4. We provide collateral contact among agencies to meet the multiple needs of children and their families.
5. We deliver services in culturally sensitive ways.
6. We ensure that staff is accessible to children and families.
7. We assist families in accessing needed services through partnerships with community agencies and through direct services of the ANFRC program sites.
8. We are responsive to unmet service needs in the geographic areas where programs exist, and seek to develop services that are necessary to maximize child and family well-being.
9. We are committed to the development and provision of services that are preventive in nature and that seek to equip families with the knowledge and resources they need to nurture and rear their children in a safe, stable home environment.

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HISTORY

The family resource center model has proven to be one of the most successful social service models available to communities and families. This model is a resource-friendly, effective manner in which families can access and utilize social services to address their complex issues.

Attributes of this model that champion the success on helping families include: comprehensiveness and flexibility, individualized support, strengths-based and prevention-focused, collaboration across systems and disciplines, family focused, and relentless problem solving.

Alabama's experience with family resource centers in the early 1990's was positive but tenuous. In the Spring of 1999, four centers rallied together to support the important work of family resource centers across the state through 1) the establishment of measurable standards of operation, and 2) through the networking of sites that practice the ideas of highest quality, comprehensive family services. This grassroots effort gave rise to the Alabama Network of Family Resource Centers, Inc.

The ANFRC is an organization of non-profit centers that provides a wide array of services designed to strengthen and support families in Alabama. The purpose of the ANFRC is to support the development, growth, and continuation of family resource centers by providing technical assistance, training, advocacy, resources, and networking opportunities. In fiscal year 2000, over 15,000 families received intensive services at member sites, in addition to the tens of thousands of hours of services in areas such as parenting, health, employment readiness, and emergency services.

The ANFRC carefully delineated 25 standards that provide oversight of service delivery, fiscal management, and center administration and accountability. Each standard is specific and measurable, and ensures that the highest quality of service is available to those families seeking assistance from a member site. Membership in the ANFRC is based on proven implementation and maintenance of each of the 25 standards.

In May 2000, the Alabama Legislature passed into law the Alabama Network's 25 standards for family resource centers. This major milestone protects the integrity of Alabama's family resource center model and ensures the highest quality of service for Alabama families. (Section 31-8-2, Code of Alabama 1975.)

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SERVICE CAPACITY

1. **The site has been in operation, delivering services to families, for at least the past 15 consecutive months.** Date of initiation of services: _____

Interpretation

Sites need a period of time to establish themselves within a community. ANFRC is most able to help those sites that have initiated services and have at least a 15 month track record of service delivery.

“Delivering services” means that a site’s staff has been hired, trained, and is directly serving consumer families. Fifteen calendar months starts at the time the staff begins delivering services directly to consumers. There will not be gaps in the 15 months; the service must have been continuous for 15 consecutive months.

Evidence

1. Staff meeting minutes
2. Board minutes
3. News articles indicating service delivery
4. Case files documenting dates of contact with families

Indicators

- | | |
|-----------------------------|--------------------|
| • Fully implemented | 15 months |
| • Substantially implemented | 12 months |
| • Partially implemented | 6 months |
| • Not implemented | less than 6 months |

Comments:

2. **Services of the site must be consistent with the Charter and Values Statement of the ANFRC and consist of a variety of services that are community-based, non-sectarian and non-discriminatory. Services will be available to all sectors of the community, with very limited eligibility requirements for participation. Services will target prevention-based, comprehensive services to help strengthen families and to allow them to gain greater self-sufficiency. Services shall include, but are not limited to: case management and intake and assessment, parenting education, emergency services and early intervention services.**

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Interpretation

A wide variety of services is needed at a FRC site to ensure comprehensive assessment of multiple family members' needs. ***FRC sites are not single-service sites nor do they limit services to a specific population.*** ANFRC sites have open eligibility and multiple, on-site services that include, at a minimum: case management, intake and assessment, parenting education, emergency services and early intervention services.

"Community-based" indicates broad support and networking among community resources with input by members of the community, including consumers, regarding decision-making and planning. This is reflected in the Board of Director/Advisory Council membership, number of networked agencies, and the process of identifying community needs. This also indicates an on-going dialogue between the site staff and consumers so that services are actually consumer driven.

"Non-Sectarian" indicates that the site is not affiliated with a specific belief system or faith that excludes others who do not embrace the specific dogma. Sites should not have faith attendance or belief requirements for service provision. Religious orientation should not be represented on forms, in documentation (unless freely provided by the consumer), or marketing materials. Faith beliefs that limit services in any manner should not be evident or practiced.

"Non-discriminatory" indicates that services are available without regard to race, religion, creed, sexual orientation, age, economic status, gender or any other trait or quality that can be used to exclude. Sites should demonstrate open eligibility to a targeted geographical area. This should be evident in marketing materials, procedures and policies. Some projects within the site may target a specific population, such as home-visitation for families with young children, or teen-parent services, but the overall site's orientation should demonstrate open eligibility.

"Services should be prevention-based, comprehensive and target greater self-sufficiency" indicates that proactive service delivery highlights empowering families with the skills they need to access and utilize needed services and resources. Services should focus on the prevention of problems. A broad array of services should be offered on-site. These services should address multiple members of families.

Services must include:

Case Management

This will involve a case file for each family, documentation of on-going contact, goal identification, documented goal ratings by families, assignment of a staff persons to oversee services with the family and adherence to written procedures for case openings, case assignment, service delivery and case closure.

Intake and Assessment

There should be a system in place that allows a family to express their strengths and needs and for the site to share ways in which the family can receive services through the site. Though accomplished in different ways at different sites, this process should be family centered, confidential and documented. Documentation of this can include intake forms, case file documentation, procedures manuals and staff training manuals.

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Parenting Education

This indicates training, either in group and individual format that provides parents with the information they need to provide the nurturing care needed by their children. Evidence may include parenting sessions, in-home visitation, life skills classes, individual consultation by a parenting expert, a family hot line or warm line, written resource materials that supplement in-person education, "Baby Think It Over" dolls and curriculum and program brochures/flyers. Written resources without a training curriculum do not satisfy this service requirement.

Emergency Services

Services should include access to emergency resources related to food, clothing and shelter. Other emergency services such as counseling may be offered. In most cases there should be on-site emergency service, but a well defined referral system to community agencies providing these services is acceptable.

Early Intervention Services

These services may include in-home visitation, developmental screenings, on-site child care, collaboration with screening and testing agencies and programs and written education materials.

Evidence

1. A written mission statement consistent with the Charter and Values Statement of the ANFRC.
2. Forms are family-friendly and the least invasive as possible.
3. Case files are accurate and complete (e.g. release forms, demographics, case notes, evidence of file supervision, etc.)
4. Policy and Program Procedural Manuals are consistent with the noted qualities and outcomes.
5. Board/Advisory Council represent the community and the consumers.
6. Sign-in sheets and meeting minutes indicate focus group participation and community needs assessments.
7. Job descriptions and Policy/Procedural Manuals describe case management services.
8. Internal and external release forms demonstrate collateral contacts are present in consumers' files.
9. Case staffing and case narratives reflect quality case management services.
10. Case files indicate thorough case notes, referral forms, releases of information and other documentation that basic needs are met.
11. Case records and sign-in sheets and /or attendance logs indicate that comprehensive services are available on-site or through referral to other appropriate agencies.
12. Invitations, minutes or sign-in sheets indicate participation in or hosting of interagency groups.
13. FRC staff, management, Board/Advisory Council and consumers describe their interaction with the FRC in positive terms consistent with the Charter and Values of the ANFRC. Conducting Consumer Satisfaction Surveys, conducted semi-annually, provide support evidence.

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Indicators

- | | |
|-----------------------------|----------------------|
| • Fully implemented | All evidence present |
| • Substantially implemented | 10 of 13 present |
| • Partially implemented | 7 of 13 present |
| • Not implemented | 6 or less present |

Comments:

3. Case management is an integral part of the family resource center model. The site must have as evidence formal written family files that contain written releases of information, comprehensive, signed case notes, identified family strengths, family goals and evaluation of those goals by families.

Interpretation

Formal written family files are needed to provide consistently high quality of service to families and for the documentation of demographic information and data gathering for project impact. Files must follow acceptable confidentiality and documentation practices. Goal setting and ratings by families are an important component of the services of ANFRC sites.

Evidence

1. Established procedures for maintaining written case files for all families involved with case management services;
2. Written releases of information that are not generic releases but specifically name the agency or individual, and has a time line or end date for the release;
3. Comprehensive, up-to-date, signed case notes;
4. Family Strengths identified;
5. Family goals are established;
6. Family goals evaluated by the family at least on a quarterly basis.

Indicators

- | | |
|-----------------------------|----------------------|
| • Fully implemented | All evidence present |
| • Substantially implemented | 5 present |
| • Partially implemented | 4 present |
| • Not implemented | less than 4 present |

Comments:

MEMBERSHIP STANDARDS

4. The site shall demonstrate service capacity through location of the site in an accessible, safe place for families. Additionally, the site shall be welcoming and family-friendly and adequate to meet the mission of the ANFRC.

Interpretation

“Accessible” indicates adherence to ADA standards including ramps or other means of access to the interior of the building, bathrooms, doorways, and hallways that accommodate wheelchairs. Handicapped parking spaces, signing and telephone services for the deaf are encouraged as are services to accommodate non-English speaking consumers.

“Accessible” also indicates the area of the community in which the site is located. Is the site served by mass transit, in walking distance to a significant population, close to other services that are used frequently by consumers. The ability of the consumer to easily access a person at the site is important. Overuse of answering machines or other devices and procedures that depersonalize a family’s contact with staff people is discouraged.

“Safe and welcoming” indicates that the site is perceived as a safe location by consumers, has well-lighted, adequate parking, has a sign, is decorated in a family-friendly fashion, has materials available to families that are reflective of the mission and are culturally sensitive, has restroom facilities open to families, has a diaper changing area and toys for children.

Evidence

1. The area surrounding the FRC site is one populated with families in need of services.
2. The FRC is within walking distance or accessible by public transportation for families in need of service.
3. The FRC has capabilities of providing services in isolated areas of the county/community by physically taking services to families
4. The FRC is located in a relatively safe area of the county/community that is perceived as accessible by most segments of the population.
5. The FRC meets ADA standards.
6. The FRC provides access to services for English and non-English speaking consumers including, where appropriate, signing and telephone services for the deaf.

Indicators

- | | |
|-----------------------------|----------------------|
| • Fully implemented | All evidence present |
| • Substantially implemented | 4 of 6 present |
| • Partially implemented | 3 of 6 present |
| • Not implemented | Less than 3 present |

Comments:

MEMBERSHIP STANDARDS

5. The site shall have in place adequate staff and other resources to carry out the ANFRC mission.

Interpretation

“Adequate staff” indicates that the site has the number of staff needed to fulfill its mission in a family-responsive, accountable manner. The number of staff is determined by the services offered at the site. Staffing must include the services listed in standard #2, though other services may be offered through on-site collaboration with other agencies.

For example, most sites will have at least a Program Director, case manager, support staff person and parenting educator.

Evidence

1. Daily logs, family service sheets or computer printouts of case lists by assigned staff are maintained.
2. Caseloads document adherence to appropriate caseload policies and procedures established by the center.
3. The Policy and Procedures Manual addresses caseload size and the process to address under/over utilization.
4. Written approvals for any exceptions to the caseload policy are maintained.

Indicators

- | | |
|-----------------------------|----------------------|
| • Fully implemented | All evidence present |
| • Substantially implemented | 3 out of 4 present |
| • Partially implemented | 2 out of 4 present |
| • Not implemented | 1 or less present |

Comments:

MEMBERSHIP STANDARDS

- 6. Staff at the site shall have the minimum necessary credentials for their position. Job descriptions for each staff person shall be in writing, stating the minimum requirements for the position, and personnel files shall contain documentation regarding the person’s ability to perform the job. Each staff member shall have written confirmation of no indicated CAN reports as evidenced by a CAN clearance from Alabama DHR. Annual performance reviews shall be documented for each staff member.**

Interpretation

The selection and on-going evaluation of personnel is an important function of each ANFRC site. Personnel should possess the skills to perform their assigned functions and possess the characteristics of a healthy service provider including no indications of child abuse/neglect of any manner.

Evidence

1. Written job descriptions and resumes on file for all staff positions.
2. Personnel files on all staff that include copies of CA/N reports indicating no previous reports, coverage with personal automobile insurance (as needed), ABI/FBI clearance and other pertinent background checks..
3. Written annual staff evaluations should be evident that are signed and dated by the employee and the reviewing individual(s).
4. A written Policy and Procedures Manual with personnel sections as described above and evidence in personnel files of adherence to policies
5. Signed statements from employees that they have read and understand this section
6. Written documentation in personnel file that employee meets the minimum qualifications for the position as established by the Board of Directors. (i.e. Director has Master’s degree in human services field; Social Worker has Bachelor’s degree in social work and/or licenses (LCSW); Counselor has Master’s degree and/or appropriate Board certification or licensure, etc.)

Indicators

- | | |
|-----------------------------|--------------------------------|
| • Fully Implemented | All evidence present |
| • Substantially Implemented | 4 of 6 of files have evidences |
| • Partially Implemented | 3 of 6 of files have evidences |
| • Not Implemented | less than 3 have evidences |

Comments:

MEMBERSHIP STANDARDS

7. Staff shall be covered under professional liability insurance coverage. (This standard is considered as an “absolute” along with standards 8, 12, and 16. If you can not meet this standard your site is not ready to be a family resource center and should not continue the application process until all of these standards can be met.).

Interpretation

Consistent with quality service agencies, all ANFRC sites will have a professional insurance policy to cover staff.

Evidence

1. Copy of professional liability insurance coverage for all staff members.

Indicators

- Fully Implemented Evidence of adequate coverage for all staff

Comments:

8. Sites offering transportation to consumers shall have written evidence of appropriate automobile insurance. (This standard is considered as an “absolute” along with standards 7, 12, and 16. If you can not meet this standard your site is not ready to be a family resource center and should not continue the application process until all of these standards can be met.).

Interpretation

Transportation continues to be a major challenge for many consumers seeking services through a FRC. In some cases, sites offer transportation services to address this need.

The ANFRC encourages sites to strictly limit the use of private vehicles in the transportation of consumers due to the liability issues this arrangement creates. The use of public transportation and/or formal transportation arrangements such as those through use of a site van or bus, and contracts with transportation providers is considered safer options for sites. If a site uses private vehicles, concentrated attention to the adherence to standardized site procedures for this practice are strongly encouraged.

If the site offers any form of transportation to consumers (private vehicles, bus, or other), then the site should maintain transportation insurance coverage. The best form of protection is agency-provided insurance. Documentation of personal automobile insurance coverage by all transporting drivers utilizing private vehicles may be considered adequate coverage, though agency coverage is encouraged.

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Evidence

1. A written transportation policy in the Policy and Procedures Manual that is consistently executed
2. Signed statements from employees stating that they have read and understood transportation policy
3. A copy of the Center's insurance policy, if applicable
4. A current copy of the driver's insurance policy (adequate insurance coverage required)
5. A Current copy of driver's license for any staff that transport consumers

Indicators

- | | |
|-----------------------------|-----------------------|
| • Fully Implemented | All evidences present |
| • Substantially Implemented | 4 out of 5 evidences |
| • Partially Implemented | 3 out of 5 evidences |
| • Not Implemented | Less than 3 evidences |

Comments:

9. Sites shall provide evidence of opportunity for staff professional development.

Interpretation

“Professional development” includes conferences, seminars, and in-service training related to the specific tasks that are performed by the individual staff members. Attendances at meetings that are more informal in nature are not deemed as valid as specific curriculum-based training events unless training is a part of the planned meeting.

Training is an important component of the delivery of quality services. The site should be able to provide evidence that staff members who provide or supervise direct services are offered and have taken part in professional skill development opportunities. Notation of training provided is encouraged to be placed in appropriate personnel files. Sites are encouraged to provide training for clerical and support personnel as needed.

Evidences

1. Documentation of *actual* attendance at the minimum hours required by his/her professional accrediting/licensing body, or a minimum of 15 hours, of professional development activities by each *full-time* employee responsible for direct service delivery each *fiscal* year (*or proportional number of hours for part-time employees*)

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Indicators

- | | |
|-----------------------------|-------------------------------|
| • Fully Implemented | All staff have required hours |
| • Substantially Implemented | 85% have required hours |
| • Partially Implemented | 75% have required hours |
| • Not Implemented | less than 75% have hours |

Comments:

10. Sites shall have demonstrated evidence of the opportunity for staff input regarding practices, services, and procedures regarding the site.

Interpretation

An important part of an ANFRC site's operation is on-going dialogue between field staff and site management positions. Through this dialogue, important changes and amendments can be made to the site's operation that may increase the site's ability to meet the needs of consumers.

"Staff input" indicates the opportunities staff members have to share ideas and thoughts regarding the day-to-day functioning of the site and the future direction that is being identified.

Evidence

1. Staff meetings
2. Individual staff conferences
3. Staff suggestion boxes or other opportunities to provide written input as with new grants, etc.
4. Planning committees on which staff serve, and regular opportunities to discuss programs and future directions

Indicators

- | | |
|-----------------------------|-------------------------------|
| • Fully Implemented | All evidences present |
| • Substantially Implemented | 3 out of 4 evidences present |
| • Partially Implemented | 2 out of 4 evidences present |
| • Not Implemented | less than 2 evidences present |

Comments:

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11. The site shall have a clearly defined mission statement consistent with the mission of ANFRC.

Interpretation

The service mission of ANFRC is to protect children and to strengthen and support families through comprehensive services. Each site of the ANFRC must adopt this general mission within their own specific mission statement. Additional mission directives can be included in a site's mission statement as long as they do not negate or adversely affect the site's ability to achieve the mission statement and standards of the ANFRC.

The site's mission statement should indicate a broad range of services to strengthen and support families. Mission statements that limit populations or eligibility specify limited services, and those that in any way contradict any of the mission ideals of ANFRC are not acceptable.

Evidence

A written mission statement indicating the following philosophy and characteristics:

1. Community-based and accessible
2. Prevention-based (i.e. child abuse/neglect, ATOD, health, etc.)
3. Individualized and goal-directed services
4. Strengths-based

Indicators

- | | |
|-----------------------------|-------------------------------|
| • Fully Implemented | All evidences present |
| • Substantially Implemented | 3 out of 4 evidences present |
| • Partially Implemented | 2 out of 4 evidences present |
| • Not Implemented | less than 2 evidences present |

Comments:

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FISCAL CAPACITY

12. The site must follow acceptable accounting practices and shall have a completed, written, independent accounting audit for all years of operation, including the most recent past fiscal year. When required, the site will have a “single audit” performed. The audit must not indicate any significant discrepancies or questions regarding fiscal capacity. (This standard is considered as an “absolute” along with standards 7, 8, and 16. If you can not meet this standard your site is not ready to be a family resource center and should not continue the application process until all of these standards can be met.)

Interpretation

Fiscal management that provides accountability for all monies is an important responsibility of all ANFRC sites.

“Acceptable accounting practices” are those indicated by an accounting firm to be such and those routinely used by similar agencies to conduct financial business in an accountable manner. This includes hand-done or computer generated accounting reports, collection of invoices and receipts, and accountability between revenue and expenses.

“Written independent audit” indicates that a firm is hired to oversee the accounting books of the site to determine any discrepancies in expenses and revenue statements and to determine that funds are expended consistent with funding mandates. The audit must not indicate any discrepancies or inconsistencies that cannot be adequately and appropriately addressed by the site to the satisfaction of the auditor and/or Board of the ANFRC. Attach a copy of the most recent Independent Audit Report including the Letter of Opinion or Disclaimer of Opinion and a copy of the most recent IRS Form 990. Any inconsistencies must be addressed in writing to the ANFRC Board for review prior to consideration for membership. Additional evidence including contact with the auditing firm may be requested by the ANFRC.

Evidence

1. An actual copy of the most recently completed audit including Letter of Opinion or Disclaimer of Opinion.
2. For sites required to complete a single audit, a copy of the audit with verifying letter is evidence. Copies of the three previous years’ audits, or up to three years if the site is less than three years old, should be viewed for statements of acceptable site fiscal management by the auditor.
3. Copy of the most recent IRS Form 990.

Note: Most agencies run at least 6-8 months behind in having the most recent audit completed. This is to be expected. In no case will the audit be more that 10 months behind. If audits are missing, incomplete, or indicate discrepancies, the ANFRC Board will determine the necessary steps for the site to take to achieve a satisfactory standard rating. Membership status will be determined upon receipt of an unqualified audit opinion.

MEMBERSHIP STANDARDS

Indicators

- | | |
|-----------------------------|---|
| • Fully implemented | Recent audit with no material weaknesses |
| • Substantially implemented | Recent audit with minor findings |
| • Partially implemented | Recent audit with findings |
| • Not implemented | No copy of audit or serious material weaknesses |

Comments:

13. The site will be able to show evidence of fiscal capacity through the attainment, during the previous 12 months, of at least \$20,000.00 cash dollars dedicated to the operation of the center’s services (over and above any FP/SS grant dollars).

Interpretation

The ability of a site to secure cash dollars for operation of the site demonstrates fiscal and service capacity. Cash dollars at or beyond \$20,000.00 must have been secured annually.

Evidence

1. Grant authorization letters
2. Budget categories
3. Receipts
4. Copies of checks

Indicators

- | | |
|-----------------------------|---------------------------------|
| • Fully implemented | \$20,000 cash dollars |
| • Substantially implemented | \$18,000 cash dollars |
| • Partially implemented | Less than \$15,000 cash dollars |
| • Not implemented | Less than \$15,000 cash dollars |

Comments:

MEMBERSHIP STANDARDS

- 14. The site must have demonstrated fiscal capacity by having prepared timely and accurate accounting reports/billing during the previous 12 months. Reports should have received fiscal oversight by the site's Board of Directors and funding agent(s)**

Interpretation

"Timely" indicates that on-going regular, written, accounting reports are prepared. In some cases the site will require monthly accounting reports, in others it may be quarterly. Quarterly financial reports are deemed to be the least frequent reporting that is consistent with ANFRC standards unless there are extenuating circumstances that the ANFRC Board approves. Reports should validate expenditures and revenue.

"Accurate accounting statements" indicate a balance between revenue and expenses complete with invoices, receipts, and a purchase procurement system that is part of the site's procedure manual. This system may involve purchase requests that are signed by the program director, purchase vouchers, or other method that provides oversight on the site's purchases and accurate posting of expenses to the correct budget category.

Evidence

1. Copies of the most recent accounting reports (documents showing the equivalent of profit/loss statement or balance sheets for your accounting software system. One for each of the last 4 quarters)
2. Oversight by the Board as evidenced by board minutes
3. Copies of purchase order vouchers signed by program director
4. Copies of spread sheets indicating a balance between revenue and expenses
5. Written procedures related to procurement.
6. Samples of correct posting of expenses to correct budget category

Indicators

- | | |
|-----------------------------|----------------------|
| • Fully implemented | All evidence present |
| • Substantially implemented | 4 of 6 present |
| • Partially implemented | 3 of 6 present |
| • Not implemented | less than 3 present |

Comments:

MEMBERSHIP STANDARDS

15. The site must have a written annual budget for the current and all past fiscal years of operation.

Interpretation

A written annual budget outlines the planned revenues and expenditures for the site and provides the basis upon which financial capacity is determined. A written annual budget for the current and most recent past years should be reviewed. Past years should include up to the most recent three past fiscal years, or up to three if the site is less than 3 years old. No gaps in the years should be evident.

Evidence

1. Copy of written annual budget for current year
2. Copy of written annual budget up to 3 past fiscal years, or if open less than three years, for each year of operation (in some cases this will not be possible if they have only been open for 15 months)
3. Comparison of actual vs projected budget should be on hand for years completed
4. No gaps in budget years should be evident

Indicators

- | | |
|-----------------------------|--------------------------------|
| • Fully implemented | All evidence is present |
| • Substantially implemented | 3 out of 4 evidence is present |
| • Partially implemented | 2 of 4 evidence is present |
| • Not implemented | 1 or less evidence is present |

Comments:

16. The site shall have written evidence of being a 501(c)3 organization or being a legitimate program division of such an agency.

Interpretation

Each site of the ANFRC must be a 501(c)3 agency or a program division of such an agency. No exceptions are made without ANFRC Board approval. Attaining the 501(c)3 final determination can be a lengthy process. The site must have, at minimum, the letter *from the IRS* indicating that no foreseen problems with their application have been determined. The actual 501(c)3 letter of final determination is the best documentation for this standard and a copy should be made available to the ANFRC when secured. **(This standard is considered as an “absolute” along with standards 7, 8, and 12. If you can not meet this standard your site is not ready to be a family resource center and should not continue the application process until all of these standards can be met.)**

MEMBERSHIP STANDARDS

Evidence

1. Copy of final IRS determination letter

Indicators

- | | |
|-----------------------------|-----------------------------------|
| • Fully implemented | IRS final determination letter |
| • Substantially implemented | IRS initial determination letter |
| • Partially implemented | IRS initial determination letter |
| • Not implemented | Application for 501 (c) 3 status |

Comments:

MANAGEMENT AND ACCOUNTABILITY CAPACITY

17. For current members of ANFRC, an on-site peer review must have been conducted at the site within the past 24 months. The peer review results must not indicate any significant concerns in regards to confidentiality, record keeping, or service delivery that would cause the site to fail to meet the standards or the mission statement of the ANFRC. (Not applicable for sites not currently ANFRC members.)

NOTE: For sites applying that are not current members, a peer review must take place after review of application and before final determination of membership status.

Interpretation

Peer Reviews provide an important measure of a site's capacity to meet and maintain the standards of the ANFRC.

"A peer review" is a group of two or more individuals from similar programs, approved by the ANFRC Board, conducting an on-site visit to review the records and services of the site. The peer review team must produce a written report that identifies strengths and needs of the site in the major categories of: service delivery, personnel, collaboration, documentation, management and oversight, fiscal capacity, and program impact. The peer review format and process is determined by the Board of the ANFRC.

"Significant concerns" indicates that the peer review team made a strong recommendation for change in any major area including confidentiality, record keeping or service delivery.

MEMBERSHIP STANDARDS

In the case of any noted concerns in these areas, the site must prepare a written response that indicates the action that was planned to amend the concern in the present and future. This report will also include specific measurable action that *has been taken* and the site must provide evidence that such action has taken place and remedied the concern. The ANFRC Board will review the submitted plan and the results to determine that appropriate action has remedied the situation. The submitted plan without the resulting correction is not acceptable.

Evidence

1. The peer review summary report.
2. Corrective action plan
3. Results of corrective action
4. Plans for participating in future peer reviews (for sites that have no peer review process currently in place).

Indicators

- | | |
|---|---|
| <ul style="list-style-type: none"> • Fully implemented | Peer review summary with no significant corrective action indicated |
| <ul style="list-style-type: none"> • Substantially implemented | Peer review summary with corrective action plan and results of corrective action in place |
| <ul style="list-style-type: none"> • Partially implemented | Plans for participating in future peer review |
| <ul style="list-style-type: none"> • Not implemented | No peer review or plans for peer review |

Comments:

18. The site must collect and assess data for evaluation purposes. This data should include, at minimum, the number of families served by service category, number of services by service category, demographics of families served in case management, and goal-ratings completed by families.

Evidence

Written evidence of collection and assessment of service data for the past 12 months that includes:

1. Number of families served in each service category (e.g. case management, parent education, adult education, etc.)
2. Number of hours of service in each category
3. Demographics of families served
4. Family goal ratings
5. Evaluation plan for each service category

MEMBERSHIP STANDARDS

6. Assessment of established goals at least yearly
7. Site visit reports from grant funding agencies indicating successful evaluation methods and outcomes.

Site visit or independent program evaluation reports, documenting serious deficiencies must be accompanied by a copy of the site's corrective action plan that addresses and ameliorate this deficiency. Membership status will be determined upon receipt of documentation that the deficiency(ies) has been addressed, corrective action has been implemented, and program integrity has been restored and sustained. Additional evidence including contact with the site visit agency and/or independent evaluator maybe requested by the ANFRC.

Indicators

- | | |
|-----------------------------|----------------------|
| • Fully implemented | All evidence present |
| • Substantially implemented | 5 of 7 present |
| • Partially implemented | 3 of 7 present |
| • Not implemented | less than 3 present |

Comments:

- 19. Sites must have prepared a written end-of-the-year program evaluation report for all years of operation that summarizes services in relation to the site's mission statement and objectives.**

Interpretation

"End of year" refers to end of fiscal year, September 30. Evaluation should indicate the site's goals, objectives, and mission and how the site moved toward attaining those goals during the reporting year. End-of-the-year reports are valuable to the ANFRC as they will be used to prepare impact reports for the entire ANFRC.

EOY reports should include data and assessment and must represent the quality standards and mission to the ANFRC. These reports should include measurable indices (e.g., the number served in case management, the drop in CAN reports among families utilizing services). The data must be easily retrievable from the report and clearly stated as to what the data measured. Narrative-only reports without supporting data are not acceptable.

Evidence

1. End of the year written report as defined above

MEMBERSHIP STANDARDS

Indicators

- | | |
|-----------------------------|--|
| • Fully implemented | EOY reports are on file as described above. |
| • Substantially implemented | EOY report available but limited scope of analysis |
| • Partially implemented | EOY report available with no analysis |
| • Not implemented: | EOY report does not exist |

Comments:

20. Sites shall make a consistent effort to be represented at all ANFRC meetings and will attend at least the minimal number of ANFRC meetings required by the ANFRC By-laws for continued membership. Attendance at all FP/SS meetings that offer training is strongly encouraged.

NOTE: Not applicable for sites not currently ANFRC members.

Evidence

1. Site documents registration and has agendas, handouts from meetings.
2. Sign-in Sheets at meetings document attendance

Indicators

- | | |
|-----------------------------|---|
| • Fully Implemented | Meets or exceeds required attendance. |
| • Substantially Implemented | Meets 75% of required attendance. |
| • Partially Implemented | Meets 50%-75% of required attendance. |
| • Not implemented | Meets less than 50% of required attendance. |

Comments:

MEMBERSHIP STANDARDS

21. The site shall have conducted two Consumer Satisfaction Surveys during the past fiscal year, in October and April, and be current in the administering of the twice per year surveys for the current year. The ANFRC will provide the format and collection procedures for the survey of consumers. The summary report for the survey along with copies of the actual completed surveys will be forwarded to the ANFRC by the 15th of the month following completion. The survey results should not indicate a majority of dissatisfied consumers, as determined by their ratings and comments. If a majority of consumers expressed dissatisfaction, the site will provide written evidence that the concerns have been addressed through positive action.

Interpretation

Site administers Consumer Satisfaction Survey twice per year, in April and October. Compiled results and copies of survey forms are sent to ANFRC by 15th of following month. Completed survey forms, with summary, meeting deadline dates are evidence.

The majority of dissatisfied consumers will mean more than 50% of respondents. If a majority express dissatisfaction or if a single serious complaint such as violation of confidentiality or any abuse are stated on the form, the site is required to address the complaint in writing and submit the written explanation with the summary form to the ANFRC and a plan for addressing the issue(s). The plan must be in place for at least one subsequent survey of consumers prior to receiving a satisfactory rating for this standard. The follow-up survey must indicate significant improvement (the majority of respondents-50% or more respond positively) prior to receiving a satisfactory rating for this standard.

If trends of less than quality service are indicated (such as significantly few, <50%, of consumers indicate they have identified goals or needs or that staff meet with them at times that are convenient) the site will address this issue in writing along with a plan that will be implemented to address those concerns. The plan must be in place for at least one subsequent survey of consumers prior to full membership status being conferred. The follow-up survey must indicate significant improvement (the majority-50% or more-respond positively) prior to receiving a satisfactory rating for this standard.

Evidence

1. Consumer Satisfaction Surveys
2. Consumer Satisfaction Survey Report

Indicators

- Fully Implemented Two surveys completed and submitted in timely manner. A majority of consumers are satisfied with services of the Center;
No serious complaints about service provision or treatment by Center Staff.
- Substantially Implemented One survey completed and submitted;
A majority of consumers are satisfied with services of the Center
No serious complaints.
- Partially Implemented One survey completed

MEMBERSHIP STANDARDS

- | | |
|-------------------|--|
| | Majority of consumers are satisfied |
| | Complaint has been assessed and action taken to correct problem. |
| • Not Implemented | No surveys completed or if completed not submitted |
| | Less than 50% of consumers are satisfied with services or staff. |
| | Serious issues not addressed or corrected. |

Comments:

22. The site shall be able to provide evidence that consumers have access to decision-making and project planning regarding services offered at the site. This may include evaluation forms, a consumer advisory council, planning committees, suggestion boxes, attendance at training sessions and membership on Boards.

Evidence

1. Membership rosters of the Board or Councils planning groups and consumers councils that indicate consumer involvement suggestion boxes consumer surveys
2. Consumers may serve on the Board of the site to have input into decision-making and planning.

Indicators

- | | |
|-----------------------------|---|
| • Fully Implemented | Four or more avenues exist for consumers to have input. |
| • Substantially Implemented | Site has evidence of three ways consumers have input. |
| • Partially Implemented | Site has evidence of two ways consumers have input. |
| • Not Implemented | Site has one or fewer ways consumers have input. |

Comments:

MEMBERSHIP STANDARDS

23. The site must have a written procedures manual, written personnel policies and written confidentiality procedures.

Interpretation

Procedures Manual: This manual outlines the processes by which families are served through the Center. It should be detailed enough to serve as a training guide for new staff. The Manual should include for each service the referral process, case assignment, crisis management, case documentation, file maintenance, case closure and procedures for protecting confidentiality. The Document can be used to evaluate the actions of each staff member.

Personnel Policy Manual: Describes the policies under which the site manages employees. Will usually include leave policies, drug-free statements, salary ranges with job descriptions, site policies, CAN reporting, transportation, AIDS statement and other issues that are tied to staffing and management, not delivery of services to consumers. Typically a confidentiality statement is included in this document. There must be documentation in personnel files that staff have received, read and understood the Personnel Policy Manual.

Evidence

1. Written Procedures and Personnel Policy manuals are on site at the Center.
2. Signed and dated statements from staff are on file indicating they have read and understood the policies.
3. A separate confidentiality statement is signed and on file.
4. Site gives evidence of adhering to policies and procedures in the day to day conduct of business.

Indicators

- Fully Implemented Procedures and Personnel Policy Manuals are on site, signed statements are in personnel files to indicate staff have read and understood policies; policies appear to govern the conduct of business at the site.
- Substantially Implemented Both manuals are on site but may need some continued development, statements are signed and in personnel files, site appears to operate by policies in manuals.
- Partially compliant Written manuals are in developmental stages, site needs help in incorporating procedures and policies into manuals, staff have signed confidentiality statements but not statements related to manual reading.
- Not Compliant Manuals are not written, policies and procedures are sometimes written but consolidated into manuals, no statements signed by staff, policies do not govern site operations and procedures.

MEMBERSHIP STANDARDS

Comments:

- 24. The site must have an official Board of Directors and/or Advisory Council and have evidence that this group has convened at least quarterly in the preceding 12 months.**

Interpretation

Each site must have an oversight body that provides input regarding the functions, missions and directions of the site. This oversight adds accountability to the management functions of the site. If a site is independent of a parent or sponsoring agency, then they would have a Board of Directors. If a site is a division of a parent or sponsoring agency, they may come under the auspices of the sponsor's board and usually will have an Advisory Council for the site.

A "meeting" indicates that a sign-in sheet was completed, a meeting was conducted with acceptable rules of order and minutes were produced. In most cases a meeting agenda is prepared. Meeting minutes and sign-in or attendance sheets are acceptable evidence. Meeting agendas without minutes are not acceptable.

Evidence

1. Board/Advisory Council sign-in sheets
2. Board/Advisory Council agenda
3. Board/Advisory Council minutes
4. Board/Advisory Council list of meeting dates

Indicators

- Fully Implemented Board is in place and has had at least quarterly meetings over the past 12 months. Sign-in sheets and minutes of meetings are evident.
- Substantially Implemented Board is in place and has met at least three times over the past year. Sign-in sheets and minutes are available for review.
- Partially Implemented Board has met at least twice in past year. Sign in sheets and minutes are available for review.
- Not Implemented Board is not in place and meeting regularly. No sign in sheets or minutes are available for review for those meetings that did occur.

Comments:

MEMBERSHIP STANDARDS

25. The site will have demonstrated networking capacity by involving at least five community agencies in the on-going operations of its services during the previous 12 months.

Interpretation

One of the cornerstones of FRC's is the ability of such sites to connect agencies together to help strengthen families through comprehensive service delivery. A broad base of collaboration in the community is essential. This collaboration should involve a range of others and usually will include other social service agencies, churches, public agencies, schools, funders, natural leaders, political leaders, and other representatives of the people and services of the community.

Evidence

1. A written list of collaborators
2. Meeting agendas
3. Sign-in sheets
4. Meeting minutes
5. Memorandums of Agreement/ Memorandums of Understanding
6. Membership in collaborative partnerships (state/local organizations)
7. Media coverage

Indicators

- Fully implemented Site demonstrates evidence of collaboration with 5 partner agencies
- Substantially Implemented Site demonstrates evidence of collaborations with 4 partner agencies
- Partially Implemented Site has evidence of collaboration with at least 3 partner agencies.
- Not Implemented Site has evidence of collaboration with less than 3 partner agencies.

Comments:
