

TEACHING-FAMILY ASSOCIATION

Completing the Triennial Application for Certification

[This first page is an overview of the process; specific instructions for completing the application begin on page two.]

OVERVIEW & TIMELINES

1. The Agency downloads the Triennial Application for Agency Certification materials from the TFA website (www.teaching-family.org) by **November 1**.
2. The Agency Director and the Primary Reviewer set the dates for the on-site review visit. The review should occur **prior to March 1**. The on-site review typically takes at least three days. (Review teams are confirmed at the Annual TFA conference; the visit can be scheduled at that time.)
3. The Agency organizes and completes its Agency Consumer Checklist and Practitioner Checklist by **November 15**. Upon completion, the Agency sends out the Agency Consumer Satisfaction and Practitioner Satisfaction Surveys (**checklists and surveys are available on the website**). Begin the data collecting process. As surveys are returned, compile them into the report forms (i.e., the **Agency Consumer Report** and the **Practitioner Consumer Report** forms are available on the TFA website).
4. The Agency works to complete the Triennial Application for Certification (Instructions for how to complete the application begin on the next page) and submits copies to the Review Team and the Association Office by **February 1** (one copy for each review team member including any trainees). Upon receipt, the reviewers begin to familiarize themselves with the agency's application materials, making sure all materials are included. If not, the primary reviewer informs the agency to have the missing materials ready upon arrival to the site.
5. The review team completes the on-site portion of the review in **February**. An on-site visit includes visiting and observing all TFM programs; interviewing Board Members/Administrators; interviewing staff, practitioners and clients; reviewing documentation, etc. (See Site Reviewers Questionnaire and Prompt Sheets for additional information.)
6. By **mid-March** (or at least two weeks prior to the C&E mid-year meeting), the Review Team submits the written report (i.e., using the Triennial Certification Review Report form found on the website) to the Agency Director and TFA Office (reviewers also keep a copy). The report summarizes the review team's findings and includes a recommendation regarding certification. The Primary Reviewer brings three (3) copies of the report to the Mid-year Certification Committee Meeting.
7. At TFA's mid-year meeting **in April**, the Certification Committee reviews the report, considers the review team's recommendations, and votes whether or not to forward that recommendation to the Board of Directors. The Board of Directors renders the final decision on certification.

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HOW TO COMPLETE THE TRIENNIAL APPLICATION

THESE INSTRUCTIONS DESCRIBE THE STEPS INVOLVED IN COMPLETING THE TRIENNIAL APPLICATION FOR TFA CERTIFICATION. ONCE ALL THE VARIOUS MATERIALS AND COMPONENTS HAVE BEEN COMPLETED, THEY WILL NEED TO BE ORGANIZED AND COMPILED IN 3-RING BINDERS (ONE FOR EACH MEMBER OF THE REVIEW TEAM).

To begin, download the Triennial Application from the TFA website. **Open the document in Microsoft Word**. On page 2 of the application materials, you will find a checklist that lists all the items needed in the application. The instructions below correspond with the checklist. **Easy-to-use computerized forms are provided within the application for items marked with an asterisk (*)**. Some of those forms can be substituted or accompanied by agency-generated forms or other optional documentation as instructions indicate.

SECTION ONE OF APPLICATION:

Introductory Materials

Item 1 – *TRIENNIAL APPLICATION COVER SHEET.

After downloading the application materials document, you will find the Triennial application cover sheet on the first page. Placing your cursor in the blank gray fields provided, enter your Agency's name, the Agency Director's name, the year your agency was first certified, the name(s) of the person(s) responsible for organizing the report, as well as the name and phone number of the person to be contacted should questions arise regarding the report. Also, indicate if you are applying for sponsor member agency status or member agency status.

Item 2 – *APPLICATION CHECKLIST

While this checklist serves as a resource to you throughout the application process, do not fill it out until you are in the final stages of putting your application together. At that time, use the checklist to ensure all materials have been included in your application. Simply enter an X beside each item as you complete and compile it. The checklist will remain page 2 of your application.

Item 3 – *AGENCY RESPONSIBILITIES ASSURANCES AGREEMENT

Simply read the agreement and fill out the few blank fields at the bottom of the form. The agency director signs the form. The TFA office will verify dues payment was made.

SECTION TWO OF APPLICATION:

Agency Overview

Item 4 – *AGENCY DIRECTOR’S NARRATIVE

The Agency Director’s Narrative is a written summary of significant agency activities that occurred throughout the development process with focus on progress during the current review year. Program growth, staffing changes, affiliations or disaffiliations, reorganizations, outcomes data, special achievements, special challenges, significant changes in Administration, Training, Consultation, or Evaluation Services at the agency are examples of some of the topics that might be included. Any information should be included that will be useful in the interpretation of data gathered in the Certification Review process. The length of the agency director’s narrative can be as brief as a couple pages or can be as extensive as the director chooses. You may enter the text directly into the application form or copy and paste it from another Microsoft Word document. The gray text field provided within the application will expand to accommodate the length of your report.

Item 5 – REVIEWERS REPORT SUMMARY FROM LAST ON-SITE REVIEW

Retrieve your electronic version of your previous on-site review, highlight the summary section at the end, and paste into this space. If you received any recommendations from your last annual review, include those also.

NOTE: In the first year of using the new electronic application tool, you may not have the ability to copy and paste this report summary from the original document. If you do not, you will need to find another way to include the summary (e.g., attach a Xerox copy, re-type the complete summary into the application form, etc.).

Item 6 – *AGENCY DESCRIPTION

The Agency Description was a part of your Developing Member Registration so if you saved it and can retrieve it, you can simply make edits as needed and paste it into the current report (if it’s a Microsoft Word document). Or, you can enter the text directly into the text field provided in the application. Like the above, the field will expand to the length of your text. The written narrative should include: a brief history or overview of your agency, its mission statement, the size of the agency and how the Teaching-Family Model fits into the agency as a whole (e.g. number of programs, homes, etc. and location; unique geographical, political, legal circumstances; population(s) served; number of clients served; how funded (percent public/private); which Teaching-Family Association services your agency provides to your homes/programs; how provision of services is divided among staff (Training Department versus all staff train, etc.); and other information as deemed necessary.

Item 7 – AGENCY ORGANIZATIONAL CHART

Create/provide an organizational chart for your agency’s Teaching-Family Model programs. Include everyone who is responsible in any way for providing Teaching-Family Model services.

Item 8 – *AGENCY STAFF ROSTERS

Using the “Agency Staff Roster” forms provided in the application materials, enter the names, positions, date hired, and date resigned (if during review year) of staff who provide any of the integrated services. Also, place an X in the appropriate box to indicate which TFM services each person provided.

Item 9 – *AGENCY STAFF RESUME FORMS

Using the “Agency Staff Resume” forms provided, fill out the requested information for each TFA staff member who was hired since your last on-site review. Additional staff resumes forms other than the one provided within the application are available on the website (see additional forms and resources). Simply enter the requested information by placing your cursor in the gray, text fields. In addition to the provided electronic forms, you are welcome to include additional expanded resumes or information regarding related experience and training if you wish.

Item 10 – *PROGRAM ROSTER

Using the “Program Roster” form provided, list programs which incorporate all of the Teaching-Family Model Integrated Services. Indicate the name, location, type of program (i.e., foster care, group home, home based, school, etc.), population served (i.e., juvenile offenders, dependent children, autistic, developmentally disabled adults, etc.), and the program’s capacity. Fill out the columns with the requested information.

Item 11 – *OTHER PROGRAM ROSTER

Using the “Other Program Roster” form provided, enter the names and locations of any agency programs that are not Teaching-Family Model and are not listed on the TFM Program Roster. In the spaces provided on the form, indicate which (if any) TFM services are provided to these programs.

SECTION THREE OF APPLICATION:

Training Services Documentation

Item 12 – *PRE-SERVICE TRAINING REPORT

*PRE-SERVICE TRAINING SCHEDULE:

Using the “Pre-Service Training” table provided in the Report of Training Services section of the application materials, enter the dates pre-service training occurred during the review year and the number of trainees in attendance. Check "yes" or "no" to indicate whether or not staff and practitioners were trained prior to being responsible for client services. If not, briefly describe the circumstances. (If you need to use separate forms for each program, additional forms are available on the website)

*PRE-SERVICE TRAINING TOPICS/OUTLINE:

Using the Pre-Service Training Topics/Schedule form provided, list the topics covered and time allotted for each session. **Or**, attach an actual pre-service training outline/schedule.

Item 13 – *IN-SERVICE TRAINING REPORT

Using the “In-Service Training” form, enter the dates and topics of in-service trainings offered during the review year. **Or**, attach other documentation showing in-service trainings.

SECTION FOUR OF APPLICATION

Consultation and Evaluation Services Documentation

Item 14 – *REPORT OF CONSULTATION SERVICES

Using the forms provided, (use a separate form for each TFA program), list the type of consultation services provided (e.g., observation, treatment planning, on-call availability, etc.) in the first column. In the columns to the right, state how often that service is to be provided (e.g., twice a month, 24 hours per day, etc.). The form is separated into time periods to allow for differences based on a practitioner’s tenure and level of expertise. Also, check one of the boxes provided to indicate whether the service delivery plan was met. If not, use the space below to explain the circumstances. You may also attach additional data that supports your agency’s consultation delivery plan.

Item 15 – *EVALUATION POLICIES AND PROCEDURES

In the text field provided in the application form, record your agency’s policies and procedures regarding evaluation services (i.e., policies that address evaluation timelines, pre-evaluation training, consumer groups, polling return rates, the rating scale, the use of the median rule, etc.).

Item 16 – *LIST OF PRACTITIONER EVALUATIONS

Using the form provided, enter the names of all practitioners who were evaluated during the review year. If practitioners were evaluated as teams or married couples, they can be entered on one line as one evaluation. When applicable, under program, enter the specific name of the program (e.g., Windy Hill Group Home). If there’s not a specific name, simply enter in the TFM program name (e.g., Home Remedies, Adoption Plus, etc.). Under evaluation type, state whatever applies (e.g., Triennial, Annual, or Post-Annual, etc.). Under outcome, enter “certified,” “not certified” or other applicable terminology to indicate the outcome. Also, if the evaluation occurred within the approximate 12-month period, put “YES” as the answer to the timeline question. If the evaluation occurred outside of this timeline, state why (e.g., “program temporarily closed,” “unexpected surgery,” etc.).

Item 17 – SAMPLE OF PRACTITIONER EVALUATIONS FOR CERTIFICATION

For each program, include a complete copy of a practitioner evaluation conducted during the report year. In addition, include the distribution of scores page from other certification evaluations that occurred during the review year.

SECTION FIVE OF APPLICATION Satisfaction of Services Documentation

Item 18 – *AGENCY CONSUMER SATISFACTION REPORT

Include a copy of your agency’s completed Agency Consumer Satisfaction data. The Consumer report form is provided on the website. The report includes a summary of scores chart (showing averages) for each category. Make sure the chart is fully visible on the screen; then double-click on the chart with the left mouse button to activate the chart. You only need to enter the total number of instances of each score (i.e., 4.00, 3.00, 2.00, 1.00, IIR). For example, if five respondents gave scores of 4.00 on Effectiveness, you would record a ‘5’ under the Extremely Satisfied column along the Effectiveness row. The average will automatically calculate as you enter scores. All comments should be entered into this report along with the scores.

Item 19 – *AGENCY PRACTITIONER SATISFACTION REPORT

Include a copy of your agency's completed Agency Practitioner Satisfaction data. The Practitioner report form is provided on the website. The report includes a summary of scores chart (showing averages) for each category. Make sure the chart is fully visible on the screen; then double-click on the chart with the left mouse button to activate the chart. You only need to enter the total number of instances of each score (i.e., 4.00, 3.00, 2.00, 1.00, IIR). For example, if seven respondents gave scores of 3.00 on Training, you would record a '7' under the Satisfied column along the Training row. The average will automatically calculate as you enter scores. All comments should be entered into this report along with the scores.

SECTION SIX OF APPLICATION

Ethical Practices Documentation

Item 20 – *POLICIES AND PROCEDURES FOR ISSUES OF PROFESSIONAL ETHICS AND PROTECTION OF CLIENTS

Complete the form provided. Also, include policies and procedures regarding ethical conduct and complaints, including staff practices policy, grievance policies, policy indicating that services are offered regardless of race, religion, gender, etc.

After completion of the above sections, continue with the following steps:

Step 1: Complete the Triennial Application for Agency Certification Checklist to ensure materials are included and in the order shown on the Checklist. The Checklist should appear as page 2 of the Triennial Application for Agency Certification.

Step 2: Make copies for each reviewer assigned to do your on-site visit. Use 3-ring binders suitable for mailing (include tab indexes to identify and separate each section of the application). Mail or deliver a copy to each reviewer.

You and your primary reviewer may arrange an alternative plan if desired (e.g., sending the materials electronically but then providing prepared notebooks for the reviewers upon their arrival for the on-site visit). In any case, your reviewers will each need a copy of the application. Also, send a copy to the Association Office. Retain the originals for your files.