

# TEACHING-FAMILY ASSOCIATION

## STANDARDS OF SERVICE OF THE TEACHING-FAMILY MODEL

(Revised October, 2004 by TFA)

*Teaching-Family programs offer community or campus-based programs for children, adolescents, or adults in need of life skills. Treatment, based on the Teaching-Family Model, is carried out by skilled practitioners. These Treatment Providers use precise intervention strategies to create opportunities for the teaching, learning, and generalization of a wide variety of skills in natural settings based on the needs of the client population.*

### GOALS

#### Humane

Teaching-Family programs demonstrate compassionate, considerate, respectful, and unconditional positive regard for all clients with no tolerance for abuse or neglect. Integrated systems ensure that clients are treated humanely and agencies adhere to Teaching-Family Associations Standards of Ethical Conduct. Agencies have clear policies, procedures, and systems addressing alleged abuse, neglect and unethical actions by staff and service providers. Staff is trained and has an understanding of client rights and procedures regarding unethical practices.

#### Effective

The services stated by Teaching-Family Association agencies are delivered. Outcomes are observable and measurable. Clients demonstrate progress towards goals by demonstrating an appropriate reduction in the level of services needed. Clients and staff acquire skills necessary to achieve their goals. The quality and stability of agency staff are appropriately maintained to ensure effectiveness. Consumers indicate satisfaction with services provided.

#### Individualized

Services provided by Teaching-Family Association agencies are client-centered, strength-based and directly related to the individual needs of the client. Services are culturally sensitive. Client assessment identifies strengths as well as needs and clients are involved in planning of services. Clients indicate a high level of satisfaction with services.

#### Consumer Satisfaction

Teaching-Family Association agencies provide opportunities for client and consumer input. Clients and consumers express a high degree of satisfaction with services provided. The agencies conduct comprehensive client and consumer polling with a minimum of 50% return from each consumer group achieved. The agencies' quality assurance processes incorporate consumer feedback.

### INTEGRATED SYSTEMS

#### Facilitative Administration

A facilitative administration is one that offers staff opportunities to provide input regarding program components. Teaching-Family Association agencies facilitate and promote system integration by providing necessary tools, training, and support; coordinating and assessing the service delivery system; and developing processes and resources to support and maintain the systems. The agencies have training, consultation and evaluation systems that complement each other. Consumer evaluation processes are in place to assess systems, programs, and staff and service providers. The agencies' leadership, including their governing bodies, participate with other organizations and individuals to: improve services for individuals and families, identify and advocate for needed change, identify gaps in service and work for their elimination, and share resources and expertise where appropriate.

#### Training

Teaching-Family Association agencies provide initial and on-going skill development for all staff; staff are familiar with the Teaching-Family Model. Agencies enable, facilitate, and hold all staff and service providers accountable for implementation of the Teaching Family Model. Agencies provide competency-based training to increase the skill level of all staff and service providers to maintain and improve skill development. Agencies ensure that all staff and service providers attend training prior to being responsible for client services and on a regular basis thereafter. Agencies have clearly defined competency-based training materials and procedures along with qualified trainers on-site. Staff and service providers demonstrate competency in service delivery.

### Consultation/Supervisions

Teaching-Family Association programs incorporate a supportive consultation and supervision component which supports and promotes practitioner skill development, ensures integrity of the Teaching Family Model, and monitors services to clients. Practitioners are satisfied with services and support provided by the Consultant/Supervisor who serves as a liaison/advocate for the practitioner. Consultation and supervision focus on providing effective services to clients by following an effective service delivery plan for monitoring services. Consultants/Supervisors are adequately trained and knowledgeable in Teaching-Family Model goals, systems and elements.

### Evaluation

Evaluation systems of Teaching-Family Association agencies facilitate continuous quality improvement in service and care by assessing the skill of the practitioner and implementation of the Teaching-Family Model. The agencies assess consumer satisfaction to assess quality. They observe, assess, and review practitioner skills and Model implementation. Practitioners are prepared for all evaluation activities and are evaluated on at least an annual basis.

## **ELEMENTS**

### Teaching

Teaching-Family Association programs emphasizes the positive teaching of functional skills and behaviors. Agencies promote a systematic, positive behavioral approach to teaching behavior. Staff and service providers model appropriate skills when teaching clients. Teaching is provided through positive interactions with clients, which typically include praise, specific descriptions of behavior, client-centered rationales, acknowledgment, opportunities for practice, and positive quality components. Staff use appropriate crisis intervention techniques when dealing with aggressive and intensive behavior.

### Self-Determination

Teaching-Family programs give clients as much control over their lives as possible. Clients participate in their own goal setting and receive the least restrictive services necessary for them to achieve their goals. Staff and service providers facilitate the learning of decision-making and problem-solving skills. Staff and service providers facilitate and support client decision-making opportunities. Clients are encouraged to support one another's goals.

### Client Advocacy

Teaching-Family Association programs actively promotes and protects client rights and dignity. The staff educates individuals regarding their rights and opportunities. The staff actively advocates on the behalf of the client. Clients are trained in self-advocacy skills. Practitioners are knowledgeable of community resources for client needs. They are trained in client rights and ethical practice standards. They have knowledge of legal representation and advocacy services and make them known to clients. Programs provide internal grievance procedures for clients.

### Relationships

Teaching-Family Association programs promotes the development of relationships with clients that are maintained through trust, respect, and positive regard within professional boundaries. Staff and service providers utilize warm, caring interaction styles and are sensitive and responsive to client needs especially in times of crisis, illness, and times of need. Clients are encouraged to appropriately express feelings. Family interaction and participation is encouraged.

### Family-Sensitive Approach

Teaching-Family programs recognize the importance of family to the client by promoting and advocating for the client's family. The family or significant individuals are included in the planning and delivery of services.

### Diversity

Teaching-Family programs provide services that are culturally sensitive and competent. Staff is trained in areas relating to diversity, ethnicity, and multi-cultural values. The program environment reflects respect for diversity of the population and the community served. Staff recruitment actively seeks to promote diversity relative to client population. The agency promotes cultural sensitivity and competence. Services are offered regardless of race, religion, gender, etc.

### Participation in the Teaching-Family Association

Each agency encourages participation in the Teaching-Family Association through educating staff at the time of orientation about the history and goals of the Teaching-Family Model and the benefits of membership in the Teaching-Family Association.



*An International Organization*

# TEACHING-FAMILY ASSOCIATION

## STANDARDS OF SERVICE

### INTRODUCTION

The following Standards of Service of the Teaching-Family Association is comprised of five parts:

AA. Definitions

Throughout the Standards, specific terms are used which may require further explanation. This section attempts to define those terms to provide a clearer understanding of their use within the Standards.

BB. Indicators/Sources

Several terms identified as Indicators of Compliance or Sources for Evidence of Compliance can be applied to all standards. These are listed in this section along with definitions regarding their use throughout the Standards.

CC. Goals

Within the Teaching-Family Model there are four goals to which all Certified or Sponsor Agencies to which agencies must adhere. These include programs that are Humane, Effective, Individualized and achieve Consumer Satisfaction.

DD. Integrated Systems

The Teaching-Family Model programs must include training, consultation, evaluation and facilitative administration systems.

EE. Elements

All Teaching-Family Model programs consist of the elements of teaching, self-determination, client advocacy, client relationships, family-sensitive approaches, and diversity.

Each of the previous Standards of Service are further defined by their corresponding Indicators of Compliance. All indicators must be present in a Certified or Sponsor Member Agency of the Teaching-Family Association.

To determine adherence to all Standards of Service and Indicators of Compliance, several sources may be reviewed. These are identified in the boxes following each Standard's Indicators. These Sources for Evidence of Compliance are "possible" areas where information regarding compliance may be found. They are not required. Those completing or reviewing annual review materials may look to these sources to obtain information related to the specific Standard or Indicator.

# TEACHING-FAMILY ASSOCIATION

## STANDARDS OF SERVICE

### AA. DEFINITIONS

#### AA.1 The Teaching-Family Model

The Teaching-Family Model is a unique approach to human services characterized by clearly defined goals, integrated support systems, and a set of essential elements.

#### AA.2 Client

Any person who receives direct services from the agency. The client may refer to a child, student, family, parent, youth, or other individuals or groups.

#### AA.3 Consumer

Any person who has a stake in the agency. This may include: a provider of resources, accrediting and licensing bodies, an authority over the agency, a paying customer or client. Some examples of consumers are: youth, parents, families, foster parents, support staff, administration, neighbors, school personnel, therapists, referring workers, court workers and judges, and Board of Directors.

#### AA.4 Family

A group of individuals consists of a parent(s), relatives or significant others, and child(ren) as defined by the client.

#### AA.5 Family-Style/Most Natural Environment

Family-Style living includes but is not limited to relaxed environment; physical proximity between practitioners and clients; practitioner is ultimately responsible and has the autonomy with regard to work with the client both inside and outside the environment; practitioner also has decision-making authority and ownership of the work as it relates to the Teaching-Family Model implementation with clients.

The definition of family-style within the confines of the Teaching-Family Model means married couples are encouraged as the practitioner in residential programs. However, staffing patterns and agency staff-to-client ratios may vary depending on the program and its purposes. In any Teaching-Family Model program, ratios and staffing patterns must sufficiently provide the following to each client: 1) a safe environment (i.e., adequate supervision), 2) individual treatment planning, 3) the consistent implementation of individualized treatment, 4) effective teaching, and 5) a family-style/most natural environment --- taking into consideration: 1) the age of the clients; 2) the severity/difficulty of the clients' problems (i.e., medically needy, developmentally delayed, sex offending, etc.); 3) the type of treatment program providing services; and/or 4) the expertise or experience level of the treatment provider. When determining the appropriateness of staff-to-client ratios in any program, all these factors should be taken into consideration. In addition, guidelines established by an agency's state licensing

body should be considered. Recommendations can be made if the quality of care is compromised due to staff-to-client ratios or staffing patterns.

#### **AA.6 Service Documentation**

Refers to any written documents relating to services provided by the agency. This may include (but is not limited to): treatment plans, progress reports, training, supervision/consultation, and evaluation schedules and reports.

#### **AA.7 Quality Components**

Refers to the demeanor of the staff member when interacting with clients. This demeanor includes facial expression; voice tone; and body language that demonstrates respect, sincerity, concern, warmth, etc.

#### **AA.8 Staff and Service Provider**

Includes all employees and persons hired, contracted or licensed by the agency to provide Teaching-Family Model services.

#### **AA.9 Practitioner**

Includes any person providing services directly to the client.

#### **AA.10 Consultant/Supervisor**

Includes individuals providing support and supervisory services to the practitioner.

## **BB. INDICATORS/SOURCES**

Several Indicators and Sources can be applied to all standards. These include:

### **BB.1 Consumer Satisfaction**

The evaluators will review the agency's methods of obtaining consumers' opinions about the services provided and how their input is used to improve services.

### **BB.2 Observation**

On-Site evaluators will observe program operations, service delivery by staff and interactions with client(s) while visiting the agency.

### **BB.3 Services Documentation**

Evaluators will review any documents relating to the services provided by the agency.

### **BB.4 Outcomes**

Evaluators will review evidence of program effectiveness and positive client outcomes that may include data, reports, graphs, observations, demographics of race or ethnicity, restrictiveness of programs and discharge information etc.

### **BB.5 Client/Staff Interviews**

On-Site evaluators will interview clients and staff regarding services provided by the agency.

### **BB.6 Integrated Systems**

The facilitative administrative, training, consultation, and evaluation systems support and complement each other.

## CC. GOALS

### CC.1 Humane

The agency demonstrates compassionate, considerate, respectful and nonjudgmental positive regard for all clients with no tolerance for abuse or neglect.

#### INDICATORS OF COMPLIANCE (CC.1)

- A. The Agency routinely administers a staff practice/safety questionnaire for clients.
- B. The agency adheres to Teaching-Family Association Standards of Ethical Conduct. (Specific attention is given to standards of ethical conduct 206, 219-222).
- C. The agency has clear policies, procedures and systems to address alleged abuse, neglect, restrictive interventions and unethical actions by staff and service providers.
- D. Staff are trained, and have an understanding of client rights and procedures regarding unethical practices.
- E. The agency promotes a family-style/most natural environment and/or supportive program environment.

#### SOURCES FOR EVIDENCE OF COMPLIANCE (CC.1)

Mission/Vision Statement	Consumer Satisfaction
Agency Description	On-Site Observation
Program Description	Services Documentation Review
Grievance Policies	Outcome Data
Client Interviews	Training Records
Restraint Data	Unethical Practices Documentation
Agency policy addressing alleged abuse, neglect and unethical actions by staff and service providers	

**CC.2 Effective**

The services stated by the agency are delivered. Outcomes are observable and measurable. Clients demonstrate progress towards goals.

**INDICATORS OF COMPLIANCE (CC.2)**

- A. Clients acquire skills necessary to achieve goals.
  
- B. Clients demonstrate an appropriate reduction in level of services needed.
  
- C. Stability and quality of staff are appropriately maintained.
  
- D. Consumers are satisfied with effectiveness of services. (Consumers of the practitioner such as; school personnel, parents, clients, guardian)
  
- E. The agency outcome data that indicates a trend that clients are moving to least restrictive environments post placement.

**SOURCES FOR EVIDENCE OF COMPLIANCE (CC.2)**

- |                           |                               |
|---------------------------|-------------------------------|
| Review of Case Files      | Client Interviews             |
| Documentation of Services | On-Site Observation           |
| Staff Interviews          | Services Documentation Review |
| Outcome Data              | Quality Assurance Measures    |
| Consumer Questionnaires   | Staff turnover rates          |
| Practitioners Evaluations | In-service training schedules |
| Functional assessments    |                               |

### **CC.3 Individualized**

Services provided by the agency are client-centered, strength-based, and directly related to the individual needs of the client.

#### **INDICATORS OF COMPLIANCE (CC.3)**

1. Client assessment and treatment plan identifies individual strengths as well as needs. (refer to standards of ethics 207)
2. Client is involved in planning of services.
3. Clients indicate a high level of satisfaction with their level of opportunity for input for services.

#### **SOURCES FOR EVIDENCE OF COMPLIANCE (CC.3)**

Client Interviews  
On-Site Observation  
Services Documentation  
Consumer Satisfaction Reports

Example of Treatment Plans  
Directors report on cultural sensitivity

#### **CC.4 Consumer Satisfaction**

The agency provides opportunities for client and consumer input. Clients and consumers express a high degree of satisfaction with services provided. Consumer Satisfaction should focus on Agency Wide consumer satisfaction.

#### **INDICATORS OF COMPLIANCE (CC.4)**

- A. The agency conducts comprehensive client and consumer polling to evaluate the practitioners' service.
- B. A minimum return rate of 50% from each of the agency practitioner consumer survey and the agency consumer survey is achieved.
- C. The agency's quality assurance process incorporates consumer feedback.
- D. Practitioner Consumers indicate satisfaction with the services they receive.
- E. Agency Consumers indicate satisfaction with the services they receive.

#### **SOURCES FOR EVIDENCE OF COMPLIANCE (CC.4)**

Quality Assurance Documentation	Client Interviews
Consumer Questionnaires	On-Site Observation
Agency Consumer Feedback Reports	Practitioner Evaluations

## **DD. INTEGRATED SYSTEMS**

### **DD.1 Facilitative Administration**

A facilitative administration is one that offers staff opportunities to provide input regarding program components. The administration facilitates and promotes system integration by providing necessary tools, training, and support; coordinating and assessing the service delivery system; and developing processes and resources to support and maintain the systems.

- Facilitative administrative decisions are based on the needs of clients and practitioners.
- A qualified staff administrator could be an individual who has been trained in the Teaching-Family Model.
- Agency administration is a proponent of the Teaching-Family Model.
- Facilitative administration abides by, regulates and monitors adherence to the standards of ethical conduct.
- Facilitative administration should comply with the legal regulations outlined by the local rules.
- There is a grievance process for staff.
- Facilitative administration promotes the professional participation of practitioners in the Teaching-Family Association.
- Facilitative administration supports safe, clean, environments.
- Facilitative administration should have a staff selection process that promotes implementation of the Teaching-Family Model.
- Facilitative administration supports longevity of direct care staff.
- Facilitative administration promotes diversity in the work place.

### **INDICATORS OF COMPLIANCE (DD.1)**

- A. The administration supports the implementation of the Teaching Family Model.
- B. The agency has training, consultation, facilitative administration and evaluation systems which are integrated.
- C. The agency has a consumer evaluation process to assess systems, programs, and staff and service providers.
- D. The agency has staff selection procedures that promotes the implementation of the Teaching Family Model.

- E. The administration promotes the diversity, longevity, and participation in the Teaching Family Association and other professional activities for staff.
- F. The organization's leadership, including its governing body, participates with other organizations and individuals to: improve services for individuals and families, identify and advocate for needed change, identify gaps in service and work for their elimination, and share resources and expertise where appropriate.
- G. The agency has a staff grievance process.
- H. Facilitative administrative decisions are based on the needs of clients and practitioners.

**SOURCES FOR EVIDENCE OF COMPLIANCE (DD.1)**

Staff Interviews	Site Director's Report
Training Materials/Documentation	Supervision procedures
Consultation Documentation/Observation	Mission Statement
Evaluation procedures/reports	Policies/Procedures
Program Budget	Quality Assurance Reviews
QA/Staff Meeting Minutes	Board Minutes
Affiliations/Memberships	

## **DD.2 Training**

The agency provides pre-service and on-going skill development for all staff; staff are familiar with the Teaching-Family Model. The agency enables, facilitates, and holds all staff and service providers accountable for implementation of the Teaching-Family Model. The agency provides competency based training to increase the skill level of all staff and service providers to maintain and improve skill development.

- Pre-service training: training prior to being responsible for client services. Training is provided by a qualified trainer.
  - A qualified trainer is an individual who has been trained as a trainer; experienced in TFM implementation; has hands-on experience with clients; or combinations of any of the above.
  - Conducts trainer and training evaluations (i.e., trainers and content)
  
- Pre-service training should include the following:
  - Understanding the teaching procedures
    - Effective Praise;
    - Teaching-Interaction;
    - Situations, Options, Disadvantages, Advantages, Solutions;
    - Skill-based practice/behavioral rehearsal
    - Intensive teaching;
    - Planned/preventative teaching
  - Self-determination/self-government;
  - Relationship development (quality components)
  - Family-style living;
  - Individualized treatment planning;
  - Learning theory
  - Motivation systems
  - Client rights
  - Professionalism
  - Diversity and includes race, gender, ethnicity, age, socioeconomic status, sexual orientation, religion, disability in accordance with population serviced
  - Orientation of the Teaching-Family Model and Standards of Ethical Conduct

### **INDICATORS OF COMPLIANCE (DD.2)**

- A. The agency ensures that all staff and practitioners attend training prior to being responsible for client services and on a regular basis thereafter. There will be documentation of pre-service training frequency and attendance.

- B. The agency implements the Teaching Family Model Preservice training.
- C. Training is competency based. Evidence validating the competency-based will include documentation of: testing, observed behavior, evaluations by trainers, and/or consultations noting training.
- D. There is ongoing opportunities to attend in-service training activities.
- E. The Agency has a plan to develop qualified trainers.

**SOURCES FOR EVIDENCE OF COMPLIANCE (DD.2)**

Resumes of Trainers	Staff Interviews/Observation
Training Schedules	Staff Training Logs
Training Evaluations and Summaries	Training Materials for Trainers and Staff
Consumer Questionnaires	

### **DD.3 Supportive Consultation/Supervision**

A supportive consultation and supervision component supports and promotes practitioner skill development, ensures integrity of the Teaching-Family Model, and monitors services to clients.

- Consultation service delivery plan should be designed based on experience of practitioner, and the needs of clients
- Consultation needs to be frequent enough to meet the needs of the client, the practitioner and the program
- Consultation service delivery should be conducted through onsite observations, and telephone consultation and be available 24/7.
- The content of the consultation service delivery is reflective of the practitioner skill development and support as well as individualized treatment of clients. The consultation service delivery includes review and feedback where applicable. The consultation service delivery should include the following:
  - Treatment Planning,
  - Motivation reviews where applicable.
  - Understanding the teaching procedures
    - Effective praise;
    - Teaching-interaction;
    - Situations, Options, Disadvantages, Advantages Solutions;
    - Skill-based practice/behavioral rehearsal
    - Intensive teaching;
    - Planned/preventative teaching
  - Self-determination/self-government;
  - Relationship development (quality components)
  - Family-style living;
  - Individualized treatment planning;
  - Learning theory
  - Motivation systems
  - Client rights
  - Diversity and it should include race, gender, ethnicity, age, socioeconomic status, sexual orientation, religion, disability in accordance with population serviced
  - Professionalism
- Consultations should be conducted by qualified consultants
  - Consultants can be qualified through mentoring, consultation training, experience as a practitioner; and experienced in Teaching-Family Model
  - Consultants must have attended pre-service training

**INDICATORS OF COMPLIANCE (DD. 3)**

- A. Practitioner is satisfied with services and support provided by the Consultant/Supervisor.
- B. Consultant/Supervisor serves as a liaison/advocate for the practitioner.
- C. Consultation and supervision are focused on providing effective services to clients.
- D. Consultants/Supervisors follow the service delivery plan and document services delivered.
- E. The service delivery plan is frequent enough to meet the needs of the client, the practitioner and the program.
- F. Consultants/Supervisors are adequately trained and knowledgeable in Teaching-Family Model goals, systems and elements.

**SOURCES FOR EVIDENCE OF COMPLIANCE (DD.3)**

- |                                |                             |
|--------------------------------|-----------------------------|
| Observation                    | Service Delivery Plan       |
| Service Delivery Documentation | Staff Interviews            |
| Practitioner Questionnaires    | Staff Resumes/Training Logs |
| Outcomes Measures              | Job Descriptions            |
| Consumer Questionnaires        |                             |

## **DD. 4 Evaluation**

The evaluation systems facilitate continuous quality improvement in service and care by assessing the skill of the practitioner and implementation of the Teaching-Family Model. This delivery system includes evaluation of all practitioners and of the agency.

### **A. Practitioner Evaluation**

#### Frequency of evaluations

- The practitioner should participate in at least one “eyes-on”, client and consumer evaluation annually.
- There should be a process in place to prepare practitioners for their annual evaluation. Initial evaluations are encouraged as a preparation for annuals.

#### Eyes-on Evaluation

- There are three parts to an evaluation: observations; community questions; client questionnaire.
  - The “eyes-on” evaluations consist of observing the implementation of the skills trained in the Teaching-Family Model.

#### Criteria

- All evaluations are conducted on a scale of 1-4, 1-5 or 1-7. Satisfaction is 3 on a 4 point scale; 4 on a 5 point scale or 6 on a 7 point scale.
- Annual evaluations and subsequent annual evaluations should be conducted by two qualified evaluators (\*there may be an exception in the case where two evaluators may seem intrusive in the environment. In these cases reliability must be demonstrated through other means).
  - Evaluators can be qualified by mentoring, evaluation training, experience as a practitioner, experience in Teaching-Family Model evaluations, and must have attended pre-service training.
  - The primary evaluator should not be a program consultant to the program or practitioner being evaluated.
  - The agency will assure that practitioners will reach criteria in a timely manner through retakes for below criteria scoring.

#### Client Consumers

- There are two portions to a client consumer evaluation of the practitioner: a quality of care questionnaire and staff practice evaluation. The quality of care questionnaire needs to include questions pertaining to fairness; pleasantness; helpfulness/effectiveness; client input; concern and any additional comments they want to make. Criteria will be consistent with eyes-on observation scales. The staff practices evaluation should include, at a minimum, a question or set of questions to determine the safety of the client. (Adjustments to the tool will be made for unique client populations.)

### Community Consumer

- The agency should conduct a community consumer evaluation for practitioners annually. Community consumers could include as examples, parents/guardians, courts, schools, social workers, mental health, neighbors, administrators, etc.
- Concepts covered by the community questionnaire should include cooperation, effectiveness of treatment, communication, quality of the environment, advocacy for the client and additional comments depending upon the community consumers' role with the client and the practitioner. We will use a rating scale consistent with all consumers. Insufficient information to respond will be included on any scale used although it is not included in averages.

### B. Agency Wide Consumer

- The practitioner consumer evaluates the agency providing the four integrated services: training; evaluation; consultation and facilitative administration which will be conducted annually. The practitioner should evaluate the integrated systems independently.
- The agency will conduct a community consumer evaluation in conjunction with their onsite review cycle among those individuals impacting or impacted by the agency services.
- Rating Scales is consistent with practitioner level evaluations.
- Agencies have published guidelines for their evaluation review committees or process.
- Agencies strive for the highest return rate possible on all evaluations -- both agency and practitioner -- with a minimum of 50% on each category of the consumer portions polled.
- Agency consumer would include satisfaction questions related to the following areas
  - cooperation
  - effectiveness of treatment
  - communication
  - quality of the environment
  - advocacy for the client
  - additional comments

## **INDICATORS OF COMPLIANCE (DD.4)**

- A. For the practitioner evaluations, the agency assesses consumer satisfaction. There is a description of the community consumers polled. The client and community consumer evaluation is done annually.
- B. The agency observes, assesses, and reviews practitioner skills and the implementation of the Teaching-Family Model. Specifically, the skills taught in pre-service training are observed including teaching procedures; self-determination/self-government; relationship development; family-style living/most natural living; quality components; individualized treatment planning; motivation systems (appropriate for the population and diversity).

- C. The agency prepares the practitioner for all evaluation activities. Evaluations are conducted on a scale of 1-4, 1-5, or 1-7. Satisfaction is 3 on a 1-4 scale, 4 on a 1-5 scale or 6 on a 1-7 scale.
- D. The agency evaluates the primary or designated practitioner on an annual basis. Post-annual evaluations or retakes are encouraged.
- E. For all services, eyes-on evaluations occur annually to assess the skills trained in the Teaching-Family Model.
- F. Annual evaluations are conducted by two qualified evaluators (\*there may be an exception in the case where two evaluators may seem intrusive or inappropriate for the environment). Evaluators can be qualified by evaluation training, mentoring, experience as a practitioner; and experience in the TFM evaluation process. The evaluator has also attended pre-service training. The primary evaluator should not be a program consultant to the program or practitioner being evaluated.

**SOURCES FOR EVIDENCE OF COMPLIANCE (DD.4)**

Consumer Evaluation Reports  
 Staff Interviews  
 Evaluation Schedules  
 Quality Assurance Reviews/Reports  
 Evaluation Review Committee Minutes

Practitioner Evaluation Report  
 Evaluation Preparation Materials  
 Evaluation Follow-up Procedures  
 Accrediting Bodies Reports

**EE. ELEMENTS**

**EE.1 Teaching**

Teaching-Family Programs emphasize a strength-based approach to the supportive teaching of functional skills and behaviors.

**INDICATORS OF COMPLIANCE (EE.1)**

- A. The agency promotes a systematic positive behavioral approach to teaching behavior.
  
- B. All staff and practitioners use teaching procedures (effective praise, planned and preventive teaching, corrective teaching,) and model appropriate skills when teaching clients.
  
- C. Teaching is provided through supportive interactions with clients which typically include praise, specific descriptions of behavior, client-centered rationales, acknowledgement, opportunities for practice and feedback, and positive quality components.
  
- D. In response to aggressive and/or severe behavior, practitioners use planned, safe, de-escalation techniques.

**SOURCES FOR EVIDENCE OF COMPLIANCE (EE.1)**

Training Outlines/Schedules	Consultation Feedback
Treatment Plans	Motivation System Reviews
Evaluation Reports	Outcome Measures
Observation	Client Interviews
Practitioner’s evaluations	

**EE.2 Self-Determination**

Teaching-Family Programs give clients as much control over their lives as possible.

**INDICATORS OF COMPLIANCE (EE.2)**

- A. Clients participate in own goal setting.
  
- B. Clients receive the least restrictive services necessary for them to achieve goals.
  
- C. Staff and service providers facilitate the learning of decision-making and problem-solving skills.
  
- D. Staff and service providers facilitate and support client decision-making opportunities.
  
- E. Clients are encouraged to support one another's goals.

**SOURCES FOR EVIDENCE OF COMPLIANCE (EE.2)**

Training Outlines	Service Plans
Client Consumer Satisfaction Reports	Services Documentation
On-Site Observation	Client Interviews
Practitioner's evaluations	Client outcome measures

**EE.3 Client Advocacy**

Teaching-Family Programs actively promote and protect client rights and dignity.

**INDICATORS OF COMPLIANCE (EE.3)**

- A. Staff educates individuals regarding their rights and opportunities.
  
- B. Staff actively advocates on behalf of the client.
  
- C. Clients are trained in self-advocacy skills.
  
- D. Practitioners are knowledgeable of community resources for client needs.
  
- E. Staff are trained in client rights and ethical practice standards.
  
- F. Staff and Practitioners educate clients regarding advocacy services and community resources.
  
- G. Programs provide internal grievance procedures for clients.

**SOURCES FOR EVIDENCE OF COMPLIANCE (EE.3)**

Training Outlines	Grievance Policies/Procedures
Training Logs	Services Documentation
Client Satisfaction Reports	Documentation of Grievances
Client Rights Statements	Client Interview
On Site observations	

#### **EE.4 Relationships**

Teaching-Family Programs promote the development of relationships with clients that are maintained through trust, respect, and positive regard within professional boundaries.

#### **INDICATORS OF COMPLIANCE (EE.4)**

- A. Practitioners interact with clients using client-preferred behaviors e.g. pleasant, calm voice, smiles, proximity and avoid non preferred behaviors (e.g., yelling, and cursing).
- B. Staff and program are aware of and sensitive to clients' culture, environment, and preferences.
- C. Clients are encouraged to appropriately express feelings.
- D. Staff and practitioners are sensitive and responsive to client needs especially in times of crisis, illness, and times of need as well as opportunities to celebrate.

#### **SOURCES FOR EVIDENCE OF COMPLIANCE (EE.4)**

Staff Practice Investigations  
Critical Incidents  
On-Site Observation  
Services Documentation  
Pre-Service Training

Interview process  
Client Interviews  
Consumer Satisfaction  
Client Outcome  
Practitioner Evaluations

**EE.5 Family-Sensitive Approach**

Teaching-Family Programs recognize the importance of family to the client and encourages and supports contact whenever possible.

**INDICATORS OF COMPLIANCE (EE.5)**

- A. Staff and practitioners promote and advocate for the client's family, including the extended family.
  
- B. The family or significant individuals are included in the planning and delivery of services.
  
- C. Family interaction and participation is encouraged when not prohibited by law.
  
- D. Whenever possible, practitioners should develop positive relationships with family members.

**SOURCES FOR EVIDENCE OF COMPLIANCE (EE.5)**

Client/Family Satisfaction	On-Site Observation
Services Documentation	Outcomes
Client Interviews	Program Description
Training Outlines	Site Directors' Report
Treatment Plans/Home Notes/Phone logs	

**EE.6 Diversity**

Teaching-Family Programs provide services that are sensitive to differences arising from race, color, national origin, sex, religion, age, physical handicap, political affiliation, or socio-economic status.

**INDICATORS OF COMPLIANCE (EE.6)**

- A. Staff are trained in areas relating to diversity.
- B. The program environment reflects respect for diversity of the population and community served.
- C. Staff recruitment actively seeks to promote diversity relative to client population.
- D. The agency promotes respect for diversity.
- E. Services are offered regardless of race, religion, gender, etc.

**SOURCES FOR EVIDENCE OF COMPLIANCE (EE.6)**

Training Outlines	Cultural Representation within the Agency
Consumer Satisfaction	Services Documentation
On-Site Observation	Outcomes
Client Interviews	Staff Interviews
Equal Opportunity Policies/Procedures	Policy that indicates that services are delivered Regardless of race or ethnicity etc.

**EE.7 Professionalism**

Teaching-Family Association and agencies promote the professional development of practitioners through training, consultation, and evaluation leading to certification.

**INDICATORS OF COMPLIANCE (CC.5)**

- A. Administration promotes the professional development of the practitioner through training, consultation and evaluation on an ongoing basis.
  
- B. Professional development empowers practitioners and increases autonomy.
  
- C. The Agency prioritizes practitioner certification.
  
- D. Practitioners participate as full members of the treatment team.
  
- E. Practitioners are trained to take leadership roles in the agency.

**SOURCES FOR EVIDENCE OF COMPLIANCE (CC.4)**

Quality Assurance Documentation	Conferences attended are documented
In-service programs are documented	On-Site Observation
Agency Consumer Feedback Reports	Practitioner Evaluations
Professional behaviors of staff	
Pre-service Workshop includes training on Professionalism	

# TEACHING-FAMILY ASSOCIATION STANDARDS OF SERVICE

## RATINGS OF COMPLIANCE

An Agency applying for Certification through the Teaching-Family Association will be rated using the following Scale:

- 4 The agency demonstrates full compliance.**  
The agency has procedures for and allocates resources to provide full support for this indicator.
  
- 3 The agency demonstrates adequate compliance.**  
The agency could more consistently implement or support this indicator.
  
- 2 The agency demonstrates minimal compliance.**  
The agency gives low program and resource priority to this indicator.
  
- 1 The agency demonstrates no compliance.**  
The agency fails to support this indicator.