2026

July 1, 2026–June 30, 2027

CARF Standards Manual Supplement for Networks

carf INTERNATIONAL

CONTENTS

INTRODUCTION

The *CARF Standards Manual Supplement for Networks* is designed to be used as a supplement to the program sections of CARF standards manuals. CARF offers a variety of standards manuals to address the unique and diverse needs of organizations across the spectrum of health and human services. If your organization is interested in pursuing accreditation as a network, please follow the steps below.

1. Review the Network description (see page 3) and the standards in this document to determine if they are a good fit for your network.

2. Identify the CARF Customer Service Unit (CSU) that best fits the scope of your network and the population(s) served by your network's participating providers. This will be the primary CSU for your network.

   CARF CSUs:
   – Aging Services (includes Continuing Care Retirement Communities)
   – Behavioral Health
   – Child and Youth Services
   – Employment and Community Services
   – Medical Rehabilitation
   – Opioid Treatment Program
   – Vision Rehabilitation Services

3. Contact CARF at (888) 281-6531 and ask to speak with a resource specialist in the appropriate CSU to determine whether network accreditation is a good fit for your organization and to verify the CSU and which standards manual to use.

4. After consulting with your CARF resource specialist, obtain a copy of the appropriate standards manual, which will be used in conjunction with the standards in this document. The following sections of the applicable standards manual will be applied in conjunction with the network standards:
   – Accreditation Policies and Procedures.
   – Sections 1.A. and 1.C.–1.M. in Section 1. ASPIRE to Excellence®
     (Section 1.B. Governance is optional unless seeking Network accreditation in conjunction with the Continuing Care Retirement Community Standards Manual).
   – Appendices.
   – Glossary.

NOTE: *Standards for specific programs or services in the applicable standards manual would be used only if the network is seeking accreditation for those programs/services in conjunction with its network accreditation.*

Section A

Standards for the Network

Description

A network is a legal entity that contracts with two or more organizations that deliver health or human services to persons served ("participating providers") to coordinate functions between or on behalf of the participating providers. Various types of networks exist and they may have different purposes in the field. For example, business networks may be formed to establish strategic business arrangements with or among participating providers, and service delivery networks may establish an integrated system of service provision by participating providers to persons served. Other types of networks may combine the functions of business and service delivery networks. To promote service excellence and minimize risk, service delivery networks establish and implement a process for quality review of participating providers.

Network leadership is identified and guides:

- Participating provider contracts that address, depending on the type of network, business functions and/or service delivery.
- Operational links and integration with or among participating providers.
- A system to facilitate cooperation with participating providers, including:
    - Integrated strategic and financial planning.
    - Resource coordination.
    - Technology integration.
    - Performance measurement.
    - Development and improvement of participating providers.
    - Geographic areas served.

Networks that provide services to persons served may offer value in any or all of the following ways:

- Choice of services.
- Access to services based on the needs of the persons served and expectations of other stakeholders.
- Improved coordination of services among participating providers.
- Improved effectiveness and efficiency of service delivery.

NOTE: *A legal entity is an organization formed in accordance with and recognized by applicable law or decree. A legal entity is separate and distinct from its stakeholders and other persons and entities and is typically identified by a unique government-issued number or code.*

Applicable Standards

A network seeking CARF accreditation must meet the Standards in Section A. of this Supplement as well as all applicable standards in Section 1. ASPIRE to Excellence® from the primary CARF standards manual (Section 1.B. Governance is optional unless seeking Network accreditation in conjunction with the Continuing Care Retirement Community Standards Manual).

■ All networks seeking accreditation must meet Standards A.1.–10.

■ Service delivery networks must also meet Standards A.11.–16. and, if they deliver services to persons served using information and communication technologies, Standards A.17.–23.

NOTE: *The description and standards apply to the network (i.e., legal entity) seeking accreditation. A participating provider may seek accreditation for its programs and services that are eligible for accreditation; however, a participating provider is not included as part of the network accreditation.*

Participating providers in the network that are not independently accredited by CARF or another nationally or internationally recognized accreditation organization for the programs and/or services they provide to persons served in the network must apply the standards included in Section B of this Supplement.

Please contact your CARF resource specialist with any questions.

Standards for All Networks Seeking Accreditation

Network A.

1. The network documents its structure.

Intent Statements

Networks may vary in their structure, particularly with regard to the variety of formal and informal relationships that exist between the network administration and participating providers. The documented network structure serves as a guide for identifying the formal relationships that function as the core or the foundation of the network.

Examples

Formal relationships could include participating providers with which the network has some type of written agreement such as a contract.

Informal relationships may be collaborations that exist between the network and various organizations. Such informal relationships may exist without a written agreement. The informal relationship may focus on obtaining referrals, conducting community outreach, or offering education to consumers.

The network structure could be found in documents such as:

■ At-a-glance fact sheet.

■ Organizational chart.

■ Diagram of the network administration and participating providers.

■ List and description of the committees and other entities included in the network.

■ Contracts or partnership agreements between the network and entities with which it has formal relationships.

■ Bylaws for the network.

Survey Preparation Questions

  1. Describe the structure of the network.

  _____

  _____

  _____

  In what documentation is the structure of the network described?

  _____

Network A.

  2. **The network:**
      a. **Documents the following parameters regarding its scope:**
         (1) **Vision.**
         (2) **Mission.**
         (3) **Purpose.**
         (4) **Type of network.**
         (5) **Network administration entity.**
         (6) **Governance structure.**
         (7) **Organizational structure.**
         (8) **Financial structure.**
         (9) **Geographic areas served.**
         (10) **Participating providers.**
         (11) **Population(s) served, if applicable.**
         (12) **Settings.**
         (13) **Payers and funding sources.**
         (14) **Fees.**
         (15) **Referral sources.**
         (16) **Specific services offered.**
         (17) **Point(s) of entry.**
         (18) **Point(s) of exit.**
         (19) **If the network delivers services via information and communication technologies, the communication technology used to deliver services.**
      b. **Shares information about its scope with the following stakeholders, as relevant to their needs:**
         (1) **Persons served, if applicable.**
         (2) **Families/support systems, if applicable.**
         (3) **Participating providers.**
         (4) **Payers and funding sources.**
         (5) **Referral sources.**
         (6) **Other relevant stakeholders.**
         (7) **The general public.**

    c. **Reviews the scope at least annually.**

    d. **Updates the scope as necessary.**

Intent Statements

The scope is defined at the level of the network and provides information about the role and function of the network as well as what it offers to persons served, providers, referral sources, payers and funding sources, and other relevant stakeholders.

2.a.(19) Service delivery using information and communication technologies is addressed in Standards A.17.–23. of this Supplement.

Examples

The network scope may be posted on a website, provided in an information packet, or described within a report.

2.a.(8) The network can identify the financial relationships that exist between network administration and participating providers. The network may also have financial relationships with other related entities outside of those with participating providers.

2.a.(9) The network documents the states/provinces or other jurisdictions where it conducts its work. This work could include provision of business services such as provider education, answering questions from persons served, providing operational support to participating providers, or managing virtual services such as telehealth or telecounseling, as well as providing services to persons served. Geographic areas served may be relevant to access/convenience by persons served, credentialing of providers, or billing for services.

2.a.(11) For networks that provide services to persons served, the scope might address whether the network serves adults and/or children and youth, the types of conditions that the populations may be diagnosed with in order to access network services, and the numbers of persons served within the network. For networks that do not engage in service delivery to persons served, but instead provide exclusively business services to participating providers, this standard element may not be applicable.

2.a.(14) Fees may include those that the participating providers in the network charge to persons served. Fees may also include those that participating providers pay to the network to maintain participating provider status or to receive certain business services from the network.

2.a.(19) The communication technology used to deliver services may be described in terms such as phone call, live chat, text, Zoom, video conference, and platforms.

Survey Preparation Questions

2. Is there documentation of the following parameters regarding the scope of the network:

- Vision? ☐ Yes ☐ No
- Mission? ☐ Yes ☐ No
- Purpose? ☐ Yes ☐ No
- Type of network? ☐ Yes ☐ No
- Network administration entity? ☐ Yes ☐ No
- Governance structure? ☐ Yes ☐ No

- Organizational structure? ❑ Yes ❑ No
- Financial structure? ❑ Yes ❑ No
- Geographic areas served? ❑ Yes ❑ No
- Participating providers? ❑ Yes ❑ No
- Population(s) served, if applicable? ❑ Yes ❑ No
- Settings? ❑ Yes ❑ No
- Payers and funding sources? ❑ Yes ❑ No
- Fees? ❑ Yes ❑ No
- Referral sources? ❑ Yes ❑ No
- Specific services offered? ❑ Yes ❑ No
- Point(s) of entry? ❑ Yes ❑ No
- Point(s) of exit? ❑ Yes ❑ No
- If the program delivers services via information and communication technologies, the communication technology used to deliver services? ❑ Yes ❑ No

Describe how information about the scope is shared with each of these groups:

- Persons served, if applicable.

  _____

  _____

- Families/support systems, if applicable.

  _____

  _____

- Participating providers.

  _____

  _____

- Payers and funding sources.

  _____

  _____

■ Referral sources.

_____

_____

■ Other relevant stakeholders.

_____

_____

■ The general public.

_____

_____

How can the survey team verify that the scope of the network is reviewed at least annually?

_____

_____

How does the network administration ensure that the scope is updated as necessary?

_____

_____

_____

Network A.

3. **Network administration provides opportunities for participating providers to engage in integrated network planning processes related to:**
   a. **Accessibility.**
   b. **Cultural competency, diversity, and inclusion.**
   c. **Financial management.**
   d. **Performance measurement and improvement.**
   e. **Risk management.**
   f. **Strategic direction of the network.**
   g. **Technology.**

Intent Statements

Planning for the future direction of the network requires a variety of input from various sources. To ensure that valuable information is considered, participating providers are given opportunities to proactively engage in planning processes that relate to key management topics.

Examples

Planning opportunities may include a variety of interactions such as regularly scheduled planning meetings at which a key contact from each participating provider gets together with network leadership to conduct strategic planning for the network; quarterly conference calls that network administration schedules for participating providers in a geographic region to identify strengths, weaknesses, opportunities, and threats that should be considered in network planning; monthly phone meetings with participating providers to review trends or emerging issues gleaned from data that have been collected by providers and submitted to the network. The network may also utilize technology to seek input from participating providers, such as online questionnaires or surveys or email queries.

3.c. Financial management information may pertain to reimbursement timeframes from different payers and how differences in reimbursement speed impact days in accounts receivable and cash flow. If the payer is a major funding source for many participating providers, this issue can impact network financial planning.

Increasing operating expenses in areas such as insurance coverage, utility costs, salaries and benefits for various positions, and certain types of supplies may be affecting many participating providers in a geographic region and may impact how the network plans to continue providing affordable services.

3.d. Performance measurement and improvement may include analyzing information based on selected data that participating providers collect and share with network administration. Depending on the type of network and the priorities established for data collection, the data may include experience of services and other feedback from persons served or satisfaction results from personnel, average response times for certain requests, level of participation in an education program, or frequency of persons served accessing acute care services.

Survey Preparation Questions

3. Describe how participating providers can engage in network planning processes related to the following areas (e.g., the mechanism for their participation, frequency, etc.):

■ Accessibility.

_____

_____

_____

■ Cultural competency, diversity, and inclusion.

_____

_____

_____

■ Financial management.

_____

_____

_____

■ Performance measurement and improvement.

_____

_____

_____

■ Risk management.

_____

_____

_____

■ Strategic direction of the network.

_____

_____

_____

■ Technology.

_____

_____

_____

Network A.

4. The network addresses unanticipated changes in services precipitated by funding or other resource issues.

Intent Statements

The network demonstrates knowledge of payer sources and resource needs for services offered and is able to explain how it would strategically address situations in which funding is unexpectedly reduced or eliminated or resources such as specialized services are no longer available. Addressing unanticipated funding or resource changes should reflect, as applicable to the type of network, consideration of business needs and service delivery needs.

Examples

Funding issues might include legislation that caps government payment for a certain type of service or third-party payers implementing different preauthorization requirements for certain services.

Resource issues might include software upgrades that impact the compatibility of various systems to manage billing and other types of network financial management processes, consolidation of local hospitals into a regional network and elimination of some urgent care centers in high-need neighborhoods, or the acquisition of a local transportation company by a national firm and a reduction in needed transportation services for persons served in various neighborhoods.

An unexpected increase in the need for a specialty service or the exit of a specialty provider from the network may create a gap in service availability. The network might establish procedures that detail how it will handle issues such as how to notify persons served who may be affected by the change in service availability, how it will seek new providers to fill the identified gap, and how it will meet the needs of persons served in the interim.

Survey Preparation Questions

4. Explain how the network addresses unanticipated changes in services precipitated by:
   ■ Funding issues.

   _____

   _____

   _____

   ■ Other resource issues.

   _____

   _____

   _____

   Give an example of when a change in services has occurred due to funding issues and the outcome of the situation.

   _____

   _____

   _____

   _____

Give an example of when a change in services has occurred due to other resource issues and the outcome of the situation.

_____

_____

_____

_____

Network A.

5. The network:

    a. Establishes criteria for the inclusion of providers in the network.

    b. Implements written procedures for the selection of participating providers.

Intent Statements

To clearly identify participating providers and distinguish them from vendors and organizations with which the network simply collaborates, the network is able to show the criteria applied to providers that can participate in the network. Once criteria are established, they inform the procedures that are implemented to include participating providers in the network.

Examples

Criteria for participating providers to be part of a network might include completion of criminal background checks of provider personnel, accreditation, current program licensure in certain states/provinces or other jurisdictions, and comprehensive liability insurance coverage.

Procedures for selection of participating providers not owned by the network might include completion of an application including licensure information, verification of licensure, review of accreditation status, information regarding technology resources of the provider in order to engage in networkwide data collection, and a site visit by a representative of the network prior to inclusion in the network.

Participating providers are ultimately determined based on the criteria established by the network to define them as they relate to the scope of the network and providing services to persons served; however, they might include:

■ Therapy companies.

■ Transportation companies to assist persons served to access network services.

■ Home care agencies.

■ Counselors.

■ Educators or facilitators offering education about prevention, recovery, long-range service planning, or caregiving strategies.

■ Case managers.

■ Physicians.

Vendors would typically be looked at more from the context of the supply chain, administrative functions, or network operations. A vendor, or a seller, may be an

enterprise that contributes goods or services to the network. For example, a vendor might:

■ Provide office supplies to the network.

■ Restock first-aid kits at network locations.

■ Provide pharmaceutical products.

■ Conduct maintenance on leased or owned equipment.

■ Administer an online education portal for persons served and personnel.

Survey Preparation Questions

5. What are the network's criteria for inclusion of providers in the network?

_____

_____

_____

Describe the procedures for the selection of participating providers.

_____

_____

_____

Are the procedures for selection written?   ❑ Yes   ❑ No

Who is responsible for the selection process?

_____

_____

Network A.

6. **Prior to contracting with a provider, the network conducts a review to determine whether the prospective provider demonstrates, at a minimum:**

   a. **Implementation of a person-centered philosophy that guides service delivery.**

   b. **Fiscal stability.**

   c. **Ethical practices in business and service delivery.**

   d. **Adherence to applicable:**

      (1) **Legal requirements.**

      (2) **Health and safety requirements.**

      (3) **Risk management practices.**

   e. **Capacity to fulfill the mission of the network.**

   f. **Ability to fulfill its potential role in the network.**

Intent Statements

Networks conduct some type of review process, which might be considered a due diligence process, to determine whether a potential participating provider has stable business practices, has the capacity to function effectively as part of the network, and appears able to fulfill its individual role as a network provider.

Examples

A review of a potential participating provider might include:

■ Reviewing current licensure information with a state/province or other jurisdiction.

■ Examining performance data submitted to the network by the provider related to results achieved for the persons served (effectiveness) or experience of services and other feedback.

■ Conducting a site review of the participating provider location to assess compliance with various health and safety requirements.

■ Conducting interviews with provider personnel and reviewing documentation to address how privacy requirements, e.g., HIPAA and Health Information Technology for Economic and Clinical Health (HITECH) in the U.S. and provincial/territorial privacy laws in Canada, are followed.

Survey Preparation Questions

6. Describe how each of the following areas is addressed in the network's review process for prospective providers:

■ Implementation of a person-centered philosophy that guides service delivery.

_____

_____

_____

■ Fiscal stability.

_____

_____

_____

■ Ethical practices in business and service delivery.

_____

_____

_____

■ Adherence to applicable legal requirements.

_____

_____

_____

■ Adherence to applicable health and safety requirements.

_____

_____

_____

■ Adherence to applicable risk management practices.

_____

_____

_____

■ Capacity to fulfill the mission of the network.

_____

_____

_____

■ Ability to fulfill their role in the network.

_____

_____

_____

Network A.

7. When a prospective provider is found ineligible to participate in the network, the provider is:
  a. Informed in writing as to the reasons.
  b. When required, given an opportunity to appeal the decision.
  c. Given information about resources to improve eligibility, if appropriate.

Intent Statements

Providers determined to be ineligible to join the network can benefit from information that can inform their performance improvement efforts.

7.b. Appeals opportunities might be required by law, certain procurement policies may require them, or professional standards may necessitate having such opportunities in place.

Survey Preparation Questions

7. When a prospective provider is found ineligible to participate in the network, is the provider:

   Informed in writing as to the reasons? ❏ Yes ❏ No

   Given an opportunity to appeal the decision? ❏ Yes ❏ No

   Given information about resources to
   improve eligibility? ❏ Yes ❏ No

Network A.

8. **The network:**

   a. **Specifies through a contract with each participating provider:**

      (1) **Roles and responsibilities of the:**

         (a) **Network.**

         (b) **Participating provider.**

      (2) **Term/duration of the contract.**

      (3) **Manner of contract termination or renewal.**

      (4) **Requirements to maintain the contract, including at a minimum:**

         (a) **Implementation of a person-centered philosophy that guides service delivery.**

         (b) **Fiscal stability.**

         (c) **Ethical practices in business and service delivery.**

         (d) **Adherence to applicable:**

            (i) **Legal requirements.**

            (ii) **Health and safety requirements.**

            (iii) **Risk management practices.**

         (e) **Capacity to fulfill the mission of the network.**

         (f) **Ability to fulfill its potential role in the network.**

         (g) **Conformance to the CARF standards applicable to its operations.**

      (5) **Type of information to be exchanged between the participating provider and the network.**

      (6) **Timeframes for information to be submitted to the network.**

      (7) **Information to be gathered for the analysis of performance.**

      (8) **Financial arrangements, including:**

         (a) **Method of participating provider payment.**

         (b) **Shared risk.**

         (c) **Shared resources.**

   b. **Requires:**

      (1) **Identification of a primary contact at the participating provider.**

      (2) **Notification of changes in the primary contact.**

   c. **Monitors performance of the participating provider on a regular basis.**

   d. **Takes corrective action when the need for improvement is identified.**

Intent Statements

The contract between the network and each participating provider is important to ensure that all participating providers are clear about specific, current requirements for network participation. CARF's accreditation process for networks includes reviewing some contracts and interviewing personnel at the network administration level and at the participating provider level regarding the ongoing implementation of the contracts and their alignment with the elements in this standard.

For service delivery networks, contracts should also include participating provider performance and necessary improvement as outlined in Standard A.12.

Please refer to the Glossary in the CARF standards manual for the definition of *contract*.

Examples

8.a.(1)(b) Roles and responsibilities of participating providers might include expectations regarding services such as the duration and frequency of services, network expectations for participating provider representatives to engage in network planning meetings and processes, and reports that participating providers are expected to provide to the network regarding key performance indicators.

8.a.(4)(g) All participating providers in a service delivery network that are not accredited by a nationally or internationally recognized accreditation organization are expected to implement the subset of CARF's ASPIRE to Excellence® standards for business practices identified in Section B of this Supplement. The contract specifies this requirement, and the leadership of the network should be able to explain to surveyors how this requirement is implemented.

8.a.(8)(b) The financial arrangements identified in a contract might address the distribution of net income/losses throughout the network and the arrangement as it relates to the individual participating provider.

8.a.(8)(c) The financial arrangements related to shared resources identified in a contract might address sharing of in-kind resources, the network's negotiating rates on behalf of the provider pool to obtain a lower rate than an individual provider could negotiate, sharing of central administrative personnel, use of centralized software systems, sharing space, or group purchasing for supplies or services.

Survey Preparation Questions

8. Does the contract with each participating provider specify:
   - Role and responsibilities of the network? ❑ Yes ❑ No
   - Role and responsibilities of the participating provider? ❑ Yes ❑ No
   - Term/duration of the contract? ❑ Yes ❑ No
   - Manner of contract termination or renewal? ❑ Yes ❑ No
   - Requirements to maintain the contract, including:
     – Implementation of a person-centered philosophy that guides service delivery? ❑ Yes ❑ No
     – Fiscal stability? ❑ Yes ❑ No

- – Ethical practices in business
  and service delivery? ❏ Yes ❏ No

- – Adherence to applicable legal
  requirements? ❏ Yes ❏ No

- – Adherence to applicable health
  and safety requirements? ❏ Yes ❏ No

- – Adherence to applicable risk
  management practices? ❏ Yes ❏ No

- – Capacity to fulfill the mission
  of the network? ❏ Yes ❏ No

- – Ability to fulfill its potential role
  in the network? ❏ Yes ❏ No

- – Conformance to the CARF standards
  applicable to its operations? ❏ Yes ❏ No

- ■ Type of information to be exchanged
  between the participating provider
  and the network? ❏ Yes ❏ No

- ■ Timeframes for information to
  be submitted to the network? ❏ Yes ❏ No

- ■ Information to be gathered for
  the analysis of performance? ❏ Yes ❏ No

- ■ Financial arrangements, including:
  - – Method of participating provider
    payment? ❏ Yes ❏ No
  - – Shared risk? ❏ Yes ❏ No
  - – Shared resources? ❏ Yes ❏ No

Does the network require:

- ■ Identification of a primary contact at the
  participating provider? ❏ Yes ❏ No

- ■ Notification of changes in the primary
  contact? ❏ Yes ❏ No

How does the network monitor performance of the participating provider
on a regular basis?

_____

_____

_____

Give examples of corrective actions that have been taken when the need for improvement was identified.

_____

_____

_____

_____

_____

Network A.

9. The network implements policies and written procedures regarding conflicts of interest that address:
   a. Disclosure of conflicts of interest.
   b. Resolution of conflicts of interest.

Intent Statements

Networks and their participating providers may encounter conflicts of interest in business or service delivery. Policies and written procedures can help networks identify conflicts that may arise and can guide the network, including its participating providers, through disclosure and resolution of conflicts.

Standard 1.J.1. in Section 1 of the CARF standards manual relates to this standard by addressing expression of choice by persons served regarding service delivery.

Examples

If a network has a program that it owns and another that is contracted, the network informs persons served about both options rather than giving preference to the network-owned program.

Survey Preparation Questions

9. Describe the network's policies and written procedures regarding conflicts of interest including:

   ■ Disclosure of conflicts of interest.

   _____

   _____

   _____

   ■ Resolution of conflicts of interest.

   _____

   _____

   _____

Give an example of a conflict of interest that has arisen and its resolution.

_____

_____

_____

Network A.

10. When applicable, the network implements policies and written procedures regarding:
   a. Contract negotiation.
   b. Purchase-of-services or fee-for-services contracts.
   c. Group purchasing.
   d. Per capita rate setting.
   e. Group insurance.
   f. Shared/joint risk.
   g. Collective bargaining.
   h. Self-determined voucher arrangements.

Intent Statements

The network implements policies and written procedures that, based on the scope of the network, apply to participating providers in the network and address the topics in this standard.

Examples

10.a. Policies and written procedures regarding contract negotiation may address the network's role in negotiating certain contracts on behalf of participating providers in order to obtain more favorable contract terms.

10.d. Policies and written procedures may reflect that per capita (per individual/person) rate setting can vary throughout the network based on population information, geographic region, and other variables.

10.g. Collective bargaining is a process of negotiation between employers and a group of employees represented by a trade union aimed at reaching agreements to regulate working conditions. Network policies related to collective bargaining might address rights, expectations, or limitations of the network administration when a participating provider engages in collective bargaining with its personnel.

10.h. In self-determined voucher arrangements, a consumer may be authorized by a funding source to use an individually controlled budget, developed according to guidelines from the funding source, so the consumer may directly procure one or more of the services and supports required to address identified needs. Funders may support use of the budgeted funds to cover the costs of services and supports obtained from qualified providers as chosen by the consumer. The consumer may be viewed as the direct employer of or the contractor for services/supports with qualified providers and, therefore, in a lead role concerning how, where, and by whom needed services and supports are provided.

Survey Preparation Questions

10. Does the network have policies and written procedures in place regarding:

■ Contract negotiation?	❑ Yes	❑ No	
■ Purchase-of-services or fee-for-services contracts?	❑ Yes	❑ No	
■ Group purchasing?	❑ Yes	❑ No	
■ Per capita rate setting?	❑ Yes	❑ No	
■ Group insurance?	❑ Yes	❑ No	
■ Shared/joint risk?	❑ Yes	❑ No	
■ Collective bargaining?	❑ Yes	❑ No	
■ Self-determined voucher arrangements?	❑ Yes	❑ No	

How will you demonstrate to the survey team that the policies and procedures are implemented as intended?

_____

_____

Additional Standards for Service Delivery Networks

NOTE: *Service delivery networks must also meet Standards A.11.–16. and, if they deliver services using information and communication technologies, Standards A.17.–23.*

Network A.

11. The network implements a process for quality review of each participating provider that:

   a. Includes verification of:

   (1) Accreditation, if applicable.

   (2) Licensing, if applicable.

   (3) Certification, if applicable.

   b. If the participating provider is not accredited, includes a site review to determine:

   (1) Capacity to provide services in accordance with network requirements.

   (2) Satisfaction of network requirements since the last quality review, if applicable.

   c. Occurs on a regular basis established by the network.

Intent Statements

Regular review of participating providers ensures that quality is maintained within the network through verification of information relevant to provider type.

This review relates to Standard A.8. regarding the contract between the network and the participating provider. Network administration should carefully consider the frequency for regular reviews of participating providers and be able to explain to the survey team how reviews are being completed at sufficiently frequent intervals to support ongoing performance improvement.

11.b. Participating providers that are not accredited by a nationally or internationally recognized accreditation organization must have regular site reviews conducted by network representatives to determine if key practices are being followed. Refer to Section B of this Supplement.

Examples

11.b.(1) The site review conducted by the network may address capacity issues such as geographic coverage, physical plant space, personnel competencies, or equipment needs.

11.c. Regular site reviews may vary in frequency by type of provider or by other identified factors. Some providers, based on population changes, business needs, licensure-inspection timing, or identified areas for improvement may be visited more frequently than other providers.

Survey Preparation Questions

11. Does the network's quality review process for participating providers include verification of:

   ■ Accreditation, if applicable? ❑ Yes ❑ No

   ■ Licensing, if applicable? ❑ Yes ❑ No

   ■ Certification, if applicable? ❑ Yes ❑ No

Describe the site review process for participating providers, including:

■ The timeframe(s) established for site reviews.

_____

– Is the timeframe the same for all participating providers?

❑ Yes   ❑ No

■ How the timeframe(s) was determined.

_____

_____

■ How the network addresses:

– Capacity to provide services in accordance with network requirements.

_____

_____

_____

– Satisfaction of network requirements since the last quality review.

_____

_____

_____

Network A.

12. The network:

    a. Collects data from participating providers, including:

        (1) Results achieved for the persons served (effectiveness).

        (2) Resources used to achieve results for the persons served (efficiency).

        (3) Access to services, including:

            (a) Waiting lists.

            (b) Denials.

            (c) Referrals determined to be ineligible for services.

        (4) Experience of services and other feedback.

        (5) Elements from completed assessments of the persons served.

        (6) Service utilization.

        (7) Complaints, grievances, and appeals.

        (8) Critical incidents.

    (9) **Financial performance.**

    (10) **Other data as necessary to evaluate network and contract performance.**

  b. **At least annually addresses:**

    (1) **Performance of the participating provider in relationship to established targets for:**

      (a) **Results achieved for the persons served (effectiveness).**

      (b) **Resources used to achieve results for the persons served (efficiency).**

      (c) **Access to services, including:**

        (i) **Waiting lists.**

        (ii) **Denials.**

        (iii) **Referrals determined to be ineligible for services.**

      (d) **Experience of services and other feedback.**

      (e) **Elements from completed assessments of the persons served.**

      (f) **Service utilization.**

      (g) **Complaints, grievances, and appeals.**

      (h) **Critical incidents.**

      (i) **Financial performance.**

      (j) **Other data as necessary to evaluate network and contract performance.**

    (2) **Trends.**

    (3) **Areas needing performance improvement.**

    (4) **Actions to address the improvements needed.**

    (5) **Implementation of the actions.**

    (6) **Whether the actions taken accomplished the intended results.**

    (7) **Necessary education and training of participating providers.**

  c. **Aggregates data from participating providers for network:**

    (1) **Performance improvement.**

    (2) **Planning and decision making.**

Intent Statements

To focus on strategic and tactical issues, networks should monitor performance using a series of indicators and targets that are based on data collected from participating providers. Data should include the key topic areas outlined in this standard that also relate to Standard A.8. regarding how the participating provider fulfills the terms of its contract with the network. Data are used by the network to identify areas for performance improvement; support public accountability; and position the network with referral sources, payers and funding sources, and other stakeholders.

This standard is implemented in conjunction with standards in Sections 1.L. and 1.M. from Section 1 of the primary CARF standards manual, as all of the standards in those sections would be applied at the level of the network.

Examples

12.a.(4) Experience of services and other feedback data could focus on persons served, personnel, or other stakeholders. Experience of services and other feedback could also focus on the perspectives of participating providers with topics such as internal

network communication methods or relevance of network policies to provider practices.

12.a.(5) Networks may, as part of the contract with participating providers, require each participating provider to collect data elements from completed assessments of the persons served in order to identify important networkwide planning topics or population service needs. Such information, based on the scope of the network, may include medications currently used by the person served, housing of the person served, most recent primary care visit, or transportation needs of the person served.

12.a.(8) To identify areas of high risk for persons served and for the network, data regarding various types of critical incidents, depending on the scope of the network, might include falls, medication errors, legal actions, technology breaches, or inappropriate use of social media by personnel.

Survey Preparation Questions

12. Does the network collect data from participating providers on:

■ Results achieved for the persons served (effectiveness)?	❏ Yes	❏ No
■ Resources used to achieve results for the persons served (efficiency)?	❏ Yes	❏ No
■ Access to services, including:		
– Waiting lists?	❏ Yes	❏ No
– Denials?	❏ Yes	❏ No
– Referrals determined to be ineligible for services?	❏ Yes	❏ No
■ Experience of services and other feedback?	❏ Yes	❏ No
■ Elements from completed assessments of the persons served?	❏ Yes	❏ No
■ Service utilization?	❏ Yes	❏ No
■ Complaints, grievances, and appeals?	❏ Yes	❏ No
■ Critical incidents?	❏ Yes	❏ No
■ Financial performance?	❏ Yes	❏ No

Are there other data the network collects to evaluate network and contract performance? ❏ Yes   ❏ No

If yes, please describe.

_____

_____

_____

How does the network address:

■ Performance of the participating provider in relationship to established targets for:
  – Results achieved for the persons served (effectiveness)?

  _____

  _____

  – Resources used to achieve results for the persons served (efficiency)?

  _____

  _____

  – Access to services, including:
    - Waiting lists?

    _____

    _____

    - Denials?

    _____

    _____

    - Referrals determined to be ineligible for services?

    _____

    _____

  – Experience of services and other feedback?

  _____

  _____

  – Elements from completed assessments of the persons served?

  _____

  _____

  – Service utilization?

  _____

  _____

- – Complaints, grievances, and appeals?

  _____

  _____

- – Critical incidents?

  _____

  _____

- – Financial performance?

  _____

  _____

- – Other data as necessary to evaluate network and contract performance?

  _____

  _____

- Trends?

  _____

  _____

- Areas needing performance improvement?

  _____

  _____

- Actions to address the improvements needed?

  _____

  _____

- Implementation of the actions?

  _____

  _____

■ Whether the actions taken accomplished the intended results?

_____

_____

■ Education and training of participating providers?

_____

_____

Does the network aggregate the data it
collects from participating providers?　　❏ Yes　　　❏ No

Give examples of how the data have been used for:

■ Performance improvement of the network.

_____

_____

_____

■ Planning and decision making by the network.

_____

_____

_____

Network A.

13. Based on its scope, the network implements a policy regarding persons served that addresses:
   a. Entry/access to the network.
   b. Transitions within the network.
   c. Exit/discharge from the network.

Intent Statements

The network implements a policy to help participating providers determine which persons it is able to serve relative to the scope of the network. The policy should clearly identify the various ways by which a person may access services from the network, as there may be a single or multiple entry points. The policy should also address transitions to ensure that the network offers a well-integrated continuum approach, as well as how exits and discharges from the network are managed.

Examples

A policy might address the expectations for certain criteria that participating providers include in their criteria for entry, transitions, and exits. The policy may recognize that, based on the diversity of provider types, the criteria may differ in certain circumstances. The policy might require certain information to be included in the

assessments of persons served and reported to the network administration. It might address waiting list management and information to be provided in situations when persons served are ineligible for services. It may specify certain point(s) of entry into the network; e.g., whether the network has a single point of entry for persons served, such as a phone number or online portal to initiate an intake screening process, or entry that might occur through providers that are each equipped to implement an intake process.

Survey Preparation Questions

13. Does the network have a policy regarding persons served that addresses:

■ Entry/access to the network? ❑ Yes ❑ No

■ Transitions within the network? ❑ Yes ❑ No

■ Exit/discharge from the network? ❑ Yes ❑ No

How are participating providers informed about the network's policy?

_____

_____

_____

Network A.

14. The network establishes a system for communication about the persons served that provides for exchange of information:
   a. In compliance with legal and regulatory requirements.
   b. As defined by the network.
   c. At established points in the service delivery process.
   d. In accordance with established timeframes.
   e. Between:
      (1) Participating providers and the network.
      (2) Participating providers involved in service delivery for the person served when the person served:
         (a) Receives concurrent services.
         (b) Transitions from one program, service, or level of care to another.

Intent Statements

The network ensures that participating providers are able to exchange key information about persons served in order to provide effective and efficient services and avoid duplicative screening processes. The network's system for communication ensures that all providers within the network safeguard protected health information of all persons served.

Examples

14.a. Policies and procedures may be implemented for the release of information about persons served, and regular audits are conducted among participating providers to verify compliance.

Survey Preparation Questions

14. Describe the system established by the network for communication about the persons served.

_____

_____

_____

How does the network ensure that it complies with legal and regulatory requirements?

_____

_____

_____

At what points in the service delivery process does communication occur?

_____

_____

What are the timeframes for communication?

_____

_____

How does communication occur between:
- Participating providers and the network?

_____

_____

- Participating providers involved in service delivery for a person served receiving concurrent services?

_____

_____

- Participating providers involved in service delivery for a person served transitioning from one program, service, or level of care to another?

_____

_____

Network A.

15. **When a person served in the network receives services from more than one participating provider, the network implements written procedures for the coordination of services.**

Intent Statements

Written procedures are important to reduce duplication among participating providers serving the same person served. Procedures guide participating providers in identifying which provider is responsible for various types of information tracking, communication with stakeholders, and service coordination processes that affect the person served.

Examples

A person served may receive daily home care services and weekly physical therapy at a therapy clinic. Written procedures guide the home care and therapy providers regarding how to communicate with each other about the therapy regimen the person served should be completing on a daily basis.

Survey Preparation Questions

15. Describe the network's procedures for coordination of services when a person served receives services from more than one participating provider.

_____

_____

_____

Are the procedures documented?   ❑ Yes   ❑ No

Network A.

16. **The network conducts an analysis of the services provided:**
   a. **At least quarterly.**
   b. **That addresses, as evidenced by the records of the persons served:**
      (1) **Quality of services.**
      (2) **Appropriateness of services.**
      (3) **Patterns of service utilization.**
      (4) **Timeliness of documentation.**
   c. **On a representative sample of:**
      (1) **Current records.**
      (2) **Closed records.**
   d. **That is performed by personnel who:**
      (1) **Are trained and qualified.**
      (2) **Are not:**
         (a) **The sole reviewer of the services for which he or she is responsible.**
         (b) **Solely responsible for the selection of records to be reviewed.**

e. **That includes:**
   (1) **Performance in relationship to established targets for:**
      (a) **Quality of services.**
      (b) **Appropriateness of services.**
      (c) **Patterns of service utilization.**
      (d) **Timeliness of documentation.**
   (2) **Trends.**
   (3) **Areas needing performance improvement.**
   (4) **Actions to address the improvements needed.**
   (5) **Implementation of the actions.**
   (6) **Whether the actions taken accomplished the intended results.**
   (7) **Necessary education and training of:**
      (a) **Network personnel.**
      (b) **Participating providers.**

Intent Statements

Network personnel frequently review information regarding the services provided by participating providers related to their network contract. Qualified network representatives who know how to conduct utilization reviews should be examining records of persons served to review the services that were provided and using this information to recognize positive performance and identify areas needing improvement. A networkwide representative sample of records should be included in accordance with CARF's definition of *representative sample/sampling* found in the Glossary of the CARF standards manual.

Survey Preparation Questions

16. How often do you conduct an analysis of the services provided?

_____

Describe how the analysis addresses:

■ Quality of services.

_____

_____

_____

■ Appropriateness of services.

_____

_____

_____

■ Patterns of service utilization.

_____

_____

_____

■ Timeliness of documentation.

_____

_____

How do you determine which records to review?

_____

_____

How do you determine who will conduct the reviews?

_____

_____

How did you establish the performance targets for:
■ Quality of services?

_____

_____

_____

■ Appropriateness of services?

_____

_____

_____

■ Patterns of service utilization?

_____

_____

_____

■ Timeliness of documentation?

_____

_____

_____

Describe how the analysis addresses:
■ Performance in relationship to established targets for:
    – Quality of services.

    _____

    _____

    – Appropriateness of services.

    _____

    _____

    – Patterns of service utilization.

    _____

    _____

    – Timeliness of documentation.

    _____

    _____

■ Trends.

    _____

    _____

■ Areas needing performance improvement.

    _____

    _____

■ Actions to address the improvements needed.

    _____

    _____

■ Implementation of the actions.

_____

_____

■ Whether the actions taken accomplished the intended results.

_____

_____

■ Education and training of network personnel.

_____

_____

■ Education and training of participating providers.

_____

_____

Give an example of a change that has been made based on the analysis of services.

_____

_____

_____

_____

_____

Service Delivery Using Information and Communication Technologies

NOTE: *Standards A.17.–23. apply if the network delivers services to persons served using information and communication technologies.*

17. **The network implements written procedures:**
    a. **That address:**
       (1) **Consent of the person served.**
       (2) **Audio recording, video recording, and photographing the person served.**
       (3) **Decision making about the use of information and communication technologies versus in-person services:**
           (a) **At the beginning of services.**
           (b) **Throughout the course of services.**
    b. **To confirm that all necessary technology and/or equipment is available and functions:**
       (1) **Prior to the start of service delivery.**
       (2) **As needed throughout services.**
       (3) **At the location of the:**
           (a) **Person served.**
           (b) **Provider.**
    c. **To verify at each encounter:**
       (1) **The identity of the person served.**
       (2) **The identity of the provider.**
       (3) **The physical location of the person served.**
    d. **To maintain privacy during the delivery of services.**
    e. **To respond to technology disruption that impacts the delivery of services.**

Intent Statements

17.a.(1) The network implements written procedures that describe the method(s) used to obtain consent of the person served and that satisfy its regulatory and payment requirements. Although the network may have already obtained consent for service delivery, this standard is specifically about obtaining consent to participate in service delivery using information and communication technologies.

17.a.(3) Decision making about whether the use of information and communication technologies is appropriate for a person served considers the person's preferences, initial and ongoing assessments, including any risk assessments, under what circumstances it is safe and effective to deliver services at a distance, and reasonable expectation of the person benefiting from services delivered this way. While it may be determined that service delivery via information and communication technologies is appropriate at the beginning of services, it is important to revisit decision making throughout services to address changes in the condition or circumstances of the person served or the service delivery site and the need for in-person (i.e., the person served and provider are in the same physical location) contact.

17.c.(3) Identifying the physical location of the person served is critical should an urgent situation arise that requires response to that location. Based on the identified location of the person served, personnel may also assess whether the service can be

delivered safely where the person served is located. The information may also be used in verifying the credentials of a provider to deliver services in the location of the person served and for billing purposes.

17.d. Maintaining privacy during the delivery of services includes the person served and the provider. If the person served is in a location where privacy may be compromised (e.g., a public library or community center, walking outside, on the job, at home with young children who require supervision), the network addresses the importance of privacy and makes an effort to help problem solve and identify alternatives with the person served. As personnel also could be providing services from locations that are susceptible to losses of privacy, they should take steps to protect the privacy of the persons served in their environment.

17.e. Identifying a back-up method for communication will reduce the impact of technology disruption such as hardware or software failure or environmental conditions on service delivery.

Examples

17.a.(1) The procedures may include obtaining consent to participate in service delivery via information and communication technologies in writing, obtaining consent from a parent or other legal representative on behalf of a child/adolescent, and obtaining consent via virtual platform when applicable.

17.a.(3) The procedures may include regular timeframes/intervals to consider decisions regarding service delivery via information and communication technologies or criteria that trigger reassessment under specific conditions.

In addition to risks related to the status of the person served, the use of information and communication technologies may present risks such as access to or the reliability of technology, equipment, and the internet; receptivity and understanding of the person served regarding the use of technology and equipment; availability, support, and/or interference of members of the family/support system; or safety and/or privacy of the location of the person served during service delivery.

17.b.(2) There may be a need to confirm availability and/or function during the course of services if new technology or equipment is being implemented, there have been problems with the technology or equipment during prior encounters, or someone new will be responsible for operating the equipment or technology.

17.c.(1) Verification of the identity of the person served may be accomplished a variety of ways including asking the person's name, accessing a picture in the record of the person served for comparison, voice recognition from a prior encounter, or asking the person to show a picture ID that includes his or her name.

Survey Preparation Questions

17. Describe what services your network provides via information and communication technologies.

_____

_____

_____

Do you have written procedures:

- That address:
  - Consent of the person served? ❑ Yes ❑ No

  - Audio recording, video recording, and photographing the person served? ❑ Yes ❑ No

  - Decision making about when to use information and communication technology versus in-person services:
    - At the beginning of services? ❑ Yes ❑ No

    - Throughout the course of services? ❑ Yes ❑ No

- To confirm that all necessary technology and/or equipment is available and functions:
  - Prior to the start of service delivery? ❑ Yes ❑ No

  - As needed throughout services? ❑ Yes ❑ No

  - At the location of the:
    - Person served? ❑ Yes ❑ No

    - Provider? ❑ Yes ❑ No

- To verify at each encounter:
  - The identity of the person served? ❑ Yes ❑ No

  - The identity of the provider? ❑ Yes ❑ No

  - The physical location of the person served? ❑ Yes ❑ No

- To maintain privacy during the delivery of services? ❑ Yes ❑ No

- To respond to technology disruption that impacts the delivery of services? ❑ Yes ❑ No

How do you ensure that these written procedures are consistently implemented?

_____

_____

_____

Where are these procedures documented?

_____

_____

18. **As appropriate, personnel who deliver services via information and communication technologies receive documented competency-based training on:**
    a. **How to deliver services effectively via information and communication technologies, including:**
       (1) **Human factors.**
       (2) **Crisis response procedures.**
       (3) **Assessment of risk factors in the environment of the person served.**
       (4) **How to modify treatment techniques/interventions to deliver services virtually.**
    b. **Equipment used in service delivery, including hardware and software:**
       (1) **Features.**
       (2) **Setup.**
       (3) **Use.**
       (4) **Maintenance.**
       (5) **Safety considerations.**
       (6) **Infection control.**
       (7) **Troubleshooting.**

Intent Statements

For service delivery to be effective, personnel are trained how to deliver or adapt services at a distance, how to use the equipment and technology needed to deliver those services, and how to guide persons served, members of the family/support system, and others in the location of the person served on their use.

18.a.(2) Responding to a crisis when the person served is in a different location requires a different skill set than responding in person. Regardless of the activity occurring, a person served could experience a medical emergency, a fall or other injury, a medication error, suicidal ideation, threat from another person at the location, or other crisis that requires immediate attention. Comprehensive training on crisis response procedures helps prepare personnel who provide services via information and communication technologies to effectively and efficiently respond to the needs of a person served who experiences a crisis during an encounter.

18.a.(4) Most providers have been trained to deliver services, treatment, and/or interventions in person. With the increasing and, in some cases, exclusive provision of services using information and communication technologies, providing personnel with training on how to modify and adapt treatment techniques/interventions is essential to effective service delivery. Depending upon the type of services being provided by the network, modifications may range from minor to more substantial.

Examples

18.a.(1) Training on human factors may address strategies for communication with persons served and, if applicable, members of the family/support system who are in a different location than the provider, understanding nonverbal communication, establishing rapport, maintaining eye contact, and providing a conducive environment including lighting, background, and staying framed in the field of the camera.

18.a.(2) Training on crisis response procedures may include how to identify a crisis situation, assessing the situation and the associated level of risk, identifying and

implementing a response, and reporting and following up on the situation as appropriate.

18.a.(3) Personnel are trained to observe and assess risks in the environment of the person served. For example, personnel may observe:

- Someone in the environment of the person served who speaks or otherwise behaves in a way that seems threatening to the person served; nonverbal communication on the part of the person served signaling a threat; new bruising, cuts, or other signs of injury; etc.

- Trip hazards such as rugs, electrical cords, spills, or clutter for someone with balance, sensory, or ambulation concerns or who uses equipment such as a walker, cane, or wheelchair.

- Guns, knives, or other items that could cause harm to the person served.

- Medications that are not properly stored/secured.

- Lack of supervision for someone with cognitive impairment or a child who is young to be home alone.

18.b.(6) Infection control addresses equipment used at the location of the person served and the provider. For example:

- Equipment that touches any part of the body or is used to look into someone's eyes, ears, or mouth is properly sanitized between each use.

- The person served and family members in the home are instructed in proper handwashing technique; shielding coughs and sneezes; and the use, if necessary, of gloves or masks to minimize risks associated with sharing equipment.

- When the person served is using a computer at a school or library, the keyboard, mouse, and headset are cleaned appropriately before they are used.

Survey Preparation Questions

18. Describe the competency-based training provided to personnel on how to deliver services effectively via information and communication technologies, including:

- Human factors.

_____

_____

- Crisis response procedures.

_____

_____

- Assessment of risk factors in the environment of the person served.

_____

_____

■ How to modify treatment techniques/interventions to deliver services virtually.

_____

_____

Describe the competency-based training provided to personnel on equipment, including hardware and software, in the following areas:

■ Features.

_____

_____

■ Setup.

_____

_____

■ Use.

_____

_____

■ Maintenance.

_____

_____

■ Safety considerations.

_____

_____

■ Infection control.

_____

_____

■ Troubleshooting.

_____

_____

How and where is this training documented?

_____

_____

19. As appropriate, instruction and training are provided:

    a. To:

        (1) Persons served.

        (2) Members of the family/support system.

        (3) Others.

    b. On equipment used in service delivery, including:

        (1) Features.

        (2) Setup.

        (3) Use.

        (4) Maintenance.

        (5) Safety considerations.

        (6) Infection control.

        (7) Troubleshooting.

    c. On creating an appropriate environment to receive services.

Examples

19.c. Environmental considerations include:

- Being in a location that is safe, e.g., indoors if the weather is bad, parked if sitting in a car, in an area that is lit if outside and it is after dark.

- Being in a location that provides privacy, whether at home, work, or in a community setting such as a library, school, or community center.

- Access to the necessary technology, equipment, and internet service to successfully connect.

- Human factors as outlined in the example for Standard A.18.a.(1).

- Expectations such as being on time and having equipment or materials prepared for sessions that are scheduled.

Survey Preparation Questions

19. Describe how instruction and training are provided to the persons served, members of the family/support system, and others.

_____

_____

_____

Do the instruction and training on equipment used in service delivery include:

- Features?   ❑ Yes   ❑ No

- Setup?   ❑ Yes   ❑ No

■ Use?	❑ Yes	❑ No
■ Maintenance?	❑ Yes	❑ No
■ Safety considerations?	❑ Yes	❑ No
■ Infection control?	❑ Yes	❑ No
■ Troubleshooting?	❑ Yes	❑ No

Describe the instruction and training provided on creating an appropriate environment to receive services.

_____

_____

_____

How will you demonstrate or verify this for the survey team?

_____

_____

Network A.

20. **Service delivery via information and communication technologies includes:**
    a. **The provision of information to the persons served on:**
       (1) **How to contact the network.**
       (2) **The expected timeframe for response.**
    b. **Personnel to provide technical assistance with accessing services provided by the network.**
    c. **Personnel to address questions related to service delivery.**
    d. **Based on identified need:**
       (1) **An appropriate facilitator at the location of the person served.**
       (2) **Modification to:**
          (a) **Treatment techniques/interventions.**
          (b) **Equipment.**
          (c) **Materials.**
          (d) **Environment at the location of the person served, including:**
             (i) **Accessibility.**
             (ii) **Privacy.**
             (iii) **Usability of equipment.**

Examples

20.a. The network provides information to the persons served on how to contact the network and when persons served may expect a response. This may be information on network hours of operation, methods persons should use to contact the network when they have specific needs, the typical timeframe in which the persons served can expect a response to inquiries, and whether contacts will returned in evenings or over weekends.

20.c. Between scheduled sessions persons served and others who may be assisting them might have questions related to their individual plans, e.g., regarding medication use; a home exercise program; assisting with transfers; or how to contact other providers, vendors, or support services.

20.d.(1) Depending on the purpose of the session and the needs of the person served, professional personnel, support personnel, family members, or caregivers might function in the role of facilitator. Use and selection of a facilitator also consider the preferences of the person served and who can provide appropriate support or may pose challenges to the delivery of services, e.g., a family member who tends to speak for the person served or is otherwise disruptive during service delivery.

20.d.(2) Examples of modifications include the use of assistive technology such as alternative keyboards and headphones, close-captioning software, a sign language interpreter, materials in large font or braille, the use of appropriate lighting and backgrounds so faces can be clearly seen, and the provision of printed materials and audio recordings to supplement information provided during an encounter.

20.d.(2)(d)(ii) Privacy considerations may include whether the environment where the person served is located provides for confidentiality during interactions between the provider and person served.

Survey Preparation Questions

20. Are persons served provided information on:

- How to contact the network?   ❑ Yes   ❑ No

- The expected timeframe for response?   ❑ Yes   ❑ No

How do personnel provide technical assistance with accessing the services provided by the network?

_____

_____

_____

Does your network have personnel to address questions related to service delivery?

_____

_____

_____

Describe how you ensure that, based on identified need, there is an appropriate facilitator at the location of the person served.

_____

_____

_____

Give an example for each of the following areas of how service delivery has been modified based on the needs of the person served:

■ Treatment techniques/interventions.

_____

_____

_____

■ Equipment.

_____

_____

_____

■ Materials.

_____

_____

_____

■ Environment at the location of the person served, including:
  – Accessibility.

_____

_____

_____

  – Privacy.

_____

_____

_____

  – Usability of equipment.

_____

_____

_____

21. Prior to the start of each session:

   a. Any participants in the session in addition to the person served are identified.

   b. The network provides information that is relevant to the session.

Examples

21.a. In addition to the person served and provider, other participants in the session may include members of the family/support system, caregivers or others who are assisting the person served; other members of the service delivery team; a supervisor who is observing the provider; and students or other trainees.

21.b. Information may be shared on the credentials of the provider, structure and timing of services, recordkeeping, scheduling, contact between sessions, privacy and security, potential risks, safety considerations, confidentiality, billing, rights and responsibilities.

Service delivery using information and communication technologies may be ongoing rather than session-based, e.g., supporting persons served in their living environment through the use of video, audio, or motion monitoring. In addition to sharing relevant information about the use of ICT at the initiation of services, the network may establish a minimum frequency, such as at least annually, to review that information; may review it based on need, such as when the person served or a member of the family/support system has questions; or may link it to other activities in the service process such as periodic review of the person's individual plan, goals, and preferences.

Survey Preparation Questions

21. Describe how the following are accomplished prior to the start of each session:

■ Any participants in the session in addition to the person served are identified.

_____

_____

_____

■ The network provides information that is relevant to the session.

_____

_____

_____

Give some examples of the information that is provided.

_____

_____

_____

_____

Network A.

22. The organization maintains equipment in accordance with manufacturers' recommendations.

Survey Preparation Questions

22. How will you demonstrate or verify for the survey team that equipment is maintained in accordance with manufacturers' recommendations?

_____

_____

_____

Network A.

23. Emergency procedures address the unique aspects of service delivery via information and communication technologies, including:
   a. Identification of an emergency contact for the person served, including phone number.
   b. Identification of local emergency resources, including phone numbers.
   c. The provider becoming familiar with the emergency procedures at the location of the person served, if the procedures exist.

Intent Statements

In case of emergency, the provider has immediate access to emergency contact information for the person served and information on local emergency resources, including their phone numbers.

Examples

23.a.–b. Through the intake process the network gathers information from the person served on an emergency contact and local emergency resources such as emergency response systems and law enforcement.

23.c. When the person served is located at an organization or a community setting, the provider becomes familiar with the procedures of that setting in the event there is an emergency involving the person served.

If a person served who is at home utilizes a medical alert system such as Life Alert, the provider becomes familiar with how the system is activated in case of an emergency.

Survey Preparation Questions

23. Do you have emergency procedures in place that address the unique aspects of service delivery via information and communication technologies?

❑ Yes   ❑ No

Do these procedures include:

■ Identification of an emergency contact for the person served, including phone number?   ❑ Yes   ❑ No

■ Identification of local emergency resources, including phone numbers?   ❑ Yes   ❑ No

■ The provider becoming familiar with the emergency procedures at the location of the person served, if the procedures exist? ❑ Yes ❑ No

How do you ensure that these procedures can be implemented in the event of an emergency?

_____

_____

_____

Section B

Standards for Unaccredited Participating Providers

The network implements a quality review process for all participating providers, regardless of size or budget, with which the network has a contract.

For service delivery networks, this quality review applies to their network-related service provision and can be met in the following ways:

- CARF accreditation of the participating providers.
- Accreditation of the participating providers by another nationally or internationally recognized accreditation organization.
- If the participating providers are not accredited, network implementation of a regular site review process of the providers that addresses their application of the standards in this section, which are a subset of CARF's ASPIRE to Excellence® standards for business practices.

Please note that the network can use any combination of these approaches for its participating providers, or it can choose a single approach for all providers. For example, some providers might be CARF accredited, some might be accredited by other accreditors, and some might implement the standards in this section.

If a participating provider is accredited, its accreditation should clearly include the programs/services provided to persons served in the network.

The standards included in this section have been carefully selected with consideration of the diversity, capacity, and volume of participating providers in networks seeking accreditation to address key topics in the areas of legal requirements, financial planning and management, health and safety, workforce development and management, rights of persons served, and accessibility.

The site reviews of unaccredited participating providers correspond to Standard A.8.a. regarding the contract between the network and the participating provider and Standard A.11.b. regarding the network's quality-review process for participating providers. Network administration should carefully consider the frequency for these reviews to be able to explain to CARF surveyors how its review process and frequency are sufficient to promote service excellence and minimize risk.

Network B.

1. **The participating provider demonstrates a process to comply with the following obligations:**
   a. **Legal.**
   b. **Regulatory.**
   c. **Confidentiality.**
   d. **Reporting.**
   e. **Licensing.**
   f. **Contractual.**
   g. **Debt covenants.**
   h. **Corporate status.**

      i. Rights of the persons served.

      j. Privacy of the persons served.

     k. Employment practices.

      l. Mandatory employee testing.

Intent Statements

The participating provider should engage in activities designed to promote awareness, understanding, and satisfaction of its various obligations at all times. Satisfaction of obligations is necessary for the participating provider's success, sustained existence, and ability to positively affect the lives of persons served. Failure to satisfy obligations may result in monetary or other penalties, potentially impacting the viability of the participating provider, as well as harm to those the obligations are intended to protect. The participating provider should monitor its environments for new and revised obligations and utilize knowledgeable resources to become familiar with obligations and the requirements to meet them.

Survey Preparation Questions

1. Describe your process to comply with the following obligations:

■ Legal.

_____

_____

_____

■ Regulatory.

_____

_____

_____

■ Confidentiality.

_____

_____

_____

■ Reporting.

_____

_____

_____

■ Licensing.

_____

_____

_____

■ Contractual.

_____

_____

_____

■ Debt covenants.

_____

_____

_____

■ Corporate status.

_____

_____

_____

■ Rights of the persons served.

_____

_____

_____

■ Privacy of the persons served.

_____

_____

_____

■ Employment practices.

_____

_____

_____

_____

■ Mandatory employee testing.

_____

_____

_____

Network B.

2. The participating provider's policies and written procedures address:
 a. Confidential administrative records.
 b. The records of the persons served.
 c. Security of all records.
 d. Confidentiality of records.
 e. Compliance with applicable laws concerning records.
 f. Timeframes for documentation in the records of the persons served.

Intent Statements

In order to protect the privacy of all stakeholders and any confidential information that its records may contain, a participating provider ensures that it addresses the applicable legal and regulatory requirements concerning privacy of health information and confidential records. Security includes such things as storage, protection, retention, and destruction of records. Safeguards such as reasonable protection against fire, water damage, and other hazards do not need to be described in writing.

This standard applies to current and historical records and to hard copy records as well as electronic records.

Participating providers are encouraged to review current provisions of legislation on freedom of information and protection of privacy, such as HIPAA and Health Information Technology for Economic and Clinical Health (HITECH) in the U.S. and provincial/territorial privacy laws in Canada, for potential impact on the maintenance and transmission of protected health information. Of particular note are provisions related to information security, privacy, and electronic data interchange.

Survey Preparation Questions

2. Do you have policies and written procedures addressing:

 ■ Confidential administrative records? ❑ Yes ❑ No

 ■ The records of the persons served? ❑ Yes ❑ No

 ■ Security of all records? ❑ Yes ❑ No

 ■ Confidentiality of records? ❑ Yes ❑ No

■ Compliance with applicable laws
concerning records? ❑ Yes ❑ No

■ Timeframes for documentation in
the records of the persons served? ❑ Yes ❑ No

Describe the safeguards used to protect and secure:

■ Confidential administrative records.

_____

_____

■ The records of the persons served.

_____

_____

Network B.

3. The participating provider's financial planning and management activities:
   a. Are designed to meet:
      (1) Established outcomes for the persons served.
      (2) Organizational performance objectives.
   b. Include:
      (1) Preparation of an annual budget.
      (2) Fiscal policies and written procedures, including internal control practices.
      (3) Documented evidence of annual review or audit of the financial statements of the participating provider conducted by an independent accountant authorized by the appropriate authority.

Intent Statements

3.b.(2) To reduce risk, it is important that the participating provider, regardless of size, establishes who has responsibility and authority in all financial activities, such as in purchasing materials and capital equipment, writing checks, managing investments, and billing.

3.b.(3) An *accountant authorized by the appropriate authority* means a CPA in the U.S.; in countries outside the U.S., the terminology for a similar accountant qualified to conduct a review or audit would be used. The CPA, chartered accountant, or similar accountant retained must be independent of the organization; i.e., may not be contracted with the organization for its regular accounting needs, represent the organization's funding sources, or be a member of the governance authority.

It is important for the participating provider to determine that its financial position is accurately represented in its financial statements. Accountants may typically undertake three types of engagements: audit, review, and compilation. Each is described in more detail below, but in summary, the audit is the most extensive effort and accordingly the highest cost to the participating provider.

An audit requires an examination of the financial statements in accordance with generally accepted auditing standards, including tests of the accounting records

and other auditing procedures as necessary. An audit will result in a report expressing an opinion as to conformance of the financial statements to generally accepted accounting principles.

A review consists principally of inquiries of company personnel and analytical procedures applied to financial data. It is substantially less in scope than an examination using generally accepted auditing standards. Typically, a review will result in a report expressing limited assurance that there are not material modifications that should be made to the statements.

As part of a compilation engagement, an accountant will compile the financial statements based on management representations without expressing any assurance on the statements. A compilation will not meet this standard.

Survey Preparation Questions

3. Explain how financial planning and management are designed to meet:

■ Established outcomes for the persons served.

_____

_____

_____

_____

■ Organizational performance objectives.

_____

_____

_____

_____

Do you prepare an annual budget?　　　❏ Yes　　　　❏ No

Describe your fiscal policies and written procedures, including internal control practices.

_____

_____

_____

Explain your process for obtaining annual financial review or audit of your organization's financial statements by an independent accountant.

_____

_____

_____

Network B.

4. The participating provider demonstrates ongoing attention to the health and safety of the environment.

Intent Statements

The participating provider demonstrates an overall concern for the health and safety of the persons served and personnel including ongoing attention to safe practices and reduction of health and safety risks in the environment and consideration of any applicable health and safety requirements of local or other governmental authorities. Documentation of daily maintenance tasks is not required.

Survey Preparation Questions

4. Beyond inspections and tests of emergency procedures, what are some ways in which you strive to provide a healthy and safe environment?

_____

_____

_____

List any health or safety concerns that have been identified.

_____

_____

_____

Describe the steps that will be taken to address those concerns and the personnel responsible.

_____

_____

_____

_____

If no physical locations are used for administration or delivery of any services, describe how you address health and safety of the environment in the location of the persons served.

_____

_____

_____

_____

Network B.

5. Personnel receive documented competency-based training:

    a. At orientation in the following areas:

        (1) Health and safety practices.

        (2) Identification of unsafe environmental factors.

        (3) Emergency procedures.

        (4) Evacuation procedures, if appropriate.

        (5) Identification of critical incidents.

        (6) Reporting of critical incidents.

        (7) Medication management, if appropriate.

        (8) Reducing physical risks.

        (9) Workplace violence.

    b. At least annually in the following areas:

        (1) Health and safety practices.

        (2) Identification of unsafe environmental factors.

        (3) Emergency procedures.

        (4) Evacuation procedures, if appropriate.

        (5) Identification of critical incidents.

        (6) Reporting of critical incidents.

        (7) Medication management, if appropriate.

        (8) Reducing physical risks.

        (9) Workplace violence.

Survey Preparation Questions

5. Describe the competency-based training provided to personnel at orientation in the following areas:

- Health and safety practices.

- Identification of unsafe environmental factors.

- Emergency procedures.

■   Evacuation procedures, if appropriate.

_____

_____

■   Identification of critical incidents.

_____

_____

■   Reporting of critical incidents.

_____

_____

■   Medication management, if appropriate.

_____

_____

■   Reducing physical risks.

_____

_____

■   Workplace violence.

_____

_____

Where is the training provided to personnel at orientation documented?

_____

_____

Describe the competency-based training for personnel at least annually
in the following areas:

■   Health and safety practices.

_____

_____

■ Identification of unsafe environmental factors.

_____

_____

■ Emergency procedures.

_____

_____

■ Evacuation procedures, if appropriate.

_____

_____

■ Identification of critical incidents.

_____

_____

■ Reporting of critical incidents.

_____

_____

■ Medication management, if appropriate.

_____

_____

■ Reducing physical risks.

_____

_____

■ Workplace violence.

_____

_____

Where is the training provided to personnel at least annually documented?

_____

_____

Network B.

6. There are written emergency procedures:
  a. For:
    (1) Fires.
    (2) Bomb threats.
    (3) Natural disasters.
    (4) Utility failures.
    (5) Medical emergencies.
    (6) Violent or other threatening situations.
  b. That satisfy:
    (1) The requirements of applicable authorities.
    (2) Practices appropriate for the locale.
  c. That address, as follows:
    (1) When evacuation is appropriate.
    (2) Complete evacuation from the physical facility.
    (3) When sheltering in place is appropriate.
    (4) The safety of all persons involved.
    (5) Accounting for all persons involved.
    (6) Temporary shelter, when applicable.
    (7) Identification of essential services.
    (8) Continuation of essential services.
    (9) Emergency phone numbers.
    (10) Notification of the appropriate emergency authorities.
    (11) Communication with relevant stakeholders.

Intent Statements

Established emergency procedures that detail appropriate actions to be taken, including communication with relevant stakeholders, consider any unique needs of persons served, and are appropriate and specific to the service delivery site or location promote safety in all types of emergencies.

Being prepared and knowing what to do help the persons served and personnel to respond in all emergency situations, especially those requiring evacuation. The evacuation procedure guides personnel to assess the situation, to take appropriate planned actions, and to lay the foundation for continuation of essential services.

Survey Preparation Questions

6. Describe your emergency procedures in the following areas:

■ Fires.

_____

_____

_____

■ Bomb threats.

_____

_____

_____

■ Natural disasters.

_____

_____

_____

■ Utility failures.

_____

_____

_____

■ Medical emergencies.

_____

_____

_____

■ Violent or other threatening situations.

_____

_____

_____

Describe how these procedures meet the requirements of applicable authorities.

_____

_____

_____

How do you ensure that they are appropriate to your locale?

_____

_____

_____

How do your evacuation procedures address:
- When evacuation is appropriate?

_____

_____

_____

- Complete evacuation from your physical facility?

_____

_____

_____

- When sheltering in place is appropriate?

_____

_____

_____

- Safety of all persons involved?

_____

_____

_____

■ Accounting for all persons involved?

_____

_____

_____

■ Temporary shelter, when applicable?

_____

_____

_____

■ Identification of essential services?

_____

_____

_____

■ Continuation of essential services?

_____

_____

_____

■ Emergency phone numbers?

_____

_____

■ Notification of the appropriate emergency authorities?

_____

_____

■ Communication with relevant stakeholders?

_____

_____

Network B.

7. The participating provider has evacuation routes that are:
   a. Accessible.
   b. Understandable to:
      (1) Persons served.
      (2) Personnel.
      (3) Other stakeholders, including visitors.

Survey Preparation Questions

7. Describe how you ensure that evacuation routes are accessible.

_____

_____

_____

How did you ensure that evacuation routes are understandable to:

■ Persons served?

_____

_____

_____

■ Personnel?

_____

_____

■ Other stakeholders, including visitors?

_____

_____

_____

Network B.

8. An unannounced test of each emergency procedure:
   a. Is conducted:
      (1) At least annually.
      (2) On each shift.
      (3) At each location.
   b. Includes, as relevant to the emergency procedure, a complete actual or simulated physical evacuation drill.
   c. Is analyzed for performance that addresses:
      (1) Areas needing improvement.
      (2) Actions to address the improvements needed.
      (3) Implementation of the actions.

> **(4) Necessary education and training of personnel.**
>
> **(5) Whether the actions taken accomplished the intended results.**
>
> **d. Is evidenced in writing, including the analysis.**

NOTE: *This standard does not apply to services provided in private homes or private apartments.*

Intent Statements

Each emergency procedure addressed in Standard B.6. (fires, bomb threats, natural disasters, utility failures, medical emergencies, and violent or other threatening situations) is tested, analyzed for performance, and documented, including the analysis. Practicing emergency procedures helps the persons served and personnel to better respond in actual emergency situations. Simulated evacuations should be limited to situations where actual evacuations are not possible. Emergency procedure testing is part of a participating provider's performance improvement activities. Analysis of results of the tests may indicate ways to improve performance.

Survey Preparation Questions

8. Describe how you test your emergency procedures, including:

- Methods used.

- How often.

Are tests of each emergency procedure conducted:

- At least annually?   ❑ Yes   ❑ No

- On each shift?   ❑ Yes   ❑ No

- At each location?   ❑ Yes   ❑ No

Do the tests include, as appropriate
to the procedure, a complete actual
or simulated physical evacuation drill?   ❑ Yes   ❑ No

Explain how information gathered from tests of the emergency procedures is analyzed.

Does the analysis address:

- Areas needing improvement?   ❑ Yes   ❑ No

- Actions to address the improvements
  needed?   ❑ Yes   ❑ No

- Implementation of the actions?   ❑ Yes   ❑ No

- Necessary education and training
  of personnel?   ❑ Yes   ❑ No

- Whether the actions taken accomplished
  the intended results?   ❑ Yes   ❑ No

Are the tests of emergency procedures
and the analyses documented?   ❑ Yes   ❑ No

How has the analysis either resulted in improvements or verified existing practice?

_____

_____

_____

_____

Network B.

9. If a participating provider provides services in locations that are not owned/leased or controlled/operated by the participating provider, it implements written procedures that address safety at the service delivery site:

  a. For:
   (1) Persons served.
   (2) Personnel.

  b. Including:
   (1) Consideration of any emergency procedures that may already be in place at the service delivery site.
   (2) The physical environment, including accessibility, of the service delivery site.
   (3) Basic needs in the event of an emergency.
   (4) Actions to be taken in the event of an emergency.
   (5) Provisions for communication by personnel while providing services regarding decisions to continue or discontinue services.

Intent Statements

Please refer to the Glossary in the CARF standards manual for the definition of _controlled/operated._

Written procedures address the uniqueness of the settings and types of situations that may be encountered, and when decisions need to be made, potentially on an immediate basis, to ensure the safety of persons served and personnel under a variety of circumstances.

This standard applies to programs that include community outings or community integration activities for the persons served and to programs that provide all of their services in locations that are not owned/leased or controlled/operated by the participating provider, including private homes.

9.b.(1) If services are provided in a location that is separately licensed or regulated, there may already be emergency procedures in place. If personnel or persons served are present in the event of an emergency, they would follow those procedures.

Examples

Services may be provided at sites including, but not limited to, a library, school, sports or performing arts venue, movie theatre, volunteer site, job site, private home, etc. Based on the service delivery site, the participating provider considers actions to be taken in the event of emergencies such a fires, bomb threats, natural disasters, utility failures, medical emergencies, and violent or other threatening situations.

Survey Preparation Questions

9. Does the participating provider provide any services in locations that are not owned/leased or controlled/operated by the participating provider, such as locations in the community or private homes?

    ❑ Yes   ❑ No

    If *Yes,* describe what services are provided in these locations.

    _____

    _____

    _____

    _____

    Are there written procedures in place that address safety at the service delivery site for:

    ■ Persons served?   ❑ Yes   ❑ No

    ■ Personnel?   ❑ Yes   ❑ No

    Do the written procedures include:

    ■ Consideration of any emergency procedures that may already be in place at the service delivery site?   ❑ Yes   ❑ No

    ■ The physical environment, including accessibility, of the service delivery site?   ❑ Yes   ❑ No

    ■ Basic needs in the event of an emergency? ❑ Yes   ❑ No

    ■ Actions to be taken in the event of an emergency?   ❑ Yes   ❑ No

    ■ Provisions for communication by personnel while providing services regarding decisions to continue or discontinue services?   ❑ Yes   ❑ No

Where are these procedures documented?

_____

_____

How do you ensure that personnel and persons served are aware of and know how to consistently implement these procedures if necessary?

_____

_____

_____

Network B.

10. There is ready access:
   a. At each location.
   b. To:
      (1) First aid expertise.
      (2) First aid equipment.
      (3) First aid supplies.
      (4) Relevant emergency information on the:
         (a) Persons served.
         (b) Personnel.

Intent Statements

It is important to provide a safe setting for the persons served and personnel. The adequacy of first aid expertise reflects the needs of the population served and the service setting. Necessary emergency resources, including people trained to respond and the location of first aid equipment and supplies, are known and quickly available during hours of operation. First aid supplies are checked for expiration and availability of adequate supply through a systematic process and replenished and replaced as needed.

10.b.(4) The participating provider has a mechanism in place to ensure that emergency information is kept current on persons served and personnel.

Survey Preparation Questions

10. Describe how your organization has ready access to the following at each location:

■ First aid expertise.

_____

_____

■ First aid equipment.

_____

_____

- First aid supplies.

_____

_____

- Relevant emergency information on:
  - Persons served.

_____

_____

  - Personnel.

_____

_____

Network B.

11. **The participating provider implements written procedures regarding critical incidents that:**
    a. **Specify the following critical incidents:**
       (1) **Medication errors.**
       (2) **Use of seclusion.**
       (3) **Use of restraint.**
       (4) **Incidents involving injury.**
       (5) **Communicable disease.**
       (6) **Infection control.**
       (7) **Aggression or violence.**
       (8) **Use and unauthorized possession of weapons.**
       (9) **Wandering.**
       (10) **Elopement.**
       (11) **Vehicular accidents.**
       (12) **Biohazardous accidents.**
       (13) **Unauthorized use and possession of legal or illegal substances.**
       (14) **Abuse.**
       (15) **Neglect.**
       (16) **Suicide and attempted suicide.**
       (17) **Sexual assault.**
       (18) **Overdose.**
       (19) **Other sentinel events.**
    b. **Include:**
       (1) **Prevention.**
       (2) **Reporting.**
       (3) **Documentation.**

(4) Remedial action.

(5) Timely debriefings conducted following critical incidents.

Intent Statements

Any of the incidents listed above could occur in any organization. In developing its procedures for critical incidents, a participating provider should consider the persons served, personnel, and other stakeholders, such as visitors to its program. A participating provider is not required to have a separate procedure for each type of incident; however, the organization's written procedures for prevention, reporting, documentation, remedial action, and timely debriefings should consider the possibility of each type of occurrence.

Survey Preparation Questions

11. Describe your written procedures for critical incidents, including:

■ Medication errors.

_____

_____

■ Use of seclusion.

_____

_____

■ Use of restraint.

_____

_____

■ Incidents involving injury.

_____

_____

■ Communicable diseases.

_____

_____

■ Infection control.

_____

_____

- Aggression or violence.

  _____

  _____

- Use and unauthorized possession of weapons.

  _____

  _____

- Wandering.

  _____

  _____

- Elopement.

  _____

  _____

- Vehicular accidents.

  _____

  _____

- Biohazardous accidents.

  _____

  _____

- Unauthorized use and possession of legal or illegal substances.

  _____

  _____

- Abuse.

  _____

  _____

■ Neglect.

_____

_____

■ Suicide and attempted suicide.

_____

_____

■ Sexual assault.

_____

_____

■ Overdose.

_____

_____

■ Other sentinel events.

_____

_____

How do you address prevention of critical incidents?

_____

_____

_____

How are critical incidents reported?

_____

_____

_____

How are critical incidents documented?

_____

_____

_____

When necessary, how is remedial action identified?

_____

_____

_____

How do you ensure that such actions are completed?

_____

_____

_____

Describe your process for conducting timely debriefings following critical incidents.

_____

_____

_____

Network B.

12. A written analysis of all critical incidents is provided to or conducted by leadership:
   a. At least annually.
   b. That addresses:
      (1) Causes.
      (2) Trends.
      (3) Areas needing improvement.
      (4) Actions to address the improvements needed.
      (5) Implementation of the actions.
      (6) Whether the actions taken accomplished the intended results.
      (7) Necessary education and training of personnel.
      (8) Prevention of recurrence.
      (9) Internal reporting requirements.
      (10) External reporting requirements.

Intent Statements

An integrated approach to the management of critical incidents is essential to effective risk management.

Survey Preparation Questions

12. Describe the analysis of all critical incidents provided to or conducted by leadership.

_____

_____

_____

_____

Is this written analysis completed
at least annually?   ❑ Yes   ❑ No

Describe how it addresses:

■ Causes.

_____

_____

■ Trends.

_____

_____

■ Areas needing improvement.

_____

_____

■ Actions to address the improvements needed.

_____

_____

■ Implementation of the actions.

_____

_____

■ Whether the actions taken accomplished the intended results.

_____

_____

■ Necessary education and training of personnel.

_____

_____

■ Prevention of recurrence.

_____

_____

■ Internal reporting requirements.

_____

_____

■ External reporting requirements.

_____

_____

Network B.

13. **The participating provider implements written procedures regarding infections and communicable diseases:**
    a. **That address:**
       (1) **Prevention, including:**
           (a) **Appropriate use of standard or universal precautions.**
           (b) **Vaccination, if applicable.**
           (c) **Screening, if applicable.**
       (2) **Identification.**
       (3) **Reporting.**
       (4) **Investigation.**
       (5) **Control/mitigation.**
    b. **That include training on the procedures for:**
       (1) **Persons served.**
       (2) **Personnel.**
       (3) **Other stakeholders.**

Intent Statements

The participating provider takes a comprehensive approach to prevention and management of infections and communicable diseases. This includes consideration of legal and regulatory requirements to which the organization is subject, which may vary by state/province or other jurisdiction as well as type of organization, and relevant training for persons served, personnel, and other stakeholders.

13.a.(1)(a) In Canada this may be referred to as *routine practices*.

Survey Preparation Questions

13. Are there written procedures in place regarding infections and communicable diseases?

❑ Yes ❑ No

Do these procedures address:

■ Prevention, including:

   – Appropriate use of standard or universal precautions? ❑ Yes ❑ No

   – Vaccination, if applicable? ❑ Yes ❑ No

   – Screening, if applicable? ❑ Yes ❑ No

■ Identification? ❑ Yes ❑ No

■ Reporting? ❑ Yes ❑ No

■ Investigation? ❑ Yes ❑ No

■ Control/mitigation? ❑ Yes ❑ No

How do you ensure that these procedures are consistently implemented?

_____

_____

_____

Describe how training on these procedures is provided for:

■ Persons served.

_____

_____

■ Personnel.

_____

_____

■ Other stakeholders.

_____

_____

Network B.

14. When transportation is provided for persons served, there is evidence of:
   a. Appropriate licensing of all drivers.
   b. Regular review of driving records of all drivers.

     c. Insurance covering:

       (1) Vehicles.

       (2) Passengers.

     d. Safety features in vehicles.

     e. Safety equipment.

     f. Accessibility.

     g. Training of drivers regarding:

       (1) The organization's transportation procedures.

       (2) The unique needs of the persons served.

     h. Written emergency procedures available in the vehicle(s).

     i. Communication devices available in the vehicle(s).

     j. First aid supplies available in the vehicle(s).

     k. Maintenance of vehicles owned or operated by the organization according to manufacturers' recommendations.

     l. If services are contracted, a documented review of the contract at least annually against elements a. through k. of this standard.

NOTE: *This standard applies only to participating providers that provide transportation for persons served. It does not apply to vehicles that are used only for transporting materials.*

Intent Statements

Transportation for the persons served is provided in a safe manner consistent with the regulations of the local authorities. This standard will apply when any vehicle, including a personal vehicle, is used to provide transportation for persons served.

14.j. First aid supplies are checked for expiration and availability of adequate supply through a systematic process and replenished and replaced as needed.

14.l. Please refer to the Glossary in the CARF standards manual for the definition of *contract*.

Survey Preparation Questions

14. If you provide transportation services for persons served, describe where and how you maintain evidence of:

■ Appropriate licensing of all drivers.

_____

_____

■ Review of driving records.

_____

_____

■ Insurance for vehicles and passengers.

_____

_____

■ Safety features in vehicles.

_____

_____

■ Safety equipment.

_____

_____

■ Accessibility.

_____

_____

■ Training of drivers in your organization's transportation procedures.

_____

_____

■ Training of drivers on the unique needs of the persons served.

_____

_____

■ Written emergency procedures available in the vehicle(s).

_____

_____

■ Communication devices available in the vehicle(s).

_____

_____

■ First aid supplies available in the vehicle(s).

_____

_____

■ Maintenance of vehicles owned or operated by the organization according to manufacturers' recommendations.

_____

_____

If you contract transportation services, is there a documented review of contracts at least annually that includes all of the above elements? ❏ Yes ❏ No

Network B.

15. Comprehensive health and safety self-inspections:
   a. Are conducted:
      (1) At least semiannually.
      (2) On each shift.
   b. Result in a written report that identifies:
      (1) The areas inspected.
      (2) Recommendations for areas needing improvement.
      (3) Actions taken to respond to the recommendations.

Intent Statements

Regular self-inspections help personnel to internalize current health and safety requirements into everyday practices. Self-inspections must include all facilities regularly utilized by the participating provider.

Survey Preparation Questions

15. Describe the process for self-inspections of your facilities, including how often they are done.

_____

_____

_____

_____

Are self-inspections conducted:

■ At least semiannually? ❏ Yes ❏ No

■ On each shift? ❏ Yes ❏ No

In the written report of self-inspections, are the following addressed:

■ Areas covered? ❏ Yes ❏ No

■ Recommendations for improvement? ❏ Yes ❏ No

■ Action plans for improvement? ❏ Yes ❏ No

■ Results of the actions taken? ❏ Yes ❏ No

Network B.

16. Comprehensive health and safety inspections:
  a. Are conducted:
   (1) At least annually.
   (2) By a qualified external authority.
  b. Result in a written report that identifies:
   (1) The areas inspected.
   (2) Recommendations for areas needing improvement.
   (3) Actions taken to respond to the recommendations.

Intent Statements

External inspections are completed at least annually to enhance and maintain the participating provider's health and safety practices. External inspections must include all facilities regularly utilized by the participating provider.

Survey Preparation Questions

16. Are comprehensive health and safety inspections conducted at least annually?

❑ Yes ❑ No

Does the inspection result in a written report?

❑ Yes ❑ No

Describe the process for annual external health and safety inspections of your facilities, including:

■ What areas are covered.

_____

_____

_____

_____

■ How you determined what areas to include to ensure a comprehensive inspection.

_____

_____

_____

_____

■ Who conducts the inspection.

_____

_____

■ How the inspector is external to your organization and what the inspector's qualifications are.

_____

_____

_____

In the written report of external inspections, are the following addressed:

■ Areas covered? ❑ Yes ❑ No

■ Recommendations for improvement? ❑ Yes ❑ No

■ Action plans for improvement? ❑ Yes ❑ No

■ Results of the actions taken? ❑ Yes ❑ No

Network B.

17. The participating provider implements written procedures that address:
  a. Verification of:
    (1) Backgrounds of the workforce in the following areas, if required:
      (a) Criminal checks.
      (b) Immunizations.
      (c) Fingerprinting.
      (d) Drug testing.
      (e) Vulnerable population checks.
      (f) Driving records.
    (2) The credentials of all applicable workforce (including licensure, certification, registration, and education):
      (a) With primary sources.
      (b) In all states/provinces or other jurisdictions where the workforce will deliver services.
    (3) Fitness for duty, if required.
  b. Actions to be taken in response to the information received concerning:
    (1) Background checks.
    (2) Credentials verification.
    (3) Fitness for duty.
  c. Timeframes for verification of backgrounds, credentials, and fitness for duty, including:
    (1) Prior to the delivery of services to the persons served or to the organization.
    (2) Throughout employment.

Intent Statements

The participating provider demonstrates how each of the areas listed is verified. CARF expects that the provider will follow all of the established procedures and timeframes and that it complies with all applicable legal requirements in determining its procedures.

17.a.(1) The participating provider is aware of and adheres to any external requirements (e.g., of funders, regulatory entities, contractual agreements, etc.) for background checks of its workforce as well as any requirements it may have established internally. The participating provider determines whether it will conduct background checks in more than one state/province or jurisdiction for all or select members of the workforce.

17.a.(2)(a) Primary source verification can occur when credentials are initially earned, at the time of hire, or, for existing members of the workforce, prior to an accreditation survey. Verbal, written, or electronic confirmation of credentials (including degrees) from state/provincial or other jurisdictional boards, schools or institutions, and/or trade associations, or verification through a credentials verification organization, is required. Copies of credentials provided directly by personnel do not meet the primary source verification requirement.

High school diplomas do not need primary source verification, but college degrees, when required for the position, would need to be verified with primary sources. When a licensing authority requires and verifies the education required for the license, evidence of licensing from the licensing authority as the primary source will also serve as evidence that the education has been verified.

17.a.(2)(b) If services are delivered in more than one state/province or jurisdiction, the organization is knowledgeable about reciprocity of credentials such as licensure, certification, or registration; how credentialing requirements may differ from one state/province or jurisdiction to another; and how this would impact in-person service delivery or service delivery via information and communication technologies.

17.a.(3) A fitness-for-duty exam is a medical examination used to determine whether a worker is physically or psychologically able to perform the essential functions of the job.

17.b. The participating provider has procedures in place in the event that backgrounds, credentials, or fitness for duty cannot be verified.

17.c. Timeframes are established by external authorities or, in their absence, by the participating provider.

Survey Preparation Questions

17. Do you have written procedures that address:

■ Verification of:

– Backgrounds of the workforce in the following areas, if required:

  - Criminal checks? ❑ Yes ❑ No

  - Immunizations? ❑ Yes ❑ No

  - Fingerprinting? ❑ Yes ❑ No

  - Drug testing? ❑ Yes ❑ No

  - Vulnerable population checks? ❑ Yes ❑ No

  - Driving records? ❑ Yes ❑ No

– The credentials of all applicable workforce (including licensure, certification, registration, and education):

  - With primary sources? ❑ Yes ❑ No

- In all states/provinces or other
  jurisdictions where the workforce
  will deliver services?   ❑ Yes   ❑ No

  – Fitness for duty, if required?   ❑ Yes   ❑ No

■ Actions to be taken in response to the information received concerning:

  – Background checks?   ❑ Yes   ❑ No

  – Credentials verification?   ❑ Yes   ❑ No

  – Fitness for duty?   ❑ Yes   ❑ No

■ Timeframes for verification of backgrounds, credentials, and fitness for duty,
  including:

  – Prior to the delivery of services to the
    persons served or to the organization?   ❑ Yes   ❑ No

  – Throughout employment?   ❑ Yes   ❑ No

Where are these procedures documented?

_____

_____

How do you ensure that the written procedures are consistently implemented?

_____

_____

_____

Network B.

18. Onboarding and engagement activities include:
   a. Orientation.
   b. On-the-job training.
   c. Position roles and responsibilities.
   d. Position performance expectations.
   e. Communication systems and expectations.
   **f. Documented training that addresses the identified
      competencies needed by personnel.**

Survey Preparation Questions

18. Explain how your organization provides onboarding and engagement activities for personnel that include:

- Orientation.

_____

_____

_____

- On-the-job training.

_____

_____

_____

- Position roles and responsibilities.

_____

_____

_____

- Position performance expectations.

_____

_____

_____

- Documented training that addresses the identified competencies needed by personnel.

_____

_____

_____

Where and how is the training documented?

_____

Network B.

19. Performance management includes:

    a. Written job descriptions that are reviewed and updated in accordance with organizational needs and/or the requirements of external entities.

    b. Performance appraisals for all personnel directly employed by the participating provider.

    c. Documented reviews of all contract personnel utilized by the participating provider.

Survey Preparation Questions

19. Describe how you address the review of job descriptions and keeping them updated.

_____

_____

_____

Describe the performance appraisal process with consideration of the different groups that comprise your workforce.

_____

_____

_____

Describe how you address reviews of contract personnel, including where the reviews are documented.

_____

_____

_____

Network B.

20. As applicable, the participating provider demonstrates a process to address the provision of services by the workforce consistent with relevant:

    a. Regulatory requirements.

    b. Licensure requirements.

    c. Registration requirements.

    d. Certification requirements.

    e. Professional degrees.

    f. Training to maintain established competency levels.

    g. On-the-job training requirements.

Intent Statements

The participating provider is knowledgeable about and ensures that services are provided in accordance with external and internal requirements and education relevant to its workforce.

Survey Preparation Questions

    20. Describe your process for ensuring that personnel provide services consistent with:

- Regulatory requirements.

    _____

    _____

    _____

- Licensure requirements.

    _____

    _____

    _____

- Registration requirements.

    _____

    _____

    _____

- Certification requirements.

    _____

    _____

    _____

- Professional degrees.

    _____

    _____

    _____

- Training to maintain established competency levels.

    _____

    _____

    _____

■ On-the-job training requirements.

Network B. **21. The participating provider implements policies promoting the following rights of the persons served:**

  a. Confidentiality of information.

  b. Privacy.

  c. Freedom from:

   (1) Abuse.

   (2) Financial or other exploitation.

   (3) Retaliation.

   (4) Humiliation.

   (5) Neglect.

   (6) Discrimination.

  d. Access to:

   (1) Information pertinent to the person served in sufficient time to facilitate the person's decision making.

   (2) Their own records.

  e. Informed consent or refusal or expression of choice and withdrawal of consent regarding:

   (1) Service delivery.

   (2) Release of information.

   (3) Concurrent services.

   (4) Composition of the service delivery team.

   (5) Involvement in research projects, if applicable.

  f. Access or referral to:

   (1) Legal entities for appropriate representation.

   (2) Self-help support services.

   (3) Advocacy support services.

  g. Adherence to research guidelines and ethics when persons served are involved, if applicable.

  h. Investigation and resolution of alleged infringement of rights.

  i. Other legal rights.

Intent Statements

To demonstrate relevant service delivery and appropriate ongoing communication with the persons served, the participating provider implements a system of rights that nurtures and protects the dignity and respect of the persons served. All information is transmitted in a manner that is clear and understandable.

Survey Preparation Questions

21. Explain your policies on the rights of persons served in the following areas:

■ Confidentiality of information.

_____

_____

■ Privacy.

_____

_____

■ Freedom from:
– Abuse.

_____

_____

– Financial or other exploitation.

_____

_____

– Retaliation.

_____

_____

– Humiliation.

_____

_____

– Neglect.

_____

_____

– Discrimination.

_____

_____

Explain how your organization gives the person served access to information in sufficient time to make decisions.

_____

_____

_____

_____

How do the persons served gain access to their records?

_____

_____

How are they informed of this process?

_____

_____

Describe your processes for informed consent or refusal or expression of choice and withdrawal of consent regarding:

■   Service delivery.

_____

_____

■   Release of information.

_____

_____

■   Concurrent services.

_____

_____

■   Composition of service delivery team.

_____

_____

■ Involvement in research projects, if applicable.

_____

_____

Explain how persons served have access or referral to:

■ Legal entities for representation.

_____

_____

■ Self-help support services.

_____

_____

■ Advocacy support services.

_____

_____

If you have research projects in which persons served are involved, describe the research guidelines and ethics practiced.

_____

_____

_____

_____

How does your organization deal with allegations of infringements of a person's rights?

_____

_____

_____

_____

How does your organization identify and ensure other legal rights of the persons served?

_____

_____

_____

_____

Network B.

22. The rights of the persons served are:
  a. Communicated to the persons served:
    (1) In a way that is understandable.
    (2) Prior to the beginning of service delivery or at initiation of service delivery.
    (3) At least annually for persons served in a program for longer than one year.
  b. Available at all times for:
    (1) Review.
    (2) Clarification.

Intent Statements

To ensure that the persons served have a clear understanding of their rights, the participating provider communicates and shares these rights in a manner that is understandable to the persons served.

Survey Preparation Questions

22. Explain how rights are communicated in a way that is understandable, available at all times, and shared with persons served prior to or at the start of service delivery.

_____

_____

_____

If persons are served longer than one year, how do you ensure that a review of rights is done at least annually?

_____

_____

_____

Network B.

23. The participating provider:

a. **Implements a policy and written procedure by which persons served may formally complain to the provider that specify:**

   (1) **Its definition of a formal complaint.**

   (2) **That the action will not result in retaliation or barriers to services.**

   (3) **How efforts will be made to resolve the complaint.**

   (4) **Levels of review, which include availability of external review.**

   (5) **Timeframes that:**

      (a) **Are adequate for prompt consideration.**

      (b) **Result in timely decisions for the person served.**

   (6) **Procedures for written notification to persons served regarding the actions to be taken to address the complaint.**

   (7) **The rights of each party.**

   (8) **The responsibilities of each party.**

   (9) **The availability of advocates or other assistance.**

b. **Makes complaint procedures and, if applicable, forms:**

   (1) **Readily available to the persons served.**

   (2) **Understandable to the persons served.**

c. **Documents formal complaints received.**

Intent Statements

The participating provider identifies clear protocols related to formal complaints, as defined by the participating provider.

Survey Preparation Questions

23. Describe your formal complaint policy, including how your organization defines a formal complaint.

_____

_____

_____

_____

Describe how the complaint procedure addresses:

■ That any action will not result in retaliation or a barrier to service.

_____

_____

■ How the complaint will be resolved.

_____

_____

■ Levels of review including the availability of external review.

_____

_____

■ Timeframes that are adequate for prompt consideration and result in timely decisions.

_____

_____

■ Written notification to persons served regarding actions to be taken.

_____

_____

■ Rights and responsibilities of each party.

_____

_____

■ Availability of advocates or other assistance.

_____

_____

■ The ease of availability to the person served of complaint procedures and, if applicable, forms.

_____

_____

How do you know that the information provided is understandable to persons served?

_____

_____

_____

Are all formal complaints documented?   ❑ Yes   ❑ No

Network B.

24. The participating provider:

    a. Assesses the accessibility needs of the:

        (1) Persons served.

        (2) Personnel.

        (3) Other stakeholders.

    b. Implements an ongoing process to consider barriers in each of the following areas:

        (1) Architecture.

        (2) Environment.

        (3) Attitudes.

        (4) Finances.

        (5) Employment.

        (6) Communication.

        (7) Technology.

        (8) Transportation.

        (9) Community integration, when appropriate.

      (10) Any other barrier identified by the:

           (a) Persons served.

           (b) Personnel.

           (c) Other stakeholders.

Intent Statements

The participating provider demonstrates a commitment to accessibility and the removal of barriers. Participating providers address accessibility issues in order to:

- Foster a person-centered approach to service delivery, facilitate inclusion, and enhance the quality of life for the persons served.
- Implement nondiscriminatory employment practices.
- Meet legal and regulatory requirements.
- Meet the expectations of stakeholders in the area of accessibility.

The participating provider should address how input was solicited from the persons served, personnel, and other stakeholders to assist in the identification of barriers, and take into consideration any accessibility needs—physical, cognitive, sensory, emotional, or developmental—that may hinder full and effective participation on an equal basis with others.

Survey Preparation Questions

    24. How does the leadership assess the accessibility needs of:

- Persons served?

_____

_____

_____

■ Personnel?

_____

_____

_____

■ Other stakeholders?

_____

_____

_____

List the barriers, if any, you have identified in the following areas:

■ Architecture.

_____

_____

■ Environment.

_____

_____

■ Attitudes.

_____

_____

■ Finances.

_____

_____

■ Employment.

_____

_____

■ Communication.

_____

_____

■ Technology.

_____

_____

■ Transportation.

_____

_____

■ Community integration, as appropriate.

_____

_____

Explain how you received ongoing input from persons served, personnel, and other stakeholders about barriers they have identified.

_____

_____

_____

_____

Describe the process you have in place for identifying barriers in the above areas on an ongoing basis.

_____

_____

_____

_____

APPENDIX A

Required Written Documentation

When used in the CARF standards, the following terms always indicate the need for written evidence to demonstrate conformance: *policy*, *plan*, *documented*, *documentation*, and *written*. The following table lists only those standards that explicitly require some form of written evidence to demonstrate conformance. This appendix is intended to provide a quick reference to such standards and provide a tool that organizations may find helpful in preparing for their surveys.

What is *not* included in this Appendix:

During a site survey, an organization may provide a variety of documents and written materials related to standards that are not listed here, including:

- Documents and written materials that demonstrate conformance to standards that do not explicitly require written evidence; e.g., procedures that do not specify written or assessments that do not specify documented.
- Documents and written materials that support conformance to standards but are not specifically required by the standards; e.g., minutes of meetings or orientation packets for persons served.

Standard	Requirements	Location of Documentation
A. Standards for the Network		
A.1.	Documentation of the network's structure	
A.2.a.	Documentation of the listed parameters regarding the network's scope	
A.5.b.	Written procedures for the selection of participating providers	
A.7.a.	Written explanation to prospective provider found ineligible to participate in the network	
A.8.a.	Contract with each participating provider specifying each of the listed elements	
A.9.	Policies and written procedures regarding conflicts of interest	
A.10.	Policies and written procedures for each of the listed elements, when applicable	
A.13.	Policy regarding persons served that addresses each of the listed elements	

Standard	Requirements	Location of Documentation
A.15.	Written procedures for the coordination of services when a person served receives services from more than one participating provider	
A.17.	Written procedures related to use of information and communication technologies to deliver services as specified in the standard	
A.18.	Documentation of competency-based training for personnel as specified in the standard	
B. Standards for Unaccredited Participating Providers		
B.2.	Policies and written procedures on records	
B.3.b.	Budget, fiscal policies and written procedures including internal control practices, and documented evidence of annual financial statement review or audit of the participating provider	
B.5.	Documentation of competency-based training in health and safety for personnel at orientation and at least annually	
B.6.	Written emergency and evacuation procedures	
B.8.	Written evidence of unannounced tests of each emergency procedure, including analysis	
B.9.	For participating providers that provide services in locations that are not owned/leased or controlled/operated by the participating provider, written procedures that address safety at the service delivery site for persons served and personnel	
B.11.	Written procedures regarding critical incidents	
B.12.	Written analysis of critical incidents	
B.13.	Written procedures regarding infections and communicable diseases	
B.14.h.	Written emergency procedures related to transportation services	
B.14.l.	Documented reviews of contracts for transportation services, if applicable	
B.15.b.	Health and safety self-inspection reports	
B.16.b.	External health and safety inspection reports	
B.17.	Written procedures related to verification of backgrounds. credentials, and fitness for duty, if required, of the workforce	

Standard	Requirements	Location of Documentation
B.18.f.	Documented training that addresses the identified competencies needed by personnel	
B.19.a.	Written job descriptions	
B.19.c.	Documented reviews of all contract personnel utilized by the participating provider	
B.21.	Policies on the rights of persons served	
B.23.a.	Policy and written procedure by which persons served may make a formal complaint	
B.23.b.	Complaint forms, if applicable	
B.23.c.	Documentation of formal complaints	

APPENDIX B

Operational Timelines

The following tables list standards that require activities be conducted at specific time intervals. The evidence assembled as part of survey preparation should support that these activities occur at the specified intervals.

During an original survey, an organization is expected to demonstrate that the activity has occurred at least once within the specified time period prior to the survey.

What is *not* included in this Appendix:

- Standards that require an organization's policy or written procedure to include a timeframe, such as timeframes for addressing a formal complaint or entering information into the records of the persons served, are not listed in this appendix.

- Standards that require activities be conducted on an *ongoing* or *as needed* basis are not included in this Appendix.

Activities to be Conducted at least Annually

Related Standard	Activity	Date of Last Occurrence	Document Source
A. Standards for the Network			
A.2.c.	Review of the scope of the network		
A.12.b.	Network addresses performance of participating providers, trends, areas needing performance improvement, actions to address the improvements needed, and necessary education and training of participating providers		
B. Standards for Unaccredited Participating Providers			
B.3.b.(1)	Preparation of an annual budget		
B.3.b.(3)	Review or audit of participating provider's financial statements by an independent accountant authorized by the appropriate authority		
B.5.b.	Competency-based training for personnel on health and safety topics listed in the standard		
B.8.	Unannounced test of each emergency procedure, including as relevant to the procedure complete actual or simulated physical evacuation, and written analysis of performance		
B.12.	Written analysis of all critical incidents provided to or conducted by leadership		

Activities to be Conducted at least Annually

Related Standard	Activity	Date of Last Occurrence	Document Source
B.14.l.	If transportation services are contracted, contract reviewed against elements a.–k. of the standard		
B.16.	Comprehensive external health and safety inspection conducted		
B.22.a.(3)	Rights of persons served communicated to persons served in a program longer than one year		

Activities to be Conducted at least Semiannually

Related Standard	Activity	Date of Last Occurrence	Document Source
B. Standards for Unaccredited Participating Providers			
B.15.	Comprehensive health and safety self-inspections conducted		

APPENDIX C

Required Training

The following tables list the standards that explicitly require an organization to provide some form of education or training to personnel, persons served, and/or other stakeholders.

Some standards require competency-based training or education. As defined in the Glossary, competency-based training is an approach to education that focuses on the ability to demonstrate adequate skills, knowledge, and capacity to perform a specific set of job functions.

What is *not* included in this Appendix:

■ Standards that require specifically qualified or trained personnel to provide certain services or require an organization to verify or ensure that personnel have appropriate qualifications, education, and/or training but do not require the organization to directly provide the requisite education or training are not listed in this Appendix.

■ Many standards require sharing or exchange of information with persons served, personnel, and/or other stakeholders. Although this may be accomplished through educational efforts, such standards are not listed in this Appendix.

Standard(s)	Training Requirements	Provided To	Competency-Based	Frequency
A. Standards for the Network				
A.12.b.(7)	Necessary education and training regarding performance	Participating providers	No	None specified
A.16.e.(7)	Necessary education and training regarding analysis of services provided	Network personnel and participating providers	No	None specified
A.18.	Training on how to deliver services effectively via information and communication technologies and the equipment used	Personnel who deliver services via information and communication technology	Yes	None specified
A.19.	Instruction and training on equipment used in service delivery via information and communication technologies and creating an appropriate environment to receive services	Persons served, families/support systems, and others, as appropriate	No	None specified

Standard(s)	Training Requirements	Provided To	Competency-Based	Frequency
B. Standards for Unaccredited Participating Providers				
B.5.	Health and safety training that addresses all areas listed in the standard	Personnel	Yes	Orientation and at least annually
B.8.c.(4)	Necessary education and training related to tests of the emergency procedures	Personnel	No	None specified
B.12.b.(7)	Necessary education and training related to critical incidents	Personnel	No	None specified
B.13.b.	Training on procedures regarding infections and communicable diseases	Persons served, personnel, and other stakeholders	No	None specified
B.14.g.	If the program provides transportation for persons served, training regarding the transportation procedures and unique needs of persons served	Personnel with driving responsibilities	No	None specified
B.18.b.	Onboarding and engagement activities include on-the-job training	Personnel	No	None specified
B.18.f.	Onboarding and engagement activities include training that addresses identified competencies	Personnel	Yes	None specified