



RATING INDICATORS FOR ASSESSING THE IMPLEMENTATION OF COA SERVICE STANDARDS

Following are descriptions of the indicators COA uses to assess an organization's implementation of the Purpose, Core Concept, and Practice Standards for the Service Sections.

1. **Full Implementation, Outstanding Performance.** *Description:* The organization's service delivery practices and policies fully meet the standard and reflect a high level of capacity. All elements or requirements are evident with rare or no exceptions. Exceptions do not impact negatively on the organization's capacity to demonstrate how the purpose of the service is achieved, how it measures the difference services make for clients, the achievement of program output, and the achievement of related practice.

Examples:

1. Services are delivered consistent with a guiding philosophy that connects client needs, activities and desired outcomes.
2. Active client participation is a hallmark of service delivery.
3. Services are considered by clients to be of consistently high quality.
4. The service environment is accommodating, flexible, and appropriate to meet the needs of clients served.
5. Documentation is excellent and is used to monitor client progress and goal achievement.
6. Program managers, direct service providers and support staff are highly capable, highly motivated, and work as a cohesive unit.
7. The organizational culture values high quality services that make a positive difference for service recipients. Programs that make a difference are known and positive results are celebrated.
8. A well-established and supported, user-friendly system identifies, measures and reports on desired levels of service delivery outcomes.
9. There is a consistent record of using data for decision-making at the client level and to make program improvements.
10. Training program and supervisory content are appropriate and advance personnel knowledge and skills.
11. Service record reviews demonstrate timely, on-going team and client monitoring of progress and achievement of service goals.

2. **Substantial Implementation, Good Performance.** *Description:* The organization's service delivery practices are basically sound and reflect moderate capacity with room to grow. The organization meets the majority of the standard's requirements; service delivery is purposeful and goal-oriented. Appropriate policies and procedures are in place. Minor inconsistencies and not yet fully developed practices are noted; however, these do not prevent demonstration of good progress toward measuring how services make a difference/achieve their intended purpose, and do not hamper delivery of program output, or significantly diminish practice quality.

Examples:

1. A reasonably detailed guiding service philosophy has been articulated and is known and followed by most program personnel.
2. Active client participation is an aim and occurs to a considerable extent.
3. Services are considered by a majority of clients to be of a good to high quality most of the time.
4. Staff try to ensure the service environment is accommodating and appropriate to meet the needs of service recipients, and meet most challenges to operate in a flexible, responsive manner.
5. Documentation is good and in most cases is used to monitor client progress and goal achievement.
6. Program managers, direct service providers and support staff are competent, and with few exceptions are motivated and work as a cohesive unit.
7. The organizational culture values high quality services but is not as focused on determining how services make a difference for clients. Programs that make a difference and reasons why are generally known.
8. A user-friendly system to identify, measure and report on desired levels of service delivery outcomes is fully planned and has just been implemented with no results in any area to show as yet.
9. Using data for decision-making at the client level and for program improvements is a goal and has been started.
10. Training program and supervisory content is usually appropriate to the skill level, needs and interests of personnel.
11. Service record reviews demonstrate on-going monitoring of progress and achievement of service goals with appropriate team member and client involvement most of the time. Reviews occur on a timely basis with few exceptions.



3. **Partial Implementation, Concerning Performance.** *Description:* Significant aspects of the organization's observed service delivery practices deviate from written material or observed practice, and capacity is at a basic level. Omissions or exceptions to recommended practices occur regularly, involvement of required individuals is limited or lacking, procedures are superficial, or personnel are poorly informed about procedures. Recommended practices are not implemented, or are implemented in a cursory or haphazard manner, to an extent that the organization's service quality and outcomes are weak relative to achieving mission. Care of clients may be compromised. Achievement of the service purpose, program output, and/or practice standards is doubtful.

Examples:

1. A guiding service philosophy statement has been articulated but lacks connections between client needs, activities and outcomes, and/or is not known or followed by most personnel.
2. Active client participation is an aim but does not occur most of the time.
3. Services are considered by a majority of clients to be of a fair to good quality most of the time with some continuous concerns. Cultural competency may be noted as a serious concern.
4. The service environment is in some observable ways inappropriate, inflexible or unresponsive given the needs of clients served.
5. Documentation is vague and issues of completeness or timeliness present concerns for monitoring client progress and goal achievement.
6. Program managers, direct service providers and support staff lack some basic competencies, do not work together cohesively, and/or lack strong motivation to make a difference for clients.
7. The organizational culture has recently emphasized high quality services but how services are expected to be making a difference is not yet established.
8. Program managers and direct service providers have not yet determined what outcomes will be measured and how measurements will occur. Programs tend to operate day-to-day.
9. Using data for decision-making at the client level and to make program improvements is not widely accepted as useful, and work has yet to be undertaken on how to gather and use data.
10. A useful training program is underdeveloped and supervisory support is lacking. Staff members report asking for and not receiving training and supervision, or availability is unclear or unknown.
11. Service record reviews do not occur as scheduled and the results are used sporadically to monitor client progress and goal achievement.

4. **Unsatisfactory Implementation and Performance.** *Description:* The organization's observed service delivery infrastructure and practices show signs of neglect, stagnation or deterioration, and there is a clear need for increased capacity. Significant omissions or exceptions to recommended practices are firmly established. Exceptions occur routinely, involvement of required individuals is not valued, and procedures are not developed. Recommended practice standards are not implemented, or are implemented in a cursory or haphazard manner such that the organization's program output and service aims are undermined. The health and safety of clients is in jeopardy or is of grave concern.

Examples:

1. A guiding service philosophy has not been set forth.
2. Active client participation happens occasionally.
3. A majority of clients express concerns about service quality on an on-going basis.
4. The service environment poses hazards to clients or staff. Safety measures have not been established.
5. Personnel have not been sufficiently trained and supported to know and follow established policies and procedures.
6. Documentation is incomplete and/or missing.
7. Program managers, direct service providers and support staff lack competence and motivation.
8. The organizational culture overall is not focused on determining how services make a difference for clients.
9. A system to identify, measure and report on desired levels of service delivery outcomes is not yet developed.
10. Decision-making at the client and program level is not driven by thorough assessments and data.
11. Training program and supervisory support is inadequate.
12. Caseload sizes deviate greatly from recommended ratios without any appropriate mitigating factors such that care and services are comprised.
13. Service record reviews do not occur routinely and consistently.