Administrative and Service Environment

INTRODUCTION

The Administrative and Service Environment standards provide a model for managing risk through practices such as offering accessible facilities, complying with applicable health regulations and codes, maintaining MFR program facilities in a safe and hygienic manner, and preparing for emergencies.

Note: *The MIL-ASE standards were revised in July 2017 to reflect current practice. For more information please see the MIL-ASE Update Summary.*

Note: *For more information on which of COA's standards will be included as part of the Peer Review Team's facility observation, please see the following tool: Facility Observation Checklist - MFR.*

Note: *Please see MIL-ASE Reference List for a list of resources that informed the development of these standards.*

Table of Evidence

Self-Study Evidence

-   Describe the overall environment in which the MFR program operates and any environment-related security or emergency preparedness issues.
-   Cite 2-3 examples of activities or decisions that the MFR program has undertaken that contributed to the health and safety of customers, staff, and visitors.
-   Provide any additional information that would increase the Peer Review Team's understanding of how the MFR program creates a safe and respectful environment that contributes to productivity and effective service delivery.

On-Site Evidence

No On-Site Evidence

On-Site Activities

No On-Site Activities

Purpose

The MFR program's administrative and service environments contribute to program effectiveness and are respectful, safe, and accessible.

MIL-ASE 1: Promotion of Health and Safety

The MFR program works with responsible parties to promote the health and safey of its staff and customers in its administrative facilities and wherever services are provided.

Rating Indicators

1) Full Implementation, Outstanding Performance

A rating of (1) indicates that the programs' practices fully meet the standard and reflect a high level of capacity. All elements or requirements outlined in the standard are evident in practice, with rare or no exceptions; exceptions do not impact service quality or overall performance.

2) Substantial Implementation, Good Performance

A rating of (2) indicates that a programs' infrastructure and practices are basically sound but there is room for improvement. The majority of the standards requirements have been met and the basic framework required by the standard has been implemented. Minor inconsistencies and practices that are not fully developed are noted; however, these do not significantly impact service quality or overall performance.

3) Partial Implementation, Concerning Performance

A rating of (3) indicates that significant aspects of the programs' observed infrastructure and/or practices require significant improvement. The program has not implemented the basic framework of the standard but instead has in place only part(s) of this framework. Omissions or exceptions to the practices outlined in the standard occur regularly, or practices are implemented in a cursory or haphazard manner. Service quality or program functioning may be compromised. Capacity is at a basic level.

4) Unsatisfactory Implementation and Performance

A rating of (4) indicates that implementation of the standard is minimal or there is no evidence of implementation at all. The programs' observed administration and management infrastructure and practices are weak or non-existent; or show signs of neglect, stagnation, or deterioration.

Please see Rating Guidance for additional rating examples.

Purpose

The MFR program's administrative and service environments contribute to program effectiveness and are respectful, safe, and accessible.

Table of Evidence

Self-Study Evidence

- Procedures for vehicle use when transporting children and youth (MIL-ASE 1.04)
- Facility maintenance procedures (MIL-ASE 1.06)
- Medication management procedures/protocols (MIL-ASE 1.08)

On-Site Evidence

- Local-level documentation tracking completion of required safety training (MIL-ASE 1.01)
- Smoking policy (MIL-ASE 1.02)
- Copies of MOUs or contracts with host sites, if applicable (MIL-ASE 1.05)
- Maintenance inspection reports and/or evidence of reports made for follow-up/corrective action regarding facility safety concerns (MIL-ASE 1.06)
- Logs of medication administration (MIL-ASE 1.08)

On-Site Activities

- Interview:
    a. MFR program director
    b. Relevant staff
- Observe facility (MIL-ASE 1.02, MIL-ASE 1.03, MIL-ASE 1.06, MIL-ASE 1.07)
- Observe restraint systems in government vehicles (MIL-ASE 1.04)
- Observe medication storage, when available (MIL-ASE 1.08)

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MIL-ASE 1.01

The MFR program informs staff of the strategies used to maintain a safe environment.

(FP) MIL-ASE 1.02

The MFR program adheres to a policy that prohibits smoking in all areas of its buildings and within 20 feet of entrances, operable windows, and the ventilation systems of enclosed areas.

Note: *If the installation's smoking policy differs from this standard, the stricter requirement applies.*

MIL-ASE 1.03

When computer access is offered to customers, the MFR program posts signage informing customers of any usage restrictions or monitoring that may be in place.

Related: MIL-MLSE 3.01, MIL-EFMP 3.04

NA *Computer access is not offered to customers.*

(FP) MIL-ASE 1.04

MFR programs that permit or require the use of government-owned vehicles to transport children and youth require:

a. the use of age-appropriate passenger restraint systems; and
b. adequate passenger supervision, as mandated by statute or regulation.

NA *The MFR program does not serve children or youth without a parent or legal guardian present or the MFR program's child and youth programming is not being included in this accreditation review.*

NA *The MFR program does not permit or require the use of government-owned vehicles to transport children and youth.*

MIL-ASE 1.05

When services are offered in a location that is not owned or leased by a DoD organization or entity, the MFR program develops a memorandum of understanding (MOU) or contractual agreement with the host that includes:

a. space and equipment needs;
b. health and safety expectations; and
c. each group's responsibility for cleaning, maintenance, liability risk, and other costs (e.g., utilities, insurance, and repairs).

NA *The MFR program does not offer services at locations that are not owned or leased by a DoD organization or entity.*

Note: *See MIL-AM 3.03 for more information on the content of MOUs.*

(FP) MIL-ASE 1.06

The MFR program ensures its facilities and equipment are properly

Purpose

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maintained in a safe, hygienic manner by:

a. immediately reporting emergency maintenance issues and potentially hazardous conditions according to established reporting procedures; and
b. following-up on corrective action as needed.

Interpretation: *While outside agencies are responsible for conducting regular inspections and managing corrective action, standard implementation requires that the MFR program be able to demonstrate that it reports concerns in a timely manner (a) and makes reasonable efforts to follow-up until corrective action is taken (b).*

Interpretation: *Examples of "emergency maintenance issues" include: overflowing toilets, flooded basements, defective heating systems, and other situations that can damage property, pose a threat to customers, or interfere with service delivery.*

Examples of "hazardous conditions" include: uncovered electrical outlets; improper storage of cleaning supplies and other hazardous materials; unsecured floor coverings or equipment; stairs without handrails; harmful water temperatures; inadequate lighting, ventilation and temperature; unscreened areas or unmarked glass doors; and broken or malfunctioning electrical appliances, space heaters, kitchen appliances, and radios.

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MIL-ASE 1.07

Safety procedures governing customers' use of equipment, tools, and/or appliances with the potential to cause harm if used inappropriately are posted in applicable areas at the MFR program's facilities.

Interpretation: *Examples of "equipment, tools, and appliances" include appliances such as microwaves or coffee makers that could be found in a kitchen that is accessible to customers.*

NA *Customers do not have access to equipment, tools, and/or appliances with the potential to cause harm if used inappropriately.*

(FP) MIL-ASE 1.08

When the MFR program serves children and youth without a parent or legal guardian present, protocols and controls governing the proper administration and storage of medication include:

a. locked, supervised storage with access limited to authorized staff and in accordance with law, regulation, and manufacturer's instruction;
b. maintaining medication in its original packaging;
c. labeling medication with the name of the child or youth, medication name, dosage, prescribing physician name, and number or code identifying the written order;
d. procedures for returning out-of-date or unused medication to the parent or legal guardian, and arranging for appropriate disposal when needed;
e. protocols for the administration of over-the-counter medications;
f. a record of who received medications, what medications were administered, how medications were administered and at what dosage, and when and by whom medications were administered; and
g. protocols for documenting adverse effects of medications, notifying the parent or legal guardian, and calling emergency responders if needed.

Related: MIL-HR 2.17

NA *The program is not authorized to administer or store medication.*

Purpose

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MIL-ASE 2: Legal and Regulatory Compliance

The MFR program's facilities meet applicable laws, regulations, guidelines, and codes.

Interpretation: *The MFR program should have access to current documentation (e.g., inspection reports) showing that it has met applicable health and safety codes, regulations, and guidelines. For example, the MFR program should obtain relevant documentation from responsible parties demonstrating that it's facilities have passed health, building, and fire inspections. When the MFR program cannot obtain access to the required documentation from relevant authorities, some programs may choose to arrange for their own inspection of the MFR program space by a qualified person, or develop plans that document their efforts to remain in compliance.*

Interpretation: *When MFR program facilities are not free of architectural barriers, and the facility's age or excessive cost prevent change, standard implementation may be demonstrated by coordinating the use of other facilities to ensure access to services for current or future customers with physical disabilities.*

Purpose

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<u>Rating Indicators</u>

1) Full Implementation, Outstanding Performance

A rating of (1) indicates that the programsâ€™ practices fully meet the standard and reflect a high level of capacity.Â Â All elements or requirements outlined in the standard are evident in practice, with rare or no exceptions; exceptions do not impact service quality or overall performance. Â

2) Substantial Implementation, Good PerformanceÂ

A rating of (2) indicates that a programsâ€™ infrastructure and practices are basically sound but there is room for improvement. The majority of the standards requirements have been met and the basic framework required by the standard has been implemented. Â Minor inconsistencies and practices that are not fully developed are noted; however, these do not significantly impact service quality or overall performance.

3) Partial Implementation, Concerning Performance

A rating of (3) indicates that significant aspects of the programsâ€™ observed infrastructure and/or practices require significant improvement. The program has not implemented the basic framework of the standard but

instead has in place only part(s) of this framework. Omissions or exceptions to the practices outlined in the standard occur regularly, or practices are implemented in a cursory or haphazard manner. Â Service quality or program functioning may be compromised. Capacity is at a basic level.

4) Unsatisfactory Implementation and Performance

A rating of (4) indicates that implementation of the standard is minimal or there is no evidence of implementation at all. The programsâ€™ observed administration and management infrastructure and practices are weak or non-existent; or show signs of neglect, stagnation, or deterioration.

Please see Rating Guidance for additional rating examples.Â

Table of Evidence

Self-Study Evidence

No Self-Study Evidence

On-Site Evidence

- Documentation of facility compliance with applicable laws, regulations, guidelines and codes such as copies of inspection reports, a signed letter certifying compliance, certificates of occupancy, licenses, etc.

On-Site Activities

- Interview:
  a. MFR program director
  b. Facility management staff
- Observe facility

Purpose

The MFR program's administrative and service environments contribute to program effectiveness and are respectful, safe, and accessible.

MIL-ASE 3: Emergency Response Preparedness

The MFR program plans for emergencies in its facilities.

Rating Indicators

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2) Substantial Implementation, Good PerformanceÂ

A rating of (2) indicates that a programs' infrastructure and practices are basically sound but there is room for improvement. The majority of the standards requirements have been met and the basic framework required by the standard has been implemented. Â Minor inconsistencies and practices that are not fully developed are noted; however, these do not significantly impact service quality or overall performance.

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4) Unsatisfactory Implementation and Performance

A rating of (4) indicates that implementation of the standard is minimal or there is no evidence of implementation at all. The programs' observed administration and management infrastructure and practices are weak or non-existent; or show signs of neglect, stagnation, or deterioration.

Please see Rating Guidance for additional rating examples.Â

Table of Evidence

Self-Study Evidence

- MFR program-level emergency response plan (MIL-ASE 3.01)

- When MIL-EFA has not been assigned, a description or relevant portions of the Emergency Family Assistance (EFA) Plan outlining the MFR program's role in the local EFA Plan (For Reserve component, include a separate description for each applicable MFR program location) (MIL-ASE 3.04)

On-Site Evidence

- Training materials and documentation tracking completion of staff training on the emergency response plan (MIL-ASE 3.01)
- Fire drill logs (MIL-ASE 3.03)
- Training materials and documentation tracking completion of staff training on the Emergency Family Assistance (EFA) Plan, when applicable (MIL-ASE 3.04)

On-Site Activities

- Interview:
  a. MFR program director
  b. Relevant staff
- Observe facilities

(FP) MIL-ASE 3.01

The MFR program maintains an emergency response plan that addresses its immediate response to emergencies affecting its facilities and includes procedures for:

a. complying with the installation-wide emergency response plan, when applicable;
b. training staff on implementing the emergency response plan;
c. arranging for a temporary work site in the event of facility closure;
d. communicating with staff, customers, the public, and the media;
e. alerting emergency responders;
f. evacuating individuals within the facility including persons with mobility challenges and other special needs; and
g. accounting for the whereabouts of staff and customers;

Related: MIL-HR 2, MIL-HR 6.03

Interpretation: *MIL-ASE 3.01 applies to the MFR program's immediate response to emergency situations affecting its facilities and is distinct from the MFR program's responsibility to manage and oversee an Emergency Family Assistance response in the event of an all hazards incident.*

Purpose
The MFR program's administrative and service environments contribute to program effectiveness and are respectful, safe, and accessible.

Interpretation: *For MFR programs that serve children and youth without a parent or legal guardian present, communicating with customers includes reviewing the emergency response plan with children and youth prior to the start of an activity or event. This does not include when the MFR program only serves children and youth through its Family Advocacy Program (MIL-FAP) or non-medical individual and family counseling (MIL-NMC) program*

Interpretation: *Regarding element (b), examples of training methods include classroom-based learning, self-paced training, and practice drills.*

(FP) MIL-ASE 3.02

The MFR program maintains:

a. a readily available communication device;
b. poison control information;
c. first aid supplies and manuals; and
d. emergency contact and health information for all participants when the MFR program serves children and youth without a parent or legal guardian present.

Note: *Element d is NA when the MFR program does not serve children and youth without a parent or legal guardian present.*

(FP) MIL-ASE 3.03

The MFR program ensures fire drills are held at least annually and documentation of the drills is maintained on site.

Interpretation: *For a rating of 1, documentation that fire drills occur annually must be maintained on-site. If fire drills are not being conducted annually, the MFR program may still receive a rating of 2 if they can demonstrate that reasonable efforts have been made to notify and follow-up with responsible parties.*

MIL-ASE 3.04

MFR program staff are trained on and familiar with the local area's Emergency Family Assistance (EFA) plan and the role they will play in supporting DoD personnel in the event of an all-hazards incident.

Related: MIL-HR 2

Interpretation: *Training may be provided by the entity responsible for coordinating the response.*

NA *The MFR program or all of the Reserve component MFR program's locations are responsible for management and oversight of the Emergency Family Assistance (EFA) response, and are being reviewed under Emergency Family Assistance (MIL-EFA).*

Note: *For the purposes of this standard, DoD personnel includes all Active components, Reserve components, DoD civilians, DoD families, DoD and non-DoD tenants, transient DoD and US Government Personnel, and DoD contractors living or working on DoD Installations worldwide.*

Note: *Only those MFR programs or Reserve component MFR program locations that are not directly responsible for managing and overseeing the local EFA response will be expected to meet the requirements of this standard. Those program locations directly responsible for managing and overseeing the EFA will be reviewed under Emergency Family Assistance (MIL-EFA). For the Reserve component, each MFR program location will be evaluated separately to determine the applicability of MIL-ASE 3.04.*

Purpose

The MFR program's administrative and service environments contribute to program effectiveness and are respectful, safe, and accessible.

MIL-ASE 4: Supervision when Serving Children and Youth

The MFR program provides appropriate supervision whenever services are provided to children and youth without parents or legal guardians present.

NA *The MFR program does not serve children or youth without a parent or legal guardian present or the MFR program's child and youth programming is not being included in this accreditation review.*

Purpose

The MFR program's administrative and service environments contribute to program effectiveness and are respectful, safe, and accessible.

Rating Indicators

1) Full Implementation, Outstanding Performance

A rating of (1) indicates that the programs' practices fully meet the standard and reflect a high level of capacity. All elements or requirements outlined in the standard are evident in practice, with rare or no exceptions; exceptions do not impact service quality or overall performance.

2) Substantial Implementation, Good Performance

A rating of (2) indicates that a programs' infrastructure and practices are basically sound but there is room for improvement. The majority of the standards requirements have been met and the basic framework required by the standard has been implemented. Minor inconsistencies and practices that are not fully developed are noted; however, these do not significantly impact service quality or overall performance.

3) Partial Implementation, Concerning Performance

A rating of (3) indicates that significant aspects of the programs' observed infrastructure and/or practices require significant improvement. The program has not implemented the basic framework of the standard but instead has in place only part(s) of this framework. Omissions or exceptions to the practices outlined in the standard occur regularly, or practices are implemented in a cursory or haphazard manner. Service quality or program functioning may be compromised. Capacity is at a basic level.

4) Unsatisfactory Implementation and Performance

A rating of (4) indicates that implementation of the standard is minimal or there is no evidence of implementation at all. The programs' observed administration and management infrastructure and practices are weak or non-existent; or show signs of neglect, stagnation, or deterioration.

Please see Rating Guidance for additional rating examples.

Table of Evidence

Self-Study Evidence

- Supervision policy and procedures including, but not limited to, supervision during:
    a. one-on-one interactions between children/youth and staff (MIL-ASE 4.02)
    b. the start and end of an activity or event (MIL-ASE 4.04)
    c. emergencies (MIL-ASE 4.05)

On-Site Evidence

- Staff coverage schedule of child and youth programming activities for the previous two quarters (MIL-ASE 4.01, MIL-ASE 4.02, MIL-ASE 4.03)

On-Site Activities

- Interview:
    a. MFR program director
    b. Relevant staff
    c. Customers
- Observe supervision of an activity or event, if possible (MIL-ASE 4.01, MIL-ASE 4.02, MIL-ASE 4.03)
- Observe arrivals and departures from an activity or event, if possible (MIL-ASE 4.04)

Purpose

The MFR program's administrative and service environments contribute to program effectiveness and are respectful, safe, and accessible.

(FP) MIL-ASE 4.01

The MFR program implements a supervision policy and procedures that include:

a. staff-to-participant ratios;
b. expectations for sight and sound supervision;
c. mechanisms for monitoring children and youth who have permission to be out of sight;
d. procedures for handling missing or lost children and youth; and
e. additional topics as appropriate to the type of programming being offered.

(FP) MIL-ASE 4.02

One-on-one interactions between staff and children and youth are in public

areas visible by at least one other adult.

NA *The MFR program only serves children and youth through its Non-Medical Individual and Family Counseling program or its Family Advocacy Program where one-to-one interactions with appropriately screened staff is necessary to adequately provide services.*

(FP) MIL-ASE 4.03

The ratio of staff to children and youth meets the following requirements:

a. 1:15 when all participants are age six and older; and
b. 1:12 when the participants include children under age six.

(FP) MIL-ASE 4.04

The program ensures safety at the start and end of an activity or event by:

a. keeping an accurate list of participants;
b. noting when children and youth arrive, when they leave, and with whom they leave; and
c. developing a system to keep unauthorized people from taking children and youth from an activity or event.

(FP) MIL-ASE 4.05

The are sufficient number of staff on site to maintain ratios in the case of an emergency.

Purpose

The MFR program's administrative and service environments contribute to program effectiveness and are respectful, safe, and accessible.