



Pregnancy Support Services

DEFINITION

Pregnancy Support Services provide education, counseling, resources, and support to individuals who are pregnant and in need of assistance, consistent with the organization's mission.

Note: *The decisions pregnant individuals make during service delivery may impact the outcomes they can be expected to achieve. For example, individuals who choose to parent their children may use parent education services and, as a result, be better prepared to raise their children. Individuals who decide to plan for adoption may experience satisfaction with their decision as an outcome of service. Other desired outcomes, such as improved health and increased educational attainment, may be relevant regardless of the decisions made about the pregnancy.*

Note: *Organizations providing only Pregnancy Options Counseling or Birth Options Counseling will complete: PS 1, 2, 3, 4, 5, 6, and 11.*

Note: *Please see [PS Reference List](#) for a list of resources that informed the development of these standards.*

Table of Evidence

Self-Study Evidence

- Provide an overview of the different programs being accredited under this section. The overview should describe:
 - a. the program's service philosophy and approach to delivering services;
 - b. eligibility criteria;
 - c. any unique or special services provided to specific populations; and
 - d. major funding streams.
- If elements of the service (e.g., assessments) are provided by contract with outside programs or through participation in a formal, coordinated service delivery system, provide a list that identifies the providers and the service components for which they are responsible. Do not include services provided by referral.
- Provide any other information you would like the peer review team to know about these programs.
- A demographic profile of persons and families served by the programs being reviewed under this service section with percentages representing the following:
 - a. racial and ethnic characteristics;
 - b. gender/gender identity;
 - c. age;

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Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



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- d. major religious groups; and
- e. major language groups
- As applicable, a list of groups or classes including, for each group or class:
 - a. the type of activity/group;
 - b. whether the activity/group is short-term or ongoing;
 - c. how often the activity/group is offered;
 - d. the average number of participants per session of the activity/group, in the last month; and
 - e. the total number of participants in the activity/group, in the last month
- A list of any programs that were opened, merged with other programs or services, or closed
- A list or description of program outcomes and outputs being measured

On-Site Evidence

No On-Site Evidence

On-Site Activities

No On-Site Activities

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Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



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PS 1: Access To Service

Services are provided to individuals who need to obtain prenatal care, prepare for parenthood, and make decisions about pregnancy and parenthood.

Rating Indicators

1) All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice standards.

2) Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice standards; e.g.,

- Minor inconsistencies and not yet fully developed practices are noted, however, these do not significantly impact service quality; or
- Procedures need strengthening; or
- With few exceptions procedures are understood by staff and are being used; or
- For the most part, established timeframes are met; or
- Proper documentation is the norm and any issues with individual staff members are being addressed through performance evaluations (HR 6.02) and training (TS 2.03); or
- Active client participation occurs to a considerable extent.

3) Practice requires significant improvement, as noted in the ratings for the Practice standards. Service quality or program functioning may be compromised; e.g.,

- Procedures and/or case record documentation need significant strengthening; or
- Procedures are not well-understood or used appropriately; or
- Timeframes are often missed; or
- A number of client records are missing important information or
- Client participation is inconsistent; or
- One of the Fundamental Practice Standards received a rating of 3 or 4.

4) Implementation of the standard is minimal or there is no evidence of implementation at all, as noted in the ratings for the Practice standards; e.g.,

- No written procedures, or procedures are clearly inadequate or not being used; or
- Documentation is routinely incomplete and/or missing; or
- Two or more Fundamental Practice Standards received a rating of 3 or

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Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



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4.

Table of Evidence

Self-Study Evidence

No Self-Study Evidence

On-Site Evidence

- Outreach strategies and informational materials
- If the organization collaborates with other community organizations to identify potential service recipients, provide a list of those organizations and documentation of collaboration

On-Site Activities

- Interview:
 - a. Program director
 - b. Relevant personnel

PS 1.01

Services are available to individuals without regard to their age or decision to parent the child.

Interpretation: *If an organization serves only a sub-group of individuals who may potentially need service (such as expectant parents planning for adoption), ineligible individuals should be referred to another local provider that may be able to meet their needs, as referenced in PS 2.03.*

When an organization provides both counseling and direct support services but limits eligibility for direct support to a specific population (such as individuals who decide, during counseling, to plan for adoption), the organization should: (1) ensure that all interested counseling recipients are linked to appropriate services, as referenced in PS 6.07, and (2) demonstrate that it has considered how the limits it places on eligibility for additional services may influence a counseling recipient's decision-making process.

PS 1.02

The organization collaborates with other providers or conducts community outreach to identify individuals who are potentially in need of service and

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Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



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inform them about the program.

Interpretation: *The organization's outreach materials should provide an accurate description of the services it offers. For example, if an organization offers only Birth Options Counseling, and thus does not provide counseling on termination, its outreach materials should clearly convey this fact to potential service recipients.*

Research Note: *Although there is a lack of information about the characteristics and motivations of parents who abandon their babies, some literature suggests that these parents have fallen through the cracks of systems of care that exist to protect parents and children, and have not received adequate supports and services. Many states have enacted "Safe Haven" laws that are intended to prevent the unsafe abandonment of infants by allowing distressed parents to give up babies at designated safe locations. However, some literature notes that the effectiveness of these laws is not yet known and suggests that they may have unintended harmful consequences. Some experts suggest that the best approach to preventing unsafe abandonment is to ensure that all expectant parents, including those who may deny or conceal their pregnancies, receive the counseling, supports, and services that can help them make safe, beneficial decisions for their children and themselves.*

Note: *See the Note to PS 6 for further discussion of the distinction between Birth Options Counseling and Pregnancy Options Counseling.*

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Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



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PS 2: Screening and Intake

The organization's screening and intake practices ensure that individuals receive prompt and responsive access to appropriate services.

Rating Indicators

1) All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice standards.

2) Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice standards; e.g.,

- Minor inconsistencies and not yet fully developed practices are noted, however, these do not significantly impact service quality; or
- Procedures need strengthening; or
- With few exceptions procedures are understood by staff and are being used; or
- Referrals procedures need strengthening; or
- For the most part, established timeframes are met;
- Active client participation occurs to a considerable extent.
- In a few rare instances urgent needs were not prioritized.

3) Practice requires significant improvement, as noted in the ratings for the Practice standards. Service quality or program functioning may be compromised; e.g.,

- Procedures and/or case record documentation need significant strengthening; or
- Procedures are not well-understood or used appropriately; or
- Urgent needs are often not prioritized, or
- Services are frequently not initiated in a timely manner; or
- Applicants are not receiving referrals, as appropriate; or
- A number of client records are missing important information or
- Client participation is inconsistent; or
- Screening and intake done by referral source and no documentation and/or summary of required information present in case record; or
- One of the Fundamental Practice Standards received a rating of 3 or 4.

4) Implementation of the standard is minimal or there is no evidence of implementation at all, as noted in the ratings for the Practice standards; e.g.,

- There are no written procedures, or procedures are clearly inadequate or not being used; or

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Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



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- Documentation is routinely incomplete and/or missing; or A
- Two or more Fundamental Practice Standards received a rating of 3 or 4.

Table of Evidence

Self-Study Evidence

- Screening procedures

On-Site Evidence

No On-Site Evidence

On-Site Activities

- Interview:
 - a. Program director
 - b. Relevant personnel
 - c. Individuals served
- Review case records

PS 2.01

Individuals are screened and informed about:

- a. how well their request matches the organization's services; and
- b. what services will be available and when.

NA Another organization is responsible for screening, as defined in a contract.

(FP) PS 2.02

Prompt, responsive intake practices:

- a. ensure equitable treatment;
- b. give priority to urgent needs and emergency situations; and
- c. support timely initiation of services.

Research Note: Literature points to the importance of connecting individuals with needed services as early as possible in their pregnancies, regardless of their decisions about the pregnancy. Expectant parents carrying children to term should obtain prenatal care in a timely manner to

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Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



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increase the chances of having healthy births, and termination services are simplest and safest early in a pregnancy.

PS 2.03

Individuals who cannot be served, or cannot be served promptly, are referred or connected to appropriate resources.

NA *The organization accepts all clients.*

PS 2.04

During intake, the organization gathers information to identify critical service needs and/or determine when a more intensive service is necessary, including:

- a. personal and identifying information;
- b. emergency health needs; and
- c. safety concerns, including imminent danger or risk of future harm.

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PS 3: Assessment

Individuals participate in a comprehensive, individualized, strengths-based, culturally responsive assessment.

Interpretation: *The Assessment Matrix - Private, Public, Canadian, Network determines which level of assessment is required for COA's Service Sections. The assessment elements of the Matrix can be tailored according to the needs of specific individuals or service design.*

Rating Indicators

1) All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice standards.

2) Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice standards; e.g.,

- Minor inconsistencies and not yet fully developed practices are noted, however, these do not significantly impact service quality; or
- Procedures need strengthening; or
- With few exceptions procedures are understood by staff and are being used; or
- For the most part, established timeframes are met; or
- Culturally responsive assessments are the norm and any issues with individual staff members are being addressed through performance evaluations (HR 6.02) and training (TS 2.05); or
- Active client participation occurs to a considerable extent; or
- Diagnostic tests are consistently and appropriately used, but interviews with staff indicate a need for more training (TS 2.08).

3) Practice requires significant improvement, as noted in the ratings for the Practice standards. Service quality or program functioning may be compromised; e.g.,

- Procedures and/or case record documentation need significant strengthening; or
- Procedures are not well-understood or used appropriately; or
- Assessment and reassessment timeframes are often missed; or
- Assessments are sometimes not sufficiently individualized;
- Culturally responsive assessments are not the norm and this is not being addressed in supervision or training; or
- Staff are not competent to administer diagnostic tests, or tests are not being used when clinically indicated; or
- Client participation is inconsistent; or

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Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



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- Assessments are done by referral source and no documentation and/or summary of required information present in case record; or
- One of the Fundamental Practice Standards received a rating of 3 or 4.

4) Implementation of the standard is minimal or there is no evidence of implementation at all, as noted in the ratings for the Practice standards; e.g.,

- There are no written procedures, or procedures are clearly inadequate or not being used; or
- Documentation is routinely incomplete and/or missing; or
- Two or more Fundamental Practice Standards received a rating of 3 or 4.

Table of Evidence

Self-Study Evidence

- Assessment procedures
- Assessment tool and/or criteria included in assessment

On-Site Evidence

- Qualifications of personnel who conduct assessments

On-Site Activities

- Interview:
 - a. Program director
 - b. Relevant personnel
 - c. Individuals served
- Review case records

PS 3.01

Personnel who conduct assessments are qualified by training, skill, and experience and can recognize individuals with special needs.

PS 3.02

The information gathered for assessments is comprehensive, directed at concerns identified in the initial screening, and limited to material pertinent for meeting service requests and objectives.

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PS 3.03

Assessments are conducted in a strengths-based, culturally responsive manner and are the basis for identifying resources that can increase service participation and support the achievement of agreed upon goals.

Interpretation: *Culturally responsive assessments can include attention to geographic location, language of choice, and the person's religious, racial, ethnic, and cultural background. Other important factors that contribute to a responsive assessment include attention to age, sexual orientation, and developmental level.*

PS 3.04

Assessments are completed within timeframes established by the organization and are updated periodically.

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PS 4: Service Planning and Monitoring

Individuals participate in the development and ongoing review of service plans that are the basis for delivery of appropriate services and support.

Rating Indicators

1) All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice standards.

2) Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice standards; e.g.,

- Minor inconsistencies and not yet fully developed practices are noted, however, these do not significantly impact service quality; or
- Procedures need strengthening; or
- With few exceptions procedures are understood by staff and are being used; or
- For the most part, established timeframes are met; or
- Proper documentation is the norm and any issues with individual staff members are being addressed through performance evaluations (HR 6.02) and training (TS 2.03); or
- In a few instances client or staff signatures are missing and/or not dated; or
- Active client participation occurs to a considerable extent.

3) Practice requires significant improvement, as noted in the ratings for the Practice standards. Service quality or program functioning may be compromised; e.g.,

- Procedures and/or case record documentation need significant strengthening; or
- Procedures are not well-understood or used appropriately; or
- Timeframes are often missed; or
- In a number of instances client or staff signatures are missing and/or not dated (RPM 7.04); or
- Quarterly reviews are not being done consistently; or
- Level of care for some clients is inappropriate; or
- Service planning is often done without full client participation; or
- Appropriate family involvement is not documented; or
- Documentation is routinely incomplete and/or missing; or
- Assessments are done by referral source and no documentation and/or summary of required information present in case record; or
- One of the Fundamental Practice Standards received a rating of 3 or 4.

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Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



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4) Implementation of the standard is minimal or there is no evidence of implementation at all, as noted in the ratings for the Practice standards; e.g.,

- No written procedures, or procedures are clearly inadequate or not being used; or
- Documentation is routinely incomplete and/or missing; or
- Two or more Fundamental Practice Standards received a rating of 3 or 4.

Table of Evidence

Self-Study Evidence

- Service planning and monitoring procedures

On-Site Evidence

- Documentation of case review

On-Site Activities

- Interview:
 - a. Program director
 - b. Relevant personnel
 - c. Individuals served
- Review case records

PS 4.01

A service plan is developed within an appropriate timeframe with the full participation of the service recipient, and expedited service planning is available when crisis or urgent need is identified.

Interpretation: *Service planning is to be conducted so that the service recipient retains as much personal responsibility and self-determination as possible and desired. Individuals with limited ability in making independent choices can receive help with making or learning to make decisions. When the service recipient is a minor, or an adult under the care of a guardian, the organization should follow applicable state laws or regulations requiring involvement or consent of service recipients' legal guardians.*

PS 4.02

Purpose

Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



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The service plan is based on the assessment and includes:

- a. agreed upon goals, desired outcomes, and timeframes for achieving them;
- b. services and supports to be provided and by whom; and
- c. the service recipient's signature.

PS 4.03

During service planning the organization explains:

- a. available options;
- b. how the organization can support the achievement of desired outcomes; and
- c. the benefits, alternatives, and risks or consequences of planned services.

PS 4.04

Individuals are helped to explore the potential benefits and any concerns about involving family members and significant others, including the birth father, in service planning and provision.

PS 4.05

When the individual wishes and it is appropriate, family members and significant others, including the birth father, are invited to participate in case conferences and advised of ongoing progress.

Interpretation: *The organization can facilitate the participation of family and significant others by, for example, helping arrange transportation or including them in scheduling decisions.*

PS 4.06

The provider and service recipient regularly review progress toward achievement of agreed upon goals and sign revisions to service goals and plans.

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Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



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PS 4.07

The provider and a supervisor, or a clinical, service, or peer team, review the case at designated milestones during the pregnancy to assess:

- a. service plan implementation;
- b. progress toward achieving goals and desired outcomes; and
- c. the continuing appropriateness of the agreed upon goals.

Interpretation: *Experienced providers may conduct reviews of their own cases. In such cases, the provider's supervisor reviews a sample of the provider's evaluations as per the requirements of the standard.*

The organization will define what constitutes a milestone during the pregnancy. Timeframes for service plan review should be adjusted depending upon issues and needs of persons receiving services, and the frequency and intensity of services provided. When providing Pregnancy Options Counseling or Birth Options Counseling, timeframes for service plan review should be adjusted to reflect the length of time counseling services are offered.

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Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



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PS 5: Service Philosophy

The program is guided by a service philosophy that:

- a. sets forth a logical approach for how program activities and interventions will meet the needs of service recipients; and
- b. guides the development and implementation of program activities and services based on the best available evidence of service effectiveness.

Interpretation: *A program model or logic model can be a useful tool to help staff think systematically about how the program can make a measureable difference by drawing a clear connection between the service population's needs, available resources, program activities and interventions, program outputs, and desired outcomes.*

Rating Indicators

1) All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice standards.

2) Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice standards; e.g.,

- Minor inconsistencies and not yet fully developed practices are noted, however, these do not significantly impact service quality; or
- Written service philosophy needs improvement or clarification; or
- Procedures need strengthening; or
- With few exceptions procedures are understood by staff and are being used; or
- Proper documentation is the norm and any issues with individual staff members are being addressed through performance evaluations (HR 6.02) and training (TS 2.03); or
- In a few rare instances required consent was not obtained; or
- Monitoring procedures need minor clarification; or
- With few exceptions the policy on prohibited interventions is understood by staff, or the written policy needs minor clarification.

3) Practice requires significant improvement, as noted in the ratings for the Practice standards. Service quality or program functioning may be compromised; e.g.,

- The written service philosophy needs significant improvement; or
- Procedures and/or case record documentation need significant strengthening; or
- Procedures are not well-understood or used appropriately; or

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Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



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- Documentation is inconsistent or in some instances is missing and no corrective action has not been initiated; or
- Required consent is often not obtained; or
- A few personnel who are employing non-traditional or unconventional interventions have not completed training, as required; or
- There are gaps in monitoring of interventions, as required; or
- Policy on prohibited interventions does not include at least one of the required elements; or
- Service philosophy is not clearly related to expressed mission or programs of the organization; or
- One of the Fundamental Practice Standards received a rating of 3 or 4.

4) Implementation of the standard is minimal or there is no evidence of implementation at all, as noted in the ratings for the Practice standards; e.g.,

- There is no written service philosophy; or
- There are no written policy or procedures, or procedures are clearly inadequate or not being used; or
- Documentation is routinely incomplete and/or missing; or
- Two or more Fundamental Practice Standards received a rating of 3 or 4.

Table of Evidence

Self-Study Evidence

- Include service philosophy in the Narrative

On-Site Evidence

No On-Site Evidence

On-Site Activities

- Interview:
 - a. Program director
 - b. Relevant personnel

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Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



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PS 6: Pregnancy Options Counseling/Birth Options Counseling

Individuals receive nondirective counseling and information services that help them make decisions about the pregnancy.

NA *The organization does not provide counseling services designed to help individuals make decisions about their pregnancies.*

Note: *Organizations that offer counseling on all possible options for the pregnancy (i.e., parenting, adoption or other transfer of custody, and termination) will be considered to provide Pregnancy Options Counseling. Organizations that offer counseling only on parenting and adoption or other transfer of custody (i.e., not on termination) will be considered to provide Birth Options Counseling, and will be rated according to slightly different criteria for standards PS 6.01, PS 6.02, and PS 6.07. See the interpretations to these standards for further guidance.*

Rating Indicators

1) All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice standards.

2) Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice standards; e.g.,

- Minor inconsistencies and not yet fully developed practices are noted, however, these do not significantly impact service quality; or
- Procedures need strengthening; or
- With few exceptions procedures are understood by staff and are being used; or
- For the most part, established timeframes are met; or
- Proper documentation is the norm and any issues with individual staff members are being addressed through performance evaluations (HR 6.02) and training (TS 2.03); or
- Active client participation occurs to a considerable extent.

3) Practice requires significant improvement, as noted in the ratings for the Practice standards. Service quality or program functioning may be compromised; e.g.,

- Procedures and/or case record documentation need significant strengthening; or
- Procedures are not well-understood or used appropriately; or
- Timeframes are often missed; or

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Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



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- A number of client records are missing important information Â or
- Client participation is inconsistent; or
- One of the Fundamental Practice Standards received a rating of 3 or 4.

4) Implementation of the standard is minimal or there is no evidence of implementation at all, as noted in the ratings for the Practice standards; e.g.,

- No written procedures, or procedures are clearly inadequate or not being used; or
- Documentation is routinely incomplete and/or missing; or Â
- Two or more Fundamental Practice Standards received a rating of 3 or 4.

Table of Evidence

Self-Study Evidence

- A description of services
- Procedures for maintaining confidentiality when involved parties are counseled separately
- Procedures for linking individuals to services

On-Site Evidence

- Informational materials distributed to individuals served

On-Site Activities

- Interview:
 - a. Program director
 - b. Relevant personnel
 - c. Individuals served
- Review case records

(FP) PS 6.01

Individuals have the option to be counseled and fully-informed about all possible options for the pregnancy.

Interpretation: *Possible options include parenting, planning for adoption or other transfer of custody, and termination. When an organization offers only Birth Options Counseling, and thus does not provide counseling and information related to termination, the organization should: (1) disclose this*

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Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



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fact to service recipients, as referenced in the Interpretation to PS 1.02, and (2) demonstrate that it carefully considered its mission, capacity, resources, and community's needs when it decided not to provide counseling on all alternatives for pregnancy resolution.

Research Note: *The American College of Obstetricians and Gynecologists and the American Academy of Pediatrics recommend that individuals receive information about all options for the pregnancy.*

Note: *When an organization does not provide direct counseling and information related to termination, practice could include providing individuals with a comprehensive list of other community providers that offer pregnancy counseling, support, and education services.*

PS 6.02

Counseling is nondirective and nonjudgmental, and helps individuals make the best decisions for their particular circumstances.

Interpretation: *Although organizations that offer only Birth Options Counseling will not provide counseling on termination, they should still provide nondirective and nonjudgmental counseling regarding parenting and adoption or other transfer of custody.*

PS 6.03

When family members or significant others, including the birth father, are involved in counseling services, all parties have opportunities to explore their individual feelings and needs.

Interpretation: *When an organization provides joint counseling, it should ensure that counseling parties together does not inhibit a full exploration of individuals' feelings. Accordingly, it may be appropriate to offer both joint and individual counselling. When the birth father or family requests counselling and the pregnant woman is opposed, the organization should make a referral or create a separate case. When a separate case is created, confidentiality must be protected at all times.*

PS 6.04

Individuals have the opportunity to receive information and counseling regarding the implications of parenting that addresses:

- a. responsibilities associated with parenting;

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- b. child care;
- c. living arrangements;
- d. costs associated with raising a child;
- e. how parenting will impact the expectant parents' goals and plans for the future;
- f. whether family members or friends will be willing to help the expectant parents;
- g. the role that the birth father will play; and
- h. single parenting or the possibility of marriage.

PS 6.05

Individuals have the opportunity to receive information and counseling regarding the implications of adoption or other transfer of custody that addresses:

- a. types of available adoption and guardianship services, and the range of openness in adoption;
- b. parents' legal rights and the rights termination process;
- c. financial assistance that may be available;
- d. separation from the child, and grief and loss;
- e. long-term implications of the decision; and
- f. making plans for the immediate future.

PS 6.06

Individuals have the opportunity to receive information and counseling regarding the implications of termination that addresses:

- a. attitudes toward pregnancy termination, including personal religious beliefs;
- b. emotional issues related to grief and loss, and the finality of the decision;
- c. types of procedures available;
- d. costs of the procedure; and
- e. legal issues for minors (such as parental notification, parental consent, and judicial bypass), if applicable.

NA *The organization provides only Birth Options Counseling.*

PS 6.07

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Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



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Individuals are helped to carry out their decisions about the pregnancy and obtain any other needed services, directly or by referral.

Interpretation: *Individuals may need prenatal care, parent education, adoption services, or termination services to carry out their decisions about the pregnancy. Other needed services can include, but are not limited to, health, educational, vocational, and housing services. Organizations that offer only Birth Options Counseling, and thus do not provide linkages to termination services, should disclose this fact to service recipients, as referenced in PS 6.01.*

(FP) PS 6.08

To help individuals stay healthy and prevent subsequent unintended pregnancies, the organization:

- a. provides information and education about the prevention and treatment of diseases, including HIV/AIDS and other sexually transmitted diseases;
- b. provides information and education about pregnancy prevention, pregnancy planning, and the spacing of children; and
- c. links individuals to family planning services.

Interpretation: *An organization that does not provide linkages to family planning services when doing so is counter to its mission or beliefs should disclose this fact to service recipients.*

Note: *When an organization does not provide linkages to family planning services because doing so is counter to its mission or beliefs, practice could include providing individuals with a comprehensive list of other community providers that offer pregnancy support and education services.*

Note: *See Research Note to PS 7.04.*

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Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



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PS 7: Health Services

Expectant parents are linked to the health services necessary to promote parent well-being, healthy births, and healthy child development.

NA *The organization provides only Pregnancy Options Counseling or Birth Options Counseling.*

Rating Indicators

1) All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice standards.

2) Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice standards; e.g.,

- Minor inconsistencies and not yet fully developed practices are noted, however, these do not significantly impact service quality; or
- Procedures need strengthening; or
- With few exceptions procedures are understood by staff and are being used; or
- For the most part, established timeframes are met; or
- Proper documentation is the norm and any issues with individual staff members are being addressed through performance evaluations (HR 6.02) and training (TS 2.03); or
- Active client participation occurs to a considerable extent.

3) Practice requires significant improvement, as noted in the ratings for the Practice standards. Service quality or program functioning may be compromised; e.g.,

- Procedures and/or case record documentation need significant strengthening; or
- Procedures are not well-understood or used appropriately; or
- Timeframes are often missed; or
- A number of client records are missing important information or
- Client participation is inconsistent; or
- One of the Fundamental Practice Standards received a rating of 3 or 4.

4) Implementation of the standard is minimal or there is no evidence of implementation at all, as noted in the ratings for the Practice standards; e.g.,

- No written procedures, or procedures are clearly inadequate or not being used; or

Purpose

Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



Pregnancy Support Services

- Documentation is routinely incomplete and/or missing; or A
- Two or more Fundamental Practice Standards received a rating of 3 or 4.

Table of Evidence

Self-Study Evidence

- A description of services
- Procedures for linking individuals to services and providing ongoing monitoring and follow-up

On-Site Evidence

No On-Site Evidence

On-Site Activities

- Interview:
 - a. Program director
 - b. Relevant personnel
 - c. Individuals served
- Review case records

(FP) PS 7.01

Expectant parents are linked to the following healthcare services, as appropriate to their needs:

- a. prenatal health care;
- b. genetic risk identification and counseling services;
- c. labor and delivery services;
- d. diagnosis and treatment of health problems, including sexually transmitted diseases;
- e. dental care;
- f. mental health care;
- g. postpartum care;
- h. ongoing health care, including routine medical checkups; and
- i. pediatric care, including well-baby visits and immunizations.

Interpretation: *Regarding element (f), expectant mothers should be screened for depression, informed about postpartum depression, and connected to available support and treatment services.*

Purpose

Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



Pregnancy Support Services

(FP) PS 7.02

Expectant parents are helped to access other services needed to promote parental well-being and healthy births, including, as appropriate:

- a. food and nutrition services;
- b. smoking cessation services; and
- c. services for substance use conditions.

PS 7.03

Expectant parents are helped to sign up for health insurance when coverage is available and receive information about other options for care, such as free clinics, when insurance coverage is not available.

(FP) PS 7.04

To help expectant parents stay healthy and prevent unintended subsequent pregnancies, the organization:

- a. provides information and education about the prevention and treatment of diseases, including HIV/AIDS and other sexually transmitted diseases;
- b. provides information and education about pregnancy prevention, pregnancy planning, and the spacing of children; and
- c. links expectant parents to family planning services.

Interpretation: *An organization that does not link service recipients with family planning services when doing so is counter to its mission or beliefs should disclose this fact to service recipients.*

Research Note: *Research indicates that rapid repeat births are associated with adverse outcomes for adolescent mothers and their children. It is unclear if these outcomes result from subsequent births or the underlying characteristics that lead some teen mothers to give birth a second time, and literature suggests there may be truth to both explanations. Some experts suggest that youths become pregnant because they believe they have limited life options and little to lose by having a baby. Accordingly, as addressed in PS 8 and PS 9, organizations should try to motivate adolescents to prevent future pregnancies by: (1) linking them to the education and employment opportunities that may improve their life options, and (2) helping them develop the confidence that they can utilize and benefit from those opportunities. Literature also cautions that it can be difficult for a program to succeed in preventing subsequent pregnancies,*

Purpose

Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



Pregnancy Support Services

especially when service recipients live in communities where opportunities are limited, or do not share the program's goal of delaying future pregnancies.

Note: *When an organization does not provide linkages to family planning services because doing so is counter to its mission or beliefs, practice could include providing individuals with a comprehensive list of other community providers that offer pregnancy support and education services.*

Purpose

Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



Pregnancy Support Services

PS 8: Education Services

Educational and skill-building activities help expectant parents reach their highest level of personal functioning, experience healthy births, prepare for family life, meet the responsibilities of parenthood, and care for their children.

Interpretation: *Services should help expectant parents build skills, gain confidence in their personal abilities, increase their self-esteem, and develop their sense of control, choice, and empowerment.*

NA *The organization provides only Pregnancy Options Counseling or Birth Options Counseling.*

Rating Indicators

1) All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice standards.

2) Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice standards; e.g.,

- Minor inconsistencies and not yet fully developed practices are noted, however, these do not significantly impact service quality; or
- Procedures need strengthening; or
- With few exceptions procedures are understood by staff and are being used; or
- For the most part, established timeframes are met; or
- Proper documentation is the norm and any issues with individual staff members are being addressed through performance evaluations (HR 6.02) and training (TS 2.03); or
- Active client participation occurs to a considerable extent.

3) Practice requires significant improvement, as noted in the ratings for the Practice standards. Service quality or program functioning may be compromised; e.g.,

- Procedures and/or case record documentation need significant strengthening; or
- Procedures are not well-understood or used appropriately; or
- Timeframes are often missed; or
- A number of client records are missing important information or
- Client participation is inconsistent; or
- One of the Fundamental Practice Standards received a rating of 3 or 4.

4) Implementation of the standard is minimal or there is no evidence of

Purpose

Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



Pregnancy Support Services

implementation at all, as noted in the ratings for the Practice standards;
e.g.,

- No written procedures, or procedures are clearly inadequate or not being used; or
- Documentation is routinely incomplete and/or missing; or
- Two or more Fundamental Practice Standards received a rating of 3 or 4.

Table of Evidence

Self-Study Evidence

- A description of services
- Table of contents of educational curricula

On-Site Evidence

- Educational curricula

On-Site Activities

- Interview:
 - a. Program director
 - b. Relevant personnel
 - c. Individuals served
- Review case records

PS 8.01

Expectant parents are educated and counseled about positive personal development and self-sufficiency, including:

- a. personal growth and maturity;
- b. interpersonal relations and communication;
- c. future goals and aspirations, including those related to education and employment;
- d. managing and coping with stress, including stress related to the pregnancy;
- e. problem-solving and decision-making;
- f. time, budget, and household management; and
- g. effectively using available community resources.

Purpose

Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



Pregnancy Support Services

(FP) PS 8.02

Expectant parents are educated about the following prenatal health topics:

- a. fetal growth and development;
- b. the importance of prenatal care;
- c. nutrition and proper weight gain;
- d. appropriate exercise;
- e. medication use during pregnancy;
- f. effects of tobacco and substance use on fetal development;
- g. what to expect during labor and delivery; and
- h. benefits of breastfeeding.

Interpretation: *These topics may be addressed by qualified medical personnel in the context of the prenatal health care referenced in PS 7.01.*

(FP) PS 8.03

Expectant parents are educated about the following child development and child-rearing topics:

- a. caring for newborns, infants, and young children;
- b. health and nutritional needs of newborns, infants, and young children;
- c. cognitive and physical development of newborns, infants, and young children;
- d. environmental safety and injury prevention;
- e. parent-child interactions; and
- f. age-appropriate behavioral expectations and appropriate discipline for children.

Interpretation: *Please note that education on environmental safety and injury prevention should include education regarding safe practices for sleeping and bathing.*

Research Note: *The Safe to Sleep Campaign® reduces the risk of Sudden Infant Death Syndrome (SIDS) and other sleep-related causes of infant death by educating caregivers on safe sleep practices, and is a good resource for organizations looking for more information on SIDS prevention. The National Institute of Child Health and Human Development directs and maintains the Safe to Sleep campaign® in collaboration with the American Academy of Pediatrics, the American College of Obstetricians and Gynecologists, the Association of SIDS and Infant Mortality Programs, the Centers for Disease Control and Prevention, the Consumer Product Safety Commission, First Candle, and the Maternal and Child Health Bureau.*

Purpose

Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



Pregnancy Support Services

NA *The organization does not serve expectant parents who plan to parent their children.*

PS 8.04

Expectant parents' characteristics, such as race, culture, ethnicity, language, age, developmental level, and literacy level, are taken into consideration when choosing or designing educational resources.

PS 8.05

When educational activities are provided in a group setting, services:

- a. emphasize group learning and sharing;
- b. respond flexibly to the changing needs of group members; and
- c. are scheduled with participants' time commitments in mind.

Interpretation: *Although some skills may be taught formally in a classroom context, program personnel should also engage expectant parents through more experiential methods, such as coaching and role modeling, that are designed to actively involve participants and help them personalize the information they are taught.*

NA *The organization does not provide education services in a group setting.*

PS 8.06

Group programs provide participants with opportunities to:

- a. contribute by sharing their experiences;
- b. listen to and learn from those who are similar to and different from themselves;
- c. develop positive relationships with others;
- d. assume responsibilities and develop leadership capacities; and
- e. participate in activities of interest.

NA *The organization does not provide education services in a group setting.*

Purpose

Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



Pregnancy Support Services

PS 9: Promoting Positive Life Course Development

Expectant parents are linked to formal and informal supports and services that can increase self-sufficiency and life options.

NA *The organization provides only Pregnancy Options Counseling or Birth Options Counseling.*

Rating Indicators

1) All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice standards.

2) Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice standards; e.g.,

- Minor inconsistencies and not yet fully developed practices are noted, however, these do not significantly impact service quality; or
- Procedures need strengthening; or
- With few exceptions procedures are understood by staff and are being used; or
- For the most part, established timeframes are met; or
- Proper documentation is the norm and any issues with individual staff members are being addressed through performance evaluations (HR 6.02) and training (TS 2.03); or
- Active client participation occurs to a considerable extent.

3) Practice requires significant improvement, as noted in the ratings for the Practice standards. Service quality or program functioning may be compromised; e.g.,

- Procedures and/or case record documentation need significant strengthening; or
- Procedures are not well-understood or used appropriately; or
- Timeframes are often missed; or
- A number of client records are missing important information or
- Client participation is inconsistent; or
- One of the Fundamental Practice Standards received a rating of 3 or 4.

4) Implementation of the standard is minimal or there is no evidence of implementation at all, as noted in the ratings for the Practice standards; e.g.,

- No written procedures, or procedures are clearly inadequate or not being used; or

Purpose

Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



Pregnancy Support Services

- Documentation is routinely incomplete and/or missing; or A
- Two or more Fundamental Practice Standards received a rating of 3 or 4.

Table of Evidence

Self-Study Evidence

- A description of services
- Procedures for linking individuals to services and providing ongoing monitoring and follow-up

On-Site Evidence

No On-Site Evidence

On-Site Activities

- Interview:
 - a. Program director
 - b. Relevant personnel
 - c. Individuals served
- Review case records

PS 9.01

To promote life options and economic self-sufficiency, expectant parents are helped to locate and enroll in educational or vocational programs that are appropriate to their needs, interests, and abilities.

Research Note: *Research indicates that women who become mothers during adolescence are more likely to be educationally and economically disadvantaged than women who delay childbearing. Although it was long assumed that this was a result of teen pregnancy, recent literature emphasizes that many girls who become adolescent mothers are also disadvantaged beforehand, and, as referenced in the Research Note to PS 7.04, suggests that many may become mothers as teens because they see their life options as limited. Nevertheless, although the economic consequences of early childbearing may have been overstated, some research controlling for background characteristics indicates that teen mothers are more likely to drop out of high school and experience greater poverty. Regardless of causality, the fact that young mothers tend to have needs in this area points to the importance of recognizing when they may need assistance promoting their educational and economic achievement.*

Purpose

Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



Pregnancy Support Services

PS 9.02

Expectant parents are helped to find new living arrangements when current living arrangements are not suitable.

Interpretation: *Expectant parents should have suitable housing both during and after the pregnancy. Appropriate arrangements can include living: (1) independently, (2) with family members, including the extended family, (3) in foster homes, (4) in group homes, or (5) in residential care.*

(FP) PS 9.03

Expectant parents are helped to access other community services needed to support positive life course development, including, as appropriate:

- a. child care;
- b. transportation services;
- c. financial assistance;
- d. legal services; and
- e. domestic violence, sexual abuse, or sexual assault services.

Research Note: *Some research suggests that a large proportion of young women who become adolescent mothers have been victims of sexual abuse and points to the importance of recognizing when individuals may need specialized therapeutic services.*

PS 9.04

Expectant parents receive social and emotional support directly from the service provider and are helped to develop and expand their informal support networks by:

- a. maintaining and strengthening their relationships with family members and the birth father, as appropriate; and
- b. building connections with friends, neighbors, and other community members.

PS 9.05

After delivery, parents without an alternative are helped to place their children in temporary foster care if they need time to establish homes or consider other plans for their children and themselves.

Purpose

Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



Pregnancy Support Services

NA *The organization does not assist parents in placing their children in temporary foster care.*

Purpose

Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



Pregnancy Support Services

PS 10: Case Closing and Aftercare

Case closing is a planned, orderly process, and the organization helps individuals develop plans for obtaining follow-up services.

NA *The organization provides only Pregnancy Options Counseling or Birth Options Counseling.*

Rating Indicators

1) All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice standards.

2) Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice standards; e.g.,

- Minor inconsistencies and not yet fully developed practices are noted, however, these do not significantly impact service quality; or
- Procedures need strengthening; or
- With few exceptions procedures are understood by staff and are being used; or
- Proper documentation is the norm and any issues with individual staff members are being addressed through performance evaluations (HR 6.02) and training (TS 2.03); or
- In a few instances the organization terminated services inappropriately; or
- Active client participation occurs to a considerable extent; or
- A formal case closing summary and assessment is not consistently provided to the public authority per the requirements of the standard.

3) Practice requires significant improvement, as noted in the ratings for the Practice standards. Service quality or program functioning may be compromised; e.g.,

- Procedures and/or case record documentation need significant strengthening; or
- Procedures are not well-understood or used appropriately; or
- Services are routinely terminated inappropriately; or
- A formal case closing summary and assessment is seldom provided to the public authority per the requirements of the standard.; or
- A number of client records are missing important information; or
- Client participation is inconsistent; or
- One of the Fundamental Practice Standards received a rating of 3 or 4.

4) Implementation of the standard is minimal or there is no evidence of

Purpose

Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



Pregnancy Support Services

implementation at all, as noted in the ratings for the Practice standards;
e.g.,

- No written procedures, or procedures are clearly inadequate or not being used; or
- Documentation is routinely incomplete and/or missing; or
- Two or more Fundamental Practice Standards received a rating of 3 or 4.

Table of Evidence

Self-Study Evidence

- Case closing procedures
- Aftercare/follow-up procedures

On-Site Evidence

- Procedures that address continuation of services for individuals whose third-party benefits have ended, if applicable
- Contract with public authority, if applicable

On-Site Activities

- Interview:
 - a. Program director
 - b. Relevant personnel
 - c. Individuals served
- Review case records

PS 10.01

Planning for case closing:

- a. is a clearly defined process that includes assignment of staff responsibility;
- b. begins at intake; and
- c. involves the provider, the service recipient, and any others involved in service planning and provision, as appropriate.

PS 10.02

Upon case closing, the organization notifies any collaborating service

Purpose

Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



Pregnancy Support Services

providers, as appropriate.

PS 10.03

When an individual's third-party benefits or payments end, the organization determines its responsibility to provide services until appropriate arrangements are made and, if service ends due to non-payment, the organization works with the individual to identify service options.

Interpretation: *Third-party benefits or payments should be accepted in accordance with state regulations. The organization must determine on a case-by-case basis its responsibility to continue providing services to persons whose third-party benefits have ended and who are in critical situations.*

NA *The organization does not receive third-party benefits or payments for service.*

PS 10.04

If an individual is asked to leave the program, the organization makes every effort to link the person with appropriate services.

PS 10.05

Individuals and providers work together to develop aftercare plans that identify services needed or desired by the individual, and specify steps for obtaining these services.

Interpretation: *While the decision to develop an aftercare plan is based on the wishes of the service recipient, unless aftercare is mandated, the organization is expected to be strongly proactive with respect to aftercare planning. To increase the likelihood that needed supports and services will be accessed after case closing, the organization should take the initiative to explore suitable resources, contact service providers, and follow up on the aftercare plan, as appropriate, when possible, and with the permission of the individual.*

Research Note: *Some literature suggests that adolescent and young mothers may continue to need supportive services well after the birth of the child. Accordingly, it may be especially important to connect individuals with follow-up services if an organization providing Pregnancy Support Services*

Purpose

Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



Pregnancy Support Services

does not continue to offer services after birth.

NA *The organization has a contract with a public authority that does not include aftercare planning or follow-up.*

PS 10.06

The organization that has a contract with a public authority that does not include aftercare planning or follow-up:

- a. conducts a formal case closing evaluation and assessment of unmet needs; and
- b. informs the public body of the findings, in writing, as appropriate to the contract and with the permission of the individual.

NA *The organization does not have a relevant contract with a public authority.*

Purpose

Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



Pregnancy Support Services

PS 11: Personnel

Personnel are qualified to support, educate, and counsel individuals who are pregnant.

Rating Indicators

- 1) All elements or requirements outlined in the standard are evident in practice, as indicated by full implementation of the practices outlined in the Practice standards.
- 2) Practices are basically sound but there is room for improvement, as noted in the ratings for the Practice standards; e.g.,
 - With some exceptions, staff (direct service providers, supervisors, and program managers) possess the required qualifications, including: education, experience, training, skills, temperament, etc., but the integrity of the service is not compromised.
 - Supervisors provide additional support and oversight, as needed, to staff without the listed qualifications.
 - Most staff who do not meet educational requirements are seeking to obtain them.
 - With some exceptions staff have received required training, including applicable specialized training.
 - Training curricula are not fully developed or lack depth.
 - A few personnel have not yet received required training.
 - Training documentation is consistently maintained and kept up-to-date with some exceptions.
 - A substantial number of supervisors meet the requirements of the standard, and the organization provides training and/or consultation to improve competencies.
 - Supervisors provide structure and support in relation to service outcomes, organizational culture and staff retention.
 - With a few exceptions caseload sizes are consistently maintained as required by the standards.
 - Workloads are such that staff can effectively accomplish their assigned tasks and provide quality services, and are adjusted as necessary in accord with established workload procedures.
 - Procedures need strengthening.
 - With few exceptions procedures are understood by staff and are being used.
 - With a few exceptions specialized staff are retained as required and possess the required qualifications.
 - Specialized services are obtained as required by the standards.

Purpose

Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



Pregnancy Support Services

3) Practice requires significant improvement, as noted in the ratings for the Practice standards. Service quality or program functioning may be compromised; e.g.,

- One of the Fundamental Practice Standards received a rating of 3 or 4.
- A significant number of staff, e.g., direct service providers, supervisors, and program managers, do not possess the required qualifications, including: education, experience, training, skills, temperament, etc.; and as a result the integrity of the service may be compromised.
 - Job descriptions typically do not reflect the requirements of the standards, and/or hiring practices do not document efforts to hire staff with required qualifications when vacancies occur.
 - Supervisors do not typically provide additional support and oversight to staff without the listed qualifications.
- A significant number of staff have not received required training, including applicable specialized training.
 - Training documentation is poorly maintained.
- A significant number of supervisors do not meet the requirements of the standard, and the organization makes little effort to provide training and/or consultation to improve competencies.
- There are numerous instances where caseload sizes exceed the standards' requirements.
- Workloads are excessive and the integrity of the service may be compromised.
 - Procedures need significant strengthening; or
 - Procedures are not well-understood or used appropriately; or
- Specialized staff are typically not retained as required and/or many do not possess the required qualifications; or
- Specialized services are infrequently obtained as required by the standards.

4) Implementation of the standard is minimal or there is no evidence of implementation at all, as noted in the ratings for the Practice standards; e.g.,

For example:

- Two or more Fundamental Practice Standards received a rating of 3 or 4.

Table of Evidence

Self-Study Evidence

Purpose

Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



Pregnancy Support Services

- Program staffing chart that includes lines of supervision
- List of program personnel that includes:
 - a. name;
 - b. title;
 - c. degree held and/or other credentials;
 - d. FTE or volunteer;
 - e. length of service at the organization;
 - f. time in current position
- Table of contents of training curricula
- Procedures and criteria used for assigning and evaluating workloads

On-Site Evidence

- Job descriptions
- Documentation of training
- Training curricula

On-Site Activities

- Interview:
 - a. Supervisors
 - b. Personnel
- Review personnel files

PS 11.01

Direct service personnel have the competencies needed to:

- a. engage and empower individuals who are pregnant and their family members and significant others, including birth fathers;
- b. counsel and/or support individuals who are pregnant and their family members and significant others, including birth fathers;
- c. provide education on topics related to individual functioning, maternal health, and child rearing;
- d. communicate effectively with individuals from a wide range of backgrounds, cultures, and perspectives;
- e. link individuals with needed community services, including healthcare and medical services; and
- f. collaborate with community providers, including healthcare and medical professionals.

Related: TS 1, TS 2

Interpretation: *Competency can be demonstrated through a combination of education, training, and experience.*

Purpose

Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



Pregnancy Support Services

PS 11.02

Personnel providing education services in a group setting have the competencies needed to:

- a. engage and motivate group members;
- b. educate group members;
- c. understand group dynamics;
- d. lead discussions; and
- e. facilitate group activities.

Related: TS 1, TS 2

Interpretation: *Competency can be demonstrated through a combination of education, training, and experience.*

NA *The organization does not provide education services in a group setting.*

PS 11.03

Personnel who provide pregnancy counseling are qualified by:

- a. an advanced degree in social work or a comparable human service field and related experience; or
- b. a bachelor's degree in social work or a comparable human service field and related experience, with supervision by a person with an advanced degree in social work or a comparable human service field.

Interpretation: *Related experience can include: (1) experience in pregnancy counseling, (2) experience in family and children's services and training in pregnancy counseling, or (3) experience in counseling and training in pregnancy counseling.*

NA *The organization does not provide counseling services designed to help individuals make decisions about their pregnancies.*

PS 11.04

Personnel who provide education services are supervised by a person who is qualified by:

- a. an advanced degree in education or a comparable human service field;
or
- b. a bachelor's degree in education or a comparable human service field and two years' related experience.

Purpose

Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.



Pregnancy Support Services

Related: TS 3

NA *The organization does not provide education services.*

PS 11.05

Employee workloads support the achievement of positive outcomes for individuals served, are regularly reviewed, and are based on an assessment of the following:

- a. the qualifications, competencies, and experience of the provider, including the level of supervision needed;
- b. the work and time required to accomplish assigned tasks and job responsibilities; and
- c. service volume, accounting for assessed level of needs of new and current individuals and referrals.

Purpose

Individuals who participate in Pregnancy Support Services learn about parenthood, make informed decisions about their pregnancies, stay healthy, and pursue their educational and vocational goals.