



## Michigan Alliance of Information and Referral Systems

*Application for MI-AIRS  
Endorsement  
As A 2-1-1 Call Center  
August 13, 2008*

*Existing Call Centers Adding Counties to their Service Area*

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## **Instructions for Completion & Submission**

The complete application for MI-AIRS Endorsement as a 2-1-1 Call Center can be downloaded at:

<http://www.mi-air.com/endorsement.html>

### **Completion of application**

This application consists of four Standards, each with its own requirements, that must be met (as determined by an appointed MI-AIRS Review Team) before the call center can receive MI-AIRS endorsement. To complete the application, answer each question listed under the requirements for each standard. Add any additional comments or explanations related to the questions, and provide any documentation necessary. A list of documentation required can be found at the bottom of each Standard. Additional documentation can be submitted as well, if necessary for explanation.

### **Submission of application**

The applicant submits an application to MI-AIRS for endorsement of county (ies) to be added to service area as follows:

- The application shall be tabbed and paginated to align with the MI-AIRS Standards and Requirements
- The application may be placed in a binder
- Three copies of the application are required for the first submission
- Each copy of the original application shall be placed in a separate mail-ready envelope and submitted to the MI-AIRS Liaison appointed earlier
- The Review Team's findings and informational needs will be communicated electronically to the applicant by the MI-AIRS liaison following their initial review of the application
- All additional communication between the applicant and the MI-AIRS Review Team/liasion can be completed electronically (documentation and additional comments can be exchanged via email using .doc and .pdf files)

Any additional questions regarding the completion or submission of the application should be directed to the MI-AIRS Liaison.

**Standard I**

The Call Center shall provide professional information and referral services as described in the Standards for Professional Information and Referral published by the Alliance of Information and Referral Systems (AIRS).

**Requirement 3:** Call center applicants that do not provide formal crisis intervention shall have protocols and technology to transfer crisis calls\* to an agency that does.

\*A 'crisis call' is one in which the caller is: 1) contemplating suicide or otherwise experiencing extreme emotional distress, or 2) in a life threatening situation that requires immediate police, fire, or medical intervention. Callers seeking emergency services, such as food or shelter, are not considered to be in 'crisis' and should be served by the call center as a matter of routine.

Questions:

Does your I&R service provide formal suicide/mental health crisis intervention? yes    no

If no, is there a formal suicide/mental health hotline service that serves your region? yes    no

If yes,

What is its name and sponsoring organization? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Does your I&R have an memorandum of understanding (MOU) to connect callers with that service? yes    no

Does your I&R have protocols for transferring callers to that service? yes    no

Is your phone system capable of seamlessly transferring callers to that service? yes    no

If no to any of the above,

How do your I&R specialists handle crisis calls? (Use the *Explanation/Comments* box below.)

Does your I&R service have protocols for referring callers to 9-1-1? yes    no

Explanation/Comments:

Documentation: MOU & protocol(s) for transferring calls to a designated suicide/mental health hotline. Also MOU & protocol(s) for transferring calls to each 9-1-1 dispatch center in the service area, including the 7 or 10-digit numbers to be used.

**Standard II**

The Call Center shall be accessible by operating on a 24/7 basis, Without assessing a direct charge against callers, and demonstrating a commitment to reasonable accommodate callers with special needs.

**Requirement 1:** The Call Center applicant shall ensure the provision of live 2-1-1 service 24-hours a day, year-round. (Allowances and arrangements for service during non-peak hours can differ than peak time operations.)

Questions:

Will your 2-1-1 service be provided by a live call specialist on a 24-hour/7 day basis? yes    no  
 Will another agency provide coverage of your lines at any time? yes    no

If no, skip below to Staffing Grid.

If yes, what is the name, address and phone number of this organization?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is the Organization providing coverage MI-AIRS endorsed and/or AIRS accredited? yes    no  
 Is there a plan for the partnering organization to become AIRS accredited? yes    no

What type of service(s) does this organization provide and how does it relate to the provision of information and referral? (Use *Explanation/Comments* box)

Will the partnering organization follow the same policies and procedures used by the 2-1-1 service for calls involving abuse/neglect of minors and adults, domestic violence, mental health crisis and emergency? If no, please explain. (Use *Explanation/Comments* box) yes    no

How do you plan to monitor the quality of service delivered by the partnering organization to ensure consistent and comparable service delivery? (Use *Explanation/Comments* box)

When will the partnering organization provide coverage for your 2-1-1 service? (Use *Explanation/Comments* box). Use grid below to show the days and hours of coverage

Do you have a formal written agreement with the partnering organization? yes    no

What is the anticipated call volume on each shift of your 2-1-1 service? (Use Staffing Grid below.)

What staffing levels will you/your partner agency maintain to meet expected demand? (Use Staffing Grid below)

What are your backup plans for periods of heavy demand/short staffing? (Use *Explanation/Comments* box)

**Staffing Grid:**

| Shift (indicate your shift hours) | M-F | M-F | M-F | S-S Weekend | S-S Weekend |
|-----------------------------------|-----|-----|-----|-------------|-------------|
| Est. call volume                  |     |     |     |             |             |
| Supervisory Staff                 |     |     |     |             |             |
| Phone Staff                       |     |     |     |             |             |
| Support Staff                     |     |     |     |             |             |

What staffing resources will the 2-1-1 service and if appropriate, partnering organization, use to meet expected call demand? (Use Staffing Grid above)  
 Describe your backup plans and if appropriate, your partnering organization's plans for periods of high call demand and/or staff shortages. (Use *explanations/comments* box)

Explanation/Comments:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Explanation/Comments, continued:

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Documentation: MOU or contract with partner organization. Description of partner organization (including organization brochure and annual report). Description of partner organization qualifications and organizational capacity (including proof of accreditation (if applicable), staff certifications (if applicable), training agenda, staff development activities, and database accessibility and usage). Plans and tools used to assess the quality of service delivered by the partner organization. Documentation that partner organization is required to follow the same policies and procedures used by the 2-1-1 service for calls involving abuse/neglect of minors and adults, domestic violence, mental health crisis and emergency.



**Standard III**

The call center shall have the tools necessary to adequately support 2-1-1 service.

**Requirement 1:** The Call Center shall utilize a computerized resource database that contains accurate, detailed, and uniform information about community resources and is indexed using the AIRS/Info Line Taxonomy.

**Questions:**

|  |       |       |
|--|-------|-------|
| Does your I&R service utilize a computerized resource database?  | yes   | no    |
| Does your agency maintain the database?  | yes   | no    |
| If no, what is the name and address of the organization that maintains the database?   |       |       |
| _____  |       |       |
| _____  |       |       |
| _____  |       |       |
| What is the total number of records in the database?   |       | _____ |
| How many records are specific to the county(ies) currently pending endorsement?  |       | _____ |
| How many new records were added in the last 12 months?   |       | _____ |
| How many records were updated* during the last 12 months?  |       | _____ |
| What is the date the taxonomy was last updated with the AIRS/Info Line Taxonomy?***  |       | _____ |
| What software is used to operate the database?   | Refer | _____ |
| _____ , other Commercial I&R Application   |       | _____ |
| _____ Custom I&R Application   |       | _____ |
| Is the database manager a participant in the MI 2-1-1 Resource Managers Work Group?  | yes   | no    |
| Do records in the database follow a uniform profile?   | yes   | no    |
| Does the profile include:  |       |       |
| A unique record identification number?   | yes   | no    |
| The legal name of the organization?  | yes   | no    |
| Other names by which the organization is known (popular names, former names, etc.)   | yes   | no    |
| A description of the legal status of the organization?<br>(nonprofit, for-profit, government, etc.)  | yes   | no    |
| Federal Employer Identification Number (EIN)?  | yes   | no    |
| Street addresses?  | yes   | no    |
| Mailing addresses, where applicable?   | yes   | no    |
| Telephone numbers, including TDD/TTY and fax?  | yes   | no    |
| A description of services provided?  | yes   | no    |
| A description of eligibility requirements?   | yes   | no    |
| A description of the application process?  | yes   | no    |
| The date the information was last verified?  |       |       |
| Does your software support the AIRS/Info Line Taxonomy by:   |       |       |
| Allowing users to search the Taxonomy level by level?  | yes   | no    |
| Allowing users to specify that they want to search for all records indexed to a<br>selected term and <i>all of the lower level terms on the same branch of the hierarchy</i> ? | yes   | no    |
| Allowing users to do a keyword search of Taxonomy terms?   | yes   | no    |
| Does the keyword search include Taxonomy 'use' references (synonyms)   | yes   | no    |
| Are records in the database accurately and consistently indexed<br>using the AIRS/Info Line Taxonomy? <sup>1</sup>   | yes   | no    |
| When available, are 'Facility Type' terms used?  | yes   | no    |
| Is 'double indexing' (indexing using terms at multiple levels within a single<br>branch of the hierarchy) avoided? (Use <i>Explanation/Comments</i> box below)                 | yes   | no    |
| Does the database management site keep their copy of the Taxonomy<br>current by incorporating updates issued by Info Line?   | yes   | no    |

Is the database updated regularly:

|   |     |    |
|---|-----|----|
| Is basic contact information for all records updated at least annually? | yes | no |
| Is core service information for all records updated at least annually?  | yes | no |

If applying for endorsement for more than one county: do the responses to the questions above reflect all counties?  
(If no, use *Explanation/Comments* box below)

|     |    |
|-----|----|
| yes | no |
|-----|----|

Explanation/Comments:

Documentation: Sample profile of database entry. Sample database entries (such as a directory or survey document) created within the last 12 months to include organizations unique to the community served, as opposed to statewide entities. A minimum of 4 agency records per county proposed to be served is required. Printout of all terms used to index the database in code order (one copy only) generated within the 30 days of the application submittal date. A printout of the service index to the full resource database (one copy only) generated within the 30 days of the application submittal date. Written plans regarding plans to implement statements above answered as ‘no’. Written statement or policy confirming use of AIRS/Info Line *Taxonomy of Human Services*, or written plan for implementation and reasonable projected date when the conversion will be complete. Written documentation of policy/protocol for updating database records (including resource information form, agency notification procedure(s), and validation of service), updating taxonomy policy, and proof of subscription to the AIRS/Info Line Taxonomy. Copy of the agency’s inclusion/exclusion policy. Written documentation of participation in the MI 2-1-1 Resource Managers Work Group. An electronic copy of the indexed community resources database. A copy can be submitted in a browser format (the database with the software to search the database) or a web address for an internet based database. If not available, a site visit will be required at the applicant’s expense.

\*Updated means that an agency in the database reviewed a copy of its record and responded with confirmation, new or corrected information.

\*\* According to the AIRS Standards for Professional Information and Referral, version 5.2, Revised May 2007, (page 15): Standard 8: Classification System (Taxonomy), Criteria 4: “The I&R service shall have procedures in place to integrate Taxonomy additions and changes, and shall update their copy of Taxonomy at least annually.”

<sup>1</sup> For guidelines on ‘accurate and consistent’ indexing, refer to “Indexing with the AIRS/INFO LINE Taxonomy of Human Services” by Margaret (Gillis) Bruni, Detroit Public Library at: [http://www.airs.org/downloads/indexing\\_with\\_the\\_taxonomy.PDF](http://www.airs.org/downloads/indexing_with_the_taxonomy.PDF)



**Standard IV**

The Call Center shall work to coordinate information and referral services in their local community and in the state of Michigan.

**Requirement 1:** The Call Center applicant shall demonstrate knowledge of, as well as coordination with, other community information and referral providers (such as other comprehensive I&Rs, major specialized I&Rs, crisis centers, 9-1-1 centers, and 3-1-1 centers) that operate in any part of the applicant’s proposed 2-1-1 service area.

Questions:

Does your I&R service have defined working relationships with other major community information and referral providers in the proposed 2-1-1 service area? yes    no

(Use the *Explanation/Comments* section below to describe relationships.)

Does your I&R service have written protocols for referring inquirers to these providers? yes    no

Have the relevant state-endorsed endorsed your agency’s plan to initiate 2-1-1 services in your area? yes    no

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Explanation/Comments:

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Documentation & Minimum Expectation: MOUs, contract, or other agreements that documentation cooperative working relationships with:

- Local Child Care Resource and Referral Agency
  - Senior I&A/R Agency
  - Crisis Intervention Program/Agency
  - Military Family Centers
  - Volunteer Centers
  - Disability Resource Centers
  - Employment & Training (One Call/One Stop Service Centers)
- Copy of Endorsements for each county of proposed service.

NOTE: When adding counties to service area, please include MOU’s for each county’s centers.

**Standard IV**

The Call Center shall work to coordinate information and referral services in their local community and in the state of Michigan.

**Requirement 2:** The Call Center applicant shall have developed a protocol for referring callers who want to make a community spirited contribution of money, goods or services – including volunteer hours – to agencies that coordinate volunteers and/or manage donations of money, goods or services.

Questions:

|   |     |    |
|---|-----|----|
| Are there agencies in your proposed 2-1-1 service area that coordinate volunteers in the community?       | yes | no |
| Are there agencies in your proposed 2-1-1 service area that manage donations of money, goods or services? | yes | no |
| Does your I&R service have formal protocols for referring inquirers to these agencies?                    | yes | no |

Explanation/Comments:

Documentation: MOU with local volunteer coordinating agency with relevant protocol(s). Protocol(s) for handling donation requests.

**NOTE:** Please include MOU’s for all counties in proposed service area.

**Standard IV**

The Call Center shall work to coordinate information and referral services in their local community and in the state of Michigan.

**Requirement 3:** The Call Center applicant shall conduct an ongoing program designed to increase public awareness of I&R and 2-1-1 services.

Questions:

|   |        |       |
|---|--------|-------|
| Does your agency have a plan to increase public awareness of I&R and 2-1-1 services?<br>If yes, what is that plan? (Summarize using the <i>Explanation/Comments</i> section below.) | yes    | no    |
| Does your agency have a budget to support I&R/2-1-1 public awareness activities?  | yes    | no    |
| Is the plan fully funded? (if not, please explain in comments section)  | yes    | no    |
| If yes, what is the budget?   | Year 1 | _____ |
|   | Year 2 | _____ |
| Will your information and referral service routinely collect data about how inquirers heard about your 2-1-1 service?   | yes    | no    |

Explanation/Comments:

Documentation: Copy of updated marketing plan and marketing budget (include timeframes & confirmation of funding). Sample report or screen shot on data collection method for tracking how inquirers learned about 2-1-1 service.

**Standard IV**

The Call Center shall work to coordinate information and referral services in their local community and in the state of Michigan.

**Requirement 4:** The Call Center applicant shall strive to strengthen the seamless and uniform delivery of information & referral services in Michigan by working collaboratively with all other 2-1-1 Call Centers in Michigan and other I&R providers in Michigan.

Questions:

|  |     |    |
|--|-----|----|
| Is your agency committed to supporting decentralized, coordinated development of a comprehensive statewide database of community resources?  | yes | no |
| Is your agency committed to participating in efforts to develop a uniform tool for 2-1-1 centers to use to collect statistics on the number of inquires to 2-1-1 centers, inquirer demographic/service needs, and outcomes data? | yes | no |
| Is your agency committed to developing support for 2-1-1 centers in adjacent service areas?  | yes | no |
| Does your I&R participate in the Michigan 2-1-1 Operating Council?   |     |    |
| Does your agency participate in Michigan 2-1-1 work groups or taskforces?  | yes | no |
| Does your I&R participate in the Michigan 2-1-1 Resource Managers Work Group?  | yes | no |
| Is your agency a member of AIRS?   | yes | no |

Explanation/Comments:

**Documentation:** Provide documentation of your organization’s current involvement/membership in the above mentioned groups.