Format updated 5-2021 and 5 - 2022

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| --- |
| *Outreach* *Services* *address* *the* *needs* *of* *individuals* *who* *are* *blind* *and* *those* *with* *low* *vision* *by* *enhancing* *the* *organization’s* *capacity* *to* *provide* *services,* *including* *assessments* *and* *direct* *services,* *in* *a* *variety* *of* *environments.**Organization directly provides services on-site at facilities operated by other organizations.* |
| Outreach Services (OS)**Organization will establish a self-study committee to assess and rate the organization on the following:** | Supporting Documentation | Review Committee Decision |
| Indicate name of file or cite page in documents you provide to show compliance. | Fully Met | Partially Met | Not Met |
| 1. Outreach services are in compliance with statutory and regulatory mandates and have goals and objectives that are consistent with the organization’s mission statement. |  |  |  |  |
| 2. Outreach services are based upon written short- and long- range plans, reflecting input from a variety of sources including consumers, professional service providers, staff, community organizations and appropriate advisory groups from throughout the service area. |  |  |  |  |
| 3. Outreach services are organized to meet the needs of the state and local community. |  |  |  |  |
| 4. Outreach services are readily identifiable and visible among targeted populations. |  |  |  |  |
| 5. Information is provided in a variety of formats to meet identified community needs and reflects the current best practice in providing educational and rehabilitation services to individuals who are blind and those with low vision. |  |  |  |  |
| 6. Assessments of individuals are comprehensive, and the findings are the basis for the development of an appropriate service plan.**Indicators** **of** **a** **comprehensive** **assessment** **may** **include,** **but** **not** **be** **limited** **to,** **evaluations** **in** **the** **following areas:** **academics,** **adaptive** **behavior,** **assistive** **technology,** **audiology,** **career** **education/vocational** **skills,** **communication** **skills** (**including** **assessment** **of** **learning** **media** **needs),** **concept** **development,** **daily** **living** **skills,** **intellectual** **functioning,** **low** **vision** **utilization,** **motor** **skills,** **orientation** **and** **mobility,** **recreation** **and** **leisure,** **sensory/motor** **skills,** **social/emotional** **skills.** |  |  |  |  |
| 7. The opportunity to discuss findings and recommendations is made available to those authorized to receive such information. |  |  |  |  |

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| 8. Direct services to individuals, guardians, and significant others meet identified needs of the individual and facilitate achievement. |  |  |  |  |
| 9. Consultation services are provided to local organizations and service providers to enhance their effectiveness in meeting the needs of the individual. |  |  |  |  |
| 10. Staff development and in-service trainings are provided to all personnel including volunteers and family members. |  |  |  |  |
| 11. Appropriate materials, books, and equipment are provided or loaned to facilitate the learning potential of the individuals who are blind and those who have low vision. |  |  |  |  |
| Total Standards |  | /11 | /11 | /11 |

Required Documents

Please prepare a folder in Dropbox (or use other means of sharing as mutually agreed with AER) for your organization’s Outreach Services Self-Study, with sub-folders labeled for each of the following documents:

* Self-Study (above)
* Policy and Procedures Related to Outreach Services
* Demonstrated Compliance to Statutory and Regulatory Mandates Verification
* Outreach Services Description that includes Goals and Objectives (brochure, handouts, etc.)
* Other Promotional Materials
* Individual Needs Assessment Tool/Instrument and Report
* Verification of In-service and Continuous Education for Staff (Training Curricula, Completion Certificate, and etc.)
* Description of Consultation Services and List of Partners including Service Providers and Local Organizations
* Material, Books and Equipment Loan Program Guidelines and Loan & Return Log
* Consumer Progress Reports
* **See** **Section** **I.** **(G)** **Program** **Evaluation** **and** **Improvement** **Required** **Documents** **and** **Submit** **Each** **Item** **for** **Outreach** **Services** **and** **Label** **“I.** **(G)** **Outreach** **Services.”**
* Narrative to explain any standards you rated as partially met or not met.
* Any other Narrative Remarks

List of Members of Self-Study Committee:

Date Self-Study Completed:

Date of Board Meeting approving Self-Study: