CARF Accreditation Report

for

Clements Centre Society

Three-Year Accreditation

Contents

About CARF

CARF is an independent, non-profit accreditor of health and human services, enhancing the lives of persons served worldwide.

The accreditation process applies CARF's internationally recognized standards during a site survey conducted by peer surveyors. Accreditation, however, is an ongoing process that distinguishes a provider's service delivery and signals to the public that the provider is committed to continuous performance improvement, responsive to feedback, and accountable to the community and its other stakeholders.

CARF accreditation promotes providers' demonstration of value and Quality Across the Lifespan® of millions of persons served through application of rigorous organizational and program standards organized around the ASPIRE to Excellence® continuous quality improvement framework. CARF accreditation has been the recognized benchmark of quality health and human services for more than 50 years.

For more information or to contact CARF, please visit www.carf.org/contact-us.

Organization

Clements Centre Society
5856 Clements Street
Duncan BC V9L 3W3
CANADA

Organizational Leadership

Dianne W. Hinton, BA, Executive Director/CEO
Lyn Taylor-Scott, BA, Program Director

Survey Number

162598

Survey Date(s)

October 26, 2022–October 28, 2022

Surveyor(s)

Makenna Rielly, MA, Administrative
Tiffany D. Byers-Draeger, Program
Tammy C. Seitz, Program

Program(s)/Service(s) Surveyed

Community Employment Services: Employment Supports
Community Employment Services: Job Development
Community Housing
Community Integration
Host Family/Shared Living Services
Services for Children and Youth: Child and Adolescent Services
Services for Children and Youth: Early Intervention Services
Supported Living
Governance Standards Applied

Previous Survey

October 28, 2019–October 30, 2019
Three-Year Accreditation

Accreditation Decision

Three-Year Accreditation
Expiration: November 30, 2025

Executive Summary

This report contains the findings of CARF's site survey of Clements Centre Society conducted October 26, 2022–October 28, 2022. This report includes the following information:

- Documentation of the accreditation decision and the basis for the decision as determined by CARF's consideration of the survey findings.

- Identification of the specific program(s)/service(s) and location(s) to which this accreditation decision applies.

- Identification of the CARF surveyor(s) who conducted the survey and an overview of the CARF survey process and how conformance to the standards was determined.

- Feedback on the organization's strengths and recognition of any areas where the organization demonstrated exemplary conformance to the standards.

- Documentation of the specific sections of the CARF standards that were applied on the survey.

- Recommendations for improvement in any areas where the organization did not meet the minimum requirements to demonstrate full conformance to the standards.

- Any consultative suggestions documented by the surveyor(s) to help the organization improve its program(s)/service(s) and business operations.

Accreditation Decision

On balance, Clements Centre Society demonstrated substantial conformance to the standards. Clements Centre Society (CCS) provides quality employment; community housing; supported living; and child, adolescent, and youth services in the Cowichan Valley region on Vancouver Island. As a well-respected service provider, the funders and community partners happily refer to CCS as a professional organization that is accountable with top-notch leadership. The collaborative manner in which the management and staff members interact reflects their shared team ethic under the leadership of the CEO. The administrative staff members have longevity and are extremely dedicated to the mission of the organization and to meeting the CARF standards, as exemplified by the quick desire to remedy any recommendations at the moment of identification, if possible. The people served are benefiting from and indicated happiness with and appreciation for the services they receive. There is ample evidence that the organization consistently follows the CARF standards, embraces quality improvements and practices, and has sound policies and procedures. CCS follows the core values of CARF by treating the people served with dignity and respect, striving for optimum outcomes, exercising informed choice through person-centred services, and aiming for continuous learning and improvement. The organization does have some areas for improvement that include expanding its performance measurement and management system to address community employment services and business functions, conducting more in-depth analyses of trends and results, and placing more emphasis on actions for performance improvement with noting the effectiveness of these actions. The organization should strengthen its performance measurement and management system's links to leadership, strategic planning, risk management, and technology. Other areas for improvement include some standards in health and safety, rights of the people served, program/service structure, individual-centred service planning, and medication management.

Clements Centre Society appears likely to maintain and/or improve its current method of operation and demonstrates a commitment to ongoing quality improvement. Clements Centre Society is required to submit a post-survey Quality Improvement Plan (QIP) to CARF that addresses all recommendations identified in this report.

Clements Centre Society has earned a Three-Year Accreditation. The leadership team and staff are complimented and congratulated for this achievement. In order to maintain this accreditation, throughout the term of accreditation, the organization is required to:

- Submit annual reporting documents and other required information to CARF, as detailed in the Accreditation Policies and Procedures section in the standards manual.

- Maintain ongoing conformance to CARF's standards, satisfy all accreditation conditions, and comply with all accreditation policies and procedures, as they are published and made effective by CARF.

Survey Details

Survey Participants

The survey of Clements Centre Society was conducted by the following CARF surveyor(s):

- Makenna Rielly, MA, Administrative

- Tiffany D. Byers-Draeger, Program

- Tammy C. Seitz, Program

CARF considers the involvement of persons served to be vital to the survey process. As part of the accreditation survey for all organizations, CARF surveyors interact with and conduct direct, confidential interviews with consenting current and former persons served in the program(s)/service(s) for which the organization is seeking accreditation. In addition, as applicable and available, interviews may be conducted with family members and/or representatives of the persons served such as guardians, advocates, or members of their support system.

Interviews are also conducted with individuals associated with the organization, as applicable, which may include:

- The organization's leadership, such as board members, executives, owners, and managers.

- Business unit resources, such as finance and human resources.

- Personnel who serve and directly interact with persons served in the program(s)/service(s) for which the organization is seeking accreditation.

- Other stakeholders, such as referral sources, payers, insurers, and fiscal intermediaries.

- Community constituents and governmental representatives.

Survey Activities

Achieving CARF accreditation involves demonstrating conformance to the applicable CARF standards, evidenced through observable practices, verifiable results over time, and comprehensive supporting documentation. The survey of Clements Centre Society and its program(s)/service(s) consisted of the following activities:

- Confidential interviews and direct interactions, as outlined in the previous section.

- Direct observation of the organization's operations and service delivery practices.

- Observation of the organization's location(s) where services are delivered.

- Review of organizational documents, which may include policies; plans; written procedures; promotional materials; governing documents, such as articles of incorporation and bylaws; financial statements; and other documents necessary to determine conformance to standards.

- Review of documents related to program/service design, delivery, outcomes, and improvement, such as program descriptions, records of services provided, documentation of reviews of program resources and services conducted, and program evaluations.

- Review of records of current and former persons served.

Program(s)/Service(s) Surveyed

The survey addressed by this report is specific to the following program(s)/service(s):

- Community Employment Services: Employment Supports

- Community Employment Services: Job Development

- Community Housing

- Community Integration

- Host Family/Shared Living Services

- Services for Children and Youth: Child and Adolescent Services

- Services for Children and Youth: Early Intervention Services

- Supported Living

- *Governance Standards Applied*

A list of the organization's accredited program(s)/service(s) by location is included at the end of this report.

Representations and Constraints

The accreditation decision and survey findings contained in this report are based on an on-balance consideration of the information obtained by the surveyor(s) during the site survey. Any information that was unavailable, not presented, or outside the scope of the survey was not considered and, had it been considered, may have affected the contents of this report. If at any time CARF subsequently learns or has reason to believe that the organization did not participate in the accreditation process in good faith or that any information presented was not accurate, truthful, or complete, CARF may modify the accreditation decision, up to and including revocation of accreditation.

Survey Findings

This report provides a summary of the organization's strengths and identifies the sections of the CARF standards that were applied on the survey and the findings in each area. In conjunction with its evaluation of conformance to the specific program/service standards, CARF assessed conformance to its business practice standards, referred to as Section 1. ASPIRE to Excellence, which are designed to support the delivery of the program(s)/service(s) within a sound business operating framework to promote long-term success.

The specific standards applied from each section vary based on a variety of factors, including, but not limited to, the scope(s) of the program(s)/service(s), population(s) served, location(s), methods of service delivery, and survey type. Information about the specific standards applied on each survey is included in the standards manual and other instructions that may be provided by CARF.

Areas of Strength

CARF found that Clements Centre Society demonstrated the following strengths:

- The CEO has been with CCS for 30 years and has served as its CEO for the past five years. Her professional acumen is how the organization survived the pandemic and also grew in the past few years. She is acknowledged for her steady leadership.

- The CFO and finance manager are recognized for their due diligence and thoroughness in handling the organization's finances. Their fiscal management covers all levels of accounting, including handling funds of the people served and managing fundraised dollars, and their business acuity in general. Their efforts have been proven through audits of the organization's financial statements and the internal control practices.

- The funder confirmed that CCS's services are provided by staff members who are competent and well trained. The relationship with the organization is complementary, and the funder has received positive feedback about CCS from the community. CCS stepped up during the pandemic and provided innovative service delivery through the use of information and communication technology. It was noted that CCS portrays an obvious passion for making a positive impact in the lives of the people served. Community partners praised CCS for its high level of professionalism and close connections with the community, including the rural areas.

- The board is commended for its work in moving the organization in a positive direction and for its governance of the organization. In addition, the board has a strong commitment to the organization's mission and the quality of programs and services provided to the people served.

- The CEO and human resources team are recognized for their focus on recruitment, onboarding, and retention and for also creating an inclusive workplace that promotes a culture of learning professionally along with opportunities for personal growth. With the pandemic and staffing shortages, they worked as a team to recruit needed staff and, through their efforts, ensured the continuity of services.

- The Health and Safety Committee has goals to protect the people served and personnel, which are thorough and impressive. The committee understands its role as part of the core of CCS and manages emergency planning and drills, handles critical incidents and analyses, creates action plans, and more.

- The management demonstrated a strong commitment to meeting the standards of CARF by being prepared for the survey, which was above expectations in preparing and organizing a vast amount of information as well as everyone participating in the process and being readily responsive to the consultation and recommendations made.

- The longevity of the staff members working for CCS reflects a devoted team to the organization that has gained expertise in the field and leads the organization to meet its mission and goals. The organization employs an especially experienced group of individuals in leadership positions, where most members have worked decades or more for the organization. These individuals act as role models in their respective specialty areas, and their knowledge is essential for continuously scanning the environment and adjusting programs and/or adding programs to ensure that the needs of the community are met.

- The facilities are welcoming, clean, and spacious. All spaces are geared to provide quality services based on accessibility and meeting the needs of the people served. This once again reflects a lens of person-centred services and safety for all who come into the centre.

- The early intervention staff members are enthusiastic about their jobs, and many have an employment tenure from five to 30 years. The staff members recognize that they are integral to many families of the people served, for this is their first step into the world of disabilities. These staff members do not take this responsibility lightly. Many of the staff members echoed the same essential statement, "Our families depend on us."

- The homes provided for the people served in CCS's housing program are specialized according to each person's age and disability. The homes are also tailored to each person's personality and preferences, even with custom-made chairs. The bedrooms are a direct reflection of the individual with family photos, stuffed animals, posters, and items that are important to the individual. The organization also continued going on vacations and day trips with the people served as pandemic restrictions allowed. Trips to various locations have been taken as requested by the people served.

- The organization's Facebook page is very informative and provides an excellent snapshot of CCS. A variety of areas are spotlighted, from the bottle and sock drive to the training opportunities, community inclusion, and participation activities, which all demonstrate the organization's enthusiasm.

- CCS benefits from a strong team of staff members who are exceptionally dedicated to the organization's mission. The genuine compassion that the employees display toward the people served and the level of care that the staff members provide clearly reflect the organization's mission and values.

- The families served by CCS expressed gratitude and a high degree of satisfaction with the services received. The families spoke passionately of their experiences with the staff, stating they were always treated with dignity and respect and also made to feel a part of a team, all of which positively impacted the lives of the people served and their families.

- CCS is a high performer in the field of employment services for people with different abilities and is known as the provider of choice. Its employment services provide extensive, very individualized, and complex support to the people served. There is a strong foundation within its delivery of services with a person-centred focus. There continues to be intentional and continuous empowerment given to the people served in their employment path at CCS.

- The office and centre locations at CCS are very attractive, with spacious outdoor areas for gardening and neighbourhoods for integrating safely in the community. The office and service areas are decorated attractively with proper space for staff offices and also for service programs, when necessary. The sites are also located in safe and attractive residential and business areas within the valley.

- CCS's community integration and home share services are recognized for the intense level of supports provided to the people served in these services. Many people served in these program areas have very complex behavioural and support needs, and the leadership and staff in these program areas are very compassionate about their mission in delivering the necessary level of care and support, which can be difficult at times due to staff shortages. There are extensive behavioural supports that are needed for many people served, and the CCS teams work to ensure that supports are in place and that services are running smoothly no matter the situation. There is a high level of commitment with these staff teams.

- The rapport between the staff members and the people served by CCS is remarkable. Many of the people served named several staff members, including the leadership team members, as individuals they can count on to help them when needed. One person served stated, "You guys are very trusting and open minded, kind of like a family. I feel you guys treat us with respect, and you guys listen to us. I feel loyalty and a happy environment. All together you guys are very good team, you are empathetic, and I have a lot of trust with you guys." Another stated, "Without your support I would be lost, and I feel like I belong with this agency." It is evident that there are strong bonds and relationships developed between the staff and people served.

Opportunities for Quality Improvement

The CARF survey process identifies opportunities for continuous improvement, a core concept of "aspiring to excellence." This section of the report lists the sections of the CARF standards that were applied on the survey, including a description of the business practice area and/or the specific program(s)/service(s) surveyed and a summary of the key areas addressed in that section of the standards.

In this section of the report, a recommendation identifies any standard for which CARF determined that the organization did not meet the minimum requirements to demonstrate full conformance. All recommendations must be addressed in a QIP submitted to CARF.

In addition, consultation may be provided for areas of or specific standards where the surveyor(s) documented suggestions that the organization may consider to improve its business or service delivery practices. Note that consultation may be offered for areas of specific standards that do not have any recommendations. Such consultation does not indicate non-conformance to the standards; it is intended to offer ideas that the organization might find helpful in its ongoing quality improvement efforts. The organization is not required to address consultation.

When CARF surveyors visit an organization, their role is that of independent peer reviewers, and their goal is not only to gather and assess information to determine conformance to the standards, but also to engage in relevant and meaningful consultative dialogue. Not all consultation or suggestions discussed during the survey are noted in this report. The organization is encouraged to review any notes made during the survey and consider the consultation or suggestions that were discussed.

During the process of preparing for a CARF accreditation survey, an organization may conduct a detailed self-assessment and engage in deliberations and discussions within the organization as well as with external stakeholders as it considers ways to implement and use the standards to guide its quality improvement efforts. The organization is encouraged to review these discussions and deliberations as it considers ways to implement innovative changes and further advance its business and service delivery practices.

Section 1. ASPIRE to Excellence®

1.A. Leadership

Description

CARF-accredited organizations identify leadership that embraces the values of accountability and responsibility to the individual organization's stated mission. The leadership demonstrates corporate social responsibility.

Key Areas Addressed
- Leadership structure and responsibilities
- Person-centred philosophy
- Organizational guidance
- Leadership accessibility
- Cultural competency and diversity
- Corporate responsibility
- Organizational fundraising, if applicable

Recommendations

1.A.3.g.
1.A.3.o.
Although the leadership has demonstrated some ongoing performance improvement with regard to internal and external inspections and related activities, it is suggested that the leadership fully implement its performance measurement and management plan to address its community employment services and business functions, and it is urged to demonstrate how it uses its performance results for ongoing performance improvement. In addition, the leadership should further guide technology planning to support performance improvement activities.

1.B. Governance (Optional)

Description

The governing board should provide effective and ethical governance leadership on behalf of its owners'/stakeholders' interest to ensure that the organization focuses on its purpose and outcomes for persons served, resulting in the organization's long-term success and stability. The board is responsible for ensuring that the organization is managed effectively, efficiently, and ethically by the organization's executive leadership through defined governance accountability mechanisms. These mechanisms include, but are not limited to, an adopted governance framework defined by written governance policies and demonstrated practices; active and timely review of organizational performance and that of the executive leadership; and the demarcation of duties between the board and executive leadership to ensure that organizational strategies, plans, decisions, and actions are delegated to the resource that would best advance the interests and performance of the organization over the long term and manage the organization's inherent risks. The board has additional responsibilities under the domain of public trust, and as such, it understands its corporate responsibility to the organization's employees, providers, suppliers, and the communities it serves.

Key Areas Addressed

- Ethical, active, and accountable governance
- Board selection, orientation, development, leadership, structure, and performance
- Linkage between governance and executive leadership
- Board meetings and committee work
- Executive leadership development, evaluation, and compensation

Recommendations

There are no recommendations in this area.

Consultation

- The Indigenous community can become fatigued when asked to participate as volunteers on boards. To receive Indigenous input, the organization might form an advisory circle where elders and other Indigenous members of the community could be offered honorariums to participate in providing guidance about ways to enhance services to the Indigenous people served.

1.C. Strategic Planning

Description

CARF-accredited organizations establish a foundation for success through strategic planning focused on taking advantage of strengths and opportunities and addressing weaknesses and threats.

Key Areas Addressed
■ Environmental considerations
■ Strategic plan development, implementation, and periodic review

Recommendations

1.C.1.l.(1)
1.C.1.l.(2)
1.C.1.l.(3)
1.C.1.m.
The ongoing strategic planning of the organization should expand how it considers the use of technology to support efficient operations, effective service delivery, and performance improvement. In addition, ongoing strategic planning of the organization should consider information from the analysis of performance.

1.D. Input from Persons Served and Other Stakeholders

Description

CARF-accredited organizations continually focus on the expectations of the persons served and other stakeholders. The standards in this subsection direct the organization's focus to soliciting, collecting, analyzing, and using input from all stakeholders to create services that meet or exceed the expectations of the persons served, the community, and other stakeholders.

Key Areas Addressed

■ Collection of input from persons served, personnel, and other stakeholders
■ Integration of input into business practices and planning

Recommendations

There are no recommendations in this area.

1.E. Legal Requirements

Description

CARF-accredited organizations comply with all legal and regulatory requirements.

Key Areas Addressed

■ Compliance with obligations
■ Response to legal action
■ Confidentiality and security of records

Recommendations

There are no recommendations in this area.

1.F. Financial Planning and Management

Description

CARF-accredited organizations strive to be financially responsible and solvent, conducting fiscal management in a manner that supports their mission, values, and performance objectives. Fiscal practices adhere to established accounting principles and business practices. Fiscal management covers daily operational cost management and incorporates plans for long-term solvency.

Key Areas Addressed

■ Budgets
■ Review of financial results and relevant factors
■ Fiscal policies and procedures
■ Reviews of bills for services and fee structures, if applicable
■ Review/audit of financial statements
■ Safeguarding funds of persons served, if applicable

Recommendations

There are no recommendations in this area.

Consultation

▪ Adding a narrative to the monthly financial statements could enhance the understanding of the financial position of the organization.

1.G. Risk Management

Description

CARF-accredited organizations engage in a coordinated set of activities designed to control threats to their people, property, income, goodwill, and ability to accomplish goals.

Key Areas Addressed

■ Risk management plan implementation and periodic review
■ Adequate insurance coverage
■ Media relations and social media procedures
■ Reviews of contract services

Recommendations

1.G.1.a.(7)
Although the organization has implemented a risk management plan, the plan should address the inclusion of risk reduction in performance improvement. Areas of risk could be periodically reviewed as part of continuous performance improvement.

1.H. Health and Safety

Description

CARF-accredited organizations maintain healthy, safe, and clean environments that support quality services and minimize risk of harm to persons served, personnel, and other stakeholders.

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Key Areas Addressed

■ Healthy and safe environment
■ Competency-based training on health and safety procedures and practices
■ Emergency and evacuation procedures
■ Access to first aid and emergency information
■ Critical incidents
■ Infections and communicable diseases
■ Health and safety inspections

Recommendations

1.H.1.
The organization is urged to maintain a healthy and safe environment. As a part of maintaining a healthy and safe environment, CCS is encouraged to ensure that electrical cords are bundled under desks to avoid tripping hazards.

1.H.6.a.
1.H.6.b.(1)
1.H.6.b.(2)
1.H.6.b.(3)
The organization is urged to ensure that evacuation routes are consistently accessible and understandable to the people served, personnel, and other stakeholders (including visitors). At the Stanko-Casswell Place, Next Step, and Yellow House sites, there were no exit signs to lead people to evacuate the building. The people served in these three sites have intellectual disabilities, with some who are non-verbal, are elderly, and have some signs of dementia. Yellow House has a potential secondary exit through the garage, but it is not accessible as the area is set up as an office. Given the complex needs of the population served, the organization is encouraged to contact its local fire authority for advice on the type of exit signage, emergency lighting, and secondary exits that may be appropriate to provide a safer environment for all.

1.H.9.d.(1)
1.H.9.d.(2)
In the event of a vehicle emergency, it is recommended that ready access to relevant information on the people served and personnel be consistently available in all vehicles.

1.H.13.h.
Although there was evidence of written emergency procedures in some vans, this was inconsistent. When transportation is provided for the people served, written emergency procedures should be consistently available in the vehicles.

1.I. Workforce Development and Management

Description

CARF-accredited organizations demonstrate that they value their human resources and focus on aligning and linking human resources processes, procedures, and initiatives with the strategic objectives of the organization. Organizational effectiveness depends on the organization's ability to develop and manage the knowledge, skills, abilities, and behavioural expectations of its workforce. The organization describes its workforce, which is often composed of a diverse blend of human resources. Effective workforce development and management promote engagement and organizational sustainability and foster an environment that promotes the provision of services that centre on enhancing the lives of persons served.

Key Areas Addressed

■ Composition of workforce
■ Ongoing workforce planning
■ Verification of backgrounds/credentials/fitness for duty
■ Workforce engagement and development
■ Performance appraisals
■ Succession planning

Recommendations

There are no recommendations in this area.

1.J. Technology

Description

Guided by leadership and a shared vision, CARF-accredited organizations are committed to exploring and, within their resources, acquiring and implementing technology systems and solutions that will support and enhance:

■ Business processes and practices.
■ Privacy and security of protected information.
■ Service delivery.
■ Performance management and improvement.
■ Satisfaction of persons served, personnel, and other stakeholders.

Key Areas Addressed

■ Ongoing assessment of technology and data use, including input from stakeholders
■ Technology and system plan implementation and periodic review
■ Technology policies and procedures

Recommendations

1.J.2.c.(6)
Although the organization has implemented a technology and system plan, the plan should be used to support performance improvement.

1.K. Rights of Persons Served

Description

CARF-accredited organizations protect and promote the rights of all persons served. This commitment guides the delivery of services and ongoing interactions with the persons served.

Key Areas Addressed

■ Policies that promote rights of persons served
■ Communication of rights to persons served
■ Formal complaints by persons served

Recommendations

1.K.2.a.(3)
1.K.2.b.(1)
The organization should ensure that rights are consistently communicated at least annually for people served in a program longer than one year and that rights are consistently available at all times for review. The organization has handbooks for the people served that list their responsibilities and some rights; however, reviews do not appear to be consistently conducted or documented and also do not appear to include their rights. Some program sites display posters with the rights listed, but this is not consistent across all sites. The organization could include a complete list of rights in the handbook for the people served and maintain a list of rights at each program site for the staff and people served to access. In addition, the organization is encouraged to make the rights available in a variety of formats, based on the learning styles and literacy levels of the people served, which could include audio files, video files, and picture books depicting these rights.

1.L. Accessibility

Description

CARF-accredited organizations promote accessibility and the removal of barriers for the persons served and other stakeholders.

Key Areas Addressed

■ Assessment of accessibility needs and identification of barriers
■ Accessibility plan implementation and periodic review
■ Requests for reasonable accommodations

Recommendations

There are no recommendations in this area.

1.M. Performance Measurement and Management

Description

CARF-accredited organizations demonstrate a culture of accountability by developing and implementing performance measurement and management plans that produce information an organization can act on to improve results for the persons served, other stakeholders, and the organization itself.

The foundation for successful performance measurement and management includes:

■ Leadership accountability and support.
■ Mission-driven measurement.
■ A focus on results achieved for the persons served.
■ Meaningful engagement of stakeholders.
■ An understanding of extenuating and influencing factors that may impact performance.
■ A workforce that is knowledgeable about and engaged in performance measurement and management.
■ An investment in resources to implement performance measurement and management.
■ Measurement and management of business functions to sustain and enhance the organization.

Key Areas Addressed

- Leadership accountability for performance measurement and management
- Identification of gaps and opportunities related to performance measurement and management
- Input from stakeholders
- Performance measurement and management plan
- Identification of objectives and performance indicators for service delivery
- Identification of objectives and performance indicators for priority business functions
- Personnel training on performance measurement and management

Recommendations

1.M.1.a.
1.M.1.b.
The leadership should further demonstrate accountability for performance measurement and management in business functions and service delivery, expanding service delivery to address community employment services.

1.M.2.g.
In identifying gaps and opportunities in preparation for the development or review of a performance measurement and management plan, the organization should consider technology to support implementation of the performance measurement and management plan.

1.M.3.a.(1)
1.M.3.a.(2)(a)
1.M.3.a.(2)(b)
1.M.3.a.(2)(c)
1.M.3.a.(2)(d)
1.M.3.a.(2)(e)
1.M.3.a.(3)(a)
1.M.3.a.(3)(b)
1.M.3.a.(3)(c)
1.M.3.a.(3)(d)
1.M.3.a.(4)
1.M.3.a.(5)
1.M.3.a.(6)(a)
1.M.3.a.(6)(b)
1.M.3.a.(6)(c)
1.M.3.a.(7)
1.M.3.a.(8)(a)
1.M.3.a.(8)(b)
1.M.3.a.(9)(a)
1.M.3.a.(9)(b)
1.M.3.a.(9)(c)
1.M.3.a.(9)(d)
1.M.3.a.(9)(e)
1.M.3.b.
1.M.3.c.
The organization has implemented a performance measurement and management plan; however, the plan does not address community employment services or priority business function objectives. The performance measurement and management plan should further address the collection of relevant data on the characteristics of the people served in its community employment services, and it should also address the identification of measures for service delivery objectives for community employment services, including, at a minimum, results achieved for the people served (effectiveness), experience of services received and other feedback from the people served, experience of

services and other feedback from other stakeholders, resources used to achieve results for the people served (efficiency), and service access. For community employment services, the plan should address the collection of data about the people served at the beginning of services, appropriate intervals during services, the end of services, and point(s) in time following services. The plan should also identify priority measures determined by the organization for business function objectives. For community employment services and business functions, the plan should address the extent to which the data collected measure what they are intended to measure (validity), the process for obtaining data in a consistent manner (reliability) that will be complete and that will be accurate, and extenuating and influencing factors that may impact results. For community employment services and business functions, the plan should address timeframes for the analysis of data and communication of results, including how data are collected, data are analyzed, performance improvement plans are developed, performance improvement plans are implemented, and performance information is communicated. The performance measurement and management plan should be further reviewed for relevance at least annually and updated as needed.

1.M.4.a.
1.M.4.b.(1)
1.M.4.b.(2)
1.M.4.b.(3)
1.M.4.b.(4)
1.M.4.b.(5)
It is recommended that community employment services measure their results achieved for the people served (effectiveness) by documenting an objective(s) and a performance indicator(s), including to whom the indicator(s) will be applied, the person(s)/position(s) responsible for collecting the data, the source(s) from which data will be collected, identification of relevant timeframes for collection of data, and a performance target that is based on the organization's performance history or established by the organization or a stakeholder or is based on an industry benchmark.

1.M.5.a.
1.M.5.b.(1)
1.M.5.b.(2)
1.M.5.b.(3)
1.M.5.b.(4)
1.M.5.b.(5)
To measure experience of services received and other feedback from the people served, community employment services should document an objective(s) and a performance indicator(s), including to whom the indicator(s) will be applied, the person(s)/position(s) responsible for collecting the data, the source(s) from which data will be collected, identification of relevant timeframes for collection of data, and a performance target that is based on the organization's performance history or established by the organization or a stakeholder or is based on an industry benchmark.

1.M.6.a.
1.M.6.b.(1)
1.M.6.b.(2)
1.M.6.b.(3)
1.M.6.b.(4)
1.M.6.b.(5)
It is recommended that community employment services measure experience of services and other feedback from other stakeholders by documenting an objective(s) and a performance indicator(s), including to whom the indicator(s) will be applied, the person(s)/position(s) responsible for collecting the data, the source(s) from which data will be collected, identification of relevant timeframes for collection of data, and a performance target that is based on the organization's performance history or established by the organization or a stakeholder or is based on an industry benchmark.

1.M.7.a.
1.M.7.b.(1)
1.M.7.b.(2)
1.M.7.b.(3)
1.M.7.b.(4)
1.M.7.b.(5)
To measure the resources used to achieve results for the people served (efficiency), community employment services should document an objective(s) and a performance indicator(s), including to whom or what the indicator(s) will be applied, the person(s)/position(s) responsible for collecting the data, the source(s) from which data will be collected, identification of relevant timeframes for collection of data, and a performance target that is based on the organization's performance history or established by the organization or a stakeholder or is based on an industry benchmark.

1.M.8.a.
1.M.8.b.(1)
1.M.8.b.(2)
1.M.8.b.(3)
1.M.8.b.(4)
1.M.8.b.(5)
It is recommended that community employment services measure service access by documenting an objective(s) and a performance indicator(s), including to whom or what the indicator(s) will be applied, the person(s)/position(s) responsible for collecting the data, the source(s) from which data will be collected, identification of relevant timeframes for collection of data, and a performance target that is based on the organization's performance history or established by the organization or a stakeholder or is based on an industry benchmark.

1.M.9.a.
1.M.9.b.(1)
1.M.9.b.(2)
1.M.9.b.(3)
1.M.9.b.(4)
1.M.9.b.(5)
To measure its business function, the organization should document objectives in priority areas determined by the organization and, for each objective, a performance indicator(s), including to what the indicator(s) will be applied, the person(s)/position(s) responsible for collecting the data, the source(s) from which data will be collected, identification of relevant timeframes for collection of data, and a performance target that is based on the organization's performance history or established by the organization or a stakeholder or is based on an industry benchmark.

1.N. Performance Improvement

Description

CARF-accredited organizations demonstrate a culture of performance improvement through their commitment to proactive and ongoing review, analysis, reflection on their results in both service delivery and business functions, and transparency. The results of performance analysis are used to identify and implement data-driven actions to improve the quality of programs and services and to inform decision making. Performance information that is accurate and understandable to the target audience is shared with persons served, personnel, and other stakeholders in accordance with their interests and needs.

Key Areas Addressed

■ Analysis of service delivery performance
■ Analysis of business function performance
■ Identification of areas needing performance improvement
■ Implementation of action plans
■ Use of performance information to improve program/service quality and make decisions
■ Communication of performance information

Recommendations

1.N.1.a.
1.N.1.b.
1.N.1.c.(1)
1.N.1.c.(2)
1.N.1.c.(3)
1.N.1.c.(4)
1.N.1.c.(5)
1.N.1.d.(1)
1.N.1.d.(2)
1.N.1.e.(1)
1.N.1.e.(2)
1.N.1.e.(3)
1.N.1.f.(1)
1.N.1.f.(2)
1.N.1.f.(3)
1.N.1.f.(4)

The organization has consistently documented an analysis of service delivery performance at least annually; however, the analysis does not address its community employment services, and for all services, comparative analysis with trends and causes is minimal, and it is not clear how the organization has used this analysis. The documented analysis of service delivery performance that is completed at least annually should be expanded to address community employment service delivery indicators, including, at a minimum, results achieved for the people served (effectiveness), experience of services received and other feedback from the people served, experience of services and other feedback from other stakeholders, resources used to achieve results for the people served (efficiency), and service access. The analysis should incorporate the characteristics of the people served in community employment services and the impact of extenuating or influencing factors and, for all services, enhanced comparative analysis, identification of trends, and identification of causes. For all services, the service delivery analysis should be more definitively used to identify areas needing performance improvement, develop an action plan(s) to address the improvements needed, implement the action plan(s), and determine whether the actions taken accomplished the intended results.

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1.N.2.a.
1.N.2.b.
1.N.2.c.
1.N.2.d.(1)
1.N.2.d.(2)
1.N.2.e.(1)
1.N.2.e.(2)
1.N.2.e.(3)
1.N.2.f.(1)
1.N.2.f.(2)
1.N.2.f.(3)
1.N.2.f.(4)

Once the organization sets and measures its business functions, an analysis of business function performance should be documented and completed at least annually and in accordance with the timeframes outlined in the performance measurement and management plan. This analysis should address priority business function indicators determined by the organization and incorporate the characteristics of the people served, if applicable, and impact of extenuating or influencing factors. This analysis should include comparative analysis, identification of trends, and identification of causes. This analysis should be used to identify areas needing performance improvement, develop an action plan(s) to address the improvements needed, implement the action plan(s), and determine whether the actions taken accomplished the intended results.

1.N.3.a.
1.N.3.b.(1)
1.N.3.b.(2)
1.N.3.c.

CARF uses a fact-based decision-making process to identify and respond to organizational and stakeholder needs. Once the performance analysis for service delivery has been expanded and a performance analysis of business functions has been completed, these results should be further used to improve the quality of programs and services, facilitate organizational decision making regarding business functions, and further facilitate decision making regarding service delivery. The organization is urged to use the results of the performance analyses to guide changes to the performance and measurement plan.

1.N.4.a.(1)
1.N.4.a.(2)
1.N.4.a.(3)
1.N.4.b.(1)
1.N.4.b.(2)
1.N.4.b.(3)

Once its performance analyses are fully completed and in accordance with the performance measurement and management plan, the organization should more fully communicate accurate performance information to the people served, personnel, and other stakeholders according to the needs of the specific group, including the content, format, and timing. The organization publishes its performance analysis on its website. It is encouraged to find other simple yet effective ways to share and discuss performance information with the people served, personnel, and other stakeholders.

Section 2. Quality Individualized Services and Supports

Description

For an organization to achieve quality services, the persons served are active participants in the planning, implementation, and ongoing review and revision of the services offered. The organization's commitment to quality and the involvement of the persons served spans the entire time that the persons served are involved with services. The service planning process is individualized, establishing goals and measurable objectives that incorporate the unique strengths, abilities, needs, and preferences of the persons served. Services are responsive to the expectations of persons served and their desired outcomes from services, and are relevant to their maximum participation in the environments of their choice.

2.A. Program/Service Structure

Description

A fundamental responsibility of the organization is to provide a comprehensive program structure. The staffing is designed to maximize opportunities for the persons served to obtain and participate in the services provided.

Key Areas Addressed

■ Services are person centred and individualized
■ Persons are given information about the organization's purposes and ability to address desired outcomes
■ Documented scope of services shared with stakeholders
■ Service delivery based on accepted field practices
■ Communication for effective service delivery
■ Entrance/exit/transition criteria

Recommendations

2.A.16.b.
2.A.16.c.(1)
2.A.16.c.(2)
2.A.16.d.(1)
2.A.16.d.(2)
The Yellow House site maintains a rope across the kitchen doorway to prevent access by the people served. There was no documentation or risk assessments addressing this restriction in the individual plans of the people served at this site. If restrictions are placed on the rights of a person served, the organization should ensure that it consistently follows its policies and written procedures and, prior to implementation, obtain informed consent of the person served and ensure that service personnel are trained in the use of restrictive procedures. In addition, the organization should implement methods to reinstate rights as soon as possible and monitor the effectiveness of these methods to reduce rights restrictions. As a part of this, the organization could also incorporate its risk assessment process and document the results in the individual service plans.

Consultation

▪ Consent-to-release-information forms were present in the files reviewed; however, some forms reviewed were incomplete and also missed the initials of the people served/guardians. Although the form requires a signature, which was present, the forms were just missing initials. The organization is encouraged to ensure that consent forms to release information are completed in full, including both the signature and the initials.

2.B. Individual-Centred Service Planning, Design, and Delivery

Description

Improvement of the quality of an individual's services/supports requires a focus on the person and/or family served and their identified strengths, abilities, needs, and preferences. The organization's services are designed around the identified needs and desires of the persons served, are responsive to their expectations and desired outcomes from services, and are relevant to their maximum participation in the environments of their choice.

The person served participates in decision making, directing, and planning that affects the person's life. Efforts to include the person served in the direction or delivery of those services/supports are evident.

Key Areas Addressed

■ Services are person centred and individualized
■ Persons are given information about the organization's purposes and ability to address desired outcomes

Recommendations

2.B.5.b.(2)
CCS completes service plans on all people served; however, the service plan objectives in the individual service plans reviewed were not consistently measurable in all programs. It is recommended that the individual service plans for the people served in the community housing and child and adolescent services ensure that objectives are consistently specific and measurable.

2.B.10.a.
2.B.10.b.
2.B.10.c.
Summaries of services were noted in some clinician notes; however, this information was not compiled into a summary exit report that includes all services received. It is recommended that an exit summary report be prepared on a timely basis for each person who leaves the organization's services that summarizes results of services received.

2.C. Medication Monitoring and Management

Key Areas Addressed

■ Current, complete records of medications used by persons served
■ Written procedures for storage and safe handling of medications
■ Educational resources and advocacy for persons served in decision making
■ Physician review of medication use
■ Training and education for persons served regarding medications

Recommendations

2.C.1.g.(1)
2.C.1.g.(2)
The prescribing professional and phone number and the dispensing pharmacy and contact information were not consistently noted in the medication records. The organization is urged to ensure that the individual record of all medications used by the person served consistently includes, for prescribed medications, the prescribing professional and phone number and dispensing pharmacy and contact information.

2.C.2.a.

CCS has medication policies and written procedures that address the storage of medications requiring refrigeration. On the tour, it was noted that at two locations, stored medications in the refrigerator were not secured. The organization should ensure that it consistently follows its written procedures that address storage and securing medications stored in the refrigerator.

2.C.4.

There is no documentation that the use of all medications by the person served is reviewed at least annually by a single physician or qualified licensed professional. CCS should document that the use of all medications by the person served is reviewed at least annually by a single physician or qualified professional licensed to prescribe or dispense medications. This review could be added to the annual individual service planning meeting processes and checklists.

Consultation

- The staff signature sheets were not consistently present in some of the individual medication records. CCS is encouraged to ensure that the staff signature sheet is present in each individual medication record book. It is further suggested that an area for the staff signature be added to the bottom of the medication record so it is just one record.

2.D. Employment Services Principle Standards

Description

An organization seeking CARF accreditation in the area of employment services provides individualized services and supports to achieve identified employment outcomes. The array of services and supports may include:

- Identification of employment opportunities and resources in the local job market.
- Development of viable work skills that match workforce needs within the geographic area.
- Development of realistic employment goals.
- Establishment of service plans to achieve employment outcomes.
- Identification of resources and supports to achieve and maintain employment.
- Coordination of and referral to employment-related services and supports.

The organization maintains its strategic positioning in the employment sector of the community by designing and continually improving its services based on input from the persons served and from employers in the local job market, and managing results of the organization's outcomes management system. The provision of quality employment services requires a continuous focus on the persons served and the personnel needs of employers in the organization's local job market.

Some examples of the quality results desired by the different stakeholders of these services and supports include:

- Individualized, appropriate accommodations.
- A flexible, interactive process that involves the person.
- Increased independence.
- Increased employment options.
- Timely services and reports.
- Persons served obtain and maintain employment consistent with their preferences, strengths, and needs.
- Person served obtains a job at minimum wage or higher and maintains appropriate benefits.
- Person served maintains the job.

Key Areas Addressed

■ Goals of the persons served
■ Community resources available
■ Personnel needs of local employers
■ Economic trends in the local employment sector

Recommendations

There are no recommendations in this area.

2.E. Community Services Principle Standards

Description

An organization seeking CARF accreditation in the area of community services assists the persons and/or families served in obtaining access to the resources and services of their choice. The persons and/or families served are included in their communities to the degree they desire. This may be accomplished by direct service provision or linkages to existing opportunities and natural supports in the community.

The organization obtains information from the persons and/or families served regarding resources and services they want or require that will meet their identified needs, and offers an array of services it arranges for or provides. The organization provides the persons and/or families served with information so that they may make informed choices and decisions.

The services and supports are changed as necessary to meet the identified needs of the persons and/or families served and other stakeholders. Service designs address identified individual, family, socioeconomic, and cultural needs.

Expected results from these services may include:

■ Increased or maintained inclusion in meaningful community activities.
■ Increased or maintained ability to perform activities of daily living.
■ Increased self-direction, self-determination, and self-reliance.
■ Increased self-esteem.

Key Areas Addressed

■ Access to community resources and services
■ Enhanced quality of life
■ Community inclusion
■ Community participation

Recommendations

There are no recommendations in this area.

Consultation

- It is suggested that CCS look at developing additional reverse integration activities for those people served who have issues with mobility and/or have fewer chances to participate in community outings for other various reasons, including, most recently, the pandemic restrictions. This could also be a nice option for when weather is a barrier to getting out into the community. This could bring community integration into the program to provide similar experiences. Examples might include virtual connections with community partners from the fire station, local health clubs, pet stores, and library.

- CCS has many community partnerships and events within the valley, which include the First Nations gym, Monday Music, drama program, local bowling, Special Olympics, local municipality pool, ice rink, pickle ball and gym, live theatre, local theatre, summer Bible camp, and horseback riding. It is suggested that the organization connect with all the surrounding community organizations and create a monthly/annual calendar of events that could list everything that is available in the community for each community integration program, and each program could also add individually chosen events per program and then share this with families/caregivers. This was noted by the families as something they would like to also have for planning schedules.

- Prior to the pandemic, CCS had a very active advisor/advocacy committee for the people served. It is suggested that CCS resume this committee with the people served leading and becoming active in the organization's strategic planning processes. There are several people served in CCS's employment services program who are very interested and could be the new generation of advocates for CCS's future. The parents and people served expressed a high level of satisfaction with all the activities and community outings that were offered before the pandemic and are hoping for these to return soon, and with this new generation of advocates leading, there may be a lot that could be accomplished in future services for CCS.

- CCS respectfully continues to provide services for many people served who have remained and are aging. It might be beneficial to form an adapted social environment for the aging population. This program could include generational concepts such as movies, radio, events, and games to keep these people served engaged in daily programming. This program could be on site, or services could be shared at a local community centre to promote more community-integrated service with other aging adults without disabilities. Input could be taken from the group/teams and designed according to their liking, but ultimately could be a different paced program for those people served who are aging.

2.F. Service Delivery Using Information and Communication Technologies

Description

Depending on the type of program, a variety of terminology may be used to describe the use of information and communication technologies to deliver services; e.g., telepractice, telehealth, telemental health, telerehabilitation, telespeech, etc. Based on the individual plan for the person served, the use of information and communication technologies allows providers to see, hear, and/or interact with persons served, family/support system members, and other providers in remote settings.

The provision of services via information and communication technologies may:

■ Include services such as assessment, individual planning, monitoring, prevention, intervention, follow-up, supervision, education, consultation, and counseling.
■ Involve a variety of professionals such as case managers/service coordinators, social workers, psychologists, speech-language pathologists, occupational therapists, physical therapists, physicians, nurses, rehabilitation engineers, assistive technologists, and teachers.
■ Encompass settings such as:
   - Hospitals, clinics, professional offices, and other organization-based settings.
   - Schools, work sites, libraries, community centres, and other community settings.
   - Congregate living, individual homes, and other residential settings.

The use of technology for strictly informational purposes, such as having a website that provides information about the programs and services available, is not considered providing services via the use of information and communication technologies.

Key Areas Addressed

■ Written procedures for the use of information and communication technologies (ICT) in service delivery
■ Personnel training on how to deliver services via ICT and the equipment used
■ Instruction and training for persons served, family/support system members, and others
■ Provision of information related to ICT
■ Maintenance of ICT equipment
■ Emergency procedures that address unique aspects of service delivery via ICT

Recommendations

There are no recommendations in this area.

Section 3. Employment Services

Description

An organization seeking CARF accreditation in the area of employment services assists the persons served through an individualized person-centred process to obtain access to the services, supports, and resources of their choice to achieve their desired outcomes. This may be accomplished by direct service provision, linkages to existing generic opportunities and natural supports in the community, or any combination of these. The persons served are included in their communities to the degree they desire.

The organization provides the persons served with information so that they may make informed choices and decisions. Although we use the phrase person served, this may also include family served, as appropriate to the service and the individual.

The services and supports are arranged and changed as necessary to meet the identified desires of the persons served. Service designs address identified individual, family, socioeconomic, and cultural preferences.

Depending on the program's scope of services, expected results from these services/supports may include:

■ Increased inclusion in community activities.
■ Increased self-direction, self-determination, and self-reliance.
■ Self-esteem.
■ Community citizenship.
■ Increased independence.
■ Meaningful activities.
■ Increased employment options.
■ Employment obtained and maintained.
■ Competitive employment.
■ Employment at or above minimum wage.
■ Economic self-sufficiency.
■ Employment with benefits.
■ Career advancement.

3.G. Community Employment Services (CES)

Description

Community employment services assist persons to obtain successful community employment opportunities that are responsive to their choices and preferences. Through a strengths-based approach the program provides person-directed services/supports to individuals to choose, achieve, and maintain employment in integrated community employment settings.

Work is a fundamental part of adult life. Individually tailored job development, training, and support recognize each person's employability and potential contribution to the labor market. Persons are supported as needed through an individualized person-centred model of services to choose and obtain a successful employment opportunity consistent with their preferences, keep the employment, and find new employment if necessary or for purposes of career advancement.

Such services may be described as individualized competitive employment, individual placements, contracted temporary personnel services, competitive employment, supported employment, transitional employment, mobile work crews, contracted work groups in the community, community-based SourceAmerica® contracts, and other business-based work groups in community-integrated designs. In Canada, employment in the form of bona fide volunteer placements is possible.

Individuals may be paid by community employers or by the organization. Employment is in the community.

The following service categories are available under Community Employment Services (please refer to the program descriptions and applicable standards):

■ Job Development (CES:JD)
■ Employment Supports (CES:ES)

If an organization provides only Job Development or Employment Supports, then it may be accredited for only that service. If it is providing both Job Development and Employment Supports, then it must seek accreditation for both. If any clarification is needed, please contact your CARF resource specialist. There is no charge for consultation.

Note: In making the determination of what an organization is actually providing in comparison to these service descriptions, these factors are considered: the mission of the services, the program descriptions, brochures and marketing image for these services, and the outcomes of the services.

Depending on the scope of the services provided, some examples of the quality outcomes desired by the different stakeholders of these services include:

■ Persons obtain community employment.
■ Persons obtain individualized competitive employment.
■ Employment matches interests and desires of persons.
■ Wages, benefits, and hours of employment achieved as desired.
■ Average number of hours worked per week increases.
■ Average number of hours worked per week meets the desires of the person served.
■ Full-time employment with benefits.
■ Transition-age youth move directly from their educational environment into community employment.
■ Potential for upward mobility.
■ Self-sufficiency.
■ Integration.
■ Responsive services.

- Safe working conditions.
- Cost-effective for placement achieved.
- Performance level achieved meets requirements of job or position.
- Increase in skills.
- Increase in productivity.
- Increase in hours worked.
- Increase in pay.
- Employment retention.
- Increase in natural supports from coworkers.
- Persons served treated with respect.
- Minimize length of time for supports.
- Type and amount of staff interaction meets needs.
- Employer satisfaction.
- Responsiveness to customers.

Job Development (CES:JD): Successful job development concurrently uses assessment information about the strengths and interests of the person seeking employment to target the types of jobs available from potential employers in the local labor market. Typical job development activities include reviewing local employment opportunities and developing potential employers/customers through direct and indirect promotional strategies. Job development may include facilitating a hiring agreement between an employer and a person seeking employment. Some persons seeking employment may want assistance at only a basic, informational level, such as support for a self-directed job search.

Employment Supports (CES:ES): Employment support services promote successful training of a person to a new job, job adjustment, retention, and advancement. These services are based on the individual employee with a focus on achieving long-term retention of the person in the job. The level of employment support services is individualized to each employee and the complexity of the job.

Often supports are intensive for the initial orientation and training of an employee with the intent of leading to natural supports and/or reduced external job coaching. However, some persons may not require any employment supports at the job site; others may require intensive initial training with a quick decrease in supports, while some will be most successful when long-term supports are provided.

Supports can include assisting the employee with understanding the job culture, industry practices, and work behaviours expected by the employer. It may also include helping the employer and coworkers to understand the support strategies and accommodations needed by the worker.

Supports are a critical element of the long-term effectiveness of community employment. Support services address issues such as assistance in training a person to complete new tasks, changes in work schedule or work promotion, a decrease in productivity of the person served, adjusting to new supervisors, and managing changes in non-work environments or other critical life activities that may affect work performance. Routine follow-up with the employer and the employee is crucial to continued job success.

Key Areas Addressed

- Integrated employment choice
- Integrated employment obtainment
- Employment provided in regular business settings
- Integrated employment retention
- Provides career advancement resources

Recommendations

There are no recommendations in this area.

Section 4. Community Services

Description

An organization seeking CARF accreditation in the area of community services assists the persons served through an individualized person-centred process to obtain access to the services, supports, and resources of their choice to achieve their desired outcomes. This may be accomplished by direct service provision, linkages to existing generic opportunities and natural supports in the community, or any combination of these. The persons served are included in their communities to the degree they desire.

The organization provides the persons served with information so that they may make informed choices and decisions. Although we use the phrase person served, this may also include family served, as appropriate to the service and the individual.

The services and supports are arranged and changed as necessary to meet the identified desires of the persons served. Service designs address identified individual, family, socioeconomic, and cultural preferences.

Depending on the program's scope of services, expected results from these services/supports may include:

■ Increased inclusion in community activities.
■ Increased or maintained ability to perform activities of daily living.
■ Increased self-direction, self-determination, and self-reliance.
■ Self-esteem.
■ Housing opportunities.
■ Community citizenship.
■ Increased independence.
■ Meaningful activities.
■ Increased employment options.

4.A. Services for Children and Youth (SCY)

Description

Services for children and youth include prevention, early intervention, preschool programs, early years programs, after-school programs, outreach, and services coordination. Services/supports may be provided in a variety of settings, such as a family's private home; the organization's facility; and community settings such as parks, recreation areas, preschools, or child day care programs not operated by the organization. In all cases, the physical setting, equipment, and environment meet the identified needs of the children and youth served and their families. Families are the primary decision makers and play a critical role, along with team members, in the process of identifying needs and services.

Early intervention services are structured and coordinated to facilitate the achievement of optimal development through the provision of prevention, assessment, education, development, and/or therapeutic services to infants and toddlers with disabilities or who are at risk of developmental delay and their families. Early intervention focuses on

helping infants and toddlers learn the basic and brand-new skills that typically develop during the first years of life. Broadly speaking, developmental delay means a child is delayed in some area of development. There are five areas in which development may be affected:

- Cognitive development.
- Physical development.
- Communication development.
- Social or emotional development.
- Adaptive development.

Assessment is conducted to determine each child's unique needs and the early intervention services appropriate to address those needs. Families are the primary decision makers in the planning of early intervention services along with personnel relevant to the services being provided. Family-directed services also help family members understand the specific needs of their child and how to enhance the child's development.

Child and adolescent services focus on the development of skills needed by children/adolescents to succeed in school, their family, and their community. An organization may provide an array of distinct services that fall under the heading of child and adolescent services, with different service delivery models that incorporate different practices. Services are individualized to meet the changing needs of the children/adolescents served. Child and adolescent services empower the child/adolescent to develop skills in decision making, including maximizing their participation in the service planning process. Involvement of other team members depends on what the child/adolescent needs and the scope of the services provided. Team members could come from several agencies and may include therapists, child development specialists, social workers, educators, medical professionals, and others.

Some examples of the quality outcomes desired by the different stakeholders of services for children and youth include:

- Services individualized to needs and desired outcomes.
- Collection and use of information regarding development and function as relevant to the scope of the services.
- Children/youth acquiring new skills.
- Collaborative approach involving family members in services.
- Transition planning that supports continuity of services and developmental transitions.
- Increased responsibility of children/youth to make decisions.
- Personal safety of youth in the community.

Key Areas Addressed

- Early intervention
- Individualized services based on identified needs and desired outcomes
- Communication with families and other supports/services
- Collaborative service planning
- Healthcare, safety, emotional, and developmental needs of child/youth
- Skill development for decision making
- Planning for successful transitions

Recommendations

There are no recommendations in this area.

4.E. Host Family/Shared Living Services (HF/SLS)

Description

Host family/shared living services assist a person served to find a shared living situation in which the person is a valued person in the home and has supports as desired to be a participating member of the community. An organization may call these services, which are provided under a contract or written agreement with the host family/shared living provider, a variety of names, such as host family services, shared living services or supports, alternative family living, structured family care giving, family care, or home share.

Getting the person in the right match is a critical component to successful host family/shared living services. The organization begins by exploring with the person served what constitutes quality of life for the individual and identifies applicant host family/shared living providers who are a potential match with the person's identified criteria. The person served makes the final decision of selecting a host family/shared living provider.

Safety, responsibility, and respect between or amongst all people in the home are guiding principles in these services. Persons are supported to have meaningful reciprocal relationships both within the home, where they contribute to decision making, and in the community. The host family/shared living provider helps the person served to develop natural supports and strengthen existing networks. Relationships with the family of origin or extended family are maintained as desired by the person served. The host family/shared living provider supports the emotional, physical, and personal well-being of the person.

Persons develop their personal lifestyle and modify the level of support over time, if they so choose. The host family/shared living provider encourages and supports the person served to make decisions and choices.

The host family/shared living provider does not necessarily have to be a family, as it could be an individual supporting the person. Although the "home" is generally the host family/shared living provider's home or residence, it may also be the home of the person served.

Some examples of the quality results desired by the different stakeholders of these services and supports include:

■ Quality of life as identified by the person served is enhanced.
■ Increased independence.
■ Increased community access.
■ Persons served choose whom they will live with and where.
■ Participation of the persons in the community.
■ Community membership.
■ Support for personal relationships.
■ Increased natural supports.
■ Strengthened personal networks.
■ Supports accommodate individual needs.
■ Persons feel safe.
■ Persons feel that the supports they need/want are available.
■ Persons decide where they live.
■ Persons feel valued.
■ Persons have meaningful relationships.
■ Persons develop natural supports.
■ Persons participate in their community.

Key Areas Addressed

■ Appropriate matches of non-family participants with homes
■ Contracts that identify roles, responsibilities, needs, and monitoring
■ Needed supports
■ Community living services in a long-term family-based setting
■ Sense of permanency

Recommendations

There are no recommendations in this area.

4.G. Community Integration (COI)

Description

Community integration is designed to help persons to optimize their personal, social, and vocational competency to live successfully in the community. Persons served are active partners in determining the activities they desire to participate in. Therefore, the settings can be informal to reduce barriers between staff members and persons served. An activity centre, a day program, a clubhouse, and a drop-in centre are examples of community integration services. Consumer-run programs are also included.

Community integration provides opportunities for the community participation of the persons served. The organization defines the scope of these services and supports based on the identified needs and desires of the persons served. This may include services for persons who without this option are at risk of receiving services full-time in more restrictive environments with intensive levels of supports such as hospitalization or nursing home care. A person may participate in a variety of community life experiences or interactions that may include, but are not limited to:

■ Leisure or recreational activities.
■ Communication activities.
■ Spiritual activities.
■ Cultural activities.
■ Pre-vocational experiences.
■ Vocational pursuits.
■ Volunteerism in the community.
■ Educational and training activities.
■ Development of living skills.
■ Health and wellness promotion.
■ Orientation, mobility, and destination training.
■ Access and utilization of public transportation.
■ Interacting with volunteers from the community in program activities.
■ Community collaborations and social connections developed by the program (partnerships with community entities such as senior centres, arts councils, etc.).

Some examples of the quality results desired by the different stakeholders of these services include:

■ Community participation.
■ Increased independence.
■ Increased interdependence.
■ Greater quality of life.
■ Skill development.
■ Slowing of decline associated with aging.

- Volunteer placement.
- Movement to employment.
- Centre-based socialization activities during the day that enable persons to remain in their community residence.
- Activity alternatives to avoid or reduce time spent in more restrictive environments, such as hospitalization or nursing home care.

Key Areas Addressed

- Opportunities for community participation

Recommendations

There are no recommendations in this area.

4.H. Community Housing (CH)

Description

Community housing addresses the desires, goals, strengths, abilities, needs, health, safety, and life span issues of the persons served, regardless of the home in which they live and/or the scope, duration, and intensity of the services they receive. The residences in which services/supports are provided are typically owned, rented, leased, or operated directly by the organization, or may be owned, rented, or leased by a third party, such as a governmental entity. Providers exercise control over these sites in terms of having direct or indirect responsibility for the physical conditions of the facility.

Community housing is provided in partnership with individuals. These services/supports are designed to assist the persons served to achieve success in and satisfaction with community living. They may be temporary or long-term in nature. The services/supports are focused on home and community integration and engagement in productive activities. Community housing enhances the independence, dignity, personal choice, and privacy of the persons served. For persons in alcohol and other drug programs, these services/supports are focused on providing sober living environments to increase the likelihood of sobriety and abstinence and to decrease the potential for relapse.

Community housing programs may be referred to as group homes, halfway houses, three-quarter way houses, recovery residences, sober housing, domestic violence or homeless shelters, and safe houses. These programs may be located in rural or urban settings and in houses, apartments, townhouses, or other residential settings owned, rented, leased, or operated by the organization. They may include congregate living facilities and clustered homes/apartments in multiple-unit settings. These residences are often physically integrated into the community, and every effort is made to ensure that they approximate other homes in their neighbourhoods in terms of size and number of individuals.

Community housing may include either or both of the following:

- Transitional living that provides interim supports and services for persons who are at risk of institutional placement, persons transitioning from institutional settings, or persons who are homeless. Transitional living is typically provided for six to twelve months and can be offered in congregate settings that may be larger than residences typically found in the community.
- Long-term housing that provides stable, supported community living or assists the persons served to obtain and maintain safe, affordable, accessible, and stable housing.

The residences in which community housing services are provided must be identified in the survey application. These sites will be visited during the survey process and identified in the survey report and accreditation decision as a site at which the organization provides a community housing program.

Some examples of the quality results desired by the different stakeholders of these services/supports include:

■ Safe housing.
■ Persons choosing where they live.
■ Persons choosing with whom they will live.
■ Persons having privacy in their homes.
■ Persons increasing independent living skills.
■ Persons having access to the benefits of community living.
■ Persons having the opportunity to receive services in the most integrated setting.
■ Persons' rights to privacy, dignity, respect, and freedom from coercion and restraint are ensured.
■ Persons having the freedom to furnish and decorate their sleeping or living units as they choose.
■ Persons having freedom and support to control their schedules and activities.
■ Settings that are physically accessible to the individuals.

Key Areas Addressed
■ Safe, secure, private location
■ Support to persons as they explore alternatives
■ In-home safety needs
■ Access as desired to community activities
■ Options to make changes in living arrangements
■ System for on-call availability of personnel

Recommendations
There are no recommendations in this area.

4.I. Supported Living (SL)

Description
Supported living addresses the desires, goals, strengths, abilities, needs, health, safety, and life span issues of persons usually living in their own homes (apartments, townhouses, or other residential settings). Supported living services are generally long-term in nature but may change in scope, duration, intensity, or location as the needs and preferences of individuals change over time.

Supported living refers to the support services provided to the person served, not the residence in which these services are provided. A sample of people receiving services/supports in these sites will be visited as part of the interview process. Although the residence will generally be owned, rented, or leased by the person who lives there, the organization may occasionally rent or lease an apartment when the person served is unable to do so. Typically, in this situation the organization would co-sign or in other ways guarantee the lease or rental agreement; however, the person served would be identified as the tenant.

Supported living programs may be referred to as supported living services, independent living, supportive living, semi-independent living, and apartment living, and services/supports may include home health aide and personal care attendant services. Typically there would not be more than two or three persons served living in a residence, no house rules or structure would be applied to the living situation by the organization, and persons served can come and go as they please. Service planning often identifies the number of hours and types of support services provided.

The home or individual apartment of the person served, even when the organization holds the lease or rental agreement on behalf of the person served, is not included in the survey application or identified as a site on the accreditation outcome.

Some examples of the quality results desired by the different stakeholders of these services/supports include:

■ Persons served achieving choice of housing, either rent or ownership.
■ Persons served choosing whom they will live with, if anyone.
■ Minimizing individual risks.
■ Persons served have access to the benefits of community living.
■ Persons served have autonomy and independence in making life choices.

Key Areas Addressed

■ Safe, affordable, accessible housing chosen by the individual
■ Supports available based on needs and desires
■ In-home safety needs
■ Living as desired in the community
■ Support personnel available based on needs
■ Persons have opportunities to access community activities

Recommendations

There are no recommendations in this area.

Program(s)/Service(s) by Location

Clements Centre Society

5856 Clements Street
Duncan BC V9L 3W3
CANADA

Community Integration
Services for Children and Youth: Early Intervention Services
Governance Standards Applied

Banks Road

5814 Banks Road
Duncan BC V9L 1L2
CANADA

Services for Children and Youth: Child and Adolescent Services
Services for Children and Youth: Early Intervention Services

Campbell Home

346 Campbell Street
Duncan BC V9L 3H8
CANADA

Community Housing

Canada Avenue

149 Canada Avenue
Duncan BC V9L 1T4
CANADA

Community Employment Services: Employment Supports
Community Employment Services: Job Development
Host Family/Shared Living Services
Supported Living

Marchmont Home

6124 Ryall Road, Lot 2
Duncan BC V9L 2H7
CANADA

Community Housing

Next Step

6124 Ryall Road
Duncan BC V9L 2H7
CANADA

Community Integration

Ryall Home

6124 Ryall Road, Lot 1
Duncan BC V9L 2H7
CANADA

Community Housing

South Cowichan

3610 Princess Avenue
Cobble Hill BC V0R 1L5
CANADA

Community Integration

Yellow House

5848 Clements Street
Duncan BC V9L 3W3
CANADA

Community Integration