



# CARF Accreditation Report for Pathways to Independence

## Three-Year Accreditation



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## 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](http://www.carf.org/contact-us).

## **Organization**

Pathways to Independence  
289 Pinnacle Street  
Belleville ON K8N 3B3  
CANADA

## **Organizational Leadership**

Darlene McKenny, CEO

## **Survey Number**

149980

## **Survey Date(s)**

November 17, 2021–November 19, 2021

## **Surveyor(s)**

Karen Stokes, Administrative  
Ebony Harris, Program  
Polly W. Davis, MA, CCC-SLP, Program

## **Program(s)/Service(s) Surveyed**

Community Housing  
Community Integration  
Host Family/Shared Living Services  
Respite Services  
Supported Living  
*Governance Standards Applied*

## **Previous Survey**

November 5, 2018–November 7, 2018  
Three-Year Accreditation

## **Accreditation Decision**

### **Three-Year Accreditation**

**Expiration: December 31, 2024**

# Executive Summary

This report contains the findings of CARF's site survey of Pathways to Independence conducted November 17, 2021–November 19, 2021. 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, Pathways to Independence demonstrated substantial conformance to the standards. Pathways has effectively demonstrated a commitment to implementing CARF standards to the benefit of the clients, families, staff members, and volunteers. Clients, family members, and personnel have expressed high levels of satisfaction with the organization. Even through the COVID-19 pandemic, the organization developed programs and services to benefit clients through virtual services. Pathways, with a dedicated leadership and a well-trained workforce, continues to provide, on a daily basis, quality services for the community. There are opportunities for improvement identified in the recommendations in this report, some of which include further development of health and safety and technology security procedures, identification of gaps and opportunities in performance measurement, development of annual positive intervention training for personnel, and specific measurable objectives for client plans. However, the organization appears to have the resources to make improvements in a timely manner. Pathways is encouraged to continue implementing CARF standards on an ongoing basis as a means of ensuring that continuous quality improvement occurs.

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

**Pathways to Independence 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 Pathways to Independence was conducted by the following CARF surveyor(s):

- Karen Stokes, Administrative
- Ebony Harris, Program
- Polly W. Davis, MA, CCC-SLP, 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 Pathways to Independence 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 Housing
- Community Integration
- Host Family/Shared Living Services
- Respite 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 Pathways to Independence demonstrated the following strengths:

- The administrative leadership team displays passionate dedication to the organization and the clients. The team's longevity of service has provided stability and enhanced the reputation of the organization in the community.
- The quality assurance program of the organization is extensive and thorough. Various committees, which include both personnel and members of the board of directors, provide excellent data analysis of the organization's various plans, programs, and services.

- The Handy Book provides a quick reference guide for direct service professionals on various topics, including information, such as mission, vision, philosophy, strategic planning, and quality assurance, as well as FAQs, such as payroll schedule, budget codes, technology information, and contact information.
- Input from clients, personnel, and other stakeholders help guide the organization in strategic planning, program service planning, accessibility planning, and performance measurement. This input is gathered in multiple ways and includes a monthly house meeting at each community housing site, quarterly tenant meetings, town halls (before the pandemic), surveys, and one-on-one discussions.
- The accessibility and risk management plans are comprehensive, easily understood, and pertinent to the organization and the service area. The quarterly reviews and updates help ensure that the organization continually maintains focus on the changing environment of service needs and accomplishments.
- The board of directors is dedicated, knowledgeable, and supportive of the organization and the leadership team. The board is highly involved in succession planning and leadership transition and sees its role as one of “quiet ambassadors” for the organization.
- One of the greatest strengths of Pathways is its staff members, who are compassionate, understanding, loving, and sincere. Staff members offer a safe and welcoming atmosphere, which clients and families feel is familylike from the administrative level through all service providers. The words and actions of the staff members demonstrate that the organization’s mission, values, and goals are uppermost in their minds as they strive to provide health, wellness, and independence for the clients. Staff members are proud of their work and expressed over and over that they “love their jobs.” Staff members also reported that they feel strongly that they are really helping clients be successful and work toward independence.
- Services are top quality and widely varied to meet the diverse populations served. The organization is commended for moving to greater individualized services. Examples from staff members showed clever inventiveness as they provide digitally enabled services.
- Concerns for health and safety have a strong place at Pathways. The innovative perseverance of staff during COVID-19 has truly been remarkable.
- Staff members were eager to share the various work settings. The length that Pathways has gone in matching host families with clients is just one example of the staff members’ dedication. Care has been taken in locating sites in hub areas, particularly near public transportation, whenever possible.
- The organization enjoys a very positive presence throughout its catchment areas. This is enhanced by collaborative efforts of the organization to maintain working relationships with resources in the communities. Satisfaction is high in the community and among clients, their families, and the staff. Clients were exuberant in expressing their satisfaction with the programs and the staff members that work with them.
- The pride that staff members take in the accomplishments of the clients is a palpable theme across the organization’s levels of service.
- Staff members are knowledgeable and demonstrate a genuine care for the clients. The positive attitudes of staff members were witnessed throughout the survey process. Staff members know the unique needs of the clients that they work with, and they evidenced ways to support the clients through advocating additional supports and obtaining grants for adaptive equipment.
- The longevity of the staff at Pathways speaks volumes to the organization and the quality of services provided. Many staff members reported being at Pathways for many years, as do many of the clients. Staff members reported being satisfied at the organization and feeling supported in their roles. The changes in the organization’s administrative and management teams demonstrate that there are opportunities for growth.

- Stakeholders reported being satisfied with the services and supports provided. Stakeholders reported that the organization is welcoming and has an open-door policy for discussing any concerns. Clients reported being happy and appeared happy throughout residential tours. One client described a staff member as being an “angel.” Staff members were described as being “knowledgeable, understanding, respectful, and always in a positive mood.”
- Pathways utilizes a number of risk assessments to identify potential risks for clients in its community housing and supported living programs. These assessments are extensive, and the results are incorporated into the clients’ behaviour plans and quality-of-life plans. Additionally, the clients’ homes are equipped with adaptive equipment, such as lifts and rails, to support the clients. Staff members receive formal training on how to utilize adaptive equipment and are provided with picture cards in the home on how to use the equipment.
- Pathways is a strong organization that provides unique supports for the clients. In addition to the in-home and personal needs of clients, the organization recognizes the financial challenges that many of its clients face. As such, the clients are provided with resources, such as rent subsidies and grocery cards to purchase food each month.
- Despite challenges related to the COVID-19 pandemic, Pathways has adapted to include technology into its daily activities. The clients have been able to remain connected to their families by way of Zoom as well as being able to participate in social and educational activities.
- In addition to the current supports in its community housing program, Pathways is planning to open a transitional house to better support clients in attaining a greater level of independence. This demonstrates the organization’s willingness and ability to adapt its services to meet the clients’ needs. The program is expected to focus more intensely on independent living skills, such as meal preparation, utilization of public transportation, and budgeting, in order to better prepare the clients for independent living.
- It is evident that the organization demonstrates resilience during tough times. When a client in one of the community housing programs tested positive for COVID-19, personnel quickly responded and adapted to the requirements of the local health department.

## 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

There are no recommendations in this area.

### 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.

## **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**

There are no recommendations in this area.

## **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

#### 1.F.10.g.

#### 1.F.10.h.

As Pathways takes responsibility for the funds of the clients, it should implement written procedures that also address how account reconciliation is provided to the clients at least monthly and how funds will be returned to the clients upon transition/exit from the program.

## 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

There are no recommendations in this area.

## 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.

## **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.5.c.(7)**

### **1.H.5.c.(8)**

The organization's written emergency procedures should also address identification of essential services and continuation of essential services. These procedures could include such items as the provision of medications, residential or other housing support services, etc.

### **1.H.7.c.(1)**

### **1.H.7.c.(2)**

### **1.H.7.c.(3)**

### **1.H.7.c.(4)**

### **1.H.7.c.(5)**

### **1.H.7.d.**

It is recommended that the unannounced test of each emergency procedure be analyzed for performance that addresses areas needing improvement, actions to address the improvements needed, implementation of the actions, necessary education and training of personnel, and whether the actions taken accomplished the intended results. Each test should be evidenced in writing, including the analysis.

## **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

### 1.I.4.a.(2)(a)

It is recommended that the organization implement written procedures that address the verification of the credentials of all applicable workforce (including licensure, certification, registration, and education) with primary sources.

## 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
- Written procedures for the use of information and communication technologies (ICT) in service delivery, if applicable
- ICT instruction and training, if applicable
- Provision of information related to ICT, if applicable
- Maintenance of ICT equipment, if applicable
- Emergency procedures that address unique aspects of service delivery via ICT, if applicable

### Recommendations

#### 1.J.3.d.(1)

#### 1.J.3.d.(2)

#### 1.J.3.d.(3)

#### 1.J.3.d.(4)

#### 1.J.3.d.(6)

#### 1.J.3.d.(7)

It is recommended that Pathways implement policies and procedures related to security, including access management; audit capabilities; data export and transfer capabilities; decommissioning of physical hardware and data destruction; remote access and support; and updates, configuration management, and change control.

- 1.J.7.a.
- 1.J.7.b.
- 1.J.7.c.
- 1.J.7.d.
- 1.J.7.e.
- 1.J.7.f.
- 1.J.7.g.

As appropriate, personnel who deliver services via information and communication technologies should receive documented competency-based training on equipment features, setup, use, maintenance, safety considerations, infection control, and troubleshooting.

### **Consultation**

- While Pathways has developed procedures for each specific virtual event, it is suggested that “common to all events” procedures be developed to assist staff and clients in understanding the basic virtual program needs and requirements.

## **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**

There are no recommendations in this area.

## **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.2.a.(1)**

**1.M.2.a.(2)**

**1.M.2.a.(3)**

**1.M.2.b.**

**1.M.2.c.**

**1.M.2.d.**

**1.M.2.e.**

**1.M.2.f.**

**1.M.2.g.**

It is recommended that Pathways identify gaps and opportunities in preparation for the development or review of a performance measurement and management plan, including consideration of input from clients, personnel, and other stakeholders; the characteristics of the clients; expected results; extenuating and influencing factors that may impact results; the comparative data available; communication of performance information; and technology to support implementation of the performance measurement and management plan.

**1.M.3.a.(2)(d)**

The organization should implement a performance measurement and management plan that addresses, for each program/service seeking accreditation, identification of measures for service delivery objectives, including resources used to achieve results for the clients (efficiency).

- 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 clients (efficiency), each program/service seeking accreditation 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 the 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.c.(4)

The analysis of service delivery performance should address service delivery indicators for each program/service seeking accreditation, including resources used to achieve results for the clients (efficiency).

## 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.12.a.**

#### **2.A.12.b.**

While the organization utilizes a release of confidential information, any release of confidential information should be authorized by the client and/or the client's legal representative and be limited to the specific information identified. Given that staff acknowledged that the organization sometimes has difficulty with obtaining consent from legal representatives, the organization might consider sending a memo to the legal representative indicating the requirement to have releases signed or, if obtaining verbal consent, documenting the verbal consent, including who provided the consent and the date/time of the consent.

#### **2.A.15.b.**

Although the organization provides training on positive interventions, it should ensure that personnel providing services are trained in the use of positive interventions at least annually. While it may not be financially feasible for the organization to provide training annually, it could provide a formal review of its positive interventions policies on an annual basis.

## **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)**

### **2.B.5.b.(3)**

Although the organization implements a coordinated individualized service plan with the active involvement of the clients and identifies overall goals, the plan should identify specific measurable objectives and methods/techniques to be used to achieve the objectives. The organization might consider using specific, measurable, achievable, realistic, and time-bound (SMART) goals and training personnel on this concept. The quality-of-life plan template includes a well-written SMART goal example that could be utilized to guide staff.

### **2.B.7.a.(3)**

### **2.B.7.a.(4)**

### **2.B.7.a.(5)**

### **2.B.7.b.**

While an in-depth risk assessment is used in developing behaviour plans, it is not currently utilized with those clients who do not require a behaviour plan. When applicable to the client and the client's goals and outcomes, the client and/or family served and/or their legal representatives should be involved in deciding whether to accept situations with inherent risks, identifying actions to be taken to minimize risks that have been identified, and identifying individuals responsible for those actions. In addition, risk assessment results should be documented in the individual service plan.

## **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**

There are no recommendations in this area.

### **Consultation**

- While the organization does have written procedures that address documentation of informed consent for medications, its practices do not mirror these policies, and the organization does not consistently ensure that medication consents are signed by the legal representative. It is strongly suggested that the organization ensure that its practices follow its policies and procedures.

## 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.

## 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.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.F. Respite Services (RS)**

#### **Description**

Respite services facilitate access to time-limited, temporary relief from the ongoing responsibility of service delivery for the persons served, families, and/or organizations. Respite services may be provided in the home, in the community, or at other sites, as appropriate. An organization providing respite services actively works to ensure the availability of an adequate number of direct service personnel.

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

- Services/supports are responsive to the family's needs.
- Services/supports are safe for persons.
- Services/supports accommodate medical needs.

#### **Key Areas Addressed**

- Time-limited, temporary relief from service delivery
- Accommodation for family's living routine and needs of person served

#### **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.

### **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.

### **Consultation**

- It is suggested that the organization make the Canada's Food Guide accessible to staff at all homes for reference, as this is its preference for use in preparing well-balanced meals. This may be especially beneficial to new staff starting with the organization.

## 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

## **Pathways to Independence**

289 Pinnacle Street  
Belleville ON K8N 3B3  
CANADA

Community Integration  
Host Family/Shared Living Services  
Respite Services  
Supported Living  
*Governance Standards Applied*

## **Bachman Terrace**

15 Bachman Terrace  
Ottawa ON K2A 3V6  
CANADA

Community Housing

## **Bethesda**

738 Bethesda Road  
Picton ON K0K 2T0  
CANADA

Community Housing

## **Bridge Street**

98 Bridge Street West  
Belleville ON K8P 1J6  
CANADA

Community Housing

## **Burnham**

179 Burnham Street  
Belleville ON K8N 3S1  
CANADA

Community Housing

## **Cannifton Road**

122 Cannifton Road North  
Belleville ON K0K 1K0  
CANADA

Community Housing

**Cedar Street**

19 Cedar Street  
Belleville ON K8P 3L8  
CANADA

Community Housing

**Charles Street**

247 Charles Street  
Belleville ON K8N 3M6  
CANADA

Community Housing

**Chatham Street**

80 Chatham Street  
Belleville ON K8N 3M6  
CANADA

Community Housing

**Clothier Street**

2426 Clothier Street , County Road 18  
Kemptville ON K0G 1J0  
CANADA

Community Housing

**Cloverleaf**

33 Cloverleaf Drive  
Belleville ON K8N 4Z5  
CANADA

Community Housing

**Club ABI - Renfrew**

185 Raglan Street South  
Renfrew ON K7V 1R2  
CANADA

Community Integration

**College Street**

198 College Street  
Belleville ON K8N 2V7  
CANADA

Community Housing

**Crofton**

2856 Highway 62 South  
Bloomfield ON K0K 1G0  
CANADA

Community Housing

**Emily Street**

34 Emily Street  
Belleville ON K8N 2P8  
CANADA

Community Housing

**Finlay House**

310 Bridge Street West  
Napanea ON K7R 0A4  
CANADA

Community Housing

**Frankford**

2550 Frankford Road  
Frankford ON K0K 2C0  
CANADA

Community Housing

**Fry**

1232 Fry Road , Rural Route 8  
Picton ON K0K 2T0  
CANADA

Community Housing

**Gilbert Street**

94 Gilbert Street  
Belleville ON K8P 3H2  
CANADA

Community Housing

**Haig Road**

275 Haig Road  
Belleville ON K8N 4P9  
CANADA

Community Housing

**Lake Street**

250 Lake Street  
Picton ON K0K 2T0  
CANADA

Community Housing

**Lesley Drive**

31 Lesley Drive  
Belleville ON K8N 4G2  
CANADA

Community Housing

**Mark Crescent**

9 Mark Crescent  
Trenton ON K8V 6M4  
CANADA

Community Housing

**Mitchell Road**

661 Mitchell Side Road  
Belleville ON K8N 4Z6  
CANADA

Community Housing

**Moira Street**

155 Moira Street  
Belleville ON K8P 1T2  
CANADA

Community Housing

**Napanee ABI Home**

416 Dundas Street West  
Napanee ON K7R 2B7  
CANADA

Community Housing

**Nisbet**

119 Nisbet Avenue  
Belleville ON K8P 4CI  
CANADA

Community Housing

### **Picton Community Connections**

141 Main Street  
Picton ON K0K 2T0  
CANADA

Community Integration

### **Quinte West Club ABI**

31 Quinte Street  
Trenton ON K8V 3P4  
CANADA

Community Integration

### **West Street**

169 West Street  
Napanee ON K7R 2P6  
CANADA

Community Housing

### **Whites Road**

342 Whites Road  
Trenton ON K8V 5P8  
CANADA

Community Housing

### **William Street**

248 William Street  
Belleville ON K8N 3K3  
CANADA

Community Housing

### **Woodroffe Centre**

356D Woodroffe Avenue, Suite 202  
Ottawa ON K2A 3V6  
CANADA

Community Integration