

CARF Accreditation Report for Personal Lifestyle Support Inc. 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.

Organization

Personal Lifestyle Support Inc.
955 Neptune Road
Kelowna BC V1X 3E4
CANADA

Organizational Leadership

Samara Hoedt, Quality Assurance Lead/Behaviour Lead
Tamara Papineau, Owner/Executive Director

Survey Number

188843

Survey Date(s)

March 24, 2025–March 25, 2025

Surveyor(s)

Camille Lagueux, Administrative
Linda Siino, MSW, Program

Program(s)/Service(s) Surveyed

Community Integration (Adults)
Supported Living (Adults)

Accreditation Decision

Three-Year Accreditation

Expiration: March 31, 2028

Executive Summary

This report contains the findings of CARF's site survey of Personal Lifestyle Support Inc. conducted March 24, 2025–March 25, 2025. 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, Personal Lifestyle Support Inc. demonstrated substantial conformance to the standards. Personal Lifestyle Support Inc. (PLS) provides services that are highly valued by the persons served and their families. Personnel at all levels of the organization are committed to the mission of the organization, and it is evident that they are devoted to the persons served. Personnel enjoy working for PLS, and a genuine synergy and camaraderie is demonstrated among the members of the team. The recommendations noted in the body of this report are found primarily in the administrative functions. Opportunities for improvement are found in the areas of leadership; strategic planning; financial planning and management; risk management; health and safety; workforce development and management; technology; performance measurement and management; performance improvement; and person-centred service planning, design, and delivery.

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

Personal Lifestyle Support Inc. 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 Personal Lifestyle Support Inc. was conducted by the following CARF surveyor(s):

- Camille Lagueux, Administrative
- Linda Siino, MSW, 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 Personal Lifestyle Support Inc. 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 Integration (Adults)
- Supported Living (Adults)

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 Personal Lifestyle Support Inc. demonstrated the following strengths:

- PLS promotes a safe environment for the persons served and for personnel. There is evidence of regular maintenance, and drills and inspections are completed and analyzed for improvements. The low number of incidents and complaints is further evidence of the attention given to health and safety.
- Since 2007, PLS has been "providing person-centred support for people with diverse abilities" who live in the city of Kelowna, British Columbia. A genuine sense of synergy is demonstrated by the leadership team, and it is apparent that members of this team are dedicated to the services being provided and to the persons served.
- The organization's offices are located on the lower level of the executive director/owner's home. The space is cheerful, nicely decorated, and functional and includes a larger meeting area, offices, and a kitchen. The unofficial greeter is Kyra, a lovely German Shepherd, who helps to foster an environment of security and comfort for the persons served, personnel, and visitors.

- The appreciation of all staff members is apparent with the implementation of a staff recognition award program that includes milestone bonuses and staff appreciation events, including dinners, scavenger hunts, paint nights, and a day off for birthdays, among others. Staff photos are displayed in the main office area, and the organization's website provides a comprehensive description of the role and responsibilities of the organization's staff positions.
- The organization's website is attractive and informative. In addition to providing comprehensive information about the services offered, an index of the organization's policies, procedures, and plans is available, and forms can be downloaded if needed. PLS's quarterly newsletter is also available on the website, with a section that includes a news update with short videos featuring persons served, sharing news updates and weather alerts.
- The leadership's commitment to quality improvement and the CARF accreditation process was evident during the survey process. Personnel at all levels of the organization were receptive to the feedback provided. The organization has developed and implemented comprehensive policies, procedures, and plans, and has a newly developed employee handbook.
- Lead and support staff, with the executive director/owner's attention and involvement, are the organization's greatest assets. They are bright and enthusiastic and are commended for their dedication and hard work delivering meaningful services for the persons served. Staff members are dedicated professionals who function well as a cohesive, effective team. They are driven to see the organization's mission accomplished and work toward the collective good. Without exception, the staff members expressed excitement about the organization's values. One notable observation during the survey was the manner in which all services reflect the preferences of the persons served at a deep level. Respect and commitment to the persons served is the "cherry on top."
- Persons served reported enjoying services that are based on their choice and support their independence. This is truly a person-centred practice that seems to come naturally to the team, which is committed to focusing on each person as an individual with their own histories, preferences, and needs.
- Instead of having the same person throughout the week, week after week, persons served have a variety of staff members providing community inclusion services. This not only offers diversity for those who often have far too few people in their lives but also provides checks and balances for health and safety.
- Observations of a community support staff member with a person served showed that it was evident that the two enjoyed each other's company, and the staff member brought value to the person's life, as reflected in positive comments made during an interview about the time the person served spent with the staff member. The person served reported feeling respected and having opportunities to make many choices about their shared activities.
- The organization does a great job supporting staffing choices for the persons served. Persons served can request a staffing change when they do not feel there is a good match with their support staff. In fact, one person served reported having a staff meeting this week to request support from male staff only, rather than from a female staff member once a day or once a week.
- The organization's transparency and desire to learn is gratifying. Following an incident that resulted in a halt in referrals and an internal review approximately one year ago, the organization is diligently working toward changing some processes and making improvements required by its funder. The executive director/owner is complimented for working so diligently to improve reporting, documenting, and, as appropriate, service delivery and staff training. Staff members understand the depth of change required by the funder and show a strong desire to change any external perceptions of the organization that may have arisen. The organization appears to provide excellent services, and these changes make it a strong source of support for the persons 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, diversity, and inclusion
- Corporate responsibility
- Organizational fundraising, if applicable

Recommendations

1.A.3.g.

1.A.3.o.

The identified leadership is urged to guide ongoing performance improvement and technology planning.

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.3.a.

1.C.3.b.

1.C.3.c.

Although the organization's website does state that the strategic plan is available if people want to see it, the strategic plan should be shared, as relevant to the needs of the specific group, with persons served, personnel, and other stakeholders. The organization might consider including its three strategic priority goals on the website to support this effort.

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.9.a.

1.F.9.b.(1)

1.F.9.b.(2)

The organization is urged to obtain an annual review or audit of its financial statements conducted by an independent accountant authorized by the appropriate authority and provide documentation of the results of the annual financial statement review or audit, including any resulting recommendations and management's response to recommendations, if applicable, resulting from the annual financial statement review or audit, including corrective actions taken or reasons why corrective actions will not be taken.

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.(3)

PLS has implemented a risk management plan. It is recommended that the organization implement a risk management plan that also includes identification of how to rectify identified exposures.

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.8.b.(1)

PLS has implemented procedures that address safety at the service delivery site for the persons served and personnel when providing services in locations that are not owned/leased or controlled/operated by the organization. If an organization provides services in locations that are not owned/leased or controlled/operated by the organization, it is recommended that the organization further implement written procedures that address safety at the service delivery site, including consideration of any emergency procedures that may already be in place at the service delivery site.

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.5.a.(2)(a)

1.I.5.a.(2)(b)

1.I.5.b.(2)

PLS has implemented written procedures that address background verifications. The organization is urged to further implement written procedures that address the credentials of all applicable workforce (including licensure, certification, registration, and education) with primary sources in all states/provinces or other jurisdictions where workforce will deliver services. The implemented written procedures should also address actions to be taken in response to the information received concerning credentials verification.

1.I.7.d.(1)(a)

1.I.7.d.(1)(b)

1.I.7.d.(1)(d)

It is recommended that the organization promote engagement through respect for all individuals in the workforce, including policies and written procedures that address mechanism(s) to provide favourable and constructive feedback and mechanism(s) to address concerns and promotion.

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.1.a.(1)

1.J.1.a.(2)

1.J.1.a.(3)

1.J.1.a.(4)

1.J.1.a.(5)

1.J.1.a.(6)

1.J.1.b.(1)

1.J.1.b.(2)

1.J.1.b.(3)

To identify gaps and opportunities in the use of technology, it is recommended that leadership support ongoing assessment of the organization's current use of technology and data, including hardware, software, communication technologies, sensitive data, services purchased or contracted, and assistive technology. The ongoing assessment should include input on the organization's use of technology from the persons served, personnel, and other stakeholders.

- 1.J.2.a.(1)
- 1.J.2.a.(2)
- 1.J.2.b.(1)
- 1.J.2.b.(2)
- 1.J.2.b.(3)
- 1.J.2.b.(4)
- 1.J.2.b.(5)
- 1.J.2.b.(6)
- 1.J.2.b.(7)
- 1.J.2.c.(1)
- 1.J.2.c.(2)
- 1.J.2.c.(3)
- 1.J.2.c.(4)
- 1.J.2.c.(5)
- 1.J.2.c.(6)
- 1.J.2.d.
- 1.J.2.e.
- 1.J.2.f.

The organization is urged to implement a technology and system plan that is based on its current use of technology and data and identification of gaps and opportunities in the use of technology. The plan should include goals, priorities, technology acquisition, technology maintenance, technology replacement, resources needed to accomplish the goals, and timeframes; support the business processes of the organization, protection of sensitive data, efficient operations, effective service delivery, access to services, and performance improvement; align with the organization's strategic plan; be reviewed at least annually for relevance; and be updated as needed.

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.

Consultation

- To aid in prioritizing the removal of existing barriers, it is suggested that PLS include which population (persons served, personnel, or other stakeholders) a barrier affects.
- For trending purposes, it is suggested that the organization complete an annual analysis of requests received for reasonable accommodations.

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.d.

1.M.2.e.

The organization has identified gaps and opportunities in preparation for the development or review of a performance measurement and management plan. It is recommended that the organization also identify gaps and opportunities in preparation for the development or review of a performance measurement and management plan, including consideration of extenuating and influencing factors that may impact results and the comparative data available.

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

1.M.3.a.(7)

1.M.3.b.

1.M.3.c.

The organization has implemented a performance measurement and management plan. It is recommended that the implemented organization's performance measurement and management plan be expanded to address for each program/service seeking accreditation identification of measures for service delivery objectives, including service access; address extenuating and influencing factors that may impact results; be reviewed at least annually for relevance; and be updated as needed.

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)

To measure service access, 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 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)

1.N.1.c.(5)

1.N.1.d.(2)

1.N.1.e.(1)

1.N.1.e.(2)

1.N.1.e.(3)

The organization has a documented analysis of service delivery. The analysis of service delivery performance should be expanded to address service indicators for each program/service seeking accreditation, including resources used to achieve results of the person served (efficiency) and service access; incorporate the impact of extenuating or influencing factors; and include comparative analysis, identification of trends, and identification of causes.

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)

The analysis of business function performance should be documented; be completed at least annually and in accordance with the timeframes outlined in the performance measurement and management plan; address priority business function indicators determined by the organization; incorporate the characteristics of the persons served, if applicable, and the impact of extenuating or influencing factors; include comparative analysis, identification of trends, and identification of causes; and 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.b.(2)

1.N.3.c.

The results of performance analysis should be used to facilitate organizational decision making regarding business functions and guide changes to the performance measurement and management 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)

In accordance with the performance measurement and management plan, the organization is urged to communicate accurate performance information to the persons served, personnel, and other stakeholders according to the needs of the specific group, including content, format, and timing.

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

There are no recommendations in this area.

Consultation

- The organization might consider including a statement that the consent for release of information may be rescinded at any time. In addition, it is suggested that PLS allow space for the individual served to indicate any information that they do not want shared.

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 affect 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)

PLS identifies specific measurable objectives on some, but not all service plans. It is recommended that a coordinated individualized service plan consistently identify specific measurable objectives. It is suggested that this include all coordinated individualized service plans.

Consultation

- PLS is encouraged to provide more training for staff members on the components of a plan. The specific, measurable, attainable, realistic, and time-bound (SMART) method could be utilized to assist staff to evaluate and develop plans to which they contribute. The organization might also consider simplifying the format of the service plans. Staff members utilize several pages to identify elements of the plans that might more easily and clearly be constructed with a simple format indicating long-term goals, specific measurable objectives with time-limited dates, and strategies identifying who is responsible and how to provide interventions.

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

- Currently, a refrigerator is not needed. However, as the organization expands, it might consider providing a refrigerator for storing medications, as appropriate, or a lockbox to protect medication from light and maintain the proper temperature.
- As needed, the organization might consider developing a procedure for evaluation of a person's capacity to self-medicate.

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.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.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.

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

Personal Lifestyle Support Inc.

955 Neptune Road
Kelowna BC V1X 3E4
CANADA

Community Integration (Adults)
Supported Living (Adults)