CARF Accreditation Report for It's My Life Kamloops Society

Three-Year Accreditation

CARF Canada

501-10154 104 Street NW Edmonton, AB T5J 1A7, Canada

A member of the CARF International group of companies

CARF International Headquarters 6951 E. Southpoint Road Tucson, AZ 85756-9407, USA

www.carf.org



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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.

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



Organization

It's My Life Kamloops Society 177 Victoria Street Kamloops BC V2C1Z4 CANADA

Organizational Leadership

Dawn Khadikin, Executive Director

Survey Number

180980

Survey Date(s)

March 18, 2024-March 19, 2024

Surveyor(s)

Ann Howlett, Administrative Liz Kellough, Program

Program(s)/Service(s) Surveyed

Community Integration Supported Living

Previous Survey

April 28, 2021–April 30, 2021 Three-Year Accreditation

Accreditation Decision

Three-Year Accreditation Expiration: April 30, 2027



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Executive Summary

This report contains the findings of CARF's site survey of It's My Life Kamloops Society conducted March 18, 2024—March 19, 2024. 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, It's My Life Kamloops Society demonstrated substantial conformance to the standards. It's My Life Kamloops Society (IMLKS) is committed to the persons served. The organization is an excellent example of what it means to truly be person centred. Staff members repeatedly spoke about how much they enjoy working for IMLKS, and they take great pride in the supports offered. Family members recognize the care and commitment from staff and the important relationships that the staff develops with their loved ones. They regularly see staff advocating for their loved ones. IMLKS also demonstrates a high commitment to ongoing health and safety by developing specific procedures for forest fire threats and potential evacuations, which are an increasing reality in British Columbia. IMLKS has some areas for improvement related to completing analyses of critical incidents, enhancing performance appraisals, completing tests of procedures for business continuity/disaster recovery procedures, and expanding written procedures regarding medications.

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

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

- Submit annual reporting documents and other required information to CARF, as detailed in the Accreditation Policies and Procedures section in the standards manual.
- Maintain ongoing conformance to CARF's standards, satisfy all accreditation conditions, and comply with all accreditation policies and procedures, as they are published and made effective by CARF.



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Survey Details

Survey Participants

The survey of It's My Life Kamloops Society was conducted by the following CARF surveyor(s):

- Ann Howlett, Administrative
- Liz Kellough, 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 It's My Life Kamloops Society and its program(s)/service(s) consisted of the following activities:

- Confidential interviews and direct interactions, as outlined in the previous section.
- Direct observation of the organization's operations and service delivery practices.
- Observation of the organization's location(s) where services are delivered.
- Review of organizational documents, which may include policies; plans; written procedures; promotional
 materials; governing documents, such as articles of incorporation and bylaws; financial statements; and other
 documents necessary to determine conformance to standards.
- Review of documents related to program/service design, delivery, outcomes, and improvement, such as
 program descriptions, records of services provided, documentation of reviews of program resources and
 services conducted, and program evaluations.
- Review of records of current and former persons served.



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Program(s)/Service(s) Surveyed

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

- Community Integration
- Supported Living

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 It's My Life Kamloops Society demonstrated the following strengths:

- Every aspect and decision making of the organization is filtered through the lens of the persons served. The organization repeatedly demonstrated this through its strategic planning processes and its ongoing organizational and program decision making. This was also reinforced by comments from a funder, who stated that IMLKS is the "number one contract" and is the one organization able to work with medically complex individuals.
- As with many organizations, staff recruitment and retention are an ongoing challenge. The organization recognizes the importance of staff retention to provide quality services. To address this challenge, IMLKS regularly seeks input from employees to ensure that the organization understands what is important to the employees. As a result of feedback from employees, the organization implemented a comprehensive benefits package.

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- IMLKS is recognized for ensuring and maintaining a positive and healthy work environment. Staff members consistently spoke positively about their experiences as an employee with IMLKS. Many said that it is the best place they have ever worked.
- The organization demonstrated an ongoing commitment to quality improvement. Its annual outcomes reports demonstrate commitment in this area, and these reports provide a means to guide the organization in providing continual quality services.
- A commitment to health and safety was evident throughout the organization. Currently, British Columbia is seeing a serious escalation of wildfires and increasing instances of towns being evacuated. In recognition of this increasing reality and threat, IMLKS has developed separate policies and drills for wildfire evacuations for the office and residences where the persons served lived.
- Staff members across IMLKS expressed appreciation for the many ways that leadership supports them in their roles. They shared many examples of the training, coaching, and modelling provided to them and the recognition they receive for their work. They see leadership as accessible and available, serving as important role models and mentors for them.
- IMLKS stands out as a learning organization, with both leadership and direct support workers committed to reflecting on practice, learning from experiences, seeking input and guidance to respond effectively to new situations, supporting one another, and advocating necessary resources and support to respond to emerging needs.
- Interactions between staff and the persons served underscore the organization's focus on its values and its unwavering commitment to a person-centred approach. It is clear that the persons served have built strong, trusting, and caring relationships with their core staff, who they count on to listen to and learn from and to offer encouragement and support to help them navigate their worlds. Staff members are clearly invested in, find joy in, and are committed to helping open doors for the persons served to live full lives in their homes and communities.
- Family members appreciate the caring, important relationships that their loved ones have with their core staff. Additionally, they noted many examples illustrating the active role that service coordinators and organizational leadership play in responding to and provided needed resources and supports to meet any new and emerging needs of their family members.
- IMLKS is commended for the many ways that is has developed accessible resources, such as pictorial handbooks, rights booklets, and person-centred planning guides. When developing the most recent rights booklet, the organization sought guidance from a person served. It is now working with this same individual to create a Microsoft® PowerPoint presentation that can be used to facilitate discussions with other persons served by IMLKS to increase awareness about rights.

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.



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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.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.

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Key Areas Addressed

- Environmental considerations
- Strategic plan development, implementation, and periodic review



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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.

Consultation

• IMLKS regularly obtains input from the persons served and other stakeholders by distributing surveys; however, it is finding response rates to be low. The organization identified that it does receive ongoing meaningful feedback and input from the persons served during regular contact. The organization is encouraged to utilize additional methods to obtain input beyond surveys and ensure that it documents the ongoing input received and incorporates that input into performance measurement results.

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.



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Key Areas Addressed

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

Recommendations

There are no recommendations in this area.

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



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Recommendations

1.H.11.b.(1)

1.H.11.b.(2)

1.H.11.b.(3)

1.H.11.b.(4)

1.H.11.b.(5)

1.H.11.b.(6)

1.H.11.b.(7)

1.H.11.b.(8)

1.H.11.b.(9)

1.H.11.b.(10)

Although IMLKS completes a written review of critical incidents, it is specific to each person served rather than on all critical incidents. It is recommended that a written analysis of all critical incidents be provided to or conducted by the leadership at least annually that addresses causes, trends, areas needing improvement, actions to address the improvements needed, implementation of the actions, whether the actions taken accomplished the intended results, necessary education and training of personnel, prevention of recurrence, internal reporting requirements, and external reporting requirements.

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 8 f

Although goals are included in all performance appraisals, they are not written in a way that is measurable. It is recommended that the organization implement written procedures for performance appraisal that address measurable goals. It is suggested that the organization utilize a specific, measurable, attainable, relevant, and time-bound (SMART) goal framework to write goals.



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Consultation

• Although IMLKS does not currently require specific education, certification, registration, or licensure for any employment positions, it is encouraged to add steps to its policy to verify those credentials with primary sources. This can ensure that the organization is prepared in the event that the organization expands its services and requires specific post-secondary education and/or certifications.

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.4.a.

1.J.4.b.(1)

1.J.4.b.(2)

1.J.4.b.(3)

1.J.4.b.(4)

1.J.4.b.(5)

1.J.4.b.(6)

1.J.4.c.

Although the organization has a process in place to monitor its business continuity/disaster recovery plan, no annual analysis has been completed. It is recommended that a test of the organization's procedures for business continuity/disaster recovery be conducted at least annually; analyzed for effectiveness, areas needing improvement, actions to address the improvements needed, implementation of the actions, whether the actions taken accomplished the intended results, and necessary education and training of personnel; and evidenced in writing, including the analysis.

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.



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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



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- 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

There are no recommendations in this area.

Consultation

• IMLKS has detailed performance measurement and management plans. While the organization has processes to verify validity, reliability, completeness, and accuracy of data, this process is not documented anywhere. It is suggested that the organization add these processes to its plans and outcomes reports, which can give credit to the organization for the detailed work it is doing.

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

There are no recommendations in this area.

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.



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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

- As a way to reassure family members and persons served when working with new staff when they had not been part of the selection process (such as relief staff), IMLKS might consider developing some quick fact sheets that include a staff bio and picture and a detailed overview of the level of training and orientation that has been provided to the new staff member before assuming the role. This approach might help to address some of the worries, especially among families, who are often anxious about level of care and impact of changes when new staff members are involved with their loved ones.
- IMLKS is encouraged to streamline its written policy and procedures regarding behavioural interventions to better reflect its current practices and approaches and the standards of the funding body, Community Living British Columbia (CLBC). In particular, it might be helpful to use language consistent with CLBC's policies so that expectations of staff with regard to unsafe behaviours of the persons served, appropriate and prohibited behavioural responses, and the organization's focus on positive change can be clearly laid out and easy for staff to follow.

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

There are no recommendations in this area.



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Consultation

• In keeping with its strong focus on celebrating the steps forward that each person served makes in their lives, IMLKS is encouraged to explore a more robust use of specific measurable objectives associated with the goals set. In particular, for some of the ongoing goals that the persons served have identified (such as maintaining their job or volunteer position or participating in meal preparation), targeting specific objectives can help to focus and celebrate small successes that assist the persons served to stay on track with the things that matter to them in their lives.

2.C. Medication Monitoring and Management

Key Areas Addressed

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

Recommendations

2.C.5.b.

2.C.5.c.

While IMLKS has written procedures regarding medication and storage, it does not include transportation and offsite use of medications. The organization is urged to implement written procedures that address transportation and delivery as well as off-site use. These procedures might include the expected practices to follow when medication is needed by a person served outside of the regular pharmacy delivery schedule.

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.



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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.



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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.



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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.



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Program(s)/Service(s) by Location

It's My Life Kamloops Society

177 Victoria Street Kamloops BC V2C 1Z4 CANADA

Community Integration Supported Living

