

April 16, 2020

Jennifer Hirsch
The John Howard Society of The Lower Mainland of British Columbia
763 Kingsway
Vancouver BC V5V 3C2
CANADA

Dear Ms. Hirsch:

It is my pleasure to inform you that The John Howard Society of The Lower Mainland of British Columbia has been issued CARF accreditation based on its recent survey. The Three-Year Accreditation applies to the following program(s)/service(s):

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

This accreditation will extend through March 31, 2023. This achievement is an indication of your organization's dedication and commitment to improving the quality of the lives of the persons served. Services, personnel, and documentation clearly indicate an established pattern of conformance to standards.

The accreditation report is intended to support a continuation of the quality improvement of your organization's program(s)/service(s). It contains comments on your organization's strengths as well as any consultation and recommendations. A Quality Improvement Plan (QIP) demonstrating your organization's efforts to implement the survey recommendation(s) must be submitted within the next 90 days to retain accreditation. The QIP form is posted on Customer Connect (customerconnect.carf.org), CARF's secure, dedicated website for accredited organizations and organizations seeking accreditation. Please log on to Customer Connect and follow the guidelines contained in the QIP form.

Your organization should take pride in achieving this high level of accreditation. CARF will recognize this accomplishment in its listing of organizations with accreditation and encourages your organization to make its accreditation known throughout the community. Communication of the accreditation to your referral and funding sources, the media, and local and federal government officials can promote and distinguish your organization. Enclosed are some materials that will help you publicize this achievement.

Your organization's complimentary accreditation certificate will be sent separately. You may use the enclosed form to order additional certificates.

If you have any questions regarding your organization's accreditation or the QIP, you are encouraged to seek support from Ronald Tran by email at rtran@carf.org or telephone at (888) 281-6531, extension 7071.

CARF encourages your organization to continue fully and productively using the CARF standards as part of its ongoing commitment to accreditation. CARF commends your organization's commitment and consistent efforts to improve the quality of its program(s)/service(s) and looks forward to working with your organization in its ongoing pursuit of excellence.

Sincerely,

A handwritten signature in black ink, reading "Brian J. Boon Ph.D." in a cursive script.

Brian J. Boon, Ph.D.
President/CEO

Enclosures

CARF Accreditation Report
for
The John Howard Society of The
Lower Mainland of British
Columbia

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 an on-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

The John Howard Society of The Lower Mainland of British Columbia
763 Kingsway
Vancouver BC V5V 3C2
CANADA

Organizational Leadership

Jennifer Hirsch, Director, Community Living Services
Mark Miller, CEO

Survey Number

127453

Survey Date(s)

March 4, 2020–March 6, 2020

Surveyor(s)

Brenda L. Yarnell, PhD, Administrative
Jordan Oostenbrink, Program
Cheryl Cotterill, LPN, Program

Program(s)/Service(s) Surveyed

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

Previous Survey

February 22, 2017–February 24, 2017
Three-Year Accreditation

Accreditation Decision

Three-Year Accreditation

Expiration: March 31, 2023

Executive Summary

This report contains the findings of CARF's on-site survey of The John Howard Society of The Lower Mainland of British Columbia conducted March 4, 2020–March 6, 2020. 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, The John Howard Society of The Lower Mainland of British Columbia demonstrated substantial conformance to the standards. The John Howard Society of The Lower Mainland of British Columbia has experienced significant growth since the last CARF survey. This growth has resulted in a budget that has increased three-fold, staff more than doubling, and a reorganization of staff roles and functions. Management and staff members work together as a team to support the mission and to ensure that high-quality support services are delivered to a challenging population of persons served. Areas for improvement are noted in health and safety, workforce development, technology, and host family/shared living services. Some of the recommendations are in process to be developed and implemented, specifically the succession plan for key staff members. Staff members have been recently assigned to new roles and have embraced performance improvement in their respective area of work.

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

The John Howard Society of The Lower Mainland of British Columbia 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 The John Howard Society of The Lower Mainland of British Columbia was conducted by the following CARF surveyor(s):

- Brenda L. Yarnell, PhD, Administrative
- Jordan Oostenbrink, Program
- Cheryl Cotterill, LPN, 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 The John Howard Society of The Lower Mainland of British Columbia 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
- Host Family/Shared Living 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 on-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 The John Howard Society of The Lower Mainland of British Columbia demonstrated the following strengths:

- The John Howard Society of The Lower Mainland of British Columbia has a strong leadership team, including a visionary CEO, a talented and dedicated management team, and a mission engaged board of directors. Staff members are enthusiastic about the work of the organization and optimistic about future growth opportunities. The organization's budget has tripled in the past four years through program expansion, resulting in a reorganization of staff positions, adding new staff, and opening a new office.
- The board of directors includes a standing committee and CEO development, which provides consulting to the CEO as well as performance reviews. This committee has created a strong linkage for communication between the CEO and board chair.

- The John Howard Society of The Lower Mainland of British Columbia is a leader among the seven The John Howard Society affiliates in British Columbia. The affiliate network shares information, resources, and sometimes grant opportunities. The John Howard Society of The Lower Mainland of British Columbia is providing mentoring support in performance improvement by assisting other affiliates to prepare for future CARF accreditation, including inviting staff from two affiliates to observe the entire survey process.
- The John Howard Society of The Lower Mainland of British Columbia works with a very challenging population with complex needs and has earned a positive reputation in the community for the quality of its work and the outcomes for the persons served. Staff members acknowledge that sometimes a placement may not work out for a person but they continue to advocate and find a placement that does work for that particular individual.
- The organization has recently started to utilize a software program, StandOut®, which is an employee coaching tool. The purpose of StandOut is to help managers better understand the work style of staff members as well as peers.
- The John Howard Society of The Lower Mainland of British Columbia has many community partnerships. It has a dental program through The University of British Columbia Okanagan, artist in residence, indigenous programs, and specialized residences it has developed across the region with other organizations/stakeholders to best support and create safe spaces without judgement for persons served. The John Howard Society of The Lower Mainland of British Columbia employees and contractors also have a strong relationship with stakeholders, including families, funders, and licensing bodies.
- The John Howard Society of The Lower Mainland of British Columbia has grown as an organization in the past number of years and has expanded its programs to create new office space within different cities. Its approach to rapid rehousing and harm reduction has created a niche in the areas of developmental disabilities, mental health, criminal justice, and forensics funding.
- The John Howard Society of The Lower Mainland of British Columbia utilizes a number of apps to ensure the safety of its outreach workers. One app it uses is called SafetyLine, and this ensures that the workers are properly supported with regular check-ins (every two hours) while working alone.
- The John Howard Society of The Lower Mainland of British Columbia has utilized an online system called PolicyTech® for its policies and procedures that has created a streamlined process for ensuring that its documents are accessible for all employees and contractors. Its competency-based training will also be standardized for all employees and contractors on PolicyTech.
- Employees and contractors maintain a strong rapport with persons served while establishing boundaries.
- Home share placements appear to be long-term based and stable. Persons served express a high satisfaction living in their homes.
- Employees actively write grants to access additional funding for new and existing programs.
- The John Howard Society of The Lower Mainland of British Columbia coordinates organizationwide activities and/or events that all persons served are eligible to attend and be a part of.
- Employees care about the well-being of each other and have pursued creating a culture of health and well-being. An example of this includes a regular two-week check-in with employees that one of the managers has implemented and will be eventually implemented across the organization where it is an open conversation regarding how their week has been, what can they do to improve, and how they can be better supported by the organization. This process has also helped with staff retention in this program.
- The community housing programs are homelike and incorporate gardening, cooking programs, and game nights that allow for persons served to have friends and family in to join in the festivities.

- Family members express the tremendous impact of services on the lives of their loved ones through the quality of services and enthusiastic support they receive, which has made lifelong changes in a short amount of time. They feel welcomed in the home and that the support team is open to feedback and ideas to further enrich the persons served.
- Persons served expressed that teams helped them with making safe, healthy choices; helped them access outside supports; and assisted with banking, shopping, and other essential services that they could not do on their own.
- Management and teammates are dedicated, empathetic, and supportive and seem to live and breathe the vision and mission of the organization and provide respect to all they support.

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.

Consultation

- The organization may find it beneficial to include an overview of the cultural competency and diversity plan as part of the orientation of new staff members. This helps to set the tone of the culture of the organization and its values for new staff members.
- Although the organization has written codes of conduct in all of the areas indicated by CARF standards, it may be helpful if the codes are consolidated into one comprehensive policy or document that is easily accessible and codified for board members, staff members, and persons served.
- The current procedure to deal with allegations of violations of ethical codes is part of an overall complaint process. It might be helpful to separate this investigative process and add it to the overall ethics policy for training purposes.

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.

Consultation

- The organization could consider adding the new poster featuring the mission, vision, and values along with the strategic goals to the bulletin boards in residences, as appropriate, to help everyone understand the direction of the organization.

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
- 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
- Safeguarding funds of persons served, if applicable
- Review/audit of financial statements

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.

Consultation

- It might be helpful to add a column to track the longitudinal trends. For example, how many incidents occurred in 2018, 2019, and 2020. This could enable a quick analysis and help determine the level of ongoing risk.

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

- Competency-based training on safety procedures and practices
- Emergency procedures
- Access to first aid and emergency information
- Critical incidents
- Infection control
- Health and safety inspections

Recommendations

1.H.4.a.(5)

1.H.4.a.(6)

1.H.4.a.(7)

1.H.4.b.(5)

1.H.4.b.(6)

1.H.4.b.(7)

It is recommended that personnel receive documented competency-based training at orientation and at least annually in the areas of identification of critical incidents, reporting of critical incidents, and medication management. The organization is encouraged to expand questions on its Occupational Health and Safety Questionnaire to ensure that staff members understand their training of the health and safety information presented.

Consultation

- It is suggested that the organization include vehicle first aid kit review as part of the organization's safety checklist to ensure that all supplies are current and not expired.

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 background/credentials/fitness for duty
- Workforce engagement and development
- Performance appraisals
- Succession planning

Recommendations

1.I.3.g.

The board has developed a succession plan for the CEO; however, it is recommended that ongoing workforce planning include succession planning. The leadership is encouraged to continue its work in succession planning beyond the CEO to additional key personnel.

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

It is recommended that the organization implement written procedures for verification of all credentials, including licensure, certification, registration, and education, with primary sources. Currently photocopies are being accepted, which may be falsified.

1.I.5.a.(4)

1.I.5.a.(5)

It is recommended that onboarding and engagement activities include orientation addressing the organization's performance measurement and management system and risk management plan.

1.I.7.e.

It is recommended that workforce development activities include performance appraisals consistently. It is suggested that they be completed for each employee on an annual basis according to organizational practice.

1.I.11.a.

1.I.11.b.

1.I.11.c.

1.I.11.d.

1.I.11.e.

1.I.11.f.

1.I.11.g.

The organization is in the process of developing a succession plan. It is recommended that the organization's succession planning address, at a minimum, its future workforce needs, identification of key positions, identification of the competencies required by key positions, review of talent in the current workforce, identification of workforce readiness, gap analysis, and strategic development.

1.J. Technology

Description

CARF-accredited organizations plan for the use of technology to support and advance effective and efficient service and business practices.

Key Areas Addressed

- Ongoing assessment of technology and data use
- 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
- Access to ICT information and assistance, if applicable
- Maintenance of ICT equipment, if applicable
- Emergency procedures that address unique aspects of service delivery via ICT, if applicable

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.c.

The organization recently developed a test for its procedures for business continuity/disaster recovery. It is recommended that a test of the organization's procedures for business continuity/disaster recovery be conducted at least annually and analyzed for effectiveness, areas needing improvement, actions to be taken, results of performance improvement plans, and necessary education and training of personnel and be 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.

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.

Consultation

- The organization has numerous rights policies for persons served; however, these are scattered through various policies of the organization. It is suggested that staff members develop a consolidated rights statement for persons served and include the statement in the handbook, include the rights in staff training, and distribute them during service plan development and other similar opportunities.

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 are committed to continually improving their organizations and service delivery to the persons served. Data are collected and analyzed, and information is used to manage and improve service delivery.

Key Areas Addressed

- Data collection
- Establishment and measurement of performance indicators

Recommendations

There are no recommendations in this area.

1.N. Performance Improvement

Description

The dynamic nature of continuous improvement in a CARF-accredited organization sets it apart from other organizations providing similar services. CARF-accredited organizations share and provide the persons served and other interested stakeholders with ongoing information about their actual performance as a business entity and their ability to achieve optimal outcomes for the persons served through their programs and services.

Key Areas Addressed

- Analysis of performance indicators in relation to performance targets
- Use of performance analysis for quality improvement and organizational decision making
- 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.

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 John Howard Society of The Lower Mainland of British Columbia is encouraged to amend its medication policies to distinguish the difference between medication monitoring and medication management.

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 his or her 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.

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

- Although The John Howard Society of The Lower Mainland of British Columbia has comprehensive policies in medications, it is suggested that a review to incorporate detailed medication administration procedures in a more understandable format be considered for all applicable services.

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 he/she 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 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 him/her and identifies applicant providers who are a potential match with the person's identified criteria. The person served makes the final decision of selecting his or her 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 the community. The service 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 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 provider encourages and supports the person served to make his or her own 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. In this program description and these standards, provider refers to the individual(s) supporting the person served. Although the “home” is generally the 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

4.E.5.a.

4.E.5.c.

4.E.5.d.

4.E.5.e.

The organization does not currently have any competency-based training for home share providers specific to implementation of program values, basic healthcare expectations, documentation practices, and medication management. It is recommended that the organization require providers to participate in competency-based training that addresses implementation of program values, basic healthcare expectations, documentation practices, and medication management. It is suggested that the organization develop competency-based training regarding these topics and specific to the handbook that is given to home share providers.

4.E.6.a.(4)(a)

4.E.6.a.(4)(b)

4.E.6.a.(4)(c)

It is recommended that the organization amend its written agreement/contract with home share providers so it includes the identification of who has what authority over decisions regarding the person’s healthcare, finances, and legal status. It could be specific that home share providers cannot make healthcare, financial, and/or legal decisions for persons served.

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.

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

The John Howard Society of The Lower Mainland of British Columbia

763 Kingsway
Vancouver BC V5V 3C2
CANADA

Host Family/Shared Living Services
Governance Standards Applied

Abbotsford Office

101 - 33131 South Fraser Way
Abbotsford BC V2S 2B1
CANADA

Host Family/Shared Living Services
Supported Living

East Third Residential

3387 East Third Avenue
Vancouver BC VSM 1J5
CANADA

Community Housing

Fraser Street Staff Office

3360 Fraser Street
Vancouver BC V5V 4C1
CANADA

Host Family/Shared Living Services
Supported Living

Miller Block

767 Kingsway
Vancouver BC V5V 3C2
CANADA

Supported Living

Surrey Office

10328 Whalley Boulevard
Surrey BC V3T 5R3
CANADA

Host Family/Shared Living Services
Supported Living

Vancouver Apartments

3008 Clark Drive
Vancouver BC V5N 3J1
CANADA

Community Housing