



SURVEY OUTCOME
Three-Year Accreditation

CARF
Survey Report
for
Howe Sound
Rehabilitation
Services Society

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Organization

Howe Sound Rehabilitation Services Society (HSRSS)
#203 - 218 Blue Mountain Street
Coquitlam, BC V3K 4H2
Canada

Organizational Leadership

Mike Hopton, Executive Director
Loretta M. Rucchin, B.A., Operations Manager

Survey Dates

October 1-3, 2007

Survey Team

Mike Townsend, Administrative Surveyor
Larry G. Jones, Program Surveyor

Programs/Services Surveyed

Community Services: Community Housing
Community Services: Community Integration
Community Services: Host Family Services
Community Services: Respite Services

Previous Survey

September 27-29, 2004
Three-Year Accreditation

Survey Outcome

Three-Year Accreditation
Expiration: December 2010



SURVEY SUMMARY

Howe Sound Rehabilitation Services Society (HSRSS) has strengths in many areas.

- Enthusiastic, motivated, and responsive personnel are dedicated to the enhancement of the quality of life of persons served who have very challenging barriers. Staff members focus on producing positive outcomes for persons served and are committed to providing quality care and individualized services. Management and staff members have developed strong relationships with stakeholders, including persons served, funding and referral sources, and community members.
- The executive director and the operations manager are experienced, knowledgeable, and dedicated leaders who have earned the respect of staff, persons served, and other stakeholders.
- A dedicated board of directors provides direction and leadership for the organization. The members of the board promote a positive image of the organization within the local community. The board conducts an annual evaluation of the effectiveness of the individual directors and the board as a whole.
- HSRSS has developed a comprehensive barriers plan. The plan helps guide enhancements to accessibility of services. The organization is commended for implementing corrective actions that have resulted in greater access to its programs and services.
- It is evident that the rights of persons served are respected and protected by the staff members. A high level of dignity and respect is given to each person served.
- HSRSS has developed a comprehensive health and safety program that is managed by the dedicated members of the occupational health and safety committee.
- Staff members have developed an evacuation plan specifically tailored to each person served in residential services.
- HSRSS has a sound strategy for its improvement and growth. Its future plans are based on a blueprint developed by the strategic planning process.
- Persons served and referral and funding sources express satisfaction with the quality of services provided by the organization.
- HSRSS has a comprehensive risk management plan that is designed to reduce vulnerability in many areas.
- Services are administered in settings that are attractive and well maintained. The homes are attractive and blend in well with the neighbourhoods.
- HSRSS enjoys a position of financial stability. Sound financial systems and practices have contributed to the organization's financial health.
- HSRSS has a track record of creating innovative and effective services to help meet community needs for citizens of the lower mainland. The organization has demonstrated an ability to grow and develop strong programs. It continues to demonstrate flexibility and responsiveness to changing needs.

- A major strength of the organization is the variety of community programs made available to persons served.
- All of the community housing and host family accommodations are recognized as best practices in community living.
- The support staff members in all of the living units are recognized as caring individuals who provide quality services for individuals.
- The organization makes an extra effort to use natural supports in community program services by providing a variety of individual choices.

Howe Sound Rehabilitation Services Society demonstrates exemplary conformance to the standards in the following area.

- HSRSS utilizes an excellent outcomes measurement system that results in a comprehensive performance management report. This report provides a detailed analysis of performance related to goals for a variety of indicators. Both positive and negative results are analyzed, recommendations are made when performance is less than expected, and actions are taken. Information is then used as the organization plans, budgets, markets, and manages its operations and services.

Howe Sound Rehabilitation Services Society should seek improvement in the areas identified by the recommendations in the report. Suggestions given do not indicate non-conformance to standards but are offered as consultation for further quality improvement.

On balance, HSRSS demonstrates substantial conformance to the CARF standards. Based on the systems and processes developed by the organization, it is likely that persons served will continue to achieve positive outcomes. HSRSS is already addressing the issues noted herein and, in the process, is developing organizational strengths through the appropriate use of its resources. The organization has the capacity and willingness to address the recommendations noted in this report. The organization is encouraged to continue to improve upon its fine record of providing quality outcomes for the persons served. The administration and staff members have demonstrated that they build on their strengths and are constantly striving to upgrade all aspects of the organization.

Howe Sound Rehabilitation Services Society has earned a Three-Year Accreditation. The administration and staff members are complimented for the positive efforts they have made on behalf of persons served. They are encouraged to continue to use their resources to advance the independence of the persons served.

SECTION 1. BUSINESS PRACTICES

Criterion A. Input from Stakeholders

Principle Statement

CARF-accredited organizations continually focus on the expectations of the persons served and other stakeholders. The standards in Criterion A 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

- Ongoing collection of information from a variety of sources
 - Analysis and integration into business practices
 - Leadership response to information collected
-

Recommendations

There are no recommendations in this area.

Criterion B. Accessibility

Principle Statement

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

Key Areas Addressed

- Written accessibility plan(s)
 - Status report regarding removal of identified barriers
 - Requests for reasonable accommodations
-

Recommendations

There are no recommendations in this area.

Criterion C. Information Management and Performance Improvement

Principle Statement

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

- Information collected, analyzed, and used to address critical customer needs
 - Accurate and consistent information collection
 - Proactive performance improvement
 - Performance information shared with all stakeholders
 - Written technology and system plan
-

Recommendations

C.4.b.(4)

HSRSS collects data on the persons served at the beginning of services, at appropriate intervals during services, and at the end of services. However, it does not collect data at points in time following services. It is recommended that the organization establish a follow-up system to collect information at points in time after an individual exits services.

Exemplary Conformance

C.5.a. through C.5.c.

HSRSS utilizes an excellent outcomes measurement system that results in a comprehensive performance management report. This report provides a detailed analysis of performance related to goals for a variety of indicators. Both positive and negative results are analyzed, recommendations are made when performance is less than expected, and actions are taken. Information is then used as the organization plans, budgets, markets, and manages its operations and services.

Criterion D. Rights of Persons Served

Principle Statement

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

Key Areas Addressed

- Meaningful communication of rights
 - Commitment to diversity
 - Policies promote rights of persons served
 - Complaint, grievance, and appeals policy
 - Annual review of complaints
-

Recommendations

There are no recommendations in this area.

Consultation

- The organization has a policy in the handbook for persons served that states that there will be no reprisal against an individual who files a formal grievance. However, this important information is buried in a myriad of information in the handbook. It is suggested that HSRSS more clearly communicate to each person served that there will be no reprisal for initiating the grievance process. This information could be highlighted in the handbook and could be mentioned on the grievance form.
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Criterion E. Health and Safety

Principle Statement

CARF-accredited organizations maintain accessible, healthy, safe, and clean environments through both external and internal safety reviews and personnel commitment to this philosophy.

Key Areas Addressed

- One annual external inspection
- Self-inspections twice a year
- Emergency procedures, including evacuation, tested/analyzed annually
- Access to emergency first-aid resources
- Competency of personnel in safety procedures
- Defined system for reporting/reviewing critical incidents
- Infection control plan
- Transportation requirements, if applicable

Recommendations

E.9.f.

E.9.i.

Although the organization had first aid kits and fire extinguishers in its vehicles, it was noted that, in some cases, they were not available for immediate access. It is recommended that the first aid supplies and fire extinguishers be placed in an area that allows for immediate access. First aid kits could be placed near the driver, and fire extinguishers could be mounted near the driver. A daily checklist should be used to ensure that the fire extinguishers are always in a charged state.

Consultation

- HSRSS operates an extensive fleet of vehicles. It is suggested that the emergency procedures to be followed in case of an accident be listed on a laminated three-by-five-inch index card, which could be placed on the driver's side sun visor for ease of access.

Criterion F. Human Resources

Principle Statement

CARF-accredited organizations demonstrate that they value their human resources. It should be evident that personnel are involved and engaged in the success of the organization and the persons they serve.

Key Areas Addressed

- Adequate staffing
- Verification of background/credentials
- Recruitment/retention efforts
- Personnel skills/characteristics
- Annual review of job description/performance
- Policies regarding students/volunteers, if applicable

Recommendations

F.5.d.(4)(a)

The performance evaluation system for employees does not specifically address performance related to objectives established in the last evaluation period. It is recommended that, during its performance evaluation process, the organization indicate how the employee performed relative to the goals and objectives established in the previous evaluation. Some performance evaluations were not signed. It is suggested that all relevant persons sign human resource documents.

Criterion G. Leadership

Principle Statement

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
 - Leadership guidance
 - Commitment to diversity
 - Corporate responsibility
 - Corporate compliance
-

Recommendations

G.4.d.(1)

G.4.d.(2)

It is recommended that policies and written procedures regarding waste, fraud, abuse, and other wrongdoing include a no reprisal approach for personnel reporting and a time frame to initiate an investigation.

Consultation

- It is suggested that HSRSS develop a written succession plan that identifies future leaders.
 - Five of the seven current board members are retired. The organization is encouraged to continue efforts to recruit members who will continue the organization's tradition of strong governance.
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Criterion H. Legal Requirements

Principle Statement

CARF-accredited organizations comply with all the legal and regulatory requirements of federal, state, provincial, county, and city entities.

Key Areas Addressed

- Compliance with all legal/regulatory requirements
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Recommendations

There are no recommendations in this area.

Criterion I. Financial Planning and Management

Principle Statement

CARF-accredited organizations strive to be financially responsible and solvent, conducting fiscal management in a manner that supports their mission, values, and annual 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

- Budget(s) prepared, shared, and reflective of strategic planning
 - Financial results reported/compared to budgeted performance
 - Organization review
 - Fiscal policies and procedures
 - Annual review of service billing records, if applicable
 - Review of fee structure, if applicable
 - Annual outside review/audit, if applicable
 - Written risk management plan
 - Adequate insurance coverage
 - Policies regarding safeguarding funds of persons served, if applicable
-

Recommendations

There are no recommendations in this area.

Consultation

- It is suggested that HSRSS add to its risk management plan the date when actions are completed and the person responsible.

- The organization is encouraged to investigate the possibility of initiating a business enterprise that could contribute to the bottom line.
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SECTION 2. QUALITY INDIVIDUALIZED SERVICES

A. Individual-Centred Service Planning, Design, and Delivery

Principle Statement

Improvement of the quality of an individual's services 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 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 are evident. The service environment reflects identified cultural needs, practices, and diversity. The person served is given information about the purposes of the organization.

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

A.18.a. through A.18.d.

Currently, the organization does not deny services to identified criminal offenders. It is recommended that HSRSS determine the specific requirements to be met to serve this population. Information should be provided to the person served concerning the relationship between the criminal justice entity and the organization. A release form could be developed for this purpose. A detailed history of the person's criminal history should be maintained as required by provincial authorities. Services should be coordinated with other systems as required with confidentiality maintained.

Consultation

- The organization does not currently require the signatures of the persons served or the authors on individual service plans. In order to validate the contract between both parties, it is suggested that both parties, as well as a guardian if available, sign the individual plan.
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B. Records of the Persons Served

Principle Statement

The organization maintains complete records and treats all information related to persons served as confidential.

Key Areas Addressed

- Complete, confidential records are maintained
-

Recommendations

There are no recommendations in this area.

F. Community Services Principle Standards

Key Areas Addressed

- Access to community resources and services
-

Recommendations

There are no recommendations in this area.

I. 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.

SECTION 4. COMMUNITY SERVICES

Principle Statement

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

E. Community Integration

Principle Statement

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 center, a day program, a clubhouse, and a drop-in center are examples of community integration services. Consumer-run programs are also included.

Community integration provides opportunities for the community participation of the persons served. The organization defines the scope of these services based on the identified needs and desires of the persons served. 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.

- Vocational pursuits.
- Development of work attitudes.
- Employment activities.
- Volunteerism.
- 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 centers, arts councils, etc.)

Key Areas Addressed

- Opportunities for community participation
-

Recommendations

There are no recommendations in this area.

H. Host Family Services

Principle Statement

Host family services are provided under a contract or agreement to provide a home for a person served, regardless of age. These placements tend to be long-term in nature.

Key Areas Addressed

- Temporary placement of participants in family settings outside the birth or adoptive family home
 - Supports and services established as needed
-

Recommendations

There are no recommendations in this area.

I. Respite Services

Principle Statement

Respite services facilitate access to time-limited, temporary relief from the ongoing responsibility of service delivery for the persons served, families, and/or organizations. Respite services may be provided in the home, in the community, or at other sites, as appropriate.

Key Areas Addressed

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

Recommendations

There are no recommendations in this area.

J. Community Housing

Principle Statement

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 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 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 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 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 intent to survey. These sites will be visited during the survey process and identified in the survey report and accreditation outcome as a site at which the organization provides a Community Housing program.

Key Areas Addressed

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

Recommendations

There are no recommendations in this area.

PROGRAMS/SERVICES BY LOCATION

Howe Sound Rehabilitation Services Society

#203 - 218 Blue Mountain Street
Coquitlam, BC V3K 4H2
Canada

Community Services: Community Housing
Community Services: Community Integration
Community Services: Host Family Services
Community Services: Respite Services

Blueridge House

2669 Standish Drive
North Vancouver, BC V7H 1M9
Canada

Community Services: Community Housing
Community Services: Community Integration

Windridge House

2209 Windridge Drive
North Vancouver, BC V7H 1B6
Canada

Community Services: Community Housing
Community Services: Community Integration

Kerrywood House

7782 Kerrywood Crescent
Burnaby, BC V7H 1M9
Canada

Community Services: Community Housing
Community Services: Community Integration

Windsong House

2823 Greenbriar Place
Coquitlam, BC V3E 2S4
Canada

Community Services: Community Housing
Community Services: Community Integration

Bear Creek House

13799 88th Avenue
Surrey, BC V3W 3L2
Canada

Community Services: Community Housing

Holly Park Home

14557 105A Avenue
Surrey, BC V3R 1S2
Canada

Community Services: Community Housing

Headway Centre, Community Leisure/Headway Centre Clubhouse and Drop-In Program

955 Brunette Avenue
Coquitlam, BC V3K 1E1
Canada

Community Services: Community Integration