



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

Loretta M. Rucchin, B.A., Director of Operations

Survey Dates

November 3-5, 2010

Survey Team

Jack L. Nichols, Administrative Surveyor

Jeff Lambert, Program Surveyor

Roberto M. Chavarria, Program Surveyor

Programs/Services Surveyed

- Community Services: Child and Youth Services
- Community Services: Community Housing
- Community Services: Community Housing (Children and Adolescents)
- Community Services: Community Integration
- Community Services: Host Family Services
- Community Services: Host Family Services (Children and Adolescents)
- Community Services: Personal Supports Services
- Community Services: Respite Services

Previous Survey

October 1-3, 2007
Three-Year Accreditation



Survey Outcome

Three-Year Accreditation
Expiration: **December 2013**

SURVEY SUMMARY

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

- HSRSS is an exceptional organization. Very high standards of operation are present in every aspect of administrative support. The governing body involved, leadership, and staff members are outstanding in their knowledge, commitment, and vision for the organization. Persons served are clearly at the centre of the HSRSS operations.
- Facilities of the organization are remarkable. They are beautiful, clean, well maintained, and integrated into the neighbourhood. The cleanliness and orderliness of sites are further complemented by the friendly and welcoming atmosphere that has been created for persons who enter the facilities. The environment created makes it clear that this organization values and respects its persons served and other stakeholders. Health and safety practices are well documented. The risk management plan is comprehensive and gives good guidance. Emergency plans include the development of sheds outside of organizational buildings that contain supplies such as blankets for use during an emergency evacuation in inclement weather. Trash containers have cleverly designed devices to keep out black bears.
- Commendably, the organization has prepared its accessibility plan around the needs of those served rather than itself. The document is comprehensive with time frames established and provisions for ongoing review. Accessibility planning includes an exceptionally well-developed architectural barriers inspection and reporting form.
- Performance goals have been established in each of the program areas. Performance against these goals is carefully and frequently tracked and analyzed. As a result of its analysis of performance results, the organization commendably seeks to answer the question, "What are these data telling us?" As a result, plans are established to improve performance, and this too is tracked and the information used.
- Human resource management is a strength of HSRSS. The same is true of financial management. In both of these aspects of operation, the leaders are talented and knowledgeable.
- Taken together, the administratively related aspects of operation clearly give good direction and support to the programs of the organization. There is a commitment to excellence in all areas.
- Person served, funding agencies, and referral sources express complete satisfaction with the quality of services provided by the organization.
- The organization's partnership with community behavioural consultants, Fraser Health Authority, and the brain injury organization is exceptional in providing the highest level of services for persons served.
- The organization has an exceptional screening process in selecting host and respite placement settings.
- The employees and contract staff are well trained and provide exceptional supports and services to the persons served by the organization.

- HSRSS has commendably developed a management team and direct services group of staff members who demonstrate a commitment to the mission of the organization. This is demonstrated by genuine respect and caring for the persons served. Management, direct service personnel, and support staff members are clearly conscientious and mindful of the responsibilities they have assumed for the populations and cultures they serve.
- The persons served are very satisfied with the services provided by the organization and with the dedication of the staff members to assist in meeting their needs.
- The organization appears to take a responsive approach to the needs of its communities, as evidenced by planning for expanded program sites to meet emerging service needs.
- The leadership actively invites and receives input from persons served, families, other stakeholders, and the public. These data are regularly used in performance improvement activities.
- HSRSS collaborates effectively on behalf of the persons served and is commended for its efforts of individual advocacy in maintaining a close working partnership with Fraser Health Authority.

Howe Sound Rehabilitation Services Society should seek improvement in the areas identified by the recommendations in the report. Consultation given does not indicate non-conformance to standards but is offered as a suggestion for further quality improvement.

On balance, HSRSS is an outstanding organization that provides a wide range of exceptionally high quality services. Leadership is excellent, and all staff members display a commitment to helping those served to achieve their goals. The organization is well regarded by those served, parents and guardians, and referral and funding sources. There are opportunities for improvement noted, but these are few in number and are scattered among different aspects of this fine operation. There is openness and a desire on the part of all present to maintain the organization at its present high level of operation, promising that present conditions will be maintained or improved over the foreseeable future.

Howe Sound Rehabilitation Services Society has earned a Three-Year Accreditation. Those involved with this fine organization, including those served, parents and guardians, host families, leadership, direct service employees, support staff members, funding and referral sources, and other stakeholders, can take justifiable pride in this accomplishment. Encouragement is offered to use the tenure of this accreditation term to promptly address the recommendations and to continue to maintain the high standards of quality of this organization.

SECTION 1. ASPIRE TO EXCELLENCE®

A. 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

There are no recommendations in this area.

C. Strategic Integrated Planning

Principle Statement

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

- Strategic planning considers stakeholder expectations and environmental impacts
 - Written strategic plan sets goals
 - Plan is implemented, shared, and kept relevant
-

Recommendations

There are no recommendations in this area.

D. Input from Persons Served and Other Stakeholders

Principle Statement

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

- 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.

E. Legal Requirements

Principle Statement

CARF-accredited organizations comply with all legal and regulatory requirements.

Key Areas Addressed

- Compliance with all legal/regulatory requirements
-

Recommendations

There are no recommendations in this area.

F. 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
 - Review of service billing records and fee structure
 - Financial review/audit
 - Safeguarding funds of persons served
-

Recommendations

There are no recommendations in this area.

G. Risk Management

Principle Statement

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

- Identification of loss exposures
 - Development of risk management plan
 - Adequate insurance coverage
-

Recommendations

There are no recommendations in this area.

H. Health and Safety

Principle Statement

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

- Inspections
 - Emergency procedures
 - Access to emergency first aid
 - Competency of personnel in safety procedures
 - Reporting/reviewing critical incidents
 - Infection control
-

Recommendations

H.1.

The organization maintains an exceptionally healthy and safe environment. However, although evacuation routing charts are posted in more than one of the organization's locations, they are posted on a cluttered bulletin board and on the exit door or in the binder of the person served. It is recommended that these charts be posted prominently in principal areas of occupancy and passage. It is suggested that care be taken to ensure that the location of the viewer is prominently displayed, distracting information is not presented on the chart, a limited number of routes of egress are displayed, and the charts are clearly visible.

Consultation

- The organization has a behavioural management training policy that allows employees six months to complete this training component. It is suggested that the organization revise this policy to provide that the behavioural management training be provided for all employees prior to working with any person served with a written behavioural support plan.
-

I. 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 descriptions/performance
 - Policies regarding students/volunteers, if applicable
-

Recommendations

There are no recommendations in this area.

Consultation

- The annual evaluation of those performing under contracts includes goals for the coming period; however, it appears that supervisors tend to ignore the sections for goals that the evaluation form already contains in favour of establishing more overarching goals at the close of the evaluation process. It is suggested that either the form be revised or the goal setting process in the evaluation be revised so that these are consistent.
-

J. Technology

Principle Statement

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

Key Areas Addressed

- Written technology and system plan
-

Recommendations

There are no recommendations in this area.

K. Rights of Persons Served

Principle Statement

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

- Communication of rights
 - Policies that promote rights
 - Complaint, grievance, and appeals policy
 - Annual review of complaints
-

Recommendations

There are no recommendations in this area.

Consultation

- Although the organization has a policy on abuse and neglect that addresses freedom from abuse, financial or other exploitation, retaliation, humiliation, and neglect, it is suggested that these rights be included in the handbooks for persons served.
-

L. 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.

M. Information Measurement and Management

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.

Key Areas Addressed

- Information collection, use, and management
 - Setting and measuring performance indicators
-

Recommendations

M.4.d.(3)

The organization is tracking results and, in fact, is routinely more than meeting its service performance goals; e.g., the goal is set at 70 percent achievement, but performance over the last four years might have been at the 90 percent level. It is recommended that the established performance goals be periodically reviewed so that they are relevant to actual experience in goal attainment.

N. Performance Improvement

Principle Statement

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

- Proactive performance improvement
 - Performance information shared with all stakeholders
-

Recommendations

N.3.a.

N.3.b.

Voluminous amounts of outcomes data are analyzed and reported. It is recommended that new formats be developed for presenting these results in ways that are more easily understandable and useful to persons served and personnel.

SECTION 2. QUALITY INDIVIDUALIZED SERVICES AND SUPPORTS

A. Program/Service Structure

Principle Statement

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
-

Recommendations

There are no recommendations in this area.

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

Principle Statement

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 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. 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

- Complete, confidential records are maintained
-

Recommendations

There are no recommendations in this area.

Consultation

- The strengths, abilities, and preferences of the person served are identified in the individual service plans, and the desired outcomes, culture background, and other issues developed by the referral source are covered in the case plans. It is suggested that all of this information be included in the individual service plans, or the case plans could be attached to the individual service plans.
-

C. Medication Monitoring and Management

Principle Statement

These standards apply only to programs that are responsible for monitoring and/or managing medications for the persons served.

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.

F. Community Services Principle Standards

Principle Statement

The standards in this subsection assert basic principles that should be demonstrated by any organization seeking accreditation in the area of community services.

Key Areas Addressed

- Access to community resources and services
-

Recommendations

There are no recommendations in this area.

G. Children and Adolescents Specific Population Designation

Community Services: Community Housing
Community Services: Host Family Services

Principle Statement

Children and Adolescents is a specific population designation that can be added at the option of the organization to a community service being surveyed if children or adolescents are served and the organization desires this additional accreditation enhancement.

Such services are tailored to the particular needs and preferences of children and adolescents and are provided in a setting that is both relevant to and comfortable for this population.

Key Areas Addressed

- Children, adolescents, and their families are provided with options
 - Social, vocational, psychological, and physical needs are met
-

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, services, and supports 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/supports they want or require that will meet their identified needs, and offers an array of services/supports 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/supports 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.

C. Child and Youth Services

Principle Statement

Child and youth services provide one or more services, such as prenatal counselling, service coordination, early intervention, prevention, preschool programs, and after-school programs. These services/supports may be provided in any of a variety of settings, such as a family's private home, the organization's facility, and community settings such as parks, recreation areas, preschools, or child day care programs not operated by the organization.

In all cases, the physical settings, equipment, and environments meet the identified needs of the children and youth served and their families. Families are the primary decision makers in the process of identifying needs and services and play a critical role, along with team members, in the process.

Key Areas Addressed

- Individualized services based on identified needs and desired outcomes
- Healthcare, safety, emotional, and developmental needs of child/youth

Recommendations

There are no recommendations in this area.

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

Community integration provides opportunities for the community participation of the persons served. The organization defines the scope of these services and supports based on the identified needs and desires of the persons served. This may include services for persons who without this option are at risk of receiving services full-time in more restrictive environments with intensive levels of supports such as hospitalization or nursing home care. A person may participate in a variety of community life experiences or interactions that may include, but are not limited to:

- Leisure or recreational activities
- Communication activities
- Spiritual activities
- Cultural activities
- 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 centres, 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

- Appropriate matches of non-family participants with homes
 - Contracts that identify roles, responsibilities, needs, and monitoring
 - Needed supports
-

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. An organization providing respite services actively works to ensure the availability of an adequate number of direct service personnel.

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/ 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 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.

S. Personal Supports Services

Principle Statement

Personal supports services are designed to provide instrumental assistance to persons and/or families served. They may also support or facilitate the provision of services or the participation of the person in other services/programs, such as employment or community integration services. The services are primarily delivered in the home or community and typically do not require individualized or in-depth service planning.

Key Areas Addressed

- Training for personnel
 - Supervision of personnel
 - Identification of supports provided by program
-

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: Child and Youth Services
Community Services: Community Integration
Community Services: Host Family Services
Community Services: Host Family Services (Children and Adolescents)
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: Host Family Services

Holly Park Home

14557 105A Avenue
Surrey, BC V3R 1S2
Canada

Community Services: Community Housing

New Westminster Headway Centre, Community Leisure and Drop-In Program

319 Columbia Street
New Westminster, BC V3L 1A7
Canada

Community Services: Personal Supports Services

Queensbury House

739 East Fourth Avenue
North Vancouver, BC V7L 1K1
Canada

Community Services: Community Housing (Children and Adolescents)

Mountain View

5974 Main Street
Vancouver, BC V5W 273
Canada

Community Services: Community Housing (Children and Adolescents)

Vancouver Headway Centre

1600 West Sixth Avenue, Suite 320
Vancouver, BC V6J 1R3
Canada

Community Services: Personal Supports Services

Honorita Supportive Housing

4885 Heather Street
Vancouver, BC V5Z 0B3
Canada

Community Services: Personal Supports Services

Liberty Place Assisted Living

7899 17th Avenue
Burnaby, BC V3N 1M1
Canada

Community Services: Personal Supports Services

Freedom Place Assisted Living

10342 148th Street
Surrey, BC V3R 3X3
Canada

Community Services: Personal Supports Services