

**CARF  
Survey Report  
for  
Central Alberta  
Residence Society**

**Organization**

Central Alberta Residence Society  
5589 - 47th Street, Unit 101  
Red Deer AB T4N 1S1  
CANADA

**Organizational Leadership**

Miriam Kaye, Executive Director

**Survey Dates**

September 28-30, 2016

**Survey Team**

William Sandonato, M.R.A., Administrative Surveyor

Diane D. Nunn, M.S., B.A., Program Surveyor

Kathryn M. Smallen, M.Ed., Program Surveyor

**Programs/Services Surveyed**

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

**Previous Survey**

September 18-20, 2013  
Three-Year Accreditation

**Survey Outcome**

**Three-Year Accreditation**  
**Expiration: October 31, 2019**



**Three-Year Accreditation**

# SURVEY SUMMARY

## Central Alberta Residence Society (CARS) has strengths in many areas.

- CARS is acknowledged for providing services to the community for more than four decades. Its longevity is attributed to being attuned to emerging and changing needs in the large area where it has proven to be a responsive and resilient organization.
- The organization provides supports and services to more than 85 individuals and employs approximately 150 staff members, is highly regarded for the quality of its services, and is seen as a significant community resource.
- The board of directors is commended for its leadership and dedication to the organization. Although small in number, it appears to meet its governance and fiduciary responsibilities, its obligations to be representative of community needs, and the many other ways that board members support the organization. Board members express that it is a privilege to be associated with CARS.
- The executive director appears to have the respect of the staff members and the other stakeholders. She is well regarded in the community within the service delivery field and is recognized for her expertise and her vision. An already well-respected organization continues to adapt, change, and become stronger under her leadership.
- The leadership team is experienced, dedicated, and committed to the needs of individuals served; is supportive of change; and appears to work well as a cohesive, mission-focused team. There is a good balance of experienced staff members and newer team members with additional perspectives.
- CARS is recognized for the thoroughness of the process utilized in developing the strategic and operational plans. The resulting plans are useful and relevant tools to guide the organization's strategic and tactical development.
- Leadership is applauded for its commitment to provide resources and education for personnel to stay current in the field in order to demonstrate program strategies and interventions that are evidence based. Of note is the commitment to empowering the individuals served by having many staff members participate in Social Role Valorization training and the culture change it has incubated regarding having the individuals served accessing the same good things enjoyed in life by everyone.
- The health, safety, and well-being of the individuals served and personnel are strong organizational values, as evidenced in policy and practice. A safety committee takes its responsibilities very seriously, and an excellent safety binder is readily available at all locations. Of particular note is the availability of an accompanying plain language binder to ensure that safety practices are understood by all.
- The homes of individuals served are attractive, well maintained, and located in neighbourhoods in the community. The overall cleanliness of the homes is recognized. It is evident that the individuals served who live there and their staff members take pride in the homes. Each individual served selects how he/she will decorate his/her room. The records, medications, and other business materials are kept in such a manner that they are not intrusive to the home atmosphere.

- The staff members are responsive to the needs of the individuals served and their family members/guardians. This has fostered a level of trust among them that enhances the quality of life of individuals served.
- CARS is complimented for the extensive changes in the community access program that have taken place since the previous CARF International survey. In the past, the program was provided Monday through Friday from 9:00 to 5:00, but services are now flexible, individualized, responsive, and value driven. There are no longer meetings of large groups of individuals served, but instead individuals served and their friends, typically no more than three, meet and participate in activities that they choose. Staff members encourage the individuals served to try new things to enhance their lives. The individuals served develop calendars with the assistance of staff members. This ensures that the individuals served are prepared to participate in the activity of their choice.
- Of particular note is the “What I Want to Do This Year” document in the individual service plan. This tool is driven by the desires of individuals served and is presented with pictures and written descriptions. The development of this concept and inclusion in the plan further emphasizes the importance that the organization places on individual-focused services. The organization also included a section called “At a Glance,” which is a quick reference guide to important medical, program, and personal information on each individual served. This allows for an efficient way to relay information to staff members that help support the individuals served.
- There is a high level of satisfaction with the services provided by the organization. The individuals served, their families, guardians, and funders consistently spoke of the value of the services and of the dedication and skill of the staff members and administration. It is evident that input from all stakeholders is valued and utilized by the organization for continuous quality improvement.
- The staff members are congratulated for their dedication to the individuals served, the passion they have for their jobs, and the positive relationships they have developed with the individuals served and their families. Many long-term relationships have been formed, which provides stability to the services provided to the individuals served.
- The individuals served in the individual support team program are supported by staff members and management that truly embrace the concept of living interdependently. This philosophy has created supports that encourage the individuals served to live on their own with supports available from staff members and natural supports to the degree necessary for the individuals served to reach their full potential. Supports needed are constantly evaluated by the individual support team and tailored to meet the changing needs of the individual served. This has created a high quality of life for the individuals served.
- CARS has positively changed its focus in providing supports to individuals served who have challenges in the ways they react to certain circumstances. This is evidenced by the change in terms from *behavior consultant* to *proactive strategies facilitator* and it is clearly the focus in all of the plans. The plans are self-directed by the individuals served and provide a quality road map for their support.
- The office staff members have made it easier for the individuals served to access them personally while in the office area by posting their pictures outside each office. This provides a visual cue so that the office staff members can be found independently.
- Respite services provided in individual homes are provided by persons who have maintained a long-term relationship with the individual served. This allows for a smooth transition from the proprietor to the respite provider and a continuation of the quality supports.

- The host family/shared living program has proprietors who have had long-term relationships with the individuals served. The homes are attractive and well maintained. The bedrooms of individuals served reflect their personality and likes. The atmosphere in the homes is one of family instead of a job. These relationships are important to the individuals served, the proprietors, and the family members of both.

**In the following area CARS demonstrates exemplary conformance to the standards.**

- The organization is lauded for placing an extraordinary value on supporting individuals served to develop and enhance their self-advocacy skills and taking charge of their own lives as citizens of their communities. The leadership and advocacy (LA) council's purpose is to help build the best quality of life for the individuals served. Each individual served is respected and their input is important to the organization, as evidenced by their inclusion on the management team and by occupying a designated office where they conduct their business. Furthermore, CARS pays the members of the council when they provide training workshops to staff members and their peers in such topics as "Rights, Roles and Responsibilities," "Medication Information and Safety," "Just Say No to Abuse," "Stand Up for Your Rights," "Make Choices and Be Responsible," and "New Employee Orientation." Three of the five workshops are also offered to others in the community. In addition to the involvement of individuals served at CARS, the LA council participates in many groups and are advocates for persons in the central Alberta area and beyond, including Central Alberta Advocacy Network, Albertans Advocating for Change Together, and the Provincial Self-Advocate Advisory Committee. The advocates have created a handbook that is easily understood by the membership and gives them important information regarding the council, its make-up, and activities. It is important to the LA council for all of its members to fully participate in activities. In addition to written agendas, this is facilitated by picture labels that match the committees and activities of the council. This practice has enabled all members to fully participate as they desire in the meetings. The LA council has experienced many successes as a result of its advocacy. Of note is the addition of the bus stop in a location close to the CARS office.

**CARS should seek improvement in the area(s) identified by the recommendation(s) in the report. Any consultation given does not indicate non-conformance to standards but is offered as a suggestion for further quality improvement.**

On balance, CARS has a positive presence in the community and a long and respected history of service. The organization demonstrates that the services provided are of high quality and that sound business practices are in place to support program activities. There are many examples of how leadership ensures that personnel are aware of and utilize evidence-based practices in the provision of person-centred and responsive activities. Funding and referral sources, parents/family members, guardians, and individuals served express satisfaction with the services provided and recognize the hard work of the staff members. Although there are a few recommendations noted, the receptivity of the organization to the recommendations and consultation and its strong and evident commitment to continuous quality improvement provide every confidence that these areas will be addressed in a timely manner.

Central Alberta Residence Society has earned a Three-Year Accreditation. The organization is commended for its highly regarded services, its strong leadership, dedicated and knowledgeable staff members, and its implementation of the CARF standards as a means of ensuring continued quality

improvement. The organization is encouraged to continue to utilize the CARF standards as a framework in responding to emerging needs and in providing opportunities to the individuals served that are of value and of the highest quality.

## **SECTION 1. ASPIRE TO EXCELLENCE<sup>®</sup>**

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

#### **Recommendations**

There are no recommendations in this area.

#### **Consultation**

- The organization is recognized for taking actions to strengthen its leadership structure by reorganization and bringing on well-qualified staff members to fill key roles. It is suggested that vacant leadership positions be addressed and continued analysis of how to even further increase organizational efficiency and effectiveness be considered.
- Leadership is cognizant of the nexus between the number of individuals served who are aging and the increased access and safety challenges presented by older homes. CARS is further encouraged to continue to consider this relationship.

- The organization has developed a good process for identifying issues related to culture and diversity and has moved forward in implementing actions that have been recognized. In the development of future plans, it is suggested that some specific training and activities be considered to address issues that might further expand the knowledge of staff members and the individuals served around specific areas of diversity as may be identified or emerging in the organizational demographics of the individuals served, personnel, or the community.
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## **B. Governance**

### **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 composition, selection, orientation, development, assessment, and succession
  - Board leadership, organizational structure, meeting planning, and management
  - Linkage between governance and executive leadership
  - Corporate and executive leadership performance review and development
  - Executive compensation
- 

### **Recommendations**

#### **B.2.f.(3)**

#### **B.2.g.(2)(a) through B.2.g.(2)(c)**

Governance policies should address board structure, including definition of independent, unrelated board representation; and board performance, including use of external resources, including, as applicable, external auditors, executive compensation advisors, and other advisors, as needed. The

definition could be included in a job description developed for board members. The intent of the policy is to ensure that there are protections for board members and the organization regarding any allegations of inappropriate influence.

**B.6.a.**

Governance policies should address executive compensation, including a written statement of total executive compensation philosophy. It is suggested that the board develop a written format in which compensation arrangements with the executive director are documented.

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## **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**

- 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.

### **Consultation**

- CARS is encouraged to utilize its website as a means to share its strategic objectives and progress toward achieving them with its stakeholders. The objectives could be summarized to ensure that no sensitive or privileged information is included.
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## **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**

- 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.

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## **E. Legal Requirements**

### **Description**

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

### **Key Areas Addressed**

- Compliance with all legal/regulatory requirements
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### **Recommendations**

There are no recommendations in this area.

### **Consultation**

- It is suggested that the procedures related to responding to subpoenas include leadership's direction as to what a staff member at one of its homes is expected to do if delivery of a subpoena for the organization occurs.
- 

## **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 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
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### **Recommendations**

There are no recommendations in this area.

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## **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**

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

### **Recommendations**

There are no recommendations in this area.

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## **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

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

## Recommendations

### H.13.a.(1) through H.13.b.(3)

The organization's licensed homes receive a comprehensive inspection annually from the licensing authority. In that CARS also operates residential settings that do not require licensing, it is recommended that a comprehensive health and safety inspection be conducted at least annually by a qualified external authority that results in a written report that identifies the areas inspected, recommendations for areas needing improvement, and actions taken to respond to the recommendations.

### H.14.a. through H.14.b.(3)

It is recommended that comprehensive health and safety self-inspections be consistently conducted at least semi-annually on each shift and result in a written report that identifies the areas inspected, recommendations for areas needing improvement, and actions taken to respond to the recommendations. It is suggested that a customized checklist be developed and utilized to facilitate the inspection process. Individuals residing in the homes could be included in conducting health and safety inspections.

## Consultation

- The organization is encouraged to include specific guidance related to addressing an active shooter situation in its procedures related to violent or threatening situations.
- It is suggested that evacuation route signage in the office building be lowered to enable routes to be easily identified by a person using a wheelchair for mobility.
- Several of the exit routes lead to doors that open to a several inch step-down or an area where a wheelchair could not easily navigate, due to landscaping, when utilizing that exit route. It is suggested that these possible impediments be eliminated or addressed in evacuation plan contingencies.
- Although driving records are reviewed every three years, it is suggested that the organization consider reviewing driving records annually.
- With the organization's significant level of reliance upon staff members utilizing their personal vehicles to transport the individuals served, it is suggested that a process be developed to ascertain that safety features and equipment are available and in working order in personal vehicles at the time of initial utilization and periodically while the vehicle remains in use for transport.

- Organizational policy states that employees transporting the individuals served must have a personal mobile phone and will use it in an emergency. However, to mitigate against the possibility that a phone may be forgotten, out of minutes, or not available for some other reason, it is suggested that the policy be revised to state that a loaner phone can be accessed. This could be accomplished by having phones available for sign out.
  - To ensure that first aid supplies are available in personal vehicles when transporting the individuals served, it is suggested that that first aid supplies be provided in to-go bags, even if the driver indicates they have a personal one in his or her vehicle.
  - It is suggested that safety data sheets (SDS) be kept current and easily accessible for all chemicals and cleaning supplies stored at the 47th Street administrative offices.
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## **I. Human Resources**

### **Description**

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
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### **Recommendations**

#### **I.5.a.(1)**

#### **I.5.a.(2)**

#### **I.5.b.(4)**

Although diversity training is available as a selection for ongoing education, CARS should provide documented personnel training at orientation and at regular intervals that addresses diversity.

### **Consultation**

- It is suggested that a more formal analysis of turnover in direct care positions be conducted periodically to ascertain if there are any trends that could result in plans for improvement.

- The organization has made a commitment to strengthening its human resources function by creating and filling a new position with a qualified professional. Although new systems and processes are being explored and integrated into CARS' business practices, leadership is encouraged to continue to support these efforts, including consistent annual performance evaluations that set clear objectives for each employee.
  - Objectives are established for personnel at the time of annual performance evaluations, and the success on prior objectives are generically listed in a section called "Accomplishments." It is suggested that prior year objectives be listed on the evaluation forms and performance on the objectives be specifically assessed. Some additional training for supervisors on developing specific, measurable, achievable, realistic, and time-bound (SMART) objectives could be helpful.
  - The organization is encouraged to continue its exploration of appropriate systems and software to prepare payroll and to support and integrate human resources functions to increase efficiency and effectiveness.
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## **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**

- Written technology and system plan
  - Written procedures for the use of information and communication technologies (ICT) in service delivery, if applicable
  - Training for personnel, persons served, and others on ICT equipment, if applicable
  - Provision of information relevant to the ICT session, if applicable
  - Maintenance of ICT equipment in accordance with manufacturer recommendations, if applicable
  - Emergency procedures that address unique aspects of service delivery via ICT, if applicable
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### **Recommendations**

There are no recommendations in this area.

### **Consultation**

- The organization is encouraged to continue its efforts to expand its use of technology to support performance improvement and business functions and explore the use of apps in its technology and systems plan for smart phones and tablets to assist the individuals served in meeting their plan objectives and enhancing quality-of-life factors.
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## **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**

- 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 CARS handbook is designed to be understood by all of the individuals served, the organization may want to expand its use of pictures and graphics to further enhance the explanation of rights of individuals served.
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## **L. Accessibility**

### **Description**

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

### **Key Areas Addressed**

- Written accessibility plan(s)
  - Requests for reasonable accommodations
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### **Recommendations**

There are no recommendations in this area.

### **Consultation**

- Although accessibility plans are reviewed, updated quarterly, and include progress reports and areas still needing improvement, it could be helpful to also prepare an annual summary that aggregates information from the quarterly reports.

- Given that the building that houses the administrative offices is in a redevelopment area and has caused some issues regarding access, it is suggested that short-term reasonable accommodations be considered. It is further suggested that the organization work with the building's ownership where the offices are located to ensure accessibility compliance regarding parking spaces, entrances, etc.
  - Although the organization maintains annual files of requests for reasonable accommodations, the only ones that are tracked involve adjustment in work schedules. It is suggested that other requests, such as those involving a workstation accommodation, be logged, tracked, and analyzed for any trends.
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## **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**

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

### **Recommendations**

#### **M.1.a. through M.1.d.**

It is recommended that the organization develop a written description of its performance measurement and management system that includes, at a minimum, mission, programs/services seeking accreditation, objectives of the programs/services seeking accreditation, and personnel responsibilities related to performance measurement and management. This written description might provide the context for program management and measurement activities and can be used to educate personnel and other stakeholders. In developing its performance management system, the organization may want to include how it ensures reliability, validity, completeness, and accuracy of data.

#### **M.6.a. through M.6.b.(4)(b)**

Although performance indicators have been established for business function improvement and service delivery as part of the establishment of organizational objectives, it is recommended that the organization measure business function performance indicators and service delivery performance indicators for each program/service seeking accreditation in each of the following areas: the effectiveness of services, the efficiency of services, service access, and satisfaction and other feedback from individuals served and other stakeholders.

### **M.7.a. through M.7.d.**

For each service delivery performance indicator, the organization should determine to whom the indicator will be applied; the person(s) responsible for collecting the data; the source from which data will be collected; and a performance target based on an industry benchmark, based on the organization's performance history, or established by the organization or other stakeholder.

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## **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**

- Proactive performance improvement
  - Performance information shared with all stakeholders
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### **Recommendations**

#### **N.1.a. through N.1.c.(3)**

A written analysis should be completed at least annually that analyzes performance indicators in relation to performance targets, including business functions; service delivery of each program seeking accreditation, including the effectiveness of services, the efficiency of services, service access, and satisfaction and other feedback from individuals served and other stakeholders; and extenuating or influencing factors. In addition, the written analysis should identify areas needing performance improvement, result in an action plan to address the improvements needed to reach established or revised performance targets, and outline actions taken or changes made to improve performance.

### **Consultation**

- The organization could consider publishing a year-end compilation of results and opportunities, including performance information. Formatted as a "Report to the Community" and available on the website and in printed formats, as appropriate, in addition to further transparency, such a document can be a useful marketing tool.
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## **SECTION 2. QUALITY INDIVIDUALIZED SERVICES AND SUPPORTS**

### **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
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#### **Recommendations**

There are no recommendations in this area.

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### **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
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## **Recommendations**

### **B.5.b.(2)**

### **B.5.b.(3)**

As recommended in the previous CARF survey report, CARS is urged to ensure that all individual service plans have specific measurable objectives and identify the methods/techniques to be used to achieve the objectives

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## **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
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### **Recommendations**

There are no recommendations in this area.

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## **F. 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
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#### **Recommendations**

There are no recommendations in this area.

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## **SECTION 3. EMPLOYMENT AND COMMUNITY SERVICES**

### **Description**

An organization seeking CARF accreditation in the area of employment and 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.
- Employment obtained and maintained.
- Competitive employment.
- Employment at or above minimum wage.
- Economic self-sufficiency.
- Employment with benefits.
- Career advancement.

## **J. Family-Based/Shared Living Supports**

### **Host Family/Shared Living Services**

#### **Description**

Host family/shared living services assist a person served to find a shared living situation in which he or 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 or 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**

### **J.24.a.(3)**

Currently, the organization monitors the performance of host providers annually. It is recommended that the organization implement a procedure for monitoring the performance expectations of the provider that takes place every six months, unless the individual situation merits more frequent monitoring.

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## **K. Community Housing**

### **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.

Some examples of the quality results desired by the different stakeholders of these services/supports include:

- Safe housing.
- Persons choosing where they live.
- Persons choosing with whom they will live.
- Persons having privacy in their homes.
- Persons increasing independent living skills.
- Persons having access to the benefits of community living.
- Persons having the opportunity to receive services in the most integrated setting.
- Persons' rights to privacy, dignity, respect, and freedom from coercion and restraint are ensured.
- Persons having the freedom to furnish and decorate their sleeping or living units as they choose.
- Persons having freedom and support to control their schedules and activities.
- Settings that are physically accessible to the individuals.

### **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

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## Recommendations

There are no recommendations in this area.

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## L. Supported Living

### 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. Although the residence will generally be owned, rented, or leased by the person who lives there, the organization may occasionally rent or lease an apartment when the person served is unable to do so. Typically, in this situation the organization would co-sign or in other ways guarantee the lease or rental agreement; however, the person served would be identified as the tenant.

Supported living programs may be referred to as supported living services, independent living, supportive living, semi-independent living, and apartment living; and services/supports may include home health aide and personal care attendant services. Typically, there would not be more than two or three persons served living in a residence, no house rules or structure would be applied to the living situation by the organization, and persons served can come and go as they please. Service planning often identifies the number of hours and types of support services provided.

Some examples of the quality results desired by the different stakeholders of these services/supports include:

- Persons served achieving choice of housing, either rent or ownership.
- Persons served choosing whom they will live with, if anyone.
- Minimizing individual risks.
- Persons served have access to the benefits of community living.
- Persons served have autonomy and independence in making life choices.

### Key Areas Addressed

- Safe, affordable, accessible housing chosen by the individual
- In-home safety needs
- Support personnel available based on needs

- Supports available based on needs and desires
  - Living as desired in the community
  - Persons have opportunities to access community activities
- 

### **Recommendations**

There are no recommendations in this area.

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## **M. Respite Services**

### **Description**

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.

Some examples of the quality results desired by the different stakeholders of these services/supports include:

- Services/supports are responsive to the family's needs.
- Services/supports are safe for persons.
- Services/supports accommodate medical needs.

### **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.

### **Consultation**

- It is suggested that the respite room that is a part of the 57th Street home be decorated in a way that makes the individuals' home feel more welcoming. This could be done through the addition of pictures on the walls, lighting, and gender-neutral décor.
-

## **P. Community Integration**

### **Description**

Community integration is designed to help persons to optimize their personal, social, and vocational competency to live successfully in the community. Persons served are active partners in determining the activities they desire to participate in. Therefore, the settings can be informal to reduce barriers between staff members and persons served. An activity centre, a day program, a clubhouse, and a drop-in centre are examples of community integration services. Consumer-run programs are also included.

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

- Leisure or recreational activities.
- Communication activities.
- Spiritual activities.
- Cultural activities.
- Pre-vocational experiences.
- Vocational pursuits.
- Volunteerism in the community.
- Educational and training activities.
- Development of living skills.
- Health and wellness promotion.
- Orientation, mobility, and destination training.
- Access and utilization of public transportation.
- Interacting with volunteers from the community in program activities.
- Community collaborations and social connections developed by the program (partnerships with community entities such as senior centres, arts councils, etc.).

Some examples of the quality results desired by the different stakeholders of these services include:

- Community participation.
- Increased independence.
- Increased interdependence.

- Greater quality of life.
- Skill development.
- Slowing of decline associated with aging.
- Volunteer placement.
- Movement to employment.
- Centre-based socialization activities during the day that enable persons to remain in their community residence.
- Activity alternatives to avoid or reduce time spent in more restrictive environments, such as hospitalization or nursing home care.

### **Key Areas Addressed**

- Opportunities for community participation
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### **Recommendations**

There are no recommendations in this area.

### **Exemplary Conformance**

#### **P.2.e.(6)**

The organization is lauded for placing an extraordinary value on supporting individuals served to develop and enhance their self-advocacy skills and taking charge of their own lives as citizens of their communities. The LA council's purpose is to help build the best quality of life for the individuals served. Each individual served is respected and their input is important to the organization, as evidenced by their inclusion on the management team and by occupying a designated office where they conduct their business. Furthermore, CARS pays the members of the council when they provide training workshops to staff members and their peers in such topics as "Rights, Roles and Responsibilities," "Medication Information and Safety," "Just Say No to Abuse," "Stand Up for Your Rights," "Make Choices and Be Responsible," and "New Employee Orientation." Three of the five workshops are also offered to others in the community. In addition to the involvement of individuals served at CARS, the LA council participates in many groups and are advocates for persons in the central Alberta area and beyond, including Central Alberta Advocacy Network, Albertans Advocating for Change Together, and the Provincial Self-Advocate Advisory Committee. The advocates have created a handbook that is easily understood by the membership and gives them important information regarding the council, its make-up, and activities. It is important to the LA council for all of its members to fully participate in activities. In addition to written agendas, this is facilitated by picture labels that match the committees and activities of the council. This practice has enabled all members to fully participate as they desire in the meetings. The LA council has experienced many successes as a result of its advocacy. Of note is the addition of the bus stop in a location close to the CARS office.

## **Consultation**

- The LA council provides an excellent way for the individuals served to develop and increase self-advocacy. Although the council is very active and has experienced many successes, the council may want to consider engaging in some formalized planning as it develops its future goals.
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# PROGRAMS/SERVICES BY LOCATION

## **Central Alberta Residence Society**

5589 - 47th Street, Unit 101  
Red Deer AB T4N 1S1  
CANADA

Community Integration  
Host Family/Shared Living Services  
Respite Services  
Supported Living  
*Governance Standards Applied*

## **57th Ave Home**

5702 - 35th Street  
Red Deer AB T4N 0S6  
CANADA

Community Housing

## **Chad's Place**

5333 - 46th Avenue  
Red Deer AB T4N 4N4  
CANADA

Community Housing

## **Donlevy**

33 Donlevy Avenue, Unit 115  
Red Deer AB T4R 3B6  
CANADA

Community Housing

## **Doreen's Place**

4302 - 47th Street  
Red Deer AB T4N 1P5  
CANADA

Community Housing

**Lister**

53 Lister Crescent  
Red Deer AB T4R 2S6  
CANADA

Community Housing

**Village**

30 Village Crescent  
Red Deer AB T4R 0P3  
CANADA

Community Housing

**Webster I**

299 Webster Drive  
Red Deer AB T4N 2J8  
CANADA

Community Housing

**Webster II**

327 Webster Drive  
Red Deer AB T4N 2J8  
CANADA

Community Housing

**Wells**

21 and 23 Wells Street  
Red Deer AB T4N 5Y2  
CANADA

Community Housing

**Westpark**

5870 - 38th Street Close  
Red Deer AB T4N 0X8  
CANADA

Community Housing  
Respite Services