Three-Year Accreditation

CARF
Survey Report
for

posAbilities
Association of British
Columbia

Organization

posAbilities Association of British Columbia
4664 Lougheed Highway, Unit 240
Burnaby, BC   V5C 5T5
Canada

Organizational Leadership

Fernando Coelho, Chief Executive Officer

Three-Year Accreditation

Survey Dates

February 21-23, 2012

Survey Team

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Programs/Services Surveyed

Behavioural Consultation Services
Community Housing
Community Integration
Host Family Services
Respite Services
Supported Living

Community Employment Services: Job Development

Previous Survey

August 13-15, 2008
Three-Year Accreditation

Survey Outcome

Three-Year Accreditation
Expiration: April 2015

SURVEY SUMMARY

posAbilities Association of British Columbia has strengths in many areas.

- posAbilities has a high level of sensitivity for using plain language and visual images to display organizational information in an understandable format for all stakeholders.

- The organization enjoys a positive reputation and relationship with Community Living British Columbia (CLBC).

- posAbilities is recognized for its innovation in piloting the community connection initiative, connecting persons served with natural community supports in the same way it connects persons served with natural supports in the workforce.

- The organization has done a remarkable job of adjusting to significant funding reductions through reorganization. With fewer staff persons, posAbilities has utilized innovative ways to provide services to the same number of persons served.

- The organization has made a commitment to utilizing technology to gain efficiencies and service effectiveness by adopting a new electronic record-keeping system.

- The organization is complimented for producing attractive, meaningful, and informative brochures and a website portraying persons served with dignity and respect while accurately portraying the services and successes offered by posAbilities.

- The organization's staff persons are enthusiastic, caring, and compassionate in their work. The relationships developed with the persons served provide the foundation for the individualized approaches used in service delivery.

- Persons served in the community housing program are able to actualize their desire for community employment through the endeavors and support of their respective residential staff persons.

- The newly implemented posAbilities employment service program is well designed with thoroughly developed policies and procedures. The program does well with providing support to staff persons and to persons served in the transition to community employment.

- The homes of persons served are located in residential neighbourhoods that blend in well with the surrounding areas, appear well maintained and comfortable, and provide a pleasant environment for persons served. Persons served actively participate in making choices in the homes such as paint colours, furniture, window treatments, and individualized decorations in the bedrooms.

- posAbilities staff members demonstrate commitment to promoting personal and systems advocacy through their efforts to strengthen involvement of the persons in advocacy groups. These efforts have included mechanisms to help persons served remain current on issues relative to persons with disabilities and connecting persons served with self-advocacy groups as well as self-advocacy efforts directly supported by the organization.

- posAbilities leadership is complimented for the utilization of evidence-based practices to drive program development decisions in behaviour support services as well as for recent efforts to improve the educational level, qualifications, and professional certification of staff persons working as behaviour consultants. The leadership team is complimented for the recent adoption of the evidence-based practice of "Triple P" (Positive Parenting Program) within the behaviour consulting services. A number of behaviour consultants have been trained and certified. posAbilities also is complimented for proactively supporting staff members who are behavioural consultants to achieve nationally recognized certification in applied behaviour analysis.

- The Stage Door Theatre community inclusion program provides a unique, creative, and artistic opportunity for persons served to access non-disability-related social resources, develop interpersonal relations, and build skills in theatre and video productions.

- Host families possess multiple skill sets and are well matched to the needs of persons served.

- Host families are well monitored and appropriately located throughout the community. Persons served have personal space and choice in what happens in the homes and how they participate in the community.

- The supported living services program continues to provide support to persons served to be successful members within their communities. Although the program recently has shown great growth, it continues to provide individualized supports.

posAbilities 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, posAbilities demonstrates substantial conformance to the CARF standards and an excellent framework for continuous quality improvement. posAbilities is complimented for its efforts to further improve service effectiveness and efficiency through the upcoming implementation of a new electronic documentation system. Although recommendations are identified in this report, they do not appear to pose a risk of harm to persons served, staff members, or other stakeholders. The organization demonstrates commitment and appears to have the resources, leadership, desire, and ability to address the recommendations detailed in this report.

posAbilities Association of British Columbia has earned a Three-Year Accreditation. The board and staff members are complimented for the positive efforts made in pursuit of accreditation and encouraged to continue to use the CARF standards as guidelines for continuous quality improvement.

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
A.5.a.(4)(b)(iii) through A.5.a.(4)(d)
A.5.a.(4)(f)

Although the organization has a conflict-of-interest policy that addresses the exchange of gifts, it is recommended that it expand its written ethical codes of conduct policy to address the exchange of gratuities, personal fundraising, personal property, and the witnessing of documents.

Consultation

- The organization has a procedure for reporting and investigating ethical code of conduct violations and a statement of no reprisal for personnel reporting. It is suggested that it include the no-reprisal statement for personnel who report suspected violations in the investigation procedure.

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
C.2.c.(1) through C.2.d.

The organization has completed its strategic planning process for its 2012 through 2015 plan, identifying strategic goals and directives based on input from stakeholders and its financial position, but it has not yet completed the operational portion of the plan with management setting and prioritizing the goals for the first, second, and third years of the plan. The organization plans to complete this step in April 2012. It is recommended that the organization finalize its process for formally setting goals and priorities and ensuring that the written plan for 2012 through 2015 is fully implemented.

C.3.a. through C.3.c.

Once the operational portion of the written strategic plan for 2012 through 2015 is finalized, it is recommended that posAbilities share the plan with persons served, personnel, and other stakeholders, as relevant to the needs of each group.

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.

Consultation

- The organization currently obtains input from the persons served with the assistance of staff members. posAbilities is encouraged to enhance this input by using a program-specific survey that is written in language that is easily understood by children, adolescents, and adults with special needs.

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.

Consultation

■ The organization may want to consider adding the person responsible and a status or update column to its risk management plan.

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

There are no recommendations in this area.

Consultation

- The organization may want to consider conducting tests of emergency procedures with persons served while they are involved in community-based activities.

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
I.6.a.(1)

Although the organization demonstrates that some of its job descriptions are reviewed annually, it is recommended that it review all job descriptions annually. It is suggested that the organization consider placing established dates, review dates, and modification dates directly on each job description to record the evolution of each job description.

I.6.d.(4)(a) through I.6.d.(5)

Although posAbilities has an expansive performance evaluation process, it is recommended that it assess performance related to objectives established in the last evaluation period and establish measurable performance objectives for the next year. Performance evaluations should be performed annually for all persons directly employed by the organization. Although the organization demonstrated that staff persons participated in their performance evaluations, it is suggested that staff persons provide input into their performance goals in an effort to further engage staff persons in the review process.

Consultation

■ Although the organization has done a good deal of training as a part of the reorganization with supervisors and managers, it is suggested that it continue this process to further enhance and support the transition.

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.

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
L.1.a.(1) through L.1.b.(9)(c)

Although the organization is sensitive to accessibility issues, it is recommended that it develop a written accessibility plan assessing the needs of persons served, personnel, and other stakeholders. The organization should implement an ongoing process for identification of barriers related to architecture; environment; attitudes; finances; employment; communication; transportation; community integration, when appropriate; and any other barrier identified by persons served, staff persons, or other stakeholders.

L.2.a.
L.2.b.

It is recommended that the organization's accessibility plan include actions to be taken and time lines.

L.3.a. through L.3.c.(2)

It is recommended that the accessibility plan be prepared annually, be in writing, and include progress made in the removal of identified barriers and areas for improvement.

Consultation

■ It is suggested that the organization ensure that all entrances and exits are accessible at all service locations.

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.3.c.(2)

It is recommended that the organization identify accessibility data to be collected that will assist in measuring performance in this area.

M.4.b.(4)

The organization does not collect data on persons served following services. It is recommended that it develop a process to initiate collection of data at point(s) in time following services.

M.4.c.(1) through M.4.c.(3)

Although the organization recently developed measures for indicators in the effectiveness of services, the efficiency of services, and service access, the organization has not included the information in its data collection system. It is recommended that the organization's data collection system have measures for indicators for the effectiveness of services, the efficiency of services, and service access.

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.1.b.(2)(a) through N.1.b.(2)(c)

The organization has collected service delivery data related to the effectiveness and efficiency in various program areas and recently designed a new system with effectiveness, efficiency, and service access measures for each program that was put in place in January 2012. The organization's analysis should analyze performance indicators related to performance goals that include the effectiveness of services, the efficiency of services, and service access for service delivery of each program seeking accreditation.

Consultation

■ The organization is encouraged to consider using an independent third party to gather satisfaction input from persons served to increase the reliability of the data.

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

■ Documented scope of services shared with stakeholders

■ Service delivery based on accepted field practices

■ Communication for effective service delivery

■ Entrance/exit/transition criteria

Recommendations
A.11.b.
A.11.c.
It is recommended that the organization consistently ensure that release of confidential information is limited to the specific information identified and has a time limitation.

A.14.a. through A.14.d.
When restrictions of the rights of persons served are in place, it is recommended that the organization follow its policies and procedures, obtain informed consent prior to implementation, have methods to reinstate rights as soon as possible, and provide staff members who are trained in their use.

Consultation

■ It is suggested that the organization ensure that all information is complete prior to filing it in the record of the person served.

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

■ Services are person-centred and individualized

■ Persons are given information about the organization's purposes and ability to address desired outcomes

Recommendations
B.5.b.(2)
B.5.b.(3)
It is recommended that the individual service plan consistently contain specific measurable goals and methods/techniques that will be used to achieve the objectives.

B.5.d.

It is recommended that individual service plans be reviewed on a regular basis with respect to expected outcomes.

B.5.e.(1)
B.5.e.(2)

It also is recommended that the individual service plan be revised based on the changing needs and satisfaction of the person served.

B.10.c.

Currently, the organization prepares an exit summary for behavioural consultation services. It is recommended that the exit summary report summarize the results of services received.

Consultation

■ It is suggested that all individual service plans consistently contain the signature of the person served to demonstrate his or her active involvement in and approval of the plan.

■ Although the organization provides persons served with information regarding their plans upon request, it is suggested that this information be provided/offered regularly to the persons served.

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
C.1.e.
C.1.f.

It is recommended that the organization identify potential side effects and drug interactions in the individual medication record.

C.6.b.

It is recommended that the organization have written procedures regarding documentation or confirmation of informed consent for each medication administered, when possible.

D. Employment 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 employment services.

Key Areas Addressed

- Goals of the persons served

- Personnel needs of local employers

- Community resources available

- Economic trends in the local employment sector

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.

Section 3. Employment Services

Principle Statement

An organization seeking CARF accreditation in the area of employment services assists the persons served in obtaining access to the resources, services, and supports that result in opportunities for the persons served that meet their employment-related wants, desires, goals, and needs. The organization provides the persons 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 served and other stakeholders. Services are individualized to each person.

I. Community Employment Services

Principle Statement

Job Development

Successful job development concurrently uses assessment information about the person seeking employment to target the types of jobs available from potential employers in the local labor market. Typical job development activities include reviewing local employment opportunities and developing potential employers/customers through direct and indirect promotional strategies. Job development may include facilitating a hiring agreement between an employer and a person seeking employment. Some persons seeking employment may want assistance at only a basic, informational level such as self-directed job search.

Key Areas Addressed

- Integrated employment choice

- Integrated employment obtainment

- Integrated employment retention

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.

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.

Consultation

- Considerable variations were noted between the community integration living skills programs that were visited during the survey. Some of this variation may be due to differing priorities and funding structures across the various regions. Management, team leaders, and support coordinators are encouraged to continue their efforts to work with provincial developmental-disabilities authorities to develop the capacity to use state-of-the-art approaches, such as Employment First, to further expand community integration options for persons who express an interest in and a preference for work-related activities. This might include adding services that help persons served to develop informed job choices and goals. A combination of work values clarification and transitional work involvement to discover job preferences can address these areas. The concerns related to community employment of the persons served, family members, or other team members could be incorporated as a part of the ongoing planning and review process. Some online resources on Employment First principles and philosophy include *www.mnapse.org/employment-first/* and *www.employmentfirst.net.*

- The practice of customized employment may provide guidance to posAbilities community integration staff persons as they move towards the integration of meaningful opportunities for community participation and full inclusion across all the living skills programs. Customized employment means individualizing the employment relationship between employees and employers in ways that meet the needs of both parties. It is based on an individualized determination of the strengths, needs, and interests of the person served and also is designed to meet the specific needs of the employer. It may include employment developed through job carving, self-employment, entrepreneurial initiatives, job development, or restructuring strategies that result in job responsibilities being customized and individually negotiated to fit the needs of persons served. A variety of resources on customized employment can be found online, including *http://www.t-tap.org/strategies/factsheet/ceqa/html* and *http://www.griffinhammis.com/customizedemploy.asp*.

- The organization is encouraged to enhance the activities offered to the persons served, which might help persons move towards optimal use of natural supports and greater self-sufficiency.

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

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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.

K. Supported Living

Principle Statement

Supported living addresses the desires, goals, strengths, abilities, needs, health, safety, and life span issues of persons usually living in their own homes (apartments, townhouses, or other residential settings). Supported living services are generally long-term in nature but may change in scope, duration, intensity, or location as the needs and preferences of individuals change over time.

Supported living refers to the support services provided to the person served, not the residence in which these services are provided. A sampling of people receiving services/supports in these sites will be visited as part of the interview process. Although the residence will generally be owned, rented, or leased by the person who lives there, the organization may occasionally rent or lease an apartment when the person served is unable to do so. Typically, in this situation the organization would co-sign or in other ways guarantee the lease or rental agreement; however, the person served would be identified as the tenant.

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

The home or individual apartment of the person served, even when the organization holds the lease or rental agreement on behalf of the person served, is not included in the intent to survey or identified as a site on the accreditation outcome.

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

■ Persons have opportunities to access community activities

Recommendations

There are no recommendations in this area.

O. Behavioural Consultation Services

Principle Statement

The focus of the service is to increase the person's ability to express more effective and acceptable behaviours. Behavioural strategies are identified and used to teach the person better ways to deal with the environment and personal stressors to ensure that targeted behaviours are discouraged and positive behaviours are learned and maintained. Through redirection of a targeted behaviour to a more socially and culturally acceptable behaviour, persons are able to achieve increased participation in mainstream community activities. This includes services to persons to address targeted behaviours in the home or community, such as eating disorders, disruptive behaviours, or self-injurious behaviours.

Key Areas Addressed

■ Skill/knowledge of personnel

■ Team meetings

■ Behavioural assessment input

■ Individualized behavioural strategies to replace

- Strategies developed with key persons

- Training supports implementation

- Monitoring strategies

Recommendations

There are no recommendations in this area.

Consultation

- posAbilities management and behavioural consultation services staff persons are encouraged to continue to base program planning and development decisions on current and emerging evidence-based practices and services. One resource may be the National Registry of Evidence-based Programs and Practices, which can be found online at *http://nrepp.samhsa.gov/*.