

**CARF Accreditation Report  
for  
Ark Regional Services  
Three-Year Accreditation**



# Contents

[Executive Summary](#)

[Survey Details](#)

[Survey Participants](#)

[Survey Activities](#)

[Program\(s\)/Service\(s\) Surveyed](#)

[Representations and Constraints](#)

[Survey Findings](#)

[Program\(s\)/Service\(s\) by Location](#)

## About CARF

CARF is an independent, nonprofit accreditor of health and human services, enhancing the lives of persons served worldwide.

The accreditation process applies CARF's internationally recognized standards during a site survey conducted by peer surveyors. Accreditation, however, is an ongoing process that distinguishes a provider's service delivery and signals to the public that the provider is committed to continuous performance improvement, responsive to feedback, and accountable to the community and its other stakeholders.

CARF accreditation promotes providers' demonstration of value and Quality Across the Lifespan® of millions of persons served through application of rigorous organizational and program standards organized around the ASPIRE to Excellence® continuous quality improvement framework. CARF accreditation has been the recognized benchmark of quality health and human services for more than 50 years.

For more information or to contact CARF, please visit [www.carf.org/contact-us](http://www.carf.org/contact-us).

**Organization**

Ark Regional Services  
1150 North Third Street  
Laramie, WY 82072

**Organizational Leadership**

Bob Sell, President and CEO  
Kayc DeMaranville, Chief Operating Officer

**Survey Number**

181435

**Survey Date(s)**

April 15, 2024–April 17, 2024

**Surveyor(s)**

Anita Bean, Administrative  
Brenda Janssen, BCR, Program  
Tonya Starkey, LCSW-S, CCM, Program  
Chelsie Brubacher, Program

**Program(s)/Service(s) Surveyed**

Community Housing  
Community Integration  
Supported Living

**Previous Survey**

November 8, 2021–November 10, 2021  
Three-Year Accreditation

**Accreditation Decision**

**Three-Year Accreditation**  
**Expiration: May 31, 2027**

# Executive Summary

This report contains the findings of CARF’s site survey of Ark Regional Services conducted April 15, 2024–April 17, 2024. This report includes the following information:

- Documentation of the accreditation decision and the basis for the decision as determined by CARF’s consideration of the survey findings.
- Identification of the specific program(s)/service(s) and location(s) to which this accreditation decision applies.
- Identification of the CARF surveyor(s) who conducted the survey and an overview of the CARF survey process and how conformance to the standards was determined.
- Feedback on the organization’s strengths and recognition of any areas where the organization demonstrated exemplary conformance to the standards.
- Documentation of the specific sections of the CARF standards that were applied on the survey.
- Recommendations for improvement in any areas where the organization did not meet the minimum requirements to demonstrate full conformance to the standards.
- Any consultative suggestions documented by the surveyor(s) to help the organization improve its program(s)/service(s) and business operations.

## Accreditation Decision

On balance, Ark Regional Services demonstrated substantial conformance to the standards. Ark Regional Services has provided services in Laramie for more than 60 years. The organization maintains a variety of collaborative relationships and an excellent reputation as a reliable and effective provider. The leadership is heavily involved in the day-to-day operations of the organization and leads its staff members, focusing on a strong team-oriented, person-centered approach. Staff members and other stakeholders reported a high level of satisfaction with the organization. Ark Regional Services approaches each person served with a person-centered focus and designs services in a way to accommodate needs, dreams, and desires of each person served. The unique delivery of community integration services sets the organization above and beyond most programs of this type. Services are provided in an ever-changing “college schedule” type of routine in a variety of locations, with transportation and staffing designed to meet each person’s choices and needs. The organization is complimented for the work it has done since its last CARF survey in building the foundation and culture, with a strong influence of the CARF standards. It is obvious that the CARF standards are woven into its policies and procedures on an ongoing basis, demonstrating its commitment to high quality and continuous improvement. Although there are opportunities for improvement, some of which include addressing records, testing/analyzing the business continuity/disaster recovery procedures at least annually, and adding wandering and elopement to written procedures related to critical incidents, Ark Regional Services has a solid, supportive board of directors and foundation that believe in the unique approach of the organization and has positioned its support to champion the programs’ success.

Ark Regional Services appears likely to maintain and/or improve its current method of operation and demonstrates a commitment to ongoing quality improvement. Ark Regional Services is required to submit a post-survey Quality Improvement Plan (QIP) to CARF that addresses all recommendations identified in this report.

**Ark Regional Services has earned a Three-Year Accreditation.** The leadership team and staff are complimented and congratulated for this achievement. In order to maintain this accreditation, throughout the term of accreditation, the organization is required to:

- Submit annual reporting documents and other required information to CARF, as detailed in the Accreditation Policies and Procedures section in the standards manual.
- Maintain ongoing conformance to CARF's standards, satisfy all accreditation conditions, and comply with all accreditation policies and procedures, as they are published and made effective by CARF.

## Survey Details

### Survey Participants

The survey of Ark Regional Services was conducted by the following CARF surveyor(s):

- Anita Bean, Administrative
- Brenda Janssen, BCR, Program
- Tonya Starkey, LCSW-S, CCM, Program
- Chelsie Brubacher, Program

CARF considers the involvement of persons served to be vital to the survey process. As part of the accreditation survey for all organizations, CARF surveyors interact with and conduct direct, confidential interviews with consenting current and former persons served in the program(s)/service(s) for which the organization is seeking accreditation. In addition, as applicable and available, interviews may be conducted with family members and/or representatives of the persons served such as guardians, advocates, or members of their support system.

Interviews are also conducted with individuals associated with the organization, as applicable, which may include:

- The organization's leadership, such as board members, executives, owners, and managers.
- Business unit resources, such as finance and human resources.
- Personnel who serve and directly interact with persons served in the program(s)/service(s) for which the organization is seeking accreditation.
- Other stakeholders, such as referral sources, payers, insurers, and fiscal intermediaries.
- Community constituents and governmental representatives.

### Survey Activities

Achieving CARF accreditation involves demonstrating conformance to the applicable CARF standards, evidenced through observable practices, verifiable results over time, and comprehensive supporting documentation. The survey of Ark Regional Services and its program(s)/service(s) consisted of the following activities:

- Confidential interviews and direct interactions, as outlined in the previous section.
- Direct observation of the organization's operations and service delivery practices.
- Observation of the organization's location(s) where services are delivered.

- Review of organizational documents, which may include policies; plans; written procedures; promotional materials; governing documents, such as articles of incorporation and bylaws; financial statements; and other documents necessary to determine conformance to standards.
- Review of documents related to program/service design, delivery, outcomes, and improvement, such as program descriptions, records of services provided, documentation of reviews of program resources and services conducted, and program evaluations.
- Review of records of current and former persons served.

## **Program(s)/Service(s) Surveyed**

The survey addressed by this report is specific to the following program(s)/service(s):

- Community Housing
- Community Integration
- Supported Living

A list of the organization's accredited program(s)/service(s) by location is included at the end of this report.

## **Representations and Constraints**

The accreditation decision and survey findings contained in this report are based on an on-balance consideration of the information obtained by the surveyor(s) during the site survey. Any information that was unavailable, not presented, or outside the scope of the survey was not considered and, had it been considered, may have affected the contents of this report. If at any time CARF subsequently learns or has reason to believe that the organization did not participate in the accreditation process in good faith or that any information presented was not accurate, truthful, or complete, CARF may modify the accreditation decision, up to and including revocation of accreditation.

## **Survey Findings**

This report provides a summary of the organization's strengths and identifies the sections of the CARF standards that were applied on the survey and the findings in each area. In conjunction with its evaluation of conformance to the specific program/service standards, CARF assessed conformance to its business practice standards, referred to as Section 1. ASPIRE to Excellence, which are designed to support the delivery of the program(s)/service(s) within a sound business operating framework to promote long-term success.

The specific standards applied from each section vary based on a variety of factors, including, but not limited to, the scope(s) of the program(s)/service(s), population(s) served, location(s), methods of service delivery, and survey type. Information about the specific standards applied on each survey is included in the standards manual and other instructions that may be provided by CARF.

## Areas of Strength

CARF found that Ark Regional Services demonstrated the following strengths:

- With more than 60 years of experience, Ark Regional Services has a proven track record of providing high-quality support programming for the community. The dedication of the leadership team and frontline staff to the mission of “supporting people with intellectual and developmental disabilities to actively engage in their life through new opportunities, healthy relationships, and lifelong learning” is evident in the organization’s extensive program planning.
- The leaders of the organization show an impressive dedication to “people-first” services. One stakeholder commented that Ark Regional Services “truly shines above all other providers” in the area and that it was very impressive how the staff members sit down individually and ask what the persons served want and need in their lives and then work tirelessly to figure out ways to explore those interests and opportunities with the persons served. The stakeholder also stated that the “choices and rights [of persons served are] paramount here. It absolutely drives what we do.”
- Ark Regional Services benefits from having a strong, dedicated, and mission-driven leadership team that has developed and implemented a strong vision that permeates the organization. Staff members at all levels truly embrace the potential of each person served and enthusiastically provide the supports that persons served need according to their hopes and dreams.
- The organization has implemented grouping whereby persons served living in supported living and houses are grouped together to create what is called a suite. The advantages of this concept range from greater support to more independent persons served and effective utilization of staff resources when persons served in the houses are out doing activities. Direct support professionals verbalize a gratefulness in variety, and it is resulting in higher staff retention.
- Ark Regional Services is commended for piloting a web-based tool called My25 for the use of meal planning with the persons served. It can be geared to help address health issues through healthy food choices. The use of this tool has resulted in the persons served having a variety of quality meals to choose from, recipes that are easy to follow, and a matching grocery list (which is resulting in decreased grocery expenses). This application is being used by homes for the creation of a menu covering all three meals for the day and by persons served who may only want to identify what they want for supper.
- Ark Regional Services is commended for the on-call schedule that allows access to all levels of leadership, as it ensures that someone with experience and decision-making experience will be able to assist with resolution.
- Many direct support professionals expressed gratitude for the opportunity to take the certification training. They verbalized how the training benefited them by enabling them to become much more knowledgeable about the organization overall and enhancing their understanding of the organization’s philosophy and culture.
- It is important to note that although there is high turnover in the entry-level positions, Ark Regional Services has longevity and dedication by many staff members within the organization. Opportunity for advancement includes access to cross training in various programs and support for leadership growth of those who have a passion for working with the persons served.
- The community living homes are well integrated into the neighborhoods. The size of many homes is deceptive when looking at the frontage. The homes blend in with the neighborhood and also allow the organization the ability to offer support to more persons served. The persons served take great pride in their homes, as demonstrated through their active participation in providing a tour and in the furnishing of their bedrooms.
- Family members expressed strong satisfaction with the organization’s services and levels of communication. They really appreciate the level of care provided, knowing that the direct support staff members treat their loved ones with dignity and respect and pay great attention to their health and safety.

- Ark Regional Services is celebrated for its Equestrian Center. The riding arena and stables allow persons served to gain knowledge, skills, and confidence while working with horses, donkeys, and horticulture. The persons served learn interpersonal skills, boundaries, and responsibility through engaging in equine-assisted learning.
- Ark Regional Services is commended for providing an abundance of high-quality visual art, music, theater, and dance classes for persons served to choose from. Cooper Center for Creative Arts, a beautiful, purpose-built facility, serves as a sustainable program location and inspires creativity for all artists.
- Ark Regional Services has provided services in the Laramie area for many years and is well known for the services it provides. Stakeholders reported that the organization has an “amazing reputation” in the community. People know of Ark Regional Services and witness the respectful, positive manner in which the staff members interact with and assist the persons served while they are out in the community.
- Ark Regional Services is recognized for the classes provided for professional development. The persons served can learn a variety of skills to aid in employment advancement opportunities and can earn certifications in highly-sought-after courses, such as first aid, food handling, and The Mandt System®.
- Ark Regional Services has developed a strong relationship with an area university to provide experiences and practicum experience to the students and an outlet for employment opportunities. One of the professors from the university taught a photography class for persons served at Cooper Center for Creative Arts. This project has opened the door to further research in the social work department and provided students with practicum experience. Additionally, the organization’s COO serves on an advisory board for the university, which has strengthened the organization’s relationship with the university as well.
- Ark Regional Services is commended for contracting with a psychiatrist to provide monthly medication reviews for the persons served. Bringing these critical services in house may eliminate barriers many persons served with mental health challenges face in accessing the support they need.
- Ark Regional Services is recognized for its well-designed website. Information available to the community includes previous CARF accreditation and state reports; a lengthy list of local, state, and national resources; and detailed information, photos, and videos about services available.
- Leadership has created a warm and supportive culture for all persons served. Staff members at all levels prioritize developing authentic relationships with each and every person served. This commitment was notably demonstrated during site visits, wherein the COO, displaying remarkable familiarity and the ability to name every person served, was often greeted by smiles, cheers, and hugs.
- Internal survey results in 2023 yielded a high level of employee and other stakeholder satisfaction. One hundred percent of the employees responded that they “feel their work has purpose and meaning,” 97 percent reported that they feel that they can keep the persons served safe, and 93 percent responded that they “have training they need to do their job well.” In the stakeholder survey, 100 percent responded that their “interactions with Ark were positive” and that “Ark was responsive to their questions and concerns.” One stakeholder commented that “the team at Ark is absolutely amazing, kind, thoughtful, and patient.”
- Leaders place a high priority on staff retention, training, and succession planning. The team shared its new focus on staff recruitment, which is to make Ark Regional Services “the best place to work, and people will want to come and work here.” Leadership is attentive to the initial impression that new employees receive and has reevaluated the new employee orientation training to help staff members have the best experience possible.
- The staff members treat the persons served with dignity and respect, providing compassionate care and support. These actions allow for the persons served to live in the community and function at their highest levels of independence and be given opportunities most will never experience.
- Leadership verbally addresses succession planning and development of future leaders within the organization, raising expectations and value through the investment in staff and the organization and making it a place people want to work.



- Ark Regional Services is commended for the plan-of-care document. The extensive information gathered keeps services focused on person-centeredness.
- The staff members are involved in the support of independence, education, socialization, and personal relationships, as evident through discussions with persons served.
- Ark Regional Services appears to be financially solvent due to the results of sound business practices that have been implemented by the board and leadership in a sometimes uncertain financial climate. The organization has the backing of a foundation that has supported it in its mission and strategic planning. The board of directors believes in the unique approach of the organization and has positioned its support to champion the programs' success.
- The CEO and leaders are applauded for the new employee training program. The CEO is committed to providing a four-hour face-to-face training with each new staff member that covers topics on the mission, values, vision, code of ethics, and other specific areas in order to establish a relationship with each new staff member and to deliver a consistent message concerning the organization's culture and responsibilities. It is obvious through visits and observations that the staff members and persons served are very familiar with the CEO, and he has established relationships within the organization.
- One stakeholder reported that it appears the core group of leaders in the organization are "on the same page." Stakeholders added how they are very impressed with the efforts that seasoned leaders have taken to recognize the importance of grooming the next generation of leaders within the organization in order to carry on the legacy and person-focused values.
- Ark Regional Services is actively involved in advocacy efforts focused on making changes in legislative policy and funding rates. Through these efforts as well as attending conferences and other events, the leaders stay current and educated with current trends and strategies in the field.
- The organization maintains an impressive fleet of vehicles in order to provide an exceptional level of access to the community and to the activities/classes that persons served attend during the day. Ark Regional Services recognized that due the lack of adequate public transportation in the community, it was imperative that it provide the means for persons served to be able to access the community. Even though transportation services are not well funded, Ark Regional Services has determined that it is essential and, therefore, has found the means to provide the service to all persons served.

## Opportunities for Quality Improvement

The CARF survey process identifies opportunities for continuous improvement, a core concept of "aspiring to excellence." This section of the report lists the sections of the CARF standards that were applied on the survey, including a description of the business practice area and/or the specific program(s)/service(s) surveyed and a summary of the key areas addressed in that section of the standards.

In this section of the report, a recommendation identifies any standard for which CARF determined that the organization did not meet the minimum requirements to demonstrate full conformance. All recommendations must be addressed in a QIP submitted to CARF.

In addition, consultation may be provided for areas of or specific standards where the surveyor(s) documented suggestions that the organization may consider to improve its business or service delivery practices. Note that consultation may be offered for areas of specific standards that do not have any recommendations. Such consultation does not indicate nonconformance to the standards; it is intended to offer ideas that the organization might find helpful in its ongoing quality improvement efforts. The organization is not required to address consultation.

When CARF surveyors visit an organization, their role is that of independent peer reviewers, and their goal is not only to gather and assess information to determine conformance to the standards, but also to engage in relevant and meaningful consultative dialogue. Not all consultation or suggestions discussed during the survey are noted in this report. The organization is encouraged to review any notes made during the survey and consider the consultation or suggestions that were discussed.

During the process of preparing for a CARF accreditation survey, an organization may conduct a detailed self-assessment and engage in deliberations and discussions within the organization as well as with external stakeholders as it considers ways to implement and use the standards to guide its quality improvement efforts. The organization is encouraged to review these discussions and deliberations as it considers ways to implement innovative changes and further advance its business and service delivery practices.

## **Section 1. ASPIRE to Excellence®**

### **1.A. Leadership**

#### **Description**

CARF-accredited organizations identify leadership that embraces the values of accountability and responsibility to the individual organization's stated mission. The leadership demonstrates corporate social responsibility.

#### **Key Areas Addressed**

- Leadership structure and responsibilities
- Person-centered philosophy
- Organizational guidance
- Leadership accessibility
- Cultural competency and diversity
- Corporate responsibility
- Organizational fundraising, if applicable

#### **Recommendations**

There are no recommendations in this area.

#### **Consultation**

- Ark Regional Services has developed a cultural competency, diversity, and inclusion plan and collects demographic information concerning the persons served. Although the demographic data show that there is not a wide variety of diversity in the persons served, the organization is encouraged to develop a committee or focus group to work toward identifying and offering a variety of cultural opportunities and new experiences for the persons served in order to broaden the organization's ability to make choices based on the experiences of persons served. Ark Regional Services is also encouraged to add documentation of the progress and outcomes to the plan.

### **1.C. Strategic Planning**

#### **Description**

CARF-accredited organizations establish a foundation for success through strategic planning focused on taking advantage of strengths and opportunities and addressing weaknesses and threats.

## **Key Areas Addressed**

- Environmental considerations
- Strategic plan development, implementation, and periodic review

## **Recommendations**

There are no recommendations in this area.

## **1.D. Input from Persons Served and Other Stakeholders**

### **Description**

CARF-accredited organizations continually focus on the expectations of the persons served and other stakeholders. The standards in this subsection direct the organization's focus to soliciting, collecting, analyzing, and using input from all stakeholders to create services that meet or exceed the expectations of the persons served, the community, and other stakeholders.

### **Key Areas Addressed**

- Collection of input from persons served, personnel, and other stakeholders
- Integration of input into business practices and planning

### **Recommendations**

There are no recommendations in this area.

## **1.E. Legal Requirements**

### **Description**

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

### **Key Areas Addressed**

- Compliance with obligations
- Response to legal action
- Confidentiality and security of records

### **Recommendations**

**1.E.3.a.**

**1.E.3.b.**

**1.E.3.c.**

**1.E.3.f.**

Although Ark Regional Services has guidelines for record retention for specific business information, records of person served, and forms, it should have policies and written procedures that address confidential administrative records, the records of the persons served, security of all records, and timeframes for documentation in the records of the persons served.

## 1.F. Financial Planning and Management

### Description

CARF-accredited organizations strive to be financially responsible and solvent, conducting fiscal management in a manner that supports their mission, values, and performance objectives. Fiscal practices adhere to established accounting principles and business practices. Fiscal management covers daily operational cost management and incorporates plans for long-term solvency.

### Key Areas Addressed

- Budgets
- Review of financial results and relevant factors
- Fiscal policies and procedures
- Reviews of bills for services and fee structures, if applicable
- Review/audit of financial statements
- Safeguarding funds of persons served, if applicable

### Recommendations

There are no recommendations in this area.

## 1.G. Risk Management

### Description

CARF-accredited organizations engage in a coordinated set of activities designed to control threats to their people, property, income, goodwill, and ability to accomplish goals.

### Key Areas Addressed

- Risk management plan implementation and periodic review
- Adequate insurance coverage
- Media relations and social media procedures
- Reviews of contract services

### Recommendations

There are no recommendations in this area.

## 1.H. Health and Safety

### Description

CARF-accredited organizations maintain healthy, safe, and clean environments that support quality services and minimize risk of harm to persons served, personnel, and other stakeholders.

### Key Areas Addressed

- Healthy and safe environment
- Competency-based training on health and safety procedures and practices
- Emergency and evacuation procedures
- Access to first aid and emergency information

- Critical incidents
- Infections and communicable diseases
- Health and safety inspections

## Recommendations

### 1.H.10.a.(9)

### 1.H.10.a.(10)

The organization should implement written procedures regarding critical incidents that specify the following critical incidents: wandering and elopement.

## Consultation

- Although the organization has developed a schedule outlining when drills are to be completed throughout the year, it may consider establishing a routine day that drills are due, such as the submission of required drills on the 15th of the following month. Doing so may allow for confirmation of drills being completed timely and provide ongoing training on procedures and processes for safety.
- The safety committee may consider creating an agenda and maintaining formal minutes, allowing for robust conversations, documenting progress/trends, and addressing standing health and safety requirements.
- The organization may consider having health and safety inspections turned in within 30 days of completion, allowing for oversight and confirmation of completion.
- It is suggested that the organization consider reorganizing binders containing the safety data sheet information so that the products typically used in the homes are more easily accessible if direct support professionals are required to find them in urgent situations. This could be achieved by ensuring that the product sheet for those products are at the beginning of the content list.

## 1.I. Workforce Development and Management

### Description

CARF-accredited organizations demonstrate that they value their human resources and focus on aligning and linking human resources processes, procedures, and initiatives with the strategic objectives of the organization. Organizational effectiveness depends on the organization's ability to develop and manage the knowledge, skills, abilities, and behavioral expectations of its workforce. The organization describes its workforce, which is often composed of a diverse blend of human resources. Effective workforce development and management promote engagement and organizational sustainability and foster an environment that promotes the provision of services that center on enhancing the lives of persons served.

### Key Areas Addressed

- Composition of workforce
- Ongoing workforce planning
- Verification of backgrounds/credentials/fitness for duty
- Workforce engagement and development
- Performance appraisals
- Succession planning

### Recommendations

There are no recommendations in this area.

## 1.J. Technology

### Description

Guided by leadership and a shared vision, CARF-accredited organizations are committed to exploring and, within their resources, acquiring and implementing technology systems and solutions that will support and enhance:

- Business processes and practices.
- Privacy and security of protected information.
- Service delivery.
- Performance management and improvement.
- Satisfaction of persons served, personnel, and other stakeholders.

### Key Areas Addressed

- Ongoing assessment of technology and data use, including input from stakeholders
- Technology and system plan implementation and periodic review
- Technology policies and procedures

### Recommendations

#### 1.J.4.a.

#### 1.J.4.b.(1)

#### 1.J.4.b.(2)

#### 1.J.4.b.(3)

#### 1.J.4.b.(4)

#### 1.J.4.b.(5)

#### 1.J.4.b.(6)

#### 1.J.4.c.

Although Ark Regional Services contracts tech support from a local provider and has in-house staff members who manage technology needs, there was no written documentation that indicated that a test of the organization's business continuity/disaster recovery procedures had been conducted or analyzed in the past year. A test of the organization's procedures for business continuity/disaster recovery should be conducted at least annually and analyzed for effectiveness, areas needing improvement, actions to address the improvements needed, implementation of the actions, whether the actions taken accomplished the intended results, and necessary education and training of personnel. In addition, the test should be evidenced in writing, including the analysis.

#### 1.J.5.a.

#### 1.J.5.b.

#### 1.J.5.c.(1)

#### 1.J.5.c.(2)

Although the organization maintains policies and guidelines for cybersecurity and technology used in the performance of the staff members' jobs, Ark Regional Services should provide documented initial and ongoing training to personnel on cybersecurity and on the technology used in performance of their job duties.

## 1.K. Rights of Persons Served

### Description

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

## **Key Areas Addressed**

- Policies that promote rights of persons served
- Communication of rights to persons served
- Formal complaints by persons served

## **Recommendations**

There are no recommendations in this area.

## **Consultation**

- The organization might consider adding a staff signature line to the handbook for persons served that acknowledges annual reviews with persons served. This could provide for accountability and documentation of the service and education provided to persons served and/or guardians.

## **1.L. Accessibility**

### **Description**

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

### **Key Areas Addressed**

- Assessment of accessibility needs and identification of barriers
- Accessibility plan implementation and periodic review
- Requests for reasonable accommodations

### **Recommendations**

There are no recommendations in this area.

## **1.M. Performance Measurement and Management**

### **Description**

CARF-accredited organizations demonstrate a culture of accountability by developing and implementing performance measurement and management plans that produce information an organization can act on to improve results for the persons served, other stakeholders, and the organization itself.

The foundation for successful performance measurement and management includes:

- Leadership accountability and support.
- Mission-driven measurement.
- A focus on results achieved for the persons served.
- Meaningful engagement of stakeholders.
- An understanding of extenuating and influencing factors that may impact performance.
- A workforce that is knowledgeable about and engaged in performance measurement and management.
- An investment in resources to implement performance measurement and management.
- Measurement and management of business functions to sustain and enhance the organization.

### **Key Areas Addressed**

- Leadership accountability for performance measurement and management
- Identification of gaps and opportunities related to performance measurement and management
- Input from stakeholders

- Performance measurement and management plan
- Identification of objectives and performance indicators for service delivery
- Identification of objectives and performance indicators for priority business functions
- Personnel training on performance measurement and management

### **Recommendations**

There are no recommendations in this area.

### **Consultation**

- Although leadership has put time, effort, and thought into redeveloping the performance measurement and management plans and processes, it is encouraged to continue to document the work and milestones toward identifying trends, issues, and opportunities and celebrate successes.

## **1.N. Performance Improvement**

### **Description**

CARF-accredited organizations demonstrate a culture of performance improvement through their commitment to proactive and ongoing review, analysis, reflection on their results in both service delivery and business functions, and transparency. The results of performance analysis are used to identify and implement data-driven actions to improve the quality of programs and services and to inform decision making. Performance information that is accurate and understandable to the target audience is shared with persons served, personnel, and other stakeholders in accordance with their interests and needs.

### **Key Areas Addressed**

- Analysis of service delivery performance
- Analysis of business function performance
- Identification of areas needing performance improvement
- Implementation of action plans
- Use of performance information to improve program/service quality and make decisions
- Communication of performance information

### **Recommendations**

There are no recommendations in this area.

## **Section 2. Quality Individualized Services and Supports**

### **Description**

For an organization to achieve quality services, the persons served are active participants in the planning, implementation, and ongoing review and revision of the services offered. The organization's commitment to quality and the involvement of the persons served spans the entire time that the persons served are involved with services. The service planning process is individualized, establishing goals and measurable objectives that incorporate the unique strengths, abilities, needs, and preferences of the persons served. Services are responsive to the expectations of persons served and their desired outcomes from services, and are relevant to their maximum participation in the environments of their choice.



## 2.A. Program/Service Structure

### Description

A fundamental responsibility of the organization is to provide a comprehensive program structure. The staffing is designed to maximize opportunities for the persons served to obtain and participate in the services provided.

### Key Areas Addressed

- Services are person centered and individualized
- Persons are given information about the organization's purposes and ability to address desired outcomes
- Documented scope of services shared with stakeholders
- Service delivery based on accepted field practices
- Communication for effective service delivery
- Entrance/exit/transition criteria

### Recommendations

There are no recommendations in this area.

### Consultation

- The organization may consider putting in a contact phone number and mailing address in the admission letter to applicants.

## 2.B. Individual-Centered 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 affect the person's life. Efforts to include the person served in the direction or delivery of those services/supports are evident.

### Key Areas Addressed

- Services are person centered and individualized
- Persons are given information about the organization's purposes and ability to address desired outcomes

### Recommendations

There are no recommendations in this area.

## 2.C. Medication Monitoring and Management

### Key Areas Addressed

- Current, complete records of medications used by persons served
- Written procedures for storage and safe handling of medications
- Educational resources and advocacy for persons served in decision making
- Physician review of medication use
- Training and education for persons served regarding medications

## **Recommendations**

### **2.C.6.d.(2)**

The organization should implement written procedures regarding medications that provide for identification, documentation, and required reporting, including to the prescribing professional, of medication errors, as appropriate.

## **2.E. Community Services Principle Standards**

### **Description**

An organization seeking CARF accreditation in the area of community services assists the persons and/or families served in obtaining access to the resources and services of their choice. The persons and/or families served are included in their communities to the degree they desire. This may be accomplished by direct service provision or linkages to existing opportunities and natural supports in the community.

The organization obtains information from the persons and/or families served regarding resources and services they want or require that will meet their identified needs, and offers an array of services it arranges for or provides. The organization provides the persons and/or families served with information so that they may make informed choices and decisions.

The services and supports are changed as necessary to meet the identified needs of the persons and/or families served and other stakeholders. Service designs address identified individual, family, socioeconomic, and cultural needs.

Expected results from these services may include:

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

### **Key Areas Addressed**

- Access to community resources and services
- Enhanced quality of life
- Community inclusion
- Community participation

### **Recommendations**

There are no recommendations in this area.

## Section 4. Community Services

### Description

An organization seeking CARF accreditation in the area of community services assists the persons served through an individualized person-centered process to obtain access to the services, supports, and resources of their choice to achieve their desired outcomes. This may be accomplished by direct service provision, linkages to existing generic opportunities and natural supports in the community, or any combination of these. The persons served are included in their communities to the degree they desire.

The organization provides the persons served with information so that they may make informed choices and decisions. Although we use the phrase person served, this may also include family served, as appropriate to the service and the individual.

The services and supports are arranged and changed as necessary to meet the identified desires of the persons served. Service designs address identified individual, family, socioeconomic, and cultural preferences.

Depending on the program's scope of services, expected results from these services/supports may include:

- Increased inclusion in community activities.
- Increased or maintained ability to perform activities of daily living.
- Increased self-direction, self-determination, and self-reliance.
- Self-esteem.
- Housing opportunities.
- Community citizenship.
- Increased independence.
- Meaningful activities.
- Increased employment options.

### 4.G. Community Integration (COI)

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

Community integration provides opportunities for the community participation of the persons served. The organization defines the scope of these services 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 centers, 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.
- Center-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

#### **Recommendations**

There are no recommendations in this area.

## **4.H. Community Housing (CH)**

### **Description**

Community housing addresses the desires, goals, strengths, abilities, needs, health, safety, and life span issues of the persons served, regardless of the home in which they live and/or the scope, duration, and intensity of the services they receive. The residences in which services/supports are provided are typically owned, rented, leased, or operated directly by the organization, or may be owned, rented, or leased by a third party, such as a governmental entity. Providers exercise control over these sites in terms of having direct or indirect responsibility for the physical conditions of the facility.

Community housing is provided in partnership with individuals. These services/supports are designed to assist the persons served to achieve success in and satisfaction with community living. They may be temporary or long-term in nature. The services/supports are focused on home and community integration and engagement in productive activities. Community housing enhances the independence, dignity, personal choice, and privacy of the persons served. For persons in alcohol and other drug programs, these services/supports are focused on providing sober living environments to increase the likelihood of sobriety and abstinence and to decrease the potential for relapse.

Community housing programs may be referred to as group homes, halfway houses, three-quarter way houses, recovery residences, sober housing, domestic violence or homeless shelters, and safe houses. These programs may be located in rural or urban settings and in houses, apartments, townhouses, or other residential settings owned,

rented, leased, or operated by the organization. They may include congregate living facilities and clustered homes/apartments in multiple-unit settings. These residences are often physically integrated into the community, and every effort is made to ensure that they approximate other homes in their neighborhoods 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 twenty-four 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
- Support to persons as they explore alternatives
- In-home safety needs
- Access as desired to community activities
- Options to make changes in living arrangements
- System for on-call availability of personnel

### **Recommendations**

There are no recommendations in this area.

## **4.I. Supported Living (SL)**

### **Description**

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

Supported living refers to the support services provided to the person served, not the residence in which these services are provided. A sample of people receiving services/supports in these sites will be visited as part of the interview process. Although the residence will generally be owned, rented, or leased by the person who lives there,

the organization may occasionally rent or lease an apartment when the person served is unable to do so. Typically, in this situation the organization would co-sign or in other ways guarantee the lease or rental agreement; however, the person served would be identified as the tenant.

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

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

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

### **Key Areas Addressed**

- Safe, affordable, accessible housing chosen by the individual
- Supports available based on needs and desires
- In-home safety needs
- Living as desired in the community
- Support personnel available based on needs
- Persons have opportunities to access community activities

### **Recommendations**

There are no recommendations in this area.