CARF Accreditation Report

for

OneSky Community Resources Society

Three-Year Accreditation

Contents

About CARF

CARF is an independent, non-profit 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.

Organization

OneSky Community Resources Society
330 Ellis Street
Penticton BC V2A 4L7
CANADA

Organizational Leadership

Tanya Behardien, Executive Director

Survey Number

131695

Survey Date(s)

June 23, 2021–June 25, 2021

Surveyor(s)

Camille Lagueux, Administrative
Paul Sankey, Program
Marielande Emile, LCSW, Program
John Thornburn, MA, Program
Sean Hannon, Program

Program(s)/Service(s) Surveyed

Community Integration
Home and Community Services
Personal Supports Services
Supported Living
Child/Youth Day Care (Children and Adolescents)
Counselling/Outpatient (Children and Adolescents)
Diversion/Intervention (Children and Adolescents)
Early Childhood Development (Children and Adolescents)
Foster Family and Kinship Care (Children and Adolescents)
Intensive Family-Based Services (Children and Adolescents)
Promotion/Prevention (Children and Adolescents)
Residential Treatment (Children and Adolescents)
Governance Standards Applied

Previous Survey

June 7, 2017–June 9, 2017
Three-Year Accreditation

Accreditation Decision

Three-Year Accreditation
Expiration: June 30, 2023

Executive Summary

This report contains the findings of CARF's site survey of OneSky Community Resources Society conducted June 23, 2021–June 25, 2021. 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, OneSky Community Resources Society demonstrated substantial conformance to the standards. OneSky has built a strong, positive reputation over the last 50 years in the many communities of the southern Okanagan it serves for the wide array of flexible, individualized services it provides to children, youth, and adults. The services include community integration, supported living, personal supports services, home and community services, child/youth day care, counselling/outpatient, diversion/intervention, early childhood development, intensive family-based services, promotion/prevention, foster family and kinship care, and residential treatment. Participants and their families appear to be greatly benefiting from the services they receive. Among the organization's many strengths are its actively engaged board, a highly capable leadership team, personnel at all levels who are dedicated to their work in support of the participants and their families, its open communication practices, its culture of continuous quality improvement, and its attentiveness and responsiveness to the ongoing and emergent needs of the communities served. OneSky nimbly, creatively, and effectively responded to the COVID-19 pandemic to enable service continuity and to safeguard the participants and staff members. Participants, their families, referral sources, funders, and other stakeholders expressed a high level of satisfaction with and appreciation for the organization and its services and staff members. Opportunities for improvement are scattered throughout the standards sections. They include the conduct of documented reviews of contract performance at least annually, the implementation of certain written safety procedures, the consistent availability of written emergency procedures in vehicles used to transport participants, the implementation of certain practices and written procedures in the area of workforce development and management, the implementation of a technology and system plan and several related procedures, the documented conduct of a test of the procedures for business continuity/disaster recovery at least annually, the communication of rights to the participants at least annually, and the comprehensiveness of the performance measurement and management plan. Opportunities for improvement also include the implementation, comprehensiveness, or consistency of a number of policies, written procedures, processes, plans, and other documentation in the areas of program/service structure, screening and access to services, medication, transition/discharge, records of the participant, and child/youth day care. The receptivity of the leadership and staff members to the consultation and other feedback provided during this survey instills confidence that OneSky possesses the willingness and capacity to bring it into full conformance to the standards.

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

OneSky Community Resources Society 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 OneSky Community Resources Society was conducted by the following CARF surveyor(s):

- Camille Lagueux, Administrative
- Paul Sankey, Program
- Marielande Emile, LCSW, Program
- John Thornburn, MA, Program
- Sean Hannon, 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 OneSky Community Resources Society 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 Integration

- Home and Community Services

- Personal Supports Services

- Supported Living

- Child/Youth Day Care (Children and Adolescents)

- Counselling/Outpatient (Children and Adolescents)

- Diversion/Intervention (Children and Adolescents)

- Early Childhood Development (Children and Adolescents)

- Foster Family and Kinship Care (Children and Adolescents)

- Intensive Family-Based Services (Children and Adolescents)

- Promotion/Prevention (Children and Adolescents)

- Residential Treatment (Children and Adolescents)

- *Governance Standards Applied*

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 OneSky Community Resources Society demonstrated the following strengths:

- OneSky has an excellent, well-deserved reputation for providing quality services that reflect the changing needs of the communities it serves. This is reflected in the many tributes paid to the organization by funders and referral sources, including descriptions of it as "wonderful," "professional," "able to think outside of the box to problem solve," and "taking services to where the participants live." Funders and referral sources also characterized the leadership as being "seasoned," "well respected in the communities," and "providing excellent communication."

- OneSky is complimented for immediately and intentionally taking the steps necessary to ensure that services were maintained for the participants during the COVID-19 pandemic. The organization's main site remained open by appointment, and its programs developed innovative ways to meet the participants' needs. No services were cancelled, and services were modified as needed to ensure the safety of the personnel and participants. Some examples of OneSky's creativity include shifting in-person training opportunities for families to an online format and keeping the toy lending library open by arranging for the pickup of resources via a drive-through arrangement. It is particularly noteworthy that the health and safety protocols staff members maintained during the pandemic led to a reduction in total sick days across the organization's programs in 2020 compared to previous years, a feat that required the commitment of all parties.

- The executive director and leadership team are supported by a strong, dedicated board that is representative of the communities served. Board members bring experience, knowledge, and skills to the work they do for the organization. Clearly defined polices delineate the board's governance role from the organization's operations. The board is commended for the steps it is taking with respect to the provision of ongoing training and education related to recommendations in action steps of the report of the Truth and Reconciliation Commission of Canada.

- OneSky's leadership team truly lives the organization's mission: "We champion and support individuals to reach their full potential by providing quality supports and services that meet identified needs." Members of the senior leadership team display a genuine synergy. Over the past few years the team has continued to grow, adding members whose experience and capacity benefit the organization. The organization is complimented for this achievement and for its ongoing efforts to recruit and retain quality, talented personnel.

- The professionalism, knowledge, and openness to suggestions of the organization's staff members promotes the delivery of optimal services that meet participants' needs. Staff members' strong collaboration with community partners is an additional strength that accrues to the organization's effectiveness and reputation.

- OneSky provides accessible inclusion programming that is customized to meet the needs of each participant. To further enhance accessibility to the community, the organization is moving its inclusion program to a central Penticton location that will be well equipped to accommodate participants with a wide range and variety of needs and goals.

- It is evident that OneSky prioritizes open communication at all levels. The senior leadership team meets daily via virtual format during the pandemic to share information. Directors then pass information stemming from the meeting to the team leaders, who relay it to the frontline personnel. Minutes from the town hall meetings held during the pandemic include testimonials from frontline personnel expressing appreciation for always being in the know regarding organizational decisions and changes.

- The COVID-19 pandemic has provided additional opportunities for OneSky to expand its use of technology to connect with and offer services to participants who live in the more remote communities served by the organization as well as those with transportation barriers. The organization's website is attractive and informational. Its use of Facebook and other social media platforms ensures that participants have up-to-date information regarding programs, pandemic restrictions, and information. Annual reports and newsletters have also been posted on the website.

- The organization prioritizes the health and wellness of the participants and staff members. For example, it increased health and wellness days to support staff members during this challenging pandemic year by giving back to the team that supports the participants.

- OneSky excels at delivering an array of well-tailored, high-calibre services to participants living in the community in a range of settings, including supported living arrangements and home-based services. The organization's supports, interventions, and activities are based on the needs and preferences of the participants and their families. Personnel in the residential treatment program appear to have a good working knowledge of each participant. The many resources they access enhance the support and care provided to participants. The organization's inviting, home-like programming areas take into consideration the participants' unique cultural and spiritual/faith-based needs.

- The organization has developed an effective, person-centred model for participants who require in-home supports. Staff members in these arrangements are well trained and committed to provide individualized services. Although service provision sometimes involves complex interventions, staff members demonstrate dedication, competence, and compassion in providing services to participants with the greatest levels of need.

- OneSky's intensive family-based services are provided by compassionate, competent, and enthusiastic staff members who demonstrate a sincere interest in and respect for the participants. Staff members' employment longevity reflects their commitment to and support of the organization and its philosophy.

- The longstanding Supported Child Development program has effectively worked to build a centralized service-delivery hub for families with children with special needs. Program staff members indicated that they enjoy the daily energy and innovative activities that go into creating and sustaining a thriving program. Community consultants provide a bridge to help participants' families access the services they need to create holistic, integrated, community-based lives.

- OneSky's child/youth day care programs are in the process of transitioning to a more universal, play-based model founded in evidence-based principles that uses art and natural, child-directed play. The programs manage their waitlists with professionalism and care. They actively communicate with families in need of program services with grace and compassion at a time when exceptional day care is very limited in the region. The strong community-based partnerships the programs develop with schools, parents, and other entities foster environments in which participants thrive as well as a sense of family and community. Parents expressed deep appreciation for staff members' dedication and skills. They indicated that they feel safe leaving their children in the organization's care and trust that they will be well cared for. OneSky supports staff members to place their own children in the day care programs, which further demonstrates the organization's commitment to the participants' families and the community. As the saying goes, it takes a village to raise a child, and OneSky does just that. The working atmosphere of the child/youth day care programs, which is one of open, supportive communication among managers, site leaders, and staff members, is such that staff members stay with the organization for many years. Staff members expressed that they feel highly comfortable with the feedback, support, and effective conflict resolution that are ongoing in the team setting.

- OneSky helped design and build a state-of-the-art childcare facility called Little Learners Academy, which is the flagship of the day care program. Through this experience the organization has developed expertise needed to collaborate on another new building in the Penticton region.

- OneSky's counselling programs promote the development of a trusting relationship among participants and their therapists. Participants stated that the therapists are accessible, friendly, and helpful in providing tools that help them learn coping strategies. Resources are provided in environments that facilitate the development of warm, safe therapeutic relationships. Furthermore, team leadership demonstrates a dedication to provide accessible services to families in need and to effectively advocate with funders on their behalf.

- The Diversion/Intervention program is committed to support the participants to stay connected and engaged in school. Services are delivered by a team with specialized knowledge of the various theories and approaches to educational support and behavioural health services. Team members continually establish community partnerships with other agencies and stakeholders for the purpose of coordinating education and fostering academic success for the participants.

- Staff members in the Promotion/Prevention program consistently expressed commitment and enthusiasm when describing their experiences and appreciation for the opportunities they have to assist the participants. For example, they make educational resources available to participants on a check-out basis to foster early education for participants aged birth to six years and their parents. It is evident that OneSky is committed to serve the community from the cradle onward.

- Family members were effusive in their praise of OneSky, using terms such as "spectacular" and "outstanding" to describe the organization.

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 non-conformance 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-centred philosophy
■ Organizational guidance
■ Leadership accessibility
■ Cultural competency and diversity
■ Corporate responsibility
■ Organizational fundraising, if applicable

Recommendations

There are no recommendations in this area.

1.B. Governance (Optional)

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 selection, orientation, development, leadership, structure, and performance
■ Linkage between governance and executive leadership
■ Board meetings and committee work
■ Executive leadership development, evaluation, and compensation

Recommendations

There are no recommendations in this area.

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
■ 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

There are no recommendations in this area.

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
- Safeguarding funds of persons served, if applicable
- Review/audit of financial statements

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

1.G.4.a.
1.G.4.b.
1.G.4.c.
1.G.4.d.
Some programs of OneSky are provided under contract with individuals. If any of the services delivered by the program seeking accreditation are provided under contract with another organization or individual, documented reviews of the contract services should assess performance in relation to the scope and requirements of their contracts, ensure that they follow all applicable policies and procedures of the organization, ensure that they conform to CARF standards applicable to the services they provide, and be performed at least annually.

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

■ Competency-based training on safety procedures and practices
■ Emergency procedures
■ Access to first aid and emergency information
■ Critical incidents
■ Infection control
■ Health and safety inspections

Recommendations

1.H.8.a.(1)
1.H.8.a.(2)
1.H.8.b.(1)
1.H.8.b.(2)
1.H.8.b.(3)
1.H.8.b.(4)
1.H.8.b.(5)
As an organization that provides services in locations that are not owned/leased or controlled/operated by the organization, OneSky is urged to implement written procedures that address safety at the service delivery site for participants and personnel, including consideration of any emergency procedures that may already be in place at the service delivery site; the physical environment, including accessibility, of the service delivery site; basic needs in the event of an emergency; actions to be taken in the event of an emergency; and provisions for communication by personnel while providing services regarding decisions to continue or discontinue services.

1.H.13.h.
When transportation is provided for participants, written emergency procedures should consistently be available in the vehicle(s).

Consultation

▪ OneSky might consider maintaining safety data sheets for over-the-counter products to help ensure their proper handling, storage, and disposal.

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 behavioural 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 centre on enhancing the lives of persons served.

Key Areas Addressed

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

Recommendations

1.I.1.
OneSky is urged to document the composition of its workforce, including all human resources involved in the delivery, oversight, and support of the programs/services seeking accreditation.

1.I.5.a.(5)
Onboarding and engagement activities should include orientation that addresses the organization's risk management plan.

1.I.7.a.(1)
1.I.7.a.(2)
1.I.7.b.
1.I.7.c.
1.I.7.d.
1.I.7.e.
1.I.7.f.
It is recommended that workforce development activities include identification of competencies to support the organization in the accomplishment of its mission and goals and to meet the needs of the participants; assessment of competencies; identification of timeframes/frequencies related to the competency assessment process; competency development, including the provision of resources; performance appraisal; and education and training.

1.I.8.a.
1.I.8.b.
1.I.8.c.
1.I.8.d.
1.I.8.e.
1.I.8.f.
1.I.8.g.
1.I.8.h.
OneSky implements written procedures for performance appraisal that address employees. However, the organization should implement written procedures for performance appraisal that comprehensively address the identified workforce, the criteria against which people are being appraised, involvement of the person being appraised, documentation requirements, timeframes/frequencies related to the performance appraisal process, measurable goals, sources of input, and opportunities for development.

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
- Technology and system plan implementation and periodic review
- Technology policies and procedures
- Written procedures for the use of information and communication technologies (ICT) in service delivery, if applicable
- ICT instruction and training, if applicable
- Access to ICT information and assistance, if applicable
- Maintenance of ICT equipment, if applicable
- Emergency procedures that address unique aspects of service delivery via ICT, if applicable

Recommendations

1.J.2.a.(1)
1.J.2.a.(2)
1.J.2.b.(1)
1.J.2.b.(2)
1.J.2.b.(3)
1.J.2.b.(4)
1.J.2.b.(5)
1.J.2.b.(6)
1.J.2.b.(7)
1.J.2.c.(1)
1.J.2.c.(2)
1.J.2.c.(3)
1.J.2.c.(4)
1.J.2.c.(5)
1.J.2.c.(6)
1.J.2.d.
1.J.2.e.
1.J.2.f.
OneSky is urged to implement a technology and system plan that is based on its current use of technology and data and identification of gaps and opportunities in the use of technology. The plan should include goals, priorities, technology acquisition, technology maintenance, technology replacement, resources needed to accomplish the goals, and timeframes; support the business processes of the organization, protection of sensitive data, efficient operations, effective service delivery, access to services, and performance improvement; align with the organization's strategic plan; be reviewed for relevance; and be updated as needed.

1.J.3.d.(4)
The organization should implement policies and procedures in the area of security, including decommissioning of physical hardware and data destruction.

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 OneSky stated that it conducted a test of its procedures for business continuity/disaster recovery, the test was not documented. A test of the organization's procedures for business continuity/disaster recovery should be conducted at least annually; be 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; and be evidenced in writing, including the analysis.

Consultation

- It is apparent that OneSky embraces the use of technology and intends to expand its use in the future. The organization might consider initiating a participants corner on its website where documents, such as the formal complaint procedure, participants' rights, and code of ethics, could be made available in alternate formats and languages. Links to this information might be provided in the organization's printed materials for ease of stakeholder access.

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

1.K.2.a.(3)
The rights of the participants should be communicated to the participants at least annually for participants served in a program longer than one year. The annual review might be held as part of the annual program orientation for returning participants.

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.

Consultation

- OneSky has owned and leased sites. It might consider conducting and separately documenting site-specific reviews for identification of barriers in the areas of architecture, environment, transportation, and technology since those barriers could differ by site. The organization might also consider identifying the stakeholder group(s) that each identified barrier affects.

- The organization documents requests for reasonable accommodations in participant and personnel files, as appropriate. It is suggested that an analysis of requests for reasonable accommodations be completed on an annual basis for trending purposes.

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

1.M.3.a.(5)
1.M.3.a.(6)(a)
1.M.3.a.(6)(b)
1.M.3.a.(6)(c)
1.M.3.a.(7)
1.M.3.a.(8)(a)
1.M.3.a.(8)(b)
1.M.3.a.(9)(e)
1.M.3.b.
1.M.3.c.
It is recommended that the organization's performance measurement and management plan address the extent to which the data collected measure what they are intended to measure (validity), the process for obtaining data in a consistent manner (reliability) that will be complete and accurate, and timeframes for the analysis of data and communication of results and how performance information is communicated. The plan should be reviewed at least annually for relevance and be updated as needed.

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

1.N.1.b.
Following the implementation of a comprehensive performance measurement and management plan that includes timeframes for the analysis of data, it is recommended that the documented analysis of service delivery performance be completed in accordance with the timeframes outlined in the performance measurement and management plan.

1.N.2.b.
Once timeframes for the analysis of data have been incorporated in the performance measurement and management plan, it is recommended that the documented analysis of business function performance consistently be completed in accordance with the timeframes outlined in the performance measurement and management plan.

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 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

There are no recommendations in this area.

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

Recommendations

2.B.5.b.(2)
2.B.5.b.(3)
The coordinated individualized service plan should consistently identify specific measurable objectives and methods/techniques to be used to achieve the objectives.

2.B.7.a.(1)
2.B.7.a.(2)
2.B.7.a.(3)
2.B.7.a.(4)
2.B.7.a.(5)
2.B.7.b.
Although OneSky has developed excellent risk assessments, they are inconsistently used. When applicable to the participant and the participant's goals and outcomes, the participant and/or family services and/or their legal representatives should consistently be involved in assessing potential risks to each participant's health in the community, assessing potential risks to each person's safety in the community, deciding whether to accept situations with inherent risks, identifying actions to be taken to minimize risks that have been identified, and identifying individuals responsible for those actions. Risk assessment results should consistently be documented in the individual service plan.

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.5.d.(3)

As an organization that manages medications for participants, OneSky is urged to implement written procedures that address administration of medications by personnel, consistently including documentation of the use and benefits, or lack thereof, of as-needed (PRN) doses.

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-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.

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 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

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.

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 survey application or identified as a site on the accreditation outcome.

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.

4.P. Personal Supports Services (PSS)

Description

Personal supports services are designed to provide instrumental assistance to persons and/or families served. They may also support or facilitate the provision of services or the participation of the person in other services/programs, such as employment or community integration services. The services are supports that are not provided by skilled healthcare providers (please see the Glossary for a definition of skilled healthcare provider), are primarily delivered in the home or community, and typically do not require individualized or in-depth service planning.

Services can include direct personal care supports such as personal care attendants and housekeeping and meal preparation services; services that do not involve direct personal care supports such as transporting persons served, information and referral services, translation services, senior centres, programs offering advocacy and assistance by professional volunteers (such as legal or financial services), training or educational activities (such as English language services), mobile meal services; or other support services, such as supervising visitation between family members and parent aides.

A variety of persons may provide these services/supports other than a program's staff, such as volunteers and subcontractors.

Key Areas Addressed

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

Recommendations

There are no recommendations in this area.

4.V. Home and Community Services (HCS)

Description

Home and community services (HCS) are person centred and foster a culture that supports autonomy, diversity, and individual choice. Individualized services are referred, funded, and/or directed by a variety of sources. In accordance with the choice of the person served, the services provided promote and optimize the activities, function, performance, productivity, participation, and/or quality of life of the person served.

The home and community services may serve persons of any ages, from birth through end of life. Services may be accessed in a variety of settings, including, but not limited to, private homes, residential settings, schools, workplaces, community settings, and health settings. Services are provided by a variety of personnel, which may include health professionals, direct support staff, educators, drivers, coaches, and volunteers, and are delivered using a variety of approaches, supports, and technology.

Services are dynamic and focus, after a planning process, on the expectations and outcomes identified by both the person served and the service providers. The service providers are knowledgeable of care options and linkages to assist the person served; use resources, including technology, effectively and efficiently; and are aware of regulatory, legislative, and financial implications that may impact service delivery for the person served. The service providers are knowledgeable of their roles in and contribution to the broader health, community, and social services systems.

Home and community services must include at least one of the following service delivery areas:

■ Services for persons who are in need of specialized services and assistance due to illness, injury, impairment, disability, or a specific age or developmental need.
■ Services for persons who need assistance to access and connect with family, friends, or coworkers within their homes and communities.
■ Services for persons who need or want help with activities in their homes or other community settings.
■ Services for caregivers that may include support, counselling, education, respite, or hospice.

Key Areas Addressed

■ Knowledge and identification of appropriate community service options
■ Person-centred individualized services
■ Collaboration with the family/support system
■ Personnel competencies
■ Safety and disaster preparedness
■ Education to persons served, family/support system, and other stakeholders

Recommendations

There are no recommendations in this area.

2020 Child and Youth Services standards were also applied during this survey. The following sections of this report reflect the application of those standards.

Section 2. General Program Standards

Description

For an organization to achieve quality services, the philosophical foundation of child- and family-centred care practices must be demonstrated. Children/youth and families are involved in the design, implementation, delivery, and ongoing evaluation of applicable services offered by the organization. A commitment to quality and the involvement of the persons served span the entire time that they are involved with the organization. The service planning process is individualized, establishing goals and objectives that incorporate the unique strengths, needs, abilities, and preferences of the person served. The persons served have the opportunity to transition easily through a system of care.

The guiding principles include:

■ Child/youth and family driven services.
■ Promotion of resiliency.
■ Cultural and linguistic competence.
■ Strengths-based approach.
■ Focus on whole person in context of family and community.
■ Trauma-informed, where applicable.

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.

The organization, where appropriate, provides information to the child/youth served and in collaboration with the parent(s) and/or legal representative.

Child- and family-centred care includes the following:

■ Recognition that, when possible, the family is the constant in the child's/youth's life, while the service systems and personnel within those systems fluctuate.
■ Facilitation of family-professional collaboration at all levels of care.
■ Sharing of unbiased and complete information about a child's/youth's care on an ongoing basis, in an appropriate and supportive manner.
■ Implementation of appropriate policies and programs that are comprehensive and provide necessary support to meet the needs of children/youth and families.
■ Recognition of child/youth and family strengths and individuality and respect for different methods of coping.
■ Understanding and incorporating the developmental needs of children/youth and families into service systems.
■ Assurance that the design of health and social service delivery systems is flexible, accessible, and responsive to the needs of children/youth and families.

Key Areas Addressed

- Written plan that guides service delivery
- Team member responsibilities
- Developmentally appropriate surroundings and equipment
- Crisis intervention provided
- Medical consultation
- Services relevant to diversity
- Collaborative partnerships
- Child/youth/family role in decision making
- Policies and procedures that facilitate collaboration
- Coordination of services for child/youth
- Qualifications and competency of direct service staff
- Family participation
- Team composition/duties
- Relevant education
- Clinical supervision
- Assistance with advocacy and support groups
- Effective information sharing
- Arrangement or provision of appropriate services
- Gathering customer satisfaction information

Recommendations

2.A.16.d.(1)
Personnel, in response to the needs of the participants, should consistently document the attendance of participants at team meetings.

2.A.21.a.
2.A.21.b.
2.A.21.c.
2.A.21.d.
2.A.21.e.
2.A.21.f.
2.A.21.g.(1)
2.A.21.g.(2)
2.A.21.g.(3)
2.A.21.g.(4)
2.A.21.g.(5)
2.A.21.h.
2.A.21.i.
2.A.21.j.
OneSky uses a variety of tools and forms to document the ongoing supervision of direct care personnel. However, documentation is inconsistent across programs. It is recommended that documented ongoing supervision of direct service personnel consistently address accuracy of assessment skills, when applicable; ability to recognize risk factors for suicide and other dangerous behaviours and take appropriate actions according to their role; proficiency of referral skills, when applicable; the appropriateness of the services or supports selected relative to the specific needs of each participant; service/treatment effectiveness as reflected by the participants meeting their individual goals; the provision of feedback that enhances the skills of direct service personnel; issues of ethics, legal requirements, boundaries, self-care, and secondary trauma; service documentation issues identified through ongoing records review; cultural competency issues; and model fidelity, when implementing evidence-based practices. Leadership might consider consolidating the organization's current supervision documentation forms into a master form and written procedures that conform to all elements of the associated CARF standard. It is also

suggested that the policy regarding supervision of all individuals providing direct services be reviewed to ensure that it remains relevant and adequate to the organization's needs and to the respective CARF standards. Furthermore, OneSky is encouraged to develop a method for specifying the program-specific training to be provided to each staff member at regular intervals and tracking to ensure that the training is provided.

2.B. Screening and Access to Services

Description

The process of screening and assessment is designed to determine a person's eligibility for services and the organization's ability to provide those services. A person-centred assessment process helps to maximize opportunities for the persons served to gain access to the organization's programs and services. Each person served is actively involved in, and has a significant role in, the assessment process. Assessments are conducted in a manner that identifies the historical and current information of the person served as well as the person's strengths, needs, abilities, and preferences. Assessment data may be gathered through various means, including face-to-face contact, telehealth, or written material, and from various sources, including the person served, the person's family or significant others, and external resources.

Key Areas Addressed

■ Policies and procedures defining access
■ Primary assessment
■ Waiting list criteria
■ Interpretive summary
■ Orientation to services

Recommendations

2.B.1.e.
The exclusionary or ineligibility criteria set forth in OneSky's program policies and operations manuals are somewhat inconsistent. The program is urged to implement policies and written procedures that consistently define exclusionary or ineligibility criteria.

Consultation

▪ In programs where the child-age participant is the central participant, it is suggested that the assessment section pertaining to family issues be expanded to become more detailed and specific. The narrative format of this section on some forms appears to not be conducive to the collection of consistent information. Given that several forms are used in the programs to capture information, it is suggested that each form be reviewed against the ShareVision template and internal intake forms to ensure that it fully supports the ease and comprehensiveness of collection of assessment information as set forth in the associated CARF standard.

2.C. Individualized Plan

Description

Each person served is actively involved in and has a significant role in the individual planning process and determining the direction of the individualized plan. The individualized plan contains goals and objectives that incorporate the unique strengths, needs, abilities, and preferences of the persons served, as well as identified challenges and potential solutions. Individualized plans consider the significance of traumatic events. The individualized plan may also be referred to as a person-centred plan, service plan, treatment plan, case plan, or plan of care. In programs that serve young children, or families as a unit, the plan is often family focused rather than focused on a specific child.

Key Areas Addressed

■ Participation of child/youth in preparation of individual plan
■ Components of individual plan
■ Co-occurring disabilities/disorders
■ Content of program notes

Recommendations

There are no recommendations in this area.

Consultation

▪ It is suggested that the narrative in some progress notes be expanded to include more specificity regarding the measurability components of specific service objectives.

2.D. Transition/Discharge

Description

Transition, continuing care, or discharge planning assists the persons served to move from one level of care to another within the organization or to obtain services that are needed but are not available within the organization. The transition process is planned with the active participation of each person served. Transition may include planned discharge, placement on inactive status, movement to a different level of service or intensity of contact, reunification, re-entry in a juvenile justice system, or transition to adulthood.

The transition plan is a document that is developed in collaboration with and for the person served, family, and other interested persons who have participated with the individual in services. It is meant to be a plan that the person served uses when leaving the program to identify important supports and actions to prevent the need to return to the program or other higher level of care.

A discharge summary is a document written by the program when the person leaves the program (planned or unplanned) and includes information about the person's progress while in the program, including the completion of goals. It is a document that is intended for the record of the person served and released, with appropriate authorization, to describe the course of services that the organization provided and the response by the person served.

Just as the assessment is critical to the success of treatment, transition services are critical for the support of the individual's ongoing well-being. The program takes a proactive approach to follow-up with persons served after discharge to gather information related to their post discharge status and to assist in determining the effectiveness of services and whether additional services were or are currently needed.

Key Areas Addressed

■ Transition/discharge planning
■ Components of transition plan
■ Follow-up after program participation

Recommendations

2.D.11.d.

OneSky's programs use ShareVision as well as a program-based form to prepare the written discharge summary. During this survey, inconsistencies were observed among specific notations regarding participants' progress toward goal achievement. For all participants leaving services, the written discharge summary prepared should consistently describe the extent to which established goals and objectives were achieved. A minor form revision could be helpful in achieving consistency.

2.E. Medication Use

Description

Medication use is the practice of controlling, administering, and/or prescribing medications to persons served in response to specific symptoms, behaviours, or conditions for which the use of medications is indicated and deemed efficacious. The use of medication is one component of treatment directed toward maximizing the functioning of the persons served while reducing their specific symptoms. Prior to the use of medications other therapeutic interventions should be considered, except in circumstances that call for a more urgent intervention.

Medication use includes all prescribed medications, whether or not the program is involved in prescribing, and may include over-the-counter or alternative medications. Alternative medications can include herbal or mineral supplements, vitamins, homeopathic remedies, hormone therapy, or culturally specific treatments.

Medication control is identified as the process of physically controlling, storing, transporting, and disposing of medications, including those self-administered by the person served.

Medication administration is the preparing and giving of prescription and non-prescription medications by authorized and trained personnel to the person served. Self-administration is the application of a medication (whether by oral ingestion, injection, inhalation, or other means) by the person served to the individual's own body. This may include the program storing the medication for the person served, personnel handing the bottle or prepackaged medication dose to the person served, instructing or verbally prompting the person served to take the medication, coaching the person served through the steps to ensure proper adherence, and/or closely observing the person served self-administering the medication.

Prescribing is the result of an evaluation that determines if there is a need for medication and what medication is to be used in the treatment of the person served. Prior to providing a prescription for medication, the prescriber obtains the informed consent of the individual authorized to consent to treatment and, if applicable, the assent of the person served. Prescription orders may be verbal or written and detail what medication should be given to whom, in what formulation and dose, by what route, when, how frequently, and for what length of time.

Key Areas Addressed

■ Scope of medication services provided by the program(s) seeking accreditation
■ Education and training provided to direct service personnel at orientation and at least annually
■ Education and training provided to persons served, family members, and others identified by the persons served, in accordance with identified needs
■ Written procedures that address medication control, administration, and/or prescribing, as applicable to the program
■ Use of treatment guidelines and protocols to promote prescribing consistent with standards of care, if applicable to the program
■ Peer review of prescribing practices, if applicable to the program

Recommendations

There are no recommendations in this area.

2.G. Records of the Person Served

Description

A complete and accurate record is developed to ensure that all appropriate individuals have access to relevant clinical and other information regarding each person served.

Key Areas Addressed

■ Authorization for release of information
■ Timeframes for entries to records
■ Individual record requirements
■ Duplicate records

Recommendations

2.G.2.

All documents generated by OneSky that require signatures should consistently include original or electronic signatures. There was evidence of inconsistency in the inclusion of the names and signatures of caregivers on some forms reviewed during this survey. The organization is encouraged to develop a system for ensuring consistent practice in this regard.

2.H. Quality Records Review

Description

The program has systems and procedures that provide for the ongoing monitoring of the quality, appropriateness, and utilization of the services provided. This is largely accomplished through a systematic review of the records of the persons served. The review assists the program in improving the quality of services provided to each person served.

Key Areas Addressed

■ Focus of quarterly review
■ Use of information from quarterly review

Recommendations

There are no recommendations in this area.

Consultation

■ Programs that conduct quarterly reviews of the records of the participants utilize various record review form formats. It is suggested that a single, comprehensive record review form be developed and adopted that is applicable across the programs to enhance the quality of the record review process, recordkeeping, communication among staff members, and performance improvement.

Section 3. Core Program Standards

3.F. Child/Youth Day Care

Description

A child/youth day care program provides care, development, and supervision for an identified portion of the day. Services are provided to children/youth temporarily entrusted to the program during the parent's/guardian's/caregiver's involvement at work, school, or other short-term activity. Day care programs may be located in a freestanding facility or in a designated area within a school, home, or other community setting.

Key Areas Addressed

■ Training of providers
■ Parent/guardian consent
■ Program activities
■ Information provided to parents/guardians
■ Administration of medication

Recommendations

3.F.2.a.(1)
3.F.2.a.(2)
3.F.2.b.(1)
3.F.2.b.(2)
3.F.2.b.(3)
3.F.2.b.(4)
3.F.2.b.(5)
3.F.2.b.(6)
3.F.2.b.(7)
3.F.2.b.(8)
3.F.2.b.(9)
3.F.2.b.(10)
It is recommended that personnel consistently receive documented, competency-based training to meet the identified needs of the participants at orientation and regular intervals that covers attachment theory, child/youth growth and development, behaviour management skills, learning theory, cultural competency and diversity, the effects of placement on children/youth, applicable legal issues, communication skills, required medications and/or medical services, and other specialized training as needed. The program is encouraged to utilize its already scheduled professional development days to provide additional training to personnel in the specific areas addressed in the respective CARF standard. It might also consider using a software application to generate reminders for management relative to personnel at set intervals, as appropriate.

3.J. Counselling/Outpatient

Description

Counselling/outpatient programs provide culturally and linguistically appropriate services that include, but are not limited to, individual, group, and family counselling and education on wellness, recovery, and resiliency. These programs offer comprehensive, coordinated, and defined services that may vary in level of intensity. Counselling/outpatient programs may address a variety of needs, including, but not limited to, situational stressors,

family relations, interpersonal relationships, behaviour management, mental health issues, life span issues, psychiatric illnesses, substance use disorders and other addictive behaviours, and the needs of victims of abuse, neglect, domestic violence, or other traumas.

Key Areas Addressed

■ Service modalities
■ Evidence-based practice

Recommendations

There are no recommendations in this area.

3.N. Diversion/Intervention

Description

Diversion/intervention programs may include programs traditionally thought of as intervention that focus on changing outcomes for persons served and targeting antecedents of the problem. Diversion/intervention programs utilize strategies designed to intervene with at-risk or identified individuals to reduce or eliminate identified concerns. Within the child welfare field, examples include alternative response, differential response, or multiple response systems as well as kinship diversion.

Diversion/intervention programs may serve persons on a voluntary and/or involuntary basis. Programs that serve persons on an involuntary basis are designed to implement special strategies for engaging this population.

Diversion programs may include programs such as juvenile justice/court diversion, substance abuse diversion, truancy diversion, DUI/OWI classes, report centres, home monitoring, after-school tracking, anger management, and building healthy relationships.

Intervention programs target persons who are exhibiting early signs of identified problems and are at risk for continued or increased problems.

Key Areas Addressed

■ Personnel qualifications
■ Appropriate program activities
■ Public awareness
■ Program strategies

Recommendations

There are no recommendations in this area.

3.O. Early Childhood Development

Description

An early childhood development program promotes healthy physical, mental, and emotional development of the child. Early childhood development programs provide services and resources that assist the parent(s)/legal guardian(s) to identify and accept responsibility for the management of their child's health and development. Services may be provided in congregate or community settings or in a home setting and include education, training, and hands-on support. Services are directed to identified children and their families, and are designed to optimize

development, functioning, and resilience and prevent developmental delay. Such programs may also engage families, child care providers, and communities in planning for and providing inclusive child care in community settings that support the child's developmental goals.

These standards are aligned with the implementation of Quality Rating Improvement Systems (QRIS) utilized by many states in the US to assess, improve, and communicate the quality of services in early childhood development programs.

Early childhood development programs seeking accreditation are encouraged to use the CARF standards and the identified state QRIS when developing and providing services.

Some examples of programs include:

■ Families First
■ Early Intervention (Canada)
■ Supported child development programs
■ Home visitation
■ Family enhancement
■ Looking After Children
■ Building Blocks
■ Healthy Families America
■ Head Start
■ Better Beginnings, Better Futures
■ Child/youth development centres
■ Infant development programs
■ Birth to three (0–3) programs
■ First Steps
■ Early Start
■ Early Years

Key Areas Addressed

■ Collaborative services
■ Adequate supervision of children while participating
■ Provider training
■ Parent training

Recommendations

There are no recommendations in this area.

Consultation

▪ The program can provide evidence of the provision of documented, competency-based, and principled personnel training that meets the identified needs of the participants in various ways including training that is embedded in other training provided by OneSky or by third parties. Using a tracker could make it easier to ensure, on an ongoing basis, that the required training is consistently provided to all personnel, as applicable, in a timely manner. To its credit, the organization has dedicated professional development days on which it facilitates specific, focused conversations. It might also find that dedicating time to the topics listed in the elements of the associated CARF standard could further enhance staff development.

3.R. Intensive Family-Based Services

Description

Intensive family-based services are provided in a supportive and interactive manner and directed toward maintaining or restoring a healthy family relationship and building and strengthening the capacity of families to care for their children. The services are time limited and are initially intensive, based on the needs of the family. The services demonstrate a multisystemic approach and have a goal of keeping families together or supporting reunification when a child has been in an out-of-home placement. The services may include wraparound and family preservation type programs.

Key Areas Addressed

■ Services provided
■ Access to professionals
■ Clinical supervision

Recommendations

There are no recommendations in this area.

3.T. Promotion/Prevention

Description

Promotion/prevention programs are proactive and evidence-based/evidence-informed, striving to reduce individual, family, and environmental risk factors, increase resiliency, enhance protective factors, and achieve individual and comprehensive community wellness through a team or collaborative approach. Promotion/prevention programs utilize strategies designed to keep individuals, families, groups, and communities healthy and free from the problems related to alcohol or other drug use, mental health disorders, physical illness, parent/child conflict, abuse/neglect, exposure to and experience of violence in the home and community, and to inform the general public of problems associated with those issues, thereby raising awareness; or to intervene with at-risk or identified individuals to reduce or eliminate identified concerns. Programs may be provided in the community, school, home, workplace, or other settings. Programs that offer training to current or future child/youth personnel are also included.

Organizations may provide one or more of the following types of promotion/prevention programs, categorized according to the population for which they are designed:

■ Universal (Promotion) programs target the general population and seek to increase overall well-being and reduce the overall prevalence of problem behaviours, and include comprehensive, well-coordinated components for individuals, families, schools, communities, and organizations. Promotes positive behaviour and includes social marketing and other public information efforts.
■ Selected (Prevention) programs target groups that are exposed to factors that place them at a greater than average risk for the problem. These programs are tailored to reduce identified risk factors and strengthen protective factors. Examples of prevention programs include pregnancy prevention, drop-out prevention, Strengthening Families, substance abuse prevention, violence prevention, HIV prevention, smoking prevention, child abuse prevention, and suicide prevention.
■ Training programs provide curriculum-based instruction to active or future personnel in child and youth service programs. Examples of training programs include caseworker training, child welfare supervisory training, foster parent training, leadership training, guardian/guardian ad-litem training, and childcare assistant training.

Key Areas Addressed

■ Personnel qualifications
■ Appropriate program activities
■ Public awareness
■ Program strategies

Recommendations

There are no recommendations in this area.

Section 4. Core Residential Program Standards

4.C. Foster Family and Kinship Care

Description

Foster/kinship care is provided under a contract or agreement for the placement of a child/youth in a family setting outside the birth or adoptive family home. Foster/kinship care is provided to a child/youth who has been removed from the home and placed within a family setting temporarily until the child/youth can be reunified with the family or until it has been determined that another family-type setting or living environment is in the best interest of the child/youth. The courts are often involved in establishing this relationship.

Foster/kinship care is comprehensive and establishes a system of supports and services for the child/youth, the family of origin, and the foster/kinship family. Programs assist foster and/or kinship families to recognize their strengths and abilities to effect change for the child/youth and family in order to establish stability in the life of the child/youth. Foster/kinship care may include relative care, preadoption placements, or care in parent/counsellor homes. In Canada this would include such programs as out of care options and general foster care homes.

Key Areas Addressed

■ Advocacy
■ Provider training
■ Permanency planning
■ Needs of child/youth
■ Foster family requirements

Recommendations

There are no recommendations in this area.

4.E. Residential Treatment

Description

Residential treatment programs are organized and staffed to provide both general and specialized non-hospital-based interdisciplinary services 24 hours a day, 7 days a week for persons with behavioural health or co-occurring needs, including intellectual or developmental disabilities. Residential treatment programs provide environments in which the persons served reside and receive services from personnel who are trained in the delivery of services for persons with behavioural health disorders or related problems. These services are provided in a safe, trauma-informed, recovery-focused milieu designed to integrate the person served back into the community and living independently whenever possible. The program involves the family or other supports in services whenever possible.

Residential treatment programs may include psychiatric residential treatment facilities, therapeutic boarding schools, therapeutic wilderness programs, or other non-medical settings.

Key Areas Addressed

■ Interdisciplinary services
■ Creation of natural supports
■ Education on wellness, recovery, and resiliency
■ Community reintegration

Recommendations

There are no recommendations in this area.

Program(s)/Service(s) by Location

OneSky Community Resources Society

330 Ellis Street
Penticton BC V2A 4L7
CANADA

Home and Community Services
Supported Living
Counselling/Outpatient (Children and Adolescents)
Diversion/Intervention (Children and Adolescents)
Early Childhood Development (Children and Adolescents)
Foster Family and Kinship Care (Children and Adolescents)
Intensive Family-Based Services (Children and Adolescents)
Promotion/Prevention (Children and Adolescents)
Governance Standards Applied

Baskin 1

2434 Baskin Street
Penticton BC V2A 6R2
CANADA

Supported Living

Baskin 2

2450 Baskin Street
Penticton BC V2A 6R2
CANADA

Supported Living

Hand in Hand Infant Toddler Centre

158 Eckhardt Avenue
Penticton BC V2A 1Z3
CANADA

Child/Youth Day Care (Children and Adolescents)

HOU-150

150 McPherson Crescent
Penticton BC V2A 2N8
CANADA

Supported Living
Residential Treatment (Children and Adolescents)

HOU-154

154 McPherson Crescent
Penticton BC V2A 2N8
CANADA

Supported Living

Inclusion Services - Paper Shuffle

1140 Commercial Way
Penticton BC V2A 3H5
CANADA

Community Integration
Personal Supports Services

Little Explorers

110-216 Hastings Avenue
Penticton BC V2A 2V6
CANADA

Child/Youth Day Care (Children and Adolescents)

Little Learners Academy

1091 Timmins Street
Penticton BC V2A 5V3
CANADA

Child/Youth Day Care (Children and Adolescents)

Little Triumphs Early Childhood Centre

500 Edmonton Avenue
Penticton BC V2A 2H2
CANADA

Child/Youth Day Care (Children and Adolescents)

Oliver High School Childcare

6035 Spartan Street
Oliver BC V0X 1T4
CANADA

Child/Youth Day Care (Children and Adolescents)

School Based Supports - Princess Margaret AIM

120 Green Avenue West
Penticton BC V2A 3T1
CANADA

Diversion/Intervention (Children and Adolescents)

Tuc El Nuit Childcare

6648 Park Drive
Oliver BC V0H 1T4
CANADA

Child/Youth Day Care (Children and Adolescents)