CARF Accreditation Report
for
The Arc of Bristol County, Inc.

Three-Year Accreditation
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.
Organization
The Arc of Bristol County, Inc.
16 Hillside Avenue
Attleboro, MA 02703

Organizational Leadership
Diane Stoves, Director of Human Resources
Michael M. Andrade, MS, President/CEO
Paul Donnelly, Chief Financial Operator

Survey Number
153588

Survey Date(s)
February 7, 2022–February 8, 2022

Surveyor(s)
Kathy Leuelling, Administrative
Polly W. Davis, MA, CCC-SLP, Program

Program(s)/Service(s) Surveyed
Community Integration
Host Family/Shared Living Services

Previous Survey
March 25, 2019–March 26, 2019
Three-Year Accreditation

Accreditation Decision
Three-Year Accreditation
Expiration: March 31, 2025
Executive Summary

This report contains the findings of CARF’s site survey of The Arc of Bristol County, Inc. conducted February 7, 2022–February 8, 2022. 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, The Arc of Bristol County, Inc. demonstrated substantial conformance to the standards. The Arc of Bristol County provides a diverse array of supports across a geographic region that includes parts of Massachusetts and Rhode Island. The organization is recognized for the quality of services, willingness to provide supports based on the unmet needs of individuals in the region, and its advocacy both on behalf of and in conjunction with the individuals served and their families. The organization demonstrates a strong commitment to continuous improvement through implementation of the CARF standards. The organization is commended for the use of technology, including a continuous exploration that identifies new ways to use technology as a supplement for services. The organization has strong protocols for health and safety, workforce development, and risk management. The Arc of Bristol County has an opportunity for improvement noted in this report related to further development of the written performance measurement plan.

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

The Arc of Bristol County, Inc. 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 The Arc of Bristol County, Inc. was conducted by the following CARF surveyor(s):

- Kathy Leuelling, Administrative
- Polly W. Davis, MA, CCC-SLP, 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 The Arc of Bristol County, Inc. 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
- Host Family/Shared Living Services

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 The Arc of Bristol County, Inc. demonstrated the following strengths:

- The Arc of Bristol County is a recognized leader in the provision of services in the Massachusetts and Rhode Island region, providing a vast array of services and supports. The organization has a long history of advocacy and supports that encourage individuals served to participate in the process and advocate their rights and funding to ensure their quality of life.

- The Arc of Bristol County has an excellent leadership team that works in collaboration to guide the organization. The leadership team demonstrates a commitment to the mission and vision of the organization and to making the provision of quality supports a priority. It is noted that the leadership team includes a good mix of leaders new to the role within the past few years and others who have been a part of the organization for many years. There is a sense of enthusiasm and love of the work among the leadership team that seems to be contagious. It is easy to see how the culture cascades from leadership throughout the organization.
The organization is commended for the investment in and use of technology. In addition to Relias and Therap®, the organization is preparing to implement True Link debit cards for the representative payee program in order to give individuals served greater access to their personal funds while maintaining security measures to avoid financial exploitation.

The organization has a robust safety program with procedures, drills, and inspections. One of the most unique features is iAuditor, an electronic inspection program that guides the inspection and incorporates pictures of each item on the inspection checklist as backup. Areas needing maintenance are flagged, and completion of the maintenance is added with picture verification in order to close the item. The system aggregates data and information from the inspections for use by the safety committee to address and identify trends or action items.

Risk management is a priority within the organization. Areas of exposure are identified and monitored with a tracking system that is consolidated quarterly. The report generated provides the data in a way that is easily analyzed for trends and can be narrowed down to specific locations or programs if needed in order to examine patterns.

The organization has continued to focus on facility improvements and planned growth despite the demands placed on resources by the COVID-19 pandemic. One location has been remodeled to provide greater accessibility to the lower level and expand space for the day habilitation program. In addition, two new homes are being built to expand support for individuals with acquired brain injury.

The Arc of Bristol County makes quality a high priority. The organization has added a new position for a quality assurance and training coordinator and brought in a consultant to work with and train program staff to complete quality assessments, recognize areas for improvement, and implement recommendations. The data collection system is extensive, providing the information needed to assess quality outcomes, and develop continuous improvement plans.

One of the strengths of the organization is its staff. The organization excels in having a vibrant, compassionate, understanding, loving, and openly communicative group of staff members who offer a safe and welcoming atmosphere that individuals served and their families feel is familylike, from the administrative level through all service providers to individuals receiving services. The words and actions of each staff member demonstrate that the mission, values, and goals of the organization are uppermost in their daily supports as they strive to provide health, wellness, and independence for the individuals they serve. Staff members are also very proud of their work and enjoy working for the organization. They expressed that they feel appreciated by the administration as well as the individuals served and, in turn, feel that they are really helping individuals served be successful and work toward independence.

Across the board, services are top quality and widely varied to meet the diverse populations served. The organization is continually assessing its ability to continue providing services in different areas, and it openly refers individuals elsewhere if it not able to provide the superior quality services they need. Services were able to continue during the COVID-19 pandemic by providing virtual services.

Concerns for health and safety have a strong place throughout the organization. There is an extensive risk assessment for individuals served, which follows through with decisions to accept or reject a risk, develops actions to minimize risks, and thoroughly documents the outcomes found.

The organization enjoys a very positive reputation and presence throughout its catchment areas. Satisfaction is high among individuals served, their families, funding sources, and outside resources. The forward-thinking program ideas that are under consideration as the organization continues to expand its programs are noteworthy, particularly the shared living program.

The lengths that the organization goes to in matching host families with individuals served is just one example of the dedication of its staff. The personal spaces of the individuals served are definitely a portrayal of the individuals’ personalities and personal choices. The organization’s home and family assessment is quite detailed.
When staff members were asked to share things they were proud of, the responses were overwhelming. The pride staff members take in the accomplishments of the individuals served is a palpable theme across the organization’s levels of service. Caregiver spotlights and highlights is a noteworthy practice, as is the in-depth telehealth processes used. The Family Advisory Council has proven to be a beneficial service for families and has elevated family satisfaction, as the organization responds quickly to needs and concerns of the families.

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 it’s 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
- The organization follows investigation protocols in the personnel policy for investigation of ethics violations. However, it is suggested that the organization include the investigation procedure in the ethics policy and consider whether timeframes for investigations might differ from other types of personnel concerns.

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
There are no recommendations in this area.

Consultation
▪ Timeframes for documentation in the records of the individuals served are addressed in several documents used by the organization. However, it is suggested that the organization develop one consolidated policy regarding documentation in order to ensure that staff members have a clear understanding of expectations.

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
There are no recommendations in this area.

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.

Consultation
- The organization might consider linking employee goals in the evaluation to the program/department objectives from the performance measurement plan. In addition to ensuring that goals are measurable, this could also help give employees a better understanding of their roles in the overall success of the program and the individuals served.
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
- Written procedures for the use of information and communication technologies (ICT) in service delivery, if applicable
- ICT instruction and training, if applicable
- Provision of information related to ICT, if applicable
- Maintenance of ICT equipment, if applicable
- Emergency procedures that address unique aspects of service delivery via ICT, if applicable

Recommendations
There are no recommendations in this area.

Consultation
- The operations manager provides training and updates to employees on cybersecurity. Because the organization is using Relias for other training, the organization might consider using the cybersecurity module in Relias as a means of incorporating competency-based training on the subject.

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’s use of anti-bullying training is noteworthy. It is suggested that the use of the anti-bullying training be added to the handbooks provided to the individuals served.
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

1.M.3.a.(1)
1.M.3.a.(3)(a)
1.M.3.a.(3)(b)
1.M.3.a.(3)(c)
1.M.3.a.(3)(d)
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.(8)(a)
1.M.3.a.(8)(b)
1.M.3.a.(9)(e)

The organization has implemented a performance measurement plan. However, it is recommended that the organization further develop the performance measurement and management plan to address collection of relevant data on the characteristics of the individuals served; the collection of data about the individuals served at the beginning of services, appropriate intervals during services, the end of services, and point(s) in time following services; 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; timeframes for analysis of data and communication of results; and how performance information is communicated.

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.

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 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 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
There are no recommendations in this area.

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.E. Host Family/Shared Living Services (HF/SLS)

Description
Host family/shared living services assist a person served to find a shared living situation in which the person is a valued person in the home and has supports as desired to be a participating member of the community. An organization may call these services, which are provided under a contract or written agreement with the host family/shared living provider, a variety of names, such as host family services, shared living services or supports, alternative family living, structured family care giving, family care, or home share.

Getting the person in the right match is a critical component to successful host family/shared living services. The organization begins by exploring with the person served what constitutes quality of life for the individual and identifies applicant host family/shared living providers who are a potential match with the person’s identified criteria. The person served makes the final decision of selecting a host family/shared living provider.

Safety, responsibility, and respect between or amongst all people in the home are guiding principles in these services. Persons are supported to have meaningful reciprocal relationships both within the home, where they contribute to decision making, and in the community. The host family/shared living provider helps the person served to develop natural supports and strengthen existing networks. Relationships with the family of origin or extended family are maintained as desired by the person served. The host family/shared living provider supports the emotional, physical, and personal well-being of the person.
Persons develop their personal lifestyle and modify the level of support over time, if they so choose. The host family/shared living provider encourages and supports the person served to make decisions and choices. The host family/shared living provider does not necessarily have to be a family, as it could be an individual supporting the person. Although the “home” is generally the host family/shared living provider’s home or residence, it may also be the home of the person served.

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

■ Quality of life as identified by the person served is enhanced.
■ Increased independence.
■ Increased community access.
■ Persons served choose whom they will live with and where.
■ Participation of the persons in the community.
■ Community membership.
■ Support for personal relationships.
■ Increased natural supports.
■ Strengthened personal networks.
■ Supports accommodate individual needs.
■ Persons feel safe.
■ Persons feel that the supports they need/want are available.
■ Persons decide where they live.
■ Persons feel valued.
■ Persons have meaningful relationships.
■ Persons develop natural supports.
■ Persons participate in their community.

Key Areas Addressed
■ Appropriate matches of non-family participants with homes
■ Contracts that identify roles, responsibilities, needs, and monitoring
■ Needed supports
■ Community living services in a long-term family-based setting
■ Sense of permanency

Recommendations
There are no recommendations in this area.

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.

**Consultation**

- The day habilitation program has just completed a lengthy ramp to the lower level of its building in Attleboro. The organization might consider painting murals along the walls. This could become a local artist’s project.
Program(s)/Service(s) by Location

The Arc of Bristol County, Inc.
16 Hillside Avenue
Attleboro, MA 02703
Host Family/Shared Living Services

Attleboro Day Habilitation
141 Park Street
Attleboro, MA 02703
Community Integration

Day Habilitation Services
5 Mill Street
Middleboro, MA 02346
Community Integration

Shared Living Services
437 Bay Street
Taunton, MA 02780
Host Family/Shared Living Services