CARF Accreditation Report

for

Okanagan-Similkameen Neurological 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

Okanagan-Similkameen Neurological Society
103 - 550 Carmi Avenue
Penticton BC V2A 3G6
CANADA

Organizational Leadership

Heather Miller, Executive Director
Janet Glowa, Executive Assistant
Melissa Tumlinson, Finance Manager

Survey Number

179999

Survey Date(s)

March 13, 2024–March 15, 2024

Surveyor(s)

Jeff Harrison, Administrative
Laura Lewis, Program

Program(s)/Service(s) Surveyed

Services for Children and Youth: Child and Adolescent Services
Services for Children and Youth: Child and Adolescent Services (Autism Spectrum Disorder-Children and Adolescents)
Services for Children and Youth: Early Intervention Services

Previous Survey

February 24, 2021–February 26, 2021
Three-Year Accreditation

Accreditation Decision

Three-Year Accreditation
Expiration: March 31, 2027

Executive Summary

This report contains the findings of CARF's site survey of Okanagan-Similkameen Neurological Society conducted March 13, 2024–March 15, 2024. This report includes the following information:

- Documentation of the accreditation decision and the basis for the decision as determined by CARF's consideration of the survey findings.

- Identification of the specific program(s)/service(s) and location(s) to which this accreditation decision applies.

- Identification of the CARF surveyor(s) who conducted the survey and an overview of the CARF survey process and how conformance to the standards was determined.

- Feedback on the organization's strengths and recognition of any areas where the organization demonstrated exemplary conformance to the standards.

- Documentation of the specific sections of the CARF standards that were applied on the survey.

- Recommendations for improvement in any areas where the organization did not meet the minimum requirements to demonstrate full conformance to the standards.

- Any consultative suggestions documented by the surveyor(s) to help the organization improve its program(s)/service(s) and business operations.

Accreditation Decision

On balance, Okanagan-Similkameen Neurological Society demonstrated substantial conformance to the standards. Okanagan-Similkameen Neurological Society (OSNS) is a well-respected provider of services to children with special needs and their families. Families whose children receive services from the organization spoke passionately about the quality of the services provided and the impact that the services have on the lives of their children. Organizational leadership is committed to its mission and vision, and it strives to ensure that all measures are taken to ensure that the children are offered a full range of services. The organization is singularly focused on ensuring the best outcomes possible for the children served. There are some opportunities for improvement noted within this report, including completing tests of business continuity/disaster recovery plans, further expanding a performance measurement and improvement plans, completing medication management training with staff, and completing an analysis of formal complaints. The organization appears to have the capacity to address the areas for improvement and continue to implement CARF standards. The receptiveness with which OSNS's leadership received feedback is appreciated and instils confidence in its commitment to the accreditation process and to continuously improving the services provided.

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

Okanagan-Similkameen Neurological 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 Okanagan-Similkameen Neurological Society was conducted by the following CARF surveyor(s):

- Jeff Harrison, Administrative
- Laura Lewis, 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 Okanagan-Similkameen Neurological 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):

- Services for Children and Youth: Child and Adolescent Services

- Services for Children and Youth: Child and Adolescent Services (Autism Spectrum Disorder-Children and Adolescents)

- Services for Children and Youth: Early Intervention 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 Okanagan-Similkameen Neurological Society demonstrated the following strengths:

- OSNS is acknowledged for the resilience that it has shown over the past few years. Despite the challenges presented by the COVID-19 pandemic, the uncertainty of the labour market, changes in leadership positions, and the transition to a new executive director, OSNS has continued to provide high-quality services without disruption. This is a testament to a strong organization with a deeply ingrained commitment to the children and families served.

- OSNS is governed by an engaged board of directors that appears to provide strong supports to the leadership team in its efforts to guide the organization. The board is acknowledged for its efforts to recruit members with different areas of expertise who reflect the cultural diversity of the community and who adequately represent the broad geographic catchment area.

- OSNS has proven to be very effective with fundraising efforts to ensure that it can offer a full range of services, even where funding streams may not fully cover them. It has established strong partnerships with local businesses, service clubs, and social groups that ensure consistent fundraising streams. The establishment of the OSNS Legacy Foundation also aims to ensure a reliable endowment fund. Fundraising efforts have also been effectively used for capital projects, such as the design of several accessible playground areas, with further such efforts underway. When asked about its success with fundraising, the dedication and buy-in of the board and staff were mentioned. One stakeholder also noted that OSNS has built up ample community good will, noting that, over decades of years of service, thousands of families have been positively impacted by the supports offered, which has assisted fundraising and public relations efforts. It is noted that OSNS seems to have a visible profile in the community. Its astute use of social media also boosts this community profile.

- The organization has recently developed an impressive three-year strategic plan. This strategic plan has well-stated goals and priorities and voices a very clear articulation of the future and how services will be improved if the strategic goals are achieved.

- OSNS has established a diversity, equity, inclusion, and wellness committee and appears committed to ensuring that its programs are fully welcoming to all of its stakeholders. OSNS has emphasized representation from the local First Nations population on its board and on committees and has previously offered office space to similar service providers. Other recent efforts to ensure diversity and accessibility have included the implementation of all-gender bathrooms and Braille signs. The organization also ensures that its website focuses on using simple language and features more audio options.

- The organization's policies and procedures are generally very effective at providing a foundation to guide its supports. These policies are augmented by some very effective common sense documents that provide simplified, yet effective, direction, which include a manual of emergency procedures that does a helpful job of balancing attention to detail and user friendliness.

- OSNS is a well-known organization within the local community as well as the region. The organization has an exceptional number of community partners. From the painted stairs and hopscotch board on the sidewalk to hand-made toques and mittens for little ones to an entire playground renovation, community members want to support children through OSNS. The organization is a trusted one, demonstrating good stewardship of resources and assets.

- The facility and grounds are exceptionally impressive, designed for maximizing the children's therapeutic services, care, safety and accessibility. Children of all ages and abilities are able to access all aspects of the classrooms, therapy rooms, and playground areas. The building and rooms are beautiful, and even the hallways and walls are interactive for children. Children have a child-sized door through which they may enter the facility. The stairwell includes a slide to use as an alternative to the stairs. The gym is exceptionally well-equipped for gross motor therapies and play during inclement weather. The sensory room is well-designed with multiple options for sensory input and/or reduction of stimuli. Playground areas have multiple flat surfaces to facilitate outdoor gross-motor play for children with ambulation challenges. All children are cared for and included at OSNS.

- The children are treated as a whole person, with strengths, challenges, and lives outside the walls of the clinical environment. OSNS is to be commended for using "The 6 F Words," to treat children holistically. The organization takes in information about the child's family, fitness, function, future, fun and friends, all of which drive the plan of care for each child. This practice enhances each child's ability to learn and grow to their full potential.

- OSNS uses the "start small, move slow" approach with all children. The organization does an amazing job at individualizing care to provide unique support for each child. One parent expressed so much gratitude for the staff and the organization, stating, "I don't know what we would have done without OSNS."

- Funders were very complimentary of OSNS, expressing their trust and reliance in the organization. They stated that the executive director is excellent in being responsive to the funder and ensures that all contract expectations are thoroughly fulfilled. Funders stated that the executive director always initiates timely update reports regarding contract metrics. OSNS has an excellent reputation with all funding sources.

- Parents had wonderful things to say about OSNS. Their comments included, "OSNS really guided me in learning advocacy so I could help my son get what he needs"; "OSNS assisted me in applying for and obtaining funding to have my child tested. Without their help, my son may still be on the waiting list for testing, and he wouldn't have the help he needs"; "OSNS continuously keeps me in the loop on my child's progress. They are exceptional in their communication"; and "I feel like we won the lottery with my child being accepted into OSNS. Everyone in the community wants their child to attend OSNS."

- The staff at OSNS is comprised of both tenured and fledgling team members alike, providing both strong experience and fresh perspectives. No matter what the job assignment, staff members exhibit passion for their work, compassion for the families, and an ardent determination to provide the best possible services for the children. The team members are a collaborative, cohesive group whose sole focus is quality and progress at each child's unique pace. Classroom teachers are very well trained, and clinicians use cutting-edge techniques and equipment to assist the children toward positive, functional outcomes. In addition to direct care professionals and clinicians, management and support personnel are highly involved in all aspects of children's services and care from the moment each child enters the program.

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.

Consultation

- While OSNS completes a detailed set of organizational plans, many goals contained within those plans are often not very action oriented or easily quantifiable. For example, some action items in these plans are framed as "continue to monitor," "examine the possibility of" and "to maintain process of." While this is appropriate in many cases, it is suggested that OSNS take steps to ensure that there are action-oriented, specific, and easily measurable items across its array of organizational plans. Such a step might help OSNS more easily determine whether goals were met and report this to stakeholders.

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.

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

1.G.1.a.(6)
It is recommended that OSNS expand its risk management plan to include the reporting of results of actions taken to address risks.

1.H. Health and Safety

Description

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

Key Areas Addressed

■ Healthy and safe environment
■ Competency-based training on health and safety procedures and practices
■ Emergency and evacuation procedures
■ Access to first aid and emergency information
■ Critical incidents
■ Infections and communicable diseases
■ Health and safety inspections

Recommendations

1.H.4.a.(7)
1.H.4.b.(7)
While only done sporadically, OSNS's staff administers medication as needed to meet the child's occasional needs. It is recommended that personnel receive documented competency-based training at orientation and at least annually in medication management. For other health and safety training, it was noted that training was documented in a variety of ways, including orientation checklists, signed affirmations, meeting minutes, and other documentation in human resources files. This made training records somewhat difficult to locate, and it did not appear that there was a system in place to easily training completion on a global level. In order to promote more effective training records, OSNS might consider developing a training spreadsheet or database, or utilizing an electronic human resources information system. Alternatively, OSNS might wish to assess whether it could benefit from using a learning management system where training could be completed and tracked online.

Consultation

- OSNS does not transport children and only uses its fleet vehicles for staff members who are conducting business and/or performing outreach activities. The organization may wish to consider adding brief, emergency instructions and contact numbers to a card and place it on the visor on the driver's side of each vehicle. OSNS may also wish to consider mounting a combination glass-break and seatbelt-cutter tool to the dashboard or console for easy access by the driver.

- OSNS completes tests of emergency procedures, conducts self-inspections of its program location, and has inspections completed by external authorities, with areas of concern and recommendations noted. However, follow-up steps to these recommendations are found across a number of written documents and were not always easily or intuitively located. The organization is encouraged to consider implementing more streamlined ways to document these drills/inspections and follow-up steps. One way that this might be achieved is to develop spreadsheets that outline when these drills/inspections were conducted, the recommendations and remedial actions, and the associated follow-up completed.

- Although OSNS conducts unannounced tests of emergency procedures, it may wish to consider implementing a mobile application designed to increase emergency communication between different levels of the building, different employee groups, and indoor and outdoor locations on the property. These applications are customized based on the organization's requests of the organization and useful for emergency simulations/drills, as they record meta data and documentation electronically that can be used to collect and analyze emergency simulation performance data.

- OSNS has clear procedures on what actions are to be taken in the event of an emergency and have emergency supplies and equipment that go above and beyond what is required. The organization may wish to consider adding "go-bags" to every classroom, in addition to (or as a part of) the emergency first aid kits. These go-bags may include bottled water, small cups for drinking, crackers, or other such snacks with a long shelf life. In the event of an emergency, such as a fire (in which the building must be evacuated), it is unknown how long children may have to wait until their parent(s) arrive to take them home.

- The form used to document self-inspections of the OSNS programs only prompts personnel to ensure that there are working lights and the presence of infection control items such as gloves and sanitizer. It is suggested that this form prompt further inspections, which such as slip, trip, and fall risks; musculoskeletal disorder (MSD) hazards; ergonomic concerns; fire hazards; and inspection of e﻿mergency supplies.

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 backgrounds/credentials/fitness for duty
- Workforce engagement and development
- Performance appraisals
- Succession planning

Recommendations

There are no recommendations in this area.

Consultation

- HR files are currently kept in paper form. While this appears to meet the organization's current needs, it might wish to consider whether or not electronic storage of files might be beneficial. This might be achieved using an electronic human resources information system or by asking the vendor of the child's electronic record to activate an available human resources module. In considering these options, OSNS might consider implementing a central database where performance appraisal completion can be centrally tracked, a function that seems to rest with individual program supervisors at present.

1.J. Technology

Description

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

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

Key Areas Addressed

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

Recommendations

1.J.4.a.
1.J.4.b.(1)
1.J.4.b.(2)
1.J.4.b.(3)
1.J.4.b.(4)
1.J.4.b.(5)
1.J.4.b.(6)
1.J.4.c.
In the period since its most recent CARF survey, OSNS has implemented new systems and software meant to help make its business continuity and disaster recovery procedures more effective. However, it has not yet tested these procedures. It is recommended that a test of the organization's business continuity/disaster recovery procedures be conducted at least annually and analyzed for effectiveness, areas needing improvement, actions to address the improvements needed, implementation of the actions, whether the actions taken accomplished the intended results, and necessary education and training of personnel. It is also recommended that the test be evidenced in writing, including the analysis.

Consultation

- The only cybersecurity training for personnel appears to take the form of informational emails regularly distributed to all staff. The organization reports that this has proven very effective in educating staff. However, other approaches might be more effective in engaging staff and in allowing OSNS to evaluate staff knowledge. It is suggested that OSNS incorporate in-person or virtual methods of training staff in cybersecurity, which might also include assessments of knowledge transfer.

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.4.a.
1.K.4.b.(1)
1.K.4.b.(2)
1.K.4.b.(3)
1.K.4.b.(4)
1.K.4.b.(5)
1.K.4.b.(6)
It is recommended that an analysis of all formal complaints be conducted at least annually and documented, including whether formal complaints were received, trends, areas needing performance improvement, actions to address the improvements needed, implementation of the actions, and whether the actions taken accomplished the intended results.

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.(7)
1.M.3.a.(8)(a)
1.M.3.a.(8)(b)
1.M.3.a.(9)(a)
1.M.3.a.(9)(b)
1.M.3.a.(9)(c)
1.M.3.a.(9)(d)
1.M.3.a.(9)(e)
Although OSNS has implemented part of a performance measurement and management plan, it is recommended that the organization implement a performance measurement and management plan that addresses collection of relevant data on the characteristics of the persons served; the collection of data about the persons 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 that will be accurate; extenuating

and influencing factors that may impact results; timeframes for the analysis of data and communication of results; and how data are collected, data are analyzed, performance improvement plans are developed, performance improvement plans are implemented, and performance information is communicated.

Consultation

- When looking at the experience of other stakeholders, OSNS largely looks at family members. However, OSNS also uses feedback from family members to help assess the children's experiences. In order to examine a broader range of feedback, OSNS might consider measuring the experience of a wider group of other stakeholders, which might include staff and community partners.

- While OSNS has performance target for business functions, the targets are sometimes described in a way that could be more quantifiable. It is suggested that the organization develop performance targets for business functions that are consistently described as a percentage, number, or ratio. When reporting performance improvement information, such a strategy might also assist the organization in highlighting whether performance targets were met.

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.

Consultation

- Although the organization has an analysis of its performance improvement activities for service delivery and business functions, the analysis are not fully developed. OSNS is encouraged to continue its preliminary efforts to develop a more comprehensive analysis that could allow it to more effectively use its data for performance improvement.

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.

Consultation

▪ Although OSNS documents all parameters regarding its scope of services, it may wish to consider a predominant display of service hours and days on its website for ease of access for community members.

▪ Although OSNS demonstrates knowledge of the legal decision-making authority of the children through its intake process, it may wish to consider requesting a copy of each child's birth certificate for verification when said document is readily available to the parent(s)/legal representative(s).

▪ Although OSNS maintains a complete record for each child, it may wish to consider an alternate method of communicating children's allergy lists within the classroom setting. OSNS may wish to post the allergy list with a cover sheet, making it easily accessible to classroom teachers (but not visible to classroom visitors).

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 affect the person's life. Efforts to include the person served in the direction or delivery of those services/supports are evident.

Key Areas Addressed

■ Services are person centred 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.

Consultation

▪ Although the organization documents that the use of prescription medications by the child is reviewed at least annually by a single physician or qualified professional licensed to prescribe or dispense medications, it may choose to explore how to document the annual review of the use of over-the-counter medications for the child by the same qualified professional.

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.

2.F. Service Delivery Using Information and Communication Technologies

Description

Depending on the type of program, a variety of terminology may be used to describe the use of information and communication technologies to deliver services; e.g., telepractice, telehealth, telemental health, telerehabilitation, telespeech, etc. Based on the individual plan for the person served, the use of information and communication technologies allows providers to see, hear, and/or interact with persons served, family/support system members, and other providers in or from remote settings (i.e., the person served and provider are not in the same physical location).

The provision of services via information and communication technologies may:

■ Include services such as assessment, individual planning, monitoring, prevention, intervention, team and family conferencing, transition planning, follow-up, supervision, education, consultation, and counselling.
■ Involve a variety of providers such as case managers/service coordinators, social workers, psychologists, speech-language pathologists, occupational therapists, physical therapists, physicians, nurses, dieticians, employment specialists, direct support professionals, peer support specialists, rehabilitation engineers, assistive technologists, teachers, and other personnel providing services and/or supports to persons served.
■ Encompass settings such as:
  - Hospitals, clinics, professional offices, and other organization-based settings.
  - Schools, work sites, libraries, community centres, and other community settings.
  - Congregate living, individual homes, and other residential settings.
■ Be provided via fully virtual platforms.

The use of technology for strictly informational purposes, such as having a website that provides information about the programs and services available or the use of self-directed apps, is not considered providing services via the use of information and communication technologies.

Key Areas Addressed

■ Written procedures for the use of information and communication technologies (ICT) in service delivery
■ Personnel training on how to deliver services via ICT and the equipment used
■ Instruction and training for persons served, family/support system members, and others
■ Provision of information related to ICT

- Maintenance of ICT equipment
- Emergency procedures that address unique aspects of service delivery via ICT
- Scope of ICT services

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.A. Services for Children and Youth (SCY)

Description

Services for children and youth include prevention, early intervention, preschool programs, early years programs, after-school programs, outreach, and services coordination. Services/supports may be provided in a variety of settings, such as a family's private home; the organization's facility; and community settings such as parks, recreation areas, preschools, or child day care programs not operated by the organization. In all cases, the physical setting, equipment, and environment meet the identified needs of the children and youth served and their families. Families are the primary decision makers and play a critical role, along with team members, in the process of identifying needs and services.

Early intervention services are structured and coordinated to facilitate the achievement of optimal development through the provision of prevention, assessment, education, development, and/or therapeutic services to infants and toddlers with disabilities or who are at risk of developmental delay and their families. Early intervention focuses on helping infants and toddlers learn the basic and brand-new skills that typically develop during the first years of life. Broadly speaking, developmental delay means a child is delayed in some area of development. There are five areas in which development may be affected:

■ Cognitive development.
■ Physical development.
■ Communication development.
■ Social or emotional development.
■ Adaptive development.

Assessment is conducted to determine each child's unique needs and the early intervention services appropriate to address those needs. Families are the primary decision makers in the planning of early intervention services along with personnel relevant to the services being provided. Family-directed services also help family members understand the specific needs of their child and how to enhance the child's development.

Child and adolescent services focus on the development of skills needed by children/adolescents to succeed in school, their family, and their community. An organization may provide an array of distinct services that fall under the heading of child and adolescent services, with different service delivery models that incorporate different practices. Services are individualized to meet the changing needs of the children/adolescents served. Child and adolescent services empower the child/adolescent to develop skills in decision making, including maximizing their participation in the service planning process. Involvement of other team members depends on what the child/adolescent needs and the scope of the services provided. Team members could come from several agencies and may include therapists, child development specialists, social workers, educators, medical professionals, and others.

Some examples of the quality outcomes desired by the different stakeholders of services for children and youth include:

■ Services individualized to needs and desired outcomes.
■ Collection and use of information regarding development and function as relevant to the scope of the services.
■ Children/youth acquiring new skills.
■ Collaborative approach involving family members in services.
■ Transition planning that supports continuity of services and developmental transitions.
■ Increased responsibility of children/youth to make decisions.
■ Personal safety of youth in the community.

Key Areas Addressed
■ Early intervention
■ Individualized services based on identified needs and desired outcomes
■ Communication with families and other supports/services
■ Collaborative service planning
■ Healthcare, safety, emotional, and developmental needs of child/youth
■ Skill development for decision making
■ Planning for successful transitions

Recommendations
There are no recommendations in this area.

Consultation

- OSNS does not exclude children/adolescents from services solely on the basis of their juvenile justice status. Once OSNS reinstates the Link Program for school age children (ages 6 years to 18 years), the organization may wish to consider development and implementation of individualized and/or group safety plans as indicated for communal spaces and activities.

Section 5. Specific Population Designations/Enhancements

5.E. Children/Adolescents with Autism Spectrum Disorder (ASDC)

Description

Early identification, intervention, treatment planning, and educational strategies for children with autism spectrum disorder (ASD) remain a challenge for families, their physicians, community supports, and educational systems. Early recognition of the condition allows families to receive advice and support to help them adjust to the child's learning and development challenges and to mobilize resources to provide the best early intervention services for the child.

Services for children and adolescents with ASD are designed to provide to the child/adolescent and family a variety of resources that reflect sound research. The family will have access to results-oriented therapies, education, advocacy, and supports for their child's optimal progress and to establish a lifetime of positive learning and behaviours. Services involve families, networks of resources, and education and support communities for adolescents transitioning to adulthood. Individuals served under this designation may range from birth to the age of majority, although sometimes services for adolescents transitioning to adulthood are provided by programs that also serve adults. Ages served would be identified in a program's scope of services.

Organizations with accredited services/supports for children with ASD are a resource for families, community services, and education. With the focus on continuous learning about ASD, the organization can assist parents with:

■ Obtaining early intervention screening.
■ Obtaining early intervention services.
■ Obtaining an evaluation by clinicians experienced in evaluating children with ASD to improve treatment and outcomes.
■ Navigating the multiple and complex systems that families need to coordinate, including medical, educational, mental health, disability, and community services.
■ Connecting to resources to identify and treat medical or other conditions associated with ASD, as they are needed, to improve independence, family well-being, and adaptive behaviour.
■ Gaining understanding of the core features of ASD and associated conditions.
■ Adjusting and adapting to the challenges of raising a child with ASD.
■ Understanding the future opportunities, services, and challenges that lay before them as they raise their child.
■ Planning for transition to/from school and life planning.
■ Building linkages within segments of school systems and across school systems to facilitate successful transitions between placements.
■ Providing outcomes information to schools to enhance individualized education plans and employment transition planning.
■ Connecting with mentors and parent-to-parent support groups or contacts.
■ Connecting with community organizations and support groups dedicated to people with ASD.
■ Becoming an advocate for policy changes, as desired.

Key Areas Addressed

■ Services reflect current ASD research
■ Community awareness and acceptance of ASD are promoted
■ Personnel receive specific competency-based training
■ Comprehensive evaluations result in option and referrals for appropriate services
■ Services are family centred
■ Families are connected to needed resources
■ Timely transition planning is facilitated

Recommendations

There are no recommendations in this area.

Program(s)/Service(s) by Location

Okanagan-Similkameen Neurological Society

103 - 550 Carmi Avenue
Penticton BC V2A 3G6
CANADA

Services for Children and Youth: Child and Adolescent Services
Services for Children and Youth: Child and Adolescent Services (Autism Spectrum Disorder-Children and Adolescents)
Services for Children and Youth: Early Intervention Services