

**CARF Accreditation Report
for
The Arc of the South Shore
Three-Year Accreditation**



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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 an on-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 the South Shore
371 River Street
North Weymouth, MA 02191

Organizational Leadership

Abigail Mojica, M.B.A., HCM, MHRM, Chief Operations Officer
Anne L. Holton, Director of Day Services
Jane Riley, Adult Foster Care Director
Michael Wilcox, President-Board of Directors

Survey Date(s)

December 6, 2018–December 7, 2018

Surveyor(s)

Alice R. Roelofs, Ph.D., LMSW, Administrative
Donna M. Conte-Ennis, Program

Program(s)/Service(s) Surveyed

Community Integration
Host Family/Shared Living Services

Previous Survey

Three-Year Accreditation
October 15, 2015–October 16, 2015

Accreditation Decision

Three-Year Accreditation

Expiration: December 31, 2021

Executive Summary

This report contains the findings of CARF's on-site survey of The Arc of the South Shore conducted December 6, 2018–December 7, 2018. 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 the South Shore demonstrated substantial conformance to the standards. The Arc of the South Shore has made diligent efforts to implement CARF standards in its policies, procedures, and practices. The leadership is dedicated to ensuring the quality of program operations through clear policies and procedures. The organization also demonstrates a priority of providing respect and dignity of service provision. The leadership and staff members demonstrate a commitment to improving the individuals' lives through person-centered services. There are opportunities for improvement, which include consistently documenting measurable goals and objectives for the data collection and performance improvement system and ensuring that rights are signed annually. However, the organization's receptivity to the consultation and other feedback that was offered instills confidence that it will work to further improve organizational and service quality. The Arc of the South Shore is urged to address the recommendations in a timely manner and is encouraged to continue implementing CARF standards as a means of ensuring that continuous quality improvement continues to occur. It is clear that the individuals are benefiting from the programs and services that are provided.

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

The Arc of the South Shore 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 the South Shore was conducted by the following CARF surveyor(s):

- Alice R. Roelofs, Ph.D., LMSW, Administrative
- Donna M. Conte-Ennis, 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 the South Shore 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 on-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 the South Shore demonstrated the following strengths:

- The organization's board of directors is composed of at least 50 percent family members. The board has taken on the role of ensuring fiduciary responsibility for this well-respected not-for-profit organization in Massachusetts. It has developed a detailed succession plan for the CEO, and it has an active financial committee that monitors investments with the help of the controller.
- The executive director leads The Arc of the South Shore as the needs of the field and the individuals change. The organization is guided by its mission and vision. The executive director is a leader both in the state and nationally for advocacy of the individuals served. She chairs the positive behavioral supports leadership team and is a member of the Weymouth Rotary Club, which in turn donates to The Arc of the South Shore.
- The leadership team works together to consistently improve services and solve problems. Leaders are respected for their contributions to the individual programs. They are also respected by the community at large.

- The Arc of the South Shore benefits from being part of the national Arc system.
- The human resource department initiates training and various incentives for the staff members. The newsletter, titled "The Messenger," informs the staff members of information that is helpful to stakeholders, including state recognition of high-quality services, leadership development opportunities, and safety ideas.
- Community involvement includes fundraising, television advertisements, radio spots, and education about autism early interventions.
- The organization has been working in the community for over 67 years. The guiding principles are *people first, self-determination, advocacy, community, quality and caring workforce, and commitment to quality*.
- The Arc of the South Shore is commended for its efforts in acknowledging the work and achievements of the staff members and in introducing an element of fun into the workplace. The Employee FUN Committee, which organizes several team-building and social events each year, and the Wow Boards at both locations reflect a commitment to fostering the development of the workforce.
- The Arc of the South Shore is commended for its inclusion of nursing; Board Certified Behavioral Analysts®; and speech, occupational, and physical therapists in its day habilitation/community integration program. This assists in ensuring that the individuals served have access to the supports needed to address their complex physical and emotional needs.
- The staff members in the day habilitation program are commended for the care, respect, empathy, and attention provided to the individuals served. The knowledge that the staff members have regarding the individuals served and their relationships and communication with families and other caregivers enable the staff members to support and advocate the individuals.
- The Arc of the South Shore is commended for completing comprehensive assessments and risk management plans for individuals in the day habilitation/community integration and adult foster family programs. Nursing staff members in both programs are highly skilled. They are very involved in all aspects of programming and serve as integral members of each individual's team.
- The organization is commended for its commitment to maintaining the day habilitation/community program and to minimizing losses in the program, as reimbursement rates may not cover the needed supports of many of the individuals in the program. The renovation of the program space references the organization's support of the individuals in the program and the need for accessible, appropriate, and engaging program space.
- Referrals to the day habilitation/community integration and adult foster care programs benefit from a comprehensive review from all members of the management team in both programs, which assists in the organization's ability to make an informed decision regarding the individual served. It also ensures that everyone involved in supporting any new individual in the program is aware of his/her interests, needs, strengths, and preferences.
- The individuals served and families who were interviewed voiced considerable satisfaction with the services and supports provided and their ongoing communication with the staff members.

Opportunities for Quality Improvement

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

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

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

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

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

Section 1. ASPIRE to Excellence®

1.A. Leadership

Description

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

Key Areas Addressed

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

Recommendations

There are no recommendations in this area.

1.C. Strategic Planning

Description

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

Key Areas Addressed

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

Recommendations

There are no recommendations in this area.

1.D. Input from Persons Served and Other Stakeholders

Description

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

Key Areas Addressed

- Collection of input
- Integration of input into business practices and planning

Recommendations

There are no recommendations in this area.

1.E. Legal Requirements

Description

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

Key Areas Addressed

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

Recommendations

There are no recommendations in this area.

1.F. Financial Planning and Management

Description

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

Key Areas Addressed

- Budgets
- Review of financial results and relevant factors
- Fiscal policies and procedures

- Reviews of bills for services and fee structures, if applicable
- Safeguarding funds of persons served, if applicable
- Review/audit of financial statements

Recommendations

There are no recommendations in this area.

1.G. Risk Management

Description

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

Key Areas Addressed

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

Recommendations

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

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

Recommendations

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

Recommendations

1.I.5.a.(3)

1.I.5.a.(5)

1.I.5.a.(6)

Onboarding and engagement activities should include orientation that addresses the organization's person-centered philosophy, risk management plan, and strategic plan.

1.I.6.b.

It is recommended that the organization promote engagement through respect for all individuals in the workforce, including a value-driven focus.

1.I.8.b.

1.I.8.c.

1.I.8.d.

It is recommended that the organization implement written procedures for performance appraisal that address the criteria against which people are being appraised, the involvement of the person being appraised, and documentation requirements.

Consultation

- It is suggested that forms and documentation be developed across all programs, including evaluations, job descriptions, and program forms.

1.J. Technology

Description

CARF-accredited organizations plan for the use of technology to support and advance effective and efficient service and business practices.

Key Areas Addressed

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

Recommendations

There are no recommendations in this area.

1.K. Rights of Persons Served

Description

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

Key Areas Addressed

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

Recommendations

1.K.2.a.(3)

It is recommended that the rights of the individuals be communicated to the individuals at least annually for individuals served in a program longer than one year.

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 are committed to continually improving their organizations and service delivery to the persons served. Data are collected and analyzed, and information is used to manage and improve service delivery.

Key Areas Addressed

- Data collection
- Establishment and measurement of performance indicators

Recommendations

There are no recommendations in this area.

1.N. Performance Improvement

Description

The dynamic nature of continuous improvement in a CARF-accredited organization sets it apart from other organizations providing similar services. CARF-accredited organizations share and provide the persons served and other interested stakeholders with ongoing information about their actual performance as a business entity and their ability to achieve optimal outcomes for the persons served through their programs and services.

Key Areas Addressed

- Analysis of performance indicators in relation to performance targets
- Use of performance analysis for quality improvement and organizational decision making
- Communication of performance information

Recommendations

1.N.1.a.

1.N.1.b.(1)

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

1.N.1.b.(2)(b)

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

1.N.1.b.(2)(d)(i)

1.N.1.b.(2)(d)(ii)

1.N.1.b.(3)

1.N.1.c.(1)

1.N.1.c.(2)

1.N.1.c.(3)

It is recommended that a written analysis be completed at least annually that analyzes performance indicators in relation to performance targets, including business functions; service delivery of each program seeking accreditation, including the effectiveness of services, the efficiency of services, service access, and satisfaction and other feedback from the individuals and other stakeholders; and extenuating or influencing factors. The written analysis should identify areas needing performance improvement, result in an action plan to address the improvements needed to reach established or revised performance targets, and outline actions taken or changes made to improve performance.

1.N.2.a.(1)

1.N.2.a.(2)

1.N.2.b.

1.N.2.c.

1.N.2.d.

It is recommended that the analysis of performance indicators be used to review the implementation of the mission and core values of the organization, improve the quality of programs and services, facilitate organizational decision making, and review or update the organization's strategic plan.

- 1.N.3.a.(1)
- 1.N.3.a.(2)
- 1.N.3.a.(3)
- 1.N.3.b.(1)
- 1.N.3.b.(2)
- 1.N.3.b.(3)
- 1.N.3.c.

It is recommended that the organization communicate accurate performance information to the individuals, personnel, and other stakeholders according to the needs of the specific group, including the format, content, and timeliness of the information communicated.

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

- 2.A.13.a.
- 2.A.13.b.
- 2.A.13.c.

Any release of confidential information should be authorized by the individual and/or his or her legal representative, be limited to the specific information identified, and have a time limitation.

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 his or her 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.

Consultation

- For the continued professional development of nursing personnel, The Arc of the South Shore may want to explore membership of nursing staff in the Developmental Disabilities Nurses Association.

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.

Consultation

- The Arc of the South Shore is encouraged to continue its efforts in expanding community experiences for individuals in the day habilitation/community integration program, including opportunities to bring the community into the program, such as what has happened with a local yoga instructor coming in weekly to lead classes.
- It may be beneficial to expand the individual care plans to include additional information on desired community inclusion activities for individuals in the programs.

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 he/she 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 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 him/her and identifies applicant providers who are a potential match with the person's identified criteria. The person served makes the final decision of selecting his or her 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 the community. The service 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 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 provider encourages and supports the person served to make his or her own 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. In this program description and these standards, provider refers to the individual(s) supporting the person served. Although the "home" is generally the 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

4.E.2.d.

The Arc of the South Shore should implement a screening process for individuals and/or families to be service providers that includes character reference checks on the potential providers.

Consultation

- Although the current adult foster family caregivers are primarily family members, as the program expands to potentially include nonfamily caregivers, The Arc of the South Shore may want to expand the annual home evaluation to incorporate the demographics and characteristics of the individuals that it feels able to support.

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.).

Key Areas Addressed

- Opportunities for community participation

Recommendations

There are no recommendations in this area.

Program(s)/Service(s) by Location

The Arc of the South Shore

371 River Street
North Weymouth, MA 02191

Community Integration
Host Family/Shared Living Services

The Arc of the South Shore Day Hab

20 Pond Park Road
Hingham, MA 02043

Community Integration