

**CARF
Survey Report
for
Inclusion Powell
River Society**

Organization

Inclusion Powell River Society
4675 Marine Avenue, Suite 201
Powell River BC V8A 2L2
CANADA



Three-Year Accreditation

Organizational Leadership

Lilla Tipton, Executive Director
Liz Kellough, Contractor-Training, Project Management
Lynn Roberts, Director of Adult Services
Laura Kew, Acting Director Child & Family Services
David Morris, Director of Employment, Advocacy, Innovation & Facilities Management

Survey Dates

February 8-10, 2017

Survey Team

Margot A. Van Kleeck, B.R.E., Administrative Surveyor
Anita J. Wilson, M.P.A., Program Surveyor
Greg M. Toutant, M.S.Ed., CAAC, CCS, Program Surveyor
Debra A. Dickinson, Program Surveyor

Programs/Services Surveyed

Community Employment Services: Employment Supports
Community Employment Services: Job Development
Community Housing
Community Integration
Host Family/Shared Living Services
Supported Living
Assessment and Referral (Children and Adolescents)
Case Management/Services Coordination (Children and Adolescents)
Community Youth Development (Children and Adolescents)
Early Childhood Development (Children and Adolescents)
Group Home Care (Children and Adolescents)
Governance Standards Applied

Previous Survey

August 21-23, 2013
Three-Year Accreditation

Survey Outcome

**Three-Year Accreditation
Expiration: April 30, 2020**

SURVEY SUMMARY

Inclusion Powell River Society has strengths in many areas.

- Established in 1954, Inclusion Powell River Society has proudly served the community for 62 years. Congratulations to the board and staff members on this celebration.
- The organization has a committed board, whose members represent a variety of interests from self-advocates, parents of persons served, and relevant community members.
- Success in fundraising and grant applications has enabled the organization to provide additional supports, services, and training to the persons served and their families to meet needs that cannot be met through government or personal funds.
- A strong self-advocate group has been developed. Self-advocates are on the board of directors and through local fundraising a large group is supported in attending the annual provincial Inclusion BC conference.
- The Host Family program's excellent job of matching, training, and supporting the persons served and providers has resulted in strong and long-term relationships. The availability of management staff members to provide needed supports day and night results in positive outcomes for the persons served.
- Individuals in the supported living program are living independently in Powell River with the support of well-trained, long-term staff members who ensure that their needs and wants are met.
- The organization's culture promotes inclusion and fosters non-judgmental attitudes in the interpersonal relationships between the clients and staff members.
- Inclusion Powell River Society is fortunate in having many long-term direct support employees. These employees have worked with specific clients for many years and obviously know their needs very well and care about each person's well-being. Support workers are proud of providing services to previously institutionalized individuals and providing them with a full life in the community.
- Inclusion Powell River Society has group homes in several areas in the city, which are well integrated into their neighbourhoods. The houses look like the other houses around them, and they are well kept and nicely landscaped. Individual rooms are decorated by the clients or their families and reflect the tastes and the cultural heritage of the persons in them.
- The Employment Supports program has dedicated counsellors who delight in the success of each job seeker, and has developed unique jobs for unique persons to succeed in. Types of work include janitorial, school aide, recycling, and hatchery worker. The partnership between Inclusion Powell River Society and Career Link, a generic employment services organization, has opened up an additional way for the organization to use its skills in finding jobs and supporting workers for the benefit of the broader community.
- The community inclusion group at Inclusion Powell River Society is very satisfied with its support staff members, the job supports, and the members' lives in the community. The group members talk about events and services that they have received through the organization that have, in some cases, literally saved their lives. They have a wide variety of events and activities that they enjoy.

- The community integration group that is based at the Jean Pike Centre participates in interesting activities. The organization has advertised events to the broader community, resulting in the clients in the day program attending drum circles and yoga classes with other community individuals. The persons served also have a number of community activities to enhance their days.
- The ShareVision computer program, with the input of the clients and staff members, generates an individualized monthly schedule that helps the clients keep track of their schedule and activities each day. This form can be invaluable to clients who have sequencing issues or are easily distracted.
- The clients and their families report that the staff members provide relationships that nurture and strengthen the services provided, and that the staff members are caring, compassionate, dedicated, kind, and committed to helping them grow and make lasting changes and improvements in their lives. Families report that the staff members go above and beyond in helping to ensure that goals are achieved and that the genuine love, compassion, and respect helps families deal with challenges that they face.
- Cranberry Child Development and Family Resource Centre offers a wide range of child and family-based services in which multiple programs work together to ensure that the children receive the best possible care and outcomes.
- Inclusion Powell River Society has worked to enhance the overall scope of child and youth services available to broaden the experience for the children and families served through the use of such services as the multiple sensory room, sensory integration interventions, physiotherapy, and occupational therapy, which compliments core early intervention and family support services.
- Inclusion Powell River Society child and youth services does an excellent job of reaching into the community to grow resources for families and to make linkages for additional services. These services are a vital community partner in the care of the children and families served.

Inclusion Powell River Society should seek improvement in the area(s) identified by the recommendation(s) in the report. Any consultation given does not indicate non-conformance to standards but is offered as a suggestion for further quality improvement.

On balance, Inclusion Powell River Society is a well-respected service organization, and it is complimented for the way it has embraced the CARF International standards. There is ample evidence that the organization consistently follows the CARF guidelines and embraces quality improvement practices. The organization's current strategic plan, when fully implemented, is designed to improve services and relationships with its stakeholders. The organization is urged to use its resources to address the opportunities for improvement noted in this report, including ensuring that tests of emergency plans and health and safety self-inspections are conducted at each location on each shift, improving the analysis of critical incidents, strengthening personnel performance evaluations, enhancing its performance measurement and analysis, ensuring that service plans include specific measurable objectives, and strengthening transition planning in its child/youth services. The organization employs dedicated and caring staff members, and it has the ability to address the recommendations noted to fully conform to the CARF standards.

Inclusion Powell River Society has earned a Three-Year Accreditation. The board and staff members are congratulated for this accomplishment and recognized for the efforts they have made in pursuit of international accreditation. The organization is encouraged to use the CARF standards to further improve the quality of the services offered.

SECTION 1. ASPIRE TO EXCELLENCE®

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
 - Leadership guidance
 - Commitment to diversity
 - Corporate responsibility
 - Corporate compliance
-

Recommendations

There are no recommendations in this area.

B. Governance

Description

The governing board should provide effective and ethical governance leadership on behalf of its owners'/stakeholders' interest to ensure that the organization focuses on its purpose and outcomes for persons served, resulting in the organization's long-term success and stability. The board is responsible for ensuring that the organization is managed effectively, efficiently, and ethically by the organization's executive leadership through defined governance accountability mechanisms. These mechanisms include, but are not limited to, an adopted governance framework defined by written

governance policies and demonstrated practices; active and timely review of organizational performance and that of the executive leadership; and the demarcation of duties between the board and executive leadership to ensure that organizational strategies, plans, decisions, and actions are delegated to the resource that would best advance the interests and performance of the organization over the long term and manage the organization's inherent risks. The board has additional responsibilities under the domain of public trust, and as such, it understands its corporate responsibility to the organization's employees, providers, suppliers, and the communities it serves.

Key Areas Addressed

- Ethical, active, and accountable governance
 - Board composition, selection, orientation, development, assessment, and succession
 - Board leadership, organizational structure, meeting planning, and management
 - Linkage between governance and executive leadership
 - Corporate and executive leadership performance review and development
 - Executive compensation
-

Recommendations

There are no recommendations in this area.

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

- Strategic planning considers stakeholder expectations and environmental impacts
- Written strategic plan sets goals
- Plan is implemented, shared, and kept relevant

Recommendations

C.2.b.(1) through C.2.b.(3)

Inclusion Powell River Society has an extensive, well-developed, and thoughtful strategic plan. The plan should be expanded to reflect the organization's financial position at the time the plan is written, at projected points in the future, and with respect to allocating resources necessary to support accomplishment of the plan.

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

- Ongoing collection of information from a variety of sources
 - Analysis and integration into business practices
 - Leadership response to information collected
-

Recommendations

There are no recommendations in this area.

E. Legal Requirements

Description

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

Key Areas Addressed

- Compliance with all legal/regulatory requirements
-

Recommendations

There are no recommendations in this area.

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 annual 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

- Budget(s) prepared, shared, and reflective of strategic planning
 - Financial results reported/compared to budgeted performance
 - Organization review
 - Fiscal policies and procedures
 - Review of service billing records and fee structure
 - Financial review/audit
 - Safeguarding funds of persons served
-

Recommendations

F.2.b.(1)(c)

It is recommended that budgets be prepared that include a comparison to historical performance.

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

- Identification of loss exposures
- Development of risk management plan
- Adequate insurance coverage

Recommendations

There are no recommendations in this area.

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

- Inspections
 - Emergency procedures
 - Access to emergency first aid
 - Competency of personnel in safety procedures
 - Reporting/reviewing critical incidents
 - Infection control
-

Recommendations

H.7.a.(1)

H.7.a.(2)

Although Inclusion Powell River Society conducts unannounced tests of emergency procedures, it is recommended that it conduct annual tests of all emergency procedures on each shift at each location. The organization may find it helpful to have the same type of emergency drill conducted at all locations during the same month to allow for a thorough review of the outcomes of the drill at the monthly meeting. Further, as per licensing requirements in British Columbia, the organization is encouraged to ensure that monthly fire drills are conducted in the locations where children's services are provided and in the group home that houses children and youth.

H.10.b.(3) through H.10.b.(6)

Although a written analysis of all critical incidents is conducted on a quarterly basis that provides a detailed summary of the incidents that have occurred, this report should be expanded to at least annually include actions for improvement, results of the performance improvement plans, necessary education and training of personnel, and prevention of recurrence.

H.14.a.

Although some locations have semi-annual comprehensive self-inspections, comprehensive health and safety self-inspections should be completed at least twice a year on each shift at all locations.

I. Human Resources

Description

CARF-accredited organizations demonstrate that they value their human resources. It should be evident that personnel are involved and engaged in the success of the organization and the persons they serve.

Key Areas Addressed

- Adequate staffing
 - Verification of background/credentials
 - Recruitment/retention efforts
 - Personnel skills/characteristics
 - Annual review of job descriptions/performance
 - Policies regarding students/volunteers, if applicable
-

Recommendations

I.6.b.(4)(b)

Although performance evaluations for all personnel are conducted with evidence of input from the personnel being evaluated, few performance objectives for the next year are written in such a manner that allows for measuring attainment of the goals. It is recommended that performance evaluations for all personnel be used to establish measurable performance objectives for the next year.

I.7.e.

When students or volunteers are engaged with Inclusion Powell River Society, the system of management should be expanded to include a process for assessing the student's or volunteer's performance.

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

- Written technology and system plan
 - Written procedures for the use of information and communication technologies (ICT) in service delivery, if applicable
 - Training for personnel, persons served, and others on ICT equipment, if applicable
 - Provision of information relevant to the ICT session, if applicable
 - Maintenance of ICT equipment in accordance with manufacturer recommendations, if applicable
 - Emergency procedures that address unique aspects of service delivery via ICT, if applicable
-

Recommendations

There are no recommendations in this area.

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

- Communication of rights
 - Policies that promote rights
 - Complaint, grievance, and appeals policy
 - Annual review of complaints
-

Recommendations

There are no recommendations in this area.

L. Accessibility

Description

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

Key Areas Addressed

- Written accessibility plan(s)
 - Requests for reasonable accommodations
-

Recommendations

L.1.b.(7)

Inclusion Powell River Society's well-developed accessibility plan should be expanded to include an ongoing process for identification of barriers in the area of technology.

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

- Information collection, use, and management
 - Setting and measuring performance indicators
-

Recommendations

M.3.d.(1)(a) through M.3.d.(1)(c)

Data collected by Inclusion Powell River Society should be used to set written business function objectives, performance indicators, and performance targets.

M.6.a.

The organization should measure business function performance indicators.

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

- Proactive performance improvement
 - Performance information shared with all stakeholders
-

Recommendations

N.1.b.(1)

N.1.b.(3)

N.1.c.(1) through N.1.c.(3)

Inclusion Powell River Society should expand its annual written analysis that details performance indicators in relation to performance targets to include business functions as well as extenuating or influencing factors. The annual performance 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.

SECTION 2. QUALITY INDIVIDUALIZED SERVICES AND SUPPORTS

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.

B. Individual-Centred Service Planning, Design, and Delivery

Description

Improvement of the quality of an individual's services/supports requires a focus on the person and/or family served and their identified strengths, abilities, needs, and preferences. The organization's services are designed around the identified needs and desires of the persons served, are responsive to their expectations and desired outcomes from services, and are relevant to their maximum participation in the environments of their choice.

The person served participates in decision making, directing, and planning that affects 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 centred and individualized
 - Persons are given information about the organization's purposes and ability to address desired outcomes
-

Recommendations

B.5.b.(2)

Although some of the objectives developed as part of the individual service plan are specific measurable goals, some are not. In addition, some of the goals seem to be written for supports provided rather than for individual skill building. It is recommended that Inclusion Powell River Society ensure that all service plans identify specific measurable objectives. It could be helpful to revisit the specific, measurable, achievable, results-focused, and time bound (SMART) training to ensure that goals written on the plans are consistently measurable.

Consultation

- The recent exit summaries have been done on a timely basis. However, some of them, especially the ones for long-term clients, do not have a detailed summary of the results of services received. It is suggested that Inclusion Powell River Society review the exit summaries, which are based on the quarterly reviews, to enhance the summary of services.
 - Although the clients are involved in their person-centred planning, it is suggested that the format for those in supported living be streamlined to just include information relevant to services provided or recommended.
-

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.

D. Employment Services Principle Standards

Description

An organization seeking CARF accreditation in the area of employment services provides individualized services and supports to achieve identified employment outcomes. The array of services and supports may include:

- Identification of employment opportunities and resources in the local job market.
- Development of viable work skills that match workforce needs within the geographic area.
- Development of realistic employment goals.
- Establishment of service plans to achieve employment outcomes.
- Identification of resources and supports to achieve and maintain employment.
- Coordination of and referral to employment-related services and supports.

The organization maintains its strategic positioning in the employment sector of the community by designing and continually improving its services based on input from the persons served and from employers in the local job market, and managing results of the organization's outcomes management system. The provision of quality employment services requires a continuous focus on the persons served and the personnel needs of employers in the organization's local job market.

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

- Individualized, appropriate accommodations.
- A flexible, interactive process that involves the person.
- Increased independence.
- Increased employment options.
- Timely services and reports.
- Persons served obtain and maintain employment consistent with their preferences, strengths, and needs.
- Person served obtains a job at minimum wage or higher and maintains appropriate benefits.
- Person served maintains the job.

Key Areas Addressed

- Goals of the persons served
 - Personnel needs of local employers
 - Community resources available
 - Economic trends in the local employment sector
-

Recommendations

There are no recommendations in this area.

F. Community Services Principle Standards

Description

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

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

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

Expected results from these services may include:

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

Key Areas Addressed

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

Recommendations

There are no recommendations in this area.

SECTION 3. EMPLOYMENT AND COMMUNITY SERVICES

Description

An organization seeking CARF accreditation in the area of employment and 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.
- Employment obtained and maintained.
- Competitive employment.
- Employment at or above minimum wage.
- Economic self-sufficiency.
- Employment with benefits.
- Career advancement.

C. Community Employment Services

Description

Community employment services assist persons to obtain successful community employment opportunities that are responsive to their choices and preferences. Through a strengths-based approach the program provides person-directed services/supports to individuals to choose, achieve, and maintain employment in integrated community employment settings.

Work is a fundamental part of adult life. Individually tailored job development, training, and support recognize each person's employability and potential contribution to the labour market. Persons are supported as needed through an individualized person-centred model of services to choose and obtain a successful employment opportunity consistent with their preferences, keep the employment, and find new employment if necessary or for purposes of career advancement.

Such services may be described as individualized competitive employment, individual placements, contracted temporary personnel services, competitive employment, supported employment, transitional employment, mobile work crews, contracted work groups in the community,

community-based SourceAmerica® contracts, and other business-based work groups in community-integrated designs. In Canada, employment in the form of bona fide volunteer placements is possible.

Individuals may be paid by community employers or by the organization. Employment is in the community.

Job Development

Description

Successful job development concurrently uses assessment information about the strengths and interests of the person seeking employment to target the types of jobs available from potential employers in the local labour market. Typical job development activities include reviewing local employment opportunities and developing potential employers/customers through direct and indirect promotional strategies. Job development may include facilitating a hiring agreement between an employer and a person seeking employment. Some persons seeking employment may want assistance at only a basic, informational level, such as support for a self-directed job search.

Some examples of the quality outcomes desired by the different stakeholders of these services include:

- Persons obtain community employment.
- Persons obtain individualized competitive employment.
- Employment matches interests and desires of persons.
- Wages, benefits, and hours of employment achieved as desired.
- Average number of hours worked per week increases.
- Average number of hours worked per week meets the desires of the person served.
- Full-time employment with benefits.
- Transition-age youth move directly from their educational environment into community employment.
- Job retention/length of employment.
- Potential for upward mobility.
- Self-sufficiency.
- Integration.
- Responsive services.
- Safe working conditions.

- Cost-effective for placement achieved.
- Reasonable length of time from referral to placement.
- Employers satisfied with the services.

Employment Supports

Description

Employment support services are activities that are employment-related to promote successful training of a person to a new job, job adjustment, retention, and advancement. These services are based on the individual employee with a focus on achieving long-term retention of the person in the job.

The level of employment support services is individualized to each employee and the complexity of the job.

Often supports are intensive for the initial orientation and training of an employee with the intent of leading to natural supports and/or reduced external job coaching. However, some persons may not require any employment supports at the job site; others may require intensive initial training with a quick decrease in supports, while some will be most successful when long-term supports are provided.

Supports can include assisting the employee with understanding the job culture, industry practices, and work behaviours expected by the employer. It may also include helping the employer and coworkers to understand the support strategies and accommodations needed by the worker.

Supports are a critical element of the long-term effectiveness of community employment. Support services address issues such as assistance in training a person to complete new tasks, changes in work schedule or work promotion, a decrease in productivity of the person served, adjusting to new supervisors, and managing changes in non-work environments or other critical life activities that may affect work performance. Routine follow-up with the employer and the employee is crucial to continued job success.

Some examples of the quality outcomes desired by the different stakeholders of these services include:

- Performance level achieved meets requirements of job or position.
- Increase in skills.
- Increase in hours worked independently.
- Increase in productivity.
- Increase in hours worked.
- Increase in pay.
- Employment retention.
- Full-time employment.

- Employment with benefits.
- Increase in natural supports from coworkers.
- Persons served treated with respect.
- Increase in participation in the community.
- Minimize length of time for supports.
- Type and amount of staff interaction meets needs.
- Job/career advancement.
- Employer satisfaction.
- Satisfaction outcomes that reflect needs and expectations of the employee are met.
- Responsiveness to customers.
- Job club to provide a forum for sharing experiences.

Key Areas Addressed

- Integrated employment choice
- Integrated employment obtainment
- Employment provided in regular business settings
- Integrated employment retention
- Provides career advancement resources

Recommendations

There are no recommendations in this area.

J. Family-Based/Shared Living Supports

Host Family/Shared Living Services

Description

Host family/shared living services assist a person served to find a shared living situation in which he or 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 or 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

There are no recommendations in this area.

Consultation

- Although Inclusion Powell River Society offers a variety of training opportunities to providers, often it is done in conjunction with full-time staff members. It could be beneficial to provide this information with just home share providers to ensure that it addresses their specific needs.
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K. Community Housing

Description

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

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

Community housing programs may be referred to as group homes, halfway houses, three-quarter way houses, recovery residences, sober housing, domestic violence or homeless shelters, and safe houses. These programs may be located in rural or urban settings and in houses, apartments, townhouses, or other residential settings owned, rented, leased, or operated by the organization. They may include congregate living facilities and clustered homes/apartments in multiple-unit settings. These residences are often physically integrated into the community, and every effort is made to ensure that they approximate other homes in their neighborhoods in terms of size and number of individuals.

Community housing may include either or both of the following:

- Transitional living that provides interim supports and services for persons who are at risk of institutional placement, persons transitioning from institutional settings, or persons who are homeless. Transitional living is typically provided for six to twelve months and can be offered in congregate settings that may be larger than residences typically found in the community.
- Long-term housing that provides stable, supported community living or assists the persons served to obtain and maintain safe, affordable, accessible, and stable housing.

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

- Safe housing.
- Persons choosing where they live.
- Persons choosing with whom they will live.
- Persons having privacy in their homes.
- Persons increasing independent living skills.
- Persons having access to the benefits of community living.
- Persons having the opportunity to receive services in the most integrated setting.
- Persons' rights to privacy, dignity, respect, and freedom from coercion and restraint are ensured.
- Persons having the freedom to furnish and decorate their sleeping or living units as they choose.
- Persons having freedom and support to control their schedules and activities.
- Settings that are physically accessible to the individuals.

Key Areas Addressed

- Safe, secure, private location
- In-home safety needs
- Options to make changes in living arrangements

- Support to persons as they explore alternatives
 - Access as desired to community activities
 - System for on-call availability of personnel
-

Recommendations

There are no recommendations in this area.

L. Supported Living

Description

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

Supported living refers to the support services provided to the person served, not the residence in which these services are provided. Although the residence will generally be owned, rented, or leased by the person who lives there, the organization may occasionally rent or lease an apartment when the person served is unable to do so. Typically, in this situation the organization would co-sign or in other ways guarantee the lease or rental agreement; however, the person served would be identified as the tenant.

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

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

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

Key Areas Addressed

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

Recommendations

There are no recommendations in this area.

P. Community Integration

Description

Community integration is designed to help persons to optimize their personal, social, and vocational competency to live successfully in the community. Persons served are active partners in determining the activities they desire to participate in. Therefore, the settings can be informal to reduce barriers between staff members and persons served. An activity centre, a day program, a clubhouse, and a drop-in centre are examples of community integration services. Consumer-run programs are also included.

Community integration provides opportunities for the community participation of the persons served. The organization defines the scope of these services and supports based on the identified needs and desires of the persons served. This may include services for persons who without this option are at risk of receiving services full time in more restrictive environments with intensive levels of supports such as hospitalization or nursing home care. A person may participate in a variety of community life experiences or interactions that may include, but are not limited to:

- Leisure or recreational activities.
- Communication activities.
- Spiritual activities.
- Cultural activities.
- Pre-vocational experiences.
- Vocational pursuits.
- Volunteerism in the community.

- Educational and training activities.
- Development of living skills.
- Health and wellness promotion.
- Orientation, mobility, and destination training.
- Access and utilization of public transportation.
- Interacting with volunteers from the community in program activities.
- Community collaborations and social connections developed by the program (partnerships with community entities such as senior centres, arts councils, etc.).

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

- Community participation.
- Increased independence.
- Increased interdependence.
- Greater quality of life.
- Skill development.
- Slowing of decline associated with aging.
- Volunteer placement.
- Movement to employment.
- Centre-based socialization activities during the day that enable persons to remain in their community residence.
- Activity alternatives to avoid or reduce time spent in more restrictive environments, such as hospitalization or nursing home care.

Key Areas Addressed

- Opportunities for community participation

Recommendations

There are no recommendations in this area.

Standards from the 2016 *Child and Youth Services Standards Manual* were also applied during this survey. The following sections of this report reflect the application of those standards.

SECTION 2. CHILD AND YOUTH SERVICES GENERAL PROGRAM STANDARDS

Description

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

The guiding principles include:

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

A. Program/Service Structure

Description

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

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

Child- and family-centred care includes the following:

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

Key Areas Addressed

- Written plan that guides service delivery
- Team member responsibilities
- Developmentally appropriate surroundings and equipment
- Crisis intervention provided
- Medical consultation
- Services relevant to diversity
- Collaborative partnerships
- Child/youth/family role in decision making
- Policies and procedures that facilitate collaboration
- Coordination of services for child/youth
- Qualifications and competency of direct service staff
- Family participation
- Team composition/duties
- Relevant education
- Clinical supervision

- Assistance with advocacy and support groups
 - Effective information sharing
 - Arrangement or provision of appropriate services
 - Gathering customer satisfaction information
-

Recommendations

There are no recommendations in this area.

B. Screening and Access to Services

Description

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

Key Areas Addressed

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

Recommendations

B.8.e.(5)(a)

B.8.e.(5)(c)

B.8.e.(5)(d)

Although Inclusion Powell River Society engages in the orientation of the youth and families served to its services, it is recommended that it add to the orientation process its policies on use of restraint, illicit or licit drugs brought into the program, and weapons brought into the programs. The organization is encouraged to use a common client handbook for child and youth services programming that includes these and other pertinent policies.

B.12.a.(24)(b)

Although Inclusion Powell River Society has a developed primary assessment process that gathers significant information on the children and youth served, it is recommended that it be expanded to include the efficacy of medication used.

C. Individualized Plan

Description

Each person served is actively involved in and has a significant role in the individual planning process and has a major role in determining the direction of the individualized plan. The individualized plan contains goals and objectives that incorporate the unique strengths, needs, abilities, and preferences of the persons served, as well as identified challenges and problems. Individualized plans may consider the significance of traumatic events.

Key Areas Addressed

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

Recommendations

There are no recommendations in this area.

D. Transition/Discharge

Description

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

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

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

Just as the assessment is critical to the success of treatment, transition services are critical for the support of the individual's ongoing well-being. The organization proactively attempts to contact the person served after formal transition or discharge to gather needed information related to his or her postdischarge status.

The transition plan and/or discharge summary may be included in a combined document or as part of the individualized plan as long as it is clear whether the information relates to a transition or discharge planning.

Key Areas Addressed

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

Recommendations

D.4.a. through D.4.d.(7)

Although Inclusion Powell River Society engages in transition planning, the written transition plan should be prepared or updated to ensure a seamless transition when a person served is transferred to another level of care, another component of care, or an aftercare program, or prepares for reunification or a planned discharge. The written transition plan should be developed with the input and participation of the person served; the family/support system, when applicable and permitted; personnel; the referral source, when appropriate and permitted; and other community services, when appropriate and permitted. It should identify the person's current well-being, gains achieved, and need for support systems or other types of services that will assist in continuing his or her well-being or community integration. The plan should also include educational status; educational goals; when

applicable, employment preparation and career planning; a housing plan for youths making the transition to independence; information on the person's health needs, including physical, behavioural, and medications, when applicable; referral source information; and communication of information on options available if additional services are needed. It is suggested that Inclusion Powell River Society develop a more formal approach to written transition planning and utilize the tools that it has available to assist with streamlining this process to ensure consistency among programs.

D.11.d.

Although Inclusion Powell River Society engages in the completion of written discharge summaries, it is recommended that the discharge summaries describe the extent to which established goals and objectives were achieved.

E. Medication Use

Description

Medication use is the practice of handling, prescribing, dispensing, and/or administering medications to persons served in response to specific symptoms, behaviours, and conditions for which the use of medications is indicated and deemed efficacious. Medication use may include self-administration, or be provided by personnel of the organization or under contract with a licensed individual. Medication use is directed toward maximizing the functioning of the persons served while reducing their specific symptoms and minimizing the impact of side effects.

Medication use includes prescribed or sample medications, and may, when required as part of the treatment regimen, include over-the-counter or alternative medications provided to the person served. Alternative medications can include herbal or mineral supplements, vitamins, homeopathic remedies, hormone therapy, or culturally specific treatments.

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

Self-administration for adults is the application of a medication (whether by injection, inhalation, oral ingestion, or any other means) by the person served to his or her body and may include the organization storing the medication for the person served, or may include staff handing the bottle or blister pack to the person served, instructing or verbally prompting the person served to take the medication, coaching the person served through the steps to ensure proper adherence, and closely observing the person served self-administering the medication.

Self-administration by children or adolescents in a residential setting must be directly supervised by personnel, and standards related to medication use applied.

Dispensing is considered the practice of pharmacy; the process of preparing and delivering a prescribed medication (including samples) that has been packaged or repackaged and labeled by a physician or pharmacist or other qualified professional licensed to dispense (for later oral ingestion, injection, inhalation, or other means of administration).

Prescribing is evaluating, determining what agent is to be used by and giving direction to a person served (or family/legal guardian), in the preparation and administration of a remedy to be used in the treatment of disease. It includes a verbal or written order, by a qualified professional licensed to prescribe, that details what medication should be given to whom, in what formulation and dose, by what route, when, how frequently, and for what length of time.

Key Areas Addressed

- Individual records of medication
 - Physician review
 - Policies and procedures for prescribing, dispensing, and administering medications
 - Training regarding medications
 - Policies and procedures for safe handling of medication
-

Recommendations

E.3.c.

E.3.d.

E.3.k.

Although Inclusion Powell River Society has well-developed written procedures guiding the use of medications, it is recommended that it clarify procedures concerning transportation, safe storage, and off-site use of medication for its child and youth services programming.

F. Non-violent Practices

Description

Programs strive to be learning environments and to support persons served in the development of recovery, resiliency, and wellness. Relationships are central to supporting individuals in recovery and wellness. Programs are challenged to establish quality relationships as a foundation to supporting recovery and wellness. Providers need to be mindful of developing cultures that create healing, healthy and safe environments, and include the following:

- Engagement
- Partnership—power with, not over
- Holistic approaches
- Respect
- Hope
- Self-direction

Programs need to recognize that individuals may require supports to fully benefit from their services. Staff is expected to access or provide those supports wanted and needed by the individual. Supports may include environmental supports, verbal prompts, written expectations, clarity of rules and expectations, or praise and encouragement.

Even with supports, there are times when individuals may show signs of fear, anger, or pain, which may lead to aggression or agitation. Staff members are trained to recognize and respond to these signs through de-escalation, changes to the physical environment, implementation of meaningful and engaging activities, redirection, active listening, etc. On the rare occasions when these interventions are not successful and there is imminent danger of serious harm, seclusion or restraint may be used to ensure safety. Seclusion and restraint are never considered treatment interventions; they are always considered actions of last resort. The use of seclusion and restraint must always be followed by a full review, as part of the process to eliminate the use of these in the future.

The goal is to eliminate the use of seclusion and restraint in child and youth services, as the use of seclusion or restraint creates potential physical and psychological dangers to the persons subject to the interventions, the staff members who administer them, or those who witness the practice. Each organization still utilizing seclusion or restraint should have the elimination thereof as an eventual goal.

Restraint is the use of physical force or mechanical means to temporarily limit a person's freedom of movement; chemical restraint is the involuntary emergency administration of medication, in immediate response to a dangerous behaviour. Restraints used as an assistive device for persons with physical or medical needs are not considered restraints for purposes of this section. Briefly holding a person served, without undue force, for the purpose of comforting him or her or to prevent self-injurious behaviour or injury to self, or holding a person's hand or arm to safely guide him or her from one area to another, is not a restraint. Separating individuals threatening to harm one another, without implementing restraints, is not considered restraint.

Seclusion refers to restriction of the person served to a segregated room with the person's freedom to leave physically restricted. Voluntary time out is not considered seclusion, even though the voluntary time out may occur in response to verbal direction; the person served is considered in seclusion if freedom to leave the segregated room is denied.

Seclusion or restraint by trained and competent personnel is used only when other less restrictive measures have been found to be ineffective to protect the person served or others from injury or serious harm. Peer restraint is not considered an acceptable alternative to restraint by personnel. Seclusion or restraint is not used as a means of coercion, discipline, convenience, or retaliation.

In a correctional setting, the use of seclusion or restraint for purposes of security is not considered seclusion or restraint under these standards. Security doors designed to prevent elopement or wandering are not considered seclusion or restraint. Security measures for forensic purposes, such as the use of handcuffs instituted by law enforcement personnel, are not subject to these standards. When permissible, consideration is made to removal of physical restraints while the person is receiving services in the behavioural healthcare setting.

Key Areas Addressed

- Training and procedures supporting non-violent practices
 - Policies and procedures for use of seclusion and restraint
 - Patterns of use reviewed
 - Persons trained in use
 - Plans for reduction/elimination of use
-

Recommendations

There are no recommendations in this area.

Consultation

- It is suggested that Inclusion Powell River Society streamline its policies regarding the use of restraint and ensure that current practices and policies are unified to facilitate accurate orientation information for the children and families served.
-

G. Records of the Person Served

Description

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

Recommendations

There are no recommendations in this area.

H. Quality Records Review

Description

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

Key Areas Addressed

- Focus of quarterly review
- Use of information from quarterly review

Recommendations

There are no recommendations in this area.

SECTION 3. CHILD AND YOUTH SERVICES CORE PROGRAM STANDARDS

B. Assessment and Referral

Description

Assessment and referral programs provide a variety of activities, including pre-screening, screening, assessment, determination of need, and referral to appropriate level of care. The provision of information on available resources is not considered a full assessment and referral program. An adequate assessment must be conducted to provide more informed referrals. Assessment and referral may include hotlines, “warmlines,” or resource referral systems, such as “211” or “First Call for Help.”

Such programs may be separate, freestanding programs; an independent program within a larger organization; or a specifically identified activity within a system of care.

Key Areas Addressed

- Policies and procedures
 - Services provided
-

Recommendations

There are no recommendations in this area.

D. Case Management/Services Coordination

Description

Case management/services coordination provides goal-oriented and individualized supports through assessment, planning, linkage, advocacy, coordination, and monitoring activities. It is focused on achieving individualized goals for the persons served. Successful case management/services coordination assists persons served to achieve their goals through communicating and collaborating with other service providers. Programs may provide occasional supportive counseling and crisis intervention services, when allowed by regulatory or funding authorities.

Case management/services coordination may be provided by an organization as part of its individual service planning and delivery, by a department or division within the organization that works with individuals who are internal and/or external to the organization, or by an organization with the sole purpose of providing case management/services coordination. Such programs are typically provided by qualified case managers/coordinators or by case management teams.

Key Areas Addressed

- Personnel qualifications
 - Services
-

Recommendations

There are no recommendations in this area.

I. Community Youth Development

Description

Community youth development programs are designed to help persons served optimize their personal, social, and vocational competency in order to live successfully in the community. Activities are determined by the needs of the persons served. The persons served are active partners in all aspects of these programs. The setting may be informal to reduce barriers between staff members and program participants and may include a drop-in centre, an activity centre, a day program, or a leisure or recreational setting.

Community youth development programs provide opportunities for persons served to participate in the community. The program defines the scope of these services based on the identified needs and desires of the persons served. A person may participate in a variety of community life experiences, including:

- Leisure or recreational activities.
- Communication activities.
- Spiritual activities.
- Cultural activities.
- Sports.
- Vocational pursuits.
- Development of work attitudes.
- Employment activities.
- Volunteerism.

- Educational and training activities.
 - Development of living skills.
 - Health and wellness promotion.
 - Socialization.
 - Orientation, mobility, and destination training.
 - Access and utilization of public transportation.
 - Financial assistance and planning.
-

Recommendations

There are no recommendations in this area.

P. Early Childhood Development

Description

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

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

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

Some examples of programs include:

- Families First
- Early Intervention (Canada)
- Supported child development programs
- Home visitation
- Family enhancement

- Looking After Children
- Building Blocks
- Healthy Families America
- Head Start
- Better Beginnings, Better Futures
- Child/youth development centres
- Infant development programs
- Birth to three (0–3) programs
- First Steps
- Early Start
- Early Years

Key Areas Addressed

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

Recommendations

There are no recommendations in this area.

R. Group Home Care

Description

Group home programs provide placements to children/youths for whom there are documented reports of maltreatment, abandonment, absence without leave, or other identified needs, or treatment services to children/youths with identified behavioural needs. Services are provided in a safe and supportive setting and are time limited. The program goal is to reunite the child/youth with the natural family or other permanent placement when in the best interest of the child/youth. In all situations, integration into the community to the greatest degree possible is achieved.

Key Areas Addressed

- Access to professionals
 - Personnel training
 - Community living components
 - Advocacy
 - Supportive program activities
-

Recommendations

There are no recommendations in this area.

PROGRAMS/SERVICES BY LOCATION

Inclusion Powell River Society

4675 Marine Avenue, Suite 201
Powell River BC V8A 2L2
CANADA

Community Housing
Host Family/Shared Living Services
Governance Standards Applied

Cranberry Child Development and Family Resource Centre

6831 Artaban Street
Powell River BC V8A 4B9
CANADA

Assessment and Referral (Children and Adolescents)
Case Management/Services Coordination (Children and Adolescents)
Early Childhood Development (Children and Adolescents)

Employment Services

4493 Marine Avenue
Powell River BC V8A 2K3
CANADA

Community Employment Services: Employment Supports
Community Employment Services: Job Development

Golden Residence

4574 Golden Avenue
Powell River BC V8A 2X5
CANADA

Community Housing

Jean Pike Centre for Inclusion

7055 Alberni Street
Powell River BC V8A 2C2
CANADA

Community Integration
Supported Living
Community Youth Development (Children and Adolescents)

Joyce Residence

4000 Joyce Avenue
Powell River BC V8A 2Z5
CANADA

Community Housing

McGuffie Residence

5298 McGuffie Street
Powell River BC V8A 3T5
CANADA

Community Housing

Nelson Residence

5534 Nelson
Powell River BC V8A 4C8
CANADA

Community Housing

Nootka Residence

7050 Nootka Street
Powell River BC V8A 5E5
CANADA

Community Housing

Redonda Residence

4728 Redonda Avenue
Powell River BC V8A 5C9
CANADA

Community Housing

Saanich Residence

5416 Saanich Avenue
Powell River BC V8A 4G9
CANADA

Community Housing

Selkirk Children's Residence

3949 Selkirk Avenue, Upper and Lower Suites
Powell River BC V8A 3C5
CANADA

Group Home Care (Children and Adolescents)