CARF Accreditation Report

for

Blue Water Developmental Housing, Inc.

Three-Year Accreditation

Contents

About CARF

CARF is an independent, nonprofit accreditor of health and human services, enhancing the lives of persons served worldwide.

The accreditation process applies CARF's internationally recognized standards during a site survey conducted by peer surveyors. Accreditation, however, is an ongoing process that distinguishes a provider's service delivery and signals to the public that the provider is committed to continuous performance improvement, responsive to feedback, and accountable to the community and its other stakeholders.

CARF accreditation promotes providers' demonstration of value and Quality Across the Lifespan® of millions of persons served through application of rigorous organizational and program standards organized around the ASPIRE to Excellence® continuous quality improvement framework. CARF accreditation has been the recognized benchmark of quality health and human services for more than 50 years.

For more information or to contact CARF, please visit www.carf.org/contact-us.

Organization

Blue Water Developmental Housing, Inc.
1600 Gratiot Boulevard, Suite 1
Marysville, MI 48040

Organizational Leadership

Kathleen M. Swantek, BGS, MA, Executive Director
Victoria Scheffler, Program Supervisor

Survey Number

132271

Survey Date(s)

November 4, 2020–November 6, 2020

Surveyor(s)

Jean A. Goldsberry, MS, MBA, DESS Administrative
Sha Azedi, MA, MS, PhD, DESS Program

Program(s)/Service(s) Surveyed

Community Housing
Community Integration
Respite Services
Supported Living

Previous Survey

July 26, 2017–July 28, 2017
Three-Year Accreditation

Accreditation Decision

Three-Year Accreditation
Expiration: August 31, 2023

Executive Summary

This report contains the findings of CARF's site survey of Blue Water Developmental Housing, Inc. conducted November 4, 2020–November 6, 2020. 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, Blue Water Developmental Housing, Inc. demonstrated substantial conformance to the standards. Blue Water Developmental Housing, Inc. (BWDH) has done much to achieve international accreditation and has a commitment to implementing the CARF standards. The staff members are caring and creative, working hard to ensure that the persons served have great experiences in the services provided. With both the financial ability and human capacity, the organization appears likely to continue to grow and serve even more people. There are areas noted for improvement, including in the areas of leadership, health and safety, workforce development, accessibility, performance measurement and management, and performance improvement. The service areas for improvement include individual-centered planning, increasing self-sufficiency and living skill development in community integration, and regular meetings between the residents and staff in community housing. BWDH is urged to address the recommendations in a timely manner and encouraged to continue implementing the CARF standards on an ongoing basis as a means of ensuring that quality improvement continues.

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

Blue Water Developmental Housing, Inc. has earned a Three-Year Accreditation. The leadership team and staff are complimented and congratulated for this achievement. In order to maintain this accreditation, throughout the term of accreditation, the organization is required to:

- Submit annual reporting documents and other required information to CARF, as detailed in the Accreditation Policies and Procedures section in the standards manual.

- Maintain ongoing conformance to CARF's standards, satisfy all accreditation conditions, and comply with all accreditation policies and procedures, as they are published and made effective by CARF.

Survey Details

Survey Participants

The survey of Blue Water Developmental Housing, Inc. was conducted by the following CARF surveyor(s):

- Jean A. Goldsberry, MS, MBA, DESS Administrative

- Sha Azedi, MA, MS, PhD, DESS 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 Blue Water Developmental Housing, Inc. and its program(s)/service(s) consisted of the following activities:

- Confidential interviews and direct interactions, as outlined in the previous section.

- Direct observation of the organization's operations and service delivery practices.

- Observation of the organization's location(s) where services are delivered.

- Review of organizational documents, which may include policies; plans; written procedures; promotional materials; governing documents, such as articles of incorporation and bylaws; financial statements; and other documents necessary to determine conformance to standards.

- Review of documents related to program/service design, delivery, outcomes, and improvement, such as program descriptions, records of services provided, documentation of reviews of program resources and services conducted, and program evaluations.

- Review of records of current and former persons served.

Program(s)/Service(s) Surveyed

The survey addressed by this report is specific to the following program(s)/service(s):

- Community Housing
- Community Integration
- Respite Services
- Supported Living

A list of the organization's accredited program(s)/service(s) by location is included at the end of this report.

Representations and Constraints

The accreditation decision and survey findings contained in this report are based on an on-balance consideration of the information obtained by the surveyor(s) during the site survey. Any information that was unavailable, not presented, or outside the scope of the survey was not considered and, had it been considered, may have affected the contents of this report. If at any time CARF subsequently learns or has reason to believe that the organization did not participate in the accreditation process in good faith or that any information presented was not accurate, truthful, or complete, CARF may modify the accreditation decision, up to and including revocation of accreditation.

Survey Findings

This report provides a summary of the organization's strengths and identifies the sections of the CARF standards that were applied on the survey and the findings in each area. In conjunction with its evaluation of conformance to the specific program/service standards, CARF assessed conformance to its business practice standards, referred to as Section 1. ASPIRE to Excellence, which are designed to support the delivery of the program(s)/service(s) within a sound business operating framework to promote long-term success.

The specific standards applied from each section vary based on a variety of factors, including, but not limited to, the scope(s) of the program(s)/service(s), population(s) served, location(s), methods of service delivery, and survey type. Information about the specific standards applied on each survey is included in the standards manual and other instructions that may be provided by CARF.

Areas of Strength

CARF found that Blue Water Developmental Housing, Inc. demonstrated the following strengths:

- BWDH is held in high regard by the family members, who see the staff members as extensions of their families. They have great confidence in the organization's ability to provide excellent services for their loved ones.
- The funders are very happy with BWDH and see it as a trusted partner in serving people with disabilities in their counties.
- The organization has been able to grow, expanding from ten to 13 homes in only one year, a growth of 30 percent.

- Careful and prudent financial management has allowed the organization to grow and prosper while building a fund balance to help the organization weather potential difficult financial situations.

- The community programs have adjusted well to the circumstances presented and restrictions necessitated by the COVID-19 pandemic.

- Respite services are provided based on the preferences of the persons served and families that need it.

- BWDH enjoys a well-trained and dedicated staff at the community housing, respite, community integration, and supported living services.

- BWDH has a culture of inclusiveness that extends to the staff, persons served, board members, and leadership. It works hard to provide for the persons served and to meet their needs. These efforts sometimes extend to providing for special needs or requests beyond typical funded services.

- The board of directors is a committed group of local citizens who actively participate in the oversight of the organization. Their meetings are well organized and their input is valuable to the organization.

- A long-tenured and deeply caring executive director provides strong and visionary leadership to the organization. The executive director's efforts have enabled the organization to grow significantly throughout the years.

- The staff members exude warmth and caring as well as enthusiasm for their jobs and especially the persons served. The persons served enjoy positive and supportive relationships with their support staff.

- The physical facilities, including the homes and apartments for the community housing and the supported living services, are located in nice neighborhoods and match other homes in the area.

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

1.A.9.a.(1)
1.A.9.a.(2)(a)
1.A.9.a.(2)(b)
1.A.9.a.(2)(c)
1.A.9.a.(2)(d)
1.A.9.a.(3)
1.A.9.a.(4)
1.A.9.a.(5)
1.A.9.a.(6)
1.A.9.b.(1)
1.A.9.b.(2)
BWDH has begun to engage in some fundraising. In order to demonstrate accountability, it is recommended that the organization implement written procedures that address, at a minimum, oversight and donor solicitation, communication, recognition, and confidentiality. The written procedures should also address valuing of donations, use of donations in accordance with donor intent, documentation and recordkeeping, and the use of volunteers in fundraising efforts. The organization should also provide training, including initial training and ongoing training, related to fundraising written procedures to appropriate personnel. As fundraising becomes more important, it may be necessary for the board members to also become engaged in this process. Websites such as for the BoardSource® program could provide some guidance 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.

Consultation

- Around the country, many organizations include one or two persons served on their boards of directors. Persons served are subject-matter experts in how services are provided and could add an important perspective to the BWDH board.

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.

Consultation

- BWDH has a risk management plan; however, it is encouraged to look further at potential serious risks such as loss of reputation from adverse publicity, loss of significant funding due to a lack of state or county revenue, serious vehicle accidents, etc., and consider these in its risk management planning.

1.H. Health and Safety

Description

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

Key Areas Addressed

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

Recommendations

1.H.13.e.
1.H.13.h.
1.H.13.j.
It is recommended that when transportation is provided for persons served, there be consistent evidence of safety equipment, such as reflective road hazard triangles; first aid supplies available in the vehicle(s); and written emergency procedures available in the vehicle(s). Although some vehicles had this equipment, this was not consistent throughout the fleet. One way to ensure that emergency procedures are readily available could be to print these onto a card that could be laminated and attached to the driver's side visor.

1.H.14.a.
1.H.14.b.(1)
1.H.14.b.(2)
1.H.14.b.(3)
It is recommended that comprehensive health and safety self-inspections be conducted at least semiannually on each shift. Each self-inspection should result in a written report that identifies the areas inspected, recommendations for areas needing improvement, and actions taken to respond to the recommendations. A simple checklist could be developed to assist the staff in performing these self-inspections.

Consultation

- The organization's procedures for cleaning up blood spills call for using paper towels and bleach. Although this may be reasonably effective for a small spill, the organization may want to purchase and make available blood spill kits for larger cleanups.

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.(5)
1.I.5.a.(6)
It is recommended that onboarding and engagement activities include orientation that addresses the organization's strategic plan and risk management plan.

1.I.8.f.
The organization has procedures for performance appraisal that address measurable goals; however, the procedures are inconsistently implemented. It is recommended that the organization consistently implement its written procedures for performance appraisal that address measurable goals.

Consultation

- As the organization works on succession planning at a variety of levels, it may want to try providing "acting" roles for those staff members who can step up and try taking on the responsibilities of their supervisors when those persons are out. Roles such as the acting executive director could give the staff member experience with the challenges of the next step and give the organization the opportunity to evaluate whether the staff member can take on a more significant role.

1.J. Technology

Description

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

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

Key Areas Addressed

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

Recommendations

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

There are no recommendations in this area.

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

1.L.1.b.(1)
The organization's leadership is urged to consistently implement an ongoing process for identification of barriers in architecture. One bathroom in a community housing site lacked a handrail for accessibility for persons using wheelchairs. It is encouraged to add a handrail to the bathroom.

1.M. Performance Measurement and Management

Description

CARF-accredited organizations demonstrate a culture of accountability by developing and implementing performance measurement and management plans that produce information an organization can act on to improve results for the persons served, other stakeholders, and the organization itself.

The foundation for successful performance measurement and management includes:

- Leadership accountability and support.
- Mission-driven measurement.
- A focus on results achieved for the persons served.
- Meaningful engagement of stakeholders.
- An understanding of extenuating and influencing factors that may impact performance.

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- A workforce that is knowledgeable about and engaged in performance measurement and management.
- An investment in resources to implement performance measurement and management.
- Measurement and management of business functions to sustain and enhance the organization.

Key Areas Addressed

- Leadership accountability for performance measurement and management
- Identification of gaps and opportunities related to performance measurement and management
- Input from stakeholders
- Performance measurement and management plan
- Identification of objectives and performance indicators for service delivery
- Identification of objectives and performance indicators for priority business functions
- Personnel training on performance measurement and management

Recommendations

1.M.3.a.(2)(e)
1.M.3.a.(7)
It is recommended that BWDH expand its performance measurement and management plan to address, for each program/service seeking accreditation, identification of measures for service delivery objectives, including service access and extenuating and influencing factors that may impact results.

1.M.8.a.
1.M.8.b.(1)
1.M.8.b.(2)
1.M.8.b.(3)
1.M.8.b.(4)
1.M.8.b.(5)
To measure service access, each program/service seeking accreditation should document an objective(s) and a performance indicator(s), including to whom or what the indicator(s) will be applied, the person(s)/position(s) responsible for collecting the data, the source(s) from which data will be collected, identification of relevant timeframes for collection of data, and a performance target that is based on the organization's performance history or established by the organization or a stakeholder or is based on an industry benchmark.

1.N. Performance Improvement

Description

CARF-accredited organizations demonstrate a culture of performance improvement through their commitment to proactive and ongoing review, analysis, reflection on their results in both service delivery and business functions, and transparency. The results of performance analysis are used to identify and implement data-driven actions to improve the quality of programs and services and to inform decision making. Performance information that is accurate and understandable to the target audience is shared with persons served, personnel, and other stakeholders in accordance with their interests and needs.

Key Areas Addressed

- Analysis of service delivery performance
- Analysis of business function performance
- Identification of areas needing performance improvement
- Implementation of action plans
- Use of performance information to improve program/service quality and make decisions
- Communication of performance information

Recommendations

1.N.1.c.(5)
1.N.1.d.(2)
The analysis of service delivery performance should address service delivery indicators for each program/service seeking accreditation, including service access. In addition, the analysis of service delivery performance should incorporate the impact of extenuating or influencing factors.

1.N.2.d.(2)
The analysis of business function performance should incorporate the impact of extenuating or influencing factors.

Section 2. Quality Individualized Services and Supports

Description

For an organization to achieve quality services, the persons served are active participants in the planning, implementation, and ongoing review and revision of the services offered. The organization's commitment to quality and the involvement of the persons served spans the entire time that the persons served are involved with services. The service planning process is individualized, establishing goals and measurable objectives that incorporate the unique strengths, abilities, needs, and preferences of the persons served. Services are responsive to the expectations of persons served and their desired outcomes from services, and are relevant to their maximum participation in the environments of their choice.

2.A. Program/Service Structure

Description

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

Key Areas Addressed

■ Services are person centered and individualized
■ Persons are given information about the organization's purposes and ability to address desired outcomes
■ Documented scope of services shared with stakeholders
■ Service delivery based on accepted field practices
■ Communication for effective service delivery
■ Entrance/exit/transition criteria

Recommendations

There are no recommendations in this area.

2.B. Individual-Centered Service Planning, Design, and Delivery

Description

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

The person served participates in decision making, directing, and planning that affects the person's life. Efforts to include the person served in the direction or delivery of those services/supports are evident.

Key Areas Addressed

■ Services are person centered and individualized
■ Persons are given information about the organization's purposes and ability to address desired outcomes

Recommendations

2.B.5.b.(2)
2.B.5.b.(3)
2.B.5.b.(4)
For the most part, the individual plans of services included goals and objectives for the individuals in different programs; however, some plans lacked specific measurable objectives. For example, the individual plan for an individual in the supported living program had overall goals that touched on some aspects of living in an apartment in general terms but lacked specific measurable objectives. BWDH is urged to ensure that the coordinated individual plans consistently identify specific measurable objectives. It could develop and implement supplementary individualized service plans for any individual service plans that lack measurable objectives. BWDH should also ensure that the individual plans consistently identify the methods/techniques to be used to achieve the objectives and those responsible for implementation.

2.C. Medication Monitoring and Management

Key Areas Addressed

■ Current, complete records of medications used by persons served
■ Written procedures for storage and safe handling of medications
■ Educational resources and advocacy for persons served in decision making
■ Physician review of medication use
■ Training and education for persons served regarding medications

Recommendations

There are no recommendations in this area.

2.E. Community Services Principle Standards

Description

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

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

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

Expected results from these services may include:

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

Key Areas Addressed

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

Recommendations

There are no recommendations in this area.

Section 4. Community Services

Description

An organization seeking CARF accreditation in the area of community services assists the persons served through an individualized person-centered process to obtain access to the services, supports, and resources of their choice to achieve their desired outcomes. This may be accomplished by direct service provision, linkages to existing generic opportunities and natural supports in the community, or any combination of these. The persons served are included in their communities to the degree they desire.

The organization provides the persons served with information so that they may make informed choices and decisions. Although we use the phrase person served, this may also include family served, as appropriate to the service and the individual.

The services and supports are arranged and changed as necessary to meet the identified desires of the persons served. Service designs address identified individual, family, socioeconomic, and cultural preferences.

Depending on the program's scope of services, expected results from these services/supports may include:

■ Increased inclusion in community activities.
■ Increased or maintained ability to perform activities of daily living.
■ Increased self-direction, self-determination, and self-reliance.
■ Self-esteem.
■ Housing opportunities.
■ Community citizenship.

- Increased independence.
- Meaningful activities.
- Increased employment options.

4.F. Respite Services (RS)

Description

Respite services facilitate access to time-limited, temporary relief from the ongoing responsibility of service delivery for the persons served, families, and/or organizations. Respite services may be provided in the home, in the community, or at other sites, as appropriate. An organization providing respite services actively works to ensure the availability of an adequate number of direct service personnel.

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

- Services/supports are responsive to the family's needs.
- Services/supports are safe for persons.
- Services/supports accommodate medical needs.

Key Areas Addressed

- Time-limited, temporary relief from service delivery
- Accommodation for family's living routine and needs of person served

Recommendations

There are no recommendations in this area.

4.G. Community Integration (COI)

Description

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

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

- Leisure or recreational activities.
- Communication activities.
- Spiritual activities.
- Cultural activities.
- Pre-vocational experiences.
- Vocational pursuits.
- Volunteerism in the community.
- Educational and training activities.
- Development of living skills.

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

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

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

Key Areas Addressed

- Opportunities for community participation

Recommendations

4.G.1.b.
Although community integration services have been adjusted due to the COVID-19 pandemic, there does not appear to be enough evidence to suggest that self-sufficiency has been actively pursued with the persons served. It is recommended that persons participating in services/activities move toward greater self-sufficiency or a slowing of the declines associated with aging.

4.G.2.e.(1)
Although the persons served are engaged in community activities, these activities should more clearly and consistently organized around assisting the persons served to achieve their goals of choice in community living skills development. Community living skill development appeared to be missing from some of the individual files reviewed and was not apparent in interviews.

4.H. Community Housing (CH)

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.

The residences in which community housing services are provided must be identified in the survey application. These sites will be visited during the survey process and identified in the survey report and accreditation decision as a site at which the organization provides a community housing program.

Key Areas Addressed
■ Safe, secure, private location
■ Support to persons as they explore alternatives
■ In-home safety needs
■ Access as desired to community activities
■ Options to make changes in living arrangements
■ System for on-call availability of personnel

Recommendations
4.H.2.a.
Although staff members in the community housing services interact with the residents on daily basis, there is no clear plan for regular meetings between the residents and staff. As part of its community living components, the organization should provide regular meetings between the persons served and staff. The residents could benefit from these regular meetings with staff where they could make decisions about their household; i.e., meal menus, activities, outings, chores, etc. It is suggested that decisions made in these meetings be documented and kept for future reference.

Consultation
■ The residents who share one room with another resident could be given the option of putting a removable partition between their beds to increase privacy.

4.I. Supported Living (SL)

Description

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

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

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

The home or individual apartment of the person served, even when the organization holds the lease or rental agreement on behalf of the person served, is not included in the survey application or identified as a site on the accreditation outcome.

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

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

Key Areas Addressed

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

Recommendations

There are no recommendations in this area.

Program(s)/Service(s) by Location

Blue Water Developmental Housing, Inc.

1600 Gratiot Boulevard, Suite 1
Marysville, MI 48040

Community Integration
Respite Services
Supported Living

Bruce Hills

11326 33 Mile Road
Bruce Township, MI 48065

Community Housing
Community Integration

Eunice Hayes Home

4291 Peck Road
Port Huron, MI 48060

Community Housing
Community Integration

Mackey Home

75070 Mackey Road
Richmond, MI 48062

Community Housing
Community Integration

Maple Street

471 Maple Street
Algonac, MI 48001

Community Housing
Community Integration

Nottingham

80525 Belle River Road
Memphis, MI 48041

Community Housing
Community Integration

Oakleaf Home

3405 Oakleaf Drive
Fort Gratiot, MI 48059

Community Housing
Community Integration

Pam McDonald Home

77175 Capac Road
Armada, MI 48005

Community Housing
Community Integration

Pound Road

36442 Pound Road
Richmond, MI 48062

Community Housing
Community Integration

Semi-Independent

958 Colorado Avenue
Marysville, MI 48040

Community Housing
Community Integration

Seneca Home

7636 32 Mile Road
Washington, MI 48095

Community Housing
Community Integration

Springborn Home

320 Tenth Street
Marysville, MI 48040

Community Housing
Community Integration

Stonybrook Home

3087 Stonybrook
Port Huron, MI 48060

Community Housing
Community Integration

Thornhill Home

2202 Thornhill Street
Port Huron, MI 48060

Community Housing
Community Integration