

**CARF Accreditation Report  
for  
The Arc of Opportunity  
Three-Year Accreditation**



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## About CARF

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

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

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

For more information or to contact CARF, please visit [www.carf.org/contact-us](http://www.carf.org/contact-us).

**Organization**

The Arc of Opportunity  
564 Main Street  
Fitchburg, MA 01420

**Organizational Leadership**

Mary Heafy, President/CEO

**Survey Date(s)**

January 11, 2018–January 12, 2018

**Surveyor(s)**

Janice I. Tilman, M.P.A., Administrative  
Nathaniel Rogers, Jr., Program

**Program(s)/Service(s) Surveyed**

Community Integration

**Previous Survey**

Three-Year Accreditation  
January 29, 2015–January 30, 2015

**Accreditation Decision****Three-Year Accreditation**

**Expiration: February 28, 2021**

# Executive Summary

This report contains the findings of CARF's on-site survey of The Arc of Opportunity conducted January 11, 2018–January 12, 2018. This report includes the following information:

- Documentation of the accreditation decision and the basis for the decision as determined by CARF's consideration of the survey findings.
- Identification of the specific program(s)/service(s) and location(s) to which this accreditation decision applies.
- Identification of the CARF surveyor(s) who conducted the survey and an overview of the CARF survey process and how conformance to the standards was determined.
- Feedback on the organization's strengths and recognition of any areas where the organization demonstrated exemplary conformance to the standards.
- Documentation of the specific sections of the CARF standards that were applied on the survey.
- Recommendations for improvement in any areas where the organization did not meet the minimum requirements to demonstrate full conformance to the standards.
- Any consultative suggestions documented by the surveyor(s) to help the organization improve its program(s)/service(s) and business operations.

## Accreditation Decision

On balance, The Arc of Opportunity demonstrated substantial conformance to the standards. The Arc embraces the accreditation process and is committed to incorporating the standards in its administrative systems and day-to-day service delivery practices. The actions of the leadership and staff members across the organization reflect a culture of support and advocacy on behalf of the participants. The organization proactively and collaboratively engages in initiatives and relationships with the community that inure to the benefit of the participants and their families. The participants, families, and other stakeholders expressed a high level of satisfaction with The Arc and its personnel. The key areas for improvement include the completion of the written ethical codes of conduct and corporate compliance; the development and implementation of procedures for subpoena, search warrants, investigations, and other legal actions; the analysis of tests of the emergency procedures; the at least annual analysis of all formal complaints; and the establishment of time limitations on its consent and release-of-information forms. The positive attitude and receptivity of the leadership and staff members to the consultation and other feedback provided during this survey instill confidence that The Arc possesses the willingness and capacity to bring it into full conformance to the standards.

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

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

- Submit annual reporting documents and other required information to CARF, as detailed in the Accreditation Policies and Procedures section in the standards manual.
- Maintain ongoing conformance to CARF's standards, satisfy all accreditation conditions, and comply with all accreditation policies and procedures, as they are published and made effective by CARF.

# Survey Details

## Survey Participants

The survey of The Arc of Opportunity was conducted by the following CARF surveyor(s):

- Janice I. Tilman, M.P.A., Administrative
- Nathaniel Rogers, Jr., Program

CARF considers the involvement of persons served to be vital to the survey process. As part of the accreditation survey for all organizations, CARF surveyors interact with and conduct direct, confidential interviews with consenting current and former persons served in the program(s)/service(s) for which the organization is seeking accreditation. In addition, as applicable and available, interviews may be conducted with family members and/or representatives of the persons served such as guardians, advocates, or members of their support system.

Interviews are also conducted with individuals associated with the organization, as applicable, which may include:

- The organization's leadership, such as board members, executives, owners, and managers.
- Business unit resources, such as finance and human resources.
- Personnel who serve and directly interact with persons served in the program(s)/service(s) for which the organization is seeking accreditation.
- Other stakeholders, such as referral sources, payers, insurers, and fiscal intermediaries.
- Community constituents and governmental representatives.

## Survey Activities

Achieving CARF accreditation involves demonstrating conformance to the applicable CARF standards, evidenced through observable practices, verifiable results over time, and comprehensive supporting documentation. The survey of The Arc of Opportunity and its program(s)/service(s) consisted of the following activities:

- Confidential interviews and direct interactions, as outlined in the previous section.
- Direct observation of the organization's operations and service delivery practices.
- Observation of the organization's location(s) where services are delivered.
- Review of organizational documents, which may include policies; plans; written procedures; promotional materials; governing documents, such as articles of incorporation and bylaws; financial statements; and other documents necessary to determine conformance to standards.
- Review of documents related to program/service design, delivery, outcomes, and improvement, such as program descriptions, records of services provided, documentation of reviews of program resources and services conducted, and program evaluations.
- Review of records of current and former persons served.

## Program(s)/Service(s) Surveyed

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

- Community Integration

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

## Representations and Constraints

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

## Survey Findings

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

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

## Areas of Strength

CARF found that The Arc of Opportunity demonstrated the following strengths:

- The Arc is recognized for its advocacy efforts that not only include the employees but also its board members, families, participants, and other stakeholders. It has been active at all levels, local, state, and national. It is further recognized as an expert in the field of developmental disabilities and has been called upon to help members of the community, such as police officers and the library staff, understand people with disabilities.
- The organization has created partnerships with a private school where the participants are matched with student "buddies" at the school. This has further enhanced its relationship with the community, created friendships that might not otherwise occur, and provided the students with the opportunity to learn that people with disabilities are people first.
- The organization has transformed its risk management plan into a risk registry that is reviewed regularly by the senior management team and bimonthly by the board of directors. This has allowed the organization to more effectively manage its risks.

- The organization has recently implemented a new method of doing performance evaluations. The new format not only appears to give better feedback to the employees on their job duties, but also provides more timely feedback because these are completed quarterly rather than annually. The feedback from employees about this new format seems to be very positive.
- The organization is recognized for recently having its technology system audited by a firm specializing in technology. This audit resulted in some important feedback from the firm regarding the organization's technology systems. As a result of this audit, the organization is in the process of implementing the recommendations and suggestions to improve its technology systems.
- The organization has a facility that is practical, clean, and well maintained. The classrooms are spacious, are decorative, and have a welcoming quality to them. The participants appear to find comfort and satisfaction in their surroundings.
- The Arc is acknowledged for the person-first attitude that it displays throughout the organization. The participants noted that they feel safe and respected. Promoting the desires and needs of the participants is an evident priority throughout the organization.
- The participants in the day habilitation programs are pleased with the services they receive. The employees were observed being professional and compassionate in their interactions with the participants. When two of the participants were asked to describe the program, they stated that “this place is awesome.”
- The stakeholders interviewed about the services that The Arc provides were complimentary in their responses. The community partners praised The Arc's staff members for empowering the participants, and being responsive and professional. They stated that of the 169 day habilitation programs in the Commonwealth of Massachusetts, The Arc belongs in the top 25 percent.
- The Arc has shown a real commitment to the professional development of the staff. The directors and mid-management supervision of employees exceed normal efforts, including mentoring, training, and increasing responsibility to prepare the staff for promotion within the organization.
- It is evident throughout the program service areas that the participants are listened to and their rights, opinions, dreams, and desires are honored by the employees. When asked what made The Arc special, a dad replied, “When my daughter is at The Arc, she is experiencing pure joy.”
- Helping the participants to become self-sufficient in the areas of independent living and self-advocacy is a primary focus of the organization. This is evidenced by the opportunities and activities that the organization provides in the classrooms and the outings to attend governmental legislative sessions that pertain to issues that affect them.
- The community integration program facilitated by The Arc is very successful and impacts the lives of the participants. The program’s employees are truly dedicated to the success of the participants. The outings are safe, are personalized, and result from the participants' goals and choice. The outings include Meals on Wheels, Brown Bag Concerts, a local elementary school, shopping, botanical garden, the New England Aquarium, The Butterfly Place, volunteering with the United Way, The Big E, Faneuil Hall, and a variety of other parks and museums.
- As it pertains to medication management and monitoring, the nurse has gone above and beyond the call to make sure that the employees have ready access to vital information that will help them do their jobs. There is a diagnosis in the records for each participant and a readily available definition of that diagnosis. This is updated as needed, and it helps new and seasoned employees understand certain behaviors and how to deal with them.
- The employees demonstrate dedication, compassion, and professionalism. They are also described as being loving, helpful, and supportive. There appears to be excellent rapport between the employees and the participants. The employees believe in the organization’s mission, and the organization is truly participant driven.

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



## Recommendations

### 1.A.6.a.(1)

### 1.A.6.a.(2)

### 1.A.6.a.(3)

### 1.A.6.a.(6)(e)

### 1.A.6.a.(9)(a)

### 1.A.6.a.(9)(b)

### 1.A.6.a.(9)(c)

### 1.A.6.a.(9)(d)

### 1.A.6.b.(1)

### 1.A.6.b.(2)(a)

### 1.A.6.b.(2)(b)

### 1.A.6.c.

As part of its ethical codes of conduct, the organization has developed policies and procedures for conflicts of interest; use of social media; exchange of gifts, money, and gratuities; personal fundraising; personal property; setting boundaries; human resources; and professional responsibilities. These are contained in the employee handbook and the Way of The Arc values. In order to be complete, the organization's written ethical codes of conduct should also address the areas of business; marketing; contractual relationships; witnessing of legal documents in service delivery; and prohibition of waste, fraud, abuse, or other wrongdoing. It might be helpful for the code of ethics to contain all areas under the code rather than throughout the employee handbook and other places so the employees and other stakeholders can understand the entire ethics code. Although the organization has a no-reprisal approach listed for other issues such as sexual harassment, it is not clear that this approach also applies to the ethical codes of conduct. When developing this approach, it should ensure that the written procedures dealing with allegations of violations of ethical codes not only include a no-reprisal approach for personnel reporting but also timeframes that are adequate for prompt consideration and result in timely decisions. Once the ethical codes of conduct are complete, the organization should educate its stakeholders on the updated version.

### 1.A.7.a.

### 1.A.7.c.(1)

The organization has recently had a change in personnel that resulted in a different staff member being responsible for corporate compliance. The organization should implement a policy on corporate compliance that has been adopted by its leadership and also document the current staff member designated as its new corporate compliance officer. It could document this designated staff member in its corporate compliance policy.

## Consultation

- The organization is completing checks with the Office of Inspector General that might exclude individuals from its federally funded programs. It is suggested that its employee handbook clearly identify that this background check is being completed along with other required background checks.

## 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

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

## 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

- 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.

## 1.E. Legal Requirements

### Description

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

### Key Areas Addressed

- Compliance with all legal/regulatory requirements

### Recommendations

#### 1.E.2.a.

#### 1.E.2.b.

#### 1.E.2.c.

#### 1.E.2.d.

The organization does not have written procedures for employees to follow if they received a subpoena, search warrant, investigation, or other legal action such as garnishment. The organization should implement procedures to guide personnel in responding to subpoenas, search warrants, investigations, and other legal action. The organization is encouraged to use the internet to find best practices to base its procedures. Once developed, it is suggested that these procedures be included in the employee handbook for easy reference.

## 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

- 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

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

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

### Recommendations

There are no recommendations in this area.

## 1.H. Health and Safety

### Description

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

### Key Areas Addressed

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

## Recommendations

1.H.7.c.(1)

1.H.7.c.(2)

1.H.7.c.(3)

1.H.7.c.(4)

1.H.7.d.

The form used to document tests of all emergency procedures has a space for comments about the test. This space is routinely left blank. In discussion with the individuals running the tests, there have been occasions where the participants refused to participate, but there were no references to these issues on the test form. The organization might want to add this information to the comments section each time a test is conducted. If no issues occur, the note might state that no issues occurred. The organization is further urged to analyze each unannounced test of its emergency procedures that addresses areas needing improvement, actions to be taken, results of the performance improvement plans, and necessary education and training of personnel. In addition to the test, the analysis should be evidenced in writing. This might be accomplished by adding an analysis section to the form. The Arc runs tests of its emergency procedures for violent or other threatening situations and bomb threats during its staff meetings every other month. The tests are documented in the meeting minutes. It is suggested that a drill form be completed each time these tests are run so there is a complete record in the drill record notebook.

## Consultation

- The Arc has a written procedure called "missing person" that includes procedures for a participant who has wandered or eloped, although not specifically stated. It is suggested that the missing person procedure more clearly delineate that the procedure includes both wandering and elopement so the personnel understand the procedure.
- In addition to the accident procedures, it is suggested that the organization develop additional emergency procedures to be kept in its vehicles for reference in emergency situations. These additional emergency procedures might include vehicle fires, hurricanes, tornadoes, other threatening situations, bomb threats, water in roadways, and any other emergency that might occur while driving.

## 1.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

There are no recommendations in this area.

### Consultation

- The organization has recently implemented a procedure to check college credentials through primary sources. It is encouraged to continue this practice with all positions requiring this level of education, including the current employees and job applicants.

- It is suggested that The Arc add a section into its performance evaluation tool to remind the employee being evaluated and his or her supervisor to review the job description and then acknowledge that it has been reviewed by signing the evaluation.

## 1.J. Technology

### Description

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

### Key Areas Addressed

- 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.

## 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

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

### Recommendations

#### 1.K.4.a.

#### 1.K.4.b.(1)

#### 1.K.4.b.(2)

#### 1.K.4.b.(3)

#### 1.K.4.b.(4)

Although the organization has a process for complaints, it does not analyze the formal complaints in writing. The organization should conduct a written analysis of all formal complaints at least annually that determines trends, areas needing performance improvement, actions to be taken to address the improvements needed, and actions taken or changes made to improve performance.

## **1.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**

There are no recommendations in this area.

## **1.M. Performance Measurement and Management**

### **Description**

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

### **Key Areas Addressed**

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

### **Recommendations**

There are no recommendations in this area.

## **1.N. Performance Improvement**

### **Description**

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

### **Key Areas Addressed**

- Proactive performance improvement
- Performance information shared with all stakeholders

### **Recommendations**

There are no recommendations in this area.

# Section 2. Quality Individualized Services and Supports

## 2.A. Program/Service Structure

### Description

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

### Key Areas Addressed

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

### Recommendations

#### 2.A.13.c.

The organization has produced consent and release-of-information forms; however, some of the forms do not include a place to indicate a time limitation. It is recommended that all release-of-confidential-information forms consistently include a time limitation. It is suggested that the old forms be discarded when the new forms are implemented.

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

### Description

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

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

### Key Areas Addressed

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

### Recommendations

There are no recommendations in this area.

## 2.C. Medication Monitoring and Management

### Key Areas Addressed

- Current, complete records of medication 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.G. Community Integration (COI)

#### Description

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

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

- Leisure or recreational activities.
- Communication activities.
- Spiritual activities.
- Cultural activities.
- Pre-vocational experiences.
- Vocational pursuits.

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

### **Key Areas Addressed**

- Opportunities for community participation

### **Recommendations**

There are no recommendations in this area.

### **Consultation**

- In an effort to assist in the training, cross-training, and continual refreshing of all staff's knowledge of each participant's behaviors, it is suggested that important and specific instructions relating to the behavior of each participant be documented in the form of bullet points on a small card for quick and easy access by the staff.
- The day habilitation program appears to be very successful and positively impacting the lives of the participants. This impact appears to be largely due to the staff members and their efforts. It is suggested that the staff members be formally recognized for their efforts throughout the year. One idea might be to utilize a monthly newsletter and devote an entire section recognizing and highlighting the positive impact that the employees are having on the participants, and disseminating the newsletter internally and to the community. This could further show the organization's appreciation for its employees.

# Program(s)/Service(s) by Location

## The Arc of Opportunity

564 Main Street  
Fitchburg, MA 01420

Community Integration