



EMPLOYMENT AND COMMUNITY SERVICES

**HCBS Quality Framework
CMS–ECS Crosswalk**

CARF 2006-2007 Standards

CARF International
4891 East Grant Road
Tucson, Arizona 85712 USA
Voice/TTY (520) 325-1044
Toll Free (888) 281-6531
Fax (520) 318-1129
www.carf.org

CARF Canada
Suite 1400 A, 10665 Jasper Avenue
Edmonton, Alberta T5J 3S9 CANADA
Voice (780) 429-2538
Fax (780) 426-7274
www.carfcanada.ca

CARF-CCAC
1730 Rhode Island Avenue, NW, Suite 209
Washington, DC 20036 USA
Voice (202) 587-5001
Fax (202) 587-5009
www.carf.org/aging

© 2007 by the Commission on Accreditation of Rehabilitation Facilities.
All rights reserved • Published 2005 • Printed in the United States of America

Any copying, republication, or redistribution of the content by any means is expressly prohibited. Unauthorized use of any content may violate copyright laws, trademark laws, the laws of privacy and publicity, and communications regulations and statutes. Data is provided for information purposes only and is not intended for trading purposes.



TABLE OF CONTENTS

Preface	1
FOCUS I. PARTICIPANT ACCESS	3
I.A. Information/Referral.....	4
I.B. Intake and Eligibility	7
I.B.1. User-Friendly Processes.....	7
I.B.2. Eligibility Determination.....	8
I.B.3. Referral to Community Resources.....	9
I.B.4. Individual Choice of HCBS.....	10
I.B.5. Prompt Initiation	12
FOCUS II. PARTICIPANT-CENTERED SERVICE PLANNING AND DELIVERY	13
II.A. Participant-Centered Service Planning.....	14
II.A.1. Assessment.....	20
II.A.2. Participant Decision Making.....	23
II.A.3. Free Choice of Providers	28
II.A.4. Service Plan	30
II.A.5. Participant Direction	33
II.B. Service Delivery	37
II.B.1. Ongoing Service and Support Coordination	37
II.B.2. Service Provision	43
II.B.3. Ongoing Monitoring.....	47
II.B.4. Responsiveness to Changing Needs.....	49
FOCUS III. PROVIDER CAPACITY AND CAPABILITIES.....	51
III.A. Provider Networks and Availability.....	52
III.B. Provider Qualifications.....	57
III.C. Provider Performance	70
FOCUS IV. PARTICIPANT SAFEGUARDS	73
IV.A. Risk and Safety Planning	74
IV.B. Critical Incident Management.....	76
IV.C. Housing and Environment	80
IV.D. Behavior Interventions	82

IV.E. Medication Management	85
IV.F. Natural Disasters and Other Public Emergencies	87
FOCUS V. PARTICIPANT RIGHTS AND RESPONSIBILITIES	89
V.A. Civic and Human Rights	90
V.B. Participant Decision Making Authority	92
V.C. Alternate Decision Making.....	95
V.D. Due Process.....	96
V.E. Grievances	97
FOCUS VI. PARTICIPANT OUTCOMES AND SATISFACTION.....	99
VI.A. Participant Satisfaction.....	100
VI.B. Participant Outcomes	102
FOCUS VII. SYSTEM PERFORMANCE	103
VII.A. System Performance Appraisal.....	104
VII.B. Quality Improvement.....	107
VII.C. Cultural Competency	110
VII.D. Participant and Stakeholder Involvement	112
VII.E. Financial Integrity.....	115



PREFACE

Quality of life and work in the community are defined by the individual being served. Since 1981, hundreds of thousands of persons have been able to obtain supports and services necessary to live and participate fully in the community. Now, with President Bush's Freedom Initiative, the commitment to the development of quality of care is paramount for local service providers and their state partners.

CMS has established and refined a Quality Matrix and Framework for guiding future plans and initiatives regarding quality in HCBS waiver programs. We encourage you to review the crosswalk of CARF business and service standards to the CMS Quality Matrix. These standards are presently used by over 2,300 community service providers accredited by CARF. The standards can act as excellent blueprints for establishing quality services and systems within the CMS Quality Matrix. The standards will assist the licensing, funding source, provider and important community stakeholders in the development, alignment and continuous improvement of their quality assurance systems, and provide ongoing opportunities for learning and information sharing.

It is our hope that these standards can provide an alignment of quality individualized services, with quality service providers, working within the state's quality assurance and funding service system. If we can provide any assistance in your systems planning and management of individualized service quality, please contact us.

Paul Andrew
CARF
4891 E. Grant Road
Tucson, AZ 85712
888-281-6531 x 112
www.carf.org



FOCUS I.

PARTICIPANT ACCESS

Desired Outcome: Individuals have ready access to home and community-based services and supports in their communities.

I.A. INFORMATION/REFERRAL

Desired Outcome: Individuals and families can readily obtain information concerning the availability of HCBS, how to apply and, if desired, offered a referral.

CARF RELATED STANDARDS

1.	E.	2.	A comprehensive inspection(s): a. Is conducted:
2.	A.	1.	The organization's policies and procedures for acceptance into services identify: c. Opportunities for persons to learn about the organization and its services.
2.	A.	14.	If a person served needs services that are not available through the organization, referrals to other providers are suggested.
3.	A.	1.	Information about the organization: a. Includes: (1) The array of services provided. (2) The training of staff to provide these services. (3) Services availability, including expected wait time. (4) Its ability to meet the needs of the persons served. (5) Outcomes performance. (6) Costs of services. (7) Responsibilities of the person served, including financial responsibility. (8) Its values and mission statement. (9) Options for persons served to direct their service design and delivery. (10) Potential for conflicts of interest, if any. (11) Other information about the organization, as requested. b. Is provided in an understandable format to the person served. c. Is updated as necessary to reflect changes in information provided.
3.	A.	7.	The person served is given information about the expected duration of the services.
3.	K.	4.	The job seeker/employee is given information about: a. The personnel services provided. b. The training of staff to provide the services. c. Performance information. d. Costs of services. e. Availability of jobs in the local job market. f. Potential career advancement. g. Rates of pay. h. Availability of benefits.
3.	L.	9.	The following information is provided to each person served: a. Employee classifications in the business enterprise. b. Responsibilities of the affirmative business.

<ul style="list-style-type: none"> c. Benefits provided by the affirmative business. d. Wage payment practices. e. Rate of pay. f. Work rules and customs. g. Nondiscrimination practices. h. Civil rights practices. i. Health and safety practices. j. Responsibilities of the employee. k. Corporate or work culture, including things such as chain of command, work relationships, and grievance procedures. l. Potential for advancement opportunities. m. Conditions for advancement. n. Employment options available in the organization. o. Opportunities for training on other jobs. p. Policies for transfer. q. Union membership policies, if applicable. r. Other job opportunities in the local area consistent with his or her interests. s. Career path opportunities relative to the person's goals and abilities.
<p>4. A. 1. Information about the organization:</p> <ul style="list-style-type: none"> a. Includes: <ul style="list-style-type: none"> (1) The array of services provided. (2) The training of staff to provide these services. (3) Services availability, including expected wait time. (4) Its ability to meet the needs of the persons served. (5) Outcomes performance. (6) Costs of services. (7) Responsibilities of the person served, including financial responsibility. (8) Its values and mission statement. (9) Options for persons served to direct their service design and delivery. (10) Potential for conflicts of interest, if any. (11) Other information about the organization, as requested. b. Is provided in an understandable format to the person served. c. Is updated as necessary to reflect changes in information provided.
<p>5. A. 1. Information about the organization:</p> <ul style="list-style-type: none"> a. Includes: <ul style="list-style-type: none"> (1) The array of services provided. (2) The scope of its services. (3) The training of staff to provide these services. (4) Services availability, including expected wait time. (5) Its ability to meet the needs of the persons served. (6) Outcomes performance. (7) Costs of services. (8) Responsibilities of the person served, including financial responsibility. (9) Its values and mission statement. (10) Options for persons served to direct their service design and delivery. (11) Affiliations of the organization and staff members. (12) Availability of equipment, including expected wait time for it. (13) Potential for conflicts of interest, if any. (14) Other information about the organization, as requested.

FOCUS I. PARTICIPANT ACCESS

		b. Is provided in an understandable format to the person served.
		c. Is updated as necessary to reflect changes in information provided.
6.	C. 6.	The organization provides information and referral regarding: a. Services and supports for older adults and their families. b. Community education on aging and disabilities.
7.	E. 6.	The organization provides information or referral to assist the persons served in securing assistance to meet their basic needs.

I.B. INTAKE AND ELIGIBILITY

I.B.1. User-Friendly Processes

Desired Outcome: Intake and eligibility determination processes are understandable and user-friendly to individuals and families and there is assistance available in applying for HCBS.

CARF RELATED STANDARDS

1.	E.	2.	A comprehensive inspection(s): a. Is conducted: (1) Annually. (2) At all facilities where the organization delivers services or provides administration on a regular and consistent basis.
4.	D.	3.	Assessment information is used to identify appropriate: c. Eligibility for services.

I.B.2. Eligibility Determination

Desired Outcome: Each individual's need and eligibility for HCBS are assessed and determined promptly.

CARF RELATED STANDARDS

1.	B.	1.	The leadership demonstrates accessibility planning that addresses the needs of the: a. Persons served.
1.	B.	2.	Accessibility plan(s) address: a. Identification of barriers in the following areas: (4) Finances.
1.	E.	2.	A comprehensive inspection(s): a. Is conducted: (3) By a qualified external authority.

I.B.3. Referral to Community Resources

Desired outcome: Individuals who need services but are not eligible for HCBS are linked to other community resources.

CARF RELATED STANDARDS

3.	H.	4.	<p>Based on the needs and choices of the person served, the organization may provide or refer the person to resources for addressing, as relevant to job support:</p> <ul style="list-style-type: none"> a. Basic academic skills. b. Basic self-care skills. c. Communication skills. d. Work attitudes. e. Tools and equipment related to the person's job. f. Mobility and travel training. g. Interpersonal relationships with coworkers. h. Job-site safety practices. i. Self-advocacy and assertiveness skills. j. Career planning. k. Problem-solving and decision-making skills. l. Health maintenance and medication management. m. Knowledge of governmental and community service agencies. n. Management of legal affairs. o. Management of benefits and financial resources. p. Recreational and leisure time activities. q. Use of phone and computer resources. r. Use of community services and resources. s. Advocacy or self-advocacy centers for independent living. t. Other issues, as identified.
4.	A.	7.	<p>The organization is involved in identifying and networking with community resources based on the individual needs and desires of the persons and/or families served that expand the:</p> <ul style="list-style-type: none"> a. Variety of community life experiences. b. Opportunities for community access. c. Opportunities for community inclusion.

I.B.4. Individual Choice of HCBS

Desired Outcome: Each individual is given timely information about available services to exercise his or her choice in selecting between HCBS and institutional services.

CARF RELATED STANDARDS

1.	D.	2.	The organization implements policies promoting the following rights of the persons served: d. Access to information pertinent to the person served in sufficient time to facilitate his or her decision making. e. Informed consent or refusal or expression of choice regarding: (1) Service delivery.
1.	E.	8.	When services are delivered in the community, the organization: b. Regularly provides information and training designed to reduce physical risks to: (1) Persons served.
2.	A.	6.	The persons served are given information about: a. Setting their individual service goals, when applicable. b. Planning the services to be delivered.
3.	A.	1.	Information about the organization: a. Includes: (1) The array of services provided. (2) The training of staff to provide these services. (3) Services availability, including expected wait time. (4) Its ability to meet the needs of the persons served. (5) Outcomes performance. (6) Costs of services. (7) Responsibilities of the person served, including financial responsibility. (8) Its values and mission statement. (9) Options for persons served to direct their service design and delivery. (10) Potential for conflicts of interest, if any. (11) Other information about the organization, as requested.
3.	A.	6.	The person served is involved in making informed employment-related decisions, including: d. Their rights and responsibilities related to achieving desired employment outcomes.
4.	A.	2.	The persons and/or families served participate in making decisions about their services including: e. Possible alternatives for services: (1) Within the organization. (2) Within the community.
4.	D.	1.	The students served and their families: a. Are informed of their options before they transition from school to community services.

			b. Have the opportunity to exercise these options.
4.	G.	8.	Matching of the persons served with foster families is based on their identified: c. Preferences. d. Desires.
4.	K.	1.	Based on the needs of the persons served, assistance is offered in securing or maintaining housing that is: a. Safe. b. Affordable. c. Accessible. d. Chosen by the individual.
4.	K.	3.	Persons served have input into: a. Where they live. b. With whom they live.
7.	F.	4.	When possible, persons served have options to make changes in their living arrangements: a. At their request. b. At the request of their families, when applicable. c. In transitional living, on a periodic basis when initiated by the organization. d. Based on informed choice.
7.	G.	1.	Based on the needs of the persons served, assistance is offered in securing or maintaining housing that is: d. Chosen by the individual.
7.	H.	2.	The program provides the following services in collaboration with the person served: b. Identification of the choices available for community resources.

I.B.5. Prompt Initiation

Desired Outcome: Services are initiated promptly when the individual is determined eligible and selects HCBS.

CARF RELATED STANDARDS

1.	C.	4.	For service delivery improvement, the data collection system: c. Measures for indicators in each of the following areas: (2) The efficiency of services. (3) Service access.
1.	C.	5.	A performance analysis is completed: c. That analyzes performance indicators of: (2) The efficiency of services. (3) Service access.
1.	G.	1.	The organization identifies: a. Its leadership structure. b. The roles and responsibilities of each level of leadership.
1.	G.	4.	Corporate responsibility efforts include, at a minimum, the following: a. Written ethical codes of conduct in at least the following areas: (1) Business. (2) Marketing.
2.	A.	1.	The organization's policies and procedures for acceptance into services identify: a. Criteria for the order of acceptance of any person awaiting service. b. The position or entity responsible for making acceptance decisions. c. Opportunities for persons to learn about the organization and its services.
2.	A.	3.	When a person is found ineligible: a. The person is informed of the reasons. b. The referral source is informed of the reasons. c. The person is given information about potential alternative services.
2.	A.	13.	The individual service plan is communicated in a manner that is understandable: a. To the person served. b. To the persons responsible for implementing the plan.
2.	A.	14.	If a person served needs services that are not available through the organization, referrals to other providers are suggested.
2.	A.	15.	If any part of the services for which the organization is seeking accreditation is provided by another organization or person, these contracted services are:
3.	A.	1.	Information about the organization: a. Includes: (3) Services availability, including expected wait time.



FOCUS II.

PARTICIPANT-CENTERED

SERVICE PLANNING

AND DELIVERY

Desired Outcome: Services and supports are planned and effectively implemented in accordance with each participant's unique needs, expressed preferences and decisions concerning his/her life in the community.

II.A. PARTICIPANT-CENTERED SERVICE PLANNING

Desired Outcome: Services and supports are planned and effectively implemented in accordance with each participant’s unique needs, expressed preferences and decisions concerning his/her life in the community.

CARF RELATED STANDARDS

2.	A.	8.	The following information is used in the development of the individual service plans: a. Relevant medical history. b. Relevant psychological information. c. Relevant social information. d. Information on previous direct services and supports.
2.	A.	9.	A coordinated individualized service plan is based on the person’s: a. Strengths. b. Abilities. c. Needs. d. Preferences. e. Desired outcomes. f. Cultural background. g. Other issues, as identified.
2.	A.	10.	A coordinated individualized service plan: a. Is developed with the input of the person served. b. Identifies: (1) Overall goals. (2) Specific measurable objectives. (3) Methods/techniques to be used to achieve the objectives. (4) Those responsible for implementation. c. Is reviewed on a regular basis with respect to expected outcomes. d. Is revised, as appropriate: (1) Based on the satisfaction of the person served. (2) To remain meaningful to the person served. (3) Based on the changing needs of the person served.
2.	A.	12.	The person and/or family served and/or their legal representatives are involved in: a. Assessments of potential risks to each person’s health in the community. b. Assessments of potential risks to each person’s safety in the community. c. Decisions to accept or reject such risks. d. Identification of actions to be taken to minimize risks.

			e. Identification of individuals responsible for those actions.
3.	A.	2.	The following employment information regarding each person served is considered in the development of the individual's employment service plan: a. Work history. b. Previous training and education. c. The management and planning of benefits the person is receiving. d. Resources for career planning and advancement. e. Transportation needs. f. Availability of natural supports. g. Criminal history, if applicable. h. Cultural and language background.
3.	A.	3.	Information and resources regarding employment services are provided to the person seeking employment in a manner understandable to him or her.
3.	A.	4.	The individual employment service plan identifies the person's desired employment outcomes that are relevant to the local job market.
3.	A.	5.	The individual employment plan identifies: a. The job seeker's desired employment opportunities and outcomes. b. Services to achieve desired outcomes. c. Strategies for accommodation, if needed.
3.	A.	8.	The job seeker provides input into defining employment outcome satisfaction.
3.	C.	4.	Based on information provided and assessment information, the student and/or family served participate in making decisions about their services, including: a. Selection or identification of adult support agencies including: (1) Funding sources, as applicable. (2) Employment services, supports, and employers, as applicable. (3) Community services and supports, as applicable. b. The expected results of the services for the individual. c. How the design of the services meets identified needs. d. How the services will be delivered. e. The expected duration of the services. f. Possible alternatives for services. g. How results will be evaluated. h. Other information about the services, as requested.
3.	D.	1.	The following information is gathered, as appropriate, for each person seeking employment: a. Results of vocational assessment. b. Reports of employment counseling sessions. c. Behavioral observations. d. Medical reports. e. Results of psychological, psycho-metric, and/or educational testing. f. Performance information from previous employment. g. Self-reported interests. h. Other pertinent information.
3.	D.	5.	A written employment planning report addresses: a. Employment exploration and employment discussion results. b. Planned employment outcomes, if appropriate at that point for the person. c. Training needs. d. Appropriate jobs available in the employment market. e. Recommendations for referral. f. Individualized environmental or job-task modifications required for employment, if

			evidenced through actual exploration sites used.
			g. Barriers to the achievement and maintenance of employment.
			h. Community resources for assistance in addressing employment barriers.
3.	H.	3.	Nonwork needs of the person served that may impact employment are: a. Identified. b. Addressed: (1) By referral to supportive services, or (2) Through the individual planning process.
3.	I.	1.	Job development planning considers these factors: a. Referral and assessment information. b. Desires of the person seeking employment. c. Job-seeking skills assessment of the person. d. Opportunities available for employment in the local job market. e. Self-sufficiency, when considering wages and benefits planning.
3.	I.	11.	Nonwork needs of the person served that may impact employment are: a. Identified. b. Addressed: (1) By referral to supportive services, or (2) Through the individual planning process.
3.	J.	3.	The organization assists the person to develop a self-employment plan of implementation, which includes: a. Setting priorities. b. Addressing needs of doing business such as required business practices, equipment, physical plant, communications, and staff/ supports. c. The budget for implementation of the self-employment plan. d. The proposed service or product. e. Analysis of the needs of present and potential customers for the proposed service or product. f. Assessment of the person's capabilities to deliver the proposed business. g. Establishment of a distinct business identity. h. Mission statement and business goals. i. Description of the market area to be served. j. Customer profile. k. Identification of competitors. l. Potential impacts of changes and trends in the business environment (risk analysis). m. Operating and control systems. n. Break-even analysis. o. Potential networking opportunities. p. Startup costs. q. Cash flow analysis. r. Ongoing supports, including: (1) Business administration. (2) Bookkeeping. (3) Sales and marketing.
3.	K.	10.	Job development planning considers these factors: a. Referral and assessment information. b. Desires of the job seeker. c. Job-seeking skills assessment of the person. d. Opportunities available for employment in the employment market.

4.	B.	1.	The persons served are linked to services and resources as identified in their individual plans.
4.	B.	5.	The intensity of case management/services coordination is based on the needs of the person as identified in his or her individual plan.
4.	C.	1.	Assessments of each child or youth served include information on his or her: <ul style="list-style-type: none"> a. Developmental history, such as developmental age factors, motor development, and functioning. b. Medical or physical health history. c. Culture/ethnicity. d. Treatment history. e. School history. f. Language functioning, including: <ul style="list-style-type: none"> (1) Speech functioning. (2) Hearing functioning. g. Visual functioning. h. Immunization record. i. Learning ability. j. Intellectual functioning. k. Family relationships. l. Interactions with peers. m. Environmental surroundings. n. Prenatal exposure to alcohol, tobacco, or other drugs. o. History of use of alcohol, tobacco, or other drugs.
4.	C.	2.	The assessments are appropriate with respect to the child's or youth's: <ul style="list-style-type: none"> a. Age. b. Development. c. Culture. d. Education.
4.	C.	3.	The family identifies the following relating to the development of their child or youth: <ul style="list-style-type: none"> a. Concerns. b. Resources. c. Priorities. d. Expectations. e. Activities that might be beneficial.
4.	D.	3.	Assessment information is used to identify appropriate: <ul style="list-style-type: none"> a. Community services. b. Funding sources.
4.	D.	5.	The plan for transition from school to community services identifies, as appropriate: <ul style="list-style-type: none"> a. The student's future employment potential. b. Potential future residential settings. c. Community resources available. d. Existing family supports. e. The availability of transportation. f. Training opportunities. g. Other information identified by the student and/or the family.
4.	H.	1.	Matching of the persons served with host families is based on their identified: <ul style="list-style-type: none"> a. Strengths. b. Needs.

			c. Preferences.
4.	I.	1.	The preferences and needs of each family determine the specific respite services received by the family.
4.	J.	7.	Personnel are on site based on the needs of the persons served, as identified in their individual plans.
4.	K.	5.	Support personnel are available, based on the needs of the person served, as identified in the individual plan.
5.	B.	4.	When a persons exits services a summary report contains:
6.	B.	1.	Assessments of each child or youth served include information on his or her: <ul style="list-style-type: none"> a. Developmental history, such as developmental age factors, motor development, and functioning. b. Medical or physical health history. c. Culture/ethnicity. d. Treatment history. e. School history. f. Language functioning, including: <ul style="list-style-type: none"> (1) Speech functioning. (2) Hearing functioning. g. Visual functioning. h. Immunization record. i. Learning ability. j. Intellectual functioning. k. Family relationships. l. Interactions with peers. m. Environmental surroundings. n. Prenatal exposure to alcohol, tobacco, or other drugs. o. History of use of alcohol, tobacco, or other drugs.
6.	B.	2.	The assessments are appropriate with respect to the child's or youth's: <ul style="list-style-type: none"> a. Age. b. Development. c. Culture. d. Education.
7.	D.	1.	The persons served are linked to services and resources to achieve objectives as identified in their individual plan.
7.	D.	5.	The intensity of case management is based on the needs of the person as identified in his or her individual plan.
7.	F.	7.	Personnel are on site based on the needs of the persons served, as identified in their individual plans.
7.	G.	5.	Support personnel are available based on the needs of the person served, as identified in the individual plan.
7.	K.	1.	Assessments of each child or adolescent served include information on his or her: <ul style="list-style-type: none"> a. Developmental history, such as developmental age factors, motor development, and functioning. b. Medical or physical health history. c. Culture/ethnicity. d. Treatment history. e. School history. f. Language functioning, including: <ul style="list-style-type: none"> (1) Speech functioning. (2) Hearing functioning. g. Visual functioning.

	<ul style="list-style-type: none"> h. Immunization record. i. Learning ability. j. Intellectual functioning. k. Family relationships. l. Interactions with peers. m. Environmental surroundings. n. Prenatal exposure to alcohol, tobacco, or other drugs. o. History of use of alcohol, tobacco, or other drugs. p. Parental/guardian custodial status. q. When applicable, parents'/guardians' ability/willingness to participate in services.
<p>7. K. 2.</p>	<p>The assessments are appropriate with respect to the child's or adolescent's:</p> <ul style="list-style-type: none"> a. Age. b. Development. c. Culture. d. Education.

II.A.1. Assessment

Desired Outcome: Comprehensive information concerning each participant’s preferences and personal goals, needs and abilities, health status and other available supports is gathered and used in developing a personalized service plan.

CARF RELATED STANDARDS

2.	A.	11.	As appropriate, the following needs are addressed in the plan: a. Assistive technology. b. Reasonable accommodations. c. Identified health risks. d. Identified safety risks.
2.	A.	18.	When services are provided to identified criminal offenders: a. Information is provided to the person served concerning the relationship between the criminal justice entity and the organization. b. A detailed history of the person’s criminal history is maintained, as required by state, provincial, and/or local government authorities. c. Services are coordinated with other systems, as needed and/or required.
3.	C.	6.	Each student’s plan for transition from school to community services is consistent with his or her individual education plan.
3.	C.	7.	As appropriate, the individualized service plan for transition from school to community services identifies: a. Desired opportunities for instruction within the educational systems or the community. b. Specific opportunities for community experiences/inclusion, including employment, as desired by the student served. c. The manner by which the student will be included in the community. d. Any barriers to the student’s community or employment opportunities and methods to address any identified barriers. e. Desired employment services. f. Current and potential future residential housing. g. Community resources available to meet identified needs and desires. h. Existing natural or family supports. i. The availability of transportation. j. Other information identified by the student and/or the family.
3.	D.	3.	During employment exploration, information about the person, which may include the following, is gathered: a. Job seeking skills. b. Work-related behaviors. c. Learning styles. d. Aptitudes. e. Mode of communication.

			f. Interest in a particular job.
3.	E.	1.	An individual written evaluation plan is developed in a timely manner with each person served and is based on: a. Referral information. b. Referral questions to be answered. c. Questions from the person served. d. The initial interview. e. The stated overall purpose of the evaluation.
3.	F.	1.	Individualized employee development services reflect the identified employment objectives of each person seeking employment.
4.	B.	3.	Based on the needs of the persons served, case management/services coordination includes: a. Activities carried out in collaboration with the persons served and/or their families, as appropriate. b. Outreach/facilitation to encourage participation of the persons served. c. Coordination of, or assistance with, crisis intervention and stabilization services, as appropriate. d. Assisting the persons served to achieve goals for independence as defined by the persons served. e. Optimizing resources and opportunities through: (1) Community linkages. (2) Enhanced social support networks. f. Assistance with: (1) Accessing transportation. (2) Securing safe housing that is reflective of the: (a) Abilities of the persons served. (b) Preferences of the persons served. (c) Needs of the persons served. (3) Exploring employment or other meaningful activities. g. Provision of, or linkages to, skill development services needed to enable the person served to perform age-appropriate daily living activities, including, but not limited to: (1) Budgeting. (2) Meal planning. (3) Personal care. (4) Housekeeping and home maintenance. (5) Other identified needs. h. For youths nearing or preparing for adulthood, services and supports needed to provide the skills to live independently. i. Evidence of linkages with necessary and appropriate: (1) Financial services. (2) Medical or other healthcare. (3) Other community services.
4.	D.	3.	Assessment information is used to identify appropriate: a. Community services. b. Funding sources. c. Eligibility for services.
4.	E.	2.	Services/activities are organized around: a. The stated goals of the persons served. b. The identified preferences of the persons served. c. The identified needs of the persons served.

			<ul style="list-style-type: none"> d. Improving the ability of the persons served to understand their needs. e. Assisting the persons served to achieve their goals of choice in the following areas:
6.	B.	3.	<p>The family identifies the following relating to the development of their child or youth:</p> <ul style="list-style-type: none"> a. Concerns. b. Resources. c. Priorities. d. Expectations. e. Activities that might be beneficial.
6.	B.	4.	<p>The following identified needs of each child and youth served are addressed:</p> <ul style="list-style-type: none"> a. Healthcare. b. Nutrition. c. Safety. d. Education. e. Emotional. f. Child development. g. Social and leisure. h. Religious and spiritual. i. Others, as identified.
7.	A.	14.	<p>Team members, in response to the needs of the persons served:</p> <ul style="list-style-type: none"> a. Help empower each person served to actively participate with the team to promote recovery, progress, or well-being. b. Provide services that are consistent with the needs of each person served through direct interaction with that person and/or with individuals identified by that person. c. Are culturally and linguistically competent relative to the needs of the persons served. d. Reflect the culture of the persons served. e. Help to implement the individual plan of each person served. f. Meet as often as necessary to carry out decision-making responsibilities.
7.	B.	8.	<p>The organization ensures that the use of medications by the person served is regularly reviewed by a physician or qualified professional licensed to prescribe medications and addresses:</p> <ul style="list-style-type: none"> a. The appropriateness of each medication, as determined by: <ul style="list-style-type: none"> (1) The needs and preferences of each person served.

II.A.2. Participant Decision Making

Desired Outcome: Information and support is available to help participants make informed selections among service options.

CARF RELATED STANDARDS

1.	C.	7.	Performance information is shared in format(s) that are useful to the: a. Persons served. c. Other stakeholders.
1.	D.	1.	The rights of the persons served are: a. Communicated to the persons served: b. Available at all times for review and clarification.
1.	E.	15.	For a Community Housing program utilizing individual apartments, the organization provides an education program to residents that includes: a. Information about community resources and how to access them. b. Safety issues related to the service delivery site. c. Access to emergency care when it is needed. d. Specific healthcare procedures and techniques. e. Contingency plans in case either the support system or the service provider is unable to deliver care. f. A review of how to deal with emergencies and evacuation from the residence.
2.	A.	7.	The persons served are informed about securing and retaining public assistance for which they are eligible.
3.	A.	1.	Information about the organization: a. Includes: (1) The array of services provided. (2) The training of staff to provide these services. (3) Services availability, including expected wait time. (4) Its ability to meet the needs of the persons served. (5) Outcomes performance. (6) Costs of services. (7) Responsibilities of the person served, including financial responsibility. (8) Its values and mission statement. (9) Options for persons served to direct their service design and delivery. (10) Potential for conflicts of interest, if any. (11) Other information about the organization, as requested. b. Is provided in an understandable format to the person served. c. Is updated as necessary to reflect changes in information provided.
3.	A.	6.	The person served is involved in making informed employment-related decisions, including: a. The expected results of the services for the individual. b. How the design of the services meets his or her identified needs.

			<ul style="list-style-type: none"> c. How and when results will be evaluated. d. Their rights and responsibilities related to achieving desired employment outcomes.
3.	A.	10.	<p>The person served is provided with:</p> <ul style="list-style-type: none"> a. Resources for employment guidance. b. A variety of opportunities for meaningful employment. c. Sources for access to other resources, as requested by the person served.
3.	A.	11.	<p>Access to current information on employment opportunities is available and is:</p> <ul style="list-style-type: none"> a. Shared with the person served, as appropriate. b. Used in developing services responsive to local market needs.
3.	B.	1.	<p>The person served has access to an array of services.</p>
3.	B.	5.	<p>As needed, the person served receives educational resources on the following:</p> <ul style="list-style-type: none"> a. Safety precautions and the prevention of injuries and occupational diseases. b. Appropriate medical or behavioral health resources/options. c. Job analysis, restructuring, modification, and work conditioning. d. Medications and their potential effects on employment performance. e. Individual service plan development and implementation. f. The role of organized labor in business. g. Employee assistance services. h. Assistive technology applications. i. Reasonable accommodations.
3.	B.	6.	<p>Upon request, employers receive educational resources on the following:</p> <ul style="list-style-type: none"> a. Medical or behavioral health resources/options. b. Job analysis, restructuring, modification, and work conditioning. c. Medications and their potential effects on employment performance. d. Employee assistance services. e. Assistive technology applications. f. Reasonable accommodations. g. Other issues identified.
3.	C.	3.	<p>Prior to planning each phase of the transition services, the student and/or family are provided understandable information in a timely manner regarding:</p> <ul style="list-style-type: none"> a. Employment services, including: <ul style="list-style-type: none"> (1) Opportunities for assessments or career exploration. (2) Community resources and service providers. (3) Opportunities and options for further education or training. (4) Options for employment. (5) Support services for employment. (6) New lifelong learning. b. Community services, including: <ul style="list-style-type: none"> (1) Community resources and service providers. (2) Opportunities for community integration. (3) Options for community living. (4) Support services for community living. c. Funding sources, including:
3.	D.	4.	<p>A person seeking employment is informed of:</p> <ul style="list-style-type: none"> a. Job opportunities in the employment market consistent with his or her interests and capabilities. b. Career path opportunities relative to the person's goals and abilities. c. Self-employment and entrepreneurship options, as appropriate.
3.	G.	3.	<p>Information is provided about:</p>

			<ul style="list-style-type: none"> a. Availability of similar jobs in the local job market. b. Potential career development, if appropriate. c. Rate of pay. d. Availability of benefits.
3.	H.	1.	<p>The following information is provided to each person served:</p> <ul style="list-style-type: none"> a. The conditions of maintaining employment. b. Benefits provided by the organization. c. Responsibilities of the organization. d. Responsibilities of the person served. e. Wage payment practices. f. Rate of pay. g. Work rules and customs. h. Nondiscrimination practices. i. Civil rights practices. j. Policies for transfer. k. Employee classifications in the organization. l. Health and safety practices. m. Potential for advancement opportunities. n. Conditions for advancement. o. Employment options available in the organization. p. Opportunities for training on other jobs. q. Union membership policies, if applicable.
3.	H.	5.	<p>A person is provided opportunities for exploration of other work opportunities, as desired:</p>
3.	I.	4.	<p>Job development activities may include:</p> <ul style="list-style-type: none"> d. Services requested by the person served, including: <ul style="list-style-type: none"> (1) Job-site consultation to identify or modify barriers to employment. (2) Negotiating: <ul style="list-style-type: none"> (a) Job carving. (b) Job accommodations.
3.	I.	5.	<p>The job developer ensures that the new employee is provided information:</p> <ul style="list-style-type: none"> a. To be appropriately oriented to the job. b. As is available to all employees.
3.	J.	1.	<p>When a person served expresses interest in self-employment, informed choice is facilitated through discussion with the person served, as appropriate, of at least the following:</p> <ul style="list-style-type: none"> a. Feasibility. b. The potential market. c. Financial considerations. d. The potential impact on the person's benefits. e. Economic goals.
3.	K.	4.	<p>The job seeker/employee is given information about:</p> <ul style="list-style-type: none"> a. The personnel services provided. b. The training of staff to provide the services. c. Performance information. d. Costs of services. e. Availability of jobs in the local job market. f. Potential career advancement. g. Rates of pay.

			h. Availability of benefits.
3.	K.	10.	<p>Job development planning considers these factors:</p> <ul style="list-style-type: none"> a. Referral and assessment information. b. Desires of the job seeker. c. Job-seeking skills assessment of the person. d. Opportunities available for employment in the employment market.
4.	A.	1.	<p>Information about the organization:</p> <ul style="list-style-type: none"> a. Includes: <ul style="list-style-type: none"> (1) The array of services provided. (2) The training of staff to provide these services. (3) Services availability, including expected wait time. (4) Its ability to meet the needs of the persons served. (5) Outcomes performance. (6) Costs of services. (7) Responsibilities of the person served, including financial responsibility. (8) Its values and mission statement. (9) Options for persons served to direct their service design and delivery. (10) Potential for conflicts of interest, if any. (11) Other information about the organization, as requested. b. Is provided in an understandable format to the person served.
4.	A.	3.	<p>The organization establishes a staff selection process for persons served that:</p> <ul style="list-style-type: none"> a. Considers for those served: <ul style="list-style-type: none"> (1) Individual choices. (2) Wants. (3) Desires. (4) Plans. (5) Individual risk management factors. b. Allows persons served to provide input regarding the selection of their direct staff on an ongoing basis.
4.	C.	14.	<p>When a child/youth served moves to a school or other community service, a transition/information plan is provided to the family prior to the delivery of the new service.</p>
4.	E.	5.	<p>The organization provides information or referral to assist the persons served in securing assistance to meet their basic needs.</p>
4.	G.	8.	<p>Matching of the persons served with foster families is based on their identified:</p> <ul style="list-style-type: none"> c. Preferences. d. Desires.
4.	H.	4.	<p>Each host family contract identifies the following for each involved party:</p> <ul style="list-style-type: none"> a. Role. b. Responsibility. c. Interrelationship. d. Specific needs. e. Monitoring.
4.	J.	1.	<p>Each person served is in a residential setting with his or her own personal space that:</p> <ul style="list-style-type: none"> a. Respects privacy.
5.	A.	1.	<p>Information about the organization:</p> <ul style="list-style-type: none"> a. Includes: <ul style="list-style-type: none"> (1) The array of services provided.

			<ul style="list-style-type: none"> (2) The scope of its services. (3) The training of staff to provide these services. (4) Services availability, including expected wait time. (5) Its ability to meet the needs of the persons served. (6) Outcomes performance. (7) Costs of services. (8) Responsibilities of the person served, including financial responsibility. (9) Its values and mission statement. (10) Options for persons served to direct their service design and delivery. (11) Affiliations of the organization and staff members. (12) Availability of equipment, including expected wait time for it. (13) Potential for conflicts of interest, if any. (14) Other information about the organization, as requested.
		b.	Is provided in an understandable format to the person served.
		c.	Is updated as necessary to reflect changes in information provided.
7.	A.	9.	The program ensures that information and education that is relevant to the needs of the persons served is provided.
7.	F.	2.	The organization provides the following community living components:
		a.	Regular meetings between the persons served and staff.
7.	I.	5.	The employee assistance program is provided by an identifiable delivery system. The system includes provisions for:
		b.	Assigning qualified staff members to the program.
7.	I.	8.	All employee assistance program staff members:
		a.	Have an understanding of employee assistance program-related functions.
		b.	Have training in employee assistance program-related functions.
		c.	Maintain their skills and abilities.

II.A.3. Free Choice of Providers

Desired Outcome: Information and support is available to assist participants to freely choose among qualified providers.

CARF RELATED STANDARDS

2.	A.	5.	As required by funding sources and for legal reasons, signed informed consent for services is: a. Obtained. b. Retained.
3.	A.	3.	Information and resources regarding employment services are provided to the person seeking employment in a manner understandable to him or her.
3.	A.	14.	When an organization has an employer/employee relationship with a person served, the organization complies with:
3.	B.	2.	The person is linked to services and community resources that enable him or her to achieve employment objectives, as identified.
3.	C.	4.	Based on information provided and assessment information, the student and/or family served participate in making decisions about their services, including: a. Selection or identification of adult support agencies including: (1) Funding sources, as applicable. (2) Employment services, supports, and employers, as applicable. (3) Community services and supports, as applicable. b. The expected results of the services for the individual. c. How the design of the services meets identified needs. d. How the services will be delivered. e. The expected duration of the services. f. Possible alternatives for services. g. How results will be evaluated. h. Other information about the services, as requested.
3.	I.	1.	Job development planning considers these factors: a. Referral and assessment information. b. Desires of the person seeking employment. c. Job-seeking skills assessment of the person. d. Opportunities available for employment in the local job market. e. Self-sufficiency, when considering wages and benefits planning.
4.	A.	1.	Information about the organization: a. Includes: (1) The array of services provided. (2) The training of staff to provide these services. (3) Services availability, including expected wait time. (4) Its ability to meet the needs of the persons served. (5) Outcomes performance.

			<ul style="list-style-type: none"> (6) Costs of services. (7) Responsibilities of the person served, including financial responsibility. (8) Its values and mission statement. (9) Options for persons served to direct their service design and delivery. (10) Potential for conflicts of interest, if any. (11) Other information about the organization, as requested.
4.	A.	2.	<p>The persons and/or families served participate in making decisions about their services including:</p> <ul style="list-style-type: none"> a. The expected results of the services for the individuals. b. How the design of the services meets their identified needs. c. How the services will be delivered. d. The expected duration of the services. e. Possible alternatives for services: <ul style="list-style-type: none"> (1) Within the organization. (2) Within the community. f. How results will be evaluated. g. Futures planning. h. Other information about the services, as requested.
4.	D.	1.	<p>The students served and their families:</p> <ul style="list-style-type: none"> a. Are informed of their options before they transition from school to community services. b. Have the opportunity to exercise these options.
4.	G.	8.	<p>Matching of the persons served with foster families is based on their identified:</p> <ul style="list-style-type: none"> c. Preferences. d. Desires.
4.	J.	4.	<p>When possible, persons served have options to make changes in their living arrangements:</p> <ul style="list-style-type: none"> a. At their request. b. At the request of their families, when applicable. c. In transitional living, on a periodic basis when initiated by the organization. d. Based on informed choice.

II.A.4. Service Plan

Desired Outcome: Each participant’s plan comprehensively addresses his or her identified need for HCBS, health care and other services in accordance with his or her expressed personal preferences and goals.

CARF RELATED STANDARD

2.	A.	8.	The following information is used in the development of the individual service plans: a. Relevant medical history. b. Relevant psychological information. c. Relevant social information. d. Information on previous direct services and supports.
3.	A.	2.	The following employment information regarding each person served is considered in the development of the individual’s employment service plan: a. Work history. b. Previous training and education. c. The management and planning of benefits the person is receiving. d. Resources for career planning and advancement. e. Transportation needs. f. Availability of natural supports. g. Criminal history, if applicable. h. Cultural and language background.
3.	A.	5.	The individual employment plan identifies: a. The job seeker’s desired employment opportunities and outcomes. b. Services to achieve desired outcomes. c. Strategies for accommodation, if needed.
3.	A.	10.	The person served is provided with: a. Resources for employment guidance. b. A variety of opportunities for meaningful employment. c. Sources for access to other resources, as requested by the person served.
3.	A.	11.	Access to current information on employment opportunities is available and is: a. Shared with the person served, as appropriate. b. Used in developing services responsive to local market needs.
3.	E.	2.	The plan is prepared: a. By the person seeking employment and the evaluator. b. With input of the referral source or other stakeholder, as appropriate.
3.	E.	3.	The plan identifies: a. How questions in the plan will be answered through the evaluation. b. Assistive technology to be used in the evaluation process, as needed, if a need is identified.

3. E. 8.	<p>Comprehensive vocational evaluation services have the capability to assess or obtain the following information:</p> <ul style="list-style-type: none"> g. Learning styles, including ability to understand, recall, and respond to various types of instruction. h. Interests, aptitudes, and career aspirations. i. Personal, social, and work-related behaviors. j. Modes of communication. k. Physical and psychomotor capacities. l. Work skills and tolerances. m. Job-seeking and job-keeping skills. n. Knowledge of occupational information. o. Possible employment objectives, including self-employment. p. Customer service skills, attitude toward work, and understanding of work culture. q. Identified health risks. r. Identified safety risks.
3. I. 14.	<p>There is regular review of the need for ongoing supports with the:</p> <ul style="list-style-type: none"> a. Person served. b. Employer, as appropriate.
3. K. 5.	<p>As needed, the job seeker receives educational resources on:</p> <ul style="list-style-type: none"> a. Safety precautions and the prevention of injuries and occupational diseases. b. Appropriate medical or behavioral health resources/options. c. Medications and their potential effects on employment performance. d. Job analysis, restructuring, modification, and work conditioning. e. Employment applications. f. Résumé development. g. Interviewing skills. h. Salary and benefits negotiations. i. The role of organized labor in business. j. Employee assistance services and resources. k. Career development. l. Self-advocacy. m. Managing the impact of earned income on government or insurance benefits. n. Other issues identified for the individual, as needed.
4. A. 4.	<p>Individual service plans:</p> <ul style="list-style-type: none"> a. Describe opportunities for community inclusion, as desired by the persons and/or families served. b. Specify the manner by which individuals will be included in the community.
4. C. 4.	<p>The following identified needs of each child and youth served are addressed:</p> <ul style="list-style-type: none"> a. Healthcare. b. Nutrition. c. Safety. d. Education. e. Emotional. f. Child development. g. Social and leisure. h. Religious and spiritual. i. Others, as identified.
4. C. 5.	<p>Individualized services are provided based on:</p> <ul style="list-style-type: none"> a. The identified needs of the child and youth served.

			b. The desired outcomes of the family.
4.	D.	4.	Each student's plan for transition from school to community services is coordinated to ensure accurate information when the individual education plan is developed.
4.	G.	5.	Action planning addresses: a. Reunification with the family of origin, if appropriate. b. A range of possible living opportunities, as available. c. Permanency and stability in the life of the person served. d. Time lines of services. e. Activities to meet the time lines.
4.	G.	12.	Foster family services address the needs of each person served in the following areas: a. Healthcare. b. Safety. c. Education. d. Emotional. e. Social and leisure activities. f. Religious/spiritual. g. Others, as identified.
5.	A.	3.	The individual service plan should identify each person's desired outcomes from using assistive technology.
5.	A.	4.	The assistive technology planning process demonstrates collaboration with available community agencies, organizations, funding sources, and networks, as appropriate for the persons served.
5.	B.	1.	The following employment information regarding each person served is integrated into the individual's service plan: a. Previous employment assistive technology services. b. Previous training and education.
5.	B.	2.	The individual assistive technology service plan: a. Identifies functional limitations to the employment opportunities of the person served. b. Addresses potential for accommodations. c. Integrates accommodations including, if applicable, current employment situation. d. Addresses dynamic nature of disability, as appropriate. e. Addresses anticipated changes in employment, as appropriate. f. Addresses, as appropriate, to services for the person served: (1) Safety risks. (2) Health risks.
5.	C.	3.	The individual assistive technology service plan: a. Addresses the dynamic nature of the disability, as appropriate. b. Addresses, as appropriate, to services and persons served: (1) Safety risks. (2) Health risks.
7.	E.	2.	Services/activities are organized around: a. The stated goals of the persons served. b. The identified preferences of the persons served. c. The identified needs of the persons served. d. Improving the ability of the persons served to understand their needs. e. Assisting the persons served to achieve their goals of choice in the following areas:

II.A.5. Participant Direction

Desired Outcome: Participants have the authority and are supported to direct and manage their own services to the extent they wish.

CARF RELATED STANDARDS

1.	I.	13.	If the organization takes responsibility for the funds of persons served, it implements policies that define: a. How the persons served will give informed consent for the expenditure of funds.
2.	A.	4.	Prior to the planning and delivery of services, the organization ensures that all involved are aware of their responsibilities regarding services.
2.	A.	6.	The persons served are given information about: a. Setting their individual service goals, when applicable.
2.	A.	9.	A coordinated individualized service plan is based on the person's: d. Preferences.
3.	A.	1.	Information about the organization: a. Includes: (9) Options for persons served to direct their service design and delivery.
3.	A.	6.	The person served is involved in making informed employment-related decisions, including: a. The expected results of the services for the individual. b. How the design of the services meets his or her identified needs. c. How and when results will be evaluated. d. Their rights and responsibilities related to achieving desired employment outcomes.
3.	A.	8.	The job seeker provides input into defining employment outcome satisfaction.
3.	B.	9.	With the documented permission of the person served, service satisfaction information about achieving outcomes expectations is shared with the agencies and organizations providing services.
3.	C.	4.	Based on information provided and assessment information, the student and/or family served participate in making decisions about their services, including: a. Selection or identification of adult support agencies including: (1) Funding sources, as applicable. (2) Employment services, supports, and employers, as applicable. (3) Community services and supports, as applicable. b. The expected results of the services for the individual. c. How the design of the services meets identified needs. d. How the services will be delivered. e. The expected duration of the services. f. Possible alternatives for services. g. How results will be evaluated. h. Other information about the services, as requested.
3.	C.	8.	The student served has opportunities, as desired, to:

			<ul style="list-style-type: none"> a. Develop and/or increase: <ul style="list-style-type: none"> (1) Social contacts. (2) Personal relationships. (3) Community networks. b. Enhance his or her quality of life by:
3.	D.	6.	<p>The person's employment planning report is:</p> <ul style="list-style-type: none"> b. Disseminated, with the consent of the person served, in a timely manner to agencies and individuals responsible for implementing recommendations in the report.
3.	E.	9.	<p>The information in each written evaluation report:</p> <ul style="list-style-type: none"> c. Is shared in an understandable manner with the person seeking employment. d. With written permission of the person seeking employment, is disseminated in a timely manner to agencies and individuals responsible for implementing the report recommendations.
3.	H.	4.	<p>Based on the needs and choices of the person served, the organization may provide or refer the person to resources for addressing, as relevant to job support:</p> <ul style="list-style-type: none"> a. Basic academic skills. b. Basic self-care skills. c. Communication skills. d. Work attitudes. e. Tools and equipment related to the person's job. f. Mobility and travel training. g. Interpersonal relationships with coworkers. h. Job-site safety practices. i. Self-advocacy and assertiveness skills. j. Career planning. k. Problem-solving and decision-making skills. l. Health maintenance and medication management. m. Knowledge of governmental and community service agencies. n. Management of legal affairs. o. Management of benefits and financial resources. p. Recreational and leisure time activities. q. Use of phone and computer resources. r. Use of community services and resources. s. Advocacy or self-advocacy centers for independent living. t. Other issues, as identified.
3.	I.	1.	<p>Job development planning considers these factors:</p> <ul style="list-style-type: none"> e. Self-sufficiency, when considering wages and benefits planning.
3.	I.	2.	<p>Job search activities are individualized to the person seeking employment and involve his or her:</p> <ul style="list-style-type: none"> a. Input. b. Approval.
3.	I.	13.	<p>Job support services to retain employment are provided at times and locations suited to meet the needs and desires of the:</p> <ul style="list-style-type: none"> a. Person served.
3.	K.	10.	<p>Job development planning considers these factors:</p> <ul style="list-style-type: none"> b. Desires of the job seeker.
3.	K.	13.	<p>Based on the needs and choices of the job seeker, the organization provides or refers the job seeker to resources for addressing, as relevant to employment and career advancement:</p> <ul style="list-style-type: none"> a. Basic academic skills.

			<ul style="list-style-type: none"> b. Basic self-care skills. c. Communication skills. d. Work attitudes. e. Tools and equipment related to the person's job. f. Mobility and travel training. g. Interpersonal relationships with coworkers. h. Job-site safety practices. i. Self-advocacy and assertiveness skills. j. Career planning. k. Problem solving and decision-making skills. l. Health maintenance and medication management. m. Knowledge of governmental and community service agencies. n. Management of legal affairs. o. Management of benefits and financial resources. p. Use of technology. q. Use of community services and resources. r. Benefits management and planning.
4.	A.	1.	<p>Information about the organization:</p> <ul style="list-style-type: none"> a. Includes: <ul style="list-style-type: none"> (9) Options for persons served to direct their service design and delivery.
4.	A.	2.	<p>The persons and/or families served participate in making decisions about their services including:</p> <ul style="list-style-type: none"> a. The expected results of the services for the individuals. b. How the design of the services meets their identified needs. c. How the services will be delivered. d. The expected duration of the services. e. Possible alternatives for services: <ul style="list-style-type: none"> (1) Within the organization. (2) Within the community. f. How results will be evaluated. g. Futures planning. h. Other information about the services, as requested.
4.	A.	3.	<p>The organization establishes a staff selection process for persons served that:</p> <ul style="list-style-type: none"> a. Considers for those served: <ul style="list-style-type: none"> (1) Individual choices. (2) Wants. (3) Desires. (4) Plans. (5) Individual risk management factors. b. Allows persons served to provide input regarding the selection of their direct staff on an ongoing basis.
4.	D.	1.	<p>The students served and their families:</p> <ul style="list-style-type: none"> b. Have the opportunity to exercise these options.
4.	D.	2.	<p>The students and their families make informed decisions about future participation in their communities.</p>
4.	D.	6.	<p>Collaborative transition planning promotes opportunities for community integration.</p>
4.	G.	1.	<p>Services reflect the active participation of the:</p> <ul style="list-style-type: none"> a. Person served. b. Family of origin, if appropriate.

			<ul style="list-style-type: none"> c. Foster family. d. Others, as appropriate.
4.	I.	1.	The preferences and needs of each family determine the specific respite services received by the family.
5.	A.	2.	<p>Persons and/or families served participate in making informed decisions about their assistive technology services, including:</p> <ul style="list-style-type: none"> a. Expected results of services for persons served. b. How the design of services meets identified needs. c. Off-the-shelf technology resources, as appropriate. d. How services will be delivered. e. Expected time lines of the services. f. Possible alternatives for services. g. How results will be evaluated. h. Full disclosure to persons served and funders about future: <ul style="list-style-type: none"> (1) Technology benefits. (2) Maintenance. (3) Expected costs. (4) Expected responsibilities. (5) Technology changes. i. Other aspects about the service design, as requested.
6.	A.	9.	<p>The organization provides an orientation to the services for the customer that includes:</p> <ul style="list-style-type: none"> d. Responsibilities of the person served, including any conditions for maintaining participation in services.

II.B. SERVICE DELIVERY

II.B.1. Ongoing Service and Support Coordination

Desired Outcome: Participants have continuous access to assistance as needed to obtain and coordinate services and promptly address issues encountered in community living.

CARF RELATED STANDARDS

1.	B.	3.	A status report about the removal of barriers: a. Is prepared annually. b. Is in writing.
1.	C.	9.	If the organization provides services via the Internet, the organization provides for: a. Security of personal information. b. Alternative access formats. c. Accessibility and accommodations. d. A user-friendly interface. e. Online information 24 hours a day, 7 days a week. f. Personnel to provide instruction and guidance to accessing services provided by the organization. g. Connections or links with local service providers or affiliates for personal contact and information.
2.	A.	12.	The person and/or family served and/or their legal representatives are involved in: a. Assessments of potential risks to each person's health in the community. b. Assessments of potential risks to each person's safety in the community. c. Decisions to accept or reject such risks. d. Identification of actions to be taken to minimize risks. e. Identification of individuals responsible for those actions.
2.	A.	16.	Persons and/or families served are given opportunities to enhance their advocacy skills through: a. Training. b. Support for systems advocacy activities. c. Support for self-advocacy activities. d. Linkages with self-advocacy organizations. e. Other appropriate means, if applicable.
3.	A.	10.	The person served is provided with: a. Resources for employment guidance. b. A variety of opportunities for meaningful employment. c. Sources for access to other resources, as requested by the person served.
3.	B.	3.	Employment services coordination:

			<ul style="list-style-type: none"> a. Identifies: <ul style="list-style-type: none"> (1) Community services. (2) Community resources. b. Establishes relationships with community resources. c. Maintains communication contacts with resources. d. Coordinates services for a person, as needed.
3.	B.	4.	<p>Services coordination personnel maintain a working knowledge of:</p> <ul style="list-style-type: none"> a. Community services and resource availability. b. Financial issues pertinent to the referral process.
3.	C.	3.	<p>Prior to planning each phase of the transition services, the student and/or family are provided understandable information in a timely manner regarding:</p> <ul style="list-style-type: none"> a. Employment services, including: <ul style="list-style-type: none"> (1) Opportunities for assessments or career exploration. (2) Community resources and service providers. (3) Opportunities and options for further education or training. (4) Options for employment. (5) Support services for employment. (6) New lifelong learning. b. Community services, including: <ul style="list-style-type: none"> (1) Community resources and service providers. (2) Opportunities for community integration. (3) Options for community living. (4) Support services for community living. c. Funding sources, including:
3.	C.	5.	<p>Transition service planning uses a collaborative process to promote opportunities for employment and community integration.</p>
3.	C.	7.	<p>As appropriate, the individualized service plan for transition from school to community services identifies:</p> <ul style="list-style-type: none"> a. Desired opportunities for instruction within the educational systems or the community. b. Specific opportunities for community experiences/inclusion, including employment, as desired by the student served. c. The manner by which the student will be included in the community. d. Any barriers to the student's community or employment opportunities and methods to address any identified barriers. e. Desired employment services. f. Current and potential future residential housing. g. Community resources available to meet identified needs and desires. h. Existing natural or family supports. i. The availability of transportation. j. Other information identified by the student and/or the family.
3.	D.	5.	<p>A written employment planning report addresses:</p> <ul style="list-style-type: none"> h. Community resources for assistance in addressing employment barriers.
3.	E.	7.	<p>When a functional capacities assessment is performed, the evaluation report identifies:</p> <ul style="list-style-type: none"> b. Accommodations/assistive technology needed to enhance the person's capacities. c. Supports and resources available for inclusion in the community.
3.	E.	9.	<p>The information in each written evaluation report:</p> <ul style="list-style-type: none"> b. Includes recommendations, as appropriate, for training, employment, community resources, and job accommodations.

3.	F.	2.	<p>Services are provided, as needed, that address barriers to the person's employment goals, including:</p> <ul style="list-style-type: none"> a. Attendance and punctuality. b. Grooming skills, hygiene, and appropriate work attire. c. Job-seeking skills such as interviewing, completing applications, and developing and using job-finding networks and resources. d. On-the-job performance skills related to quality and quantity of work. e. Work-related community skills such as time management, mobility, and money management skills. f. Functional literacy skills. g. Knowledge of work practices such as payroll deductions, insurance, benefits, safety, unions, and retirement. h. Work-related academic skills. i. Work-related communication skills.
3.	H.	4.	<p>Based on the needs and choices of the person served, the organization may provide or refer the person to resources for addressing, as relevant to job support:</p> <ul style="list-style-type: none"> a. Basic academic skills. b. Basic self-care skills. c. Communication skills. d. Work attitudes. e. Tools and equipment related to the person's job. f. Mobility and travel training. g. Interpersonal relationships with coworkers. h. Job-site safety practices. i. Self-advocacy and assertiveness skills. j. Career planning. k. Problem-solving and decision-making skills. l. Health maintenance and medication management. m. Knowledge of governmental and community service agencies. n. Management of legal affairs. o. Management of benefits and financial resources. p. Recreational and leisure time activities. q. Use of phone and computer resources. r. Use of community services and resources. s. Advocacy or self-advocacy centers for independent living. t. Other issues, as identified.
3.	I.	12.	<p>Based on the needs and choices of the person served, the organization may provide or refer the person served to resources for addressing, as relevant to job supports:</p> <ul style="list-style-type: none"> a. Basic academic skills. b. Basic self-care skills. c. Communication skills. d. Work attitudes. e. Tools and equipment related to the person's job. f. Mobility and travel training. g. Interpersonal relationships with coworkers. h. Job-site safety practices. i. Self-advocacy and assertiveness skills. j. Career planning. k. Problem-solving and decision-making skills. l. Health maintenance and medication management.

			<ul style="list-style-type: none"> m. Knowledge of governmental and community service agencies. n. Management of legal affairs. o. Management of benefits and financial resources. p. Recreational and leisure time activities. q. Use of phone and computer resources. r. Use of community services and resources. s. Other issues, as identified.
4.	A.	5.	<p>The organization assists persons and/or families served to enhance quality of life by providing opportunities to develop and/or increase, as desired:</p> <ul style="list-style-type: none"> a. Social contacts. b. Personal relationships. c. Community networks. d. New supports.
4.	A.	7.	<p>The organization is involved in identifying and networking with community resources based on the individual needs and desires of the persons and/or families served that expand the:</p> <ul style="list-style-type: none"> a. Variety of community life experiences. b. Opportunities for community access. c. Opportunities for community inclusion.
4.	C.	20.	<p>If residential services are provided, the in-home safety needs of the child/youth served are addressed with respect to:</p> <ul style="list-style-type: none"> a. Environmental risks. b. Abuse and/or neglect inflicted by self or others. c. Self-protection skills. d. Medication management. e. Domestic violence.
4.	D.	5.	<p>The plan for transition from school to community services identifies, as appropriate:</p> <ul style="list-style-type: none"> a. The student's future employment potential. b. Potential future residential settings. c. Community resources available. d. Existing family supports. e. The availability of transportation. f. Training opportunities. g. Other information identified by the student and/or the family.
4.	D.	6.	<p>Collaborative transition planning promotes opportunities for community integration.</p>
4.	E.	2.	<p>Services/activities are organized around:</p> <ul style="list-style-type: none"> e. Assisting the persons served to achieve their goals of choice in the following areas: <ul style="list-style-type: none"> (1) Community living skills development.
4.	K.	8.	<p>Based on the needs and desires of the persons served, support is offered in the following areas:</p> <ul style="list-style-type: none"> a. Healthy lifestyles. b. Personal care. c. Home maintenance. d. Their role as a tenant, when applicable. e. Effective self-advocacy and decision making. f. Family contact, if desired. g. Social life and friendships/ relationships. h. Community membership and social networks. i. Financial stability.

			j. Other identified needs.
4.	K. 9.	Persons served are provided opportunities to choose and access:	<ul style="list-style-type: none"> a. Community activities. b. Cultural activities. c. Social activities. d. Recreational activities. e. Spiritual activities. f. Employment/income generation activities. g. Transportation, when necessary. h. Other.
5.	C. 1.	Services enable the persons and/or families served:	<ul style="list-style-type: none"> a. Greater access to their communities.
6.	B. 6.	Based on the needs of the child or youth served, services include the development of:	<ul style="list-style-type: none"> a. Community living skills. b. Social skills. c. Social supports. d. Vocational skills. e. Educational opportunities for the family to learn about:
6.	B. 20.	If residential services are provided, the in-home safety needs of the child/youth served are addressed with respect to:	<ul style="list-style-type: none"> a. Environmental risks. b. Abuse and/or neglect inflicted by self or others. c. Self-protection skills. d. Medication management. e. Domestic violence.
7.	A. 3.	Services are designed and implemented to:	<ul style="list-style-type: none"> e. Support the integration of the persons served into the community.
7.	D. 3.	Based on the needs of the persons served, case management/services coordination includes:	<ul style="list-style-type: none"> c. Coordination of, or assistance with, crisis intervention and stabilization services, as appropriate. d. Assistance with achieving goals for independence as defined by the persons served. e. Optimizing resources and opportunities through: g. Provision of, or linkage to, skill development services needed to enable the person served to perform daily living activities, including, but not limited to: h. Evidence of linkage with necessary and appropriate:
7.	E. 2.	Services/activities are organized around:	<ul style="list-style-type: none"> e. Assisting the persons served to achieve their goals of choice in the following areas: <ul style="list-style-type: none"> (1) Community living skill development. (2) Interpersonal relations. (3) Recreation or use of leisure time opportunities. (4) Vocational development or employment. (5) Educational development. (6) Self-advocacy. (7) Access to nondisability related social resources.
7.	G. 8.	Based on the needs and desires of the person served, support is offered in the following areas:	<ul style="list-style-type: none"> a. Healthy lifestyles. b. Personal care.

			<ul style="list-style-type: none"> c. Home maintenance. d. His or her role as a tenant, when applicable. e. Effective self-advocacy and decision making. f. Family contact, if desired. g. Social life and friendships/relationships. h. Community membership and social networks. i. Financial stability. j. Other identified needs.
7.	G.	9.	<p>Persons served are provided opportunities to choose and access:</p> <ul style="list-style-type: none"> a. Community activities. b. Cultural activities. c. Social activities. d. Recreational activities. e. Spiritual activities. f. Employment/income generation activities. g. Transportation, when necessary. h. Other.
7.	H.	2.	<p>The program provides the following services in collaboration with the person served:</p> <ul style="list-style-type: none"> a. Assessment of the needs of the person served. b. Identification of the choices available for community resources. c. Provision of informational materials pertaining to community resources, when possible. d. Identification of services that are: <ul style="list-style-type: none"> (1) Culturally appropriate. (2) Age appropriate. e. Implementation of methods to: <ul style="list-style-type: none"> (1) Determine if services were accessed by the persons served. (2) Provide follow-up, when indicated.
7.	J.	4.	<p>Prevention/diversion program activities are:</p> <ul style="list-style-type: none"> a. Culturally relevant. b. Age appropriate. c. Gender appropriate. d. Targeted towards multiple settings within the community.
7.	J.	7.	<p>The prevention/diversion program:</p> <ul style="list-style-type: none"> b. Demonstrates that staff members are knowledgeable of current community resources.

II.B.2. Service Provision

Desired Outcome: Services are furnished in accordance with the participant’s plan.

CARF RELATED STANDARDS

2.	A.	10.	A coordinated individualized service plan: c. Is reviewed on a regular basis with respect to expected outcomes. d. Is revised, as appropriate:
2.	A.	15.	If any part of the services for which the organization is seeking accreditation is provided by another organization or person, these contracted services are: a. Provided under a written agreement. b. Monitored by the organization for assurance of ongoing conformance to all applicable CARF standards. c. Regularly monitored for cost-effectiveness. d. Evaluated at least annually.
3.	C.	10.	If objectives in the transition plan are not being met, a collaborative process is used to review and modify the plan as necessary to identify alternative strategies.
3.	F.	1.	Individualized employee development services reflect the identified employment objectives of each person seeking employment.
3.	G.	4.	Course materials and information are provided, as needed, in formats to meet the individual needs of participants.
3.	H.	4.	Based on the needs and choices of the person served, the organization may provide or refer the person to resources for addressing, as relevant to job support: a. Basic academic skills. b. Basic self-care skills. c. Communication skills. d. Work attitudes. e. Tools and equipment related to the person’s job. f. Mobility and travel training. g. Interpersonal relationships with coworkers. h. Job-site safety practices. i. Self-advocacy and assertiveness skills. j. Career planning. k. Problem-solving and decision-making skills. l. Health maintenance and medication management. m. Knowledge of governmental and community service agencies. n. Management of legal affairs. o. Management of benefits and financial resources. p. Recreational and leisure time activities. q. Use of phone and computer resources. r. Use of community services and resources.

			<ul style="list-style-type: none"> s. Advocacy or self-advocacy centers for independent living. t. Other issues, as identified.
3.	I.	3.	<p>Individual job development plans are:</p> <ul style="list-style-type: none"> a. Reviewed, as appropriate to the person. b. Revised, as necessary.
3.	I.	7.	A work-site job task analysis is developed.
3.	I.	8.	<p>Training activities address, as needed:</p> <ul style="list-style-type: none"> a. Attendance and punctuality. b. Grooming skills, hygiene, and appropriate work attire. c. Work-related community skills. d. Functional literacy skills. e. Work-related academic skills. f. Work-related communication skills. g. Work-related interpersonal skills, including conflict resolution and anger management. h. Work ethics. i. Knowledge of work practices. j. Corporate or work culture. k. Orientation to work duties. l. Job performance and progress. m. Increasing individual performance to company standards. n. Work-site job modifications, if needed. o. Integration into the employment setting. p. Strategies for resolving job-related issues. q. Use of transportation.
3.	I.	9.	<p>Training strategies include, as needed:</p> <ul style="list-style-type: none"> a. On-site consultations. b. Using coworker facilitators. c. Decreasing the trainer's presence on the job site. d. Transferring training and supports to natural supports. e. Mentoring.
3.	I.	11.	<p>Nonwork needs of the person served that may impact employment are:</p> <ul style="list-style-type: none"> b. Addressed: <ul style="list-style-type: none"> (1) By referral to supportive services, or (2) Through the individual planning process.
3.	J.	4.	The organization assists the person seeking self-employment directly or by referral in the implementation of the plan.
3.	K.	11.	<p>Job development activities may include:</p> <ul style="list-style-type: none"> a. Contacting employers and building networks to develop and/or identify job opportunities. b. Work-site analysis, as needed. c. When appropriate, providing job-site consultation to identify or modify barriers to employment. d. Providing consultation in job carving or other job accommodations. e. Maintaining an organized system of current job openings. f. Assisting the job applicants in finding jobs and employers well matched to their employment goals. g. Methods to create the job seekers' employment profile. h. Guidance on how to create and use an employment portfolio.
3.	K.	12.	Training activities address, as needed:

			<ul style="list-style-type: none"> a. Orientation to the work-site environment. b. Orientation to the work-site culture. c. Orientation to work duties. d. Job performance and progress. e. Increasing individual performance to company standards. f. Work-site job modifications, if needed. g. Integration into the employment setting. h. Strategies for resolving job-related issues. i. Use of transportation.
4.	B.	3.	<p>Based on the needs of the persons served, case management/services coordination includes:</p> <ul style="list-style-type: none"> a. Activities carried out in collaboration with the persons served and/or their families, as appropriate. b. Outreach/facilitation to encourage participation of the persons served. c. Coordination of, or assistance with, crisis intervention and stabilization services, as appropriate. d. Assisting the persons served to achieve goals for independence as defined by the persons served. e. Optimizing resources and opportunities through: <ul style="list-style-type: none"> (1) Community linkages. (2) Enhanced social support networks. f. Assistance with: <ul style="list-style-type: none"> (1) Accessing transportation. (2) Securing safe housing that is reflective of the: <ul style="list-style-type: none"> (a) Abilities of the persons served. (b) Preferences of the persons served. (c) Needs of the persons served. (3) Exploring employment or other meaningful activities. g. Provision of, or linkages to, skill development services needed to enable the person served to perform age-appropriate daily living activities, including, but not limited to: <ul style="list-style-type: none"> (1) Budgeting. (2) Meal planning. (3) Personal care. (4) Housekeeping and home maintenance. (5) Other identified needs. h. For youths nearing or preparing for adulthood, services and supports needed to provide the skills to live independently. i. Evidence of linkages with necessary and appropriate: <ul style="list-style-type: none"> (1) Financial services. (2) Medical or other healthcare. (3) Other community services.
4.	E.	5.	<p>The organization provides information or referral to assist the persons served in securing assistance to meet their basic needs.</p>
4.	J.	2.	<p>The organization provides the following community living components:</p> <ul style="list-style-type: none"> a. Regular meetings between the persons served and staff. b. Opportunities to participate in typical home activities. c. Appropriate linkage when healthcare needs of the persons served are identified. d. A personalized setting. e. Daily access to nutritious meals and snacks. f. The opportunity for expression of choice by the persons served in regard to rooms and housemates.

	<ul style="list-style-type: none"> g. Based on the choice of the persons served, opportunities to access: <ul style="list-style-type: none"> (1) Community activities. (2) Cultural activities. (3) Social activities. (4) Recreational activities. (5) Spiritual activities. (6) Employment/income generation activities. (7) Necessary transportation. (8) Self-help groups. (9) Other activities as identified in the person's plan. h. Policies related to: <ul style="list-style-type: none"> (1) Visitors or guests. (2) Pets.
<p>6. C. 1.</p>	<p>Older adults with disabilities and/or their families receive an array of individually tailored services that may include:</p> <ul style="list-style-type: none"> a. Support for caregivers, including those who may themselves have special needs related to aging. b. Socialization services. c. Fourth-stage services. d. Retirement assistance. e. Coordination that provides the persons served with access to needed services. f. Medical advocacy. g. Assistance for the persons served and caregivers in making or obtaining appropriate professional advice to make legal decisions. h. Assistance for the persons served and caregivers in making or obtaining appropriate professional advice to make financial decisions. i. Assistance for the persons served and caregivers in making or obtaining appropriate professional advice to make residential decisions. j. Other services, as identified.
<p>7. H. 2.</p>	<p>The program provides the following services in collaboration with the person served:</p> <ul style="list-style-type: none"> a. Assessment of the needs of the person served. b. Identification of the choices available for community resources. c. Provision of informational materials pertaining to community resources, when possible. d. Identification of services that are: <ul style="list-style-type: none"> (1) Culturally appropriate. (2) Age appropriate. e. Implementation of methods to: <ul style="list-style-type: none"> (1) Determine if services were accessed by the persons served. (2) Provide follow-up, when indicated.

II.B.3. Ongoing Monitoring

Desired Outcome: Regular, systematic and objective methods – including obtaining the participant’s feedback – are used to monitor the individual’s well being, health status, and the effectiveness of HCBS in enabling the individual to achieve his or her personal goals.

CARF RELATED STANDARDS

1.	A.	1.	The organization demonstrates that it obtains input: a. On an ongoing basis. b. From: (1) Persons served.
1.	A.	2.	The input is obtained from the following, as appropriate: a. Input forums. b. Surveys. c. Complaint, grievance, or incident summaries. d. Performance improvement activities. e. Strategic planning. f. Program/service development.
1.	B.	1.	The leadership demonstrates accessibility planning that addresses the needs of the: a. Persons served. b. Personnel. c. Other stakeholders.
1.	B.	2.	Accessibility plan(s) address: a. Identification of barriers in the following areas: (1) Architecture. (2) Environment. (3) Attitudes. (4) Finances. (5) Employment. (6) Communication. (7) Transportation. (8) Any other barrier identified by the: (a) Persons served. (b) Personnel. (c) Other stakeholders. b. Time lines for removal of identified barriers. c. Actions for removal of identified barriers.
1.	C.	1.	Data are collected that:

			<ul style="list-style-type: none"> a. Provide information on: <ul style="list-style-type: none"> (1) The needs of persons served.
1.	D.	3.	<p>The organization:</p> <ul style="list-style-type: none"> a. Implements a policy by which persons served may formally complain to the organization. b. Implements a procedure concerning formal complaints that: <ul style="list-style-type: none"> (1) Is written. (2) Specifies: <ul style="list-style-type: none"> (a) That the action will not result in retaliation or barriers to services. (b) How efforts will be made to resolve the complaint. (c) Levels of review, which include availability of external review. (d) Time frames that are adequate for prompt consideration and that result in timely decisions for the person served. (e) Procedures for written notification regarding the actions to be taken to address the complaint. (f) The rights and responsibilities of each party. (g) The availability of advocates or other assistance. c. Makes complaint procedures and, if applicable, forms: <ul style="list-style-type: none"> (1) Readily available to the persons served. (2) Understandable to the persons served.
2.	A.	10.	<p>A coordinated individualized service plan:</p> <ul style="list-style-type: none"> a. Is developed with the input of the person served. b. Identifies: <ul style="list-style-type: none"> (1) Overall goals. (2) Specific measurable objectives. (3) Methods/techniques to be used to achieve the objectives. (4) Those responsible for implementation. c. Is reviewed on a regular basis with respect to expected outcomes. d. Is revised, as appropriate: <ul style="list-style-type: none"> (1) Based on the satisfaction of the person served. (2) To remain meaningful to the person served. (3) Based on the changing needs of the person served.
2.	A.	12.	<p>The person and/or family served and/or their legal representatives are involved in:</p> <ul style="list-style-type: none"> a. Assessments of potential risks to each person's health in the community. b. Assessments of potential risks to each person's safety in the community. c. Decisions to accept or reject such risks. d. Identification of actions to be taken to minimize risks. e. Identification of individuals responsible for those actions.
3.	A.	8.	The job seeker provides input into defining employment outcome satisfaction.
3.	A.	9.	Each person's satisfaction with his or her employment services is assessed on a regular basis, as appropriate to the individual and services provided.
3.	G.	5.	<p>The services are expanded, modified, or discontinued based on:</p> <ul style="list-style-type: none"> c. Satisfaction of the person served.
3.	K.	3.	<p>The personnel services are continuously improved based on:</p> <ul style="list-style-type: none"> a. Local employer input and information. b. Review of international labor and employer trends. c. Service satisfaction of job seekers. d. Outcomes satisfaction of employers.

II.B.4. Responsiveness to Changing Needs

Desired Outcome: Significant changes in the participant's needs or circumstances promptly trigger consideration of modifications in his or her plan.

CARF RELATED STANDARDS

2.	A.	10.	A coordinated individualized service plan: d. Is revised, as appropriate: (1) Based on the satisfaction of the person served. (2) To remain meaningful to the person served. (3) Based on the changing needs of the person served.
3.	A.	2.	The following employment information regarding each person served is considered in the development of the individual's employment service plan: a. Work history. b. Previous training and education. c. The management and planning of benefits the person is receiving. d. Resources for career planning and advancement. e. Transportation needs. f. Availability of natural supports. g. Criminal history, if applicable. h. Cultural and language background.
3.	A.	12.	The employment services are changed to meet the human resource needs of the employment market.
3.	I.	11.	Nonwork needs of the person served that may impact employment are: b. Addressed: (1) By referral to supportive services, or (2) Through the individual planning process.
3.	I.	14.	There is regular review of the need for ongoing supports with the: a. Person served. b. Employer, as appropriate.
4.	C.	9.	When the services disrupt the child's or youth's day-to-day educational environment, the service provides or makes arrangements for the continuity of his or her education.
4.	G.	5.	Action planning addresses: a. Reunification with the family of origin, if appropriate.
4.	G.	13.	As a person served moves to a different service or setting, pertinent information is provided within a reasonable time frame to the: a. Family of origin, as appropriate. b. Foster family, as appropriate. c. Person served. d. New provider of service or new setting.

6.	B.	9.	When the services disrupt the child's or youth's day-to-day educational environment, the service provides or makes arrangements for the continuity of his or her education.
7.	C.	7.	Following the use of seclusion or restraint, the person served, his or her family, when appropriate, and personnel discuss the reasons for the use of seclusion or restraint. The discussion is documented and addresses: f. When applicable, modifications made to the treatment plan to address issues or behaviors that impact the need to use seclusion or restraint.



FOCUS III.

PROVIDER CAPACITY AND CAPABILITIES

Desired Outcome: There are sufficient HCBS providers and they possess and demonstrate the capability to effectively serve participants.

III.A. PROVIDER NETWORKS AND AVAILABILITY

Desired Outcome: There are sufficient qualified agency and individual providers to meet the needs of participants in their communities.

CARF RELATED STANDARDS

1.	C.	1.	Data are collected that: a. Provide information on:
1.	C.	2.	The organization demonstrates how it addresses data: a. Reliability. b. Validity. c. Completeness.
1.	E.	4.	There are emergency procedures: b. That satisfy: (1) The requirements of applicable authorities.
1.	E.	9.	Personnel receive initial and annual competency-based training in: a. Health and safety practices. b. Identification of unsafe environmental factors. c. Emergency procedures. d. Evacuation procedures. e. Identification of critical incidents. f. Reporting of critical incidents. g. Medication management, if appropriate.
1.	E.	12.	A written analysis of all critical incidents identified is provided to the leadership: b. That addresses: (5) Necessary education and training of personnel.
1.	E.	13.	The organization implements an infection control plan that includes: a. Training regarding the prevention and control of infections and communicable diseases for: (1) Persons served, when applicable. (2) Personnel. b. The appropriate use of standard or universal precautions by personnel.
1.	E.	14.	If transportation services are provided for the persons served by the organization, the following are in evidence: h. Training of drivers in the organization's transportation requirements.
1.	F.	1.	There are an adequate number of personnel to: a. Meet the established outcomes of the persons served. b. Ensure the safety of persons served. c. Deal with unplanned absences of personnel.

1.	F.	2.	<p>Written procedures identify actions to occur:</p> <ul style="list-style-type: none"> a. In order to verify: <ul style="list-style-type: none"> (1) The required credentials of personnel. (2) Backgrounds of personnel, if required, in the following areas: <ul style="list-style-type: none"> (a) Criminal checks. (b) Immunizations. (c) Fingerprinting. (d) Drug testing. (3) That required credentials remain current. b. Prior to the delivery of services to the persons served or to the organization. c. Throughout employment. d. In response to the information received.
1.	F.	3.	<p>The organization demonstrates:</p> <ul style="list-style-type: none"> a. Recruitment efforts. b. Retention efforts. c. Identification of any trends in personnel turnover.
1.	F.	4.	<p>The organization:</p> <ul style="list-style-type: none"> a. Identifies the skills and characteristics needed by personnel to: <ul style="list-style-type: none"> (1) Assist the persons served in the accomplishment of their established outcomes. (2) Support the organization in the accomplishment of its mission and goals. b. Assesses the current knowledge and competencies of personnel at least annually. c. Provides for the orientation and training needs of personnel. d. Provides the resources to personnel for learning and growth.
2.	B.	2.	<p>All information related to the persons served is treated as confidential.</p>
3.	D.	2.	<p>Employment exploration sites are assessed as to their appropriateness for the person seeking employment with regard to:</p> <ul style="list-style-type: none"> a. Adequacy of supervision. b. Safety. c. Specific work-site requirements. d. Potential job accommodations. e. Accessibility. f. Expectations for quality and quantity of work. g. Job/task analysis. h. Potential employment opportunity. i. Other considerations identified, as appropriate to the individual.
4.	A.	3.	<p>The organization establishes a staff selection process for persons served that:</p> <ul style="list-style-type: none"> a. Considers for those served: <ul style="list-style-type: none"> (1) Individual choices. (2) Wants. (3) Desires. (4) Plans. (5) Individual risk management factors. b. Allows persons served to provide input regarding the selection of their direct staff on an ongoing basis.
4.	A.	7.	<p>The organization is involved in identifying and networking with community resources based on the individual needs and desires of the persons and/or families served that expand the:</p> <ul style="list-style-type: none"> a. Variety of community life experiences. b. Opportunities for community access.

			c. Opportunities for community inclusion.
4.	C.	7.	<p>Providers receive training to meet the identified needs of the population served that covers:</p> <ul style="list-style-type: none"> a. Child growth and development. b. Behavior management skills. c. Learning deficits. d. Social and emotional needs. e. Cultural competency. f. The effects of separation and placement on children. g. Health and nutrition. h. Applicable legal issues. i. Methods of communication. j. Other specific needs.
5.	A.	1.	<p>Information about the organization:</p> <ul style="list-style-type: none"> a. Includes: <ul style="list-style-type: none"> (3) The training of staff to provide these services.
6.	A.	11.	<p>Policies and procedures are in place to address at a minimum:</p> <ul style="list-style-type: none"> f. Staff knowledge of and adherence to the limitations of their training. h. Resources that ensure staff development to support these policies and procedures.
6.	B.	7.	<p>Providers receive training to meet the identified needs of the population served that covers:</p> <ul style="list-style-type: none"> a. Child growth and development. b. Behavior management skills. c. Learning deficits. d. Social and emotional needs. e. Cultural competency. f. The effects of separation and placement on children. g. Health and nutrition. h. Applicable legal issues. i. Methods of communication. j. Other specific needs.
6.	C.	3.	<p>Services for older adults with disabilities are provided under the supervision of an aging specialist or a designated staff member who has specific knowledge of and training in aging issues.</p>
7.	A.	4.	<p>Services are provided by personnel with appropriate qualifications as demonstrated by the following:</p> <ul style="list-style-type: none"> a. Meeting the appropriate legal requirements. b. Meeting the applicable licensing, credentialing and certification requirements, and/or registration criteria. c. Demonstrating competency related to: <ul style="list-style-type: none"> (1) The needs of the persons served. (2) The requirements of the job. d. Completion of competency-based training related to: <ul style="list-style-type: none"> (1) The services provided. (2) The populations served.
7.	A.	5.	<p>The organization determines competency and provides and/or arranges for competency-based training to personnel providing direct services in:</p> <ul style="list-style-type: none"> a. Areas that reflect the specific needs of the person served. b. Clinical skills that are appropriate to the position.

			<ul style="list-style-type: none"> c. Individual plan development. d. Interviewing skills. e. Program-related research-based treatment approaches.
7.	A.	15.	<p>When applicable, ongoing supervision of direct service personnel addresses:</p> <ul style="list-style-type: none"> a. Accuracy of assessment and referral skills, when applicable. b. The appropriateness of the treatment or service intervention selected relative to the specific needs of each person served. c. Treatment/service effectiveness as reflected by the person served meeting his or her individual goals. d. The provision of feedback that enhances the skills of direct service personnel. e. Issues of ethics, legal aspects of clinical practice, and professional standards. f. Clinical documentation issues identified through ongoing compliance review. g. Cultural competency issues.
7.	B.	9.	<p>As appropriate, ongoing training and education regarding medications is provided to:</p> <ul style="list-style-type: none"> c. Personnel.
7.	C.	4.	<p>If the organization uses seclusion or restraint, there are policies and procedures governing its use that specify that:</p> <ul style="list-style-type: none"> g. Seclusion or restraint is administered by behavioral health personnel who are trained and competent in the proper techniques of applying and monitoring the form of seclusion or restraint ordered. h. When physical, mechanical, or material restraints are used, personnel are trained, qualified, and competent to administer them. i. When seclusion is used, personnel are trained to monitor for the unique needs of a person in seclusion.
7.	C.	5.	<p>The procedures for the use of seclusion or restraint adhere to the following:</p> <ul style="list-style-type: none"> f. Appropriately trained personnel continually assess, monitor, and re-evaluate the person served to determine whether seclusion or restraint is still needed. h. The designated and qualified personnel sign the order within the time period mandated by law.
7.	C.	11.	<p>All personnel involved in the direct administration of seclusion or restraint receive initial and ongoing competency-based training in the following:</p> <ul style="list-style-type: none"> a. The contributing factors or causes of threatening behavior. b. Which medical conditions may contribute to aggressive behavior. c. How the interactions of personnel may impact the behaviors of the persons served. d. The use of alternative interventions, such as mediation, de-escalation, self-protection, and time-out. e. Recognizing signs of physical distress in the person who is being restrained or secluded. f. The re-establishment of communication after a person has been secluded or restrained. g. The prevention of threatening behaviors. h. When and how to restrain or seclude safely. i. Training on how to monitor and continually assess for the earliest release. j. The practice of intervention done by a team. k. The practice of intervention done by an individual.
7.	D.	1.	<p>The persons served are linked to services and resources to achieve objectives as identified in their individual plan.</p>
7.	D.	2.	<p>Personnel providing services have a working knowledge of the:</p> <ul style="list-style-type: none"> a. Services that are appropriate for the needs of the persons served. b. Support systems that are relevant to the lives of the persons served.

FOCUS III. PROVIDER CAPACITY AND CAPABILITIES

7.	H.	1.	The program implements policies and procedures for assessment and referral that include: b. Personnel training on the use of tools, tests, or instruments prior to administration.
7.	I.	9.	Individuals who provide employee assistance services are: a. Certified employee assistance professionals, or b. If not certified, have one of the following:
7.	I.	13.	If specified in the written agreement, personnel are trained in: a. The scope of the program. b. The procedures for referral.
7.	J.	1.	Services are designed by personnel with demonstrated skill and knowledge in current evidence-based prevention theory and practice or diversionary alternatives.

III.B. PROVIDER QUALIFICATIONS

Desired Outcome: All HCBS agency and individual providers possess the requisite skills, competencies and qualifications to support participants effectively.

CARF RELATED STANDARDS

1.	F.	5.	<p>Performance management includes:</p> <ul style="list-style-type: none"> a. Job descriptions that are reviewed and/or updated annually. b. Promotion guidelines. c. Job posting guidelines. d. Performance evaluations for all personnel directly employed by the organization that are: <ul style="list-style-type: none"> (1) Based on job functions and competencies identified. (2) Evident in personnel files. (3) Conducted in collaboration with the direct supervisor with evidence of input from the personnel being evaluated. (4) Used to: <ul style="list-style-type: none"> (a) Assess performance related to objectives established in the last evaluation period. (b) Establish measurable performance objectives for the next year. (5) Performed annually. e. Reviews of all contract personnel utilized by the organization that: <ul style="list-style-type: none"> (1) Assess performance of their contracts. (2) Ensure that they follow all applicable policies and procedures of the organization. (3) Ensure that they conform to CARF standards applicable to the services they provide. (4) Are performed annually.
1.	F.	6.	<p>If students or volunteers are used by the organization, the following are in place:</p> <ul style="list-style-type: none"> a. A signed agreement. b. Identification of: <ul style="list-style-type: none"> (1) Duties. (2) Scope of responsibility. (3) Supervision. c. Orientation and training. d. Assessment of performance. e. Policies and written procedures for dismissal. f. Confidentiality policies. g. Background checks, when required.
1.	G.	2.	<p>The identified leadership guides the following:</p>

			g. Development and implementation of corporate responsibilities.
			h. Compliance with all legal and regulatory requirements.
1.	H.	1.	The organization complies with the following legal and regulatory requirements: a. Rights of the persons served. b. Confidentiality requirements. c. Reporting requirements. d. Contractual agreements. e. Licensing requirements. f. Corporate status. g. Employment practices. h. Mandatory employee testing. i. Privacy of the persons served. j. Debt covenants. k. All others, as applicable.
2.	A.	19.	If behavior management approaches are used, positive behavior interventions are implemented prior to the use of restrictive procedures.
2.	A.	20.	Personnel are trained in the use of positive interventions.
2.	A.	21.	If restrictions are placed on the rights of a person served: d. Staff members are trained in their use.
3.	A.	13.	Employers are made aware of the following resources: a. Educational resources. b. Referrals of qualified job applicants. c. Technical assistance. d. Support in the development of employment opportunities. e. Other community resources.
3.	A.	15.	For U.S. organizations, when an individual receives less than the minimum wage, governmental requirements for work measurement and wage payment are followed, including documentation of: a. How the person's disability affects his or her productivity. b. Performance levels based on work measurements. c. Commensurate wages paid. d. Changes made based on annual prevailing wage studies. e. Sharing of this information with the person served.
3.	A.	16.	When appropriate to employment goals, the organization uses industrial grade tools, equipment, and machinery.
3.	A.	17.	When the organization is producing a product or providing a service for businesses, it maintains an organized system of quality control.
3.	A.	18.	For organizations in the U.S., when the organization bids for contract work or establishes prices for products or services, it considers: a. All direct costs. b. All indirect costs applicable to each job. c. Profit. d. Fair market value.
3.	A.	19.	The prices of products and services are analyzed at least annually.
3.	B.	7.	Services coordination is provided to a person in locations consistent with his or her: a. Preferences. b. Needs.

3.	B.	8.	Services coordination establishes procedures for coordination among service teams.
3.	E.	4.	<p>When work samples are used:</p> <ul style="list-style-type: none"> a. The individual providing the assessment has knowledge and experience with the work sample method/assessment. b. Written instructions specify: <ul style="list-style-type: none"> (1) The materials used. (2) The equipment used. (3) The layout. (4) Methods for administration. (5) Interpretation of scoring.
3.	E.	5.	<p>When employment exploration sites are used, they are assessed as to their appropriateness for the person seeking employment with regard to:</p> <ul style="list-style-type: none"> a. Adequacy of supervision. b. Safety. c. Specific work-site requirements. d. Potential job accommodations. e. Accessibility. f. Expectations for quality and quantity of work. g. Job/task analysis. h. Potential employment opportunity. i. Other considerations identified as appropriate to the individual.
3.	E.	6.	<p>When psychological testing is used, it is done:</p> <ul style="list-style-type: none"> a. By an individual who meets the qualifications defined by state or provincial law. b. Under the supervision requirements of state or provincial law.
3.	F.	3.	<p>Each course curriculum addresses, as needed:</p> <ul style="list-style-type: none"> a. Attendance and punctuality. b. Grooming skills, hygiene, and appropriate work attire. c. Job-seeking skills. d. On-the-job performance skills related to quality and quantity of work. e. Work-related community skills. f. Functional literacy skills. g. Knowledge of work practices. h. Work-related academic skills. i. Work-related communication skills. j. Work-related interpersonal skills. k. Work ethics. l. Corporate or work culture.
3.	G.	1.	An employment skills training course is designed for a specific job title, job family, or employment outcome.
3.	G.	2.	<p>Each course description/curriculum includes:</p> <ul style="list-style-type: none"> a. The planned length of the course. b. The sequence of topics or areas to be covered. c. The materials, equipment, and tools relevant to the job that will be used. d. Minimum requirements necessary to participate in the course. e. Training objectives relative to: <ul style="list-style-type: none"> (1) Skills. (2) Behaviors.

			<ul style="list-style-type: none"> f. Requirements for course completion. g. Typical jobs or job titles held by a person completing the course. h. Methods of instruction. i. Education or certification requirements for course instructors.
3.	H.	2.	<p>Training activities address, as needed:</p> <ul style="list-style-type: none"> a. Orientation to the work environment. b. Orientation to the job culture. c. Orientation to work duties. d. Job performance and progress. e. Increasing individual performance, as appropriate. f. Work-site job modifications, if needed. g. Integration into the employment setting. h. Strategies for resolving job-related issues. i. Use of transportation.
3.	I.	6.	<p>The organization provides to the employer resources for:</p> <ul style="list-style-type: none"> a. Job modifications and/or reasonable accommodations. b. Return-to-work strategies, if applicable and the inquiry is documented. c. Services and supports offered by the organization. d. Federal, state, provincial, or employer tax credits, if applicable and the person gives written permission to release information regarding disability.
3.	I.	10.	<p>When the trainer provides supervision at the community employment site:</p> <ul style="list-style-type: none"> a. The trainer has knowledge of the industrial and programmatic aspects of the assignment. b. Backup contingencies exist in the event of the trainer's absence or tardiness. c. The trainer follows industry and workplace practices.
3.	K.	1.	<p>The personnel service develops a business plan that addresses:</p> <ul style="list-style-type: none"> a. The defined geographical market service area. b. Analysis of job seekers' preferences. c. Analysis of employer needs. d. Linkages between community agencies. e. The proposed services. f. Establishment of a distinct business identity and operating budget. g. Identified requirements of doing business. h. Business objectives.
3.	K.	2.	<p>The personnel service develops a marketing plan that includes:</p> <ul style="list-style-type: none"> a. Market demographics/size. b. Competitive analysis. c. Target markets. d. Services differentiation between it and its competitors. e. Marketing budget. f. Marketing strategy to promote the business.
3.	K.	8.	<p>The job developer ensures that the new employee is provided with:</p> <ul style="list-style-type: none"> a. A strategy for making informed choices. b. Information as is available to all employees to be appropriately oriented to the job.
3.	L.	1.	<p>The affirmative business enterprise develops a business plan that addresses:</p> <ul style="list-style-type: none"> a. The proposed service or product. b. A customer-needs analysis.

			<ul style="list-style-type: none"> c. Assessment of the organization's capabilities to deliver the service or product. d. Establishment of a distinct business identity or brand. e. A mission statement. f. A description of the market area to be served. g. A customer profile. h. Identification of competitors. i. Marketing plan. j. Potential impacts of changes and trends in the business environment. k. Break-even analysis. l. Business goals and objectives. m. An operating budget. n. Potential networking opportunities. o. Startup costs. p. Cash flow analysis. q. Ongoing administrative supports.
3.	L.	2.	<p>The affirmative business enterprise develops a marketing plan that includes:</p> <ul style="list-style-type: none"> a. Market demographics and size. b. Services or product differentiation between it and its competitors. c. Competitive analysis. d. Target or segmented markets. e. Addressing the requirements of doing business. f. Business objectives. g. Marketing strategy to promote the business. h. An operating budget.
3.	L.	3.	<p>An affirmative business enterprise:</p> <ul style="list-style-type: none"> a. Pays all wages at or above minimum wage. b. Provides a benefits package for all employees. c. Has a written job description for each position that is reviewed and updated annually as needed. d. Posts promotion guidelines. e. Follows its job posting guidelines. f. Conducts performance evaluations for all personnel employed by the affirmative business enterprise that are: <ul style="list-style-type: none"> (1) Based on job functions and competencies identified. (2) Evident in personnel files. (3) Conducted in collaboration with the direct supervisor with evidence of input from the personnel being evaluated. (4) Used to: <ul style="list-style-type: none"> (a) Assess performance related to objectives established in the last evaluation period. (b) Establish measurable performance objectives for the next year. (5) Performed annually.
3.	L.	4.	<p>When appropriate to the business, the affirmative business enterprise uses industrial grade tools, equipment, and machinery.</p>
3.	L.	5.	<p>When the affirmative business enterprise is producing a product or providing a service for business, it maintains an organized system of quality control.</p>
3.	L.	10.	<p>As needed, the employee/person served receives educational resources on:</p> <ul style="list-style-type: none"> a. Safety precautions and the prevention of injuries and occupational diseases.

			<ul style="list-style-type: none"> b. Appropriate medical or behavioral health resources/options. c. Medications and their potential effects on employment performance. d. Assistive technology. e. Reasonable accommodations. f. Employee assistance services and resources. g. Managing the impact of earned income on government or insurance benefits. h. Career development. i. Self-advocacy. j. Soft skills training related to: <ul style="list-style-type: none"> (1) Attendance and punctuality. (2) Grooming skills, hygiene, and appropriate work attire. (3) On-the-job performance skills related to quality and quantity of work. (4) Job-related community skills. (5) Functional literacy skills. (6) Knowledge of work practices. (7) Work-related academic skills. (8) Corporate culture. k. Other issues identified for the individual.
3.	L.	11.	<p>Based on the needs and choices of the employee, the organization provides or refers the employee to resources for addressing, as relevant to employment and career advancement:</p> <ul style="list-style-type: none"> a. Basic academic skills. b. Basic self-care skills. c. Communication skills. d. Interpersonal relationships with coworkers. e. Salary and benefits negotiations. f. Work attitudes. g. Tools and equipment related to the person's job. h. Mobility and travel training. i. Job-site safety practices. j. Self-advocacy and assertiveness skills. k. Career planning. l. Problem solving and decision-making skills. m. Health maintenance and medication management. n. Knowledge of governmental and community service agencies. o. Management of legal affairs. p. Management of benefits and financial resources. q. Use of technology. r. Use of community services and resources.
4.	C.	6.	<p>Based on the needs of the child or youth served, services include the development of:</p> <ul style="list-style-type: none"> a. Community living skills. b. Social skills. c. Social supports. d. Vocational skills. e. Educational opportunities for the family to learn about: <ul style="list-style-type: none"> (1) Child development.

(2) Aspects of disability, as appropriate.		
4.	C. 8.	<p>If providing early intervention services, the program provides training to parents to support encouragement of their child's:</p> <ul style="list-style-type: none"> a. Motor skills development. b. Physical development. c. Physical fitness. d. Social development. e. Intellectual development. f. Speech and language development. g. Creativity. h. Emotional development. i. Cognitive development. j. Safety. k. Self care. l. Identity development.
4.	C. 10.	Based on the needs of each child/youth served, or as required by law, an educational professional is a member of the planning team.
4.	C. 16.	The program assists the parent(s) to optimize resources and opportunities through:
4.	C. 17.	The program encourages and optimizes:
4.	D. 7.	If the organization provides community-based transition services, it demonstrates early active connections with school districts to address the transition needs of students and their families.
4.	D. 8.	If the organization provides school-based transition services, it demonstrates early active connections with community-based service providers to address the transition needs of students and their families.
4.	E. 7.	<p>When an organization has an employer/employee relationship with a person served, the organization complies with:</p> <ul style="list-style-type: none"> a. All applicable United States Internal Revenue Service rules and regulations. b. Other applicable local, state, federal, or provincial laws and regulations. c. Its own internal policies and procedures.
4.	E. 8.	<p>When an individual receives less than the minimum wage, governmental requirements for work measurement and wage payment are followed, including documentation of:</p> <ul style="list-style-type: none"> a. How the person's disability affects his or her productivity. b. Performance levels based on work measurements. c. Commensurate wages paid. d. Changes made based on annual prevailing wage studies. e. Sharing of this information with the person served.
4.	F. 1.	<p>The organization provides to the person served/family:</p> <ul style="list-style-type: none"> a. Ongoing communication. b. A community resources directory. c. Opportunities for support services. d. Referral sources for specialized care needs.
4.	F. 2.	<p>The organization assists families with development of a plan for relief, including:</p> <ul style="list-style-type: none"> a. A 24-hour emergency response system. b. Respite services, if needed.
1.	E. 3.	<p>The organization demonstrates that self-inspections:</p> <ul style="list-style-type: none"> b. Result in a report that:

			(1) Identifies the areas inspected. (2) Identifies recommendations for areas needing improvement.
3.	A.	1.	Information about the organization: a. Includes: (2) The training of staff to provide these services.
3.	B.	3.	Employment services coordination: a. Identifies: (1) Community services. (2) Community resources. b. Establishes relationships with community resources. c. Maintains communication contacts with resources. d. Coordinates services for a person, as needed.
3.	B.	5.	As needed, the person served receives educational resources on the following: a. Safety precautions and the prevention of injuries and occupational diseases. b. Appropriate medical or behavioral health resources/options. c. Job analysis, restructuring, modification, and work conditioning. d. Medications and their potential effects on employment performance. e. Individual service plan development and implementation. f. The role of organized labor in business. g. Employee assistance services. h. Assistive technology applications. i. Reasonable accommodations. j. Career development. k. Strategies for early return-to-work. l. Other issues identified for the individual.
3.	C.	3.	Prior to planning each phase of the transition services, the student and/or family are provided understandable information in a timely manner regarding: a. Employment services, including: (1) Opportunities for assessments or career exploration. (2) Community resources and service providers. (3) Opportunities and options for further education or training. (4) Options for employment. (5) Support services for employment. (6) New lifelong learning. b. Community services, including: (1) Community resources and service providers. (2) Opportunities for community integration. (3) Options for community living. (4) Support services for community living. c. Funding sources, including:
3.	C.	4.	Based on information provided and assessment information, the student and/or family served participate in making decisions about their services, including: a. Selection or identification of adult support agencies including: (1) Funding sources, as applicable. (2) Employment services, supports, and employers, as applicable. (3) Community services and supports, as applicable. b. The expected results of the services for the individual.

			<ul style="list-style-type: none"> c. How the design of the services meets identified needs. d. How the services will be delivered. e. The expected duration of the services. f. Possible alternatives for services. g. How results will be evaluated. h. Other information about the services, as requested.
3.	J.	3.	<p>The organization assists the person to develop a self-employment plan of implementation, which includes:</p> <ul style="list-style-type: none"> a. Setting priorities. b. Addressing needs of doing business such as required business practices, equipment, physical plant, communications, and staff/ supports. c. The budget for implementation of the self-employment plan. d. The proposed service or product. e. Analysis of the needs of present and potential customers for the proposed service or product. f. Assessment of the person's capabilities to deliver the proposed business. g. Establishment of a distinct business identity. h. Mission statement and business goals. i. Description of the market area to be served. j. Customer profile. k. Identification of competitors. l. Potential impacts of changes and trends in the business environment (risk analysis). m. Operating and control systems. n. Break-even analysis. o. Potential networking opportunities. p. Startup costs. q. Cash flow analysis. r. Ongoing supports, including: <ul style="list-style-type: none"> (1) Business administration. (2) Bookkeeping. (3) Sales and marketing.
3.	K.	13.	<p>Based on the needs and choices of the job seeker, the organization provides or refers the job seeker to resources for addressing, as relevant to employment and career advancement:</p> <ul style="list-style-type: none"> a. Basic academic skills. b. Basic self-care skills. c. Communication skills. d. Work attitudes. e. Tools and equipment related to the person's job. f. Mobility and travel training. g. Interpersonal relationships with coworkers. h. Job-site safety practices. i. Self-advocacy and assertiveness skills. j. Career planning. k. Problem solving and decision-making skills. l. Health maintenance and medication management. m. Knowledge of governmental and community service agencies.

			<ul style="list-style-type: none"> n. Management of legal affairs. o. Management of benefits and financial resources. p. Use of technology. q. Use of community services and resources. r. Benefits management and planning.
4.	A.	1.	<p>Information about the organization:</p> <ul style="list-style-type: none"> a. Includes: <ul style="list-style-type: none"> (1) The array of services provided. (2) The training of staff to provide these services. (3) Services availability, including expected wait time. (4) Its ability to meet the needs of the persons served. (5) Outcomes performance. (6) Costs of services. (7) Responsibilities of the person served, including financial responsibility. (8) Its values and mission statement. (9) Options for persons served to direct their service design and delivery. (10) Potential for conflicts of interest, if any. (11) Other information about the organization, as requested. b. Is provided in an understandable format to the person served. c. Is updated as necessary to reflect changes in information provided.
4.	G.	2.	<p>Providers receive training to meet the identified needs of the persons served that covers:</p> <ul style="list-style-type: none"> a. Child growth and development, if appropriate. b. Behavior management skills. c. Learning deficits. d. Cultural competency. e. Applicable legal issues. f. Methods of communication. g. Other specific needs.
4.	G.	3.	<p>The organization advocates/coordinates on behalf of:</p> <ul style="list-style-type: none"> a. The person served. b. The foster family.
4.	G.	4.	<p>Advocacy for the persons served addresses the following areas, as appropriate:</p> <ul style="list-style-type: none"> a. Assurance of basic needs being addressed. b. Basic rights protection: <ul style="list-style-type: none"> (1) For the persons served. (2) For the foster family. c. Guardianship oversight. d. Adoption coordination, if needed.
4.	G.	7.	<p>The organization, in collaboration with the court system, when applicable:</p> <ul style="list-style-type: none"> a. Recruits foster families. b. Screens foster families. c. Trains foster families. d. Monitors foster families. e. Reviews foster families. f. Provides support services needed/requested.
4.	G.	9.	<p>The organization assists families with development of a plan for relief, including:</p>

			<ul style="list-style-type: none"> a. A 24-hour emergency response system. b. Respite services, if needed.
4.	G.	10.	<p>Each foster family has a written agreement that identifies the following for each involved party:</p> <ul style="list-style-type: none"> a. Role. b. Responsibility. c. Interrelationship. d. Specific needs. e. Monitoring.
4.	G.	11.	Active/ongoing communication exists between the organization and the foster family.
4.	H.	2.	<p>Host families are:</p> <ul style="list-style-type: none"> a. Recruited, as needed. b. Screened. c. Trained. d. Monitored. e. Supported with services.
4.	H.	3.	<p>The organization assists the host family with development of a plan for relief, including:</p> <ul style="list-style-type: none"> a. A 24-hour emergency response system. b. Respite services, if needed.
4.	H.	5.	Active/ongoing communication exists between the organization and the host family.
4.	H.	6.	The organization regularly reviews the performance of each host family and provides feedback for improvement.
4.	I.	4.	Family members assist with on-site respite training, as appropriate.
4.	I.	5.	The respite site is matched to the identified needs of each person and family served.
5.	A.	6.	<p>If additional assistive technology needs are identified, referrals/recommendations are based on:</p> <ul style="list-style-type: none"> a. Specialized knowledge and/or experience in the field. b. Knowledge of referral/funding processes.
6.	B.	15.	<p>The organization implements a policy and procedure for:</p> <ul style="list-style-type: none"> a. Obtaining complete background checks on all personnel providing direct services to children or youths. b. Acting on the results of the background checks.
6.	B.	16.	<p>The program assists the parent(s) to optimize resources and opportunities through:</p> <ul style="list-style-type: none"> a. Community linkages. b. Enhanced social support networks. c. Outreach to encourage involvement.
6.	B.	17.	<p>The program encourages and optimizes:</p> <ul style="list-style-type: none"> a. Child and family resilience. b. The permanence and stability of the family. c. The connection of the family to its community. d. The connection of the family to its culture.
6.	B.	18.	If residential services are provided, staff support is available on site 24 hours a day, 7 days a week.
6.	B.	19.	If residential services are provided, there are separate areas for beds for children/youths served according to their:

			<ul style="list-style-type: none"> a. Ages. b. Genders. c. Developmental needs. d. Social and emotional needs.
6.	B.	21.	<p>If residential services are provided, the organization provides opportunities for visits, when appropriate and in compliance with applicable laws and court orders, with:</p> <ul style="list-style-type: none"> a. Family members and significant others. b. Peers.
7.	A.	14.	<p>Team members, in response to the needs of the persons served:</p> <ul style="list-style-type: none"> c. Are culturally and linguistically competent relative to the needs of the persons served.
7.	B.	1.	<p>The organization has a policy identifying whether or not it provides:</p> <ul style="list-style-type: none"> a. Pharmacotherapy practices that include evaluating, prescribing, dispensing, and/or administering medications. b. Medication monitoring.
7.	B.	2.	<p>If the organization provides medication monitoring, it has written procedures that provide for:</p> <ul style="list-style-type: none"> a. Safe handling. b. Safe storage. c. Safe disposal. d. Documentation.
7.	B.	4.	<p>The organization has policies and procedures regarding pharmacotherapy that address:</p> <ul style="list-style-type: none"> a. Access, when needed, through direct provision or referral. b. Continuity of pharmacotherapy. c. Integrating medications into a person's overall plan. d. Identifying and documenting medication reactions. e. Actions to follow in case of emergencies related to the use of medications. f. Continuing the prescribed medication if a generic medication is not available.
7.	B.	5.	<p>Any organization that is prescribing, dispensing, or administering medications has written policies and procedures regarding medications that provide for:</p> <ul style="list-style-type: none"> a. Compliance with all applicable local, state or provincial, and federal laws and regulations pertaining to medications and controlled substances, including on-site pharmacy services and dispensing. b. Availability of a physician for consultation 24 hours a day, 7 days a week. c. Identification and documentation of any medication reactions experienced by the person served. d. Review of past medication use, including: <ul style="list-style-type: none"> (1) Effectiveness. (2) Side effects. (3) Allergies or adverse reactions. e. Evaluation of co-existing medical conditions. f. Identification of alcohol and other drug use. g. Documentation or confirmation of informed consent for each medication prescribed, when possible. h. Documentation and reporting of medication errors. i. Use of over-the-counter medications. j. Use of medications by women of child bearing age. k. Use of medications during pregnancy.

			<ul style="list-style-type: none"> l. Management of biohazards associated with the use of medications. m. Ready access to the telephone number of a poison control center by: <ul style="list-style-type: none"> (1) The program personnel. (2) The persons served. n. Review of pharmacotherapy activities, including medication errors and drug reactions, as part of the quality monitoring and improvement system. o. Special dietary needs and restrictions associated with medication use. p. Notification of the prescribing professional regarding medication reactions or problems, including errors. q. Necessary laboratory studies, tests, or other procedures. r. Coordination when a medication is prescribed by a source other than the organization. s. Coordination with the physician providing primary care needs.
7.	C.	3.	<p>In the event that a physical hold is used only as a time-limited emergency measure until the appropriate law enforcement, safety, or other emergency service providers arrive on site, the organization implements policies and procedures that:</p> <ul style="list-style-type: none"> c. Direct that the emergency intervention procedure is restricted to time-limited, approved physical holds by designated, trained, and competent personnel.
7.	C.	5.	<p>The procedures for the use of seclusion or restraint adhere to the following:</p> <ul style="list-style-type: none"> b. A designated, qualified, and competent physician or licensed independent practitioner provides face-to-face evaluation of the person served within one hour of the order for seclusion or restraint being given. d. Orders for seclusion or restraint may be renewed for a total of up to 24 hours. Orders for renewal may only occur following a face-to-face assessment by a designated, trained, and competent qualified behavioral health practitioner. e. After 24 hours, a new order is required following a face-to-face evaluation by a designated, qualified, and competent physician or licensed independent practitioner.

III.C. PROVIDER PERFORMANCE

Desired Outcome: All HCBS providers demonstrate the ability to provide services and supports in an effective and efficient manner consistent with the individual’s plan.

CARF RELATED STANDARDS

1.	C.	4.	For service delivery improvement, the data collection system: c. Measures for indicators in each of the following areas: (1) The effectiveness of services. (2) The efficiency of services.
1.	I.	1.	The organization’s financial planning and management activities reflect strategic planning designed to meet: a. Established outcomes for the persons served.
2.	A.	9.	A coordinated individualized service plan is based on the person’s: a. Strengths. b. Abilities. c. Needs. d. Preferences. e. Desired outcomes. f. Cultural background. g. Other issues, as identified.
2.	A.	10.	A coordinated individualized service plan: c. Is reviewed on a regular basis with respect to expected outcomes.
3.	C.	9.	The organization monitors the effectiveness of interagency responsibilities or linkages to: a. Ensure a cooperative environment. b. Identify alternative strategies, if needed.
3.	E.	4.	When work samples are used: b. Written instructions specify: (3) The layout.
4.	A.	1.	Information about the organization: a. Includes: (4) Its ability to meet the needs of the persons served.
4.	B.	3.	Based on the needs of the persons served, case management/services coordination includes: a. Activities carried out in collaboration with the persons served and/or their families, as appropriate. b. Outreach/facilitation to encourage participation of the persons served. c. Coordination of, or assistance with, crisis intervention and stabilization services, as appropriate. d. Assisting the persons served to achieve goals for independence as defined by

			<p>the persons served.</p> <p>e. Optimizing resources and opportunities through:</p> <ol style="list-style-type: none"> (1) Community linkages. (2) Enhanced social support networks. <p>f. Assistance with:</p> <ol style="list-style-type: none"> (1) Accessing transportation. (2) Securing safe housing that is reflective of the: <ol style="list-style-type: none"> (a) Abilities of the persons served. (b) Preferences of the persons served. (c) Needs of the persons served. (3) Exploring employment or other meaningful activities. <p>g. Provision of, or linkages to, skill development services needed to enable the person served to perform age-appropriate daily living activities, including, but not limited to:</p> <ol style="list-style-type: none"> (1) Budgeting. (2) Meal planning. (3) Personal care. (4) Housekeeping and home maintenance. (5) Other identified needs. <p>h. For youths nearing or preparing for adulthood, services and supports needed to provide the skills to live independently.</p> <p>i. Evidence of linkages with necessary and appropriate:</p> <ol style="list-style-type: none"> (1) Financial services. (2) Medical or other healthcare. (3) Other community services.
4.	B.	6.	<p>When multiple case management providers exist:</p> <ol style="list-style-type: none"> a. A primary case manager is identified. b. There is coordination to: <ol style="list-style-type: none"> (1) Facilitate continuity of care. (2) Reduce duplication of services.
6.	A.	10.	<p>When a person is served from more than one entity designated by the One-Stop Career Center, the organization participates as requested by the center in the coordination of services which may include:</p> <ol style="list-style-type: none"> a. Planning of individual services. b. Delivery of services. c. Documentation of progress. d. Regular review of service objectives. e. Service revision, if needed. f. A procedure for sharing information about the person served with all providers serving him or her. g. Formal evaluation of satisfaction with services by the person.
7.	A.	11.	<p>Procedures are established that provide for coordination and ongoing communication between internal and external service providers.</p>
7.	A.	15.	<p>When applicable, ongoing supervision of direct service personnel addresses:</p> <ol style="list-style-type: none"> c. Treatment/service effectiveness as reflected by the person served meeting his or her individual goals.
7.	D.	1.	<p>The persons served are linked to services and resources to achieve objectives as identified in their individual plan.</p>
7.	D.	6.	<p>When multiple case management providers exist:</p> <ol style="list-style-type: none"> a. A primary case manager is identified.

FOCUS III. PROVIDER CAPACITY AND CAPABILITIES

- b. There is coordination to:
- (1) Facilitate continuity of care.
 - (2) Reduce duplication of services.



FOCUS IV.

PARTICIPANT SAFEGUARDS

Desired Outcome: Participants are safe and secure in their homes and communities, taking into account their informed and expressed choices.

IV.A. RISK AND SAFETY PLANNING

Desired Outcome: Participant risk and safety considerations are identified and potential interventions considered that promote independence and safety with the informed involvement of the participant.

CARF RELATED STANDARDS

1.	E.	8.	When services are delivered in the community, the organization: a. Has written procedures to promote the safety of: (1) Persons served. b. Regularly provides information and training designed to reduce physical risks to: (1) Persons served.
1.	E.	15.	For a Community Housing program utilizing individual apartments, the organization provides an education program to residents that includes: c. Access to emergency care when it is needed. d. Specific healthcare procedures and techniques.
2.	A.	12.	The person and/or family served and/or their legal representatives are involved in: a. Assessments of potential risks to each person's health in the community. b. Assessments of potential risks to each person's safety in the community. c. Decisions to accept or reject such risks. d. Identification of actions to be taken to minimize risks.
3.	E.	8.	Comprehensive vocational evaluation services have the capability to assess or obtain the following information: g. Learning styles, including ability to understand, recall, and respond to various types of instruction. h. Interests, aptitudes, and career aspirations. i. Personal, social, and work-related behaviors. j. Modes of communication. k. Physical and psychomotor capacities. l. Work skills and tolerances. m. Job-seeking and job-keeping skills. n. Knowledge of occupational information. o. Possible employment objectives, including self-employment. p. Customer service skills, attitude toward work, and understanding of work culture. q. Identified health risks. r. Identified safety risks.
3.	H.	4.	Based on the needs and choices of the person served, the organization may provide or refer the person to resources for addressing, as relevant to job support: h. Job-site safety practices. l. Health maintenance and medication management.
4.	A.	3.	The organization establishes a staff selection process for persons served that:

			a. Considers for those served: (5) Individual risk management factors.
4.	C.	4.	The following identified needs of each child and youth served are addressed: a. Healthcare. b. Nutrition. c. Safety.
4.	J.	3.	In-home safety needs of persons served are addressed with respect to: a. Environmental risks. b. Abuse and/or neglect inflicted by self or others. c. Self-protection skills. d. Medication management.
6.	B.	20.	If residential services are provided, the in-home safety needs of the child/youth served are addressed with respect to: a. Environmental risks. b. Abuse and/or neglect inflicted by self or others. c. Self-protection skills. d. Medication management. e. Domestic violence.
7.	C.	4.	If the organization uses seclusion or restraint, there are policies and procedures governing its use that specify that: c. The medical history of the person served is reviewed to determine whether seclusion or restraint can be administered without risk to health and safety. d. When possible the behavioral health history of the person served is reviewed for identification of prior trauma.
7.	F.	2.	The organization provides the following community living components: c. Appropriate linkage when healthcare needs of the persons served are identified.
7.	G.	2.	In-home safety needs of persons served are addressed with respect to: a. Environmental risks. b. Abuse and/or neglect inflicted by self or others. c. Self-protection skills. d. Medication management.
7.	J.	5.	The prevention/diversion program includes two or more of the following strategies: c. Increasing involvement in healthful alternatives.
7.	J.	7.	The prevention/diversion program: a. Has procedures for referring the persons served to other: (1) Health services, as needed.

IV.B. CRITICAL INCIDENT MANAGEMENT

Desired Outcome: There are systematic safeguards in place to protect participants from critical incidents and other life-endangering situations.

CARF RELATED STANDARDS

1.	E.	2.	<p>A comprehensive inspection(s):</p> <p>a. Is conducted:</p> <ul style="list-style-type: none"> (1) Annually. (2) At all facilities where the organization delivers services or provides administration on a regular and consistent basis. (3) By a qualified external authority. <p>b. Results in a report that:</p> <ul style="list-style-type: none"> (1) Identifies the areas inspected. (2) Identifies recommendations for areas needing improvement. (3) Identifies actions taken to respond to the recommendation(s). <p>(4) Is evidenced:</p> <ul style="list-style-type: none"> (a) In writing, when the organization controls the facility. (b) In writing or by other means, when the organization does not control the facility.
1.	E.	3.	<p>The organization demonstrates that self-inspections:</p> <p>a. Are completed:</p> <ul style="list-style-type: none"> (1) At least twice a year on each shift. (2) At all facilities where the organization delivers services or provides administration on a regular and consistent basis. <p>b. Result in a report that:</p> <ul style="list-style-type: none"> (1) Identifies the areas inspected. (2) Identifies recommendations for areas needing improvement. (3) Identifies actions taken to respond to the recommendation(s). <p>(4) Is evidenced:</p> <ul style="list-style-type: none"> (a) In writing, when the organization controls the facility. (b) In writing or by other means, when the organization does not control the facility.
1.	E.	4.	<p>There are emergency procedures:</p> <p>a. For:</p> <ul style="list-style-type: none"> (1) Fires. (2) Bomb threats. (3) Natural disasters. (4) Utility failures. (5) Medical emergencies. (6) Safety during violent or other threatening situations.

			<ul style="list-style-type: none"> b. That satisfy: <ul style="list-style-type: none"> (1) The requirements of applicable authorities. (2) Practices appropriate for the locale. c. That are evidenced: <ul style="list-style-type: none"> (1) In writing, when the organization controls the facility. (2) In writing or by other means, when the organization does not control the facility.
1.	E.	5.	<p>For all facilities where the organization delivers services or provides administration on a regular and consistent basis, there are procedures for evacuation that:</p> <ul style="list-style-type: none"> a. Address: <ul style="list-style-type: none"> (1) When evacuation is appropriate. (2) Complete evacuation from the physical facility. (3) The safety of evacuees. (4) Accounting for all persons involved. (5) Temporary shelter, when applicable. (6) Identification of essential services. (7) Continuation of essential services. (8) Emergency phone numbers. (9) Notification of the appropriate emergency authorities. b. Are evidenced: <ul style="list-style-type: none"> (1) In writing, when the organization controls the facility. (2) In writing or by other means, when the organization does not control the facility.
1.	E.	6.	<p>Tests of all emergency procedures:</p> <ul style="list-style-type: none"> a. Are conducted: <ul style="list-style-type: none"> (1) At least once a year. (2) On each shift. (3) In all facilities where the organization delivers services or provides administration on a regular and consistent basis. b. Include actual or simulated physical evacuations, when included in the procedures.
1.	E.	7.	<p>Tests of the emergency and evacuation procedures:</p> <ul style="list-style-type: none"> a. Are analyzed for performance improvement. b. Result in improvement of or affirm satisfactory current practice. c. Are evidenced: <ul style="list-style-type: none"> (1) In writing, when the organization controls the facility. (2) In writing or by other means, when the organization does not control the facility.
1.	E.	8.	<p>When services are delivered in the community, the organization:</p> <ul style="list-style-type: none"> a. Has written procedures to promote the safety of: <ul style="list-style-type: none"> (1) Persons served. (2) Personnel. b. Regularly provides information and training designed to reduce physical risks to: <ul style="list-style-type: none"> (1) Persons served. (2) Personnel.
1.	E.	9.	<p>Personnel receive initial and annual competency-based training in:</p> <ul style="list-style-type: none"> a. Health and safety practices. b. Identification of unsafe environmental factors. c. Emergency procedures. d. Evacuation procedures.

			<ul style="list-style-type: none"> e. Identification of critical incidents. f. Reporting of critical incidents. g. Medication management, if appropriate.
1.	E.	10.	<p>There is immediate access to:</p> <ul style="list-style-type: none"> a. First aid expertise. b. First aid equipment and supplies. c. Emergency information on the: <ul style="list-style-type: none"> (1) Persons served. (2) Personnel.
1.	E.	11.	<p>The organization has policies and written procedures regarding critical incidents that include:</p> <ul style="list-style-type: none"> a. Prevention. b. Reporting. c. Remedial action, when necessary. d. The following incidents, when applicable: <ul style="list-style-type: none"> (1) Medication errors. (2) Use of seclusion or restraint. (3) Incidents involving injury. (4) Communicable disease. (5) Infection control. (6) Violence or aggression. (7) Sentinel events. (8) Use or possession of weapons. (9) Elopement and/or wandering. (10) Vehicular accidents. (11) Biohazardous accidents. (12) Use or possession of licit or illicit substances. (13) Abuse and neglect. (14) Suicide or attempted suicide. (15) Other areas, as required.
1.	E.	14.	<p>If transportation services are provided for the persons served by the organization, the following are in evidence:</p> <ul style="list-style-type: none"> a. Compliance with all applicable federal, state, provincial, county, and city requirements. b. Appropriate licensing of all drivers. c. Review of driving records of all drivers on an ongoing basis. d. Insurance requirements for vehicles and personnel. e. Safety features in vehicle(s). f. Safety equipment. g. Accessibility. h. Training of drivers in the organization's transportation requirements. i. Written emergency procedures. j. Communication devices. k. Road warning/hazard equipment. l. First aid supplies. m. Maintenance of vehicles owned or operated by the organization according to manufacturers' recommendations. n. If services are contracted: <ul style="list-style-type: none"> (1) An annual review of the contract against elements a. through m. of this standard.

		(2) Knowledge by drivers of the unique needs of the persons served.
1.	E.	15. For a Community Housing program utilizing individual apartments, the organization provides an education program to residents that includes: <ul style="list-style-type: none">a. Information about community resources and how to access them.b. Safety issues related to the service delivery site.c. Access to emergency care when it is needed.d. Specific healthcare procedures and techniques.e. Contingency plans in case either the support system or the service provider is unable to deliver care.f. A review of how to deal with emergencies and evacuation from the residence.

IV.C. HOUSING AND ENVIRONMENT

Desired Outcome: The safety and security of the participant’s living arrangement is assessed, risk factors are identified and modifications are offered to promote independence and safety in the home.

CARF RELATED STANDARDS

1.	E.	8.	When services are delivered in the community, the organization: a. Has written procedures to promote the safety of: (1) Persons served. (2) Personnel. b. Regularly provides information and training designed to reduce physical risks to: (1) Persons served. (2) Personnel.
1.	E.	15.	For a Community Housing program utilizing individual apartments, the organization provides an education program to residents that includes: a. Information about community resources and how to access them. b. Safety issues related to the service delivery site. c. Access to emergency care when it is needed. d. Specific healthcare procedures and techniques. e. Contingency plans in case either the support system or the service provider is unable to deliver care. f. A review of how to deal with emergencies and evacuation from the residence.
2.	A.	12.	The person and/or family served and/or their legal representatives are involved in: a. Assessments of potential risks to each person’s health in the community. b. Assessments of potential risks to each person’s safety in the community. c. Decisions to accept or reject such risks. d. Identification of actions to be taken to minimize risks. e. Identification of individuals responsible for those actions.
4.	J.	1.	Each person served is in a residential setting with his or her own personal space that: b. Promotes personal security. c. Promotes safety.
4.	J.	5.	Based on the needs of persons transitioning to other housing, there are procedures in place to assist them in securing housing that is: a. Safe.
4.	J.	8.	There is a system for the on-call availability of designated personnel 24 hours a day, 7 days a week.
4.	K.	2.	In-home safety needs of persons served are addressed with respect to: a. Environmental risks. b. Abuse and/or neglect inflicted by self or others. c. Self-protection skills.

			d. Medication management.
4.	K.	7.	A system is in place to provide access to needed services 24 hours a day, 7 days a week.
4.	K.	8.	Based on the needs and desires of the persons served, support is offered in the following areas: a. Healthy lifestyles.
7.	D.	3.	Based on the needs of the persons served, case management/services coordination includes: f. Assistance with: (2) Securing safe housing that is reflective of the: (a) Abilities of the persons served. (b) Preferences of the persons served.
7.	F.	1.	Each person served is in a residential setting with his or her own personal space that: b. Promotes personal security. c. Promotes safety.
7.	F.	3.	In-home safety needs of persons served are addressed with respect to: a. Environmental risks. b. Abuse and/or neglect inflicted by self or others. c. Self-protection skills. d. Medication management.
7.	F.	5.	Based on the needs of persons transitioning to other housing, there are procedures in place to assist them in securing housing that is: a. Safe.
7.	F.	7.	Personnel are on site based on the needs of the persons served, as identified in their individual plans.
7.	F.	8.	There is a system for the on-call availability of designated personnel 24 hours a day, 7 days a week.
7.	G.	1.	Based on the needs of the persons served, assistance is offered in securing or maintaining housing that is: a. Safe.
7.	G.	7.	A system is in place to provide access to needed services 24 hours a day, 7 days a week.
7.	G.	8.	Based on the needs and desires of the person served, support is offered in the following areas: a. Healthy lifestyles.

IV.D. BEHAVIOR INTERVENTIONS

Desired Outcome: Behavior interventions – including chemical and physical restraints – are only used as a last resort and subject to rigorous oversight.

CARF RELATED STANDARDS

1.	D.	2.	The organization implements policies promoting the following rights of the persons served: c. Freedom from: (1) Abuse.
1.	E.	11.	The organization has policies and written procedures regarding critical incidents that include: a. Prevention. b. Reporting. c. Remedial action, when necessary. d. The following incidents, when applicable: (1) Medication errors. (2) Use of seclusion or restraint. (3) Incidents involving injury. (4) Communicable disease. (5) Infection control. (6) Violence or aggression. (7) Sentinel events. (8) Use or possession of weapons. (9) Elopement and/or wandering. (10) Vehicular accidents. (11) Biohazardous accidents. (12) Use or possession of licit or illicit substances. (13) Abuse and neglect. (14) Suicide or attempted suicide. (15) Other areas, as required.
7.	B.	1.	The organization has a policy identifying whether or not it provides: a. Pharmacotherapy practices that include evaluating, prescribing, dispensing, and/or administering medications. b. Medication monitoring.
7.	C.	1.	The organization has a policy that identifies whether or not: a. It will use emergency intervention procedures in response to assault or aggression. b. Seclusion or restraint is used within the programs it provides.
7.	C.	2.	Procedures for the use of emergency intervention, seclusion, or restraint include protocols for:

			<ul style="list-style-type: none"> a. Adults. b. Children and adolescents. c. Persons with special needs.
7.	C.	4.	<p>If the organization uses seclusion or restraint, there are policies and procedures governing its use that specify that:</p> <ul style="list-style-type: none"> a. Seclusion or restraint is used only for intervention in an individual's emergency situation and to prevent harm to him/ herself or others. b. Appropriate interaction with staff occurs as an effort to de-escalate the crisis. c. The medical history of the person served is reviewed to determine whether seclusion or restraint can be administered without risk to health and safety. d. When possible the behavioral health history of the person served is reviewed for identification of prior trauma. e. The use of seclusion or restraint is ordered by a physician or designated, trained, and competent qualified behavioral health practitioner. f. Seclusion or restraint is administered in a safe manner, with consideration given to the physical, developmental, and abuse history of the person served. g. Seclusion or restraint is administered by behavioral health personnel who are trained and competent in the proper techniques of applying and monitoring the form of seclusion or restraint ordered. h. When physical, mechanical, or material restraints are used, personnel are trained, qualified, and competent to administer them. i. When seclusion is used, personnel are trained to monitor for the unique needs of a person in seclusion. j. Removal from seclusion or restraint occurs as soon as the threat of harm has been safely minimized. k. Seclusion or restraint is not used as coercion, discipline, convenience, or retaliation by personnel in lieu of adequate programming. l. Standing orders are not issued to authorize the use of seclusion or restraint. m. Contributing environmental factors that may promote maladaptive behaviors are identified and actions taken to minimize those factors. n. Procedures for the use of seclusion or restraint are explained to and discussed with each person served in a manner that is understandable to him or her. o. There is documentation that the person served has been consulted regarding alternatives he or she prefers prior to the use of seclusion or restraint, when possible. p. The simultaneous use of seclusion and restraint is prohibited unless a staff member has been assigned for continual face-to-face monitoring. q. The physical plant can safely and humanely accommodate the practice of seclusion or restraint.
7.	C.	6.	<p>The use of seclusion or restraint always:</p> <ul style="list-style-type: none"> a. Is documented as an incident. b. Results in a review and, as appropriate, revision of the treatment plan or program model for the person served.
7.	C.	10.	<p>If the frequency of use of seclusion or restraint changes, the chief executive or a designee investigates the pattern of use and takes action to continuously reduce or eliminate the use of seclusion or restraint.</p>
7.	C.	11.	<p>All personnel involved in the direct administration of seclusion or restraint receive initial and ongoing competency-based training in the following:</p> <ul style="list-style-type: none"> a. The contributing factors or causes of threatening behavior. b. Which medical conditions may contribute to aggressive behavior. c. How the interactions of personnel may impact the behaviors of the persons served. d. The use of alternative interventions, such as mediation, de-escalation, self-protection, and time-out.

			<ul style="list-style-type: none"> e. Recognizing signs of physical distress in the person who is being restrained or secluded. f. The re-establishment of communication after a person has been secluded or restrained. g. The prevention of threatening behaviors. h. When and how to restrain or seclude safely. i. Training on how to monitor and continually assess for the earliest release. j. The practice of intervention done by a team. k. The practice of intervention done by an individual.
7.	C.	12.	Training is provided by persons or entities who are certified to conduct such training.
7.	C.	13.	<p>When a team intervention is conducted, written procedures are available for:</p> <ul style="list-style-type: none"> a. Defining team leadership. b. Assigning team duties.
7.	C.	14.	If an advance directives plan or crisis intervention plan exists for the person served, it is readily available for immediate reference.
7.	C.	15.	<p>A room designated for the use of seclusion or restraint has:</p> <ul style="list-style-type: none"> a. Adequate air flow. b. An identified plan for emergency exit. c. Access to bathroom facilities. d. Sufficient lighting. e. Observation availability.

IV.E. MEDICATION MANAGEMENT

Desired Outcome: Medications are managed effectively and appropriately.

CARF RELATED STANDARDS

1.	E.	4.	There are emergency procedures: a. For: (5) Medical emergencies.
1.	E.	9.	Personnel receive initial and annual competency-based training in: g. Medication management, if appropriate.
2.	A.	8.	The following information is used in the development of the individual service plans: a. Relevant medical history.
2.	A.	11.	As appropriate, the following needs are addressed in the plan: c. Identified health risks.
2.	A.	12.	The person and/or family served and/or their legal representatives are involved in: a. Assessments of potential risks to each person's health in the community.
3.	I.	12.	Based on the needs and choices of the person served, the organization may provide or refer the person served to resources for addressing, as relevant to job supports: l. Health maintenance and medication management.
4.	J.	3.	In-home safety needs of persons served are addressed with respect to: d. Medication management.
7.	A.	7.	In a medically supervised program, there is a medical director who is a physician.
7.	B.	1.	The organization has a policy identifying whether or not it provides: a. Pharmacotherapy practices that include evaluating, prescribing, dispensing, and/or administering medications. b. Medication monitoring.
7.	B.	2.	If the organization provides medication monitoring, it has written procedures that provide for: a. Safe handling. b. Safe storage. c. Safe disposal. d. Documentation.
7.	B.	5.	Any organization that is prescribing, dispensing, or administering medications has written policies and procedures regarding medications that provide for: a. Compliance with all applicable local, state or provincial, and federal laws and regulations pertaining to medications and controlled substances, including on-site pharmacy services and dispensing. b. Availability of a physician for consultation 24 hours a day, 7 days a week. c. Identification and documentation of any medication reactions experienced by the person served.

			<ul style="list-style-type: none"> d. Review of past medication use, including: <ul style="list-style-type: none"> (1) Effectiveness. (2) Side effects. (3) Allergies or adverse reactions. e. Evaluation of co-existing medical conditions. f. Identification of alcohol and other drug use. g. Documentation or confirmation of informed consent for each medication prescribed, when possible. h. Documentation and reporting of medication errors. i. Use of over-the-counter medications. j. Use of medications by women of child bearing age. k. Use of medications during pregnancy. l. Management of biohazards associated with the use of medications. m. Ready access to the telephone number of a poison control center by: <ul style="list-style-type: none"> (1) The program personnel. (2) The persons served. n. Review of pharmacotherapy activities, including medication errors and drug reactions, as part of the quality monitoring and improvement system. o. Special dietary needs and restrictions associated with medication use. p. Notification of the prescribing professional regarding medication reactions or problems, including errors. q. Necessary laboratory studies, tests, or other procedures. r. Coordination when a medication is prescribed by a source other than the organization. s. Coordination with the physician providing primary care needs.
7.	B.	6.	<p>Any organization that is prescribing medications has policies and procedures that address:</p> <ul style="list-style-type: none"> a. To the extent possible, the use of treatment guidelines and protocols to: <ul style="list-style-type: none"> (1) Promote state-of-the-art pharmacotherapy. (2) Ensure safety of the person served. b. A program of medication utilization evaluation.
7.	B.	7.	<p>An organization that is dispensing or administering medications, including the use of samples, has policies and procedures that address:</p> <ul style="list-style-type: none"> a. Purchase. b. Transportation and delivery. c. Storage. d. Safe handling. e. Packaging and labeling. f. Safe disposal. g. Inventory. h. Off-site use. i. Administration of medications by personnel, including: <ul style="list-style-type: none"> (1) Staff credentials and competencies. (2) Documentation of medication administration, errors, and reactions. (3) Documentation of the use and benefits of as needed (prn) doses.
7.	G.	2.	<p>In-home safety needs of persons served are addressed with respect to:</p> <ul style="list-style-type: none"> d. Medication management.

IV.F. NATURAL DISASTERS AND OTHER PUBLIC EMERGENCIES

Desired Outcome: There are safeguards in place to protect and support participants in the event of natural disasters or other public emergencies.

CARF RELATED STANDARDS

<p>1. E. 4.</p>	<p>There are emergency procedures:</p> <ul style="list-style-type: none"> a. For: <ul style="list-style-type: none"> (1) Fires. (2) Bomb threats. (3) Natural disasters. (4) Utility failures. (5) Medical emergencies. (6) Safety during violent or other threatening situations. b. That satisfy: <ul style="list-style-type: none"> (1) The requirements of applicable authorities. (2) Practices appropriate for the locale. c. That are evidenced: <ul style="list-style-type: none"> (1) In writing, when the organization controls the facility. (2) In writing or by other means, when the organization does not control the facility.
<p>1. E. 5.</p>	<p>For all facilities where the organization delivers services or provides administration on a regular and consistent basis, there are procedures for evacuation that:</p> <ul style="list-style-type: none"> a. Address: <ul style="list-style-type: none"> (1) When evacuation is appropriate. (2) Complete evacuation from the physical facility. (3) The safety of evacuees. (4) Accounting for all persons involved. (5) Temporary shelter, when applicable. (6) Identification of essential services. (7) Continuation of essential services. (8) Emergency phone numbers. (9) Notification of the appropriate emergency authorities. b. Are evidenced: <ul style="list-style-type: none"> (1) In writing, when the organization controls the facility. (2) In writing or by other means, when the organization does not control the

facility.		
1.	E.	<p>6. Tests of all emergency procedures:</p> <ul style="list-style-type: none"> a. Are conducted: <ul style="list-style-type: none"> (1) At least once a year. (2) On each shift. (3) In all facilities where the organization delivers services or provides administration on a regular and consistent basis. b. Include actual or simulated physical evacuations, when included in the procedures.
1.	E.	<p>7. Tests of the emergency and evacuation procedures:</p> <ul style="list-style-type: none"> a. Are analyzed for performance improvement. b. Result in improvement of or affirm satisfactory current practice. c. Are evidenced: <ul style="list-style-type: none"> (1) In writing, when the organization controls the facility. (2) In writing or by other means, when the organization does not control the facility.
1.	E.	<p>8. When services are delivered in the community, the organization:</p> <ul style="list-style-type: none"> a. Has written procedures to promote the safety of: <ul style="list-style-type: none"> (1) Persons served. b. Regularly provides information and training designed to reduce physical risks to: <ul style="list-style-type: none"> (1) Persons served.
1.	E.	<p>9. Personnel receive initial and annual competency-based training in:</p> <ul style="list-style-type: none"> a. Health and safety practices. b. Identification of unsafe environmental factors. c. Emergency procedures. d. Evacuation procedures.
1.	E.	<p>15. For a Community Housing program utilizing individual apartments, the organization provides an education program to residents that includes:</p> <ul style="list-style-type: none"> e. Contingency plans in case either the support system or the service provider is unable to deliver care. f. A review of how to deal with emergencies and evacuation from the residence.
7.	H.	<p>1. The program implements policies and procedures for assessment and referral that include:</p> <ul style="list-style-type: none"> d. Linkage to: <ul style="list-style-type: none"> (1) Emergency services.



FOCUS V.

PARTICIPANT RIGHTS

AND RESPONSIBILITIES

Desired Outcome: Participants receive support to exercise their rights and in accepting personal responsibilities.

V.A. CIVIC AND HUMAN RIGHTS

Desired Outcome: Participants are informed of and supported to freely exercise their fundamental constitutional and federal or state statutory rights.

CARF RELATED STANDARDS

1.	G.	4.	Corporate responsibility efforts include, at a minimum, the following: e. Advocacy efforts for the persons served.
1.	H.	1.	The organization complies with the following legal and regulatory requirements: a. Rights of the persons served. b. Confidentiality requirements. i. Privacy of the persons served.
2.	A.	18.	When services are provided to identified criminal offenders: d. Confidentiality is maintained.
2.	A.	21.	If restrictions are placed on the rights of a person served: a. The organization follows its policies and procedures. b. The organization obtains informed consent prior to implementation. c. The organization has methods to reinstate rights as soon as possible. d. Staff members are trained in their use.
2.	B.	3.	Any release of confidential information: a. Is authorized by the person served and/or his or her legal representative. b. Is limited to the specific information identified. c. Has a time limitation. d. Conforms to the guidelines of funders and/or referral sources. e. Conforms to applicable laws.
2.	B.	4.	The persons served can access their own records.
3.	A.	6.	The person served is involved in making informed employment-related decisions, including: d. Their rights and responsibilities related to achieving desired employment outcomes.
3.	H.	4.	Based on the needs and choices of the person served, the organization may provide or refer the person to resources for addressing, as relevant to job support: i. Self-advocacy and assertiveness skills.
3.	I.	12.	Based on the needs and choices of the person served, the organization may provide or refer the person served to resources for addressing, as relevant to job supports: i. Self-advocacy and assertiveness skills.
4.	E.	2.	Services/activities are organized around: e. Assisting the persons served to achieve their goals of choice in the following

			areas: (6) Self-advocacy.
4.	E.	8.	<p>When an individual receives less than the minimum wage, governmental requirements for work measurement and wage payment are followed, including documentation of:</p> <ul style="list-style-type: none"> a. How the person's disability affects his or her productivity. b. Performance levels based on work measurements. c. Commensurate wages paid. d. Changes made based on annual prevailing wage studies. e. Sharing of this information with the person served.
4.	K.	8.	<p>Based on the needs and desires of the persons served, support is offered in the following areas:</p> <ul style="list-style-type: none"> e. Effective self-advocacy and decision making.
7.	A.	8.	<p>When applicable, the program assists the persons served to link with:</p> <ul style="list-style-type: none"> a. Local advocacy groups.
7.	G.	8.	<p>Based on the needs and desires of the person served, support is offered in the following areas:</p> <ul style="list-style-type: none"> e. Effective self-advocacy and decision making.

V.B. PARTICIPANT DECISION MAKING AUTHORITY

Desired Outcome: Participants receive training and support to exercise and maintain their own decision-making authority.

CARF RELATED STANDARDS

1.	B.	1.	The leadership demonstrates accessibility planning that addresses the needs of the: a. Persons served.
1.	D.	1.	The rights of the persons served are: a. Communicated to the persons served: (1) In a way that is meaningful. (2) Prior to the beginning of service delivery and/or at initiation of service delivery. (3) Annually for persons served in a program longer than one year.
1.	D.	2.	The organization implements policies promoting the following rights of the persons served: d. Access to information pertinent to the person served in sufficient time to facilitate his or her decision making. g. Access to self-help and advocacy support services.
1.	D.	3.	The organization: a. Implements a policy by which persons served may formally complain to the organization.
2.	A.	10.	A coordinated individualized service plan: a. Is developed with the input of the person served. c. Is reviewed on a regular basis with respect to expected outcomes. d. Is revised, as appropriate:
2.	A.	12.	The person and/or family served and/or their legal representatives are involved in: a. Assessments of potential risks to each person's health in the community. b. Assessments of potential risks to each person's safety in the community. c. Decisions to accept or reject such risks. d. Identification of actions to be taken to minimize risks. e. Identification of individuals responsible for those actions.
3.	A.	1.	Information about the organization: a. Includes: (7) Responsibilities of the person served, including financial responsibility. (9) Options for persons served to direct their service design and delivery.
3.	A.	6.	The person served is involved in making informed employment-related decisions, including:

			<ul style="list-style-type: none"> a. The expected results of the services for the individual. b. How the design of the services meets his or her identified needs. c. How and when results will be evaluated. d. Their rights and responsibilities related to achieving desired employment outcomes.
3.	C.	4.	<p>Based on information provided and assessment information, the student and/or family served participate in making decisions about their services, including:</p> <ul style="list-style-type: none"> a. Selection or identification of adult support agencies including: <ul style="list-style-type: none"> (1) Funding sources, as applicable. (2) Employment services, supports, and employers, as applicable. (3) Community services and supports, as applicable. b. The expected results of the services for the individual. c. How the design of the services meets identified needs. d. How the services will be delivered. e. The expected duration of the services. f. Possible alternatives for services. g. How results will be evaluated. h. Other information about the services, as requested.
3.	E.	2.	<p>The plan is prepared:</p> <ul style="list-style-type: none"> a. By the person seeking employment and the evaluator.
3.	H.	4.	<p>Based on the needs and choices of the person served, the organization may provide or refer the person to resources for addressing, as relevant to job support:</p> <ul style="list-style-type: none"> k. Problem-solving and decision-making skills. s. Advocacy or self-advocacy centers for independent living.
3.	I.	2.	<p>Job search activities are individualized to the person seeking employment and involve his or her:</p> <ul style="list-style-type: none"> a. Input. b. Approval.
3.	I.	4.	<p>Job development activities may include:</p> <ul style="list-style-type: none"> d. Services requested by the person served, including: <ul style="list-style-type: none"> (1) Job-site consultation to identify or modify barriers to employment. (2) Negotiating:
3.	I.	12.	<p>Based on the needs and choices of the person served, the organization may provide or refer the person served to resources for addressing, as relevant to job supports:</p> <ul style="list-style-type: none"> k. Problem-solving and decision-making skills.
4.	A.	2.	<p>The persons and/or families served participate in making decisions about their services including:</p> <ul style="list-style-type: none"> a. The expected results of the services for the individuals. b. How the design of the services meets their identified needs. c. How the services will be delivered. d. The expected duration of the services. e. Possible alternatives for services: <ul style="list-style-type: none"> (1) Within the organization. (2) Within the community. f. How results will be evaluated. g. Futures planning. h. Other information about the services, as requested.

4.	A.	3.	The organization establishes a staff selection process for persons served that: a. Considers for those served: b. Allows persons served to provide input regarding the selection of their direct staff on an ongoing basis.
4.	D.	2.	The students and their families make informed decisions about future participation in their communities.
4.	E.	1.	The persons participating in services/ activities move toward: d. Greater control of their lives. e. Increased participation in the community.
4.	K.	8.	Based on the needs and desires of the persons served, support is offered in the following areas: e. Effective self-advocacy and decision making.
5.	A.	2.	Persons and/or families served participate in making informed decisions about their assistive technology services, including: a. Expected results of services for persons served. b. How the design of services meets identified needs. c. Off-the-shelf technology resources, as appropriate. d. How services will be delivered. e. Expected time lines of the services. f. Possible alternatives for services. g. How results will be evaluated. h. Full disclosure to persons served and funders about future: (1) Technology benefits. (2) Maintenance. (3) Expected costs. (4) Expected responsibilities. (5) Technology changes. i. Other aspects about the service design, as requested.
7.	B.	11.	The persons served, or their parents or guardians, when appropriate, are actively involved in making decisions related to the use of medications.
7.	E.	1.	The persons participating in services/activities move toward: c. Greater choice. d. Greater control of their lives. e. Increased participation in the community.
7.	G.	3.	Persons served have input into: a. Where they live. b. With whom they live.
7.	G.	8.	Based on the needs and desires of the person served, support is offered in the following areas: e. Effective self-advocacy and decision making.

V.C. ALTERNATE DECISION MAKING

Desired Outcome: Decisions to seek guardianship, surrogates or other mechanisms that take authority away from participants are considered only after a determination is made that no less intrusive measures are or could be available to meet the participant's needs.

CARF RELATED STANDARDS

1.	D.	1.	The rights of the persons served are: <ol style="list-style-type: none"> a. Communicated to the persons served: <ol style="list-style-type: none"> (1) In a way that is meaningful. (2) Prior to the beginning of service delivery and/or at initiation of service delivery. (3) Annually for persons served in a program longer than one year. b. Available at all times for review and clarification.
1.	D.	2.	The organization implements policies promoting the following rights of the persons served: <ol style="list-style-type: none"> c. Freedom from: e. Informed consent or refusal or expression of choice regarding: f. Access or referral to legal entities for appropriate representation. g. Access to self-help and advocacy support services. i. Investigation and resolution of alleged infringement of rights.
1.	D.	3.	The organization: <ol style="list-style-type: none"> a. Implements a policy by which persons served may formally complain to the organization. b. Implements a procedure concerning formal complaints that: <ol style="list-style-type: none"> (1) Is written. (2) Specifies: <ol style="list-style-type: none"> (a) That the action will not result in retaliation or barriers to services. (b) How efforts will be made to resolve the complaint. (c) Levels of review, which include availability of external review. (d) Time frames that are adequate for prompt consideration and that result in timely decisions for the person served. (e) Procedures for written notification regarding the actions to be taken to address the complaint. (f) The rights and responsibilities of each party. (g) The availability of advocates or other assistance. c. Makes complaint procedures and, if applicable, forms: <ol style="list-style-type: none"> (1) Readily available to the persons served. (2) Understandable to the persons served.

V.D. DUE PROCESS

Desired Outcome: Participants are informed of and supported to freely exercise their Medicaid due process rights.

CARF RELATED STANDARDS

1.	D.	1.	<p>The rights of the persons served are:</p> <ul style="list-style-type: none"> a. Communicated to the persons served: <ul style="list-style-type: none"> (1) In a way that is meaningful. (2) Prior to the beginning of service delivery and/or at initiation of service delivery. (3) Annually for persons served in a program longer than one year. b. Available at all times for review and clarification.
1.	D.	3.	<p>The organization:</p> <ul style="list-style-type: none"> b. Implements a procedure concerning formal complaints that: <ul style="list-style-type: none"> (1) Is written. (2) Specifies: <ul style="list-style-type: none"> (a) That the action will not result in retaliation or barriers to services. (b) How efforts will be made to resolve the complaint. (c) Levels of review, which include availability of external review. (d) Time frames that are adequate for prompt consideration and that result in timely decisions for the person served. (e) Procedures for written notification regarding the actions to be taken to address the complaint. (f) The rights and responsibilities of each party. (g) The availability of advocates or other assistance. c. Makes complaint procedures and, if applicable, forms: <ul style="list-style-type: none"> (1) Readily available to the persons served. (2) Understandable to the persons served.
1.	H.	1.	<p>The organization complies with the following legal and regulatory requirements:</p> <ul style="list-style-type: none"> a. Rights of the persons served.

V.E. GRIEVANCES

Desired Outcome: Participants are informed of how to register grievances and complaints and supported in seeking their resolution. Grievances and complaints are resolved in a timely fashion.

CARF RELATED STANDARDS

1.	D.	3.	<p>The organization:</p> <ul style="list-style-type: none"> a. Implements a policy by which persons served may formally complain to the organization. b. Implements a procedure concerning formal complaints that: <ul style="list-style-type: none"> (1) Is written. (2) Specifies: <ul style="list-style-type: none"> (a) That the action will not result in retaliation or barriers to services. (b) How efforts will be made to resolve the complaint. (c) Levels of review, which include availability of external review. (d) Time frames that are adequate for prompt consideration and that result in timely decisions for the person served. (e) Procedures for written notification regarding the actions to be taken to address the complaint. (f) The rights and responsibilities of each party. (g) The availability of advocates or other assistance. c. Makes complaint procedures and, if applicable, forms: <ul style="list-style-type: none"> (1) Readily available to the persons served. (2) Understandable to the persons served.
1.	D.	4.	<p>A review of formal complaints:</p> <ul style="list-style-type: none"> a. Is conducted annually. b. Determines: <ul style="list-style-type: none"> (1) Trends. (2) Areas needing performance improvement. (3) Actions to be taken.



FOCUS VI.

PARTICIPANT OUTCOMES

AND SATISFACTION

Desired Outcome: Participants are satisfied with their services and achieve desired outcomes.

VI.A. PARTICIPANT SATISFACTION

Desired Outcome: Participants and family members, as appropriate, express satisfaction with their services and supports.

CARF RELATED STANDARDS

1.	A.	1.	The organization demonstrates that it obtains input: a. On an ongoing basis. b. From: (1) Persons served. (2) Personnel. (3) Other stakeholders.
1.	A.	2.	The input is obtained from the following, as appropriate: d. Performance improvement activities.
1.	A.	3.	The leadership: a. Analyzes the input obtained. b. Uses the input in: (2) Performance improvement.
1.	C.	4.	For service delivery improvement, the data collection system: c. Measures for indicators in each of the following areas: (4) Satisfaction and other feedback from: (a) The persons served.
1.	C.	5.	A performance analysis is completed: c. That analyzes performance indicators of: (4) Satisfaction and other feedback from: (a) The persons served.
1.	C.	6.	Information is used to: a. Review the implementation of the mission and core values of the organization. b. Improve the quality of programs and services. c. Facilitate: (1) Organizational decision making. (2) Strategic planning.
2.	A.	10.	A coordinated individualized service plan: c. Is reviewed on a regular basis with respect to expected outcomes. d. Is revised, as appropriate: (1) Based on the satisfaction of the person served.
2.	A.	14.	If a person served needs services that are not available through the organization, referrals to other providers are suggested.
3.	A.	8.	The job seeker provides input into defining employment outcome satisfaction.

3.	A.	9.	Each person's satisfaction with his or her employment services is assessed on a regular basis, as appropriate to the individual and services provided.
3.	B.	9.	With the documented permission of the person served, service satisfaction information about achieving outcomes expectations is shared with the agencies and organizations providing services.
3.	C.	11.	Upon transition, follow-up information is exchanged between community and school-based service providers regarding: b. Aggregated satisfaction information.
3.	G.	5.	The services are expanded, modified, or discontinued based on: c. Satisfaction of the person served.
3.	K.	3.	The personnel services are continuously improved based on: a. Local employer input and information. b. Review of international labor and employer trends.

VI.B. PARTICIPANT OUTCOMES

Desired Outcome: Services and supports lead to positive outcomes for each participant.

CARF RELATED STANDARDS

1.	C.	4.	For service delivery improvement, the data collection system: c. Measures for indicators in each of the following areas: (1) The effectiveness of services. (2) The efficiency of services. (3) Service access. (4) Satisfaction and other feedback from: (a) The persons served.
3.	A.	5.	The individual employment plan identifies: a. The job seeker's desired employment opportunities and outcomes. b. Services to achieve desired outcomes.
3.	A.	8.	The job seeker provides input into defining employment outcome satisfaction.
3.	B.	2.	The person is linked to services and community resources that enable him or her to achieve employment objectives, as identified.
4.	B.	3.	Based on the needs of the persons served, case management/services coordination includes: d. Assisting the persons served to achieve goals for independence as defined by the persons served.
4.	E.	2.	Services/activities are organized around: e. Assisting the persons served to achieve their goals of choice in the following areas: (1) Community living skills development. (2) Interpersonal relations. (3) Recreation/use of leisure time opportunities. (4) Vocational development or employment. (5) Educational development. (6) Self-advocacy. (7) Access to non-disability related social resources.
7.	D.	3.	Based on the needs of the persons served, case management/services coordination includes: d. Assistance with achieving goals for independence as defined by the persons served.



FOCUS VII.

SYSTEM PERFORMANCE

Desired Outcome: The system supports participants efficiently and effectively and constantly strives to improve quality.

VII.A. SYSTEM PERFORMANCE APPRAISAL

Desired Outcome: The service system promotes the effective and efficient provision of services and supports by engaging in systematic data collection and analysis of program performance and impact.

CARF RELATED STANDARDS

1.	A.	1.	The organization demonstrates that it obtains input: a. On an ongoing basis. b. From: (1) Persons served. (2) Personnel. (3) Other stakeholders.
1.	A.	2.	The input is obtained from the following, as appropriate: d. Performance improvement activities.
1.	C.	1.	Data are collected that: a. Provide information on: (1) The needs of persons served. (2) The needs of other stakeholders. (3) The business needs of the organization. b. Allow for comparative analysis.
1.	C.	3.	For business function improvement, the organization: a. Sets performance goals. b. Measures performance indicators. c. Collects and analyzes data from the following: (1) Financial information. (2) Accessibility status reports. (3) Resource allocation. (4) Surveys. (5) Risk analysis reports. (6) Governance reports, if applicable. (7) Human resource reports. (8) Technology analysis reports. (9) Environmental health and safety reports. (10) Field trends, including research findings if applicable. (11) Service delivery system.
1.	C.	4.	For service delivery improvement, the data collection system: a. Includes the characteristics of the persons served.

			<ul style="list-style-type: none"> b. Collects data on the persons served at: <ul style="list-style-type: none"> (1) The beginning of services. (2) Appropriate intervals. (3) The end of services. (4) Point(s) in time following services. c. Measures for indicators in each of the following areas: <ul style="list-style-type: none"> (1) The effectiveness of services. (2) The efficiency of services. (3) Service access. (4) Satisfaction and other feedback from: <ul style="list-style-type: none"> (a) The persons served. (b) Other stakeholders. d. Addresses the following for each indicator: <ul style="list-style-type: none"> (1) To whom the indicator will be applied. (2) How the data will be collected. (3) A performance goal based on one or more of the following: <ul style="list-style-type: none"> (a) An industry benchmark. (b) The organization's history. (c) A target established by the organization or other stakeholder. (4) Extenuating/influencing factors that should be considered when analyzing performance.
1.	C.	5.	<p>A performance analysis is completed:</p> <ul style="list-style-type: none"> a. At least annually. b. For: <ul style="list-style-type: none"> (1) Business functions. (2) Service delivery. c. That analyzes performance indicators of: <ul style="list-style-type: none"> (1) The effectiveness of services. (2) The efficiency of services. (3) Service access. (4) Satisfaction and other feedback from: <ul style="list-style-type: none"> (a) The persons served. (b) Other stakeholders. d. That: <ul style="list-style-type: none"> (1) Identifies areas needing performance improvement. (2) Results in an action plan to address the improvements needed to reach established or revised performance goals. (3) Outlines actions taken or changes made to improve performance.
1.	C.	6.	<p>Information is used to:</p> <ul style="list-style-type: none"> a. Review the implementation of the mission and core values of the organization. b. Improve the quality of programs and services. c. Facilitate: <ul style="list-style-type: none"> (1) Organizational decision making. (2) Strategic planning.
1.	C.	8.	<p>The organization has a technology and system plan:</p> <ul style="list-style-type: none"> a. That includes: <ul style="list-style-type: none"> (1) Hardware.

			<ul style="list-style-type: none"> (2) Software. (3) Security. (4) Confidentiality. (5) Backup policies. (6) Assistive technology. (7) Disaster recovery preparedness. (8) Virus protection. <p>b. That is used to support information management and performance improvement activities.</p>
1.	I.	3.	<p>Actual financial results are:</p> <ul style="list-style-type: none"> a. Compared to budget. b. Reported to: <ul style="list-style-type: none"> (1) Appropriate personnel. (2) Persons served, as appropriate. (3) Other stakeholders, as required. c. Reviewed at least quarterly.
1.	I.	4.	<p>The organization identifies and reviews, at a minimum:</p> <ul style="list-style-type: none"> a. Revenues and expenses. b. Internal and external: <ul style="list-style-type: none"> (1) Financial trends. (2) Financial challenges. (3) Financial opportunities. (4) Business trends. (5) Management information. c. Financial solvency, with the development of remediation plans, if appropriate.
1.	I.	6.	<p>The organization:</p> <ul style="list-style-type: none"> a. Establishes and maintains fiscal policies and procedures, including internal control practices. b. Provides initial and ongoing training on billing and coding procedures for personnel with these responsibilities.
6.	A.	3.	<p>The organization's administration uses indicators of performance to:</p> <ul style="list-style-type: none"> a. Maintain compliance with the agreement between the One-Stop Career Center and the provider. b. Continuously monitor performance. c. Identify any need for corrective action. d. Determine methods to improve services.
6.	A.	4.	<p>As requested, the organization provides information to the local One-Stop Career Center on the following:</p> <ul style="list-style-type: none"> a. Outcomes performance. b. Service utilization. c. Customer satisfaction.

VII.B. QUALITY IMPROVEMENT

Desired Outcome: There is a systemic approach to the continuous improvement of quality in the provision of HCBS.

CARF RELATED STANDARDS

1.	A.	1.	The organization demonstrates that it obtains input: a. On an ongoing basis. b. From: (1) Persons served. (2) Personnel. (3) Other stakeholders.
1.	A.	2.	The input is obtained from the following, as appropriate: a. Input forums. b. Surveys. c. Complaint, grievance, or incident summaries. d. Performance improvement activities. e. Strategic planning. f. Program/service development.
1.	A.	3.	The leadership: a. Analyzes the input obtained. b. Uses the input in: (1) Program planning. (2) Performance improvement. (3) Strategic planning. (4) Organizational advocacy. (5) Financial planning. (6) Resource planning.
1.	B.	2.	Accessibility plan(s) address: a. Identification of barriers in the following areas: (1) Architecture. (2) Environment. (3) Attitudes. (4) Finances. (5) Employment. (6) Communication. (7) Transportation. (8) Any other barrier identified by the: (a) Persons served.

			<ul style="list-style-type: none"> (b) Personnel. (c) Other stakeholders. <ul style="list-style-type: none"> b. Time lines for removal of identified barriers. c. Actions for removal of identified barriers.
1.	C.	4.	<p>For service delivery improvement, the data collection system:</p> <ul style="list-style-type: none"> a. Includes the characteristics of the persons served. b. Collects data on the persons served at: <ul style="list-style-type: none"> (1) The beginning of services. (2) Appropriate intervals. (3) The end of services. (4) Point(s) in time following services. c. Measures for indicators in each of the following areas: <ul style="list-style-type: none"> (1) The effectiveness of services. (2) The efficiency of services. (3) Service access. (4) Satisfaction and other feedback from: <ul style="list-style-type: none"> (a) The persons served. (b) Other stakeholders. d. Addresses the following for each indicator: <ul style="list-style-type: none"> (1) To whom the indicator will be applied. (2) How the data will be collected. (3) A performance goal based on one or more of the following: <ul style="list-style-type: none"> (a) An industry benchmark. (b) The organization's history. (c) A target established by the organization or other stakeholder. (4) Extenuating/influencing factors that should be considered when analyzing performance.
1.	C.	5.	<p>A performance analysis is completed:</p> <ul style="list-style-type: none"> a. At least annually. b. For: <ul style="list-style-type: none"> (1) Business functions. (2) Service delivery. c. That analyzes performance indicators of: <ul style="list-style-type: none"> (1) The effectiveness of services. (2) The efficiency of services. (3) Service access. (4) Satisfaction and other feedback from: <ul style="list-style-type: none"> (a) The persons served. (b) Other stakeholders. d. That: <ul style="list-style-type: none"> (1) Identifies areas needing performance improvement. (2) Results in an action plan to address the improvements needed to reach established or revised performance goals. (3) Outlines actions taken or changes made to improve performance.
1.	C.	6.	<p>Information is used to:</p> <ul style="list-style-type: none"> a. Review the implementation of the mission and core values of the organization. b. Improve the quality of programs and services.

			<ul style="list-style-type: none"> c. Facilitate: <ul style="list-style-type: none"> (1) Organizational decision making. (2) Strategic planning.
1.	D.	4.	<p>A review of formal complaints:</p> <ul style="list-style-type: none"> a. Is conducted annually. b. Determines: <ul style="list-style-type: none"> (1) Trends. (2) Areas needing performance improvement. (3) Actions to be taken.
1.	E.	7.	<p>Tests of the emergency and evacuation procedures:</p> <ul style="list-style-type: none"> a. Are analyzed for performance improvement. b. Result in improvement of or affirm satisfactory current practice.
1.	E.	12.	<p>A written analysis of all critical incidents identified is provided to the leadership:</p> <ul style="list-style-type: none"> a. At least annually. b. That addresses: <ul style="list-style-type: none"> (1) Causes. (2) Trends. (3) Actions for improvement. (4) Results of performance improvement plans. (5) Necessary education and training of personnel. (6) Prevention of recurrence. (7) Internal and external reporting requirements.
2.	A.	10.	<p>A coordinated individualized service plan:</p> <ul style="list-style-type: none"> a. Is developed with the input of the person served. b. Identifies: <ul style="list-style-type: none"> (1) Overall goals. (2) Specific measurable objectives. (3) Methods/techniques to be used to achieve the objectives. (4) Those responsible for implementation. c. Is reviewed on a regular basis with respect to expected outcomes. d. Is revised, as appropriate: <ul style="list-style-type: none"> (1) Based on the satisfaction of the person served. (2) To remain meaningful to the person served. (3) Based on the changing needs of the person served.
3.	A.	9.	<p>Each person's satisfaction with his or her employment services is assessed on a regular basis, as appropriate to the individual and services provided.</p>
3.	C.	11.	<p>Upon transition, follow-up information is exchanged between community and school-based service providers regarding:</p> <ul style="list-style-type: none"> a. Reporting of outcomes or results of services, with the authorization of the student and family. b. Aggregated satisfaction information. c. Suggestions for process or services improvements.

VII.C. CULTURAL COMPETENCY

Desired Outcome: The HCBS system effectively supports participants of diverse cultural and ethnic backgrounds.

CARF RELATED STANDARDS

1.	G.	3.	The organization responds to the diversity of its stakeholders with respect to: a. Culture. b. Age. c. Gender. d. Sexual orientation. e. Spiritual beliefs. f. Socioeconomic status. g. Language.
2.	A.	9.	A coordinated individualized service plan is based on the person's: f. Cultural background.
4.	C.	1.	Assessments of each child or youth served include information on his or her: c. Culture/ethnicity.
4.	C.	2.	The assessments are appropriate with respect to the child's or youth's: c. Culture.
4.	G.	6.	Foster family services reflect planning in the following ways: f. When persons served cannot be maintained in a foster family environment, they experience the most culturally similar residential, educational, and social opportunities possible while efforts are made to secure a stable family environment.
6.	A.	11.	Policies and procedures are in place to address at a minimum: e. Services for populations with added needs, such as diverse ethnic backgrounds, the elderly, and persons with disabilities or other impairments.
7.	A.	14.	Team members, in response to the needs of the persons served: c. Are culturally and linguistically competent relative to the needs of the persons served. d. Reflect the culture of the persons served.
7.	F.	2.	The organization provides the following community living components: g. Based on the choice of the persons served, opportunities to access: (2) Cultural activities. (5) Spiritual activities.
7.	H.	2.	The program provides the following services in collaboration with the person served: d. Identification of services that are: (1) Culturally appropriate.
7.	I.	4.	When the written agreement includes a program advisory process within the host

organization, it:

- c. Reflects the employee population's:
 - (2) Ethnicity.
 - (3) Cultural diversity.

VII.D. PARTICIPANT AND STAKEHOLDER INVOLVEMENT

Desired Outcome: Participants and other stakeholders have an active role in program design, performance appraisal, and quality improvement activities.

CARF RELATED STANDARDS

1.	A.	1.	The organization demonstrates that it obtains input: a. On an ongoing basis. b. From: (1) Persons served. (2) Personnel. (3) Other stakeholders.
1.	A.	3.	The leadership: a. Analyzes the input obtained. b. Uses the input in: (1) Program planning. (2) Performance improvement. (3) Strategic planning. (4) Organizational advocacy. (5) Financial planning. (6) Resource planning.
1.	B.	1.	The leadership demonstrates accessibility planning that addresses the needs of the: a. Persons served. c. Other stakeholders.
1.	B.	4.	Requests for reasonable accommodations are: a. Identified. b. Reviewed. c. Decided upon.
1.	C.	1.	Data are collected that: a. Provide information on: (1) The needs of persons served. (2) The needs of other stakeholders.
1.	C.	4.	For service delivery improvement, the data collection system: c. Measures for indicators in each of the following areas: (4) Satisfaction and other feedback from:

			(a) The persons served. (b) Other stakeholders.
1.	C.	6.	<p>Information is used to:</p> <ul style="list-style-type: none"> a. Review the implementation of the mission and core values of the organization. b. Improve the quality of programs and services. c. Facilitate: <ul style="list-style-type: none"> (1) Organizational decision making. (2) Strategic planning.
1.	C.	7.	<p>Performance information is shared in format(s) that are useful to the:</p> <ul style="list-style-type: none"> a. Persons served. b. Personnel. c. Other stakeholders.
1.	D.	3.	<p>The organization:</p> <ul style="list-style-type: none"> a. Implements a policy by which persons served may formally complain to the organization. b. Implements a procedure concerning formal complaints that: <ul style="list-style-type: none"> (1) Is written. (2) Specifies: <ul style="list-style-type: none"> (a) That the action will not result in retaliation or barriers to services. (b) How efforts will be made to resolve the complaint. (c) Levels of review, which include availability of external review. (d) Time frames that are adequate for prompt consideration and that result in timely decisions for the person served. (e) Procedures for written notification regarding the actions to be taken to address the complaint. (f) The rights and responsibilities of each party. (g) The availability of advocates or other assistance. c. Makes complaint procedures and, if applicable, forms: <ul style="list-style-type: none"> (1) Readily available to the persons served. (2) Understandable to the persons served.
1.	I.	2.	<p>Budgets are prepared that:</p> <ul style="list-style-type: none"> a. Include: <ul style="list-style-type: none"> (2) Input from various stakeholders, as required.
2.	A.	9.	<p>A coordinated individualized service plan is based on the person's:</p> <ul style="list-style-type: none"> d. Preferences. e. Desired outcomes.
2.	A.	10.	<p>A coordinated individualized service plan:</p> <ul style="list-style-type: none"> a. Is developed with the input of the person served.
2.	A.	12.	<p>The person and/or family served and/or their legal representatives are involved in:</p> <ul style="list-style-type: none"> b. Assessments of potential risks to each person's safety in the community. c. Decisions to accept or reject such risks. d. Identification of actions to be taken to minimize risks. e. Identification of individuals responsible for those actions.
2.	A.	21.	<p>If restrictions are placed on the rights of a person served:</p> <ul style="list-style-type: none"> b. The organization obtains informed consent prior to implementation.
3.	G.	5.	<p>The services are expanded, modified, or discontinued based on:</p> <ul style="list-style-type: none"> c. Satisfaction of the person served.

			d. Satisfaction of and input from employers.
3.	K.	3.	The personnel services are continuously improved based on: a. Local employer input and information. b. Review of international labor and employer trends. c. Service satisfaction of job seekers. d. Outcomes satisfaction of employers.

VII.E. FINANCIAL INTEGRITY

Desired Outcome: Payments are made promptly in accordance with program requirements.

CARF RELATED STANDARDS

1.	C.	3.	For business function improvement, the organization: c. Collects and analyzes data from the following: (1) Financial information. (6) Governance reports, if applicable.
1.	E.	3.	The organization demonstrates that self-inspections: b. Result in a report that: (4) Is evidenced: (b) In writing or by other means, when the organization does not control the facility.
1.	G.	2.	The identified leadership guides the following: d. Financial solvency. e. Compliance with insurance and risk management requirements.
1.	G.	5.	An organization in the United States receiving federal funding demonstrates corporate compliance through: a. A policy on corporate compliance that has been adopted by the organization's leadership, including a formal resolution or other document that authorizes establishment of the compliance program. b. Written designation of a personnel member to serve as the organization's primary point of contact for monitoring and reporting on matters pertaining to corporate compliance.
1.	I.	1.	The organization's financial planning and management activities reflect strategic planning designed to meet: b. Organizational performance objectives.
1.	I.	5.	If the organization is a subsidiary of a parent entity, it will identify: a. Financial reliance on related entities. b. Legal and other responsibilities between related entities and the organization.
1.	I.	7.	If the organization bills for services provided, a review of a representative sampling of records of the persons served is conducted: a. Quarterly. b. To: (1) Document that dates of services provided coincide with billed episodes of care. (2) Determine that the bills accurately reflect the services that were provided. (3) Identify necessary corrective action.
1.	I.	8.	The organization, if responsible for fee structures: a. Identifies the basis of the fee structures.

			<ul style="list-style-type: none"> b. Demonstrates: <ul style="list-style-type: none"> (1) Review of fee schedules. (2) Comparison of fee schedules. (3) Modifications when necessary. (4) Disclosure to the persons served of all fees for which they will be responsible.
1.	I.	9.	There is evidence of an annual review or audit of the financial statements of the organization conducted by an independent certified public accountant or chartered accountant.
1.	I.	10.	<p>If the review or audit generates a management letter, the organization will:</p> <ul style="list-style-type: none"> a. Provide the letter during the survey for review. b. Provide evidence of correction of material matters or reasons why material matters will not be corrected.
1.	I.	11.	<p>The organization has a risk management plan that includes:</p> <ul style="list-style-type: none"> a. Identification of loss exposures. b. Evaluation and analysis of loss exposures. c. Identification of how to rectify identified exposures. d. Implementation of actions to reduce risk. e. Monitoring of actions to reduce risk. f. Reporting results of actions taken to reduce risks. g. Inclusion of risk reduction in performance improvement activities.
1.	I.	12.	<p>As part of risk management, the insurance package of the organization:</p> <ul style="list-style-type: none"> a. Is reviewed: <ul style="list-style-type: none"> (1) For adequacy. (2) On an annual basis. b. Protects assets. c. Includes: <ul style="list-style-type: none"> (1) Property coverage. (2) Liability coverage. (3) Other coverage, as appropriate.
3.	K.	9.	<p>When the organization bids for contracted personnel services, it includes:</p> <ul style="list-style-type: none"> a. All direct costs. b. All indirect costs applicable to each contract. c. Profit. d. Consideration of fair market value. e. An annual review of all contracts.
3.	L.	6.	<p>When the affirmative business enterprise bids for contract work or establishes prices for products or services, it includes:</p> <ul style="list-style-type: none"> a. All direct costs. b. All indirect costs applicable to each service or job. c. Profit. d. Consideration of fair market value.
3.	L.	7.	The prices of products and services are analyzed at least annually.