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Three-Year Accreditation

CARF
Survey Report
for

Walton Community
Services, Inc.

carf INTERNATIONAL

Organization

Walton Community Services, Inc. (WCS)
3401 Florence Road, Suite 100
Powder Springs, GA   30127

Organizational Leadership

Deborah A. Walton, RN, B.S.N., M.S.N., M.H.A.
Chief Executive Officer

Survey Dates

October 29-31, 2012

Surveyor

Laura B. Altaratz, M.S.

Programs/Services Surveyed

Community Housing

Previous Survey

September 30-October 2, 2009
Three-Year Accreditation

Three-Year Accreditation

Survey Outcome

Three-Year Accreditation
Expiration: October 2015

SURVEY SUMMARY

Walton Community Services, Inc. (WCS), has strengths in many areas.

■ WCS is led by the CEO who established it in 1998 and is a professionally seasoned, compassionate, capable, and determined registered nurse (RN) who has a clear vision of the organization's future. A hands-on manager, she is frequently present in the community living residence, Life Choice II, and thoroughly familiar with the members who reside there. She promotes a participatory work culture characterized by hard work and collegial and supportive relationships between the personnel, who appear to be highly self-disciplined and forward thinking. It is clear that the organization values its personnel. Professional development opportunities are provided on an individual and group basis, and innovations are both celebrated and incentivized. The CEO has attracted an impressive cadre of administrative and direct support personnel who are loyal to the organization and highly motivated to carry out each of their roles in pursuit of its mission.

■ WCS benefits from the guidance of its small but impressively active and hardworking governance board. Members meet regularly and are vitally involved in reviewing, decision making, planning, and performance improvement functions. They form an essential complement to the organization's administrative staff. Their backgrounds include nursing with specializations in case management, utilization management, corporate compliance, quality management, and geriatric clinical nursing; financial management; and human resources. One of the board members serves as the organization's corporate compliance officer.

■ WCS is complimented for carving out a specialty niche of serving persons with developmental disabilities and medically fragile conditions, and for managing growth incrementally to maintain service stability and an unwavering focus on the provision of high-caliber services to its members.

■ The organization is complimented for the sophisticated strengths, weaknesses, opportunities, and threats (SWOT) analysis process it has used to develop and update its strategic and marketing plans.

■ WCS is recognized for developing an impressive continuous quality improvement infrastructure that has promoted its transformation to a data-fueled, results-driven organization. The infrastructure is anchored by cross-functional committees that regularly meet to review and analyze data and make recommendations that then flow between committees to the administrative team and, ultimately, to the board. The corporate compliance officer reviews the functionality of the information measurement and management system on a quarterly basis, providing yet another level of oversight, insight, and input.

■ The personnel who provide residential services at Life Choice II are nurses or certified nursing assistants (CNAs). Many are professionally seasoned, and a number of them have worked their way up in the organization to increasingly greater levels of responsibility. They appear to thrive in the demanding work environment and are highly vested in promoting quality of life for the members. They are professional in demeanor, well informed, and supportive of one another's work and responsibilities.

- WCS is highly selective in recruiting personnel in terms of professional experience, skills, personality, and work attitude. In addition to written supervisory evaluations, the annual performance evaluation process includes 360-degree reviews and a self-evaluation component. The average longevity of personnel was recently calculated to range to eleven years and average more than four years.

- The needs of WCS members receiving residential services include being nonambulatory, having developmental disabilities, being essentially nonverbal, and being considered medically fragile. They reside in a Cobb County Atlantic Regional Commission (ARC) HUD home for which WCS acts as the leased provider. The attractive, well-maintained brick home is located on a large, well-kept suburban lot with mature trees, an outside tiled patio area, and a nature trail. It is spacious, reflects immaculate housekeeping and upkeep, and is attractively and comfortably furnished. The comforts and needs of the three members who reside in the home are clearly the primary focus of the support staff. Each member has his own bedroom, which reflects individual tastes and personalized décor. Many items for leisure enjoyment and learning are on hand in the bedrooms and common areas of the house. Home cooked meals are served. Friendly, warm, and respectful relationships are observed between the personnel and members, who enjoy regular and varied community outings as well as holiday dinners and celebrations. Their medical and health needs are closely monitored, and they appear to be thriving and enjoying life with the supports provided by WCS.

- Staff members are complimented for compiling an impressive, continuously expanding binder of laminated sheets that feature colorful graphic and pictorial images, which members use to communicate their needs and preferences. For example, they are supported by personnel to indicate food choices, which then form the basis for the upcoming week's menu.

- WCS is recognized for its ongoing efforts to identify and remediate barriers to accessibility that impact its members and other stakeholders. One example relates to WCS's leadership meeting many times over a period of months with the local city council transportation department to advocate for a bus route change that would enable a member to utilize paratransit portal-to-portal services to travel between his home and his day program eighteen miles away during the week. The organization's efforts were ultimately successful.

- WCS uses many means of communicating with stakeholders, including its website, *www.waltoncommunityservices.com,* and its informative, multifaceted newsletter, the *Walton Chronicle.*

- Stakeholders are highly supportive and enthusiastic about WCS services. A third-party representative comments that the organization is under excellent management, is a reliable partner that can always be counted on to step forward with professional services, unfailingly focuses on its members and serves as a strong advocate for them, submits service requests that are held up as models for other providers and used as teaching tools, and is particular about hiring and training "the best" personnel.

- A family member expresses that her brother, who had a previously unsatisfactory placement with another provider, has been happy at WCS for the past ten years and has had a "complete turnaround." She appreciates receiving regular telephone and email updates from WCS personnel, knowing that her brother is supported to participate regularly in community, social, and recreational activities. He is able to enjoy "good old country cooking" every day, is always clean, and is well cared for medically. She remarks that she never worries about her brother's care and that WCS "has just been a prayer answered."

WCS should seek improvement in the areas identified by the recommendations in the report. Consultation given does not indicate nonconformance to standards but is offered as a suggestion for further quality improvement.

On balance, WCS demonstrates substantial conformance to the CARF standards. Its excellent residential services are extolled by stakeholders. Its members, challenged by medical fragility and multiple diagnoses, appear to be thriving and enjoying their lives. Leadership is compassionate, visionary, and member focused. The nurses and CNAs, who serve as the organization's direct support personnel, are well trained, devoted to the members, and vested in their work. The organization is respected as a top provider. It has made significant and impressive strides to become data driven, and its well-structured continuous quality improvement system anchors business and program operations.

Walton Community Services, Inc., has earned a Three-Year Accreditation. The board, leadership, administrative team, and personnel are complimented for their efforts in pursuing international accreditation. They are encouraged to use their resources to address the opportunities for improvement in this report and to continue to use the CARF standards as guidelines for continuous quality improvement.

SECTION 1. ASPIRE TO EXCELLENCE®

A. Leadership

Principle Statement

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

Key Areas Addressed

■ Leadership structure

■ Leadership guidance

■ Commitment to diversity

■ Corporate responsibility

■ Corporate compliance

Recommendations

There are no recommendations in this area.

Consultation

■ WCS has developed numerous policies and procedures since it began providing services in 1998. In some cases, more than one policy and/or procedure address the same topic, and variations exist in content. For ease of reference, training purposes, and consistency, leadership is encouraged to consolidate documents addressing the same topic.

■ It is suggested that a master coding system be implemented to better organize key documents generated by WCS such as policies, procedures, forms, job descriptions, and handbooks.

■ The organization is encouraged to annotate policies, procedures, forms, job descriptions, and handbooks with the effective date and most recent date reviewed or revised.

■ It is suggested that WCS develop a business continuity plan as a companion to the master disaster plan it has implemented for services. As part of the business continuity plan, it is encouraged to set forth its system for cross training and backup of essential administrative responsibilities.

C. Strategic Planning

Principle Statement

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

Key Areas Addressed

■ Strategic planning considers stakeholder expectations and environmental impacts

■ Written strategic plan sets goals

■ Plan is implemented, shared, and kept relevant

Recommendations

There are no recommendations in this area.

D. Input from Persons Served and Other Stakeholders

Principle Statement

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

Key Areas Addressed

■ Ongoing collection of information from a variety of sources

■ Analysis and integration into business practices

■ Leadership response to information collected

Recommendations

There are no recommendations in this area.

Consultation

■ WCS might consider developing a means to calculate a total score on each of its satisfaction surveys based on the ratings for all survey questions. The scores could be useful in the organization's information measurement and management system.

E. Legal Requirements

Principle Statement

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

Key Areas Addressed

■ Compliance with all legal/regulatory requirements

Recommendations

There are no recommendations in this area.

F. Financial Planning and Management

Principle Statement

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

Key Areas Addressed

■ Budget(s) prepared, shared, and reflective of strategic planning

■ Financial results reported/compared to budgeted performance

■ Organization review

■ Fiscal policies and procedures

■ Review of service billing records and fee structure

■ Financial review/audit

■ Safeguarding funds of persons served

Recommendations
F.10.

Although an audit was conducted for the year 2010, leadership reports that it has been financially infeasible for WCS to have yearly audits since that time. The organization should show evidence of an annual review or audit of its financial statements conducted by an independent certified public accountant.

G. Risk Management

Principle Statement

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

Key Areas Addressed

■ Identification of loss exposures

■ Development of risk management plan

■ Adequate insurance coverage

Recommendations

There are no recommendations in this area.

H. Health and Safety

Principle Statement

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

Key Areas Addressed

■ Inspections

■ Emergency procedures

■ Access to emergency first aid

■ Competency of personnel in safety procedures

■ Reporting/reviewing critical incidents

■ Infection control

Recommendations
H.6.a.(1) through H.6.e.

Although fire and tornado drills are regularly conducted, it is again recommended that WCS conduct unannounced tests of all emergency procedures at least annually on each shift and at each location. The tests should include complete actual or simulated physical evacuation drills, be analyzed for performance improvement, result in improvement of or affirm satisfactory current practice, and be evidenced in writing.

Consultation

■ It is suggested that the organization note the location of fire extinguishers and first aid kits on its evacuation route signage.

I. Human Resources

Principle Statement

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

Key Areas Addressed

■ Adequate staffing

■ Verification of background/credentials

■ Recruitment/retention efforts

- ■ Personnel skills/characteristics

- ■ Annual review of job descriptions/performance

- ■ Policies regarding students/volunteers, if applicable

Recommendations

There are no recommendations in this area.

J. Technology

Principle Statement

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

Key Areas Addressed

- ■ Written technology and system plan

Recommendations

There are no recommendations in this area.

K. Rights of Persons Served

Principle Statement

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

Key Areas Addressed

- ■ Communication of rights

- ■ Policies that promote rights

- ■ Complaint, grievance, and appeals policy

- ■ Annual review of complaints

Recommendations

There are no recommendations in this area.

L. Accessibility

Principle Statement

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

Key Areas Addressed

■ Written accessibility plan(s)

■ Status report regarding removal of identified barriers

■ Requests for reasonable accommodations

Recommendations

There are no recommendations in this area.

M. Performance Measurement and Management

Principle Statement

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

Key Areas Addressed

■ Information collection, use, and management

■ Setting and measuring performance indicators

Recommendations

There are no recommendations in this area.

N. Performance Improvement

Principle Statement

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

Key Areas Addressed

■ Proactive performance improvement

■ Performance information shared with all stakeholders

Recommendations

There are no recommendations in this area.

SECTION 2. QUALITY INDIVIDUALIZED SERVICES AND SUPPORTS

A. Program/Service Structure

Principle Statement

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

Key Areas Addressed

■ Services are person centered and individualized

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

■ Documented scope of services shared with stakeholders

■ Service delivery based on accepted field practices

■ Communication for effective service delivery

■ Entrance/exit/transition criteria

Recommendations

There are no recommendations in this area.

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

Principle Statement

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

The person served participates in decision making, directing, and planning that affects his or her life. Efforts to include the person served in the direction or delivery of those services/ supports are evident. The service environment reflects identified cultural needs, practices, and diversity. The person served is given information about the purposes of the organization.

Key Areas Addressed

■ Services are person-centered and individualized

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

Recommendations

There are no recommendations in this area.

C. Medication Monitoring and Management

Key Areas Addressed

■ Current, complete records of medications used by persons served

■ Written procedures for storage and safe handling of medications

■ Educational resources and advocacy for persons served in decision making

■ Physician review of medication use

■ Training and education for persons served regarding medications

Recommendations

There are no recommendations in this area.

F. Community Services Principle Standards

Key Areas Addressed

■ Access to community resources and services

■ Enhanced quality of life

■ Community inclusion

■ Community participation

Recommendations

There are no recommendations in this area.

SECTION 3. EMPLOYMENT AND COMMUNITY SERVICES

Principle Statement

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

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

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

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

- Increased inclusion in community activities.

- Increased or maintained ability to perform activities of daily living.

- Increased self-direction, self-determination, self-reliance, and self-esteem.

- Increased independence.

- Increased employment options.

- Employment obtained and maintained.

- Competitive employment.

- Economic self-sufficiency.

K. Community Housing

Principle Statement

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

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

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

Community housing may include either or both of the following:

■ Transitional living that provides interim supports and services for persons who are at risk of institutional placement, persons transitioning from institutional settings, or persons who are homeless. Transitional living is typically provided for six to twelve months and can be offered in congregate settings that may be larger than residences typically found in the community.

■ Long-term housing that provides stable, supported community living or assists the persons served to obtain and maintain safe, affordable, accessible, and stable housing.

The residences in which Community Housing services are provided must be identified in the Intent to Survey. These sites will be visited during the survey process and identified in the survey report and accreditation outcome as a site at which the organization provides a Community Housing program.

Key Areas Addressed

■ Safe, secure, private location

■ In-home safety needs

■ Options to make changes in living arrangements

■ Support to persons as they explore alternatives

■ Access as desired to community activities

■ System for on-call availability of personnel

Recommendations

There are no recommendations in this area.

PROGRAMS/SERVICES BY LOCATION

Walton Community Services, Inc.

3401 Florence Road, Suite 100
Powder Springs, GA   30127

Administrative Location Only

Walton Community Services, Inc.

2728 Old Horseshoe Bend Road
Marietta, GA   30064

Community Housing