



**PROVIDER REPORT
FOR
BASS RIVER DAY ACTIVITY
437 Essex St
Beverly, MA 01915**

April 10, 2020

Version

Public Provider Report

**Prepared by the Department of Developmental Services
OFFICE OF QUALITY ENHANCEMENT**

SUMMARY OF OVERALL FINDINGS

Provider	BASS RIVER DAY ACTIVITY
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Review Dates	2/13/2020 - 2/20/2020
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Service Enhancement Meeting Date	3/4/2020
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Survey Team	Anne Carey Raquel Rodriguez John Downing (TL) Steven Goldberg Jennifer Conley-Sevier
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Citizen Volunteers	
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Survey scope and findings for Residential and Individual Home Supports

Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Residential and Individual Home Supports	3 location(s) 7 audit (s)	Full Review	73/81 2 Year License 03/04/2020 - 03/04/2022		Certified 03/04/2020 - 03/04/2022
Residential Services	3 location(s) 7 audit (s)			Deemed	
Planning and Quality Management (For all service groupings)				Full Review	6 / 6

Survey scope and findings for Employment and Day Supports

Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Employment and Day Supports	3 location(s) 8 audit (s)	Full Review	59/63 2 Year License 03/04/2020 - 03/04/2022		21 / 27 Certified with Progress Report 03/04/2020 - 03/04/2022
Community Based Day Services	1 location(s) 4 audit (s)			Deemed	
Employment Support Services	2 location(s) 4 audit (s)			Full Review	15 / 21
Planning and Quality Management (For all service groupings)				Full Review	6 / 6

EXECUTIVE SUMMARY :

Bass River, Inc. was established in 1972 and provides continual support and community involvement to individuals with Developmental Disabilities in Residential, Employment and Community Based Day Support (CBDS) settings. The agency's residential program consists of 11 group homes in the North Shore Area. Bass River's employment and community based day programs are located in Beverly, and two sites in Salem, Massachusetts.

The Department of Developmental Services Office of Quality Enhancement (DDS OQE) completed a full licensing review of the agency's Residential/Individual Home Supports and Employment/Day Supports services. The agency's Residential/Individual Home Supports and Community Based Day Supports (CBDS) were recently accredited by CARF. The agency elected to "deem" CARF scores in lieu of a DDS OQE review of the certification indicators for those two service models. As a result, the OQE reviewed only those certification indicators applicable to the agency's Planning and Quality Management and Employment Supports model.

Organizationally the agency's commitment to human rights and dignity was an overall strength. Bass River has an active and effective Human Rights Committee (HRC). Monthly minutes demonstrated the HRC was functioning optimally; required membership and full attendance, by-laws, and quorum requirements were in place. Individuals received annual human rights trainings, and guardians had been notified of Human Rights, Human Rights Officers and to whom they should contact with complaints or grievances. The agency had effective systems to review DPPC action plan tasks, as well as to file and review physical restraint forms within required timelines.

The agency demonstrated strength in their understanding and knowledge of the persons supported, their unique needs, medical histories and everyday challenges. The agency continues to support an aging population, many of whom have been supported by the agency since its inception. Staff in homes reviewed, demonstrated a strong knowledge of the people they supported, and were able to quickly identify health concerns that may be considered atypical for individuals. For example, in one home, an individual had been losing weight without a diagnosis despite several follow-up appointments. Due to the involvement and observations of the agency nurse, and the knowledge and persistence of the program director, this individual experienced two separate positive outcomes. This individual was diagnosed with Obstructive Sleep Apnea and Celiac disease. The resulting use of a CPAP unit, and implemented dietary changes have significantly improved the quality of her life.

Residentially and within the domain of environmental safety, the homes were found to be clean, safe and decorated to the liking of the residents. Individuals were being supported to remain physically active and eat healthy. Visitation and communication with family and friends was occurring as desired.

There were some licensing areas identified that require additional attention within the residential services. Licensing indicators identified individuals were generally found to be in good health; however, the agency needs to place increased focus on its oversight systems for insuring that individuals receive preventative health screenings, as outlined in the Preventative Health Recommendations in the DDS Health Promotion and Coordination Initiative. Specifically for those individuals who simply refuse or are unable to tolerate normative screening techniques, the agency needs to ensure alternative techniques or screenings are considered, and individuals and staff are trained to recognize signs and symptoms specific to those conditions for which the screening was intended so as to remain proactive with early detection. Additionally, the agency needs to insure that all health related supportive and protective devices, medication treatment plans and restrictive environmental practices receive required reviews. The agency needs to evaluate its systems for monitoring ISP objective and money management oversight. ISP data being collected for ISP goals needs to be in accordance to the agreed upon support strategies.

The review of employment certification indicators identified the agency made significant gains in regards to Career Plans and the exploration of interests, skills and training assessments. Interest inventories, skills assessments and training assessments were completed for each individual surveyed, and individuals had career plans in place.

Within the Employment and Day Supports programs, the agency needs to focus attention on a few licensing issues within the Environmental and Personal Safety domains. The agency needs to address the need for a second means of egress or escape in order to continue to use one building's roof top for day/employment programming activities. The agency's desire to provide commercial kitchen equipment related to food preparation training identified the need for additional training on the subject of protective equipment and safe use of hot water when utilizing Board of Health required water temperatures that exceed DDS hot water temperatures.

Further effort needs to be directed towards strengthening Career Plans by supporting individuals and families to understand the full benefits of integrated employment, including the management of entitlements, employee benefits and rights, and fading supports without impacting success. The agency needs to further support and expand competitive job opportunities beyond the current group employment opportunities. In doing so, individuals will have additional opportunities to compete and work in integrated settings and have opportunities to understand and become part of the workplace culture.

Based on the findings of this survey review, Bass River's Residential Services/Individual Home Supports service group met 90% of licensing indicators, including all critical indicators and will receive a Two Year License for Residential/Individual Home Supports. The agency is also certified within this service grouping as a result of its CARF accreditation. The agency will conduct its own follow-up on those licensure indicators that received a not met rating within 60 days of the Service Enhancement Meeting. The agency will receive a Two Year License for Employment and Day Supports, meeting 94% of licensing indicators, including all critical indicators. The agency is also certified within this service group, meeting 78% of the DDS Employment certification indicators and its CARF accreditation of their Community Based Day Service Program. A progress report on the certification indicators rated not met will be due to the OQE within one year of the Service Enhancement Meeting. The agency will conduct its own follow-up on all licensing indicators not met during this survey, and report the results to the OQE within 60 days of the Service Enhancement Meeting.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	10/10	0/10	
Residential and Individual Home Supports	63/71	8/71	
Residential Services			
Critical Indicators	8/8	0/8	
Total	73/81	8/81	90%
2 Year License			
# indicators for 60 Day Follow-up		8	

	Met / Rated	Not Met / Rated	% Met
Organizational	10/10	0/10	
Employment and Day Supports	49/53	4/53	
Community Based Day Services Employment Support Services			
Critical Indicators	8/8	0/8	
Total	59/63	4/63	94%
2 Year License			
# indicators for 60 Day Follow- up		4	

Residential Areas Needing Improvement on Standards not met/Follow-up to occur:

Indicator #	Indicator	Area Needing Improvement
L35	Individuals receive routine preventive screenings.	Two individuals were noted to not have had all their recommended preventative screenings. The agency needs to ensure individuals receive routine and preventative screenings as outlined in the health recommendations and/or requested by their physicians.
L54	Individuals have privacy when taking care of personal needs and discussing personal matters.	In one location, information pertaining to individuals' personal needs was posted in public/common areas of the home. The agency needs to ensure that all individuals are afforded privacy with regard to their personal information.
L56	Restrictive practices intended for one individual that affect all individuals served at a location need to have a written rationale that is reviewed as required and have provisions so as not to unduly restrict the rights of others.	For two individuals, restrictive practices were in place without the requisite adequate notice to the individuals/guardians for whom the restrictions were not necessary. The agency needs to ensure that when restrictive practices are present; all required elements are present, including having a written rationale, the appropriate reviews, mitigation plans and a process in which to inform individuals/guardians of the presence of the restriction.

Residential Areas Needing Improvement on Standards not met/Follow-up to occur:

Indicator #	Indicator	Area Needing Improvement
L62	Supports and health related protections are reviewed by the required groups.	For six individuals, there was no evidence that supportive protective devices that were restrictive had been reviewed by the agency Human Rights Committee (HRC). The agency needs to ensure that all supportive protective devices are submitted for inclusion in each individual's ISP and if restrictive, are reviewed by the agency HRC.
L64	Medication treatment plans are reviewed by the required groups.	Two individuals had behavior modifying medication treatment plans which were not submitted for review in the individual's ISP. The agency needs to ensure that treatment plans are submitted for review by the ISP team.
L68	Expenditures of individual's funds are made only for purposes that directly benefit the individual.	Four of seven individuals' funds reviewed had issues identified with funds being used for items which did not directly benefit the individuals. The agency needs to ensure that individual's funds are used only for items which directly benefit each individual and do not fall under the purview of health insurance or agency related maintenance.
L88	Services and support strategies identified and agreed upon in the ISP for which the provider has designated responsibility are being implemented.	For three individuals, documentation systems to capture ISP objective data were not effective in indicating whether each person was working towards their ISP objective as specified in the ISP Provider Support Strategy. The agency needs to ensure that strategies for objective obtainment are implemented as detailed in Support Strategies and that data collection systems allow for measurable data to be collected to indicate whether progress is being made.
L91	Incidents are reported and reviewed as mandated by regulation.	At two of three locations surveyed, incident reports were not generated and submitted within the required HCSIS time frames. The agency needs to ensure all incident reports are generated and submitted by the required HCSIS due dates.

Employment/Day Areas Needing Improvement on Standards not met/Follow-up to occur:

Indicator #	Indicator	Area Needing Improvement
L9	Individuals are able to utilize equipment and machinery safely.	At one of three locations, there was no evidence that individuals had been thoroughly trained to utilize the industrial kitchen equipment safely. The agency needs to ensure that each individual is fully assessed and this assessment of safety skills and supports needs detailed in a written plan. Guidance, supervision, support, review of safety precautions, and training should then be provided to any individual assessed to need support to utilize equipment safely.

Employment/Day Areas Needing Improvement on Standards not met/Follow-up to occur:

Indicator #	Indicator	Area Needing Improvement
L18	All other floors above grade have one means of egress and one escape route on each floor leading to grade.	The agency has a roof top garden utilized by individuals to grow plants and vegetables during the spring and summer months. This level of the building does not have the required number of means of escape or egress to grade. The agency needs to ensure there is at least one means of egress and one means of escape to grade from each floor/level used by individuals.
L55	Informed consent is obtained from individuals or their guardians when required; Individuals or their guardians know that they have the right to withdraw consent.	For one individual, the photograph consent in place lacked specificity and included varying purposes for use. The agency needs to ensure that consent for use of photographs and other media information is secured only when the need arises, and is specific to each image, intended audience and distribution platform.
L91	Incidents are reported and reviewed as mandated by regulation.	At one of three locations surveyed, one incident report was not generated and submitted within the required HCSIS time frames. The agency needs to ensure all incident reports are generated and submitted by the required HCSIS due dates.

CERTIFICATION FINDINGS

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	6/6	0/6	
Residential and Individual Home Supports			
TOTAL			
Certified			

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	6/6	0/6	
Employment and Day Supports	15/21	6/21	
Employment Support Services	15/21	6/21	
TOTAL	21/27	6/27	78%
Certified with Progress Report			

Employment Support Services- Areas Needing Improvement on Standards not met:

Indicator #	Indicator	Area Needing Improvement
C26	Career planning includes an analysis of how an individual's entitlements can be managed in a way that allows them to work successfully in the community.	None of the four individuals had a completed analysis as to how their entitlements could be managed in a manner that would allow them to work successfully in the community. The agency needs to ensure that it conducts a complete analysis of how each person's entitlements can be managed in a manner that allows them to successfully work in the community.
C27	Individuals and families are encouraged and supported to understand the benefits of integrated employment.	Two of four individuals were not working regularly nor were they engaged in the process of seeking employment opportunities in the future. There was no evidence that the agency was actively working with these individuals or their families to further their understanding of the benefits of integrated employment. The agency needs to engage individuals and their families and share information through a variety of means to educate all regarding the advantages of integrated community based employment.

Employment Support Services- Areas Needing Improvement on Standards not met:

Indicator #	Indicator	Area Needing Improvement
C30	Individuals are supported to work in integrated job settings.	Three of four individuals did not have positions of competitive employment in integrated community settings. The agency needs to ensure that they support individuals to obtain employment opportunities that are fully integrated and non-congregated.
C33	Employee benefits and rights are clearly explained to the individual.	For all four individuals, there was no evidence that their rights and benefits as employees of the agency were presented and explained to them. The agency needs to ensure that when individuals become employees of companies (Bass River or community based companies) they receive information regarding their benefits and rights.
C34	The agency provides the optimal level of support to promote success with a specific plan for minimizing supports.	For three individuals, there were no clear plans addressing support needs in potential or actual places of employment with regard to fading supports. The agency needs to ensure that assessment of individuals' includes the formulation of plans and strategies to reduce supports over time.
C35	Individuals are given feedback on job performance by their employer.	For all four individuals, there was no evidence of them receiving feedback on job performance by their employer, either the agency itself for those on agency payroll or community based employers where applicable. The agency needs to ensure that all individuals receive job performance feedback via a delivery mechanism that meets their individual communication style and unique learning needs.

MASTER SCORE SHEET LICENSURE

Organizational: BASS RIVER DAY ACTIVITY

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
Ⓡ L2	Abuse/neglect reporting	3/4	Met(75.00 %)
L3	Immediate Action	8/8	Met
L4	Action taken	5/5	Met
L48	HRC	1/1	Met
L65	Restraint report submit	1/1	Met
L66	HRC restraint review	1/1	Met
L74	Screen employees	4/4	Met
L75	Qualified staff	3/3	Met
L76	Track trainings	16/16	Met
L83	HR training	13/16	Met(81.25 %)

Residential and Individual Home Supports:

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L1	Abuse/neglect training	I	7/7						7/7	Met
L5	Safety Plan	L	3/3						3/3	Met
R L6	Evacuation	L	3/3						3/3	Met
L7	Fire Drills	L	3/3						3/3	Met
L8	Emergency Fact Sheets	I	6/7						6/7	Met (85.71 %)
L9	Safe use of equipment	L	3/3						3/3	Met
L10	Reduce risk interventions	I	4/4						4/4	Met
R L11	Required inspections	L	3/3						3/3	Met
R L12	Smoke detectors	L	3/3						3/3	Met
R L13	Clean location	L	3/3						3/3	Met
L14	Site in good repair	L	3/3						3/3	Met
L15	Hot water	L	3/3						3/3	Met
L16	Accessibility	L	3/3						3/3	Met
L17	Egress at grade	L	3/3						3/3	Met
L18	Above grade egress	L	1/1						1/1	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L19	Bedroom location	L	3/3						3/3	Met
L20	Exit doors	L	3/3						3/3	Met
L21	Safe electrical equipment	L	3/3						3/3	Met
L22	Well-maintained appliances	L	3/3						3/3	Met
L23	Egress door locks	L	3/3						3/3	Met
L24	Locked door access	L	3/3						3/3	Met
L25	Dangerous substances	L	3/3						3/3	Met
L26	Walkway safety	L	3/3						3/3	Met
L28	Flammables	L	3/3						3/3	Met
L29	Rubbish/combustibles	L	3/3						3/3	Met
L30	Protective railings	L	3/3						3/3	Met
L31	Communication method	I	7/7						7/7	Met
L32	Verbal & written	I	7/7						7/7	Met
L33	Physical exam	I	6/7						6/7	Met (85.71 %)

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L34	Dental exam	I	6/7						6/7	Met (85.71 %)
L35	Preventive screenings	I	4/6						4/6	Not Met (66.67 %)
L36	Recommended tests	I	7/7						7/7	Met
L37	Prompt treatment	I	7/7						7/7	Met
℞ L38	Physician's orders	I	7/7						7/7	Met
L39	Dietary requirements	I	7/7						7/7	Met
L40	Nutritional food	L	3/3						3/3	Met
L41	Healthy diet	L	3/3						3/3	Met
L42	Physical activity	L	3/3						3/3	Met
L43	Health Care Record	I	7/7						7/7	Met
L44	MAP registration	L	3/3						3/3	Met
L45	Medication storage	L	3/3						3/3	Met
℞ L46	Med. Administration	I	7/7						7/7	Met
L49	Informed of human rights	I	7/7						7/7	Met
L50	Respectful Comm.	L	3/3						3/3	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L51	Possessions	I	7/7						7/7	Met
L52	Phone calls	I	7/7						7/7	Met
L53	Visitation	I	7/7						7/7	Met
L54	Privacy	L	2/3						2/3	Not Met (66.67 %)
L56	Restrictive practices	I	0/2						0/2	Not Met (0 %)
L60	Data maintenance	I	2/2						2/2	Met
L61	Health protection in ISP	I	5/6						5/6	Met (83.33 %)
L62	Health protection review	I	0/6						0/6	Not Met (0 %)
L63	Med. treatment plan form	I	7/7						7/7	Met
L64	Med. treatment plan rev.	I	5/7						5/7	Not Met (71.43 %)
L67	Money mgmt. plan	I	7/7						7/7	Met
L68	Funds expenditure	I	3/7						3/7	Not Met (42.86 %)
L69	Expenditure tracking	I	6/7						6/7	Met (85.71 %)
L70	Charges for care calc.	I	7/7						7/7	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L71	Charges for care appeal	I	7/7						7/7	Met
L77	Unique needs training	I	7/7						7/7	Met
L78	Restrictive Int. Training	L	1/1						1/1	Met
L80	Symptoms of illness	L	3/3						3/3	Met
L81	Medical emergency	L	3/3						3/3	Met
L82	Medication admin.	L	3/3						3/3	Met
L84	Health protect. Training	I	6/6						6/6	Met
L85	Supervision	L	3/3						3/3	Met
L86	Required assessments	I	5/6						5/6	Met (83.33 %)
L87	Support strategies	I	5/6						5/6	Met (83.33 %)
L88	Strategies implemented	I	4/7						4/7	Not Met (57.14 %)
L90	Personal space/bedroom privacy	I	7/7						7/7	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L91	Incident management	L	1/3						1/3	Not Met (33.33 %)
#Std. Met/# 71 Indicator									63/71	
Total Score									73/81	
									90.12%	

Employment and Day Supports:

Ind. #	Ind.	Loc. or Indiv.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L1	Abuse/neglect training	I	4/4		4/4	8/8	Met
L5	Safety Plan	L	1/1		1/1	2/2	Met
Ⓡ L6	Evacuation	L	1/1		1/1	2/2	Met
L7	Fire Drills	L	1/1		1/1	2/2	Met
L8	Emergency Fact Sheets	I	4/4		4/4	8/8	Met
L9	Safe use of equipment	L	1/2		1/1	2/3	Not Met (66.67 %)
Ⓡ L11	Required inspections	L	1/1		1/1	2/2	Met
Ⓡ L12	Smoke detectors	L	1/1		1/1	2/2	Met
Ⓡ L13	Clean location	L	1/1		1/1	2/2	Met
L14	Site in good repair	L	1/1		1/1	2/2	Met
L15	Hot water	L	1/1		1/1	2/2	Met
L16	Accessibility	L	1/1		1/1	2/2	Met
L17	Egress at grade	L	1/1		1/1	2/2	Met
L18	Above grade egress	L			0/1	0/1	Not Met (0 %)

Ind. #	Ind.	Loc. or Indiv.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L20	Exit doors	L	1/1		1/1	2/2	Met
L21	Safe electrical equipment	L	1/1		1/1	2/2	Met
L22	Well- maintained appliances	L	1/1		1/1	2/2	Met
L25	Dangerous substances	L	1/1		1/1	2/2	Met
L26	Walkway safety	L	1/1		1/1	2/2	Met
L28	Flammables	L	1/1		1/1	2/2	Met
L29	Rubbish/comb ustibles	L	1/1		1/1	2/2	Met
L30	Protective railings	L			1/1	1/1	Met
L31	Communicatio n method	I	4/4		4/4	8/8	Met
L32	Verbal & written	I	4/4		4/4	8/8	Met
L37	Prompt treatment	I	4/4		4/4	8/8	Met
℞ L38	Physician's orders	I			3/3	3/3	Met
L39	Dietary requirements	I	1/1			1/1	Met
L44	MAP registration	L	1/1		1/1	2/2	Met
L45	Medication storage	L			1/1	1/1	Met
℞ L46	Med. Administration	I	1/1		3/3	4/4	Met
L49	Informed of human rights	I	4/4		4/4	8/8	Met
L50	Respectful Comm.	L	2/2		1/1	3/3	Met
L51	Possessions	I	4/4		4/4	8/8	Met
L52	Phone calls	I	4/4		4/4	8/8	Met
L54	Privacy	L	2/2		1/1	3/3	Met
L55	Informed consent	I	0/1			0/1	Not Met (0 %)

Ind. #	Ind.	Loc. or Indiv.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L56	Restrictive practices	I			1/1	1/1	Met
L61	Health protection in ISP	I			3/3	3/3	Met
L62	Health protection review	I			3/3	3/3	Met
L63	Med. treatment plan form	I			1/1	1/1	Met
L64	Med. treatment plan rev.	I			1/1	1/1	Met
L77	Unique needs training	I	4/4		4/4	8/8	Met
L78	Restrictive Int. Training	L			1/1	1/1	Met
L79	Restraint training	L			1/1	1/1	Met
L80	Symptoms of illness	L	2/2		1/1	3/3	Met
L81	Medical emergency	L	2/2		1/1	3/3	Met
L82	Medication admin.	L			1/1	1/1	Met
L84	Health protect. Training	I			2/2	2/2	Met
L85	Supervision	L	2/2		1/1	3/3	Met
L86	Required assessments	I	3/3		4/4	7/7	Met
L87	Support strategies	I	4/4		3/4	7/8	Met (87.50 %)
L88	Strategies implemented	I	4/4		4/4	8/8	Met
L91	Incident management	L	2/2		0/1	2/3	Not Met (66.67 %)
#Std. Met/# 53 Indicator						49/53	
Total Score						59/63	
						93.65%	

MASTER SCORE SHEET CERTIFICATION

Certification - Planning and Quality Management

Indicator #	Indicator	Met/Rated	Rating
C1	Provider data collection	1/1	Met
C2	Data analysis	1/1	Met
C3	Service satisfaction	1/1	Met
C4	Utilizes input from stakeholders	1/1	Met
C5	Measure progress	1/1	Met
C6	Future directions planning	1/1	Met

Employment Support Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	4/4	Met
C8	Family/guardian communication	4/4	Met
C22	Explore job interests	4/4	Met
C23	Assess skills & training needs	4/4	Met
C24	Job goals & support needs plan	4/4	Met
C25	Skill development	4/4	Met
C26	Benefits analysis	0/4	Not Met (0 %)
C27	Job benefit education	2/4	Not Met (50.0 %)
C28	Relationships w/businesses	2/2	Met
C29	Support to obtain employment	3/4	Met
C30	Work in integrated settings	1/4	Not Met (25.00 %)
C31	Job accommodations	1/1	Met
C32	At least minimum wages earned	2/2	Met
C33	Employee benefits explained	0/4	Not Met (0 %)
C34	Support to promote success	1/4	Not Met (25.00 %)
C35	Feedback on job performance	0/4	Not Met (0 %)
C36	Supports to enhance retention	1/1	Met
C37	Interpersonal skills for work	4/4	Met
C47	Transportation to/ from community	4/4	Met

Employment Support Services

Indicator #	Indicator	Met/Rated	Rating
C51	Ongoing satisfaction with services/ supports	4/4	Met
C54	Assistive technology	4/4	Met