



**PROVIDER REPORT
FOR**

**BEAVERBROOK STEP INC
85 Main Street, 2nd Fl.
Watertown, MA 02472**

November 02, 2023

Version

Public Provider Report

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

SUMMARY OF OVERALL FINDINGS

Provider BEAVERBROOK STEP INC

Review Dates 8/28/2023 - 9/1/2023

**Service Enhancement
Meeting Date** 9/18/2023

Survey Team Raymond Edi-Osagie
Cheryl Hampton
Lisa MacPhail (TL)
Melanie Cruz
David Bullard

Citizen Volunteers

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	9 location(s) 10 audit (s)	Targeted Review	DDS 16/17 Provider 72 / 72 88 / 89 2 Year License 09/18/2023-09/18/2025		DDS 0 / 0 Provider 45 / 47 45 / 47 Certified 09/18/2023 - 09/18/2025
Residential Services	6 location(s) 6 audit (s)			DDS Targeted Review	19 / 20
Individual Home Supports	3 location(s) 4 audit (s)			DDS Targeted Review	20 / 21
Planning and Quality Management (For all service groupings)				No Review	No Review Conducted

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	5 location(s) 16 audit (s)	Targeted Review	DDS 12/12 Provider 58 / 59 70 / 71 2 Year License 09/18/2023-09/18/2025		DDS 0 / 0 Provider 42 / 42 42 / 42 Certified 09/18/2023 - 09/18/2025
Community Based Day Services	4 location(s) 9 audit (s)			DDS Targeted Review	15 / 15
Employment Support Services	1 location(s) 7 audit (s)			DDS Targeted Review	21 / 21
Planning and Quality Management (For all service groupings)				No Review	No Review Conducted

EXECUTIVE SUMMARY :

Beaverbrook STEP is a multi-service, not for profit, community services organization based in Watertown Massachusetts. The agency offers twenty-four-hour residential, individual home supports, community-based day services (CBDS), and employment supports to adults with Developmental and Intellectual Disabilities in Watertown and surrounding cities and towns in MA. Additionally, Beaverbrook STEP offers family support services and a guardianship program.

For this 2023 survey, Beaverbrook STEP was offered, and elected to perform a provider self-assessment of all licensing and certification indicators. The Department of Developmental Services (DDS) Metro Office of Quality Enhancement conducted a targeted review of licensing indicators in both its residential and day services groupings. The scope of the DDS reviews covered licensing indicators that were not met at the agency's last survey, all critical indicators, as well as new and changed indicators. This report combines the DDS targeted review findings and Beaverbrook STEP's reporting on its self-assessment findings and process.

Across both residential and day service groupings, Beaverbrook STEP's commitment to the safety and well-being of people served was evident. Environmental inspections were conducted as required, emergency back-up plans were in place, and individuals were supported to evacuate in under 2.5 minutes during emergency practice drills. The agency's residential and day sites were clean, bright, and welcoming, and hot water temperatures measured within acceptable range for the service types. In the area of healthcare, within both service groupings, medications were administered according to MAP policy by certified staff. Physician's orders and treatment protocols were also current and implemented as ordered. In the area of the ISP, provider support strategies were submitted within the required timeframe. All individuals were thoughtfully assessed as to their potential needs for assistive technology, and staff were trained on the use of the devices utilized by the individuals served.

The survey revealed one area where focused attention is needed from the agency. Incident reports were submitted and/or finalized beyond the required timelines in HCSIS.

Beaverbrook STEP met 99% of licensing indicators in its residential services grouping, and 99% of licensing indicators in its day/employment service groupings. The agency is therefore, licensed for both service groupings. The agency scored 96% for certification indicators in the Residential service grouping and 100% for certification indicators in the day/employment service grouping. The agency is thus certified for both service groupings. The agency will conduct its own follow-up on licensing indicators that were not met in both service groupings within 60 days of the service enhancement meeting and submit the results to the DDS Metro Office of Quality Enhancement.

Description of Self Assessment Process:

Beaverbrook STEP is a private, SDP-Certified Women Non-Profit organization committed to serving children, adults, and elders with intellectual, developmental and related disabilities. Incorporated in 1973, STEP's mission focuses on empowering individuals to make their own personal choices and decisions about their lives in order to achieve full community inclusion.

As we proudly celebrate our 50th year, Beaverbrook STEP continues to grow and develop, forging new pathways for people with disabilities to participate in and become one with the community at large. With an annual budget of \$24 million dollars, STEP currently serves 275 children, adults, and elders with intellectual and developmental disabilities, including individuals with autism spectrum disorder (ASD), neurological/ brain injuries, Alzheimer's disease, physical disabilities, as well as medical, mental health and behavioral diagnoses. We employ over 425 full and part time direct care professionals, managers and clinicians who provide comprehensive, self-determined and highly acclaimed community-based living & housing supports, day services, employment training, recreation & leisure, specialized services, advocacy and corporate guardianship services.

Beaverbrook STEP's multi-year visionary plan, Advancing Real Lives, focuses on the design and creation of person-centered and self-directed services for the individuals/families we serve. Our goal is to develop innovative services that emphasize full community inclusion, as well as full optimization of each person's independence and autonomy, including:

Choices for a living and work environment and personal supports that follow community rule, promote community access and support individual preferences.

Social inclusion through meaningful friendships and an active community life.

Personal control over activities, schedules and decision making; and

Individualized opportunities for growth and development through mentoring, education, and learning.

Advancing Real Lives implements a unique self-determination process developed together with our governing Board of Directors, the Diversity and Equity Committee, self-advocates, staff, community business partners, funding sources, family members and volunteers. This process not only models how to transition traditionally delivered service models to more self-determined and self-directed service models (in-home and supported living, Agency with Choice, shared living, family supports, respite, and specialized services), but also serves as a model for innovative home ownership and other creative living options. Additionally, the self-determination process is key to providing personalized, comprehensive, and individualized services for each person served in STEP's innovative Community Based Day Services and Employment Training program.

Quality Assurance Process:

Beaverbrook STEP's Quality Assurance Team conducts in-depth reviews of all services and all aspects of their systems to assess their continued suitability, adequacy, and efficiency. Our all-inclusive audit tools were developed using the current licensing and certification indicators and are continuously updated and modified as new indicators are introduced. These comprehensive reviews include regular site visits, clinical, medical, financial, legal, and training documentation audits, individual specific support plans, and interviews with staff and individuals and physical site inspections. As the QA team conducts quarterly audits of all programs, issues identified in QA23.1 are checked for resolution during QA23.2.

To maintain the highest level of standards in our MAP and Healthcare systems, Beaverbrook STEP has established a multi-team approach to its auditing process. STEP currently employs six RNs and three LPNs to provide all required and enhanced medical trainings to our staff. They attend medical appointments, assisting numbers of individuals with diverse health care needs, and provide on call 24/7 support to address all medical questions. In addition to QA audits, The Beaverbrook STEP nurses use comprehensive tools to complete a full review of all MAP systems periodically for each site. The RNs audit each individual's medications, doctors' orders, medical section of the confidential file. Medication Treatment Plans, Supportive and Health Related Protective Devices, and health care records are also reviewed. Once the audit has been completed, the program management team and QA Team receive a copy of the Medication Review along with any recommendations for the site.

STEP's Maintenance Department strives to provide proactive and emergency services to achieve maintenance goals. The team is led by the Maintenance Director, an experienced state certified and licensed general contractor overseen by the Executive Director. His team also includes two other seasoned professionals, plus valued trade providers committed to site repairs, renovations, and individualized enhancements. The Executive Administrative Assistant is the communication hub for all maintenance requests in the organization. Apart from day-to-day requests, each program completes a facilities checklist and sends it to the Executive Administrative Assistant each month. She retains a journal of all requests and progress. Emergencies are handled immediately and effectively. The Maintenance Department certifies all local, state, federal and ADA regulatory compliance. It schedules annual inspections including those needed for heating, hot water, fire alarm / suppressant systems, fire extinguishers, CO and smoke detectors and emergency lighting. Twice annually the Maintenance Team, state Section 8 inspectors and/or HUD REAC contractors inspect all home, and day service locations. They utilize both Mass Housing's inspection tool and HUD's Housing Quality Standards instrument. Results are reviewed and work is scheduled. Our Executive Administrative Assistant coordinates all aspects of vehicle maintenance including repairs, emergencies, safety protocols, inspections, and insurance coverage.

The oversight for Positive Behavioral Supports, and Behavior Modifying Medication Assessments is managed by Beaverbrook STEP's expanded professional Behavioral and Social Work teams. These fully-licensed clinicians along with the PBS Leadership Team continue to work together as practitioners to ensure and advance the emotional, psychological, and social well-being of the individuals.

Financial reviews continue to be part of QA Department's quarterly audits. It encompasses reviews of each individual's transaction records, all monies, receipts and banking documents, financial management plans, consents and shared expense sign offs. The Finance Department oversees and ensures that Rep-Payee, Rent and annual Charges for Care determinations have been prepared and sent to all involved parties. Annual financial audits completed by an external accounting firm and monthly Board of Directors Meetings are also part of the agency's overarching financial oversight. STEP has developed a comprehensive training curriculum which encompasses the mandatory DDS trainings, certifications and agency and individual specific trainings. These training needs are met through several means, including agency and site orientation, in-service instruction, formal trainings offered by Beaverbrook STEP Directors and professionals, the Department of Development Services, and statewide courses and seminars. An agency-wide Mandatory Training Tracker updated continually by the QA team documents that all employees receive and/or renew their competencies annually or as required. All program specific trainings are kept at the sites to ensure compliance with DDS policies and procedures. The annual performance evaluation includes an employee self-assessment, an individual assessment, and finally a comprehensive performance evaluation which synthesizes input gathered from regular supervisions and the individual and self-assessments.

Accumulated data from these reviews are passed on to all site directors and supervisors with the expectation that issues will be corrected in a timely manner and reported back to the QA team within 30-days.. Agency wide trends recognized because of this QA process are discussed with the Senior Leadership Team including STEP's Executive Director. Additionally, in a continued effort to evaluate, maintain, and improve the agency's quality standards and to comply with our licensure, the QA Team created the bi-annual 8 Critical Indicator Self-Assessment Process. This process is used as a learning tool for all directors to familiarize themselves with these indicators and apply them to everyday operations at their sites. This self-assessment process is utilized to audit all individual records, medical and financial systems, and maintenance requirements of their sites.

Once areas for improvement have been identified, we implement quality improvement strategies for individual and/or agency-wide systemic change. This may include additional staff trainings, implementing new policies and procedures, or making changes to our supports and services.

QUALITY ASSURANCE TRENDS: QA22/23 audit results outlined a number of organizational trends that are described below.

Beaverbrook STEP's Human Rights Committee (HRC) comprised of individuals receiving services, licensed social workers, legal and medical personnel, and community advocates is an effective and active part of our agency-wide regulatory oversight. The HRC meets quarterly to discuss and review all

Incident and/or Restraint Reports, MOR's, DPPC Investigations, Behavioral Treatment Plans, Supportive and Protective Devices, Behavior Modifying Medications and all restrictive plans in place at home or at day service. All staff, individuals and HRC members receive annual Human Rights Training and all new employees complete Basic Human Rights, DPPC and Mandated Reporter Training prior to employment. In 2022/2023 the new DDS Mandated Reporter material was included, and all employees were trained as part of our Annual HR/DPPC training. Informational brochures were mailed annually to families/guardians. All human rights issues or concerns derived from HRC meetings, site visits or individual reports are directed to the HRC Coordinator and to Senior and Executive leadership for resolution.

The adoption of assistive technology (AT) has become imperative for Beaverbrook STEP to ensure that individuals with disabilities can lead independent and fulfilling lives. The results of the QA 22 reviews prompted us to create an AT Committee tasked with ensuring that any barriers to implementing individual specific assistive technology are mitigated. A new assessment process and outside resources were introduced with all staff receiving training. Through these measures, STEP has been able to continue to improve its service delivery to each individual regarding their assistive technology needs. The members of the AT Committee continue to attend AT fairs and trainings and provide our staff and individuals with up-to-date information concerning emerging technology.

STEP's emergency backup procedures have been effective in identifying and responding to program and individual issues. Beaverbrook STEP utilizes HCSIS to track and report incidents and investigations, but also created internal systems to assist in timely communication and dissemination of information. Our administrator on-call (AOC), nursing on-call (NOC), emergency reporting procedures, daily status reports from all programs, and daily nursing updates help to facilitate a timely review of all issues. These systems allow the agency to evaluate our practices, discuss trends, and help mitigate the occurrence of similar incidents.

Beaverbrook STEP utilizes data from our staff and house meetings, individual satisfaction surveys, and feedback from staff, families, guardians, Board of Directors, and other stakeholders to assess and monitor the quality of our services. The data collected through these processes allow our team to accurately track programmatic successes, note agency-wide trends, identify areas needing improvement, create novel enhancements, and inform our Strategic Plan.

Results:

Beaverbrook STEP's 2023 Provider Self-Assessment Process was conducted by the QA Department, four Senior Directors and our Nursing Team during the months of July and August. Six (6) Residential Programs, three (3) Individual Support service recipients, four (4) CBDS Programs, and three (3) Employment service recipients were randomly selected and reviewed using our all-inclusive QA 22-23 Audit tools. All reviews were conducted in person with the directors, individuals, and available staff. Individual records, medical, financial, and legal paperwork, physical site inspection walkthroughs and maintenance requirements were reviewed and rated using applicable Licensure and Certification indicators. Organizationally the 8 critical indicators were met across all service categories. A MET status was achieved with the remainder of the Licensure and Certification indicators except for the following areas: L87 Support Strategies: HCSIS reports determined that the overall percentage of timely submissions for our sample for L87 ISP Progress Summaries was 9 out of 9 (100%) for Residential and IHS Services (MET) and 5 out of 7 (71.4%) for CBDS Services (NOT MET). L91 Incident Management: Review of the sample data from HCSIS submissions indicated 3 out of 9 (66.6%) Residential/IHS Service programs had incident reports submitted outside of the required timelines. Day and Employment Services received a MET rating for this indicator across the sample. C12 Intimacy: The sample audit revealed that a sexuality assessment was present for each individual selected, but the recommendations for further education and training were not implemented consistently. This resulted in a rating of (NOT MET) for this indicator.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	10/10	0/10	
Residential and Individual Home Supports	78/79	1/79	
Residential Services Individual Home Supports			
Critical Indicators	8/8	0/8	
Total	88/89	1/89	99%
2 Year License			
# indicators for 60 Day Follow-up		1	

	Met / Rated	Not Met / Rated	% Met
Organizational	10/10	0/10	
Employment and Day Supports	60/61	1/61	
Community Based Day Services Employment Support Services			
Critical Indicators	8/8	0/8	
Total	70/71	1/71	99%
2 Year License			
# indicators for 60 Day Follow-up		1	

**Residential Areas Needing Improvement on Standards not met/Follow-up to occur:
From DDS review:**

Indicator #	Indicator	Area Needing Improvement
L91	Incidents are reported and reviewed as mandated by regulation.	At six of nine sites, incident reports were not submitted and/or finalized within the required timelines in HCSIS. Incident reports must be submitted and finalized within the required timelines in HCSIS.

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

Indicator #	Indicator	Issue identified	Action planned to address
L91	Incidents are reported and reviewed as mandated by regulation.	Incident reports not submitted or finalized within the required timelines.	<p>During the Self-Assessment sample of 6 residential programs and 4 Individual Support service recipients, it was found that L91 was rated as NOT MET. Across the sample, 3 of 9 (66.6%) programs were found to have incident reports submitted and or finalized outside of the timelines established by DDS.</p> <p>Through further analysis, it was determined that the number of incident reports generated across the year, coupled with the regulatory responsibility to report within regulated timelines, was not shared by enough Senior level managers. In response to this, Beaverbrook STEP's HCSIS Coordinator has been providing enhanced training to all Senior level managers allowing them to complete the incident report process through finalization. During the assessment, it was found that over 92% of all incident reports were unexpected hospital visits, both ER and medical hospitalizations. One of the issues we discovered in finalization of these reports was the time lag in obtaining the discharge summary from the site level manager. This time lag delayed the synthesis of the information for the final report. By allowing for the input of this information by Senior managers without having to scan and send the discharge summary to the HCSIS Coordinator, it is hoped that the information flow will improve, and the reports will be entered in a timely fashion. The HCSIS Coordinator will still review and approve the finalized reports and communicate with Area Office Program</p>

			<p>Monitors. Finally, other incident types, including major incidents, MOR's and restraints are reliably submitted within the required timelines. It is hoped that the outcome of these changes will result in a minimum benchmark of 80% on-time submissions across all programs. The results obtained through this change will be tracked by Quality Assurance and will be reported in the 60-day follow-up report.</p>
--	--	--	---

CERTIFICATION FINDINGS

	Reviewed By	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management		6/6	0/6	
Residential and Individual Home Supports	DDS 0/0 Provider 39/41	39/41	2/41	
Individual Home Supports	DDS 0/0 Provider 20/21	20/21	1/21	
Residential Services	DDS 0/0 Provider 19/20	19/20	1/20	
Total		45/47	2/47	96%
Certified				

	Reviewed By	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management		6/6	0/6	
Employment and Day Supports	DDS 0/0 Provider 36/36	36/36	0/36	
Community Based Day Services	DDS 0/0 Provider 15/15	15/15	0/15	
Employment Support Services	DDS 0/0 Provider 21/21	21/21	0/21	
Total		42/42	0/42	100%
Certified				

Individual Home Supports- Areas Needing Improvement on Standards not met From Provider review:

Indicator #	Indicator	Issues identified	Action planned to address
C12	Individuals are supported to explore, define, and express their need for intimacy and companionship.	The sample audit revealed that a sexuality assessment was present for each individual selected, but the recommendations for further education and training were not implemented consistently. This resulted in a rating of (NOT MET) for this indicator.	Recently, Beaverbrook STEP has identified the need for enhanced sexuality training for our staff and individuals. A member of STEP's leadership team has become certified as a Relationship and Sexuality trainer through evaluates. This certified trainer is developing a curriculum using elevates training materials to address the sexuality and relationship needs of our individuals. Through this enhanced training series, it is hoped that all individuals will receive the follow-up training and education identified in the initial sexuality assessment resulting in a MET designation for this indicator.

Residential Services- Areas Needing Improvement on Standards not met From Provider review:

Indicator #	Indicator	Issues identified	Action planned to address
C12	Individuals are supported to explore, define, and express their need for intimacy and companionship.	The sample audit revealed that a sexuality assessment was present for each individual selected, but the recommendations for further education and training were not implemented consistently. This resulted in a rating of (NOT MET) for this indicator.	Recently, Beaverbrook STEP has identified the need for enhanced sexuality training for our staff and individuals. A member of STEP's leadership team has become certified as a Relationship and Sexuality trainer through evaluates. This certified trainer is developing a curriculum using elevates training materials to address the sexuality and relationship needs of our individuals. Through this enhanced training series, it is hoped that all individuals will receive the follow-up training and education identified in the initial sexuality assessment resulting in a MET designation for this indicator.

MASTER SCORE SHEET LICENSURE

Organizational: BEAVERBROOK STEP INC

Indicator #	Indicator	Reviewed by	Met/Rated	Rating(Met,Not Met,NotRated)
☐ L2	Abuse/neglect reporting	DDS	13/13	Met
L3	Immediate Action	Provider	-	Met
L4	Action taken	Provider	-	Met
L48	HRC	Provider	-	Met
L65	Restraint report submit	Provider	-	Met
L66	HRC restraint review	Provider	-	Met
L74	Screen employees	Provider	-	Met
L75	Qualified staff	Provider	-	Met
L76	Track trainings	Provider	-	Met
L83	HR training	Provider	-	Met

Residential and Individual Home Supports:

Ind. #	Ind.	Loc. or Individ.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L1	Abuse/neglect training	I	Provider	-	-			-	-	-	Met
L5	Safety Plan	L	Provider	-	-			-	-	-	Met
☐ L6	Evacuation	L	DDS	6/6	3/3					9/9	Met
L7	Fire Drills	L	Provider	-	-			-	-	-	Met
L8	Emergency Fact Sheets	I	Provider	-	-			-	-	-	Met
L9 (07/21)	Safe use of equipment	I	Provider	-	-			-	-	-	Met
L10	Reduce risk interventions	I	Provider	-	-			-	-	-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
Ⓡ L11	Required inspections	L	DDS	6/6	3/3					9/9	Met
Ⓡ L12	Smoke detectors	L	DDS	6/6	3/3					9/9	Met
Ⓡ L13	Clean location	L	DDS	6/6	3/3					9/9	Met
L14	Site in good repair	L	Provider	-	-			-	-	-	Met
L15	Hot water	L	DDS	6/6	2/3					8/9	Met (88.89 %)
L16	Accessibility	L	Provider	-	-			-	-	-	Met
L17	Egress at grade	L	Provider	-	-			-	-	-	Met
L18	Above grade egress	L	Provider	-	-			-	-	-	Met
L19	Bedroom location	L	Provider	-	-			-	-	-	Met
L20	Exit doors	L	Provider	-	-			-	-	-	Met
L21	Safe electrical equipment	L	Provider	-	-			-	-	-	Met
L22	Well-maintained appliances	L	Provider	-	-			-	-	-	Met
L23	Egress door locks	L	DDS		2/2					2/2	Met
L24	Locked door access	L	DDS		3/3					3/3	Met
L25	Dangerous substances	L	Provider	-	-			-	-	-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L26	Walkway safety	L	Provider	-	-			-	-	-	Met
L28	Flammables	L	Provider	-	-			-	-	-	Met
L29	Rubbish /combustibles	L	Provider	-	-			-	-	-	Met
L30	Protective railings	L	Provider	-	-			-	-	-	Met
L31	Communication method	I	Provider	-	-			-	-	-	Met
L32	Verbal & written	I	Provider	-	-			-	-	-	Met
L33	Physical exam	I	Provider	-	-			-	-	-	Met
L34	Dental exam	I	Provider	-	-			-	-	-	Met
L35	Preventive screenings	I	Provider	-	-			-	-	-	Met
L36	Recommended tests	I	Provider	-	-			-	-	-	Met
L37	Prompt treatment	I	Provider	-	-			-	-	-	Met
Ⓡ L38	Physician's orders	I	DDS	4/4						4/4	Met
L39	Dietary requirements	I	Provider	-	-			-	-	-	Met
L40	Nutritional food	L	Provider	-	-			-	-	-	Met
L41	Healthy diet	L	Provider	-	-			-	-	-	Met
L42	Physical activity	L	Provider	-	-			-	-	-	Met
L43	Health Care Record	I	Provider	-	-			-	-	-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L44	MAP registration	L	Provider	-	-			-	-	-	Met
L45	Medication storage	L	Provider	-	-			-	-	-	Met
L46	Med. Administration	I	DDS	6/6	2/2					8/8	Met
L47	Self medication	I	Provider	-	-			-	-	-	Met
L49	Informed of human rights	I	Provider	-	-			-	-	-	Met
L50 (07/21)	Respectful Comm.	I	Provider	-	-			-	-	-	Met
L51	Possessions	I	Provider	-	-			-	-	-	Met
L52	Phone calls	I	Provider	-	-			-	-	-	Met
L53	Visitation	I	Provider	-	-			-	-	-	Met
L54 (07/21)	Privacy	I	Provider	-	-			-	-	-	Met
L55	Informed consent	I	Provider	-	-			-	-	-	Met
L56	Restrictive practices	I	Provider	-	-			-	-	-	Met
L57	Written behavior plans	I	Provider	-	-			-	-	-	Met
L58	Behavior plan component	I	Provider	-	-			-	-	-	Met
L59	Behavior plan review	I	Provider	-	-			-	-	-	Met
L60	Data maintenance	I	Provider	-	-			-	-	-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L61	Health protection in ISP	I	Provider	-	-			-	-	-	Met
L62	Health protection review	I	Provider	-	-			-	-	-	Met
L67	Money mgmt. plan	I	Provider	-	-			-	-	-	Met
L68	Funds expenditure	I	Provider	-	-			-	-	-	Met
L69	Expenditure tracking	I	Provider	-	-			-	-	-	Met
L70	Charges for care calc.	I	Provider	-	-			-	-	-	Met
L71	Charges for care appeal	I	Provider	-	-			-	-	-	Met
L77	Unique needs training	I	Provider	-	-			-	-	-	Met
L79	Restraint training	L	Provider	-	-			-	-	-	Met
L80	Symptoms of illness	L	Provider	-	-			-	-	-	Met
L81	Medical emergency	L	Provider	-	-			-	-	-	Met
L82	Medication admin.	L	DDS	6/6	3/3					9/9	Met
L84	Health protect. Training	I	Provider	-	-			-	-	-	Met
L85	Supervision	L	Provider	-	-			-	-	-	Met
L86	Required assessments	I	Provider	-	-			-	-	-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L87	Support strategies	I	DDS	6/6	2/2					8/8	Met
L88	Strategies implemented	I	Provider	-	-			-	-	-	Met
L89	Complaint and resolution process	L	Provider	-	-			-	-	-	Met
L90	Personal space/bedroom privacy	I	Provider	-	-			-	-	-	Met
L91	Incident management	L	DDS	2/6	1/3					3/9	Not Met (33.33%)
L93 (05/22)	Emergency back-up plans	I	DDS	6/6	4/4					10/10	Met
L94 (05/22)	Assistive technology	I	DDS	6/6	4/4					10/10	Met
L96 (05/22)	Staff training in devices and applications	I	DDS	6/6	4/4					10/10	Met
L99 (05/22)	Medical monitoring devices	I	DDS	1/1						1/1	Met
#Std. Met/#79 Indicator										78/79	
Total Score										88/89	
										98.88%	

Employment and Day Supports:

Ind. #	Ind.	Loc. or Individ.	Reviewed by	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L1	Abuse/neglect training	I	Provider		-	-	-	Met
L5	Safety Plan	L	Provider		-	-	-	Met
☞ L6	Evacuation	L	DDS	1/1		4/4	5/5	Met
L7	Fire Drills	L	Provider		-	-	-	Met
L8	Emergency Fact Sheets	I	Provider		-	-	-	Met
L9 (07/21)	Safe use of equipment	I	Provider		-	-	-	Met
L10	Reduce risk interventions	I	Provider		-	-	-	Met
☞ L11	Required inspections	L	DDS	1/1		4/4	5/5	Met
☞ L12	Smoke detectors	L	DDS	1/1		4/4	5/5	Met
☞ L13	Clean location	L	DDS	1/1		4/4	5/5	Met
L14	Site in good repair	L	Provider		-	-	-	Met
L15	Hot water	L	Provider		-	-	-	Met
L16	Accessibility	L	Provider		-	-	-	Met
L17	Egress at grade	L	Provider		-	-	-	Met
L18	Above grade egress	L	Provider		-	-	-	Met
L20	Exit doors	L	Provider		-	-	-	Met
L21	Safe electrical equipment	L	Provider		-	-	-	Met
L22	Well-maintained appliances	L	Provider		-	-	-	Met
L25	Dangerous substances	L	Provider		-	-	-	Met
L26	Walkway safety	L	Provider		-	-	-	Met
L28	Flammables	L	Provider		-	-	-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L29	Rubbish/com bustibles	L	Provider		-	-	-	Met
L30	Protective railings	L	Provider		-	-	-	Met
L31	Communicati on method	I	Provider		-	-	-	Met
L32	Verbal & written	I	Provider		-	-	-	Met
L37	Prompt treatment	I	Provider		-	-	-	Met
Ⓡ L38	Physician's orders	I	DDS	4/4		3/3	7/7	Met
L39	Dietary requirements	I	Provider		-	-	-	Met
L44	MAP registration	L	Provider		-	-	-	Met
L45	Medication storage	L	Provider		-	-	-	Met
Ⓡ L46	Med. Administratio n	I	DDS			5/5	5/5	Met
L49	Informed of human rights	I	Provider		-	-	-	Met
L50 (07/21)	Respectful Comm.	I	Provider		-	-	-	Met
L51	Possessions	I	Provider		-	-	-	Met
L52	Phone calls	I	Provider		-	-	-	Met
L54 (07/21)	Privacy	I	Provider		-	-	-	Met
L55	Informed consent	I	Provider		-	-	-	Met
L56	Restrictive practices	I	Provider		-	-	-	Met
L57	Written behavior plans	I	Provider		-	-	-	Met
L58	Behavior plan component	I	Provider		-	-	-	Met
L59	Behavior plan review	I	Provider		-	-	-	Met
L60	Data maintenance	I	Provider		-	-	-	Met
L61	Health protection in ISP	I	Provider		-	-	-	Met

Ind. #	Ind.	Loc. or Individ.	Reviewed by	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L62	Health protection review	I	Provider		-	-	-	Met
L67	Money mgmt. plan	I	Provider		-	-	-	Met
L68	Funds expenditure	I	Provider		-	-	-	Met
L69	Expenditure tracking	I	Provider		-	-	-	Met
L77	Unique needs training	I	Provider		-	-	-	Met
L79	Restraint training	L	Provider		-	-	-	Met
L80	Symptoms of illness	L	Provider		-	-	-	Met
L81	Medical emergency	L	Provider		-	-	-	Met
Ⓡ L82	Medication admin.	L	DDS			4/4	4/4	Met
L84	Health protect. Training	I	Provider		-	-	-	Met
L85	Supervision	L	Provider		-	-	-	Met
L86	Required assessments	I	Provider		-	-	-	Met
L87	Support strategies	I	DDS	5/6		5/5	10/11	Met (90.91 %)
L88	Strategies implemented	I	Provider		-	-	-	Met
L91	Incident management	L	Provider		-	-	-	Not Met
L93 (05/22)	Emergency back-up plans	I	DDS	7/7		9/9	16/16	Met
L94 (05/22)	Assistive technology	I	DDS	7/7		9/9	16/16	Met
L96 (05/22)	Staff training in devices and applications	I	DDS	7/7		9/9	16/16	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L99 (05/22)	Medical monitoring devices	I	Provider		-	-	-	Met
#Std. Met/# 61 Indicator							60/61	
Total Score							70/71	
							98.59%	

MASTER SCORE SHEET CERTIFICATION

Certification - Planning and Quality Management

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

Residential Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C7	Feedback on staff / care provider performance	Provider	-	Met
C8	Family/guardian communication	Provider	-	Met
C9	Personal relationships	Provider	-	Met
C10	Social skill development	Provider	-	Met
C11	Get together w/family & friends	Provider	-	Met
C12	Intimacy	Provider	-	Not Met (0 %)
C13	Skills to maximize independence	Provider	-	Met
C14	Choices in routines & schedules	Provider	-	Met
C15	Personalize living space	Provider	-	Met

Residential Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C16	Explore interests	Provider	-	Met
C17	Community activities	Provider	-	Met
C18	Purchase personal belongings	Provider	-	Met
C19	Knowledgeable decisions	Provider	-	Met
C46	Use of generic resources	Provider	-	Met
C47	Transportation to/ from community	Provider	-	Met
C48	Neighborhood connections	Provider	-	Met
C49	Physical setting is consistent	Provider	-	Met
C51	Ongoing satisfaction with services/ supports	Provider	-	Met
C52	Leisure activities and free-time choices /control	Provider	-	Met
C53	Food/ dining choices	Provider	-	Met

Individual Home Supports

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C7	Feedback on staff / care provider performance	Provider	-	Met
C8	Family/guardian communication	Provider	-	Met
C9	Personal relationships	Provider	-	Met
C10	Social skill development	Provider	-	Met
C11	Get together w/family & friends	Provider	-	Met
C12	Intimacy	Provider	-	Not Met (0 %)
C13	Skills to maximize independence	Provider	-	Met
C14	Choices in routines & schedules	Provider	-	Met
C15	Personalize living space	Provider	-	Met
C16	Explore interests	Provider	-	Met
C17	Community activities	Provider	-	Met
C18	Purchase personal belongings	Provider	-	Met
C19	Knowledgeable decisions	Provider	-	Met
C21	Coordinate outreach	Provider	-	Met
C46	Use of generic resources	Provider	-	Met

Individual Home Supports

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C47	Transportation to/ from community	Provider	-	Met
C48	Neighborhood connections	Provider	-	Met
C49	Physical setting is consistent	Provider	-	Met
C51	Ongoing satisfaction with services/ supports	Provider	-	Met
C52	Leisure activities and free-time choices /control	Provider	-	Met
C53	Food/ dining choices	Provider	-	Met

Community Based Day Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C7	Feedback on staff / care provider performance	Provider	-	Met
C8	Family/guardian communication	Provider	-	Met
C13	Skills to maximize independence	Provider	-	Met
C37	Interpersonal skills for work	Provider	-	Met
C38 (07/21)	Habilitative & behavioral goals	Provider	-	Met
C39 (07/21)	Support needs for employment	Provider	-	Met
C40	Community involvement interest	Provider	-	Met
C41	Activities participation	Provider	-	Met
C42	Connection to others	Provider	-	Met
C43	Maintain & enhance relationship	Provider	-	Met
C44	Job exploration	Provider	-	Met
C45	Revisit decisions	Provider	-	Met
C46	Use of generic resources	Provider	-	Met
C47	Transportation to/ from community	Provider	-	Met
C51	Ongoing satisfaction with services/ supports	Provider	-	Met

Employment Support Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C7	Feedback on staff / care provider performance	Provider	-	Met
C8	Family/guardian communication	Provider	-	Met
C22	Explore job interests	Provider	-	Met
C23	Assess skills & training needs	Provider	-	Met
C24	Job goals & support needs plan	Provider	-	Met
C25	Skill development	Provider	-	Met
C26	Benefits analysis	Provider	-	Met
C27	Job benefit education	Provider	-	Met
C28	Relationships w/businesses	Provider	-	Met
C29	Support to obtain employment	Provider	-	Met
C30	Work in integrated settings	Provider	-	Met
C31	Job accommodations	Provider	-	Met
C32	At least minimum wages earned	Provider	-	Met
C33	Employee benefits explained	Provider	-	Met
C34	Support to promote success	Provider	-	Met
C35	Feedback on job performance	Provider	-	Met
C36	Supports to enhance retention	Provider	-	Met
C37	Interpersonal skills for work	Provider	-	Met
C47	Transportation to/ from community	Provider	-	Met
C50	Involvement/ part of the Workplace culture	Provider	-	Met
C51	Ongoing satisfaction with services/ supports	Provider	-	Met