



**PROVIDER REPORT
FOR**

**CAPE ABILITIES
895 Mary Dunn Road
Hyannis, MA 02601**

March 10, 2025

Version

Public Provider Report

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

SUMMARY OF OVERALL FINDINGS

Provider	CAPE ABILITIES
Review Dates	2/4/2025 - 2/10/2025
Service Enhancement Meeting Date	2/24/2025
Survey Team	Katherine Gregory (TL) Tina Napolitan Scott Nolan Kayla Condon Roberto Polanco-Santana William Muguro Gina Ford
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	14 location (s) 18 audit (s)	Full Review	79/90 2 Year License 02/24/2025 - 02/24/2027		63 / 67 Certified 02/24/2025 - 02/24/2027
Residential Services	4 location(s) 6 audit (s)			Full Review	19 / 20
ABI-MFP Residential Services	1 location(s) 3 audit (s)			Full Review	19 / 20
Placement Services	5 location(s) 5 audit (s)			Deemed	
ABI-MFP Placement Services	2 location(s) 2 audit (s)			Deemed	
Individual Home Supports	2 location(s) 2 audit (s)			Full Review	20 / 21
Planning and Quality Management (For all service groupings)				Full Review	5 / 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	2 location(s) 14 audit (s)	Full Review	60/62 2 Year License 02/24/2025 - 02/24/2027		34 / 41 Certified 02/24/2025 - 02/24/2027
Community Based Day Services	1 location(s) 7 audit (s)			Full Review	12 / 15
Employment Support Services	1 location(s) 7 audit (s)			Full Review	17 / 20
Planning and Quality Management (For all service groupings)				Full Review	5 / 6

EXECUTIVE SUMMARY :

Cape Abilities, founded in 1968, is a non-profit human service agency that serves transition age students and adults with intellectual and developmental disabilities, and individuals with acquired brain injury (ABI) who reside and work in the Cape Cod area by offering a variety of services to meet their needs. Services included 24-hour residential for individuals with intellectual and developmental disabilities (I/DD) and ABI, Individual Home Supports, Pre-employment transitional services (Pre-ETS), Adult Family Care (AFC), Shared Living for individuals with I/DD and ABI, Day Habilitation, Employment Services, and Community Based Services (CBDS).

The Department of Developmental Services (DDS) Office of Quality Enhancement (OQE) conducted a full Licensing and Certification review of Cape Abilities 24 hour Residential and In Home Supports Service models. A full Licensing and Certification review was also conducted for Cape Abilities Day Services including Community Based Day Supports (CBDS) and Employment. Cape Abilities achieved a 3 year in CARF Certification in 2023 for their Placement Services. Cape Abilities earned the option and chose to have the deemed process applied to, and a review of Licensing indicators only was conducted to their Placement Services.

The Licensing review revealed positive practices across the agency. At the organizational level the Human Rights Committee was found to have all requisite members with the required expertise. Committee meetings were held regularly and reviews of required documentation such as restraints, investigations, and health related protections were completed. Potential employees were screened according to the requirements of their job descriptions, and staff held current licenses in positions for which they were required. Staff were found to be receiving all required trainings and the agency's tracking system ensured trainings were updated in a timely fashion.

In both residential and day services, positive trends emerged in additional licensing areas. Individuals were all supported to evacuate in a timely fashion, all required inspections for residential, CBDS, and Employment services were up to date, and licenses for social enterprises were all current. In the domain of health, diets ordered by physicians were being adhered to, nutritional food was offered, and in general healthy diets and exercise were encouraged. Individuals were offered ample opportunities to exercise in both residential and CBDS programs. Individuals attended the YMCA, and took walks at the beach, nature conservation areas, and in their neighborhoods. Individuals participated in physical therapy to re-gain or maintain strength and had exercise equipment in their homes. One person (ABI Placement) who was supported to maintain a healthy lifestyle had changed his diet and lost over 100 pounds. His level of physical activity increased significantly. He was provided education around the food choices he makes, and he actively engaged in conversations about how foods he consumes impact how he feels.

In both residential and day programs, medications were stored properly, and staff and Shared Living Providers administered and accurately documented medications according to MD orders. Positive Personal Profiles and Persons Served Snapshot documents containing quick overviews of key behavioral or medical needs and helped to familiarize staff with individuals' unique needs such as particular symptoms of a diagnosis for that person, medical considerations such as extra bathroom breaks needed, or behavioral needs such as extra support during exposure to crowds or loud noises. Emergency Back-Up Plans for individuals were clearly outlined with all emergency contacts, personal information and supports needed to ensure safety and thorough notification during an emergency.

The Certification review also revealed strengths throughout the agency as well. Organizationally, the agency collected data for quality purposes and to determine trends. The agency's current strategic plan included organizational goals that addressed methods to improve individuals lives of individuals served in the organization. Examples included efforts to promote a person-centered philosophy among staff, and developing performance measurements that would lead to improved outcomes in service delivery. Regular measurement of progress such as the reduction over the past year of

incidents, investigations and medication occurrences, and the increased internal quality audit scores in residential programs over the past three years.

Across programs, areas of strength were discovered through the review of Certification indicators. In residential, CBDS and employment reviews in the domain of Community, individuals were supported to develop and maintain personal relationships through social skills building. This was achieved through social skills sessions in CBDS and frequent trips into the community across services for integrated activities such as yoga and pottery classes, which allowed individuals repeated contact with community members with whom they had opportunities to form relationships. In the domain of goal accomplishment and skill acquisition, individuals in both residential and day services were supported to develop skills that maximized their independence, and the level of support was adapted to the needs of the individual. One individual who historically had a difficult time with transitions was given cues that allowed her to more successfully prepare, and for another individual, staff had faded prompts with success over time allowing him to initiate requests only if he needed assistance.

Also in Certification, in the domain of Choice and Control, across residential and day services, individuals were afforded autonomous decision-making over their activities. In one home individuals had chosen to not determine their chores in advance because this had resulted them in feeling compelled to complete that chore. They preferred to spontaneously discuss what their preferred chore was for that day, and they felt much more in control of their household routines in this way. In the domain of integration, individuals were imbedded in their communities with an abundance of activities that exposed them to others in their communities including local festivals, attending the community centers for crafts classes, attending the YMCA, preparing and serving meals at the local Salvation Army, and packing and delivering brown bag lunches to a local senior center. In Employment, individuals were supported to develop new skills to maintain or advance in their employment. One individual who was a highly skilled farm worker had been employed at the agency's farm for over sixteen years. He was being trained to identify fungi on a tomato plant with a flashlight which made the fungi visible under an ultraviolet light. Staff were observed to offer instruction and positive feedback during skill development sessions.

In addition to the positive outcomes revealed, the Licensing and Certification review also determined there were areas that require the agency's increased concentration. For Licensing, increased attention is needed across services to ensure that Emergency Fact sheets for all individuals are updated with all current information. In residential services there is a need for increased oversight to improve the thorough and timely completion of DDS recommended health screenings, and to ensure that all restrictive practices have a written rationale and required reviews. For all services, in the domain of Supportive Technology for Autonomy and Independence, increased focus is needed for the assessment of all individuals, the determination of areas of need, and the identification and procurement of technology that could potentially lead to increased independence for individuals. The agency will also need to supplement its monitoring of HCSIS deadlines to ensure that all ISP assessments and support strategies are submitted within the required deadlines as well as incident reports. In addition, a systemic approach needs to be applied to ensure that all trips to the Emergency Room or Urgent Care are reported in HCSIS.

Additional focus is needed for areas of Certification. Systems need to be implemented across all DDS services that allow all individuals the opportunity to provide feedback on potential staff during the hiring process, and at the time of ongoing staff evaluations. The CBDS program needs to more consistently support individuals on a path to employment in the development of job goals, identifying the supports needed, along with the development of habilitative and behavioral goals that would lead to supported employment. For employment services, the agency will need to provide analysis of individuals benefits and the impact their employment can have on them.

The agency has earned a two-year license for Residential Services with a score of 88%. DDS will conduct a follow-up for this service within 60 days for any licensing indicators that were not met. Residential Services are Certified receiving a score of 94%.

The agency has also earned a two-year license for its Employment and CBDS Services with a score of 97%. The agency will complete its own 60-day follow-up for these services. Employment and CBDS Services is Certified with a score of 83%.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	10/10	0/10	
Residential and Individual Home Supports	69/80	11/80	
Residential Services Individual Home Supports ABI-MFP Placement Services Placement Services ABI-MFP Residential Services			
Critical Indicators	8/8	0/8	
Total	79/90	11/90	88%
2 Year License			
# indicators for 60 Day Follow-up		11	

	Met / Rated	Not Met / Rated	% Met
Organizational	11/11	0/11	
Employment and Day Supports	49/51	2/51	
Community Based Day Services Employment Support Services			
Critical Indicators	8/8	0/8	
Total	60/62	2/62	97%
2 Year License			
# indicators for 60 Day Follow-up		2	

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

Indicator #	Indicator	Area Needing Improvement
L8	Emergency fact sheets are current and accurate and available on site.	Eight Emergency Fact Sheets were lacking critical information such as diagnosis, allergies, Health Care Proxy information, medications and current contact information. The agency needs to ensure that Emergency Fact Sheets contain all pertinent updated information.

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

Indicator #	Indicator	Area Needing Improvement
L35	Individuals receive routine preventive screenings.	Three of 14 individuals had not received all routine screenings in accordance with DDS' adult screening recommendations, including cancer screenings and eye and vision screenings. The agency needs to ensure that all individuals are supported to receive routine screenings in accordance with the 'DDS Adult Screen Recommendations' developed by DDS as part of the Department's Health Promotion and Coordination Initiative.
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.	Three of six individuals did not have a written rationale and/or required review for a restrictive practice. The agency needs to ensure that all individuals with restrictive practices have all required components
L61	Supports and health related protections are included in ISP assessments and the continued need is outlined.	Five out of seven individuals did not have health related protections in their ISPs. The agency needs to ensure that all individuals with health related protections have those listed in their ISP with reason for continued use.
L84	Staff / care providers are trained in the correct utilization of health related protections per regulation.	For five individuals, staff were not trained in the correct use of a health-related protection. The agency needs to ensure staff are trained in the correct utilization of health-related protections per regulation.
L86	Required assessments concerning individual needs and abilities are completed in preparation for the ISP.	For four individuals, required assessments concerning individual needs and abilities were not submitted within required timelines in preparation for the ISP, the agency needs to ensure that required assessments are submitted within required timelines.
L87	Support strategies necessary to assist an individual to meet their goals and objectives are completed and submitted as part of the ISP.	For four individuals, support strategies necessary to assist an individual to meet their goals and objectives were not submitted within required timelines in preparation for the ISP, the agency needs to ensure that required assessments are submitted within required timelines.
L89	The provider has a complaint and resolution process that is effectively implemented at the local level.	At one of three locations, the complaint resolution process did not specify what the resolution to each complaint was. The agency needs to ensure the resolution process is effectively implemented and there is a clear resolution to each complaint.

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

Indicator #	Indicator	Area Needing Improvement
L91	Incidents are reported and reviewed as mandated by regulation.	Nine incidents were either submitted or finalized outside the required timelines. In addition, eight incidents involving individuals taken to the ER or to Urgent Care were never submitted in HCSIS. The agency needs to ensure that all reportable events are submitted and finalized within the required timelines to HCSIS.
L94 (05/22)	Individuals have assistive technology to maximize independence.	Four of seventeen individuals had areas identified as areas requiring support but no assistive technology has been trialed to maximize their independence. One individual had not been assessed, nor had potential assistive technology tools been trialed. The agency needs to ensure individuals have access to assistive technology to maximize their independence.
L99 (05/22)	Medical monitoring devices needed for health and safety are authorized, agreed to, used and data collected appropriately. (eg seizure watches; fall sensors).	Two out of two individuals did not have authorization, agreement of use and/or data collected appropriately. The agency needs to ensure that all medical monitoring devices have all of the required components.

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

Indicator #	Indicator	Area Needing Improvement
L86	Required assessments concerning individual needs and abilities are completed in preparation for the ISP.	For three individuals, required assessments concerning individual needs and abilities were not submitted within required timelines in preparation for the ISP, the agency needs to ensure that required assessments are submitted within required timelines.
L94 (05/22)	Individuals have assistive technology to maximize independence.	For nine individuals, assistive technology assessments were not completed, or recommendations were not followed up on. The agency needs to ensure individuals have access to assistive technology to maximize their independence.

CERTIFICATION FINDINGS

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	5/6	1/6	
Residential and Individual Home Supports	58/61	3/61	
Individual Home Supports	20/21	1/21	
ABI-MFP Residential Services	19/20	1/20	
Residential Services	19/20	1/20	
Total	63/67	4/67	94%
Certified			

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	5/6	1/6	
Employment and Day Supports	29/35	6/35	
Community Based Day Services	12/15	3/15	
Employment Support Services	17/20	3/20	
Total	34/41	7/41	83%
Certified			

Planning and Quality Management Areas Needing Improvement on Standards not met:

Indicator #	Indicator	Area Needing Improvement
C2	The provider analyzes information gathered from all sources and identifies patterns and trends.	Analysis of data collected across the agency was not sufficiently robust to reveal that 8 trips to the ER and Urgent Care went unreported in HCSIS. The agency needs to develop a method of analysis to ensure all emergent medical care is reported in HCSIS.

ABI-MFP Residential Services- Areas Needing Improvement on Standards not met:

Indicator #	Indicator	Area Needing Improvement
C7	Individuals have opportunities to provide feedback at the time of hire / time of the match and on an ongoing basis on the performance/actions of staff / care providers that support them.	Three individuals had not been given the opportunity to provide feedback on staff for ongoing staff performance. The agency needs to ensure individuals have opportunities to provide feedback for staff that who could potentially provide them with care, and for the work performance of their current staff.
C7	Individuals have opportunities to provide feedback at the time of hire / time of the match and on an ongoing basis on the performance/actions of staff / care providers that support them.	Two individuals had not been given the opportunity to provide feedback on staff for ongoing staff performance. The agency needs to ensure individuals have opportunities to provide feedback for staff that who could potentially provide them with care, and for the work performance of their current staff.
C7	Individuals have opportunities to provide feedback at the time of hire / time of the match and on an ongoing basis on the performance/actions of staff / care providers that support them.	Four individuals had not been given the opportunity to provide feedback on staff for ongoing staff performance. The agency needs to ensure individuals have opportunities to provide feedback for staff that who could potentially provide them with care, and for the work performance of their current staff.

Community Based Day Services- Areas Needing Improvement on Standards not met:

Indicator #	Indicator	Area Needing Improvement
C7	Individuals have opportunities to provide feedback at the time of hire / time of the match and on an ongoing basis on the performance/actions of staff / care providers that support them.	Six individuals had not been given the opportunity to provide feedback on staff for ongoing staff performance. The agency needs to ensure individuals have opportunities to provide feedback for staff that who could potentially provide them with care, and for the work performance of their current staff.

Community Based Day Services- Areas Needing Improvement on Standards not met:

Indicator #	Indicator	Area Needing Improvement
C38 (07/21)	Specific habilitative and behavioral goals necessary to prepare individuals for work are identified.	One individual had no specific habilitative and/or behavioral goals necessary to prepare them for employment. The agency needs to develop and implement habilitative and behavioral goals for those on a pathway to employment based on the individuals' needs, and containing strategies to overcome obstacles to employment.
C39 (07/21)	There is a plan developed to identify job goals and support needs that would lead to movement into supported employment.	Two individuals did not have a plan to identify job goals and to identify support needs that would lead to movement into supported employment. The agency needs to develop detailed written plans to identify job goals and support needs based on individuals' strengths and needs.
C7	Individuals have opportunities to provide feedback at the time of hire / time of the match and on an ongoing basis on the performance/actions of staff / care providers that support them.	Seven individuals had not been provided with opportunities to provide feedback at the time of hire and on an ongoing basis for performance of staff that supports them. The agency needs to ensure that individuals served are provided with opportunities to provide feedback at the time of hire and on an ongoing basis on the performance of staff that supports them.
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.	For two individuals, career planning did not include an analysis of how individual's entitlements can be managed in a way that allows them to work successfully in the community. The agency needs to ensure that, an analysis has been completed of how current and future earnings will affect individual entitlements and the impact has been clearly explained to the individual and/or family.
C35	Individuals are given feedback on job performance by their employer.	For three individuals, individuals were not given feedback on job performance on a regular basis as other employees. The agency needs to ensure individuals are provided feedback on job performance by their employer.

MASTER SCORE SHEET LICENSURE

Organizational: CAPE ABILITIES

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
☞ L2	Abuse/neglect reporting	16/16	Met
L3	Immediate Action	13/14	Met(92.86 %)
L4	Action taken	14/14	Met
L48	HRC	1/1	Met
L65	Restraint report submit	1/1	Met
L66	HRC restraint review	1/1	Met
L74	Screen employees	7/7	Met
L75	Qualified staff	3/3	Met
L76	Track trainings	19/20	Met(95.00 %)
L83	HR training	20/20	Met
L92 (07/21)	Licensed Sub-locations (e/d).	2/2	Met

Residential and Individual Home Supports:

Ind. #	Ind.	Loc. or Individ.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L1	Abuse/neglect training	I	6/6	2/2	5/5		3/3	2/2	18/18	Met
L5	Safety Plan	L	4/4	2/2	5/5		1/1	2/2	14/14	Met
℞ L6	Evacuation	L	4/4	2/2	5/5		1/1	2/2	14/14	Met
L7	Fire Drills	L	4/4				0/1		4/5	Met (80.0%)
L8	Emergency Fact Sheets	I	5/6	2/2	4/5		0/3	2/2	13/18	Not Met (72.22%)
L9 (07/21)	Safe use of equipment	I	6/6	2/2			3/3		11/11	Met
L10	Reduce risk interventions	I			1/1				1/1	Met
℞ L11	Required inspections	L	4/4	1/1	5/5		1/1	2/2	13/13	Met
℞ L12	Smoke detectors	L	4/4	1/1	4/5		1/1	1/2	11/13	Met (84.62%)
℞ L13	Clean location	L	4/4	1/1	5/5		0/1	2/2	12/13	Met (92.31%)
L14	Site in good repair	L	4/4	1/1	5/5		1/1	2/2	13/13	Met
L15	Hot water	L	4/4	1/1	4/5		1/1	2/2	12/13	Met (92.31%)
L16	Accessibility	L	4/4	1/1	5/5		1/1	1/2	12/13	Met (92.31%)

Ind. #	Ind.	Loc. or Individ.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L17	Egress at grade	L	4/4	1/1	5/5		1/1	2/2	13/13	Met
L18	Above grade egress	L	3/3	1/1	2/2			2/2	8/8	Met
L19	Bedroom location	L	3/3		4/4		1/1		8/8	Met
L20	Exit doors	L	4/4	1/1			1/1		6/6	Met
L21	Safe electrical equipment	L	4/4	1/1	5/5		1/1	2/2	13/13	Met
L22	Well-maintained appliances	L	3/4	1/1	5/5		1/1	1/2	11/13	Met (84.62%)
L23	Egress door locks	L	3/3						3/3	Met
L24	Locked door access	L	4/4		5/5		1/1		10/10	Met
L25	Dangerous substances	L	4/4	1/1			1/1		6/6	Met
L26	Walkway safety	L	4/4	1/1	5/5		0/1	2/2	12/13	Met (92.31%)
L28	Flammables	L					1/1		1/1	Met
L29	Rubbish/combustibles	L	2/3	1/1	5/5		1/1	2/2	11/12	Met (91.67%)
L30	Protective railings	L	4/4	1/1	5/5		1/1	2/2	13/13	Met
L31	Communication method	I	6/6	2/2	5/5		3/3	2/2	18/18	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L32	Verbal & written	I	6/6	2/2	5/5		3/3	2/2	18/18	Met
L33	Physical exam	I	6/6	1/2	5/5		3/3	2/2	17/18	Met (94.44 %)
L34	Dental exam	I	4/6	2/2	5/5		3/3	2/2	16/18	Met (88.89 %)
L35	Preventive screenings	I	5/6	2/2	2/5		2/3	2/2	13/18	Not Met (72.22 %)
L36	Recommended tests	I	5/6	2/2	5/5		2/2	2/2	16/17	Met (94.12 %)
L37	Prompt treatment	I	6/6	2/2	5/5		3/3	2/2	18/18	Met
℞ L38	Physician's orders	I	5/5		1/1		1/3	1/1	8/10	Met (80.0 %)
L39	Dietary requirements	I	3/3		1/1			1/1	5/5	Met
L40	Nutritional food	L	4/4				1/1		5/5	Met
L41	Healthy diet	L	4/4	2/2	5/5		1/1	2/2	14/14	Met
L42	Physical activity	L	4/4		5/5		1/1	2/2	12/12	Met
L43	Health Care Record	I	6/6	2/2	5/5		1/3	1/2	15/18	Met (83.33 %)
L44	MAP registration	L	4/4				1/1		5/5	Met
L45	Medication storage	L	4/4				1/1		5/5	Met
℞ L46	Med. Administration	I	6/6		4/4		3/3	2/2	15/15	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L47	Self medication	I	1/1	2/2	2/2		1/1	1/1	7/7	Met
L49	Informed of human rights	I	6/6	2/2	5/5		3/3	2/2	18/18	Met
L50 (07/21)	Respectful Comm.	I	6/6	2/2	5/5		2/3	2/2	17/18	Met (94.44%)
L51	Possessions	I	6/6	2/2	5/5		3/3	2/2	18/18	Met
L52	Phone calls	I	6/6	2/2	5/5		3/3	2/2	18/18	Met
L53	Visitation	I	6/6	2/2	5/5		3/3	2/2	18/18	Met
L54 (07/21)	Privacy	I	6/6	2/2	5/5		2/3	2/2	17/18	Met (94.44%)
L55	Informed consent	I	5/5	2/2	3/3		3/3		13/13	Met
L56	Restrictive practices	I	3/3				0/3		3/6	Not Met (50.0%)
L57	Written behavior plans	I	2/2						2/2	Met
L60	Data maintenance	I	2/2						2/2	Met
L61	Health protection in ISP	I	1/3		1/1		0/3		2/7	Not Met (28.57%)
L62	Health protection review	I	2/2		1/1				3/3	Met
L63	Med. treatment plan form	I	6/6		4/4		3/3	1/1	14/14	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L64	Med. treatment plan rev.	I	6/6		4/4		3/3	1/1	14/14	Met
L67	Money mgmt. plan	I	5/6	1/1	3/3		1/2		10/12	Met (83.33%)
L68	Funds expenditure	I	6/6	1/1	3/3		1/2		11/12	Met (91.67%)
L69	Expenditure tracking	I	5/6	1/1	3/3		1/2		10/12	Met (83.33%)
L70	Charges for care calc.	I	5/6		5/5		1/3	2/2	13/16	Met (81.25%)
L71	Charges for care appeal	I	6/6		5/5		2/3	2/2	15/16	Met (93.75%)
L77	Unique needs training	I	6/6	2/2	5/5		3/3	2/2	18/18	Met
L78	Restrictive Int. Training	L	2/2						2/2	Met
L79	Restraint training	L	1/1						1/1	Met
L80	Symptoms of illness	L	4/4	2/2	5/5		1/1	2/2	14/14	Met
L81	Medical emergency	L	4/4	1/1	5/5		1/1	2/2	13/13	Met
L82	Medication admin.	L	4/4				1/1		5/5	Met
L84	Health protect. Training	I	2/4		1/1		0/3		3/8	Not Met (37.50%)
L85	Supervision	L	4/4	1/1	5/5		1/1	1/2	12/13	Met (92.31%)

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L86	Required assessments	I	3/6	2/2	5/5		2/3	2/2	14/18	Not Met (77.78 %)
L87	Support strategies	I	4/6	2/2	4/5		2/3	2/2	14/18	Not Met (77.78 %)
L88	Strategies implemented	I	6/6	2/2	4/5		3/3	2/2	17/18	Met (94.44 %)
L89	Complaint and resolution process	L					0/1	2/2	2/3	Not Met (66.67 %)
L90	Personal space/bedroom privacy	I	6/6	2/2	5/5		2/3	2/2	17/18	Met (94.44 %)
L91	Incident management	L	1/4	2/2	5/5		0/1	2/2	10/14	Not Met (71.43 %)
L93 (05/22)	Emergency back-up plans	I	6/6	2/2	5/5		3/3	2/2	18/18	Met
L94 (05/22)	Assistive technology	I	3/6		4/5		3/3	1/2	11/16	Not Met (68.75 %)
L96 (05/22)	Staff training in devices and applications	I	3/3		2/2		3/3		8/8	Met

Ind. #	Ind.	Loc. or Individ.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L99 (05/22)	Medical monitoring devices	I	2/2				0/2		2/4	Not Met (50.0%)
#Std. Met/# 80 Indicator									69/80	
Total Score									79/90	
									87.78%	

Employment and Day Supports:

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L1	Abuse/neglect training	I	7/7		7/7	14/14	Met
L5	Safety Plan	L			1/1	1/1	Met
℞ L6	Evacuation	L			1/1	1/1	Met
L7	Fire Drills	L			1/1	1/1	Met
L8	Emergency Fact Sheets	I	7/7		5/7	12/14	Met (85.71%)
L9 (07/21)	Safe use of equipment	I	6/7		5/5	11/12	Met (91.67%)
℞ L11	Required inspections	L			1/1	1/1	Met
℞ L12	Smoke detectors	L			1/1	1/1	Met
℞ L13	Clean location	L			1/1	1/1	Met
L14	Site in good repair	L			1/1	1/1	Met
L15	Hot water	L			1/1	1/1	Met
L16	Accessibility	L			1/1	1/1	Met
L17	Egress at grade	L			1/1	1/1	Met

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L20	Exit doors	L			1/1	1/1	Met
L21	Safe electrical equipment	L			1/1	1/1	Met
L22	Well-maintained appliances	L			1/1	1/1	Met
L25	Dangerous substances	L			1/1	1/1	Met
L26	Walkway safety	L			1/1	1/1	Met
L28	Flammables	L			1/1	1/1	Met
L29	Rubbish/combustibles	L			1/1	1/1	Met
L30	Protective railings	L			1/1	1/1	Met
L31	Communication method	I	7/7		7/7	14/14	Met
L32	Verbal & written	I	7/7		7/7	14/14	Met
L37	Prompt treatment	I	7/7		7/7	14/14	Met
Ⓡ L38	Physician's orders	I			5/5	5/5	Met
L39	Dietary requirements	I			3/3	3/3	Met
L44	MAP registration	L			1/1	1/1	Met
L45	Medication storage	L			1/1	1/1	Met
Ⓡ L46	Med. Administration	I			1/1	1/1	Met
L49	Informed of human rights	I	6/7		7/7	13/14	Met (92.86 %)
L50 (07/21)	Respectful Comm.	I	7/7		7/7	14/14	Met
L51	Possessions	I	7/7		7/7	14/14	Met
L52	Phone calls	I	7/7		7/7	14/14	Met
L54 (07/21)	Privacy	I	7/7		7/7	14/14	Met
L55	Informed consent	I	4/4		5/5	9/9	Met

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L57	Written behavior plans	I			1/1	1/1	Met
L60	Data maintenance	I			1/1	1/1	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	7/7		7/7	14/14	Met
L80	Symptoms of illness	L	1/1		1/1	2/2	Met
L81	Medical emergency	L	1/1		1/1	2/2	Met
R L82	Medication admin.	L			1/1	1/1	Met
L85	Supervision	L	1/1		1/1	2/2	Met
L86	Required assessments	I	5/6		3/5	8/11	Not Met (72.73 %)
L87	Support strategies	I	5/6		4/5	9/11	Met (81.82 %)
L88	Strategies implemented	I	6/6		6/7	12/13	Met (92.31 %)
L91	Incident management	L	1/1		1/1	2/2	Met
L93 (05/22)	Emergency back-up plans	I	7/7		7/7	14/14	Met
L94 (05/22)	Assistive technology	I	5/7		0/7	5/14	Not Met (35.71 %)
L96 (05/22)	Staff training in devices and applications	I	1/1			1/1	Met
#Std. Met/# 51 Indicator						49/51	
Total Score						60/62	
						96.77%	

MASTER SCORE SHEET CERTIFICATION

Certification - Planning and Quality Management

Indicator #	Indicator	Met/Rated	Rating
C1	Provider data collection	1/1	Met
C2	Data analysis	0/1	Not Met (0 %)
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

Residential Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	2/6	Not Met (33.33 %)
C8	Family/guardian communication	6/6	Met
C9	Personal relationships	6/6	Met
C10	Social skill development	6/6	Met
C11	Get together w/family & friends	6/6	Met
C12	Intimacy	5/6	Met (83.33 %)
C13	Skills to maximize independence	6/6	Met
C14	Choices in routines & schedules	6/6	Met
C15	Personalize living space	4/4	Met
C16	Explore interests	6/6	Met
C17	Community activities	6/6	Met
C18	Purchase personal belongings	6/6	Met
C19	Knowledgeable decisions	6/6	Met
C46	Use of generic resources	6/6	Met
C47	Transportation to/ from community	6/6	Met
C48	Neighborhood connections	6/6	Met
C49	Physical setting is consistent	4/4	Met
C51	Ongoing satisfaction with services/ supports	6/6	Met
C52	Leisure activities and free-time choices /control	6/6	Met
C53	Food/ dining choices	6/6	Met

ABI-MFP Residential Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	0/3	Not Met (0 %)
C8	Family/guardian communication	3/3	Met
C9	Personal relationships	3/3	Met
C10	Social skill development	3/3	Met
C11	Get together w/family & friends	3/3	Met
C12	Intimacy	3/3	Met
C13	Skills to maximize independence	3/3	Met
C14	Choices in routines & schedules	3/3	Met
C15	Personalize living space	1/1	Met
C16	Explore interests	3/3	Met
C17	Community activities	3/3	Met
C18	Purchase personal belongings	3/3	Met
C19	Knowledgeable decisions	3/3	Met
C46	Use of generic resources	3/3	Met
C47	Transportation to/ from community	3/3	Met
C48	Neighborhood connections	3/3	Met
C49	Physical setting is consistent	1/1	Met
C51	Ongoing satisfaction with services/ supports	3/3	Met
C52	Leisure activities and free-time choices /control	3/3	Met
C53	Food/ dining choices	3/3	Met

Individual Home Supports

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	0/2	Not Met (0 %)
C8	Family/guardian communication	2/2	Met
C9	Personal relationships	1/1	Met
C10	Social skill development	2/2	Met
C11	Get together w/family & friends	1/1	Met
C12	Intimacy	1/1	Met
C13	Skills to maximize independence	2/2	Met

Individual Home Supports

Indicator #	Indicator	Met/Rated	Rating
C14	Choices in routines & schedules	1/1	Met
C15	Personalize living space	1/1	Met
C16	Explore interests	1/1	Met
C17	Community activities	1/1	Met
C18	Purchase personal belongings	1/1	Met
C19	Knowledgeable decisions	2/2	Met
C21	Coordinate outreach	1/1	Met
C46	Use of generic resources	1/1	Met
C47	Transportation to/ from community	1/1	Met
C48	Neighborhood connections	1/1	Met
C49	Physical setting is consistent	1/1	Met
C51	Ongoing satisfaction with services/ supports	2/2	Met
C52	Leisure activities and free-time choices /control	1/1	Met
C53	Food/ dining choices	1/1	Met

Community Based Day Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	1/7	Not Met (14.29 %)
C8	Family/guardian communication	7/7	Met
C13	Skills to maximize independence	7/7	Met
C37	Interpersonal skills for work	6/6	Met
C38 (07/21)	Habilitative & behavioral goals	2/3	Not Met (66.67 %)
C39 (07/21)	Support needs for employment	1/3	Not Met (33.33 %)
C40	Community involvement interest	7/7	Met
C41	Activities participation	7/7	Met
C42	Connection to others	7/7	Met
C43	Maintain & enhance relationship	7/7	Met
C44	Job exploration	3/3	Met
C45	Revisit decisions	7/7	Met
C46	Use of generic resources	7/7	Met

Community Based Day Services

Indicator #	Indicator	Met/Rated	Rating
C47	Transportation to/ from community	7/7	Met
C51	Ongoing satisfaction with services/ supports	7/7	Met

Employment Support Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	0/7	Not Met (0 %)
C8	Family/guardian communication	7/7	Met
C22	Explore job interests	4/4	Met
C23	Assess skills & training needs	4/4	Met
C24	Job goals & support needs plan	3/4	Met
C25	Skill development	3/4	Met
C26	Benefits analysis	2/7	Not Met (28.57 %)
C27	Job benefit education	4/4	Met
C29	Support to obtain employment	3/3	Met
C30	Work in integrated settings	7/7	Met
C31	Job accommodations	7/7	Met
C32	At least minimum wages earned	7/7	Met
C33	Employee benefits explained	6/7	Met (85.71 %)
C34	Support to promote success	5/5	Met
C35	Feedback on job performance	2/5	Not Met (40.0 %)
C36	Supports to enhance retention	5/5	Met
C37	Interpersonal skills for work	4/5	Met (80.0 %)
C47	Transportation to/ from community	7/7	Met
C50	Involvement/ part of the Workplace culture	6/6	Met
C51	Ongoing satisfaction with services/ supports	7/7	Met