



**PROVIDER REPORT  
FOR**

**Communitas, Inc  
60-D Audubon Road  
Wakefield, MA 01880**

**May 13, 2026**

**Version**

**Public Provider Report**

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

## **SUMMARY OF OVERALL FINDINGS**

|                                         |                                                                                                                                            |
|-----------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Provider</b>                         | Communitas, Inc                                                                                                                            |
| <b>Review Dates</b>                     | 4/8/2026 - 4/14/2026                                                                                                                       |
| <b>Service Enhancement Meeting Date</b> | 4/29/2026                                                                                                                                  |
| <b>Survey Team</b>                      | Chloe Browning<br>Meagan Caccioppoli (TL)<br>Jennifer Conley-Sevier<br>John Downing<br>Raquel Rodriguez<br>Cheryl Dolan<br>Makayla Gallant |
| <b>Citizen Volunteers</b>               |                                                                                                                                            |

**Survey scope and findings for Residential and Individual Home Supports**

| <b>Service Group Type</b>                                   | <b>Sample Size</b>            | <b>Licensure Scope</b> | <b>Licensure Level</b> | <b>Certification Scope</b> | <b>Certification Level</b> |
|-------------------------------------------------------------|-------------------------------|------------------------|------------------------|----------------------------|----------------------------|
| <b>Residential and Individual Home Supports</b>             | 5 location(s)<br>10 audit (s) | Full Review            | 75/87 Defer Licensure  |                            | 47 / 47<br>Certified       |
| Residential Services                                        | 3 location(s)<br>7 audit (s)  |                        |                        | Full Review                | 20 / 20                    |
| Individual Home Supports                                    | 2 location(s)<br>3 audit (s)  |                        |                        | Full Review                | 21 / 21                    |
| Planning and Quality Management (For all service groupings) |                               |                        |                        | Full Review                | 6 / 6                      |

**Survey scope and findings for Employment and Day Supports**

| <b>Service Group Type</b>                                   | <b>Sample Size</b>            | <b>Licensure Scope</b> | <b>Licensure Level</b>                          | <b>Certification Scope</b> | <b>Certification Level</b>                                           |
|-------------------------------------------------------------|-------------------------------|------------------------|-------------------------------------------------|----------------------------|----------------------------------------------------------------------|
| <b>Employment and Day Supports</b>                          | 3 location(s)<br>16 audit (s) | Full Review            | 49/56 2 Year License<br>04/29/2026 - 04/29/2028 |                            | 14 / 27<br>Certified with Progress Report<br>04/29/2026 - 04/29/2028 |
| Community Based Day Services                                | 1 location(s)<br>7 audit (s)  |                        |                                                 | Deemed                     |                                                                      |
| Employment Support Services                                 | 2 location(s)<br>9 audit (s)  |                        |                                                 | Full Review                | 8 / 21                                                               |
| Planning and Quality Management (For all service groupings) |                               |                        |                                                 | Full Review                | 6 / 6                                                                |

## **EXECUTIVE SUMMARY :**

Communitas is a non-profit organization founded in 1954, providing a range of services to children and adults with Developmental Disabilities in the Northeast region. Services include Family Support Services, Recreational Programming, Day Habilitation, Residential Services, Community Based Day Services (CBDS) and Employment Supports.

The scope of this survey conducted by the Office of Quality Enhancement (OQE) was a full licensing and certification review of Communitas' Residential and Individual Home Supports service grouping and its Employment and Day Supports service group. As the agency is also accredited by CARF, Communitas chose to utilize the results of that previous review for the certification indicators as applicable to Community Based Day Services.

At the organizational level, the agency demonstrated many areas of strength. Across the domain of Human Rights, the agency Human Rights Committee met regularly and met requirements for membership composition and material reviewed.

The agency demonstrated effective internal quality management and improvement systems, as evidenced by strong ongoing data collection and review in many areas, including incident reporting, medication occurrences, DPPC investigations, and behavioral data. The agency exhibited a high level of stakeholder engagement initiatives, including quarterly meetings with DDS Area Offices, and extensive efforts into gathering and analyzing feedback in stakeholder satisfaction surveys. The agency strategic planning process proved to be impactful. The agency self-improvement process and resulting document was found to have enabled ongoing organizational goal adjustment, course correction and service delivery re-evaluation based on data collected and analyzed.

The survey identified a number of accomplishments on the part of the agency which resulted in positive individual outcomes within Residential Services. In the domain of Health, individuals were supported to develop and maintain nutritionally sound eating habits and engage in regular physical activity. At one home, this resulted in an individual being taken off insulin and another losing 30 pounds. In [JH1.1] addition, staff were well versed in the unique needs of all individuals served, and ISP goals were being implemented and tracked regularly.

Positive outcomes were also identified within several certification domains, including relationships and community integration. Individuals were very well supported to maintain relationships with loved ones including family members, friends, and significant others. Community activities were occurring on a frequent and sustained basis, were aligned with individuals' expressed interests, planned via individual driven house meetings, and were well documented on activity calendars and in daily shift notes. In addition to attending a wide variety of community activities on a regular basis, individuals also attended numerous agency facilitated events and activities through the Communitas Recreation program. In Individual Home Supports, individuals were supported to explore and express their need for intimacy and companionship. Two individuals had relationships and staff supported them to see their significant others weekly. Another individual was referred to the TAP's program to receive more clinical support.

Positive practices were also noted within Day and Employment Supports. Sites were clean and organized, with assistive tech throughout such as labels and color coded signs and rooms to allow for maximum independence while navigating the program space. Staff were also well trained in the unique needs of each participant attending the programs.

Several areas requiring further attention were identified during the survey. Within Residential Services, the agency needs to ensure that medical protocols are implemented when a diagnosed health condition necessitates it. All staff should be trained on protocols, and know when to contact the physician or emergency services. Medication treatment plans need to include all required

components; target symptoms should be defined in observable terms, and data collection should occur regularly on behaviors outlined within plans. Any restriction should be incorporated into a Positive Behavior Support plan, and include a mitigation plan if it affects other individuals served at a location.

The agency is encouraged to strengthen its practices across all services regarding the timely submission of ISP required assessments and support strategies, as well as incident reports of all categories.

Within Employment Services, the agency should focus on individualized career exploration and planning. This includes enhancing vocational assessment tools and developing other means to fully assess individual interests, developing detailed written career plans for each person served, and facilitating person-centered, integrated job development opportunities.

As a result of this review, the agency's Residential and Individual Home Supports license has been deferred due to a rating of Not Met on a critical licensing indicator (L38). The service grouping met 86% of licensing indicators overall. The DDS Office of Quality Enhancement (OQE) will conduct a follow-up review within 60 days of the Service Enhancement Meeting (SEM) on all licensing indicators rated as Not Met, including the critical indicator. To be issued a Two-Year License with a mid-cycle review, the agency must demonstrate at least 80% compliance within the critical indicator during the follow up review. This service grouping is Certified, with 100% of certification indicators met.

Within Day and Employment Support services the agency received a rating of met in 88% of licensing indicators; all critical indicators were met. As a result, the agency will receive a Two-Year License for its Employment and Day Supports Services. The DDS OQE will conduct a follow-up review within 60 days of the SEM on all licensing indicators rated as Not Met. The agency received a rating of met in 52% of certification indicators reviewed for Employment Supports, and therefore is Certified with a Progress Report for this service type. The agency will complete a progress report on their success in meeting the Employment Supports certification indicators in one year's time and submit the report to DDS OQE.

## LICENSURE FINDINGS

|                                                  | Met / Rated | Not Met / Rated | % Met |
|--------------------------------------------------|-------------|-----------------|-------|
| <b>Organizational</b>                            | 8/8         | 0/8             |       |
| <b>Residential and Individual Home Supports</b>  | 67/79       | 12/79           |       |
| Residential Services<br>Individual Home Supports |             |                 |       |
| <b>Critical Indicators</b>                       | 7/8         | 1/8             |       |
| <b>Total</b>                                     | 75/87       | 12/87           | 86%   |
| <b>Defer Licensure</b>                           |             |                 |       |
| <b># indicators for 60 Day Follow-up</b>         |             | 12              |       |

|                                                             | Met / Rated | Not Met / Rated | % Met |
|-------------------------------------------------------------|-------------|-----------------|-------|
| <b>Organizational</b>                                       | 8/8         | 0/8             |       |
| <b>Employment and Day Supports</b>                          | 41/48       | 7/48            |       |
| Community Based Day Services<br>Employment Support Services |             |                 |       |
| <b>Critical Indicators</b>                                  | 8/8         | 0/8             |       |
| <b>Total</b>                                                | 49/56       | 7/56            | 88%   |
| <b>2 Year License</b>                                       |             |                 |       |
| <b># indicators for 60 Day Follow-up</b>                    |             | 7               |       |

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

| Indicator # | Indicator                                                                                                                                | Area Needing Improvement                                                                                                                                                                                                                                                                                                                                                                                         |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Ⓡ L38       | Physicians' orders and treatment protocols are followed (when agreement for treatment has been reached by the individual/guardian/team). | For two individuals, individualized medical protocols were not in place for health conditions requiring a specific supports and responses from staff. The agency needs to ensure that when medical diagnoses rise to the level of requiring a medical protocol, individualized protocols are developed in accordance with the physician's orders and that all support staff are trained in their implementation. |

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

| <b>Indicator #</b> | <b>Indicator</b>                                                                                                                                                                                                                        | <b>Area Needing Improvement</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|--------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 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 nine individuals, signed media consent forms were too broad in scope and did not provide instruction on how to withdraw consent if desired. The agency needs to ensure that media consents are written in accordance with DDS guidance, March 17, 2021, and includes the individual right to withdraw consent and/or change one's mind.                                                                                                                                                                                                                                                                                                                    |
| 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. | In two instances, restrictive practices for one individual that affect all individuals in the home did not have a mitigation plan in place. The agency needs to ensure that there is a plan to reduce or eliminate the practices, as well as to mitigate the restrictions so as not to unduly restrict the individuals for whom the practices are not in place. In addition, the restrictive practices must be reviewed by the agency's Human Rights Committee and be incorporated into the ISP.                                                                                                                                                               |
| L57                | All behavior plans are in a written plan.                                                                                                                                                                                               | At two locations, a restrictive practice was utilized as a behavioral intervention without a written plan. The agency must ensure all restrictive practices and/or procedures with negative components are part of a written plan and that no intervention is administered to any individual in the absence of a written behavior modification plan.                                                                                                                                                                                                                                                                                                           |
| L60                | Data are consistently maintained and used to determine the efficacy of behavioral interventions.                                                                                                                                        | At one location, data was not being kept on a restrictive behavioral intervention. The agency must ensure data is collected and reviewed as required to determine the efficacy of the behavioral intervention.                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| L63                | Medication treatment plans are in written format with required components.                                                                                                                                                              | For five individuals, medication treatment plans did not contain all the required components. In addition, behavioral symptoms were not defined in observable terms, so that accurate data could not be collected, and /or data was not being collected consistently. The agency needs to ensure medication treatment plans contain all the required components including descriptions of the target behaviors being modified with treatment and individualized criteria for evaluating the effectiveness of the medication so the clinical course can be evaluated by the prescriber. In addition, the agency needs to ensure data is consistently collected. |
| L78                | Staff are trained to safely and consistently implement restrictive interventions.                                                                                                                                                       | At one location, restrictive practices were being implemented without a written plan in place to instruct staff how to respond in these circumstances. The agency needs to ensure that all restrictive practices are captured within a comprehensive plan, from which staff training can be completed.                                                                                                                                                                                                                                                                                                                                                         |

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

| <b>Indicator #</b> | <b>Indicator</b>                                                                                                                                              | <b>Area Needing Improvement</b>                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|--------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| L85                | The agency provides ongoing supervision, oversight and staff development.                                                                                     | Two of five locations did not have an adequate system of supervision, management, and oversight in place to identify issues around medication administration and medical care. The agency needs to ensure that it is providing support to direct service staff on a regular and ongoing basis, communication is clear, and systems and routines are consistently implemented. Training to staff to ensure these systems are being implemented as expected needs to occur. |
| L86                | Required assessments concerning individual needs and abilities are completed in preparation for the ISP.                                                      | For eight individuals, required assessments had not been submitted within ISP timelines. The agency needs to ensure that ISP assessments are submitted at least 15 days in advance of the ISP meeting.                                                                                                                                                                                                                                                                    |
| L87                | Support strategies necessary to assist an individual to meet their goals and objectives are completed and submitted as part of the ISP.                       | For six individuals, support strategies had not been submitted within ISP timelines. The agency needs to ensure that ISP support strategies are submitted at least 15 days in advance of the ISP meeting.                                                                                                                                                                                                                                                                 |
| L91                | Incidents are reported and reviewed as mandated by regulation.                                                                                                | At three locations, incidents were not reported as mandated by DDS regulation, or were not submitted and finalized within required timeframes. The agency needs to ensure that timelines are followed for both minor and major incidents and that all reportable events are entered into HCSIS.                                                                                                                                                                           |
| L99<br>(05/22)     | Medical monitoring devices needed for health and safety are authorized, agreed to, used and data collected appropriately. (eg seizure watches; fall sensors). | One medical monitoring device did not have one or more of the following required components: all devices must include rationale for use, authorization from a medical professional, instructions for use, correct implementation, and guidelines for cleaning and maintenance. The agency needs to ensure medical monitoring devices are authorized with completion of components for use and are implemented as directed.                                                |

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

| <b>Indicator #</b> | <b>Indicator</b>                       | <b>Area Needing Improvement</b>                                                                                                                                                                                                    |
|--------------------|----------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| L7                 | Fire drills are conducted as required. | At one location fire drills were not conducted using the minimum staffing ratio identified in the Safety Plan. The agency needs to ensure fire drills are conducted with the correct staffing ratio as identified in Safety Plans. |

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

| <b>Indicator #</b> | <b>Indicator</b>                                                                                                                                                  | <b>Area Needing Improvement</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|--------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 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 two individuals, signed media consent forms were too broad in scope and did not include instructions on how to withdraw consent. The agency needs to ensure that media consents are written in accordance with DDS guidance, March 17, 2021, and includes the individual right to withdraw consent and/or change one's mind.                                                                                                                                                      |
| L61                | Supports and health related protections are included in ISP assessments and the continued need is outlined.                                                       | One out of three individuals were supported to use health related supports, for which the day program did not have written authorization. The agency needs to ensure that all health related supports are utilized under the written authorization of a qualified clinician and, minimally include the reason/rationale for use, frequency and duration of use, frequency of safety checks, maintenance and cleaning instructions and conditions for modification and discontinuance. |
| L86                | Required assessments concerning individual needs and abilities are completed in preparation for the ISP.                                                          | For four individuals, required assessments had not been submitted within ISP timelines. The agency needs to ensure that ISP assessments are submitted at least 15 days in advance of the ISP meeting.                                                                                                                                                                                                                                                                                 |
| L87                | Support strategies necessary to assist an individual to meet their goals and objectives are completed and submitted as part of the ISP.                           | For seven individuals, support strategies had not been submitted within ISP timelines. The agency needs to ensure that ISP support strategies are submitted at least 15 days in advance of the ISP meeting.                                                                                                                                                                                                                                                                           |
| L88                | Services and support strategies identified and agreed upon in the ISP for which the provider has designated responsibility are being implemented.                 | For seven of sixteen individuals, the agency was unable to demonstrate services and support strategies were being implemented as outlined in the ISP. The agency needs to ensure that support strategies are implemented as agreed upon by the ISP team.                                                                                                                                                                                                                              |
| L91                | Incidents are reported and reviewed as mandated by regulation.                                                                                                    | At one location, two incidents were not reported as mandated by DDS regulation. The agency needs to ensure that timelines are followed for both minor and major incidents and that all reportable events are entered into HCSIS.                                                                                                                                                                                                                                                      |

## **CERTIFICATION FINDINGS**

|                                                        | Met / Rated  | Not Met / Rated | % Met       |
|--------------------------------------------------------|--------------|-----------------|-------------|
| <b>Certification - Planning and Quality Management</b> | <b>6/6</b>   | <b>0/6</b>      |             |
| <b>Residential and Individual Home Supports</b>        | <b>41/41</b> | <b>0/41</b>     |             |
| Residential Services                                   | 20/20        | 0/20            |             |
| Individual Home Supports                               | 21/21        | 0/21            |             |
| <b>Total</b>                                           | <b>47/47</b> | <b>0/47</b>     | <b>100%</b> |
| <b>Certified</b>                                       |              |                 |             |

|                                                        | Met / Rated  | Not Met / Rated | % Met      |
|--------------------------------------------------------|--------------|-----------------|------------|
| <b>Certification - Planning and Quality Management</b> | <b>6/6</b>   | <b>0/6</b>      |            |
| <b>Employment and Day Supports</b>                     | <b>8/21</b>  | <b>13/21</b>    |            |
| Employment Support Services                            | 8/21         | 13/21           |            |
| <b>Total</b>                                           | <b>14/27</b> | <b>13/27</b>    | <b>52%</b> |
| <b>Certified with Progress Report</b>                  |              |                 |            |

### **Employment Support 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. | Two out of nine individuals did not have the opportunity to provide feedback on staff, either at the time of hire or on an ongoing basis. The agency needs to ensure that all individuals have the chance to provide feedback on the staff that support them. |

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

| <b>Indicator #</b> | <b>Indicator</b>                                                                                                                           | <b>Area Needing Improvement</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|--------------------|--------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| C22                | Staff have effective methods to assist individuals to explore their job interests.                                                         | For seven individuals, job interests were not explored utilizing a variety of methods and did not encompass a broad range of career paths. Career exploration activities were limited to online job searches and did not effectively capture individuals' interests within jobs they explored online. The agency needs to ensure assessments of job interests are completed utilizing a variety of methods and offering a wide variety of career possibilities. The agency also needs to develop a process to ensure they are assessing individuals' job interests while they are completing job exploration activities. |
| C23                | Staff utilize a variety of methods to assess an individual's skills, interests, career goals and training and support needs in employment. | For five of seven individuals, skills assessment was limited to general areas for skill development and did not focus on areas of skill development as related to the individuals' job interests. The agency needs to ensure they have effective methods to assess areas for skill development that are both general and aligned with the individual's area of job interest.                                                                                                                                                                                                                                             |
| C24                | There is a plan developed to identify job goals and support needs.                                                                         | For seven individuals, a written plan had not been developed identifying the individuals' short-term and long-term job goals and the support needed to achieve their goals, with focus on their job interests and skills needing development. The agency needs to develop individualized, written plans outlining job goals for individuals, related to obtaining a job in an area of interest, and the support strategies needed to achieve their goals and develop their skill sets.                                                                                                                                   |

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

| <b>Indicator #</b> | <b>Indicator</b>                                                                        | <b>Area Needing Improvement</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|--------------------|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| C25                | Staff assist individuals to work on skill development for job attainment and success.   | For four out of seven individuals, skill development activities are not occurring in individual areas identified as needing improvement, despite staff being aware of areas where skill development is needed. Individuals in agency-operated employment are not receiving support toward developing skills that would lead to movement into community-based employment. The agency needs to ensure they are actively supporting skill acquisition for individuals' that are in line with individuals' job goals and their skill development needs. |
| C29                | Individuals are supported to obtain employment that matches their skills and interests. | Five of seven individuals are not employed in settings or jobs that match their skills and interests. The agency needs to ensure employment pursuit efforts or current placements are in line with the individuals' interest and skills, or for individuals in a job that is not in line with their interests or skills, there is clear documentation justifying the mismatch.                                                                                                                                                                      |
| C30                | Individuals are supported to work in integrated job settings.                           | Four of nine individuals had not been supported to work in an integrated job setting. The agency needs to ensure that individuals receiving employment supports (individual and group) are supported in acquiring and maintaining jobs in an integrated work setting                                                                                                                                                                                                                                                                                |
| C33                | Employee benefits and rights are clearly explained to the individual.                   | For six of nine individuals, the agency did not ensure that individuals were informed of their benefits and rights related to their paid positions. The agency needs to ensure that individuals in competitive employment receive this information from their employer. When the agency serves as the employer through Group-Supported Employment, the agency must provide written information outlining the individual's rights and benefits, such as paid or unpaid time off, breaks, lunch, etc.).                                               |

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

| <b>Indicator #</b> | <b>Indicator</b>                                                                                                  | <b>Area Needing Improvement</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|--------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| C34                | The agency provides the optimal level of support to promote success with a specific plan for minimizing supports. | For two of nine individuals, the agency has not developed a plan to minimize support needs as individuals gain proficiency or independence in their roles. The agency must ensure that each individual has a plan for gradually fading support and conduct regular assessments to determine when such support can be reduced. Additionally, the agency should be responsive as support needs change and adjust supports and plans to fade as needed.                                                                                                                                                                                               |
| C35                | Individuals are given feedback on job performance by their employer.                                              | Four out of eight individuals have not received formal feedback regarding their job performance. The agency must ensure that individuals are supported in obtaining feedback directly from their employers, in accordance with the company's policies. If the agency is the employer, it should provide formal feedback on job performance in accordance with the company's policies on supervision and evaluation.                                                                                                                                                                                                                                |
| C36                | Ongoing supports are provided to enhance job retention and advancement.                                           | For three individuals, the agency did not ensure ongoing supports were provided to enhance job retention and advancement, such as providing short-term supports or retraining for individuals facing performance issues, or ongoing supports for career growth when the individual expresses an interest. The agency needs to ensure that when an individual is experiencing performance challenges, there is a support plan with strategies in place to address them, as well as ensure there is a system for assessing job satisfaction, so individuals who express interest in career progression are actively supported to pursue their goals. |

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

| <b>Indicator #</b> | <b>Indicator</b>                                                                                                                              | <b>Area Needing Improvement</b>                                                                                                                                                                                                                                                                                                                                                          |
|--------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| C37                | There is support to develop appropriate work related interpersonal skills.                                                                    | For two of seven individuals, social skills had not been assessed, or, if assessed, no strategies had been developed to address identified skill gaps. The agency needs to ensure that there is a documented assessment of interpersonal and social skills. Once skill gaps are identified, appropriate strategies should be implemented to develop essential job-related social skills. |
| C50                | Individuals are supported to understand and become a part of the culture of the workplace (including workplace social activities and events). | Three of nine individuals were not working in an integrated setting, which limited their opportunity to understand and engage with the workplace culture. The agency must ensure that individuals are supported to work in integrated environments where they can be supported to connect and interact with employees with and without disabilities.                                     |

## MASTER SCORE SHEET LICENSURE

Organizational: Communitas, Inc

| Indicator # | Indicator               | Met/Rated | Rating(Met,Not Met,NotRated) |
|-------------|-------------------------|-----------|------------------------------|
| Ⓡ L2        | Abuse/neglect reporting | 6/7       | Met(85.71 % )                |
| L3          | Immediate Action        | 9/11      | Met(81.82 % )                |
| L4          | Action taken            | 31/31     | Met                          |
| L48         | HRC                     | 1/1       | Met                          |
| L74         | Screen employees        | 4/4       | Met                          |
| L75         | Qualified staff         | 1/1       | Met                          |
| L76         | Track trainings         | 12/12     | Met                          |
| L83         | HR training             | 12/12     | Met                          |

## 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       | 3/3            |        |       |                   |                | 10/10           | Met          |
| L5         | Safety Plan               | L              | 3/3       | 2/2            |        |       |                   |                | 5/5             | Met          |
| R L6       | Evacuation                | L              | 3/3       | 2/2            |        |       |                   |                | 5/5             | Met          |
| L7         | Fire Drills               | L              | 3/3       |                |        |       |                   |                | 3/3             | Met          |
| L8         | Emergency Fact Sheets     | I              | 7/7       | 3/3            |        |       |                   |                | 10/10           | Met          |
| L9 (07/21) | Safe use of equipment     | I              | 7/7       | 3/3            |        |       |                   |                | 10/10           | Met          |
| L10        | Reduce risk interventions | I              | 2/2       | 1/1            |        |       |                   |                | 3/3             | Met          |
| R L11      | Required inspections      | L              | 3/3       | 2/2            |        |       |                   |                | 5/5             | Met          |
| R L12      | Smoke detectors           | L              | 3/3       | 2/2            |        |       |                   |                | 5/5             | Met          |
| R L13      | Clean location            | L              | 3/3       | 2/2            |        |       |                   |                | 5/5             | Met          |
| L14        | Site in good repair       | L              | 3/3       | 2/2            |        |       |                   |                | 5/5             | Met          |
| L15        | Hot water                 | L              | 3/3       | 1/2            |        |       |                   |                | 4/5             | Met (80.0 %) |
| L16        | Accessibility             | L              | 2/2       | 2/2            |        |       |                   |                | 4/4             | Met          |
| L17        | Egress at grade           | L              | 3/3       | 2/2            |        |       |                   |                | 5/5             | Met          |

| Ind. # | Ind.                              | Loc.<br>or<br>Indiv<br>. | Res.<br>Sup. | Ind.<br>Home<br>Sup. | Place. | Resp. | ABI-<br>MFP<br>Res.<br>Sup. | ABI-<br>MFP<br>Place. | Total<br>Met/Rat<br>ed | Rating |
|--------|-----------------------------------|--------------------------|--------------|----------------------|--------|-------|-----------------------------|-----------------------|------------------------|--------|
| L18    | Above<br>grade<br>egress          | L                        | 3/3          |                      |        |       |                             |                       | 3/3                    | Met    |
| L19    | Bedroom<br>location               | L                        | 2/2          |                      |        |       |                             |                       | 2/2                    | Met    |
| L20    | Exit<br>doors                     | L                        | 3/3          | 2/2                  |        |       |                             |                       | 5/5                    | Met    |
| L21    | Safe<br>electrical<br>equipment   | L                        | 3/3          | 2/2                  |        |       |                             |                       | 5/5                    | Met    |
| L22    | Well-<br>maintained<br>appliances | L                        | 3/3          | 2/2                  |        |       |                             |                       | 5/5                    | Met    |
| L23    | Egress<br>door<br>locks           | L                        | 2/2          | 1/1                  |        |       |                             |                       | 3/3                    | Met    |
| L24    | Locked<br>door<br>access          | L                        | 3/3          | 2/2                  |        |       |                             |                       | 5/5                    | Met    |
| L25    | Dangerous<br>substances           | L                        | 3/3          | 2/2                  |        |       |                             |                       | 5/5                    | Met    |
| L26    | Walkway<br>safety                 | L                        | 3/3          | 2/2                  |        |       |                             |                       | 5/5                    | Met    |
| L28    | Flammables                        | L                        | 2/2          | 2/2                  |        |       |                             |                       | 4/4                    | Met    |
| L29    | Rubbish<br>/combustibles          | L                        | 3/3          | 2/2                  |        |       |                             |                       | 5/5                    | Met    |
| L30    | Protective<br>railings            | L                        | 3/3          | 2/2                  |        |       |                             |                       | 5/5                    | Met    |
| L31    | Communication<br>method           | I                        | 7/7          | 3/3                  |        |       |                             |                       | 10/10                  | Met    |
| L32    | Verbal<br>&<br>written            | I                        | 7/7          | 3/3                  |        |       |                             |                       | 10/10                  | Met    |

| Ind. # | Ind.                  | Loc. or Indiv. | Res. Sup. | Ind. Home Sup. | Place. | Resp. | ABI-MFP Res. Sup. | ABI-MFP Place. | Total Met/Rated | Rating           |
|--------|-----------------------|----------------|-----------|----------------|--------|-------|-------------------|----------------|-----------------|------------------|
| L33    | Physical exam         | I              | 7/7       | 2/2            |        |       |                   |                | 9/9             | Met              |
| L34    | Dental exam           | I              | 6/7       | 2/2            |        |       |                   |                | 8/9             | Met (88.89 %)    |
| L35    | Preventive screenings | I              | 7/7       | 1/2            |        |       |                   |                | 8/9             | Met (88.89 %)    |
| L36    | Recommended tests     | I              | 6/7       | 2/2            |        |       |                   |                | 8/9             | Met (88.89 %)    |
| L37    | Prompt treatment      | I              | 7/7       | 2/2            |        |       |                   |                | 9/9             | Met              |
| ℞ L38  | Physician's orders    | I              | 2/4       |                |        |       |                   |                | 2/4             | Not Met (50.0 %) |
| L39    | Dietary requirements  | I              | 4/4       |                |        |       |                   |                | 4/4             | Met              |
| L40    | Nutritional food      | L              | 3/3       | 2/2            |        |       |                   |                | 5/5             | Met              |
| L41    | Healthy diet          | L              | 3/3       | 2/2            |        |       |                   |                | 5/5             | Met              |
| L42    | Physical activity     | L              | 3/3       | 2/2            |        |       |                   |                | 5/5             | Met              |
| L43    | Health Care Record    | I              | 7/7       | 1/2            |        |       |                   |                | 8/9             | Met (88.89 %)    |
| L44    | MAP registration      | L              | 3/3       |                |        |       |                   |                | 3/3             | Met              |
| L45    | Medication storage    | L              | 3/3       |                |        |       |                   |                | 3/3             | Met              |
| ℞ L46  | Med. Administration   | I              | 5/6       |                |        |       |                   |                | 5/6             | Met (83.33 %)    |
| L47    | Self medication       | I              | 1/1       | 3/3            |        |       |                   |                | 4/4             | Met              |

| Ind. #      | Ind.                     | Loc. or Indiv. | Res. Sup. | Ind. Home Sup. | Place. | Resp. | ABI-MFP Res. Sup. | ABI-MFP Place. | Total Met/Rated | Rating            |
|-------------|--------------------------|----------------|-----------|----------------|--------|-------|-------------------|----------------|-----------------|-------------------|
| L49         | Informed of human rights | I              | 7/7       | 3/3            |        |       |                   |                | 10/10           | Met               |
| L50 (07/21) | Respectful Comm.         | I              | 7/7       | 3/3            |        |       |                   |                | 10/10           | Met               |
| L51         | Possessions              | I              | 7/7       | 3/3            |        |       |                   |                | 10/10           | Met               |
| L52         | Phone calls              | I              | 7/7       | 3/3            |        |       |                   |                | 10/10           | Met               |
| L53         | Visitation               | I              | 7/7       | 3/3            |        |       |                   |                | 10/10           | Met               |
| L54 (07/21) | Privacy                  | I              | 7/7       | 3/3            |        |       |                   |                | 10/10           | Met               |
| L55         | Informed consent         | I              | 0/7       | 0/2            |        |       |                   |                | 0/9             | Not Met (0 %)     |
| L56         | Restrictive practices    | I              | 0/2       |                |        |       |                   |                | 0/2             | Not Met (0 %)     |
| L57         | Written behavior plans   | I              | 2/3       | 0/1            |        |       |                   |                | 2/4             | Not Met (50.0 %)  |
| L60         | Data maintenance         | I              | 2/2       | 0/1            |        |       |                   |                | 2/3             | Not Met (66.67 %) |
| L61         | Health protection in ISP | I              | 5/5       |                |        |       |                   |                | 5/5             | Met               |
| L62         | Health protection review | I              | 3/3       |                |        |       |                   |                | 3/3             | Met               |
| L63         | Med. treatment plan form | I              | 3/6       | 0/2            |        |       |                   |                | 3/8             | Not Met (37.50 %) |
| L64         | Med. treatment plan rev. | I              | 6/6       | 0/1            |        |       |                   |                | 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           |
|--------|---------------------------|----------------|-----------|----------------|--------|-------|-------------------|----------------|-----------------|------------------|
| L67    | Money mgmt. plan          | I              | 7/7       |                |        |       |                   |                | 7/7             | Met              |
| L68    | Funds expenditure         | I              | 7/7       |                |        |       |                   |                | 7/7             | Met              |
| L69    | Expenditure tracking      | I              | 7/7       |                |        |       |                   |                | 7/7             | Met              |
| L70    | Charges for care calc.    | I              | 7/7       |                |        |       |                   |                | 7/7             | Met              |
| L71    | Charges for care appeal   | I              | 7/7       |                |        |       |                   |                | 7/7             | Met              |
| L77    | Unique needs training     | I              | 7/7       | 3/3            |        |       |                   |                | 10/10           | Met              |
| L78    | Restrictive Int. Training | L              | 1/1       | 0/1            |        |       |                   |                | 1/2             | Not Met (50.0 %) |
| L79    | Restraining training      | L              | 1/1       |                |        |       |                   |                | 1/1             | Met              |
| L80    | Symptoms of illness       | L              | 3/3       | 2/2            |        |       |                   |                | 5/5             | Met              |
| L81    | Medical emergency         | L              | 3/3       | 2/2            |        |       |                   |                | 5/5             | Met              |
| L82    | Medication admin.         | L              | 3/3       |                |        |       |                   |                | 3/3             | Met              |
| L84    | Health protect. Training  | I              | 5/5       |                |        |       |                   |                | 5/5             | Met              |
| L85    | Supervision               | L              | 1/3       | 2/2            |        |       |                   |                | 3/5             | Not Met (60.0 %) |
| L86    | Required assessments      | I              | 0/7       | 2/3            |        |       |                   |                | 2/10            | Not Met (20.0 %) |

| Ind. #                          | Ind.                                       | Loc. or Indiv. | Res. Sup. | Ind. Home Sup. | Place. | Resp. | ABI-MFP Res. Sup. | ABI-MFP Place. | Total Met/Rated | Rating           |
|---------------------------------|--------------------------------------------|----------------|-----------|----------------|--------|-------|-------------------|----------------|-----------------|------------------|
| L87                             | Support strategies                         | I              | 1/7       | 3/3            |        |       |                   |                | 4/10            | Not Met (40.0 %) |
| L88                             | Strategies implemented                     | I              | 7/7       | 3/3            |        |       |                   |                | 10/10           | Met              |
| L90                             | Personal space/ bedroom privacy            | I              | 7/7       | 3/3            |        |       |                   |                | 10/10           | Met              |
| L91                             | Incident management                        | L              | 0/3       | 2/2            |        |       |                   |                | 2/5             | Not Met (40.0 %) |
| L93 (05/22)                     | Emergency back-up plans                    | I              | 7/7       | 3/3            |        |       |                   |                | 10/10           | Met              |
| L94 (05/22)                     | Assistive technology                       | I              | 7/7       | 3/3            |        |       |                   |                | 10/10           | Met              |
| L96 (05/22)                     | Staff training in devices and applications | I              | 7/7       | 2/2            |        |       |                   |                | 9/9             | Met              |
| L99 (05/22)                     | Medical monitoring devices                 | I              | 1/2       |                |        |       |                   |                | 1/2             | Not Met (50.0 %) |
| <b>#Std. Met/# 79 Indicator</b> |                                            |                |           |                |        |       |                   |                | <b>67/79</b>    |                  |
| <b>Total Score</b>              |                                            |                |           |                |        |       |                   |                | <b>75/87</b>    |                  |
|                                 |                                            |                |           |                |        |       |                   |                | <b>86.21%</b>   |                  |

**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                | 9/9       |                  | 7/7            | 16/16             | Met           |
| L5         | Safety Plan                | L                |           |                  | 1/1            | 1/1               | Met           |
| ℞ L6       | Evacuation                 | L                |           |                  | 1/1            | 1/1               | Met           |
| L7         | Fire Drills                | L                |           |                  | 0/1            | 0/1               | Not Met (0 %) |
| L8         | Emergency Fact Sheets      | I                | 9/9       |                  | 7/7            | 16/16             | Met           |
| L9 (07/21) | Safe use of equipment      | I                | 9/9       |                  | 7/7            | 16/16             | Met           |
| ℞ 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           |
| 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           |
| 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           |
| L31        | Communication method       | I                | 9/9       |                  | 7/7            | 16/16             | Met           |
| L32        | Verbal & written           | I                | 9/9       |                  | 7/7            | 16/16             | Met           |
| L37        | Prompt treatment           | I                | 9/9       |                  | 7/7            | 16/16             | Met           |
| ℞ L38      | Physician's orders         | I                | 1/1       |                  | 4/4            | 5/5               | Met           |

| Ind. #      | Ind.                     | Loc. or Individ. | Emp. Sup. | Cent. Based Work | Com. Based Day | Total Met / Rated | Rating            |
|-------------|--------------------------|------------------|-----------|------------------|----------------|-------------------|-------------------|
| L44         | MAP registration         | L                |           |                  | 1/1            | 1/1               | Met               |
| L45         | Medication storage       | L                |           |                  | 1/1            | 1/1               | Met               |
| ℞ L46       | Med. Administration      | I                |           |                  | 3/3            | 3/3               | Met               |
| L49         | Informed of human rights | I                | 9/9       |                  | 7/7            | 16/16             | Met               |
| L50 (07/21) | Respectful Comm.         | I                | 9/9       |                  | 7/7            | 16/16             | Met               |
| L51         | Possessions              | I                | 9/9       |                  | 7/7            | 16/16             | Met               |
| L52         | Phone calls              | I                | 9/9       |                  | 7/7            | 16/16             | Met               |
| L54 (07/21) | Privacy                  | I                | 9/9       |                  | 7/7            | 16/16             | Met               |
| L55         | Informed consent         | I                | 0/2       |                  |                | 0/2               | Not Met (0 %)     |
| L61         | Health protection in ISP | I                | 1/1       |                  | 1/2            | 2/3               | Not Met (66.67 %) |
| L62         | Health protection review | I                | 1/1       |                  | 1/1            | 2/2               | Met               |
| L77         | Unique needs training    | I                | 9/9       |                  | 7/7            | 16/16             | Met               |
| L79         | Restraint training       | L                | 1/1       |                  | 1/1            | 2/2               | 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                | 1/1       |                  | 2/2            | 3/3               | Met               |
| L85         | Supervision              | L                | 2/2       |                  | 1/1            | 3/3               | Met               |
| L86         | Required assessments     | I                | 6/8       |                  | 4/6            | 10/14             | Not Met (71.43 %) |
| L87         | Support strategies       | I                | 4/8       |                  | 3/6            | 7/14              | Not Met (50.0 %)  |
| L88         | Strategies implemented   | I                | 5/9       |                  | 4/7            | 9/16              | Not Met (56.25 %) |

| Ind. #                   | Ind.                                       | Loc. or Indiv. | Emp. Sup. | Cent. Based Work | Com. Based Day | Total Met / Rated | Rating            |
|--------------------------|--------------------------------------------|----------------|-----------|------------------|----------------|-------------------|-------------------|
| L91                      | Incident management                        | L              | 1/2       |                  | 1/1            | 2/3               | Not Met (66.67 %) |
| L93 (05/22)              | Emergency back-up plans                    | I              | 9/9       |                  | 7/7            | 16/16             | Met               |
| L94 (05/22)              | Assistive technology                       | I              | 8/9       |                  | 7/7            | 15/16             | Met (93.75 %)     |
| L96 (05/22)              | Staff training in devices and applications | I              | 5/5       |                  |                | 5/5               | Met               |
| #Std. Met/# 48 Indicator |                                            |                |           |                  |                | 41/48             |                   |
| Total Score              |                                            |                |           |                  |                | 49/56             |                   |
|                          |                                            |                |           |                  |                | 87.50%            |                   |

## 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    |

### Residential Services

| Indicator # | Indicator                                     | Met/Rated | Rating |
|-------------|-----------------------------------------------|-----------|--------|
| C7          | Feedback on staff / care provider performance | 7/7       | Met    |
| C8          | Family/guardian communication                 | 7/7       | Met    |
| C9          | Personal relationships                        | 7/7       | Met    |
| C10         | Social skill development                      | 7/7       | Met    |
| C11         | Get together w/family & friends               | 7/7       | Met    |
| C12         | Intimacy                                      | 7/7       | Met    |

## Residential Services

| Indicator # | Indicator                                         | Met/Rated | Rating |
|-------------|---------------------------------------------------|-----------|--------|
| C13         | Skills to maximize independence                   | 7/7       | Met    |
| C14         | Choices in routines & schedules                   | 7/7       | Met    |
| C15         | Personalize living space                          | 3/3       | Met    |
| C16         | Explore interests                                 | 7/7       | Met    |
| C17         | Community activities                              | 7/7       | Met    |
| C18         | Purchase personal belongings                      | 7/7       | Met    |
| C19         | Knowledgeable decisions                           | 7/7       | Met    |
| C46         | Use of generic resources                          | 7/7       | Met    |
| C47         | Transportation to/ from community                 | 7/7       | Met    |
| C48         | Neighborhood connections                          | 7/7       | Met    |
| C49         | Physical setting is consistent                    | 3/3       | Met    |
| C51         | Ongoing satisfaction with services/ supports      | 7/7       | Met    |
| C52         | Leisure activities and free-time choices /control | 7/7       | Met    |
| C53         | Food/ dining choices                              | 7/7       | Met    |

## Individual Home Supports

| Indicator # | Indicator                                     | Met/Rated | Rating |
|-------------|-----------------------------------------------|-----------|--------|
| C7          | Feedback on staff / care provider performance | 3/3       | Met    |
| 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                      | 2/2       | 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    |

### Individual Home Supports

| Indicator # | Indicator                                         | Met/Rated | Rating |
|-------------|---------------------------------------------------|-----------|--------|
| C21         | Coordinate outreach                               | 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                    | 2/2       | 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    |

### Employment Support Services

| Indicator # | Indicator                                     | Met/Rated | Rating            |
|-------------|-----------------------------------------------|-----------|-------------------|
| C7          | Feedback on staff / care provider performance | 7/9       | Not Met (77.78 %) |
| C8          | Family/guardian communication                 | 9/9       | Met               |
| C22         | Explore job interests                         | 0/7       | Not Met (0 %)     |
| C23         | Assess skills & training needs                | 2/7       | Not Met (28.57 %) |
| C24         | Job goals & support needs plan                | 0/7       | Not Met (0 %)     |
| C25         | Skill development                             | 3/7       | Not Met (42.86 %) |
| C26         | Benefits analysis                             | 6/7       | Met (85.71 %)     |
| C27         | Job benefit education                         | 3/4       | Met               |
| C28         | Relationships w/businesses                    | 1/1       | Met               |
| C29         | Support to obtain employment                  | 2/7       | Not Met (28.57 %) |
| C30         | Work in integrated settings                   | 5/9       | Not Met (55.56 %) |
| C31         | Job accommodations                            | 6/6       | Met               |
| C32         | At least minimum wages earned                 | 9/9       | Met               |
| C33         | Employee benefits explained                   | 3/9       | Not Met (33.33 %) |
| C34         | Support to promote success                    | 6/8       | Not Met (75.00 %) |
| C35         | Feedback on job performance                   | 5/8       | Not Met (62.50 %) |
| C36         | Supports to enhance retention                 | 5/7       | Not Met (71.43 %) |
| C37         | Interpersonal skills for work                 | 5/7       | Not Met (71.43 %) |
| C47         | Transportation to/ from community             | 9/9       | Met               |

**Employment Support Services**

| <b>Indicator #</b> | <b>Indicator</b>                             | <b>Met/Rated</b> | <b>Rating</b>            |
|--------------------|----------------------------------------------|------------------|--------------------------|
| C50                | Involvement/ part of the Workplace culture   | 6/9              | <b>Not Met (66.67 %)</b> |
| C51                | Ongoing satisfaction with services/ supports | 9/9              | <b>Met</b>               |