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| **PROVIDER REPORT FOR** |

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| **Community Connections, Inc.261 Whites Path South Yarmouth, MA 02664**  |

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| **Version** |

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| **Public Provider Report** |

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| **Prepared by the Department of Developmental ServicesOFFICE OF QUALITY ENHANCEMENT** |

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| **SUMMARY OF OVERALL FINDINGS** |

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| **Provider** |

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| Community Connections, Inc. |

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| **Review Dates** |

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| 4/11/2022 - 4/15/2022 |

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| **Service Enhancement Meeting Date** |

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| 4/29/2022 |

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| **Survey Team** |

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| Michelle Boyd |
| Kayla Condon |
| Michael Marchese (TL) |

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| **Citizen Volunteers** |

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| **Survey scope and findings for Residential and Individual Home Supports** |  |  |  |  |  |
| **Service Group Type** | **Sample Size** | **Licensure Scope** | **Licensure Level** | **Certification Scope** | **Certification Level** |
| **Residential and Individual Home Supports** | 3 location(s) 3 audit (s)  | Targeted Review | DDS 5/8Provider 30 / 3135 / 39 2 Year License 04/29/2022- 04/29/2024 |  | DDS 1 / 2Provider 26 / 2727 / 29 Certified 04/29/2022 - 04/29/2024 |
| Individual Home Supports | 3 location(s) 3 audit (s)  |  |  | DDS Targeted Review | 21 / 23 |
| Planning and Quality Management (For all service groupings) |   |  |  | DDS Targeted Review | 6 / 6 |
| **Survey scope and findings for Employment and Day Supports** |  |  |  |  |  |
| **Service Group Type** | **Sample Size** | **Licensure Scope** | **Licensure Level** | **Certification Scope** | **Certification Level** |
| **Employment and Day Supports** | 3 location(s) 17 audit (s)  | Targeted Review | DDS 11/11Provider 24 / 2635 / 37 2 Year License 04/29/2022- 04/29/2024 |  | DDS 6 / 6Provider 38 / 4044 / 46 Certified 04/29/2022 - 04/29/2024 |
| Community Based Day Services | 2 location(s) 6 audit (s)  |  |  | DDS Targeted Review | 16 / 17 |
| Employment Support Services | 1 location(s) 11 audit (s)  |  |  | DDS Targeted Review | 22 / 23 |
| Planning and Quality Management (For all service groupings) |   |  |  | DDS Targeted Review | 6 / 6 |

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| **EXECUTIVE SUMMARY :** |

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| Community Connections, Inc. (CCI), is a nonprofit organization founded in 1985 to provide supports and services for adults with developmental disabilities living throughout the Southeastern Mass and Cape Cod area. CCI offers a variety of services in support of a diverse population of people with unique needs. Services include Individual Home Supports (IHS), Employment Services, and Community Based Day Services (CBDS). Based on the outcome of the agency's previous DDS licensure and certification review conducted in April of 2019, the agency earned and chose the option of conducting a self-assessment for this review. As a result, the DDS survey team conducted targeted review of the agency's IHS, Employment, and CBDS supports. This consisted of evaluating the eight critical licensure indicators, any new/revised licensure and certification indicators, and indicators which received a 'Not Met' rating in their previous survey. Across both Residential (IHS) and Employment / Day supports, the agency successfully met the critical licensure indicators and were successful in supporting individuals in the areas of personal safety, health, and human rights. The agency had an effect process for reporting allegations of abuse/neglect as mandated by regulation. Individuals were able to safely evacuate their homes in 21/2 minutes or from site-based day services in an acceptable time and were assessed and supported to utilize equipment and machinery safely. Written and oral communication with and about individuals was found to be respectful; staff interactions were age appropriate, and individuals were afforded privacy when dealing with personal needs and discussing personal matters. In Employment/Day services, informed consent was obtained from individuals or their guardians prior to the agency's disclosure of personal identifying images/information. Certification areas reviewed resulted in the following positive outcomes. Across all service types, emergency back-up plans to assist individuals to plan for emergencies and/or disasters were in place and staff were knowledgeable. In Employment/Day services, individuals have been assessed to identify assistive technology that may be of benefit, and assistive technology and modifications to maximize independence was being provided as needed. Further attention is warranted within the Individual Home Supports service within certain licensure indicators. The agency needs to ensure the health care records are maintained and updated regularly, implement a process for the ongoing assessment of individuals who self-administer medications and ensure that incidents are reported and reviewed as mandated. In the certification domain, additional efforts are recommended to assess, identify, and utilize assistive technology for individuals supported in IHS services. Based upon the findings of this report, Community Connections, Inc. has earned two Two-Year licenses for its Residential/ Individual Home Support and Day/Employment Support services. The combined scores of the DDS review and the agency's self-assessment resulted in licensing scores of 90% in Individual Home Support and 95% in Day/Employment Support services. The agency will conduct its own follow-up for licensing indicators not met within 60 days. The agency is Certified in both Residential and Day/Employment services.The provider's description of its self-assessment process follows. |

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| **Description of Self Assessment Process:** |

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| Community Connections, Inc. has designed an effective and continuous quality assurance system that helps to identify issues, patterns, trends and systematic issues, correct issues, follow-up to ensure that individual and systemic correction has occurred. A re-assessment is conducted of reoccurring issues to assure that there are no further problems. Employment Services, CBDS and IHS Services utilizes a variety of program performance reporting measures to collect data. These reports include the following: Internal Program Monthly Performance Report, Internal and External Program Quarterly Performance Reports, Quarterly Case Record Review Report, Quarterly Health and Inspection and Report, Quarterly Human Rights Report and Meeting, Annual Service Report, Quarterly and Annual Demographic Reports, Annual Accessibility Survey, Annual Stakeholder Surveys that include consumers of service, guardians, and employers. The information gathered from these sources is utilized to develop programmatic goals for the coming year.Community Connections mirrored the number of consumers surveyed by the DDS QE team. All consumers eligible for survey were assigned a number and an on-line random number generator was used to select the individuals that would be surveyed by the Community Connections team. The team consisted of the Chief Operating Officer, Director of Program Administration, two Service Directors and the Quality Assurance Manager. Program Managers were involved when necessary. All consumer files were reviewed, and consumers were interviewed about their services. Support staff for selected consumers were also interviewed. The Quality Assurance Manager met with a representative of the Human Resources department to review five employee files. All information gathered was sent to the Director of Program Administration who with the assistance of the other team members compiled the results of the survey. All standard interpretations were taken from the updated DDS Licensure and Certification tools and standard interpretations documents.The areas reviewed and the manner of their review are the following.Physical Environment:Quarterly Health and Safety Committee Meeting are conducted at each physical site. Each quarter the committee completes a four-page Safety and Health assessment Report and Corrective Action Plan. The reports are filed electronically and reviewed by the Agency Safety Director. These reports include the record of the quarterly fire evacuations, review of annual fire and building inspection, the checking of fire safety equipment and a review of any critical incidents. Annually each program conducts an Accessibility review that assesses access to the program and community, communication access, attitudinal barriers, employment access, environmental and financial barriers. Action plans are created to address any noted issues. The action plan is reviewed quarterly by the Program Manager and Service Director to ensure appropriate corrective action has been taken.Program Supports and Implementation:Timely submission of materials for ISP's including the submitting of an annual assessment ten business days prior to the scheduled ISP meeting and the completion of Provider Support Strategies within fifteen business days of the ISP Meeting is monitored by management staff who reviews all materials before submission to ensure quality and timeliness of reports. Each program also conducts a Quarterly Case Record Review to ensure that all case records remain accurate and up to date. Each case file is reviewed at least once annually by the Program Manager and/or program Coordinator.Human Rights:The Community Connections, Inc. Human Rights staffed by the Quality Assurance Manager and is properly constituted and meets every quarter. When members with specific expertise are unable to attend, issues requiring their input are forwarded to them by the Quality Assurance Manager prior to the meeting for their review and input. If necessary, a post meeting follow-up is conducted. The committee annually reviews Agency Policy and Practices that have impact on Human Rights, also review Human Rights Training for staff and clients, ensuring awareness of DPPC reporting requirements. Restrictive practices, behavior plans, restraints, significant incidents, and all investigations are reviewed by the committee. Human Rights are reviewed annually with all program participants. If a program participant has a legal guardian this information is forwarded to them for their acknowledgement.Staff Training and Development:Community Connections, Inc. ensures all direct service staff are up to date with required DDS trainings. Also, the Agency on annual basis reviews all pertinent Policies and Procedures based on the Annual Policy Review Schedule. The Agency also utilizes Open Futures Learning on-line platform and Google Classroom. Community Connections, Inc. also integrates data from monthly, quarterly, and annual program reports to develop annual professional development opportunities for direct service and program management staff.Goal Development and Implementation:Individual ISP goals are developed through participant's meetings with their employment staff and incorporating information gathered through the Consumer Annual Questionnaire and Consumer Survey. The staff also utilizes information gathered in the last year from progress notes, Quarterly Reports and Service Plans in the development of ISP Goals. The information gathered becomes part of the individuals Employment Plan that is reviewed annually for employed participants and monthly for unemployed participants.To test the effectiveness of the quality management process in meeting the licensing standards set by the Department of Developmental Services CCI has formed a survey team made up of the QA Manager and three Director/Administrative Level Staff. This team, using all the DDS Licensing Standards, evaluates 10% of the consumers participating across the agency's employment programs at random where applicable to effectively evaluate the indicators being reviewed. For instance, if only two individuals in employment supports have health related protection, then the agency nay review both to ensure compliance with meeting the standards and for consistency. The evaluation will be conducted a month prior to the DDS targeted licensing review. Results of the findings will be reviewed and summarized by the CCI survey team and aggregate ratings for each indicator are established using 80% as the criteria for assigning a rating of standard met. In instances where the license indicator is Not Met (less than 80%) the agency will outline the specific issues identified and identify the steps that are planned to correct the issues. Additionally, timeframes for these actions will be developed with deadlines established to ensure that issues are consistently met in our corrective action plan, The Summary and ratings are presented to the Agency's President & CEO. The ratings from the final set of evaluations are recorded on the Provider Self-Assessment Form for the purpose of licensing. |

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| **LICENSURE FINDINGS** |

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|  | **Met / Rated** | **Not Met / Rated** | **% Met** |
| **Organizational** | **5/6** | **1/6** |  |
| **Residential and Individual Home Supports** | **30/33** | **3/33** |  |
|  Individual Home Supports |  |  |  |
| **Critical Indicators** | **2/2** | **0/2** |  |
| **Total** | **35/39** | **4/39** | **90%** |
| **2 Year License** |  |  |  |
| **# indicators for 60 Day Follow-up** |  | **4** |  |
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|  | **Met / Rated** | **Not Met / Rated** | **% Met** |
| **Organizational** | **5/6** | **1/6** |  |
| **Employment and Day Supports** | **30/31** | **1/31** |  |
|  Community Based Day Services Employment Support Services |  |  |  |
| **Critical Indicators** | **6/6** | **0/6** |  |
| **Total** | **35/37** | **2/37** | **95%** |
| **2 Year License** |  |  |  |
| **# indicators for 60 Day Follow-up** |  | **2** |  |
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|  | **Organizational Areas Needing Improvement on Standards not met/Follow-up to occur:From Provider review:** |  |  |  |
|  | **Indicator #** | **Indicator** | **Issue identified** | **Action planned to address** |
|  |  L48 | The agency has an effective Human Rights Committee. | During the audit period CCI's Human Rights Committee (HRC) did not meet the mandated composition required to meet this standard. The HRC did not have a Nurse as a committee member. | CCI will use all resources available to seek a medical professional who will join the HRC. They will try and recruit a back-up for this and all professional roles on the committee. |

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|  | **Residential Areas Needing Improvement on Standards not met/Follow-up to occur:From DDS review:** |  |  |
|  | **Indicator #** | **Indicator** | **Area Needing Improvement** |
|  |  L43 | The health care record is maintained and updated as required.  | The health care record for one individual did not include diagnoses. The agency needs to ensure that individuals' health care records are maintained and updated as required. |
|  |  L47 | Individuals are supported to become self medicating when appropriate.  | One individual self-administering her medications is not meeting all criteria required to safely do so as her status has changed. The agency needs to ensure that individuals self-medicating have an assessment documenting their skills in this area, and a process for ensuring that individuals maintain their self-medicating abilities. |
|  |  L91 | Incidents are reported and reviewed as mandated by regulation. | One incident reviewed in HCSIS was finalized seven days after the required deadline. The agency needs to ensure that incidents are reported and reviewed as mandated by regulation. |

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|  | **Employment/Day Areas Needing Improvement on Standards not met/Follow-up to occur:From Provider review:** |  |  |  |
|  | **Indicator #** | **Indicator** | **Issue identified** | **Action planned to address** |
|  |  L85 | The agency provides ongoing supervision, oversight and staff development. | Of the five staff files reviewed, two staff have not been employed long enough to be eligible for a Performance Review. Of the three remaining staff, all had Performance Reviews present in their file, however, one had not been reviewed and signed by the staff. | Program Administration will work with the Human Resources (HR) Department to develop a better system for notifying individuals and management of due dates and those not properly reviewed. This will become part of our Kronos HR software system. |

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| **CERTIFICATION FINDINGS** |

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|  | **Reviewed By** | **Met / Rated** | **Not Met / Rated** | **% Met** |
| **Certification - Planning and Quality Management** | **DDS 0/0Provider 6/6** | **6/6** | **0/6** |  |
| **Residential and Individual Home Supports** | **DDS 1/2Provider 20/21** | **21/23** | **2/23** |  |
| Individual Home Supports | DDS 1/2Provider 20/21 | 21/23 | 2/23 |  |
| **Total** |  | **27/29** | **2/29** | **93%** |
| **Certified** |  |  |  |  |

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|  | **Reviewed By** | **Met / Rated** | **Not Met / Rated** | **% Met** |
| **Certification - Planning and Quality Management** | **DDS 0/0Provider 6/6** | **6/6** | **0/6** |  |
| **Employment and Day Supports** | **DDS 6/6Provider 32/34** | **38/40** | **2/40** |  |
| Community Based Day Services | DDS 4/4Provider 12/13 | 16/17 | 1/17 |  |
| Employment Support Services | DDS 2/2Provider 20/21 | 22/23 | 1/23 |  |
| **Total** |  | **44/46** | **2/46** | **96%** |
| **Certified** |  |  |  |  |

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|  | **Individual Home Supports- Areas Needing Improvement on Standards not met From DDS Review:** |  |  |  |
|  | **Indicator #** | **Indicator** | **Area Needing Improvement** |  |
|  |  C54 | Individuals have the assistive technology and/or modifications to maximize independence.  | One individual had an incomplete assistive technology assessment and strategies were not in place based on the individual's unique needs to help in maximizing her independence. The agency needs to ensure that they identify areas where individuals require additional supports and could potentially utilize assistive technology to increase their independence, and once identified strategies should be created to support the individual with utilizing the assistive technology. |  |
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|  | **Individual Home Supports- Areas Needing Improvement on Standards not met From Provider review:** |  |  |  |
|  | **Indicator #** | **Indicator** | **Issues identified** | **Action planned to address** |
|  |  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. | Consumer input was not sought during the hiring process. | CCI Program Administration will work with the Human Resources Department to add "Consumer Input" as a required on-boarding document in our electronic on-boarding system. |
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|  | **Community Based Day Services- Areas Needing Improvement on Standards not met From Provider review:** |  |  |  |
|  | **Indicator #** | **Indicator** | **Issues identified** | **Action planned to address** |
|  |  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. | Consumer input was not sought during the hiring process. | CCI Program Administration will work with the Human Resources Department to add "Consumer Input" as a required on boarding document in our electronic on boarding system. |
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|  | **Employment Support Services- Areas Needing Improvement on Standards not met From Provider review:** |  |  |  |
|  | **Indicator #** | **Indicator** | **Issues identified** | **Action planned to address** |
|  |  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. | Consumer input was not sought during the hiring process. | CCI Program Administration will work with the Human Resources Department to add "Consumer Input" as a required on boarding document in our electronic on boarding system. |
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| **MASTER SCORE SHEET LICENSURE** |

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| **Organizational: Community Connections, Inc.** |

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|  | **Indicator #** | **Indicator** | **Reviewed by** | **Met/Rated** | **Rating(Met,Not Met,NotRated)** |
| O |  L2 | Abuse/neglect reporting | **DDS** | **5/5** | **Met** |
|  |  L48 | HRC | **Provider** | **-** | **Not Met** |
|  |  L74 | Screen employees | **Provider** | **-** | **Met** |
|  |  L75 | Qualified staff | **Provider** | **-** | **Met** |
|  |  L76 | Track trainings | **Provider** | **-** | **Met** |
|  |  L83 | HR training | **Provider** | **-** | **Met** |

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| **Residential and Individual Home Supports:** |

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|  | **Ind. #** | **Ind.** | **Loc. or Indiv.** | **Reviewed by** | **Res. Sup.** | **Ind. Home Sup.** | **Place.** | **Resp.** | **ABI-MFP Res. Sup.** | **ABI-MFP Place.** | **Total Met/Rated** | **Rating** |
|  |  L1 | Abuse/neglect training | I | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L5 | Safety Plan | L  | **Provider** |  | - |  |  | - | - | **-** | **Met** |
| O |  L6 | Evacuation | L | **DDS** |  | 3/3 |  |  |  |  | **3/3** | **Met** |
|  |  L8 | Emergency Fact Sheets | I  | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L9 (07/21) | Safe use of equipment | I | **DDS** |  | 3/3 |  |  |  |  | **3/3** | **Met** |
|  |  L10 | Reduce risk interventions | I  | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L31 | Communication method | I  | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L32 | Verbal & written | I  | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L33 | Physical exam | I | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L34 | Dental exam | I | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L35 | Preventive screenings | I | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L36 | Recommended tests | I  | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L37 | Prompt treatment | I  | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L40 | Nutritional food | L  | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L41 | Healthy diet | L  | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L42 | Physical activity | L  | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L43 | Health Care Record | I | **DDS** |  | 2/3 |  |  |  |  | **2/3** | **Not Met(66.67 %)** |
|  |  L47 | Self medication | I | **DDS** |  | 2/3 |  |  |  |  | **2/3** | **Not Met(66.67 %)** |
|  |  L49 | Informed of human rights | I | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L50 (07/21) | Respectful Comm. | I | **DDS** |  | 3/3 |  |  |  |  | **3/3** | **Met** |
|  |  L51 | Possessions | I  | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L52 | Phone calls | I  | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L53 | Visitation | I  | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L54 (07/21) | Privacy | I | **DDS** |  | 3/3 |  |  |  |  | **3/3** | **Met** |
|  |  L77 | Unique needs training | I  | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L80 | Symptoms of illness | L  | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L81 | Medical emergency | L  | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L85 | Supervision  | L | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L86 | Required assessments | I | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L87 | Support strategies | I | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L88 | Strategies implemented | I  | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L90 | Personal space/ bedroom privacy | I  | **Provider** |  | - |  |  | - | - | **-** | **Met** |
|  |  L91 | Incident management | L | **DDS** |  | 2/3 |  |  |  |  | **2/3** | **Not Met(66.67 %)** |
|  | **#Std. Met/# 33 Indicator** |  |  |  |  |  |  |  |  |  | **30/33** |  |
|  | **Total Score** |  |  |  |  |  |  |  |  |  | **35/39** |  |
|  |  |  |  |  |  |  |  |  |  |  | **89.74%** |  |

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| **Employment and Day Supports:** |

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|  | **Ind. #** | **Ind.** | **Loc. or Indiv.** | **Reviewed by** | **Emp. Sup.** | **Cent. Based Work** | **Com. Based Day** | **Total Met / Rated** | **Rating** |
|  |  L1 | Abuse/neglect training | I  | **Provider** |  | - | - | **-** | **Met** |
| O |  L6 | Evacuation | L | **DDS** | 1/1 |  |  | **1/1** | **Met** |
|  |  L8 | Emergency Fact Sheets | I  | **Provider** |  | - | - | **-** | **Met** |
|  |  L9 (07/21) | Safe use of equipment | I | **DDS** | 1/1 |  | 2/2 | **3/3** | **Met** |
|  |  L10 | Reduce risk interventions | I  | **Provider** |  | - | - | **-** | **Met** |
| O |  L11 | Required inspections | L | **DDS** | 1/1 |  |  | **1/1** | **Met** |
| O |  L12 | Smoke detectors | L | **DDS** | 1/1 |  |  | **1/1** | **Met** |
| O |  L13 | Clean location | L | **DDS** | 1/1 |  |  | **1/1** | **Met** |
|  |  L37 | Prompt treatment | I  | **Provider** |  | - | - | **-** | **Met** |
| O |  L38 | Physician's orders | I | **DDS** |  |  | 2/2 | **2/2** | **Met** |
|  |  L39 | Dietary requirements | I  | **Provider** |  | - | - | **-** | **Met** |
|  |  L49 | Informed of human rights | I | **Provider** |  | - | - | **-** | **Met** |
|  |  L50 (07/21) | Respectful Comm. | I | **DDS** | 11/11 |  | 6/6 | **17/17** | **Met** |
|  |  L51 | Possessions | I  | **Provider** |  | - | - | **-** | **Met** |
|  |  L52 | Phone calls | I  | **Provider** |  | - | - | **-** | **Met** |
|  |  L54 (07/21) | Privacy | I | **DDS** | 11/11 |  | 6/6 | **17/17** | **Met** |
|  |  L55 | Informed consent | I | **DDS** | 3/3 |  | 1/1 | **4/4** | **Met** |
|  |  L61 | Health protection in ISP | I  | **Provider** |  | - | - | **-** | **Met** |
|  |  L67 | Money mgmt. plan | I | **DDS** |  |  | 1/1 | **1/1** | **Met** |
|  |  L68 | Funds expenditure | I  | **Provider** |  | - | - | **-** | **Met** |
|  |  L69 | Expenditure tracking | I  | **Provider** |  | - | - | **-** | **Met** |
|  |  L77 | Unique needs training | I  | **Provider** |  | - | - | **-** | **Met** |
|  |  L78 | Restrictive Int. Training | L  | **Provider** |  | - | - | **-** | **Met** |
|  |  L79 | Restraint training | L  | **Provider** |  | - | - | **-** | **Met** |
|  |  L80 | Symptoms of illness | L  | **Provider** |  | - | - | **-** | **Met** |
|  |  L81 | Medical emergency | L  | **Provider** |  | - | - | **-** | **Met** |
|  |  L85 | Supervision  | L  | **Provider** |  | - | - | **-** | **Not Met** |
|  |  L86 | Required assessments | I | **Provider** |  | - | - | **-** | **Met** |
|  |  L87 | Support strategies | I | **Provider** |  | - | - | **-** | **Met** |
|  |  L88 | Strategies implemented | I  | **Provider** |  | - | - | **-** | **Met** |
|  |  L91 | Incident management | L  | **Provider** |  | - | - | **-** | **Met** |
|  | **#Std. Met/# 31 Indicator** |  |  |  |  |  |  | **30/31** |  |
|  | **Total Score** |  |  |  |  |  |  | **35/37** |  |
|  |  |  |  |  |  |  |  | **94.59%** |  |

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| **MASTER SCORE SHEET CERTIFICATION** |

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|  | **Certification - Planning and Quality Management** |  |  |  |  |
|  | **Indicator #** | **Indicator** | **Reviewed By** | **Met/Rated** | **Rating** |
|  |  C1 | Provider data collection | Provider | - | **Met** |
|  |  C2 | Data analysis | Provider | - | **Met** |
|  |  C3 | Service satisfaction | Provider | - | **Met** |
|  |  C4 | Utilizes input from stakeholders | Provider | - | **Met** |
|  |  C5 | Measure progress | Provider | - | **Met** |
|  |  C6 | Future directions planning | Provider | - | **Met** |
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| **Individual Home Supports** |  |  |  |  |
| **Indicator #** | **Indicator** | **Reviewed By** | **Met/Rated** | **Rating** |
|  C7 | Feedback on staff / care provider performance | Provider | - | **Not Met (0 %)** |
|  C8 | Family/guardian communication | Provider | - | **Met** |
|  C9 | Personal relationships | Provider | - | **Met** |
|  C10 | Social skill development | Provider | - | **Met** |
|  C11 | Get together w/family & friends | Provider | - | **Met** |
|  C12 | Intimacy | Provider | - | **Met** |
|  C13 | Skills to maximize independence  | Provider | - | **Met** |
|  C14 | Choices in routines & schedules | Provider | - | **Met** |
|  C15 | Personalize living space | Provider | - | **Met** |
|  C16 | Explore interests | Provider | - | **Met** |
|  C17 | Community activities | Provider | - | **Met** |
|  C18 | Purchase personal belongings | Provider | - | **Met** |
|  C19 | Knowledgeable decisions | Provider | - | **Met** |
|  C20 (07/21) | Emergency back-up plans | DDS | 3/3 | **Met** |
|  C21 | Coordinate outreach | Provider | - | **Met** |
|  C46 | Use of generic resources | Provider | - | **Met** |
|  C47 | Transportation to/ from community | Provider | - | **Met** |
|  C48 | Neighborhood connections | Provider | - | **Met** |
|  C49 | Physical setting is consistent  | Provider | - | **Met** |
|  C51 | Ongoing satisfaction with services/ supports | Provider | - | **Met** |
|  C52 | Leisure activities and free-time choices /control | Provider | - | **Met** |
|  C53 | Food/ dining choices | Provider | - | **Met** |
|  C54 | Assistive technology | DDS | 2/3 | **Not Met (66.67 %)** |
| **Community Based Day Services** |  |  |  |  |
| **Indicator #** | **Indicator** | **Reviewed By** | **Met/Rated** | **Rating** |
|  C7 | Feedback on staff / care provider performance | Provider | - | **Not Met (0 %)** |
|  C8 | Family/guardian communication | Provider | - | **Met** |
|  C13 | Skills to maximize independence  | Provider | - | **Met** |
|  C20 (07/21) | Emergency back-up plans | DDS | 6/6 | **Met** |
|  C37 | Interpersonal skills for work | Provider | - | **Met** |
|  C38 (07/21) | Habilitative & behavioral goals | DDS | 6/6 | **Met** |
|  C39 (07/21) | Support needs for employment | DDS | 5/6 | **Met (83.33 %)** |
|  C40 | Community involvement interest | Provider | - | **Met** |
|  C41 | Activities participation | Provider | - | **Met** |
|  C42 | Connection to others | Provider | - | **Met** |
|  C43 | Maintain & enhance relationship | Provider | - | **Met** |
|  C44 | Job exploration | Provider | - | **Met** |
|  C45 | Revisit decisions | Provider | - | **Met** |
|  C46 | Use of generic resources | Provider | - | **Met** |
|  C47 | Transportation to/ from community | Provider | - | **Met** |
|  C51 | Ongoing satisfaction with services/ supports | Provider | - | **Met** |
|  C54 | Assistive technology | DDS | 6/6 | **Met** |
| **Employment Support Services** |  |  |  |  |
| **Indicator #** | **Indicator** | **Reviewed By** | **Met/Rated** | **Rating** |
|  C7 | Feedback on staff / care provider performance | Provider | - | **Not Met (0 %)** |
|  C8 | Family/guardian communication | Provider | - | **Met** |
|  C20 (07/21) | Emergency back-up plans | DDS | 11/11 | **Met** |
|  C22 | Explore job interests | Provider | - | **Met** |
|  C23 | Assess skills & training needs | Provider | - | **Met** |
|  C24 | Job goals & support needs plan | Provider | - | **Met** |
|  C25 | Skill development | Provider | - | **Met** |
|  C26 | Benefits analysis | Provider | - | **Met** |
|  C27 | Job benefit education | Provider | - | **Met** |
|  C28 | Relationships w/businesses | Provider | - | **Met** |
|  C29 | Support to obtain employment | Provider | - | **Met** |
|  C30 | Work in integrated settings | Provider | - | **Met** |
|  C31 | Job accommodations | Provider | - | **Met** |
|  C32 | At least minimum wages earned | Provider | - | **Met** |
|  C33 | Employee benefits explained | Provider | - | **Met** |
|  C34 | Support to promote success | Provider | - | **Met** |
|  C35 | Feedback on job performance | Provider | - | **Met** |
|  C36 | Supports to enhance retention | Provider | - | **Met** |
|  C37 | Interpersonal skills for work | Provider | - | **Met** |
|  C47 | Transportation to/ from community | Provider | - | **Met** |
|  C50 | Involvement/ part of the Workplace culture | Provider | - | **Met** |
|  C51 | Ongoing satisfaction with services/ supports | Provider | - | **Met** |
|  C54 | Assistive technology | DDS | 10/11 | **Met (90.91 %)** |
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