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|  |  | |  | | --- | | **SUMMARY OF OVERALL FINDINGS** | |  |  |
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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** | 4 location(s)  8 audit (s) | Full Review | 79/82 2 Year License 03/24/2022 - 03/24/2024 |  | 72 / 73 Certified 03/24/2022 - 03/24/2024 | | Residential Services | 2 location(s)  6 audit (s) |  |  | Full Review | 21 / 22 | | ABI-MFP Residential Services | 1 location(s)  1 audit (s) |  |  | Full Review | 22 / 22 | | Individual Home Supports | 1 location(s)  1 audit (s) |  |  | Full Review | 23 / 23 | | Planning and Quality Management (For all service groupings) |  |  |  | Full Review | 6 / 6 | |  | |

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|  | |  | | --- | | **EXECUTIVE SUMMARY :** | |  |  |
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|  | |  | | --- | | Comprehensive Mental Health Systems, Inc. (CMHS) was founded in 1978 and provides a broad range of community-based rehabilitative services for people with a wide range of abilities, goals and needs. The agency supports 40 adults receiving 24 hours residential services to individuals with Intellectual/Developmental Disabilities (I/DD) and, Acquired Brain Injury (ABI) and services to individuals in Individual Home Supports. The agency also provides ABI services to individuals served by the Massachusetts Rehabilitation Commission (MRC).    A full licensure and certification review was conducted across the Residential Service Group including a review of organizational systems.  The agency demonstrated several strengths in the environmental, health/clinical, and financial domains. Overall homes were well maintained, clean and in good repair. Homes were noted to be nicely landscaped and blended into the surrounding neighborhood.   A clear strength of the agency was its nursing oversight and systems of support for individuals to maintain good health. All individuals were current in regular appointment such as dental and others were supported to address preventative care such as GYN/mammograms in a unique and more intensive manner for three women needing outpatient care. A review of practices relating to the Medication Administration Program (MAP) were found to be consistently in place. Individuals were supported to develop skills to administer their own medications when appropriate.  Another area of strength was the agency system for financial oversight which included an effective system for tracking and monitoring funds. Shared and delegated management of funds plans were in place that outlined individual's abilities and individuals were supported to budget for weekly and longer-term purchases. Staff assisted one individual to use a scanner while shopping to stay on budget while in another instance staff assisted an individual in taking out the right amount of money from their person, giving the money to the cashier and waiting for the correct change upon making a purchase.  Staff had required trainings and were knowledgeable in each individual's unique needs. Since its last reviewed the agency strengthened its procedures in the reporting of incident reports in required timelines while clarifying the "new optionally reportable events" process for ABI services which is separate from incident reporting.  Within licensure, there were only two items that would benefit from strengthening. The agency needs to identify situations in which restrictive interventions need to be implemented as the least restrictive mechanism to address the issue. When appropriate approvals are in place and training for staff is completed then the restriction can be implemented. In addition , the agency needs to obtain an Attorney, law student or paralegal to fill membership to meet membership requirements for the Human Rights Committee.  In the certification area, the agency demonstrated positive outcomes in supporting individuals to participate in leisure activities, making choices and exercising control over daily decisions. For example, some individuals used a voice operated application to remind them of the time to independently take their medication or an IPAD to check the weather for selecting their clothing for the day. Individuals were encouraged to choose and plan their weekly activities which included budgeting for hairdressing appointments or shopping.  Organizationally, the agency's system to collect data to identify trends and make mid-course corrections to improve service delivery was strong. For example, after identifying an increased use of hospitalizations and medical services the agency took additional actions to further support individuals in health care with increase oversight in monitoring at all levels of the organization. The agency also expanded options for MAP training in response to an increase in medication occurrences.  Within certification, the agency should focus on assessing and supporting individuals in the areas of intimacy and companionship, particuar on supporting individuals with different methods of communication and learning styles to explore, define and express their need for developing companionship.   Based on the findings of this review, the agency received a Two-Year License in Residential, IHS and ABI-MFP services. The agency is also Certified in Residential, IHS and ABI-MFP services. The agency will follow-up on indicators "Not Met" within 60 days as it scored above 90% on the licensure indicators. | | |  |

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|  | |  |  |  |  |  | | --- | --- | --- | --- | --- | |  | | |  |  | | |  | | --- | | **LICENSURE FINDINGS** | | | |  |  | |  | | |  |  | | |  |  |  |  | | --- | --- | --- | --- | |  | **Met / Rated** | **Not Met / Rated** | **% Met** | | **Organizational** | **7/8** | **1/8** |  | | **Residential and Individual Home Supports** | **72/74** | **2/74** |  | | Residential Services  Individual Home Supports  ABI-MFP Residential Services |  |  |  | | **Critical Indicators** | **8/8** | **0/8** |  | | **Total** | **79/82** | **3/82** | **96%** | | **2 Year License** |  |  |  | | **# indicators for 60 Day Follow-up** |  | **3** |  | |  |  |  |  | |  | | |  | |  | | |  |  | | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  |  | | |  |  | |  | **Organizational Areas Needing Improvement on Standards not met/Follow-up to occur:** |  |  | | | |  | **Indicator #** | | | **Indicator** | **Area Needing Improvement** | |  | L48 | | | The agency has an effective Human Rights Committee. | The agency's lawyer had not attended the Human Rights Committee (HRC) meetings for the past two years and recently resigned from the committee. The agency has reached out to the community to secure an attorney, law student or paralegal to secure someone to fulfill this required position to meet the HRC membership requirements. | |  |  | | | |  |
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|  | |  | | --- | |  | | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  |  |  | | |  | |  | **Residential Commendations on Standards Met:** |  |  | | | |  | **Indicator #** | | | **Indicator** | **Commendations** | |  | L36 | | | Recommended tests and appointments with specialists are made and kept. | The agency is commended for their strong follow-up and coordination of individuals ongoing health care needs. All individuals were up to date in routine appointments such as dental and appointments with specialists. Major surgery occurred as indicated. Specialized appointments such as GYN/mammograms for individuals requiring outpatient services were done for preventative care. Nursing and staff worked collaboratively to follow all tests and appointments which were recorded and tracked in Individualized Health Fact Sheet. | |  |  |  | | |  | |  | **Residential Areas Needing Improvement on Standards not met/Follow-up to occur:** |  |  | | | |  | **Indicator #** | | | **Indicator** | **Area Needing Improvement** | |  | 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. | One individual stated they did not have access to a common area of the home which was implemented by staff without a written plan to fade or eliminate the need for the restriction. The agency needs to ensure that restrictive practices for one individual have a written rationale and the required reviews. | |  | L78 | | | Staff are trained to safely and consistently implement restrictive interventions. | Staff were not trained to implement the restricitve interventions. The agency needs to ensure staff are trained to safely and consistently implement restrictive interventions. | | |  | |  |

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|  | |  | | --- | | **CERTIFICATION FINDINGS** | | | |  |  |  |
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|  | |  |  |  |  | | --- | --- | --- | --- | |  | **Met / Rated** | **Not Met / Rated** | **% Met** | | **Certification - Planning and Quality Management** | **6/6** | **0/6** |  | | **Residential and Individual Home Supports** | **66/67** | **1/67** |  | | ABI-MFP Residential Services | 22/22 | 0/22 |  | | Individual Home Supports | 23/23 | 0/23 |  | | Residential Services | 21/22 | 1/22 |  | | **Total** | **72/73** | **1/73** | **99%** | | **Certified** |  |  |  | |  |  |  |  | |  | | |  |  |
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|  | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  | **Planning and Quality Management Commendations on Standards Met:** |  |  | | | |  | **Indicator #** | | | **Indicator** | **Commendations** | |  | C5 | | | The provider has a process to measure progress towards achieving service improvement goals. | The agency had a process to collect data to identify trends in measuring progress and make mid-course corrections to make service improvement. The agency identified an increased use of hospitalizations and medical services and took additional actions to further support individuals in health care with increase oversight in monitoring at all levels of the organization. | |  |  | | |  |  | |  |  | | |  |
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|  | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  | **Residential Services- Areas Needing Improvement on Standards not met:** |  |  | | | |  | **Indicator #** | | | **Indicator** | **Area Needing Improvement** | |  | C12 | | | Individuals are supported to explore, define, and express their need for intimacy and companionship. | Two out of six individuals had been assessed in the area of intimacy and sexuality however this assessment did not focus on interests / supports needed to develop companionship with someone or to explore a desire for companionship. The agency needs to assess and support individuals to explore, define and express their need for intimacy and companionship. | |  |  | | |  |  | |  |  | | |  |

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|  | |  | | --- | | **Organizational: COMPREHENSIVE MENTAL HEALTH** | |  | | |  |  |
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|  | |  |  |  |  |  | | --- | --- | --- | --- | --- | |  | **Indicator #** | **Indicator** | **Met/Rated** | **Rating(Met,Not Met,NotRated)** | | O | L2 | Abuse/neglect reporting | **4/4** | **Met** | |  | L3 | Immediate Action | **5/5** | **Met** | |  | L4 | Action taken | **4/4** | **Met** | |  | L48 | HRC | **0/1** | **Not Met(0 % )** | |  | L74 | Screen employees | **4/4** | **Met** | |  | L75 | Qualified staff | **2/2** | **Met** | |  | L76 | Track trainings | **13/13** | **Met** | |  | L83 | HR training | **13/13** | **Met** | |  |  | | |  |

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|  | |  | | --- | | **Residential and Individual Home Supports:** | | | | |  |  |  |  |
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|  | |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  | **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 | 6/6 | 1/1 |  |  | 1/1 |  | **8/8** | **Met** | |  | L5 | Safety Plan | L | 2/2 | 1/1 |  |  | 1/1 |  | **4/4** | **Met** | | O | L6 | Evacuation | L | 2/2 | 1/1 |  |  | 1/1 |  | **4/4** | **Met** | |  | L7 | Fire Drills | L | 2/2 |  |  |  | 1/1 |  | **3/3** | **Met** | |  | L8 | Emergency Fact Sheets | I | 6/6 | 1/1 |  |  | 1/1 |  | **8/8** | **Met** | |  | L9 (07/21) | Safe use of equipment | I | 6/6 | 1/1 |  |  | 1/1 |  | **8/8** | **Met** | |  | L10 | Reduce risk interventions | I | 2/2 |  |  |  |  |  | **2/2** | **Met** | | O | L11 | Required inspections | L | 2/2 | 1/1 |  |  | 1/1 |  | **4/4** | **Met** | | O | L12 | Smoke detectors | L | 2/2 | 1/1 |  |  | 1/1 |  | **4/4** | **Met** | | O | L13 | Clean location | L | 2/2 | 1/1 |  |  | 1/1 |  | **4/4** | **Met** | |  | L14 | Site in good repair | L | 2/2 | 1/1 |  |  | 1/1 |  | **4/4** | **Met** | |  | L15 | Hot water | L | 2/2 | 1/1 |  |  | 0/1 |  | **3/4** | **Met** | |  | L16 | Accessibility | L | 2/2 | 1/1 |  |  | 1/1 |  | **4/4** | **Met** | |  | L17 | Egress at grade | L | 2/2 | 1/1 |  |  | 1/1 |  | **4/4** | **Met** | |  | L18 | Above grade egress | L |  | 1/1 |  |  |  |  | **1/1** | **Met** | |  | L19 | Bedroom location | L | 2/2 |  |  |  | 1/1 |  | **3/3** | **Met** | |  | L20 | Exit doors | L | 2/2 | 1/1 |  |  | 1/1 |  | **4/4** | **Met** | |  | L21 | Safe electrical equipment | L | 2/2 | 1/1 |  |  | 1/1 |  | **4/4** | **Met** | |  | L22 | Well-maintained appliances | L | 2/2 | 1/1 |  |  | 1/1 |  | **4/4** | **Met** | |  | L23 | Egress door locks | L | 1/1 |  |  |  | 1/1 |  | **2/2** | **Met** | |  | L24 | Locked door access | L | 2/2 |  |  |  | 1/1 |  | **3/3** | **Met** | |  | L25 | Dangerous substances | L | 2/2 |  |  |  | 1/1 |  | **3/3** | **Met** | |  | L26 | Walkway safety | L | 2/2 | 1/1 |  |  | 1/1 |  | **4/4** | **Met** | |  | L27 | Pools, hot tubs, etc. | L | 1/1 | 1/1 |  |  |  |  | **2/2** | **Met** | |  | L28 | Flammables | L | 1/1 |  |  |  | 1/1 |  | **2/2** | **Met** | |  | L29 | Rubbish/combustibles | L | 2/2 | 1/1 |  |  | 1/1 |  | **4/4** | **Met** | |  | L30 | Protective railings | L | 1/1 | 1/1 |  |  | 1/1 |  | **3/3** | **Met** | |  | L31 | Communication method | I | 6/6 | 1/1 |  |  | 1/1 |  | **8/8** | **Met** | |  | L32 | Verbal & written | I | 6/6 | 1/1 |  |  | 1/1 |  | **8/8** | **Met** | |  | L33 | Physical exam | I | 6/6 | 1/1 |  |  | 1/1 |  | **8/8** | **Met** | |  | L34 | Dental exam | I | 5/5 | 1/1 |  |  | 1/1 |  | **7/7** | **Met** | |  | L35 | Preventive screenings | I | 6/6 | 1/1 |  |  | 1/1 |  | **8/8** | **Met** | |  | L36 | Recommended tests | I | 6/6 | 1/1 |  |  | 1/1 |  | **8/8** | **Met** | |  | L37 | Prompt treatment | I | 6/6 | 1/1 |  |  | 1/1 |  | **8/8** | **Met** | | O | L38 | Physician's orders | I | 5/5 |  |  |  | 1/1 |  | **6/6** | **Met** | |  | L39 | Dietary requirements | I | 4/4 |  |  |  |  |  | **4/4** | **Met** | |  | L40 | Nutritional food | L | 2/2 |  |  |  | 1/1 |  | **3/3** | **Met** | |  | L41 | Healthy diet | L | 2/2 | 1/1 |  |  | 1/1 |  | **4/4** | **Met** | |  | L42 | Physical activity | L | 2/2 | 1/1 |  |  | 1/1 |  | **4/4** | **Met** | |  | L43 | Health Care Record | I | 6/6 | 1/1 |  |  | 1/1 |  | **8/8** | **Met** | |  | L44 | MAP registration | L | 2/2 |  |  |  | 1/1 |  | **3/3** | **Met** | |  | L45 | Medication storage | L | 2/2 |  |  |  | 1/1 |  | **3/3** | **Met** | | O | L46 | Med. Administration | I | 6/6 | 1/1 |  |  | 1/1 |  | **8/8** | **Met** | |  | L47 | Self medication | I | 3/3 | 1/1 |  |  | 1/1 |  | **5/5** | **Met** | |  | L49 | Informed of human rights | I | 6/6 | 1/1 |  |  | 1/1 |  | **8/8** | **Met** | |  | L50 (07/21) | Respectful Comm. | I | 6/6 | 1/1 |  |  | 1/1 |  | **8/8** | **Met** | |  | L51 | Possessions | I | 6/6 | 1/1 |  |  | 1/1 |  | **8/8** | **Met** | |  | L52 | Phone calls | I | 6/6 | 1/1 |  |  | 1/1 |  | **8/8** | **Met** | |  | L53 | Visitation | I | 6/6 | 1/1 |  |  | 1/1 |  | **8/8** | **Met** | |  | L54 (07/21) | Privacy | I | 5/6 | 1/1 |  |  | 1/1 |  | **7/8** | **Met (87.50 %)** | |  | L55 | Informed consent | I | 1/1 |  |  |  | 1/1 |  | **2/2** | **Met** | |  | L56 | Restrictive practices | I | 0/1 |  |  |  |  |  | **0/1** | **Not Met (0 %)** | |  | L61 | Health protection in ISP | I | 4/4 |  |  |  | 1/1 |  | **5/5** | **Met** | |  | L62 | Health protection review | I | 4/4 |  |  |  | 1/1 |  | **5/5** | **Met** | |  | L63 | Med. treatment plan form | I | 5/6 | 1/1 |  |  | 1/1 |  | **7/8** | **Met (87.50 %)** | |  | L64 | Med. treatment plan rev. | I | 6/6 | 1/1 |  |  | 1/1 |  | **8/8** | **Met** | |  | L67 | Money mgmt. plan | I | 6/6 | 0/1 |  |  | 1/1 |  | **7/8** | **Met (87.50 %)** | |  | L68 | Funds expenditure | I | 6/6 | 1/1 |  |  |  |  | **7/7** | **Met** | |  | L69 | Expenditure tracking | I | 6/6 | 1/1 |  |  |  |  | **7/7** | **Met** | |  | L70 | Charges for care calc. | I | 6/6 | 1/1 |  |  | 1/1 |  | **8/8** | **Met** | |  | L71 | Charges for care appeal | I | 6/6 | 1/1 |  |  | 1/1 |  | **8/8** | **Met** | |  | L77 | Unique needs training | I | 6/6 | 1/1 |  |  | 1/1 |  | **8/8** | **Met** | |  | L78 | Restrictive Int. Training | L | 0/1 |  |  |  |  |  | **0/1** | **Not Met (0 %)** | |  | L80 | Symptoms of illness | L | 2/2 | 1/1 |  |  | 1/1 |  | **4/4** | **Met** | |  | L81 | Medical emergency | L | 2/2 | 1/1 |  |  | 1/1 |  | **4/4** | **Met** | | O | L82 | Medication admin. | L | 2/2 |  |  |  | 1/1 |  | **3/3** | **Met** | |  | L84 | Health protect. Training | I | 4/4 |  |  |  | 1/1 |  | **5/5** | **Met** | |  | L85 | Supervision | L | 2/2 | 1/1 |  |  | 1/1 |  | **4/4** | **Met** | |  | L86 | Required assessments | I | 6/6 | 1/1 |  |  | 1/1 |  | **8/8** | **Met** | |  | L87 | Support strategies | I | 6/6 | 1/1 |  |  | 1/1 |  | **8/8** | **Met** | |  | L88 | Strategies implemented | I | 6/6 | 1/1 |  |  | 1/1 |  | **8/8** | **Met** | |  | L89 | Complaint and resolution process | L |  |  |  |  | 1/1 |  | **1/1** | **Met** | |  | L90 | Personal space/ bedroom privacy | I | 6/6 | 1/1 |  |  | 1/1 |  | **8/8** | **Met** | |  | L91 | Incident management | L | 2/2 | 1/1 |  |  | 1/1 |  | **4/4** | **Met** | |  | **#Std. Met/# 74 Indicator** |  |  |  |  |  |  |  |  | **72/74** |  | |  | **Total Score** |  |  |  |  |  |  |  |  | **79/82** |  | |  |  |  |  |  |  |  |  |  |  | **96.34%** |  | |  |  |  | | | |  |
|  |  | | | |  |  |  |  |
|  | |  | | --- | | **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 | 6/6 | **Met** | | C8 | | | | Family/guardian communication | 6/6 | **Met** | | C9 | | | | Personal relationships | 6/6 | **Met** | | C10 | | | | Social skill development | 6/6 | **Met** | | C11 | | | | Get together w/family & friends | 6/6 | **Met** | | C12 | | | | Intimacy | 4/6 | **Not Met (66.67 %)** | | C13 | | | | Skills to maximize independence | 6/6 | **Met** | | C14 | | | | Choices in routines & schedules | 6/6 | **Met** | | C15 | | | | Personalize living space | 2/2 | **Met** | | C16 | | | | Explore interests | 6/6 | **Met** | | C17 | | | | Community activities | 6/6 | **Met** | | C18 | | | | Purchase personal belongings | 6/6 | **Met** | | C19 | | | | Knowledgeable decisions | 6/6 | **Met** | | C20 (07/21) | | | | Emergency back-up plans | 6/6 | **Met** | | C46 | | | | Use of generic resources | 6/6 | **Met** | | C47 | | | | Transportation to/ from community | 6/6 | **Met** | | C48 | | | | Neighborhood connections | 6/6 | **Met** | | C49 | | | | Physical setting is consistent | 2/2 | **Met** | | C51 | | | | Ongoing satisfaction with services/ supports | 6/6 | **Met** | | C52 | | | | Leisure activities and free-time choices /control | 6/6 | **Met** | | C53 | | | | Food/ dining choices | 6/6 | **Met** | | C54 | | | | Assistive technology | 6/6 | **Met** | | **ABI-MFP Residential Services** |  |  |  | | | | | **Indicator #** | | | | **Indicator** | **Met/Rated** | **Rating** | | C7 | | | | Feedback on staff / care provider performance | 1/1 | **Met** | | C8 | | | | Family/guardian communication | 1/1 | **Met** | | C9 | | | | Personal relationships | 1/1 | **Met** | | C10 | | | | Social skill development | 1/1 | **Met** | | C11 | | | | Get together w/family & friends | 1/1 | **Met** | | C12 | | | | Intimacy | 1/1 | **Met** | | C13 | | | | Skills to maximize independence | 1/1 | **Met** | | C14 | | | | Choices in routines & schedules | 1/1 | **Met** | | C15 | | | | Personalize living space | 1/1 | **Met** | | C16 | | | | Explore interests | 1/1 | **Met** | | C17 | | | | Community activities | 1/1 | **Met** | | C18 | | | | Purchase personal belongings | 1/1 | **Met** | | C19 | | | | Knowledgeable decisions | 1/1 | **Met** | | C20 (07/21) | | | | Emergency back-up plans | 1/1 | **Met** | | C46 | | | | Use of generic resources | 1/1 | **Met** | | C47 | | | | Transportation to/ from community | 1/1 | **Met** | | C48 | | | | Neighborhood connections | 1/1 | **Met** | | C49 | | | | Physical setting is consistent | 1/1 | **Met** | | C51 | | | | Ongoing satisfaction with services/ supports | 1/1 | **Met** | | C52 | | | | Leisure activities and free-time choices /control | 1/1 | **Met** | | C53 | | | | Food/ dining choices | 1/1 | **Met** | | C54 | | | | Assistive technology | 1/1 | **Met** | | **Individual Home Supports** |  |  |  | | | | | **Indicator #** | | | | **Indicator** | **Met/Rated** | **Rating** | | C7 | | | | Feedback on staff / care provider performance | 1/1 | **Met** | | C8 | | | | Family/guardian communication | 1/1 | **Met** | | C9 | | | | Personal relationships | 1/1 | **Met** | | C10 | | | | Social skill development | 1/1 | **Met** | | C11 | | | | Get together w/family & friends | 1/1 | **Met** | | C12 | | | | Intimacy | 1/1 | **Met** | | C13 | | | | Skills to maximize independence | 1/1 | **Met** | | C14 | | | | Choices in routines & schedules | 1/1 | **Met** | | C15 | | | | Personalize living space | 1/1 | **Met** | | C16 | | | | Explore interests | 1/1 | **Met** | | C17 | | | | Community activities | 1/1 | **Met** | | C18 | | | | Purchase personal belongings | 1/1 | **Met** | | C19 | | | | Knowledgeable decisions | 1/1 | **Met** | | C20 (07/21) | | | | Emergency back-up plans | 1/1 | **Met** | | C21 | | | | Coordinate outreach | 1/1 | **Met** | | C46 | | | | Use of generic resources | 1/1 | **Met** | | C47 | | | | Transportation to/ from community | 1/1 | **Met** | | C48 | | | | Neighborhood connections | 1/1 | **Met** | | C49 | | | | Physical setting is consistent | 1/1 | **Met** | | C51 | | | | Ongoing satisfaction with services/ supports | 1/1 | **Met** | | C52 | | | | Leisure activities and free-time choices /control | 1/1 | **Met** | | C53 | | | | Food/ dining choices | 1/1 | **Met** | | C54 | | | | Assistive technology | 1/1 | **Met** | |  | | | |  |  |  | |  |  | | | |  |  |