



**PROVIDER REPORT
FOR**

**Cooperative Production Inc
PO Box 506
North Dighton, MA 02764**

December 05, 2025

Version

Public Provider Report

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

SUMMARY OF OVERALL FINDINGS

Provider Cooperative Production Inc

Review Dates 11/3/2025 - 11/7/2025

Service Enhancement Meeting Date 11/21/2025

Survey Team Michelle Boyd
Gina Ford
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Citizen Volunteers

Survey scope and findings for Residential and Individual Home Supports					
Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Residential and Individual Home Supports	9 location(s) 11 audit (s)	Targeted Review	DDS 20/23 Provider 61 / 64 81 / 87 2 Year License 11/21/2025-11/21/2027		DDS 6 / 7 Provider 36 / 39 42 / 46 Certified 11/21/2025 - 11/21/2027
Residential Services	5 location(s) 5 audit (s)			DDS Targeted Review	18 / 20
ABI-MFP Residential Services	4 location(s) 6 audit (s)			DDS Targeted Review	18 / 20
Planning and Quality Management (For all service groupings)				Full 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) 9 audit (s)	Full Review	68/71 2 Year License 11/21/2025-11/21/2027		35 / 36 Certified 11/21/2025 - 11/21/2027
Community Based Day Services	2 location(s) 7 audit (s)			Full Review	14 / 15
Employment Support Services	1 location(s) 2 audit (s)			Full Review	15 / 15
Planning and Quality Management (For all service groupings)				Full Review	6 / 6

EXECUTIVE SUMMARY :

Cooperative Production, Inc. (Co-Op) is a non-profit human service agency established in 1972 that serves adults and transition aged students with developmental and other disabilities, as well as individuals with acquired brain injuries who work and reside in the greater Taunton area, currently, the agency supports 275 individuals across all services.

The Department of Developmental Services (DDS) conducted a targeted review of licensing and Certification indicators for Cooperative Productions Inc, Residential services including ABI-MFP waiver services, where the agency completed a self-assessment of licensing and certification indicators .A Full review of licensing and certifications indicators for CBDS and Employment services was conducted.

Within the organizational indicators for oversight and service delivery in Residential services. Staff demonstrated knowledge of what constituted a reportable event, and their responsibilities as mandated reporters. In the domain of Human Rights, the agency had an effective Human Rights Committee that consisted of required membership per DDS regulations, the committee conducted quarterly meetings and maintained required expertise in all meetings during required reviews, the committee also made recommendations and followed up in subsequent meetings. In the domain of competent workforce, the agency maintained effective systems that ensured that all staff were current in all required trainings, new staff were hired in areas that matched their experience, and that licensed staff were current in their certifications and licenses.

At all reviewed locations in licensing, in the domain of personal safety, fire drills were conducted as required, and documentation confirmed that individuals evacuated safely within appropriate timeframes. Inspections for heating equipment and fire alarm systems were current, and all sites were clean and well maintained.

For licensing in Residential services, in the domain of healthcare and medication Management, Treatment protocols were in place for all individuals who required them and each protocol contained the necessary components. Staff were familiar with these protocols and demonstrated knowledge of individual diagnosis and medication needs. In all locations reviewed, medications were administered by certified staff per physician orders through the Medication Administration Program (MAP). At all homes the agency conducted regular reviews of medications to ensure that physician orders were current and that pharmacy labels and the Medication Administration Records aligned with physician orders, this practice eliminated medication errors and ensured better health outcomes for individuals.

For Licensing in Residential services, opportunities for improvement were identified in several areas. In the area of financial management, the agency needs to ensure that a shared or delegated money management plan is in place and/or a training plan is present for those individuals requiring one, with a plan to reduce or eliminate assistance if appropriate, the agency also needs to ensure that Money management plans are agreed to as required. In the area of incident reporting management, the agency needs to ensure that all reportable incidents are reported and finalized in HCSIS within required timelines, the agency also needs to ensure that Restraints incidents are reported within required timelines. In the Domain of Goal development and implementation, the agency needs to ensure that required assessments concerning individual needs and abilities, and the support strategies necessary to assist an individual to meet their goals and objectives are completed and submitted as part of the ISP within required timelines.

Within the organizational indicators for oversight and service delivery in Day services. Staff demonstrated knowledge of what constituted a reportable event, and their responsibilities as mandated reporters.

At two locations reviewed in Day services, in the domain of personal safety, fire drills were conducted as required, and documentation confirmed that individuals evacuated safely within appropriate timeframes. Inspections for heating equipment and fire alarm systems were current, and all sites were clean and well maintained.

For licensing in Day services, in the area of supportive technology for autonomy and independence in Employment services, use of supportive technology emerged as an area of great strength, one individual who had his own business was supported to use color coded money envelopes to track income from each business location, he was also supported to acquire a money counting machine to assist him in accurately counting of his business income before depositing it to his bank account. For CBDS, assistive technology assessments had been completed, and where support needs had been identified, staff were aware and knowledgeable of assistive technology that individuals were using, at one location, one individual was being supported to use a tablet to research community activities in his area that he would like to participate in.

For Certification within CBDS and Employment services. In the domain of choice and growth, individuals were given choice and control over what community activities they would choose from each day and the flexibility to change if they wanted to do another activity, for example, individuals participated in the City trunk or treat for the second year in a row, individuals were also supported to host their first ever Art show, and individuals were also invited to join the city mayor on stage during the Light the Green holiday celebration. Within CBDS, individuals were supported to participate in volunteer activities at the local food pantry, and at the Buttonwood Zoo park, one individual was also supported in regularly dropping off bottle caps at the Lions Club. In Employment services, individuals were actively engaged in employment of their choice and were integrated into their communities. Staff demonstrated familiarity with the interest and preferences of the individuals they supported, both written and verbal communication were respectful and person-centered.

For Licensing in CBDS and Employment services, opportunities for improvement were identified in several areas. In the Domain of Goal development and implementation, the agency needs to ensure that required assessments concerning individual needs and abilities, and the support strategies necessary to assist an individual to meet their goals and objectives are completed and submitted as part of the ISP within required timelines.

Opportunities for improvement in Certification for CBDS and Employment services were also identified. In the area of communication, the agency needs to ensure that individuals are offered opportunities to provide feedback at the time of hire, and on an ongoing basis on the performance of staff who support them

As a result of the survey, Cooperative Productions Inc, met 93% of licensing indicators in Residential services and will be issued a Two-Year License, the agency met 91 % of Certification indicators and is fully certified. Agency will submit follow up documentation for all licensing and certification indicators rated Not Met to the OQE office within 60 days of the SEM.

Within CBDS and Employment services, the agency met 96% of Licensing indicators and will be issued a Two-Year License, the agency met 97% of Certification indicators and is fully certified. Agency will submit follow up documentation to the OQE office within 60 days of the SEM.

Description of Self Assessment Process:

The self-assessment for Cooperative Production Inc's residential services inc. was conducted by the Quality Assurance Department using reviews conducted within the identified years by the DDS OQE team. Below outlines that Quality Assurance Department and their role with Cooperative Production Inc, the role of other departments in the process, the self-assessment process and the outcome of Cooperative Production Inc review in 2025.

The QA department has a QA manager and a QA specialist that schedule regular program reviews at the houses. The reviews are at a minimum quarterly and can increase in frequency or be amended if a trend of need arises. Additionally, the QA team attends vacancy meetings to ensure continuity of care during long term anticipated and not anticipated vacancies.

Each house has a Residential Coordinator, an Assistant Director, a Nurse Coordinator and there is further oversight by a Director of Operations

(administrative) and a Director of Healthcare Services. The field-based team is expected to follow-up on all identified "not met" indicators that

are identified through the review. There is a shared document that is expected to be updated as the not met areas are updated. Additionally, the field-based team is required to complete additional ongoing assessment of the programs at a more frequent cadence than the QA team.

Each department, Facilities, Residential Admin, Nursing, Day Habilitation, CBDS/ES and HRC have their own oversight mechanisms to ensure regulatory compliance. The QA team reviews their systems when conducting their quarterly reviews.

For Cooperative Production Inc's 2025 self-assessment we sampled 25% of ABI houses and 25% DDS funded houses. The QA team completed

the sample survey, reading through the reviews and notes. It was determined that all critical indicators were met. There were some indicators

identified as not met which will be outlined in the following chart with notes on corrective action.

Overall Cooperative Production Inc has done well supporting individuals safely while enhancing meaningful relationships and community

connections and complying with regulations. There are some processes that are rolling out that are enhancing systems that are already in place

while correcting issues identified. As Cooperative Production continues to work on addressing concerns identified we will strive to remain a

provider of choice for residential services in Massachusetts Department of Development Services System.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	9/10	1/10	
Residential and Individual Home Supports	72/77	5/77	
Residential Services ABI-MFP Residential Services			
Critical Indicators	8/8	0/8	
Total	81/87	6/87	93%
2 Year License			
# indicators for 60 Day Follow-up		6	

	Met / Rated	Not Met / Rated	% Met
Organizational	9/10	1/10	
Employment and Day Supports	59/61	2/61	
Community Based Day Services Employment Support Services			
Critical Indicators	8/8	0/8	
Total	68/71	3/71	96%
2 Year License			
# indicators for 60 Day Follow-up		3	

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

Indicator #	Indicator	Area Needing Improvement
L65	Restraint reports are submitted within required timelines.	Three out of twelve restraint reports did not meet required timeline. The agency needs to ensure that all restraint reports are completed within the mandatory timeline.

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

Indicator #	Indicator	Area Needing Improvement
L67	There is a written plan in place accompanied by a training plan when the agency has shared or delegated money management responsibility.	In five out ten individuals, for whom the agency had shared or delegated money management responsibility, the money management plan was incomplete or lacked at least one of the required components. The agency needs to ensure that the money management plan is in place and training plan is present (where applicable) and there is a plan to reduce or eliminate assistance or clinical evaluation.
L91	Incidents are reported and reviewed as mandated by regulation.	In five out of nine locations incident reports were either created, submitted or finalized outside of required timelines. The agency needs to ensure all incident reports are completed within the required timeline.

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

Indicator #	Indicator	Issue identified	Action planned to address
L7	Fire drills are conducted as required.	Fire Drills were not being completed as required in the Safety Plan.	Fire Drill Tracking built into new Coordinator and AD monthly Dashboard, retraining will occur with Coordinators. Directors will track monthly. QA department will track quarterly.
L36	Recommended tests and appointments with specialists are made and kept.	Recommended tests and appointments with specialists for some individuals had not occurred as required.	Review of C-file for medical appointment documentation and verify follow up as applicable. Co-op has added LPN oversight positions for both ABI & Residential to assist in ensuring completion of preventive screenings.
L85	The agency provides ongoing supervision, oversight and staff development.	On-going supervision was not occurring as required.	Rolled out a new comprehensive supervision process and form that will align with person centered care and multi funder regulations which will also feed into annual evaluations.

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

Indicator #	Indicator	Area Needing Improvement
L86	Required assessments concerning individual needs and abilities are completed in preparation for the ISP.	The submission of required ISP assessments did not meet required timelines for four of six individuals reviewed. The agency needs to ensure that the submission of ISP required assessments meet the required timelines.
L87	Support strategies necessary to assist an individual to meet their goals and objectives are completed and submitted as part of the ISP.	The submission of ISP support strategies did not meet required timelines for four of seven individuals reviewed. The agency needs to ensure that the submission of ISP support strategies meet the required timelines.

CERTIFICATION FINDINGS

	Reviewed By	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	DDS	6/6	0/6	
Residential and Individual Home Supports	DDS 0/1 Provider 36/39	36/40	4/40	
ABI-MFP Residential Services	DDS 0/1 Provider 18/19	18/20	2/20	
Residential Services	DDS 0/0 Provider 18/20	18/20	2/20	
Total		42/46	4/46	91%
Certified				

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	6/6	0/6	
Employment and Day Supports	29/30	1/30	
Community Based Day Services	14/15	1/15	
Employment Support Services	15/15	0/15	
Total	35/36	1/36	97%
Certified			

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

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.	Five of six individuals reviewed were not given the opportunity to provide feedback on incoming staff or on staff on an ongoing basis. The agency needs to ensure that individuals are given the opportunity to provide their input on staff both at the time of hire and on an ongoing basis.

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

Indicator #	Indicator	Issues identified	Action planned to address
C12	Individuals are supported to explore, define, and express their need for intimacy and companionship.	Individuals had not been supported in the area of intimacy and companionship	Added three trained Sexuality Educators, there is one more schedule Will continue to add this as a Universal Topic to the house meeting agendas. Will roll out a new assessment to ensure there is both Universal and more Targeted supports that are proactive and not reactive

Residential 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.	Individuals had not been offered opportunities to provide feedback at the time of hire, and on an on-going basis about performance of staff that supported them.	Effective 10/1/25 Co-op returned to a hiring process that includes the persons served in interviewing potential staff. Co-op collects feedback on staff performance with annual evaluations

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

Indicator #	Indicator	Issues identified	Action planned to address
C12	Individuals are supported to explore, define, and express their need for intimacy and companionship.	Individuals had not been supported in the area of intimacy and companionship	Added three trained Sexuality Educators, there is one more schedule Will continue to add this as a Universal Topic to the house meeting agendas. Will roll out a new assessment to ensure there is both Universal and more Targeted supports that are proactive and not reactive

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

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 of seven individuals reviewed were not given the opportunity to provide feedback on incoming staff or on staff on an ongoing basis. The agency needs to ensure that individuals are given the opportunity to provide their input on staff both at the time of hire and on an ongoing basis.

MASTER SCORE SHEET LICENSURE

Organizational: Cooperative Production Inc

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
Ⓟ L2	Abuse/neglect reporting	11/11	Met
L3	Immediate Action	14/14	Met
L4	Action taken	14/14	Met
L48	HRC	1/1	Met
L65	Restraint report submit	9/12	Not Met(75.00 %)
L66	HRC restraint review	12/12	Met
L74	Screen employees	3/3	Met
L75	Qualified staff	3/3	Met
L76	Track trainings	18/19	Met(94.74 %)
L83	HR training	18/19	Met(94.74 %)

Residential and Individual Home Supports:

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	DDS	5/5				4/4		9/9	Met
Ⓟ L6	Evacuation	L	DDS	5/5				4/4		9/9	Met
L7	Fire Drills	L	Provider	-						-	Not Met
L8	Emergency Fact Sheets	I	Provider	-						-	Met
L9 (07/21)	Safe use of equipment	I	Provider	-						-	Met
L10	Reduce risk interventions	I	Provider	-						-	Met

Ind. #	Ind.	Loc. or Individ.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
☒ L11	Required inspections	L	DDS	5/5				4/4		9/9	Met
☒ L12	Smoke detectors	L	DDS	5/5				4/4		9/9	Met
☒ L13	Clean location	L	DDS	5/5				4/4		9/9	Met
L14	Site in good repair	L	Provider	-						-	Met
L15	Hot water	L	Provider	-						-	Met
L16	Accessibility	L	Provider	-						-	Met
L17	Egress at grade	L	Provider	-						-	Met
L18	Above grade egress	L	Provider	-						-	Met
L19	Bedroom location	L	Provider	-						-	Met
L20	Exit doors	L	Provider	-						-	Met
L21	Safe electrical equipment	L	Provider	-						-	Met
L22	Well-maintained appliances	L	Provider	-						-	Met
L23	Egress door locks	L	Provider	-						-	Met
L24	Locked door access	L	Provider	-						-	Met
L25	Dangerous substances	L	Provider	-						-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L26	Walkway safety	L	Provider	-						-	Met
L28	Flammables	L	Provider	-						-	Met
L29	Rubbish/combustibles	L	Provider	-						-	Met
L30	Protective railings	L	Provider	-						-	Met
L31	Communication method	I	Provider	-						-	Met
L32	Verbal & written	I	Provider	-						-	Met
L33	Physical exam	I	Provider	-						-	Met
L34	Dental exam	I	Provider	-						-	Met
L35	Preventive screenings	I	DDS	4/5				5/6		9/11	Met (81.82%)
L36	Recommended tests	I	Provider	-						-	Not Met
L37	Prompt treatment	I	Provider	-						-	Met
☐ L38	Physician's orders	I	DDS	5/5				6/6		11/11	Met
L39	Dietary requirements	I	Provider	-						-	Met
L40	Nutritional food	L	Provider	-						-	Met
L41	Healthy diet	L	Provider	-						-	Met
L42	Physical activity	L	Provider	-						-	Met
L43	Health Care Record	I	Provider	-						-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L44	MAP registration	L	Provider	-						-	Met
L45	Medication storage	L	Provider	-						-	Met
L46	Med. Administration	I	DDS	5/5				6/6		11/11	Met
L49	Informed of human rights	I	Provider	-						-	Met
L50 (07/21)	Respectful Comm.	I	Provider	-						-	Met
L51	Possessions	I	Provider	-						-	Met
L52	Phone calls	I	Provider	-						-	Met
L53	Visitation	I	Provider	-						-	Met
L54 (07/21)	Privacy	I	Provider	-						-	Met
L55	Informed consent	I	Provider	-						-	Met
L57	Written behavior plans	I	Provider	-						-	Met
L60	Data maintenance	I	DDS	2/2						2/2	Met
L61	Health protection in ISP	I	Provider	-						-	Met
L62	Health protection review	I	Provider	-						-	Met
L63	Med. treatment plan form	I	Provider	-						-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L64	Med. treatment plan rev.	I	Provider	-						-	Met
L67	Money mgmt. plan	I	DDS	4/5				1/5		5/10	Not Met (50.0%)
L68	Funds expenditure	I	Provider	-						-	Met
L69	Expenditure tracking	I	Provider	-						-	Met
L70	Charges for care calc.	I	Provider	-						-	Met
L71	Charges for care appeal	I	Provider	-						-	Met
L77	Unique needs training	I	Provider	-						-	Met
L79	Restraint training	L	Provider	-						-	Met
L80	Symptoms of illness	L	DDS	5/5				4/4		9/9	Met
L81	Medical emergency	L	Provider	-						-	Met
L82	Medication admin.	L	DDS	5/5				4/4		9/9	Met
L84	Health protect. Training	I	Provider	-						-	Met
L85	Supervision	L	Provider	-						-	Not Met
L86	Required assessments	I	Provider	-						-	Met
L87	Support strategies	I	Provider	-						-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L88	Strategies implemented	I	Provider	-						-	Met
L89	Complaint and resolution process	L	Provider	-						-	Met
L90	Personal space/bedroom privacy	I	Provider	-						-	Met
L91	Incident management	L	DDS	2/5				2/4		4/9	Not Met (44.44%)
L93 (05/22)	Emergency back-up plans	I	Provider	-						-	Met
L94 (05/22)	Assistive technology	I	Provider	-						-	Met
L96 (05/22)	Staff training in devices and applications	I	Provider	-						-	Met
L99 (05/22)	Medical monitoring devices	I	Provider	-						-	Met
#Std. Met/# 77 Indicator										72/77	
Total Score										81/87	
										93.10%	

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	2/2		6/7	8/9	Met (88.89 %)
L5	Safety Plan	L			2/2	2/2	Met
Ⓟ L6	Evacuation	L			2/2	2/2	Met
L7	Fire Drills	L			2/2	2/2	Met
L8	Emergency Fact Sheets	I	1/2		7/7	8/9	Met (88.89 %)
L9 (07/21)	Safe use of equipment	I	1/1		6/6	7/7	Met
L10	Reduce risk interventions	I			1/1	1/1	Met
Ⓟ L11	Required inspections	L			2/2	2/2	Met
Ⓟ L12	Smoke detectors	L			2/2	2/2	Met
Ⓟ L13	Clean location	L			2/2	2/2	Met
L14	Site in good repair	L			2/2	2/2	Met
L15	Hot water	L			2/2	2/2	Met
L16	Accessibility	L			2/2	2/2	Met
L17	Egress at grade	L			2/2	2/2	Met
L20	Exit doors	L			2/2	2/2	Met
L21	Safe electrical equipment	L			2/2	2/2	Met
L22	Well-maintained appliances	L			2/2	2/2	Met
L25	Dangerous substances	L			2/2	2/2	Met
L26	Walkway safety	L			2/2	2/2	Met
L28	Flammables	L			2/2	2/2	Met
L29	Rubbish/com bustibles	L			2/2	2/2	Met
L30	Protective railings	L			2/2	2/2	Met
L31	Communication method	I	2/2		7/7	9/9	Met

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L32	Verbal & written	I	2/2		6/6	8/8	Met
L37	Prompt treatment	I	2/2		6/6	8/8	Met
Ⓡ L38	Physician's orders	I	1/1		5/5	6/6	Met
L39	Dietary requirements	I			3/3	3/3	Met
L44	MAP registration	L			1/1	1/1	Met
L45	Medication storage	L			1/1	1/1	Met
Ⓡ L46	Med. Administration	I	1/1		4/4	5/5	Met
L49	Informed of human rights	I	2/2		6/7	8/9	Met (88.89 %)
L50 (07/21)	Respectful Comm.	I	2/2		7/7	9/9	Met
L51	Possessions	I	2/2		7/7	9/9	Met
L52	Phone calls	I	2/2		7/7	9/9	Met
L54 (07/21)	Privacy	I	2/2		7/7	9/9	Met
L55	Informed consent	I	2/2		6/6	8/8	Met
L57	Written behavior plans	I	1/1			1/1	Met
L60	Data maintenance	I	1/1			1/1	Met
L61	Health protection in ISP	I	1/1		5/5	6/6	Met
L62	Health protection review	I			4/4	4/4	Met
L63	Med. treatment plan form	I			3/3	3/3	Met
L64	Med. treatment plan rev.	I			3/3	3/3	Met
L67	Money mgmt. plan	I	1/1			1/1	Met

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L68	Funds expenditure	I	1/1			1/1	Met
L69	Expenditure tracking	I	1/1			1/1	Met
L73	DOL certificate	L			1/1	1/1	Met
L77	Unique needs training	I	2/2		7/7	9/9	Met
L79	Restraint training	L	1/1			1/1	Met
L80	Symptoms of illness	L	1/1		2/2	3/3	Met
L81	Medical emergency	L	1/1		2/2	3/3	Met
Ⓡ L82	Medication admin.	L			1/1	1/1	Met
L84	Health protect. Training	I	1/1		5/5	6/6	Met
L85	Supervision	L	1/1		2/2	3/3	Met
L86	Required assessments	I	1/1		3/5	4/6	Not Met (66.67 %)
L87	Support strategies	I	1/1		3/6	4/7	Not Met (57.14 %)
L88	Strategies implemented	I	2/2		7/7	9/9	Met
L91	Incident management	L	1/1		2/2	3/3	Met
L93 (05/22)	Emergency back-up plans	I	2/2		7/7	9/9	Met
L94 (05/22)	Assistive technology	I	2/2		7/7	9/9	Met
L96 (05/22)	Staff training in devices and applications	I	1/1		7/7	8/8	Met
L99 (05/22)	Medical monitoring devices	I			2/2	2/2	Met
#Std. Met/# 61 Indicator						59/61	
Total Score						68/71	
						95.77%	

MASTER SCORE SHEET CERTIFICATION

Certification - Planning and Quality Management

	Indicator #	Indicator		Met/Rated	Rating
	C1	Provider data collection		1/1	Met
	C2	Data analysis		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	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	-	Not Met (0 %)
C13	Skills to maximize independence	Provider	-	Met
C14	Choices in routines & schedules	Provider	-	Met
C15	Personalize living space	Provider	-	Met
C16	Explore interests	Provider	-	Met
C17	Community activities	Provider	-	Met
C18	Purchase personal belongings	Provider	-	Met
C19	Knowledgeable decisions	Provider	-	Met
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

Residential Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C51	Ongoing satisfaction with services/ supports	Provider	-	Met
C52	Leisure activities and free-time choices /control	Provider	-	Met
C53	Food/ dining choices	Provider	-	Met

ABI-MFP Residential Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C7	Feedback on staff / care provider performance	DDS	1/6	Not Met (16.67 %)
C8	Family/guardian communication	Provider	-	Met
C9	Personal relationships	Provider	-	Met
C10	Social skill development	Provider	-	Met
C11	Get together w/family & friends	Provider	-	Met
C12	Intimacy	Provider	-	Not Met (0 %)
C13	Skills to maximize independence	Provider	-	Met
C14	Choices in routines & schedules	Provider	-	Met
C15	Personalize living space	Provider	-	Met
C16	Explore interests	Provider	-	Met
C17	Community activities	Provider	-	Met
C18	Purchase personal belongings	Provider	-	Met
C19	Knowledgeable decisions	Provider	-	Met
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

Community Based Day Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	5/7	Not Met (71.43 %)
C8	Family/guardian communication	7/7	Met
C13	Skills to maximize independence	7/7	Met
C37	Interpersonal skills for work	6/6	Met
C38 (07/21)	Habilitative & behavioral goals	6/7	Met (85.71 %)
C39 (07/21)	Support needs for employment	6/7	Met (85.71 %)
C40	Community involvement interest	7/7	Met
C41	Activities participation	7/7	Met
C42	Connection to others	7/7	Met
C43	Maintain & enhance relationship	7/7	Met
C44	Job exploration	6/7	Met (85.71 %)
C45	Revisit decisions	7/7	Met
C46	Use of generic resources	7/7	Met
C47	Transportation to/ from community	7/7	Met
C51	Ongoing satisfaction with services/ supports	7/7	Met

Employment Support Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	2/2	Met
C8	Family/guardian communication	2/2	Met
C26	Benefits analysis	2/2	Met
C28	Relationships w/businesses	1/1	Met
C30	Work in integrated settings	2/2	Met
C31	Job accommodations	2/2	Met
C32	At least minimum wages earned	2/2	Met
C33	Employee benefits explained	1/1	Met
C34	Support to promote success	2/2	Met

Employment Support Services

Indicator #	Indicator	Met/Rated	Rating
C35	Feedback on job performance	2/2	Met
C36	Supports to enhance retention	2/2	Met
C37	Interpersonal skills for work	1/1	Met
C47	Transportation to/ from community	2/2	Met
C50	Involvement/ part of the Workplace culture	2/2	Met
C51	Ongoing satisfaction with services/ supports	2/2	Met