

PROVIDER REPORT FOR

DELTA PROJECTS 118 Allied Drive Dedham, MA 02026

December 13, 2022

Version

Public Provider Report

Prepared by the Department of Developmental Services
OFFICE OF QUALITY ENHANCEMENT

SUMMARY OF OVERALL FINDINGS

Provider DELTA PROJECTS

Review Dates 10/11/2022 - 10/17/2022

Service Enhancement

Meeting Date

11/14/2022

Survey Team Raymond Obeng

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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	14 location(s) 17 audit (s)	Targeted Review	DDS 23/26 Provider 67 / 67		DDS 0 / 0 Provider 67 / 67					
			90 / 93 2 Year License 11/14/2022- 11/14/2024		67 / 67 Certified 11/14/2022 - 11/14/2024					
Residential Services	11 location(s) 11 audit (s)			DDS Targeted Review	20 / 20					
ABI-MFP Residential Services	1 location(s) 3 audit (s)			DDS Targeted Review	20 / 20					
Respite Services	1 location(s) 1 audit (s)			No Review	No Review					
Individual Home Supports	1 location(s) 2 audit (s)		DDS Targeted Review		21 / 21					
Planning and Quality Management (For all service groupings)				DDS Targeted Review	6 / 6					
Survey scope and finding	gs for Employ	ment and Da	y Supports							
Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level					
Employment and Day Supports	1 location(s) 7 audit (s)	Targeted Review	DDS 16/17 Provider 60 / 60		DDS 1 / 2 Provider 19 / 19					
			76 / 77 2 Year License 11/14/2022- 11/14/2024		20 / 21 Certified 11/14/2022 - 11/14/2024					
Community Based Day Services	1 location(s) 7 audit (s)			DDS Targeted Review	14 / 15					
Planning and Quality Management (For all service groupings)				DDS Targeted Review	6/6					

EXECUTIVE SUMMARY:

Delta Projects is a non-profit human services agency based in Dedham MA. For more than forty years the agency has been providing an array of services and supports to individuals with Intellectual Disabilities, Developmental Disabilities, Autism Spectrum Disorder, as well as Traumatic and Acquired Brain Injury. The agency also supports people with varied mental health issues and needs, ranging from occasional support to intense behavioral needs and monitoring due to forensic involvement. Delta Projects offers services via its residential and day/employment services.

For this 2022 (FY23) Survey, Delta Projects was offered, and elected to perform a provider self-assessment of all licensure and certification indicators. The Department of Developmental Services (DDS) Metro Office of Quality Enhancement conducted a targeted licensing and certification review of the agencies DDS licensed services including Twenty-four hour Residential Supports (including ABI twenty-four hour Residential Support), Individual Home Supports, Respite, and Community Based Day Services (CBDS). The scope of this review included licensing and certification indicators that were not met at the agency's last survey, critical indicators, as well as new and changed indicators.

Delta Project's commitment to the safety and wellbeing of people served was evidenced across residential and day/employment service groupings. Allegations of abuse and neglect were reported as required, and restraints were submitted and reviewed within the required timelines. Environmentally, heating system and other required inspections were current, and fire detection and suppression systems had current inspections and were found to be working properly. Regarding personal safety, individuals were supported to evacuate from residences and day sites safely in under 2.5 minutes, and the agency had back-up plans in place should an emergency arise.

In both residential and day services, medication was administered according to physician's orders and were properly documented. Additionally, medical Treatment Protocols were followed, corresponding orders were present and current, and staff were properly trained on them. Health care record reviews also showed the information to be accurate and up to date. Relative to communication, staff across the agency demonstrated highly respectful communication with and about the individuals served both in written and spoken word. Individuals also had privacy when taking care of personal needs, and most had been assessed as to their potential needs around assistive technologies that would promote independence.

While Delta Projects mostly demonstrated a strong commitment to the quality of the services it provides, there are areas where the agency should give additional attention. The agency must train all staff on all mandated training topics within the required frequency. In the residential services grouping, water temperature in the homes must be maintained to be within the required temperature range of 110 -120. In day services, written plans must be developed for each individual which identifies job goals and the supports needed to potentially transition into employment.

Delta Projects met 97% of licensing indicators in its residential services grouping earning a two-year license; it met 99% of licensing indicators in day/employment services grouping earning a two-year license for that service as well. Delta Projects will conduct its own follow-up on indicators that were not met at both residential and day services within 60 days of the SEM meeting and submit the findings to the DDS Office of Quality Enhancement. The agency is certified for both residential (100%) and day/employment (95%) service groupings.

Description of Self Assessment Process:

Self Assessment Methodology (Residential, Respite, ABI, IHS)

After our 2019 Delta Projects OQE Survey and Certification Review, we made adjustments to our Internal Monitoring Process, modeled after the OQEAuditTool/ Residential Survey Worksheet. Audits have been conducted, over the last two plus years, by our Residential Operations (Directors of Residential Services), Nursing, Clinical and Facility staff. We found this process to be very effective in identifying areas needing improvement and trends resulting in additional training. Residential Managers have expressed satisfaction with this process and the opportunity it provided for them to become more familiar with the OQE Process, increasing their confidence and preparedness.

For our first ever Provider Self Assessment, we conducted full reviews at seven residential sites, one Respite, and our ABI and In Home Supports Programs. The sample of residential sites was chosen based on Director of Residential Services (DRS) oversight. Seven DRS's oversee 6-7sites, with the eight overseeing our Respite and ABI Programs. We chose one site/individual from each of the seven to get a cross section sample. We chose our newer Respite site, as it has never received a OQE review. Lastly, given we only have one ABI and one IHS site, we reviewed those. The Director of Quality and Improvement and Quality Manager conducted the reviews.

The Self Assessments consisted of on-site reviews of Personal Safety, Environmental Safety, Communication, Health and Medication, Human Rights, BSP/PBS Plans/ Restrictive Practices, Funds Management, Community Access and Integration, Goal Accomplishment/Skill Acquisition, Health Related Supports/Protective Equipment, Assistive Technology, and Competent Workforce. Information was obtained through documentation reviews, individual and staff interviews, and site inspections. Offsite reviews consisted of HCSIS reviews of Investigations, Incident and Restraint Reporting, Human Rights Committee composition, meeting minutes, site visits and by-laws.

Staff interviewed were knowledgeable about the individuals, including their ISP Goals, Behavior Support Plans, and medical needs. Individuals interviewed expressed satisfaction with their staff, homes, and services they receive. Two of them spoke of their current relationships with significant others and how the staff support them in maintaining them. Several individuals told of their vacations and time spent with family. One gentleman was proud to discuss his role as an Usher at his Church, and another talked about his volunteer work at the Red Cross. When asked if there was anything they would like to learn to do on their own without the support of staff one individual mentioned wanting to learn to take his medication on his own. With that, the Residential Manger contacted the site Nurse and arranged for a plan to be developed for him. Positive and respectful interactions between and individuals were observed at all homes.

Positive Highlights

Delta Projects has embarked on home improvements at several homes since June 2020, some of which were observed during this Self Assessment Review. Examples are: kitchen and bathroom remodeling, roof and deck replacements, installation of walkways and driveway repairs, central air conditioning installation, siding and gutter replacement, fencing and flooring installations to name a few. The Agency has a plan in place with specific improvements scheduled for the coming year as well. Assistive Technology Assessments have been completed with all individuals, with identified plans and staff training in place. Several individuals, with referrals from their Service Coordinators, have participated in Assessments through Proven Behavior Solutions, LLC and have received equipment and training from them as well. We have an upcoming Residential Manager training scheduled in November with Paul Simeone of Proven Behavior Solutions, to present a variety of Assistive Technology options to assist them in addressing the needs of our individuals.

Self-Assessment Methodology (CBDS)

For the self-assessment, seven(?) individuals from CBDS were selected for review using the DDS Day/Employment Services-Survey Worksheet and a process equivalent to the process used by the OQE Survey Team. A variety of sources were used to score each indicator including, interviews with individuals and program staff, confidential record review, and facilities and environmental review. Additionally, a review at the organization level was conducted by the agency for applicable indicators. The CBDS portion of the audit was conducted by the Director of Day Operations, with results reported to the Director of Quality Assurance and the President and CEO.

Positive Highlights (CBDS)

The CBDS program is very proud of what it has accomplished despite the COVID pandemic. Within a week of closing, Delta's CBDS program was utilizing Zoom to provide virtual services and staff were

delivering care packages of games, activities and craft supplies to individuals in their homes to support and augment virtual programming. We reopened the program partially as soon as it was possible to do so, and then were one of the first agencies to fully reopen our doors. It is evident when you walk in, that individuals here enjoy the program, self-regulate negative emotions, have strong social connections, and are growing in their skills and abilities -making strides toward greater independence and job readiness.

Prior to the pandemic, the CBDS program was turning away referrals due to space limitations. In 2021 the agency began the process of renegotiating its lease and in 2022 completed a large renovation to the CBDS space, providing additional rooms with the goal of being able to accommodate more individuals and reduce its waiting list. The biggest challenge we now face is staffing. The agency is working

aggressively to address the staffing crisis and to fill staff vacancies so that we ca begin accepting new referrals.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	9/10	1/10	
Residential and Individual Home Supports	81/83	2/83	
Residential Services Individual Home Supports Respite Services ABI-MFP Residential Services			
Critical Indicators	8/8	0/8	
Total	90/93	3/93	97%
2 Year License			
# indicators for 60 Day Follow-up		3	

	Met / Rated	Not Met / Rated	% Met
Organizational	9/10	1/10	
Employment and Day Supports	67/67	0/67	
Community Based Day Services			
Critical Indicators	8/8	0/8	
Total	76/77	1/77	99%
2 Year License			
# indicators for 60 Day Follow-up		1	

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

Indicator #	Indicator	Area Needing Improvement
	a system to track required trainings.	Fifteen of twenty staff reviewed had not undergone Positive Behavioral Support (PBS) training. The agency must use its tracking system to ensure that all staff undergo required trainings at the frequency at which they are required.

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

Indicator #	Indicator # Indicator Area Needing Improvement					
L15	Hot water temperature tests between 110 and 120 degrees (as of 1/2014).	At three of fourteen homes, hot water temperature was found to be outside of the required range of 110-120 degrees. The agency must ensure that the water temperature at all its sites measure within the required range.				
L91	Incidents are reported and reviewed as mandated by regulation.	At four of the fourteen sites where reviews occurred, incidents were submitted and/or finalized incidents outside the required timelines. The agency must submit and finalize incidents within the required timelines on HCSIS.				

CERTIFICATION FINDINGS

	Reviewed By	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	DDS 0/0 Provider 6/6	6/6	0/6	
Residential and Individual Home Supports	DDS 0/0 Provider 61/61	61/61	0/61	
ABI-MFP Residential Services	DDS 0/0 Provider 20/20	20/20	0/20	
Individual Home Supports	DDS 0/0 Provider 21/21	21/21	0/21	
Residential Services	DDS 0/0 Provider 20/20	20/20	0/20	
Respite Services		0/0	0/0	
Total		67/67	0/67	100%
Certified				

	Reviewed By	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	DDS 0/0 Provider 6/6	6/6	0/6	
Employment and Day Supports	DDS 1/2 Provider 13/13	14/15	1/15	
Community Based Day Services	DDS 1/2 Provider 13/13	14/15	1/15	
Total		20/21	1/21	95%
Certified				

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

Indicator #	Indicator	Area Needing Improvement
C39 (07/21)	There is a plan developed to identify job goals and support needs that would lead to movement into supported employment.	None of the seven individuals reviewed in Community Based Day Supports (CBDS) had a detailed written plan in place identifying job goals and support needs which could support a move to employment. Such a plan must be in place for each individual in the CBDS program not yet of retirement age. The agency needs to develop written personcentered plans for each individual based on the assessment of unique learning styles and needs.

MASTER SCORE SHEET LICENSURE

Organizational: DELTA PROJECTS

Indicator #	Indicator	Reviewed by	Met/Rated	Rating(Met,Not Met,NotRated)
₽ L2	Abuse/neglect reporting	DDS	15/15	Met
L3	Immediate Action	Provider	-	Met
L4	Action taken	Provider	-	Met
L48	HRC	Provider	-	Met
L65	Restraint report submit	DDS	94/107	Met(87.85 %)
L66	HRC restraint review	Provider	-	Met
L74	Screen employees	Provider	-	Met
L75	Qualified staff	Provider	-	Met
L76	Track trainings	DDS	5/20	Not Met(25.00 %)
L83	HR training	Provider	-	Met

Residential and Individual Home Supports:

Ind.#	Ind.	Loc. or Indiv.	Reviewe d by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI- MFP Res. Sup.	ABI- MFP Place.	Total Met/Rat ed	Rating
L1	Abuse/n eglect training	I	Provider	-	-		-	-	-	-	Met
L3	Immedi ate Action	L	Provider	-	-		-	-	-	-	Met
L5	Safety Plan	L	Provider	-	-		-	-	-	-	Met
₽ L6	Evacuat ion	L	DDS	11/11	1/1		1/1	1/1		14/14	Met
L7	Fire Drills	L	Provider	-	-		-	-	-	-	Met
L8	Emerge ncy Fact Sheets	I	Provider	-	-		-	-	-	-	Met
L9 (07/21)	Safe use of equipm ent	I	DDS	11/11	2/2		1/1	3/3		17/17	Met
L10	Reduce risk interven tions	I	Provider	-	-		-	-	-	-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewe d by	Res. Sup.	Ind. Home Sup.	Resp.	ABI- MFP Res. Sup.	ABI- MFP Place.	Total Met/Rat ed	Rating
₽ L11	Require d inspecti ons	L	DDS	11/11	1/1	1/1	1/1		14/14	Met
₽ L12	Smoke detector s	L	DDS	11/11	1/1	1/1	1/1		14/14	Met
₽ L13	Clean location	L	DDS	11/11	1/1	1/1	1/1		14/14	Met
L14	Site in good repair	L	Provider	-	-	-	-	-	-	Met
L15	Hot water	L	DDS	8/11	1/1	1/1	1/1		11/14	Not Met (78.57 %)
L16	Accessi bility	L	Provider	-	-	-	-	-	-	Met
L17	Egress at grade	L	Provider	-	-	-	-	-	-	Met
L18	Above grade egress	L	Provider	-	-	-	-	-	-	Met
L19	Bedroo m location	L	Provider	-	-	-	-	-	-	Met
L20	Exit doors	L	Provider	-	-	-	-	-	-	Met
L21	Safe electrica I equipm ent	L	Provider	-	-	-	-	-	-	Met
L22	Well- maintain ed applianc es	L	Provider	-	-	-	-	-	-	Met
L23	Egress door locks	L	DDS		1/1				1/1	Met
L24	Locked door access	L	DDS		1/1				1/1	Met
L25	Danger ous substan ces	L	Provider	-	-	-	-	-	-	Met

Ind.#	Ind.	Loc. or Indiv.	Reviewe d by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI- MFP Res. Sup.	ABI- MFP Place.	Total Met/Rat ed	Rating
L26	Walkwa y safety	L	Provider	-	-		-	-	-	-	Met
L28	Flamma bles	L	Provider	-	-		-	-	-	-	Met
L29	Rubbish /combus tibles	L	Provider	-	-		-	-	-	-	Met
L30	Protecti ve railings	L	DDS	11/11	0/1		1/1	1/1		13/14	Met (92.86 %)
L31	Commu nication method	Ι	Provider	-	-		-	-	-	-	Met
L32	Verbal & written	I	Provider	-	-		-	-	-	-	Met
L33	Physical exam	I	Provider	1	-		-	-	-	-	Met
L34	Dental exam	I	Provider	-	-		-	-	-	-	Met
L35	Preventi ve screenin gs	I	Provider	-	-		-	-	-	-	Met
L36	Recom mended tests	I	Provider	-	-		-	-	-	-	Met
L37	Prompt treatme nt	I	Provider	-	-		-	-	-	-	Met
₽ L38	Physicia n's orders	Ι	DDS	8/8			1/1	3/3		12/12	Met
L39	Dietary require ments	I	Provider	-	-		-	-	-	-	Met
L40	Nutrition al food	L	Provider	-	-		-	-	-	-	Met
L41	Healthy diet	L	Provider	-	-		-	-	-	-	Met
L42	Physical activity	L	Provider	-	-		-	-	-	-	Met
L43	Health Care Record	I	DDS	11/11	2/2			3/3		16/16	Met

Ind.#	Ind.	Loc. or Indiv.	Reviewe d by	Res. Sup.	Ind. Home Sup.	Resp.	ABI- MFP Res. Sup.	ABI- MFP Place.	Total Met/Rat ed	Rating
L44	MAP registrat ion	L	Provider	-	-	-	-	-	-	Met
L45	Medicati on storage	L	Provider	-	-	-	-	-	-	Met
₽ L46	Med. Adminis tration	I	DDS	10/11		1/1	3/3		14/15	Met (93.33 %)
L47	Self medicati on	I	Provider	-	-	-	-	-	-	Met
L49	Informe d of human rights	-	Provider	-	-	-	-	-	-	Met
L50 (07/21)	Respect ful Comm.	I	DDS	11/11	2/2	1/1	3/3		17/17	Met
L51	Possess ions	I	Provider	-	-	-	-	-	-	Met
L52	Phone calls	I	Provider	-	-	-	-	-	-	Met
L53	Visitatio n	I	Provider	-	-	-	-	-	-	Met
L54 (07/21)	Privacy	I	DDS	10/11	2/2	1/1	3/3		16/17	Met (94.12 %)
L55	Informe d consent	I	Provider	-	-	-	-	-	-	Met
L56	Restricti ve practice s	I	DDS	5/6		1/1			6/7	Met (85.71 %)
L57	Written behavio r plans	I	Provider	-	-	-	-	-	-	Met
L58	Behavio r plan compon ent	I	Provider	-	-	-	-	-	-	Met
L59	Behavio r plan review	I	Provider	-	-	-	-	-	-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewe d by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI- MFP Res. Sup.	ABI- MFP Place.	Total Met/Rat ed	Rating
L60	Data mainten ance	I	Provider	-	-		-	-	-	-	Met
L61	Health protecti on in ISP	I	Provider	-	-		-	-	-	-	Met
L62	Health protecti on review	I	Provider	-	-		-	-	-	-	Met
L63	Med. treatme nt plan form	I	Provider	-	-		-	-	-	-	Met
L64	Med. treatme nt plan rev.	I	Provider	-	-		-	-	-	-	Met
L67	Money mgmt. plan	I	Provider	-	-		-	-	-	-	Met
L68	Funds expendit ure	I	Provider	-	-		-	-	-	-	Met
L69	Expendi ture 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
L78	Restricti ve Int. Training	L	Provider	-	-		-	-	-	-	Met
L79	Restrain t training	L	Provider	-	-		-	-	-	-	Met
L80	Sympto ms of illness	L	Provider	-	-		-	-	-	-	Met

Ind.#	Ind.	Loc. or Indiv.	Reviewe d by	Res. Sup.	Ind. Home Sup.	Resp.	ABI- MFP Res. Sup.	ABI- MFP Place.	Total Met/Rat ed	Rating
L81	Medical emerge ncy	L	Provider	-	-	-	-	-	-	Met
₽ L82	Medicati on admin.	L	DDS	11/11		1/1	1/1		13/13	Met
L84	Health protect. Training	I	DDS	4/4			2/2		6/6	Met
L85	Supervi sion	L	Provider	-	-	-	-	-	-	Met
L86	Require d assess ments	I	Provider	-	-	-	-	-	-	Met
L87	Support strategi es	I	Provider	-	-	-	-	-	-	Met
L88	Strategi es impleme nted	I	DDS	8/11	2/2		3/3		13/16	Met (81.25 %)
L89	Complai nt and resolutio n process	L	Provider	-	-	-	-	-	-	Met
L90	Persona I space/ bedroo m privacy	I	Provider	-	-	-	-	-	-	Met
L91	Incident manage ment	L	DDS	7/11	1/1	1/1	1/1		10/14	Not Met (71.43 %)
L93 (05/22)	Emerge ncy back-up plans	I	DDS	11/11	2/2	1/1	3/3		17/17	Met
L94 (05/22)	Assistiv e technolo gy	I	DDS	11/11	2/2	1/1	3/3		17/17	Met

Ind.#	Ind.	Loc. or Indiv.	Reviewe d by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI- MFP Res. Sup.	ABI- MFP Place.	Total Met/Rat ed	Rating
L96 (05/22)	Staff training in devices and applicati ons	I	DDS	10/10	2/2			3/3		15/15	Met
L99 (05/22)	Medical monitori ng devices	l	DDS	1/1						1/1	Met
#Std. Met/# 83 Indicat or										81/83	
Total Score										90/93	
										96.77%	

Employment and Day Supports:

Ind.#	Ind.	Loc. or Indiv.	Reviewed by	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L1	Abuse/neglec t training	I	Provider			-	-	Met
L5	Safety Plan	L	Provider			-	-	Met
₽ L6	Evacuation	L	DDS			1/1	1/1	Met
L7	Fire Drills	L	Provider			-	-	Met
L8	Emergency Fact Sheets	I	Provider			-	-	Met
L9 (07/21)	Safe use of equipment	I	DDS			7/7	7/7	Met
₽ L11	Required inspections	L	DDS			1/1	1/1	Met
[№] L12	Smoke detectors	L	DDS			1/1	1/1	Met
[№] L13	Clean location	L	DDS			1/1	1/1	Met
L14	Site in good repair	L	Provider			-	-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L15	Hot water	L	Provider			-	-	Met
L16	Accessibility	L	Provider			-	-	Met
L17	Egress at grade	L	Provider			-	-	Met
L20	Exit doors	L	Provider			-	-	Met
L21	Safe electrical equipment	L	Provider			-	-	Met
L22	Well- maintained appliances	L	Provider			-	-	Met
L25	Dangerous substances	L	Provider			-	-	Met
L26	Walkway safety	L	Provider			-	-	Met
L28	Flammables	L	Provider			-	-	Met
L29	Rubbish/com bustibles	L	Provider			-	-	Met
L31	Communicati on method	I	Provider			-	-	Met
L32	Verbal & written	I	Provider			-	-	Met
L37	Prompt treatment	I	Provider			-	-	Met
[№] L38	Physician's orders	I	DDS			7/7	7/7	Met
L44	MAP registration	L	Provider			-	-	Met
L45	Medication storage	L	Provider			-	-	Met
¹ ⁄ ₂ L46	Med. Administratio n	I	DDS			7/7	7/7	Met
L49	Informed of human rights	I	Provider			-	-	Met
L50 (07/21)	Respectful Comm.	I	DDS			7/7	7/7	Met
L51	Possessions	I	Provider			-	-	Met
L52	Phone calls	I	Provider			-	-	Met
L54 (07/21)	Privacy	I	DDS			7/7	7/7	Met
L55	Informed consent	I	Provider			-	-	Met

Ind.#	Ind.	Loc. or Indiv.	Reviewed by	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L63	Med. treatment plan form	I	Provider			-	-	Met
L64	Med. treatment plan rev.	I	Provider			-	-	Met
L77	Unique needs training	I	Provider			-	-	Met
L79	Restraint training	L	Provider			-	-	Met
L80	Symptoms of illness	L	Provider			-	-	Met
L81	Medical emergency	L	Provider			-	-	Met
[№] L82	Medication admin.	L	DDS			1/1	1/1	Met
L85	Supervision	L	Provider			-	-	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
L93 (05/22)	Emergency back-up plans	I	DDS			7/7	7/7	Met
L94 (05/22)	Assistive technology	I	DDS			7/7	7/7	Met
L96 (05/22)	Staff training in devices and applications	I	DDS			7/7	7/7	Met
L99 (05/22)	Medical monitoring devices	I	DDS			1/1	1/1	Met
#Std. Met/# 67 Indicator							67/67	
Total Score							76/77	
							98.70%	

MASTER SCORE SHEET CERTIFICATION

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

Residential Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C7	Feedback on staff / care provider performance	Provider	-	Met
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
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

Residential Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
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	Provider	-	Met
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
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

Individual Home Supports

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C7	Feedback on staff / care provider performance	Provider	-	Met

Individual Home Supports

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
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
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

Community Based Day Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C7	Feedback on staff / care provider performance	Provider	-	Met
C8	Family/guardian communication	Provider	-	Met
C13	Skills to maximize independence	Provider	-	Met
C37	Interpersonal skills for work	Provider	-	Met
C38 (07/21)	Habilitative & behavioral goals	DDS	7/7	Met

Community Based Day Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C39 (07/21)	Support needs for employment	DDS	0/7	Not Met (0 %)
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