



**PROVIDER REPORT
FOR**

**DELTA PROJECTS
118 Allied Drive
Dedham, MA 02026**

December 02, 2024

Version

Public Provider Report

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

SUMMARY OF OVERALL FINDINGS

Provider	DELTA PROJECTS
Review Dates	10/28/2024 - 11/1/2024
Service Enhancement Meeting Date	11/18/2024
Survey Team	Mark Boghoian Cheryl Hampton Lisa MacPhail Melanie Hutchison Melanie Cruz Raymond Obeng (TL) David Bullard
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) 16 audit (s)	Full Review	86/92 2 Year License 11/18/2024 - 11/18/2026		64 / 64 Certified 11/18/2024 - 11/18/2026
Residential Services	11 location (s) 11 audit (s)			Full Review	20 / 20
ABI-MFP Residential Services	1 location(s) 3 audit (s)			Full Review	20 / 20
Respite Services	1 location(s) 1 audit (s)			No Review	No Review
Individual Home Supports	1 location(s) 1 audit (s)			Full Review	18 / 18
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	1 location(s) 7 audit (s)	Full Review	56/60 2 Year License 11/18/2024 - 11/18/2026		19 / 21 Certified 11/18/2024 - 11/18/2026
Community Based Day Services	1 location(s) 7 audit (s)			Full Review	13 / 15
Planning and Quality Management (For all service groupings)				Full 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 different types of services and supports to individuals with Intellectual Disabilities, Developmental Disabilities, Autism Spectrum Disorder, and Traumatic and Acquired Brain Injury. The agency also supports individuals with varied mental health issues and needs. This includes occasional supports, intense behavioral needs, and regular monitoring due to forensic involvement. Delta Projects offers services through its residential and day/employment services.

For this 2024 survey, the Department of Developmental Services (DDS) Metro Office of Quality Enhancement conducted a full licensing and certification review of Delta Projects' organizational systems and supports offered in its DDS licensed Residential and Individual Home Supports (Residential Services, Individual Home Supports, ABI-MFP Residential Services, and Respite Services), and Community Based Day Services (CBDS).

At the organizational level, the survey findings showed that Delta Projects had effective policies, procedures, and practices that ensured positive outcomes for the individuals they support. The agency ensured that staff have the necessary qualifications and certifications to perform their duties. Allegations of abuse and neglect were reported as required. The agency also completed action plans when required by DDS area offices. Delta Projects conducted satisfaction surveys with its stakeholders and used the feedback to develop strategic growth initiatives that led to positive outcomes for individuals served.

Within Delta Projects' residential service delivery locations, many positive outcomes were evident relative to licensing indicators. Environmentally, required inspections were current, and fire detection and suppression systems had current inspections and were functional. Relative to personal safety, individuals were supported to evacuate their homes and the day program in 2 1/2 minutes with or without assistance from staff. The agency had emergency back-up plans to assist individuals plan for emergencies and/or disasters. All homes had approved emergency evacuation safety plans, search plans, and strategies to respond to both environmental and medical emergencies and were clean and well-maintained. Medication was administered according to physicians' orders. Written and oral communication with and about individuals was respectful, and staff ensured that individuals had privacy when taking care of their personal needs and discussing their private matters. Individuals had assistive technology to maximize independence, and staff were competent and knowledgeable in the use of individuals' technology devices and applications.

Relative to certification indicators within the residential service grouping, the agency implemented systems to ensure that individuals have the support they need to succeed in many areas. Agency staff acted as bridge builders and provided individuals with opportunities to develop and increase personal relationships and social contacts. Staff also supported individuals to develop their skills to maximize their independence and participation in typical routines, activities, and programs. Staff supported individuals to learn about and use generic community resources and make choices regarding daily household routines and schedules. Overall, individuals had choice and control over their leisure and non-scheduled activities as well as over what, when, where, and with whom they wanted to do a variety of activities, including eating out and engaging in walks in their neighborhoods.

A review of licensing indicators within the CBDS program revealed that people were assisted to maintain connections with their family and friends through visits, emails, and phone calls. In the area of human rights, individuals were trained on human rights and abuse reporting, and guardians were provided information on the same topics. The agency utilized history and proactive strategies to ensure that staff were familiar with and trained to support the unique needs of individuals. Relative to health, medication was administered per MAP policy. In terms of safety, the building that houses the program was clean and accessible and had all required inspections completed.

Relative to certification indicators within the CBDS program, individuals were given opportunities to provide feedback at the time of hire and on an ongoing basis on the performance and actions of the staff that supported them. There was evidence of opportunities to ensure effective communication between guardians, family members, and staff on a regular and timely basis. Staff were knowledgeable about individuals' satisfaction with services and supported them to make changes when needed.

In addition to these positive findings, the survey identified a few areas where additional attention is needed from the agency to meet DDS standards. Organizationally, the agency must ensure that restraint reports are submitted and finalized within the required reporting timelines. The agency must train all staff on all mandated training topics within the required frequency and effectively track all staff trainings to ensure compliance and staff development. In the residential service grouping, water temperature in the homes must be maintained within the required temperature range of 110-120. The agency must ensure that individuals' healthcare records are maintained and updated as required. In the day service grouping, the agency must ensure that data is taken to be shared with individuals' prescribing practitioners to evaluate the effectiveness of their medications. Also, the agency must ensure that they develop plans for individuals on the pathway to employment.

As a result of the review, Delta Projects will receive a two-year license for its residential service grouping, with a service group score of 93% of licensure indicators met. The residential service grouping is certified with an overall score of 100% of certification indicators met. Follow-up will be conducted by the agency within 60 days of the SEM on the licensing indicators that received a rating of Not Met, and the result submitted to the DDS Metro Office of Quality Enhancement.

The agency will receive a two-year license for the employment and day service grouping, with a service group score of 93% of licensure indicators met. This day service grouping is certified with an overall score of 90% of certification indicators met. Follow-up will be conducted by the agency within 60 days on the licensing indicators that received a rating of Not Met, and the result submitted to the DDS Metro Office of Quality Enhancement.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	8/10	2/10	
Residential and Individual Home Supports	78/82	4/82	
Residential Services Individual Home Supports Respite Services ABI-MFP Residential Services			
Critical Indicators	8/8	0/8	
Total	86/92	6/92	93%
2 Year License			
# indicators for 60 Day Follow-up		6	

	Met / Rated	Not Met / Rated	% Met
Organizational	8/10	2/10	
Employment and Day Supports	48/50	2/50	
Community Based Day Services			
Critical Indicators	8/8	0/8	
Total	56/60	4/60	93%
2 Year License			
# indicators for 60 Day Follow-up		4	

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

Indicator #	Indicator	Area Needing Improvement
L65	Restraint reports are submitted within required timelines.	Twenty-eight of one hundred and fifteen restraint reports were submitted outside the required timelines. The agency must submit and finalize restraint reports within the required timelines.
L76	The agency has and utilizes a system to track required trainings.	Sixteen of twenty staff sampled for review did not complete required training relative to incident reporting. The agency must ensure that staff receive all required trainings per regulation to ensure compliance and staff training and development.

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

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 tests were found to be outside of the required range of 110-120 degrees. The agency must ensure that the water temperature at all sites test within the required range.
L43	The health care record is maintained and updated as required.	The healthcare records for six of fifteen individuals were either missing diagnoses or included some outdated information. The agency must ensure that individuals' healthcare records are maintained and updated as required.
L67	There is a written plan in place accompanied by a training plan when the agency has shared or delegated money management responsibility.	For four of nine individuals, their financial management plans did not reflect information regarding their budget, abilities, or bank information. The agency must ensure that all written financial management plans for individuals contain all the required information.
L91	Incidents are reported and reviewed as mandated by regulation.	At seven of the fourteen sites, incidents were submitted and/or finalized incidents outside the required timelines. The agency must ensure that incident reports are submitted within the required timelines in HCSIS.

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

Indicator #	Indicator	Area Needing Improvement
L63	Medication treatment plans are in written format with required components.	For four of five individuals whose medication treatment plans were being implemented at the CBDS program, the agency had not consistently collected enough data to be shared with their prescribing practitioners. The agency must ensure that data is taken to be shared with their prescribing practitioners to evaluate the effectiveness of their medications.
L91	Incidents are reported and reviewed as mandated by regulation.	At the CBDS program site, incidents were submitted and/or finalized incidents outside the required timelines. The agency must ensure that incident reports are submitted within the required timelines in HCSIS.

CERTIFICATION FINDINGS

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	6/6	0/6	
Residential and Individual Home Supports	58/58	0/58	
Residential Services	20/20	0/20	
Individual Home Supports	18/18	0/18	
ABI-MFP Residential Services	20/20	0/20	
Total	64/64	0/64	100%
Certified			

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	6/6	0/6	
Employment and Day Supports	13/15	2/15	
Community Based Day Services	13/15	2/15	
Total	19/21	2/21	90%
Certified			

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

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.	Four of six individuals did not have a detailed written plan to identify their job goals and support needs that would lead to movement into supported employment. The agency must ensure that they develop plans for individuals on the CBDS pathway to employment.
C46	Staff (Home Providers) support individuals to learn about and use generic community resources.	For two of seven individuals, the agency had not fully supported them to learn and use generic resources in their community. The agency must ensure that individuals they support have an opportunity to learn and use generic community resources.

MASTER SCORE SHEET LICENSURE

Organizational: DELTA PROJECTS

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
L2	Abuse/neglect reporting	15/15	Met
L3	Immediate Action	15/15	Met
L4	Action taken	15/15	Met
L48	HRC	1/1	Met
L65	Restraint report submit	87/115	Not Met(75.65 %)
L66	HRC restraint review	97/100	Met(97.00 %)
L74	Screen employees	9/9	Met
L75	Qualified staff	5/5	Met
L76	Track trainings	4/20	Not Met(20.0 %)
L83	HR training	20/20	Met

Residential and Individual Home Supports:

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L1	Abuse/neglect training	I	10/11	1/1		1/1	2/3		14/16	Met (87.50 %)
L3	Immediate Action	L				1/1			1/1	Met
L5	Safety Plan	L	11/11	1/1		1/1	1/1		14/14	Met
Ⓡ L6	Evacuation	L	11/11	1/1		1/1	1/1		14/14	Met
L7	Fire Drills	L	11/11				1/1		12/12	Met
L8	Emergency Fact Sheets	I	9/11	1/1		1/1	3/3		14/16	Met (87.50 %)
L9 (07/21)	Safe use of equipment	I	11/11	1/1		1/1	3/3		16/16	Met
L10	Reduce risk interventions	I	5/5			1/1			6/6	Met
Ⓡ L11	Required inspections	L	11/11	1/1		1/1	1/1		14/14	Met
Ⓡ L12	Smoke detectors	L	11/11	1/1		1/1	1/1		14/14	Met
Ⓡ L13	Clean location	L	11/11			1/1	1/1		13/13	Met
L14	Site in good repair	L	11/11	1/1			1/1		13/13	Met
L15	Hot water	L	8/11	1/1		1/1	1/1		11/14	Not Met (78.57 %)
L16	Accessibility	L	9/9			1/1	1/1		11/11	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L17	Egress at grade	L	11/11	1/1		1/1	1/1		14/14	Met
L18	Above grade egress	L	9/9						9/9	Met
L19	Bedroom location	L	6/6			1/1	1/1		8/8	Met
L20	Exit doors	L	11/11	1/1			1/1		13/13	Met
L21	Safe electrical equipment	L	11/11	1/1		1/1	1/1		14/14	Met
L22	Well-maintained appliances	L	9/11	1/1		1/1	1/1		12/14	Met (85.71 %)
L23	Egress door locks	L	7/7				1/1		8/8	Met
L24	Locked door access	L	9/10	1/1		1/1	1/1		12/13	Met (92.31 %)
L25	Dangerous substances	L	11/11	1/1		1/1	1/1		14/14	Met
L26	Walkway safety	L	10/11	1/1		1/1	1/1		13/14	Met (92.86 %)
L28	Flammables	L	11/11			1/1	1/1		13/13	Met
L29	Rubbish/combustibles	L	11/11	1/1		1/1	1/1		14/14	Met
L30	Protective railings	L	11/11	1/1			0/1		12/13	Met (92.31 %)
L31	Communication method	I	11/11	1/1		1/1	3/3		16/16	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L32	Verbal & written	I	11/11	1/1		1/1	3/3		16/16	Met
L33	Physical exam	I	11/11	1/1			3/3		15/15	Met
L34	Dental exam	I	10/11	1/1			2/3		13/15	Met (86.67 %)
L35	Preventive screenings	I	9/9	1/1			3/3		13/13	Met
L36	Recommended tests	I	11/11				3/3		14/14	Met
L37	Prompt treatment	I	11/11	1/1		1/1	3/3		16/16	Met
Ⓡ L38	Physician's orders	I	11/11	1/1		1/1	3/3		16/16	Met
L39	Dietary requirements	I	5/5	1/1		1/1			7/7	Met
L40	Nutritional food	L	11/11	1/1		1/1	1/1		14/14	Met
L41	Healthy diet	L	11/11	1/1		1/1	1/1		14/14	Met
L42	Physical activity	L	11/11	1/1			1/1		13/13	Met
L43	Health Care Record	I	6/11	1/1			2/3		9/15	Not Met (60.0 %)
L44	MAP registration	L	11/11			1/1	1/1		13/13	Met
L45	Medication storage	L	11/11			1/1	1/1		13/13	Met
Ⓡ L46	Med. Administration	I	10/11			1/1	3/3		14/15	Met (93.33 %)
L47	Self medication	I	1/1	1/1					2/2	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L49	Informed of human rights	I	10/11	1/1		1/1	2/3		14/16	Met (87.50 %)
L50 (07/21)	Respectful Comm.	I	11/11	1/1		1/1	3/3		16/16	Met
L51	Possessions	I	11/11	1/1		1/1	3/3		16/16	Met
L52	Phone calls	I	11/11	1/1		1/1	3/3		16/16	Met
L53	Visitation	I	11/11	1/1		1/1	3/3		16/16	Met
L54 (07/21)	Privacy	I	11/11	1/1		1/1	3/3		16/16	Met
L55	Informed consent	I	1/1						1/1	Met
L56	Restrictive practices	I	7/8			1/1			8/9	Met (88.89 %)
L57	Written behavior plans	I	11/11			1/1			12/12	Met
L58	Behavior plan component	I	7/7						7/7	Met
L59	Behavior plan review	I	7/7						7/7	Met
L60	Data maintenance	I	11/11			1/1			12/12	Met
L61	Health protection in ISP	I	5/6			1/1	3/3		9/10	Met (90.0 %)
L62	Health protection review	I	2/2			1/1			3/3	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L63	Med. treatment plan form	I	9/11				3/3		12/14	Met (85.71 %)
L64	Med. treatment plan rev.	I	10/11				3/3		13/14	Met (92.86 %)
L67	Money mgmt. plan	I	5/7				0/2		5/9	Not Met (55.56 %)
L68	Funds expenditure	I	6/6			1/1	2/2		9/9	Met
L69	Expenditure tracking	I	6/6			1/1	2/2		9/9	Met
L70	Charges for care calc.	I	10/10	1/1			3/3		14/14	Met
L71	Charges for care appeal	I	10/10	1/1			2/3		13/14	Met (92.86 %)
L77	Unique needs training	I	10/11	1/1		1/1	3/3		15/16	Met (93.75 %)
L78	Restrictive Int. Training	L	10/11			1/1			11/12	Met (91.67 %)
L79	Restraint training	L	11/11			1/1			12/12	Met
L80	Symptoms of illness	L	11/11	1/1		1/1	1/1		14/14	Met
L81	Medical emergency	L	11/11	1/1		1/1	1/1		14/14	Met
L82	Medication admin.	L	9/9			1/1	1/1		11/11	Met
L84	Health protect. Training	I	6/6			1/1	3/3		10/10	Met

Ind. #	Ind.	Loc. or Indiv .	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI- MFP Res. Sup.	ABI- MFP Place.	Total Met/Rat ed	Rating
L85	Supervi sion	L	10/11	1/1		1/1	1/1		13/14	Met (92.86 %)
L86	Require d assess ments	I	7/7	1/1			1/2		9/10	Met (90.0 %)
L87	Support strategi es	I	7/7	1/1			0/2		8/10	Met (80.0 %)
L88	Strategi es implem ented	I	9/11	1/1			3/3		13/15	Met (86.67 %)
L89	Complai nt and resoluti on process	L					1/1		1/1	Met
L90	Persona l space/ bedroo m privacy	I	10/10	1/1			3/3		14/14	Met
L91	Incident manage ment	L	5/11	1/1		0/1	1/1		7/14	Not Met (50.0 %)
L93 (05/22)	Emerge ncy back-up plans	I	11/11	1/1		1/1	3/3		16/16	Met
L94 (05/22)	Assistiv e technol ogy	I	11/11	1/1		1/1	3/3		16/16	Met

Ind. #	Ind.	Loc. or Individ.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L96 (05/22)	Staff training in devices and applications	I	8/8	1/1		1/1	3/3		13/13	Met
#Std. Met/# 82 Indicator									78/82	
Total Score									86/92	
									93.48%	

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			7/7	7/7	Met
L5	Safety Plan	L			1/1	1/1	Met
Ⓡ L6	Evacuation	L			1/1	1/1	Met
L7	Fire Drills	L			1/1	1/1	Met
L8	Emergency Fact Sheets	I			7/7	7/7	Met
L9 (07/21)	Safe use of equipment	I			6/6	6/6	Met
Ⓡ L11	Required inspections	L			1/1	1/1	Met
Ⓡ L12	Smoke detectors	L			1/1	1/1	Met
Ⓡ L13	Clean location	L			1/1	1/1	Met
L14	Site in good repair	L			1/1	1/1	Met
L15	Hot water	L			1/1	1/1	Met
L16	Accessibility	L			1/1	1/1	Met

Ind. #	Ind.	Loc. or Indiv.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L17	Egress at grade	L			1/1	1/1	Met
L18	Above grade egress	L			1/1	1/1	Met
L20	Exit doors	L			1/1	1/1	Met
L21	Safe electrical equipment	L			1/1	1/1	Met
L22	Well-maintained appliances	L			1/1	1/1	Met
L25	Dangerous substances	L			1/1	1/1	Met
L26	Walkway safety	L			1/1	1/1	Met
L29	Rubbish/combustibles	L			1/1	1/1	Met
L30	Protective railings	L			1/1	1/1	Met
L31	Communication method	I			7/7	7/7	Met
L32	Verbal & written	I			7/7	7/7	Met
L37	Prompt treatment	I			7/7	7/7	Met
℞ L38	Physician's orders	I			7/7	7/7	Met
L39	Dietary requirements	I			1/1	1/1	Met
L44	MAP registration	L			1/1	1/1	Met
L45	Medication storage	L			1/1	1/1	Met
℞ L46	Med. Administration	I			7/7	7/7	Met
L49	Informed of human rights	I			7/7	7/7	Met
L50 (07/21)	Respectful Comm.	I			7/7	7/7	Met
L51	Possessions	I			7/7	7/7	Met
L52	Phone calls	I			7/7	7/7	Met
L54 (07/21)	Privacy	I			7/7	7/7	Met

Ind. #	Ind.	Loc. or Indiv.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L61	Health protection in ISP	I			6/6	6/6	Met
L63	Med. treatment plan form	I			1/5	1/5	Not Met (20.0 %)
L64	Med. treatment plan rev.	I			4/4	4/4	Met
L77	Unique needs training	I			7/7	7/7	Met
L80	Symptoms of illness	L			1/1	1/1	Met
L81	Medical emergency	L			1/1	1/1	Met
L82	Medication admin.	L			1/1	1/1	Met
L84	Health protect. Training	I			6/6	6/6	Met
L85	Supervision	L			1/1	1/1	Met
L86	Required assessments	I			3/3	3/3	Met
L87	Support strategies	I			4/4	4/4	Met
L88	Strategies implemented	I			7/7	7/7	Met
L91	Incident management	L			0/1	0/1	Not Met (0 %)
L93 (05/22)	Emergency back-up plans	I			7/7	7/7	Met
L94 (05/22)	Assistive technology	I			7/7	7/7	Met
L96 (05/22)	Staff training in devices and applications	I			7/7	7/7	Met
#Std. Met/# 50 Indicator						48/50	
Total Score						56/60	
						93.33%	

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	10/11	Met (90.91 %)
C8	Family/guardian communication	11/11	Met
C9	Personal relationships	10/10	Met
C10	Social skill development	10/10	Met
C11	Get together w/family & friends	11/11	Met
C12	Intimacy	10/11	Met (90.91 %)
C13	Skills to maximize independence	10/10	Met
C14	Choices in routines & schedules	11/11	Met
C15	Personalize living space	11/11	Met
C16	Explore interests	10/11	Met (90.91 %)
C17	Community activities	10/11	Met (90.91 %)
C18	Purchase personal belongings	11/11	Met
C19	Knowledgeable decisions	11/11	Met
C46	Use of generic resources	11/11	Met
C47	Transportation to/ from community	11/11	Met
C48	Neighborhood connections	11/11	Met
C49	Physical setting is consistent	11/11	Met
C51	Ongoing satisfaction with services/ supports	11/11	Met
C52	Leisure activities and free-time choices /control	11/11	Met
C53	Food/ dining choices	11/11	Met

ABI-MFP Residential Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	3/3	Met
C8	Family/guardian communication	3/3	Met
C9	Personal relationships	3/3	Met
C10	Social skill development	3/3	Met
C11	Get together w/family & friends	3/3	Met
C12	Intimacy	3/3	Met
C13	Skills to maximize independence	3/3	Met
C14	Choices in routines & schedules	3/3	Met
C15	Personalize living space	1/1	Met
C16	Explore interests	3/3	Met
C17	Community activities	3/3	Met
C18	Purchase personal belongings	3/3	Met
C19	Knowledgeable decisions	3/3	Met
C46	Use of generic resources	3/3	Met
C47	Transportation to/ from community	3/3	Met
C48	Neighborhood connections	3/3	Met
C49	Physical setting is consistent	1/1	Met
C51	Ongoing satisfaction with services/ supports	3/3	Met
C52	Leisure activities and free-time choices /control	3/3	Met
C53	Food/ dining choices	3/3	Met

Individual Home Supports

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	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
C14	Choices in routines & schedules	1/1	Met
C15	Personalize living space	1/1	Met

Individual Home Supports

Indicator #	Indicator	Met/Rated	Rating
C16	Explore interests	1/1	Met
C17	Community activities	1/1	Met
C18	Purchase personal belongings	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

Community Based Day Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	7/7	Met
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	6/6	Met
C39 (07/21)	Support needs for employment	2/6	Not Met (33.33 %)
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	7/7	Met
C45	Revisit decisions	7/7	Met
C46	Use of generic resources	5/7	Not Met (71.43 %)
C47	Transportation to/ from community	7/7	Met
C51	Ongoing satisfaction with services/ supports	7/7	Met