



PROVIDER REPORT FOR

**Fidelity House dba Waystone
HHS
439 S. Union Street
Ste. 401 Lawrence, MA 01843**

July 26, 2023

Version

Public Provider Report

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

SUMMARY OF OVERALL FINDINGS

Provider Fidelity House dba Waystone HHS

Review Dates 6/22/2023 - 6/28/2023

Service Enhancement Meeting Date 7/12/2023

Survey Team Raquel Rodriguez
Meagan Caccioppoli
John Hazelton
John Downing (TL)
Jennifer Conley-Sevier
Cheryl Dolan
Raymond Obeng

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	16 location (s) 19 audit (s)	Full Review	81/91 2 Year License 07/12/2023 - 07/12/2025		102 / 107 Certified 07/12/2023 - 07/12/2025
Residential Services	6 location(s) 6 audit (s)			Full Review	19 / 20
ABI-MFP Residential Services	2 location(s) 5 audit (s)			Full Review	18 / 20
Placement Services	5 location(s) 5 audit (s)			Full Review	19 / 20
ABI-MFP Placement Services	2 location(s) 2 audit (s)			Full Review	20 / 20
Individual Home Supports	1 location(s) 1 audit (s)			Full Review	21 / 21
Planning and Quality Management (For all service groupings)				Full Review	5 / 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) 12 audit (s)	Full Review	55/60 2 Year License 07/12/2023 - 07/12/2025		35 / 42 Certified 07/12/2023 - 07/12/2025
Community Based Day Services	1 location(s) 7 audit (s)			Full Review	13 / 15
Employment Support Services	2 location(s) 5 audit (s)			Full Review	17 / 21
Planning and Quality Management (For all service groupings)				Full Review	5 / 6

EXECUTIVE SUMMARY :

Waystone Health and Human Services, Inc. formerly known as Fidelity House, Inc. is a multi-service agency providing supports to adults with disabilities living in the Northeast region of Massachusetts. The agency is the result of a merger that occurred in 2019 between Fidelity House, Inc. and Career Resources Center (CRC). Residential supports include 24-hour Residential, Individual Home Supports (I H S), Shared Living/Placement services, and 24-hour ABI/MFP Residential and ABI Shared Living/Placement. Day program services include Community Based Day Supports (CBDS) and Employment Supports.

The scope of this survey conducted by the Office of Quality Enhancement (OQE) was a full licensing and certification review of its Residential Services, CBDS and Employment Service groupings.

As an organization, the agency has successfully solicited and utilized input from the individuals, families, and other stakeholders regarding satisfaction with services and formulated a long term strategic plan with objectives to increase program/service quality. The agency also implemented systems for collecting comprehensive internal data and has mechanisms in place to analyze the collected data to identify patterns or trends.

The agency's commitment to human rights and dignity was an overall strength. The agency has an active and effective Human Rights Committee (HRC). The committee was noted to meet more frequently than the required quarterly meetings. Monthly minutes demonstrated the HRC was fully constituted with all required members and full attendance, by-laws, and quorum requirements were in place. Individuals received annual human rights trainings, and in most instances the guardians had been notified of Human Rights, and of the Human Rights Officers and to whom they should contact regarding complaints or grievances. The agency had an effective staff training system that ensured that its staff received all mandated trainings.

Organizational areas needing attention were limited to the review of all physical restraint forms within the required timeframes and developing a process to evaluate progress made or the need for mid-course corrections in relation to benchmarks outlined in the agency's strategic plan.

Within its residential support services, the agency had an overall effective maintenance system to ensure required inspections had been completed, hot water temperatures were maintained within the accepted ranges and essential fire safety equipment such as smoke detectors and carbon monoxide detectors were present and operational. Homes were found to be clean and safe.

Within the domain of personal safety, safety plans were updated to reflect current evacuation procedures. Individuals were able to safely evacuate within the required times, and the agency took proactive measures to resolve an issue with extended evacuation times at one location. Assessments for the safe use of equipment and appliances were completed, Individuals received annual training on the Disabled Persons Protection Commission (DPPC) and Human Rights. The agency ensured there were effective risk management plans in place for every individual who had behaviors that placed themselves or others at risk. For example, the agency was supporting one individual with a history of alcohol abuse to maintain sobriety by assisting in the attendance of Alcoholics Anonymous meetings. Historical restrictive practices intended to prevent alcohol use, such as periodic room searches and supervised visits with family and friends, have been faded as the individual demonstrated an ability to maintain his own sobriety. Another individual was also supported to follow her desire to remain sober and not use alcohol. A positive behavior support plan was in place; the individual was supported to attend Alcoholics Anonymous meetings regularly and has agency clinical support as needed to discuss alcohol use and personal stressors that may drive the use of alcohol. These supports have greatly assisted the individual to remain sober.

Within the health care domain, all individuals received their annual physical and dental appointments.

For those individuals who were resistant to attending well-visits, the agency had developed strategies to assist them with overcoming barriers and continue to work towards compliance with health care needs. Physician orders and medical protocols were in place and staff were knowledgeable of them. Medications were administered as prescribed, and all MAP requirements were being followed. Additionally, individuals were supported to participate in physical activity, eat well-balanced meals and maintain healthy lifestyles.

The agency's ability to submit required ISP documentation within the required timelines was notable in both service groupings.

There were some licensing areas that require additional attention within the residential services grouping. The agency needs to review its current system to ensure fire drills are conducted in accordance with the approved safety plan, inclusive of the number of annual drills required and the number of staff allowed to participate when executing a drill. The management of individual's funds, including funds management plans, charges for care calculations, tracking expenditures and collection of receipts continues to be problematic for the agency. The agency needs to re-evaluate the effectiveness of its auditing system to ensure it is effective in identifying and resolving issues related to financial oversight. The agency needs to place increased focus on ensuring individuals receive preventative health screenings, as outlined in the Preventative Health Recommendations in the DDS Health Promotion and Coordination Initiative. Recommended healthcare testing and appointments with specialists needing to be made and kept was another area requiring agency attention. Lastly, Assistive Technology Assessments were not thoroughly completed for all individuals. Some did not identify support needs, support availability and options. Individuals and the agency would benefit from a review of the assessment process, inclusive of who and how they are completed, and what sources of information are utilized to identify need and support, as well as responsibility for implementation.

In the certification realm, individuals' bedrooms and homes were decorated to their tastes and interests. Individuals were observed to have choices in such things as their personal and household schedules, as well as what and where and with whom they would like to eat. Individuals were supported had access to the community and were supported to connect with family, friends and neighbors and had opportunities to provide feedback on their satisfaction with services and staff who support them.

The exploration of interests and participation in community activities were certification areas identified as lacking. The limited exploration often hampers the ability of individuals to participate because of a lack of knowledge. The agency is encouraged to broaden the opportunities and means to explore each person's interests and then have a schedule of activities for them to select. Within the agency's placement service, the need for ongoing support in the area of intimacy and companionship was identified.

Waystone's Day supports and Employment services had safeguard systems which were effective across licensing domains, including personal and environmental safety, human rights, and respectful communication. This grouping also had a noted strength with respect to submitting required ISP documentation within required timelines. Another notable strength of the agency was its' relationships with local businesses which has allowed many of the individuals to return to off-site locations for employment and training opportunities. Individuals had their choice of daily activities, and also the opportunity to attend Transportation Training coordinated by the agency with Merrimack Valley Regional Transit Authority.

Within the agency's Day/Employment Support Services, there were some areas for future improvement. Fire Drills need to be completed in accordance with the approved safety plan, inclusive of the number of staff able to participate in the drill based on census. The agency's system for collecting data on ISP related objectives/goals does not lend itself to easily identifying the individual's progress in terms of parameters for determining success. Daily progress notes are used to track activities. The agency would benefit from a data collection system that captures results on a

weekly/monthly calendar basis. Similar to the agency's outcome in residential, Assistive Technology Assessments were not thoroughly completed for all individuals. Individuals and the agency would benefit from a review of the assessment process within the Day and Employment service also. Individual's career plans lacked a thorough assessment of skills and a completed analysis of how their entitlements are impacted by employment wages. Career plans should also include strategies for increasing individuals' level of independence, and plan for fading supports as skills increase.

Based on the findings of this survey review, Waystone's Residential service grouping received a met rating in 89% of licensing indicators, including all critical indicators. The service also received a rating of met in 95% of certification indicators reviewed. As a result, the agency will receive a Two-Year License and is Certified for its Residential Service Grouping. Within the Day and Employment Supports program, the agency met 92% of all licensing indicators, including all critical indicators, and met 83% of the certification indicators reviewed. As a result, the agency will receive a Two-Year License, and is Certified for its Day and Employment Supports service grouping. Follow-up on the residential licensing indicators rated not met will be conducted by OQE, and the agency will conduct their own follow-up for licensure indicators rated not met at the day/employment services. The follow-up process for both service groupings will occur within 60 days of the Service Enhancement Meeting.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	9/10	1/10	
Residential and Individual Home Supports	72/81	9/81	
Residential Services Individual Home Supports ABI-MFP Placement Services Placement Services ABI-MFP Residential Services			
Critical Indicators	8/8	0/8	
Total	81/91	10/91	89%
2 Year License			
# indicators for 60 Day Follow-up		10	

	Met / Rated	Not Met / Rated	% Met
Organizational	9/10	1/10	
Employment and Day Supports	46/50	4/50	
Community Based Day Services Employment Support Services			
Critical Indicators	8/8	0/8	
Total	55/60	5/60	92%
2 Year License			
# indicators for 60 Day Follow-up		5	

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.	Three of the six restraint reports filed were not reviewed by the agency's restraint manager within the required 5 day period. the agency needs to ensure all restraint reports are written, filed and reviewed within the required timelines.

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

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

Indicator #	Indicator	Area Needing Improvement
L7	Fire drills are conducted as required.	At two locations fire drills were not being conducted in accordance with the approved safety plan for the location. The agency needs to ensure the number of fire drills conducted and the number of staff participating in those drills are in accordance with the approved safety plan.
L8	Emergency fact sheets are current and accurate and available on site.	For seven individuals, their Emergency Fact Sheets were either missing required components or contained inaccurate information. The agency needs to ensure each individual's Emergency Fact Sheet contains all required components with accurate information.
L35	Individuals receive routine preventive screenings.	Five individuals did not receive routine preventative screenings as outlined in the DDS HealthCare Screening tool. The agency needs to ensure every individual receives routine preventative screenings as recommended in the DDS Health Care Screening tool, and for those circumstances in which a screening does not occur, alternative screening options and a plan of support and monitoring should be discussed with their physician and documented.
L36	Recommended tests and appointments with specialists are made and kept.	Four individuals had recommended tests or appointments with a specialist that were not made or kept. The agency needs to ensure all appointments for tests and/or examination by a specialist is made and kept.
L63	Medication treatment plans are in written format with required components.	Four individuals had medication treatment plans that did not contain all of the required components. The agency needs to ensure all medication treatment plans contain the required components.
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 individuals, their written funds management and training plans were missing required components such as signatures of guardians, individual training needs and supports provided, sources of income, ability to hold dollar amounts
L69	Individual expenditures are documented and tracked.	For four individuals, expenditures were not being documented and tracked as required. The agency needs to ensure individual expenditures are tracked and documented, receipts for expenditures over \$25.00 need to be obtained and kept.
L78	Staff are trained to safely and consistently implement restrictive interventions.	At one location staff had not been trained to on the correct implementation of the restrictive intervention in place at the time. The agency needs to ensure all staff are trained on the correct implementation of any restrictive intervention in place.

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

Indicator #	Indicator	Area Needing Improvement
L99 (05/22)	Medical monitoring devices needed for health and safety are authorized, agreed to, used and data collected appropriately. (eg seizure watches; fall sensors).	For one individual, her medical device (Bi-Pap) was being utilized but was not being cleaned or maintained according to the manufacturer's guidelines. The agency needs to ensure all medical monitoring devices needed for health and safety are authorized, agreed to, used and data collected appropriately.

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

Indicator #	Indicator	Area Needing Improvement
L7	Fire drills are conducted as required.	At one location, fire drills were not run in accordance with the safety plan. The agency needs to ensure that fire drills are completed with the minimum number of staff identified in the safety plan and ensure the number of staff assisting in the drill is documented.
L88	Services and support strategies identified and agreed upon in the ISP for which the provider has designated responsibility are being implemented.	For twelve individuals, support strategies were not being implemented as identified in the ISP. The agency needs to ensure that regular data is taken on measurable objectives, and that it is easily compiled to identify progress and/or if a modification is needed.
L91	Incidents are reported and reviewed as mandated by regulation.	At one location, incidents were not reported and reviewed as mandated by regulation. The agency needs to ensure that all reportable incidents are completed and finalized in HCSIS within the required timelines.
L94 (05/22)	Individuals have assistive technology to maximize independence.	For three individuals, assistive technology assessments were not completed or did not provide recommendations. The agency needs to ensure that all individuals have the assistive technology needed to maximize independence.

CERTIFICATION FINDINGS

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	5/6	1/6	
Residential and Individual Home Supports	97/101	4/101	
ABI-MFP Placement Services	20/20	0/20	
ABI-MFP Residential Services	18/20	2/20	
Residential Services	19/20	1/20	
Placement Services	19/20	1/20	
Individual Home Supports	21/21	0/21	
Total	102/107	5/107	95%
Certified			

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	5/6	1/6	
Employment and Day Supports	30/36	6/36	
Community Based Day Services	13/15	2/15	
Employment Support Services	17/21	4/21	
Total	35/42	7/42	83%
Certified			

Planning and Quality Management Areas Needing Improvement on Standards not met:

Indicator #	Indicator	Area Needing Improvement
C5	The provider has a process to measure progress towards achieving service improvement goals.	The agency has not developed a process to measure progress towards achieving service improvement goals. The agency needs to develop a process to measure progress towards achieving benchmarks in order to confirm the current strategy is effective or requires a mid-course change in direction to achieve their goal (s).

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

Indicator #	Indicator	Area Needing Improvement
C16	Staff (Home Providers) support individuals to explore, discover and connect with their interests for cultural, social, recreational and spiritual activities.	Four individuals were not supported explore, discover, and connect with their interests for cultural, social, recreational and spiritual activities. The agency needs to ensure every individual is supported to explore, discover and connect with their interests utilizing a variety of means, such as interest inventories, community mapping, on-line research, and community events calendars. Efforts to identify such interests and willingness to explore need to be ongoing and sustained.
C17	Community activities are based on the individual's preferences and interests.	Four individuals were not supported to participate in community activities based on their identified and stated preferences and interests. The agency needs to ensure all individuals are supported to participate in community activities on a sustained basis and related to their identified interests.
C12	Individuals are supported to explore, define, and express their need for intimacy and companionship.	For two individuals, staff were not aware of the needs or interest in the area of relationships/companionships. The agency needs to ensure individuals are supported to explore, define and express their need for intimacy and companionship on an ongoing basis, and that staff are able to support and encourage individuals to discuss the topic.
C17	Community activities are based on the individual's preferences and interests.	Three individuals were not supported to participate in community activities based on their identified and stated preferences and interests. The agency needs to ensure all individuals are supported to participate in community activities on a sustained basis and related to their identified interests.

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

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 individuals did not have the opportunity to provide feedback at the time of hire or on an ongoing basis. The agency needs to ensure that all individuals have the opportunity to provide feedback on the staff that support them.
C40	Individuals are supported to explore, discover and connect with their personal interest and options for community involvement, personal interest and hobbies.	For six individuals, there was not enough information to determine what their personal interests were. The agency needs to ensure that a variety of methods are used to determine what each individual would like to explore.
C23	Staff utilize a variety of methods to assess an individual's skills, interests, career goals and training and support needs in employment.	For 2 individuals, thorough Job skills assessments to determine interests, skills, and areas of needs had not been conducted. The agency needs to ensure it employs a variety of assessments and tools to assist individuals in exploring interests, identifying employment skills, and developing training plans for areas of need.
C24	There is a plan developed to identify job goals and support needs.	For two individuals, their career plans did not contain job goals and support needs as their skills, interests and training support needs had not been assessed and identified. The agency needs to ensure there is a plan that is inclusive of job goals and support needs.
C26	Career planning includes an analysis of how an individual's entitlements can be managed in a way that allows them to work successfully in the community.	None of the individuals had an analysis of how entitlements can be impacted by earnings. As part of the career plan, the agency needs to complete an individual analysis of how their entitlements can be managed in a way that allows them to work successfully in the community.
C34	The agency provides the optimal level of support to promote success with a specific plan for minimizing supports.	For 2 of 5 individuals, the agency did not have a plan for fading support as the individual becomes more independent in their employment. The agency needs to develop plans based on assessments and skill training that includes strategies for minimizing supports as appropriate.

MASTER SCORE SHEET LICENSURE

Organizational: Fidelity House dba Waystone HHS

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
Ⓡ L2	Abuse/neglect reporting	16/18	Met(88.89 %)
L3	Immediate Action	10/10	Met
L4	Action taken	11/11	Met
L48	HRC	1/1	Met
L65	Restraint report submit	3/6	Not Met(50.0 %)
L66	HRC restraint review	6/6	Met
L74	Screen employees	4/4	Met
L75	Qualified staff	4/4	Met
L76	Track trainings	20/20	Met
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	5/6	1/1	5/5		5/5	2/2	18/19	Met (94.74 %)
L5	Safety Plan	L	6/6	1/1	5/5		2/2	2/2	16/16	Met
℞ L6	Evacuation	L	5/6	1/1	5/5		2/2	2/2	15/16	Met (93.75 %)
L7	Fire Drills	L	4/6				2/2		6/8	Not Met (75.00 %)
L8	Emergency Fact Sheets	I	4/6	1/1	5/5		0/5	2/2	12/19	Not Met (63.16 %)
L9 (07/21)	Safe use of equipment	I	6/6	1/1			5/5		12/12	Met
L10	Reduce risk interventions	I	2/2	1/1			3/3		6/6	Met
℞ L11	Required inspections	L	5/6		5/5		2/2	2/2	14/15	Met (93.33 %)
℞ L12	Smoke detectors	L	5/6		5/5		2/2	2/2	14/15	Met (93.33 %)
℞ L13	Clean location	L	5/6		5/5		2/2	2/2	14/15	Met (93.33 %)
L14	Site in good repair	L	6/6		5/5		2/2	2/2	15/15	Met
L15	Hot water	L	6/6		4/5		2/2	2/2	14/15	Met (93.33 %)
L16	Accessibility	L	6/6		5/5		2/2	2/2	15/15	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
L17	Egress at grade	L	6/6		5/5		2/2	1/1	14/14	Met
L18	Above grade egress	L	5/5		4/4		2/2		11/11	Met
L19	Bedroom location	L	5/5		3/3		2/2		10/10	Met
L20	Exit doors	L	5/6				2/2		7/8	Met (87.50 %)
L21	Safe electrical equipment	L	5/6		5/5		2/2	2/2	14/15	Met (93.33 %)
L22	Well- maintained appliances	L	5/6		5/5		2/2	2/2	14/15	Met (93.33 %)
L23	Egress door locks	L	6/6				2/2		8/8	Met
L24	Locked door access	L	6/6		5/5		2/2		13/13	Met
L25	Dangerous substances	L	6/6				2/2		8/8	Met
L26	Walkway safety	L	6/6		5/5		2/2	2/2	15/15	Met
L27	Pools, hot tubs, etc.	L			2/2		1/1		3/3	Met
L28	Flammables	L	6/6				1/2		7/8	Met (87.50 %)
L29	Rubbish /combustibles	L	6/6		5/5		2/2	2/2	15/15	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L30	Protective railings	L	6/6	1/1	5/5		2/2	2/2	16/16	Met
L31	Communication method	I	5/6	1/1	5/5		5/5	2/2	18/19	Met (94.74 %)
L32	Verbal & written	I	6/6	1/1	5/5		5/5	2/2	19/19	Met
L33	Physical exam	I	4/4	1/1	5/5		5/5	2/2	17/17	Met
L34	Dental exam	I	6/6	1/1	5/5		5/5	2/2	19/19	Met
L35	Preventive screenings	I	3/5	1/1	4/5		2/4	2/2	12/17	Not Met (70.59 %)
L36	Recommended tests	I	3/5	1/1	5/5		3/5	2/2	14/18	Not Met (77.78 %)
L37	Prompt treatment	I	6/6	1/1	5/5		5/5	2/2	19/19	Met
L38	Physician's orders	I	6/6		2/2		3/3	2/2	13/13	Met
L39	Dietary requirements	I	5/5		2/2		3/3	1/1	11/11	Met
L40	Nutritional food	L	6/6	1/1			2/2		9/9	Met
L41	Healthy diet	L	6/6	1/1	5/5		2/2	2/2	16/16	Met
L42	Physical activity	L	6/6	1/1	5/5		2/2	2/2	16/16	Met
L43	Health Care Record	I	4/6	1/1	4/5		5/5	2/2	16/19	Met (84.21 %)
L44	MAP registration	L	6/6				2/2		8/8	Met
L45	Medication storage	L	6/6				2/2		8/8	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L46	Med. Administration	I	6/6		4/4		5/5	2/2	17/17	Met
L47	Self medication	I	0/1	1/1			5/5		6/7	Met (85.71 %)
L49	Informed of human rights	I	5/6	1/1	5/5		5/5	2/2	18/19	Met (94.74 %)
L50 (07/21)	Respectful Comm.	I	6/6	1/1	5/5		5/5	2/2	19/19	Met
L51	Possessions	I	6/6	1/1	5/5		5/5	2/2	19/19	Met
L52	Phone calls	I	6/6	1/1	5/5		5/5	2/2	19/19	Met
L53	Visitation	I	5/6	1/1	5/5		5/5	2/2	18/19	Met (94.74 %)
L54 (07/21)	Privacy	I	6/6	1/1	5/5		5/5	2/2	19/19	Met
L55	Informed consent	I	1/1				2/2		3/3	Met
L56	Restrictive practices	I	2/2						2/2	Met
L57	Written behavior plans	I	2/2				1/1		3/3	Met
L59	Behavior plan review	I	1/1						1/1	Met
L60	Data maintenance	I	2/2				1/1		3/3	Met
L61	Health protection in ISP	I	3/4		2/2		3/3	1/1	9/10	Met (90.0 %)

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI- MFP Res. Sup.	ABI- MFP Place.	Total Met/Rat ed	Rating
L62	Health protecti on review	I	2/2	1/1	2/2		1/1	1/1	7/7	Met
L63	Med. treatme nt plan form	I	4/6		2/3		4/5	2/2	12/16	Not Met (75.00 %)
L64	Med. treatme nt plan rev.	I	5/5		3/3		5/5	2/2	15/15	Met
L67	Money mgmt. plan	I	3/6	1/1	4/5		3/3	1/1	12/16	Not Met (75.00 %)
L68	Funds expendi ture	I	4/5	1/1	5/5		2/3	1/1	13/15	Met (86.67 %)
L69	Expendi ture tracking	I	4/5	0/1	4/5		2/3	1/1	11/15	Not Met (73.33 %)
L70	Charges for care calc.	I	5/5		3/5		5/5	2/2	15/17	Met (88.24 %)
L71	Charges for care appeal	I	5/5		4/5		5/5	2/2	16/17	Met (94.12 %)
L77	Unique needs training	I	6/6	1/1	5/5		5/5	2/2	19/19	Met
L78	Restricti ve Int. Training	L	1/2				1/1		2/3	Not Met (66.67 %)
L80	Sympto ms of illness	L	6/6	1/1	5/5		1/2	2/2	15/16	Met (93.75 %)
L81	Medical emergen cy	L	6/6	1/1	5/5		2/2	2/2	16/16	Met
L82	Medicati on admin.	L	6/6				2/2		8/8	Met
L84	Health protect. Training	I	4/4	1/1	2/2		3/3	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
L85	Supervision	L	6/6	1/1	5/5		2/2	2/2	16/16	Met
L86	Required assessments	I	3/4	1/1	4/4		4/4	2/2	14/15	Met (93.33 %)
L87	Support strategies	I	4/5	1/1	5/5		4/4	2/2	16/17	Met (94.12 %)
L88	Strategies implemented	I	4/5	1/1	5/5		3/5	2/2	15/18	Met (83.33 %)
L89	Complaint and resolution process	L					1/2	2/2	3/4	Met
L90	Personal space/bedroom privacy	I	6/6	1/1	5/5		5/5	2/2	19/19	Met
L91	Incident management	L	4/6	1/1	5/5		1/2	2/2	13/16	Met (81.25 %)
L93 (05/22)	Emergency back-up plans	I	6/6	1/1	5/5		5/5	2/2	19/19	Met
L94 (05/22)	Assistive technology	I	5/6	1/1	3/5		5/5	2/2	16/19	Met (84.21 %)
L96 (05/22)	Staff training in devices and applications	I	5/5	1/1	5/5		5/5	2/2	18/18	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L99 (05/22)	Medical monitoring devices	I	1/1		0/1				1/2	Not Met (50.0 %)
#Std. Met/# 81 Indicator									72/81	
Total Score									81/91	
									89.01%	

Employment and Day Supports:

Ind. #	Ind.	Loc. or Indiv.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L1	Abuse/neglect training	I	5/5		7/7	12/12	Met
L5	Safety Plan	L			1/1	1/1	Met
℞ L6	Evacuation	L			1/1	1/1	Met
L7	Fire Drills	L			0/1	0/1	Not Met (0 %)
L8	Emergency Fact Sheets	I	4/5		7/7	11/12	Met (91.67 %)
L9 (07/21)	Safe use of equipment	I	5/5		7/7	12/12	Met
L10	Reduce risk interventions	I			3/3	3/3	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
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
L31	Communication method	I	5/5		7/7	12/12	Met
L32	Verbal & written	I	5/5		7/7	12/12	Met
L37	Prompt treatment	I	3/3		4/4	7/7	Met
Ⓡ L38	Physician's orders	I			3/4	3/4	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			1/1	1/1	Met
L49	Informed of human rights	I	5/5		7/7	12/12	Met
L50 (07/21)	Respectful Comm.	I	5/5		7/7	12/12	Met
L51	Possessions	I	5/5		7/7	12/12	Met
L52	Phone calls	I	5/5		7/7	12/12	Met
L54 (07/21)	Privacy	I	5/5		7/7	12/12	Met
L55	Informed consent	I	5/5		6/6	11/11	Met

Ind. #	Ind.	Loc. or Indiv.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L61	Health protection in ISP	I	1/1		1/1	2/2	Met
L73	DOL certificate	L			1/1	1/1	Met
L77	Unique needs training	I	5/5		7/7	12/12	Met
L79	Restraint training	L			1/1	1/1	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	1/1			1/1	Met
L85	Supervision	L	2/2		1/1	3/3	Met
L86	Required assessments	I	5/5		7/7	12/12	Met
L87	Support strategies	I	5/5		6/7	11/12	Met (91.67 %)
L88	Strategies implemented	I	0/5		0/7	0/12	Not Met (0 %)
L91	Incident management	L			0/1	0/1	Not Met (0 %)
L93 (05/22)	Emergency back-up plans	I	5/5		7/7	12/12	Met
L94 (05/22)	Assistive technology	I	3/5		6/7	9/12	Not Met (75.00 %)
L96 (05/22)	Staff training in devices and applications	I			1/1	1/1	Met
#Std. Met/# 50 Indicator						46/50	
Total Score						55/60	
						91.67%	

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	0/1	Not Met (0 %)
C6	Future directions planning	1/1	Met

Residential Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	5/6	Met (83.33 %)
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	6/6	Met
C13	Skills to maximize independence	6/6	Met
C14	Choices in routines & schedules	6/6	Met
C15	Personalize living space	6/6	Met
C16	Explore interests	5/6	Met (83.33 %)
C17	Community activities	3/6	Not Met (50.0 %)
C18	Purchase personal belongings	6/6	Met
C19	Knowledgeable decisions	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	6/6	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

ABI-MFP Residential Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	5/5	Met
C8	Family/guardian communication	5/5	Met
C9	Personal relationships	5/5	Met
C10	Social skill development	5/5	Met
C11	Get together w/family & friends	4/5	Met (80.0 %)
C12	Intimacy	5/5	Met
C13	Skills to maximize independence	5/5	Met
C14	Choices in routines & schedules	5/5	Met
C15	Personalize living space	2/2	Met
C16	Explore interests	1/5	Not Met (20.0 %)
C17	Community activities	1/5	Not Met (20.0 %)
C18	Purchase personal belongings	5/5	Met
C19	Knowledgeable decisions	5/5	Met
C46	Use of generic resources	5/5	Met
C47	Transportation to/ from community	5/5	Met
C48	Neighborhood connections	5/5	Met
C49	Physical setting is consistent	2/2	Met
C51	Ongoing satisfaction with services/ supports	5/5	Met
C52	Leisure activities and free-time choices /control	5/5	Met
C53	Food/ dining choices	5/5	Met

Placement Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	5/5	Met
C8	Family/guardian communication	5/5	Met
C9	Personal relationships	5/5	Met
C10	Social skill development	5/5	Met
C11	Get together w/family & friends	5/5	Met
C12	Intimacy	3/5	Not Met (60.0 %)
C13	Skills to maximize independence	5/5	Met

Placement Services

Indicator #	Indicator	Met/Rated	Rating
C14	Choices in routines & schedules	5/5	Met
C15	Personalize living space	5/5	Met
C16	Explore interests	5/5	Met
C17	Community activities	5/5	Met
C18	Purchase personal belongings	4/5	Met (80.0 %)
C19	Knowledgeable decisions	5/5	Met
C46	Use of generic resources	5/5	Met
C47	Transportation to/ from community	5/5	Met
C48	Neighborhood connections	5/5	Met
C49	Physical setting is consistent	5/5	Met
C51	Ongoing satisfaction with services/ supports	4/5	Met (80.0 %)
C52	Leisure activities and free-time choices /control	5/5	Met
C53	Food/ dining choices	5/5	Met

ABI-MFP Placement Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	2/2	Met
C8	Family/guardian communication	2/2	Met
C9	Personal relationships	2/2	Met
C10	Social skill development	2/2	Met
C11	Get together w/family & friends	2/2	Met
C12	Intimacy	2/2	Met
C13	Skills to maximize independence	2/2	Met
C14	Choices in routines & schedules	2/2	Met
C15	Personalize living space	2/2	Met
C16	Explore interests	2/2	Met
C17	Community activities	2/2	Met
C18	Purchase personal belongings	2/2	Met
C19	Knowledgeable decisions	2/2	Met
C46	Use of generic resources	2/2	Met

ABI-MFP Placement Services

Indicator #	Indicator	Met/Rated	Rating
C47	Transportation to/ from community	2/2	Met
C48	Neighborhood connections	2/2	Met
C49	Physical setting is consistent	2/2	Met
C51	Ongoing satisfaction with services/ supports	2/2	Met
C52	Leisure activities and free-time choices /control	2/2	Met
C53	Food/ dining choices	2/2	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
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

Individual Home Supports

Indicator #	Indicator	Met/Rated	Rating
C53	Food/ dining choices	1/1	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	6/6	Met
C39 (07/21)	Support needs for employment	4/5	Met (80.0 %)
C40	Community involvement interest	1/7	Not Met (14.29 %)
C41	Activities participation	6/7	Met (85.71 %)
C42	Connection to others	6/7	Met (85.71 %)
C43	Maintain & enhance relationship	7/7	Met
C44	Job exploration	6/6	Met
C45	Revisit decisions	7/7	Met
C46	Use of generic resources	6/7	Met (85.71 %)
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	5/5	Met
C8	Family/guardian communication	5/5	Met
C22	Explore job interests	2/2	Met
C23	Assess skills & training needs	0/2	Not Met (0 %)
C24	Job goals & support needs plan	0/2	Not Met (0 %)
C25	Skill development	2/2	Met
C26	Benefits analysis	0/4	Not Met (0 %)
C27	Job benefit education	2/2	Met
C28	Relationships w/businesses	1/1	Met
C29	Support to obtain employment	2/2	Met

Employment Support Services

Indicator #	Indicator	Met/Rated	Rating
C30	Work in integrated settings	5/5	Met
C31	Job accommodations	3/3	Met
C32	At least minimum wages earned	5/5	Met
C33	Employee benefits explained	3/3	Met
C34	Support to promote success	3/5	Not Met (60.0 %)
C35	Feedback on job performance	3/3	Met
C36	Supports to enhance retention	5/5	Met
C37	Interpersonal skills for work	2/2	Met
C47	Transportation to/ from community	5/5	Met
C50	Involvement/ part of the Workplace culture	5/5	Met
C51	Ongoing satisfaction with services/ supports	5/5	Met