PROVIDER REPORT
FOR

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

September 02, 2025

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	7/30/2025 - 8/5/2025
Service Enhancement Meeting Date	8/19/2025
Survey Team	Meagan Caccioppoli
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	Chloe Browning (TL)
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) 16 audit (s)	Full Review	75/91 2 Year License 08/19/2025 - 08/19/2027		103 / 107 Certified 08/19/2025 - 08/19/2027
Residential Services	7 location(s) 7 audit (s)			Full Review	16 / 20
ABI-MFP Residential Services	1 location(s) 1 audit (s)			Full Review	20 / 20
Placement Services	5 location(s) 5 audit (s)			Full Review	20 / 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	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	2 location(s) 14 audit (s)	Full Review	55/62 2 Year License 08/19/2025 - 08/19/2027		33 / 42 Certified with Progress Report 08/19/2025 - 08/19/2027
Community Based Day Services	1 location(s) 7 audit (s)			Full Review	12 / 15
Employment Support Services	1 location(s) 7 audit (s)			Full Review	15 / 21
Planning and Quality Management (For all service groupings)				Full Review	6 / 6

EXECUTIVE SUMMARY :

Waystone Health & Human Services (formerly Fidelity House CRC) is a human services organization that has been providing supports for over 50 years to youth and adults with intellectual, developmental, and physical disabilities; acquired brain injuries; and mental health diagnoses. The agency serves more than 1,700 people annually in cities and towns across the Northeast Region of Massachusetts, including the areas of Lowell, Merrimack Valley, North Shore, Central Middlesex and Metro North. Services include 24-hour Residential Supports, 24-hour ABI/MFP Residential Supports, Individual Home Supports (IHS), Shared Living/Placement, ABI/MFP Shared Living/Placement, Employment Supports and Community-Based Day Supports (CBDS).

The DDS Office of Quality Enhancement (OQE) conducted a full licensing and certification review of Waystones Residential and Individual Home Supports (IHS), and Employment and Day Service Groupings. All applicable licensing and certification indicators were reviewed by DDS/OQE as part of this survey.

At the organizational level, Waystone regularly solicited and utilized input from individuals, families, and other stakeholders regarding satisfaction with services. The agency used this input to formulate a robust long-term strategic plan with objectives to improve and expand services, while also enhancing efficiency and effectiveness. The agency also had systems for collecting comprehensive internal data and analyzed this to identify patterns and trends. Waystone had an effective staff training system that ensured staff received required trainings and that staff were screened at the time of hire and had the necessary qualifications.

Across both Residential and Day Services, the agency excelled in environmental safety. All locations were in good repair, were clean, had required inspections and maintained hot water at the required temperatures. The agency has focused on ensuring locations were updated and made as accessible as possible. Surveyors noted many improvements to homes that positively impacted the individuals who resided there. Updates improved environmental accessibility, allowed increased independence and enhanced safety. For example, lighting in closets came on automatically when doors were opened and evacuation times were shortened with the addition of direct egress from bedrooms.

Within the licensing domain, various positive practices were noted within the Residential and Individual Home Supports service group. Within the domain of personal safety, safety plans were typically updated to reflect current evacuation procedures and individuals were able to safely evacuate within the required timeframes. Regarding medical care, medication was administered according to physician orders and annual physical exams, and dental visits were occurring in a timely manner. There were many positive examples of staff supporting individuals to live healthy lifestyles by encouraging them to be physically active and offering nutritious diets. For example, at one location two individuals had been supported to lose weight with a diet based on their individual preferences that incorporated healthy and nutrient rich food.

Individuals bedrooms and homes were also found to be decorated to their tastes and interests. Individuals were offered choices in their schedules and routines and were able to get together with friends and families. In one location, for example, the staff were noted as going above and beyond to ensure that connections with former housemates were maintained.

Several positives were also noted within the Employment and Day Supports service group. Within the health care domain, medications were correctly stored and administered as ordered, individuals received prompt treatment for acute medical needs and staff were well trained regarding medical emergencies, as well as the unique needs of the individuals they were supporting. This grouping also had a noted strength with respect to submitting required ISP assessments and support strategies within required timelines. In CBDS there were frequent community outings and individual interests were used to determine community offerings. The agency promoted choice of activities, with

participants having multiple opportunities during the day to pick what they wanted to engage in and any outings that were of interest to them.

There were some areas that require additional attention within the residential services grouping. Within the health care domain, 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 and ensuring there is follow-up regarding any recommended tests. The management of individuals' funds, including funds management plans, charges for care calculations, and the tracking of expenditures continues to need agency attention. The agency needs to also focus on timelines related to submitting assessments and support strategies ahead of the ISP and updating the Health Care Record as required.

In Employment and Day Services there were also some areas for future improvement. Fire Drills need to be completed at frequencies identified within the approved safety plan, and need to include all required elements, including the level of assistance required during the drill. The agency needs to ensure all individuals and guardians are informed of their human rights and how to report alleged abuse and neglect, and that all individuals have a current emergency fact sheet that includes all required information. Individuals in CBDS need to have a plan to identify goals and support needs that would lead to employment and be supported to explore areas of possible job interests. In Employment, individuals need to be supported to explore their job interests, have an assessment of skills and training needs, and a detailed individualized career plan identifying career goals and support needs.

Based on the findings of this survey review, Waystone's Residential Service Grouping received a met rating in 82% of licensing indicators, including all critical indicators. The service also received a rating of met in 96% 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 Service Group, the agency met 89% of all licensing indicators, including all critical indicators, and met 79% of the certification indicators reviewed. As a result, the agency will receive a Two-Year License and is Certified with a One-Year Progress Report for its Day and Employment Supports. Follow-up on the licensing indicators rated not met will be conducted by OQE for both residential and 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	8/10	2/10	
Residential and Individual Home Supports	67/81	14/81	
Residential Services Placement Services Individual Home Supports ABI-MFP Placement Services ABI-MFP Residential Services			
Critical Indicators	8/8	0/8	
Total	75/91	16/91	82%
2 Year License			
# indicators for 60 Day Follow-up		16	

	Met / Rated	Not Met / Rated	% Met
Organizational	8/10	2/10	
Employment and Day Supports	47/52	5/52	
Employment Support Services Community Based Day Services			
Critical Indicators	8/8	0/8	
Total	55/62	7/62	89%
2 Year License			
# indicators for 60 Day Follow-up		7	

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

Indicator #	Indicator	Area Needing Improvement
L48	The agency has an effective Human Rights Committee.	The agency's Human Rights Committee did not maintain the required membership as it did not have a member with medical expertise for the last two meetings. The agency needs to ensure that they have members with the required expertise at all meetings.
L66	All restraints are reviewed by the Human Rights Committee.	Two of three restraint reports were not reviewed by the HRC. The agency needs to ensure that all restraint reports are reviewed by the HRC.

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 four locations, fire drills were not conducted utilizing the minimum staffing ratio indicated in the Safety Plan, or on a quarterly basis. The agency needs to ensure fire drills are conducted with the correct staffing ratio as identified in Safety Plans and record all required information, including who participated in the drill and the level of assistance provided to each individual.
L8	Emergency fact sheets are current and accurate and available on site.	For six individuals, emergency fact sheets did not contain all required components. The agency needs to ensure that all emergency fact sheets are complete and updated regularly.
L10	The provider implements interventions to reduce risk for individuals whose behaviors may pose a risk to themselves or others.	For two individuals, the agency did not implement interventions to reduce behaviors that place the individuals or others at risk. The agency needs to ensure that interventions are in place and staff are trained on how to implement them appropriately.
L35	Individuals receive routine preventive screenings.	For ten individuals, preventative screenings were not scheduled or performed. The agency needs to ensure that all individuals receive required preventative screenings based on their age and gender.
L36	Recommended tests and appointments with specialists are made and kept.	For five individuals, recommended tests and appointments with specialty doctors were not made or kept. The agency needs to ensure that all individuals attend scheduled tests and appointments with their specialists.
L43	The health care record is maintained and updated as required.	Four of sixteen health care records had not been updated when significant changes occurred. The agency needs to ensure health care records are updated when significant changes occur throughout the year in accordance with current DDS definitions. The agency must also ensure the Health Care Record contains all the needed information in accordance with regulations and is updated at the time of the ISP.
L57	All behavior plans are in a written plan.	For two individuals, behavioral interventions with a restrictive or negative component were not in a written plan. The agency needs to ensure there is a written behavior plan for all restrictive practices and/or aversive components.
L60	Data are consistently maintained and used to determine the efficacy of behavioral interventions.	For one behavior plan reviewed, data collection was not occurring for a restrictive behavioral intervention. The agency needs to ensure data is maintained regularly and reviewed as required to determine the restrictive behavioral intervention's efficacy.

Residential 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.	Four out of fourteen medication treatment plans were either not in place and/or the plan did not contain the required components. The agency needs to ensure medication treatment plans are in place for all behavior modifying medications and the plan contains all 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.	Six out of twelve individuals' funds management plans reviewed lacked the required components. The agency needs to ensure that funds management plans outline the specific supports that the individual requires to manage his/her own money and include specifics related to access, responsibilities, safeguards, and protections. The agency also needs to ensure that there is written agreement to plans.
L78	Staff are trained to safely and consistently implement restrictive interventions.	At one of the two locations, staff had not been implementing restrictive interventions in accordance with the mitigation plan. The agency must ensure that all staff are trained in any restrictive behavioral interventions, with documentation confirming that the plans are implemented correctly, consistently, and safely.
L86	Required assessments concerning individual needs and abilities are completed in preparation for the ISP.	For six out of fourteen individuals, ISP assessments were not submitted at least 15 days prior to the ISP meeting. The agency must ensure that all required assessments are completed and submitted within the mandated timelines.
L87	Support strategies necessary to assist an individual to meet their goals and objectives are completed and submitted as part of the ISP.	For five out of fifteen individuals, ISP support strategies were not submitted at least 15 days prior to the ISP. The agency needs to ensure that all required goals and objectives are submitted within required timelines.
L91	Incidents are reported and reviewed as mandated by regulation.	At eight out of sixteen locations, incident reports were not submitted and/or finalized within the required regulatory timeframes, and guardians were not notified as required. The agency must ensure that all incidents are submitted and finalized according to regulatory timelines, and that guardians are informed of major incidents as soon as reasonably practical, and of minor incidents according to the guardians' preferences.

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

Indicator #	Indicator	Area Needing Improvement
L1	Individuals have been trained and guardians are provided with information in how to report alleged abuse/neglect.	Four individuals had not had an annual review of how to report abuse/neglect. The agency needs to ensure individuals have received annual training in how to report alleged abuse/neglect. Additionally, this training should be tailored to match the learning styles of the individuals receiving the information.
L7	Fire drills are conducted as required.	At one location, fire drills were not conducted at the frequency agreed upon in the DDS-approved Emergency Evacuation Safety Plan (EESP). Furthermore, some evacuation reports failed to capture required information, such as the level of assistance provided to individuals during the drill. The agency needs to ensure that drills are conducted in accordance with the frequency identified within the EESP and documentation of drills includes the names of individuals participating in the drill and the level of assistance provided to them.
L8	Emergency fact sheets are current and accurate and available on site.	For nine of fourteen individuals, Emergency Fact Sheets (EFS) were either not in place or missing required information. The agency needs to ensure each person has an EFS and that the required information in them is complete and current.
L49	Individuals and guardians have been informed of their human rights and know how to file a grievance or to whom they should talk if they have a concern.	Four individuals had not received at least annual training in human rights, including how to file a grievance. The agency needs to ensure that all individuals and Guardians for individuals have been informed of their human rights and know how to file a grievance or to whom they should contact if they have a concern.
L88	Services and support strategies identified and agreed upon in the ISP for which the provider has designated responsibility are being implemented.	For four individuals, ISP objectives were either not being implemented as described within support strategies, and /or data was not being collected. The agency needs to ensure that ISP goals and objectives are implemented as designed and actively worked on. The agency needs to ensure data is collected so that progress towards each objective can be measured.

CERTIFICATION FINDINGS

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	**6/6**	**0/6**	
Residential and Individual Home Supports	**97/101**	**4/101**	
ABI-MFP Placement Services	20/20	0/20	
ABI-MFP Residential Services	20/20	0/20	
Residential Services	16/20	4/20	
Placement Services	20/20	0/20	
Individual Home Supports	21/21	0/21	
Total	**103/107**	**4/107**	**96%**
Certified			

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	**6/6**	**0/6**	
Employment and Day Supports	**27/36**	**9/36**	
Community Based Day Services	12/15	3/15	
Employment Support Services	15/21	6/21	
Total	**33/42**	**9/42**	**79%**
Certified with Progress Report			

Residential 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.	Three out of seven individuals did not have the opportunity to provide feedback on staff performance, either at the time of hire or on an ongoing basis. The agency needs to ensure the opportunity to provide feedback at the time of hire is afforded to each individual or a representative of their home, and that every individual has the opportunity to provide feedback on staff performance.

Residential Services- Areas Needing Improvement on Standards not met:

Indicator #	Indicator	Area Needing Improvement
C12	Individuals are supported to explore, define, and express their need for intimacy and companionship.	Two individuals had not been supported to explore, define, and express their need for intimacy and companionship. The agency needs to ensure individuals' interest and need for support in the area of intimacy and companionship is identified and then design and implement actions to support these identified interests and needs.
C16	Staff (Home Providers) support individuals to explore, discover and connect with their interests for cultural, social, recreational and spiritual activities.	Two individuals had not been supported to explore, discover and connect with their interests for cultural, social, recreational and spiritual activities. The agency needs to ensure staff observe, evaluate, and document individuals' interests; then support individuals in exploration, discovery and participation in integrated cultural, social, recreational and spiritual activities on a consistent and sustained basis.
C17	Community activities are based on the individual's preferences and interests.	Three of seven individuals had not been provided frequent opportunities to engage in community activities based on their preferences and interests. The agency must ensure staff are knowledgeable about local events and activities and provide frequent opportunities for community activities that are in line with the individuals' preferences and interests.

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

Indicator #	Indicator	Area Needing Improvement
C13	Staff (Home Providers) provide support for individuals to develop skills to enable them to maximize independence and participation in typical activities and routines.	Three individuals were not provided the support necessary to develop work related skills. The agency needs to ensure all individuals receive supports to explore and develop work skills, to obtain and maintain paid work in integrated work settings, and the supports to help individuals on a pathway to employment by developing the skills to secure work.

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.	For three individuals, the agency had not developed a plan to identify job goals and support needs that would lead to movement into supported employment. The agency needs to ensure there is a plan developed to identify job goals and support needs for all individuals, with the exception of those nearing or on a retirement path.
C44	Staff have effective methods to assist individuals to explore their job interests if appropriate.	The agency did not have effective methods to assist all six individuals to explore their job interests. The agency needs to develop effective methods to assist all individuals to explore their job interests.
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.	Four of seven individuals did not have the opportunity to provide feedback on staff performance, either at the time of hire or on an ongoing basis. The agency needs to ensure the opportunity to provide feedback at the time of hire and on an ongoing basis is afforded to every individual.
C22	Staff have effective methods to assist individuals to explore their job interests.	For both individuals reviewed, the agency did not have effective methods to assist them in the exploration of their job interests. The agency needs to have and utilize effective methods to assist all individuals to explore their job interests.
C23	Staff utilize a variety of methods to assess an individual's skills, interests, career goals and training and support needs in employment.	For both individuals reviewed, the agency had not utilized a variety of methods to assess their skills, interests, career goals and training needs. The agency needs to utilize a variety of methods to assess these areas for all individuals.
C24	There is a plan developed to identify job goals and support needs.	For both individuals reviewed, there was no career plan developed to identify job goals and support needs. The agency needs to ensure all individuals have a career plan developed to identify their job goals and support needs.

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

Indicator #	Indicator	Area Needing Improvement
C25	Staff assist individuals to work on skill development for job attainment and success.	For one of two individuals, skill development for job obtainment and success was not supported. The agency needs to ensure all individuals are assisted to work on skill development for job attainment and success; skills training should be in line with assessed careers of interest.
C29	Individuals are supported to obtain employment that matches their skills and interests.	For the one individual reviewed, their employment did not match their identified areas of interest. The agency needs to ensure all individuals are supported to obtain employment that matches identified skills and areas of interest.

MASTER SCORE SHEET LICENSURE

Organizational: Fidelity House dba Waystone HHS

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
L2	Abuse/neglect reporting	15/18	Met(83.33 %)
L3	Immediate Action	13/15	Met(86.67 %)
L4	Action taken	13/15	Met(86.67 %)
L48	HRC	0/1	Not Met(0 %)
L65	Restraint report submit	3/3	Met
L66	HRC restraint review	1/3	Not Met(33.33 %)
L74	Screen employees	4/4	Met
L75	Qualified staff	7/7	Met
L76	Track trainings	19/20	Met(95.00 %)
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	4/7	1/1	5/5		1/1	2/2	**13/16**	**Met (81.25%)**
L5	Safety Plan	L	6/7	1/1	5/5		1/1	2/2	**15/16**	**Met (93.75%)**
⌐ L6	Evacuation	L	7/7	1/1	5/5		1/1	2/2	**16/16**	**Met**
L7	Fire Drills	L	3/7				1/1		**4/8**	**Not Met (50.0%)**
L8	Emergency Fact Sheets	I	4/7	0/1	4/5		0/1	2/2	**10/16**	**Not Met (62.50%)**
L9 (07/21)	Safe use of equipment	I	7/7	1/1			1/1		**9/9**	**Met**
L10	Reduce risk interventions	I	1/2		1/2		1/1		**3/5**	**Not Met (60.0%)**
⌐ L11	Required inspections	L	6/6		5/5		1/1	2/2	**14/14**	**Met**
⌐ L12	Smoke detectors	L	7/7		4/5		1/1	2/2	**14/15**	**Met (93.33%)**
⌐ L13	Clean location	L	7/7		5/5		1/1	2/2	**15/15**	**Met**
L14	Site in good repair	L	7/7		4/4		1/1	2/2	**14/14**	**Met**
L15	Hot water	L	7/7		5/5		1/1	2/2	**15/15**	**Met**
L16	Accessibility	L	7/7		5/5		1/1	1/1	**14/14**	**Met**
L17	Egress at grade	L	7/7		5/5		1/1	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
L18	Above grade egress	L	2/2		2/2			2/2	**6/6**	**Met**
L19	Bedroom location	L	5/5		2/2		1/1		**8/8**	**Met**
L20	Exit doors	L	7/7				1/1		**8/8**	**Met**
L21	Safe electrical equipment	L	7/7		5/5		1/1	2/2	**15/15**	**Met**
L22	Well-maintained appliances	L	7/7		3/3		1/1	2/2	**13/13**	**Met**
L23	Egress door locks	L	6/6				1/1		**7/7**	**Met**
L24	Locked door access	L	6/6		5/5		1/1		**12/12**	**Met**
L25	Dangerous substances	L	7/7				1/1		**8/8**	**Met**
L26	Walkway safety	L	7/7		5/5		1/1	2/2	**15/15**	**Met**
L27	Pools, hot tubs, etc.	L			1/1				**1/1**	**Met**
L28	Flammables	L	7/7				1/1		**8/8**	**Met**
L29	Rubbish /combustibles	L	7/7		4/5		1/1	2/2	**14/15**	**Met (93.33 %)**
L30	Protective railings	L	7/7		5/5			2/2	**14/14**	**Met**
L31	Communication method	I	7/7	1/1	5/5		1/1	2/2	**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	7/7	1/1	5/5		1/1	2/2	**16/16**	**Met**
L33	Physical exam	I	6/6	1/1	5/5		1/1	2/2	**15/15**	**Met**
L34	Dental exam	I	5/6	1/1	4/4		1/1	2/2	**13/14**	**Met (92.86 %)**
L35	Preventive screenings	I	2/7	1/1	0/4		1/1	1/2	**5/15**	**Not Met (33.33 %)**
L36	Recommended tests	I	6/7	1/1	2/5		1/1	1/2	**11/16**	**Not Met (68.75 %)**
L37	Prompt treatment	I	7/7	1/1	5/5		1/1	2/2	**16/16**	**Met**
L38	Physician's orders	I	5/7		1/1		1/1	2/2	**9/11**	**Met (81.82 %)**
L39	Dietary requirements	I	7/7	1/1	3/3			1/1	**12/12**	**Met**
L40	Nutritional food	L	7/7	1/1			1/1		**9/9**	**Met**
L41	Healthy diet	L	7/7	1/1	5/5		1/1	2/2	**16/16**	**Met**
L42	Physical activity	L	7/7	1/1	5/5		1/1	2/2	**16/16**	**Met**
L43	Health Care Record	I	4/7	1/1	4/5		1/1	2/2	**12/16**	**Not Met (75.00 %)**
L44	MAP registration	L	7/7				1/1		**8/8**	**Met**
L45	Medication storage	L	7/7				1/1		**8/8**	**Met**
L46	Med. Administration	I	6/7		5/5		1/1	1/1	**13/14**	**Met (92.86 %)**
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	6/7	1/1	5/5		1/1	2/2	**15/16**	**Met (93.75 %)**
L50 (07/21)	Respectful Comm.	I	7/7	1/1	5/5		1/1	2/2	**16/16**	**Met**
L51	Possessions	I	7/7	1/1	4/4		1/1	2/2	**15/15**	**Met**
L52	Phone calls	I	7/7	1/1	5/5		1/1	2/2	**16/16**	**Met**
L53	Visitation	I	7/7	1/1	5/5		1/1	2/2	**16/16**	**Met**
L54 (07/21)	Privacy	I	7/7	1/1	5/5		1/1	2/2	**16/16**	**Met**
L55	Informed consent	I	2/2						**2/2**	**Met**
L56	Restrictive practices	I	1/1						**1/1**	**Met**
L57	Written behavior plans	I	0/1		0/1				**0/2**	**Not Met (0 %)**
L60	Data maintenance	I	1/1		0/1				**1/2**	**Not Met (50.0 %)**
L61	Health protection in ISP	I	3/5	1/1	2/2		1/1	1/1	**8/10**	**Met (80.0 %)**
L62	Health protection review	I	2/2		1/1		1/1		**4/4**	**Met**
L63	Med. treatment plan form	I	4/7		3/4		1/1	2/2	**10/14**	**Not Met (71.43 %)**
L64	Med. treatment plan rev.	I	7/7		4/4		1/1	2/2	**14/14**	**Met**

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L67	Money mgmt. plan	I	2/7	1/1	2/3		1/1		**6/12**	**Not Met (50.0 %)**
L68	Funds expenditure	I	6/6	1/1	3/3		1/1		**11/11**	**Met**
L69	Expenditure tracking	I	5/6	1/1	2/3				**8/10**	**Met (80.0 %)**
L70	Charges for care calc.	I	7/7		3/4		1/1	2/2	**13/14**	**Met (92.86 %)**
L71	Charges for care appeal	I	7/7		3/4		1/1	2/2	**13/14**	**Met (92.86 %)**
L77	Unique needs training	I	7/7	1/1	5/5		1/1	2/2	**16/16**	**Met**
L78	Restrictive Int. Training	L	0/1		1/1				**1/2**	**Not Met (50.0 %)**
L79	Restraint training	L	1/1						**1/1**	**Met**
L80	Symptoms of illness	L	5/7	1/1	5/5		1/1	2/2	**14/16**	**Met (87.50 %)**
L81	Medical emergency	L	7/7	1/1	5/5		1/1	2/2	**16/16**	**Met**
L82	Medication admin.	L	6/7				1/1		**7/8**	**Met (87.50 %)**
L84	Health protect. Training	I	4/5	1/1	3/3		1/1	1/1	**10/11**	**Met (90.91 %)**
L85	Supervision	L	6/7	1/1	4/5		1/1	2/2	**14/16**	**Met (87.50 %)**
L86	Required assessments	I	3/7	0/1	3/3		0/1	2/2	**8/14**	**Not Met (57.14 %)**

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L87	Support strategies	I	4/7	0/1	4/4		0/1	2/2	**10/15**	**Not Met (66.67 %)**
L88	Strategies implemented	I	5/7	1/1	5/5		1/1	2/2	**14/16**	**Met (87.50 %)**
L89	Complaint and resolution process	L					1/1	2/2	**3/3**	**Met**
L90	Personal space/bedroom privacy	I	7/7	1/1	4/5		1/1	2/2	**15/16**	**Met (93.75 %)**
L91	Incident management	L	1/7	1/1	4/5		0/1	2/2	**8/16**	**Not Met (50.0 %)**
L93 (05/22)	Emergency back-up plans	I	7/7	1/1	5/5		1/1	2/2	**16/16**	**Met**
L94 (05/22)	Assistive technology	I	6/7	1/1	5/5		1/1	2/2	**15/16**	**Met (93.75 %)**
L96 (05/22)	Staff training in devices and applications	I	5/5	1/1	3/3			2/2	**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
L99 (05/22)	Medical monitoring devices	I	2/2		1/1		1/1	1/1	**5/5**	**Met**
#Std. Met/# 81 Indicator									**67/81**	
Total Score									**75/91**	
									82.42%	

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	3/7		7/7	**10/14**	**Not Met (71.43 %)**
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	0/7		5/7	**5/14**	**Not Met (35.71 %)**
L9 (07/21)	Safe use of equipment	I	7/7		7/7	**14/14**	**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**
L17	Egress at grade	L			1/1	**1/1**	**Met**

Ind. #	Ind.	Loc. or Indiv.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
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**
L28	Flammables	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	**14/14**	**Met**
L32	Verbal & written	I	7/7		7/7	**14/14**	**Met**
L37	Prompt treatment	I	7/7		7/7	**14/14**	**Met**
L38	Physician's orders	I			7/7	**7/7**	**Met**
L39	Dietary requirements	I			6/6	**6/6**	**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	3/7		7/7	**10/14**	**Not Met (71.43 %)**
L50 (07/21)	Respectful Comm.	I	7/7		7/7	**14/14**	**Met**
L51	Possessions	I	7/7		7/7	**14/14**	**Met**
L52	Phone calls	I	7/7		7/7	**14/14**	**Met**
L54 (07/21)	Privacy	I	7/7		7/7	**14/14**	**Met**

Ind. #	Ind.	Loc. or Indiv.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L55	Informed consent	I	3/3		4/4	**7/7**	**Met**
L61	Health protection in ISP	I			4/4	**4/4**	**Met**
L62	Health protection review	I			4/4	**4/4**	**Met**
L63	Med. treatment plan form	I			2/2	**2/2**	**Met**
L64	Med. treatment plan rev.	I			2/2	**2/2**	**Met**
L77	Unique needs training	I	7/7		7/7	**14/14**	**Met**
L80	Symptoms of illness	L	1/1		1/1	**2/2**	**Met**
L81	Medical emergency	L	1/1		1/1	**2/2**	**Met**
L82	Medication admin.	L			1/1	**1/1**	**Met**
L84	Health protect. Training	I			4/4	**4/4**	**Met**
L85	Supervision	L	1/1		1/1	**2/2**	**Met**
L86	Required assessments	I	7/7		6/7	**13/14**	**Met (92.86 %)**
L87	Support strategies	I	7/7		6/7	**13/14**	**Met (92.86 %)**
L88	Strategies implemented	I	4/7		6/7	**10/14**	**Not Met (71.43 %)**
L91	Incident management	L			1/1	**1/1**	**Met**
L93 (05/22)	Emergency back-up plans	I	7/7		7/7	**14/14**	**Met**
L94 (05/22)	Assistive technology	I	7/7		6/7	**13/14**	**Met (92.86 %)**
#Std. Met/# 52 Indicator						**47/52**	
Total Score						**55/62**	
						88.71%	

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	4/7	**Not Met (57.14 %)**
C8	Family/guardian communication	7/7	**Met**
C9	Personal relationships	6/7	**Met (85.71 %)**
C10	Social skill development	7/7	**Met**
C11	Get together w/family & friends	7/7	**Met**
C12	Intimacy	5/7	**Not Met (71.43 %)**
C13	Skills to maximize independence	7/7	**Met**
C14	Choices in routines & schedules	7/7	**Met**
C15	Personalize living space	6/6	**Met**
C16	Explore interests	5/7	**Not Met (71.43 %)**
C17	Community activities	4/7	**Not Met (57.14 %)**
C18	Purchase personal belongings	6/6	**Met**
C19	Knowledgeable decisions	7/7	**Met**
C46	Use of generic resources	6/7	**Met (85.71 %)**
C47	Transportation to/ from community	7/7	**Met**
C48	Neighborhood connections	7/7	**Met**
C49	Physical setting is consistent	7/7	**Met**
C51	Ongoing satisfaction with services/ supports	7/7	**Met**
C52	Leisure activities and free-time choices /control	7/7	**Met**

Residential Services

Indicator #	Indicator	Met/Rated	Rating
C53	Food/ dining choices	7/7	**Met**

ABI-MFP Residential Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	1/1	**Met**
C8	Family/guardian communication	1/1	**Met**
C9	Personal relationships	1/1	**Met**
C10	Social skill development	1/1	**Met**
C11	Get together w/family & friends	1/1	**Met**
C12	Intimacy	1/1	**Met**
C13	Skills to maximize independence	1/1	**Met**
C14	Choices in routines & schedules	1/1	**Met**
C15	Personalize living space	1/1	**Met**
C16	Explore interests	1/1	**Met**
C17	Community activities	1/1	**Met**
C18	Purchase personal belongings	1/1	**Met**
C19	Knowledgeable decisions	1/1	**Met**
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**

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**

Placement Services

Indicator #	Indicator	Met/Rated	Rating
C11	Get together w/family & friends	5/5	**Met**
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	5/5	**Met**
C16	Explore interests	5/5	**Met**
C17	Community activities	5/5	**Met**
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	5/5	**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**

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**

ABI-MFP Placement Services

Indicator #	Indicator	Met/Rated	Rating
C18	Purchase personal belongings	2/2	**Met**
C19	Knowledgeable decisions	2/2	**Met**
C46	Use of generic resources	2/2	**Met**
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**

Individual Home Supports

Indicator #	Indicator	Met/Rated	Rating
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	4/7	**Not Met (57.14 %)**
C37	Interpersonal skills for work	6/6	**Met**
C38 (07/21)	Habilitative & behavioral goals	5/6	**Met (83.33 %)**
C39 (07/21)	Support needs for employment	2/5	**Not Met (40.0 %)**
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	0/6	**Not Met (0 %)**
C45	Revisit decisions	7/7	**Met**
C46	Use of generic resources	7/7	**Met**
C47	Transportation to/ from community	7/7	**Met**
C51	Ongoing satisfaction with services/ supports	7/7	**Met**

Employment Support Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	3/7	**Not Met (42.86 %)**
C8	Family/guardian communication	7/7	**Met**
C22	Explore job interests	0/2	**Not Met (0 %)**
C23	Assess skills & training needs	0/2	**Not Met (0 %)**
C24	Job goals & support needs plan	0/2	**Not Met (0 %)**
C25	Skill development	1/2	**Not Met (50.0 %)**
C26	Benefits analysis	7/7	**Met**

Employment Support Services

Indicator #	Indicator	Met/Rated	Rating
C27	Job benefit education	2/2	**Met**
C28	Relationships w/businesses	1/1	**Met**
C29	Support to obtain employment	0/1	**Not Met (0 %)**
C30	Work in integrated settings	5/5	**Met**
C31	Job accommodations	7/7	**Met**
C32	At least minimum wages earned	6/6	**Met**
C33	Employee benefits explained	6/6	**Met**
C34	Support to promote success	5/6	**Met (83.33 %)**
C35	Feedback on job performance	6/6	**Met**
C36	Supports to enhance retention	6/6	**Met**
C37	Interpersonal skills for work	3/3	**Met**
C47	Transportation to/ from community	7/7	**Met**
C50	Involvement/ part of the Workplace culture	5/5	**Met**
C51	Ongoing satisfaction with services/ supports	7/7	**Met**