



**PROVIDER REPORT
FOR**

**JUSTICE RESOURCE
INSTITUTE
160 Gould St
Needham, MA 02494**

February 18, 2023

Version

Public Provider Report

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

SUMMARY OF OVERALL FINDINGS

Provider JUSTICE RESOURCE INSTITUTE

Review Dates 12/12/2022 - 12/16/2022

**Service Enhancement
Meeting Date** 1/5/2023

Survey Team Susan Dudley-Oxx
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Citizen Volunteers

Survey scope and findings for Residential and Individual Home Supports

Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Residential and Individual Home Supports	6 location(s) 6 audit (s)	Full Review	83/91 2 Year License 01/05/2023 - 01/05/2025		26 / 26 Certified 01/05/2023 - 01/05/2025
Residential Services	6 location(s) 6 audit (s)			Full Review	20 / 20
Planning and Quality Management (For all service groupings)				Full Review	6 / 6

Survey scope and findings for Employment and Day Supports

Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Employment and Day Supports	6 location(s) 18 audit (s)	Full Review	51/68 Defer Licensure		30 / 42 Certified with Progress Report
Community Based Day Services	3 location(s) 11 audit (s)			Full Review	12 / 15
Employment Support Services	3 location(s) 7 audit (s)			Full Review	12 / 21
Planning and Quality Management (For all service groupings)				Full Review	6 / 6

EXECUTIVE SUMMARY :

Justice Resource Institute (JRI), based in Needham MA, is a human services agency that provides an array of services including residential and day services offerings to individuals with Intellectual and Developmental Disabilities (ID/DD). JRI operates 24-hour Residential services, Individual Home supports (IHS), Community-Based Day services, and Employment supports; the services are provided in the Metro-West area of MA through its Developing Abilities program, and in the Western part of the state through Berkshire Meadows. The agency also operates Day Habilitation programs.

For this 2022 licensing and certification review, the Department of Developmental Services (DDS) Metro Office of Quality Enhancement (OQE) conducted a full licensing and certification review of the agency's residential and day services. The scope of this review included audits at six of the agency's 24-hour residential program sites, as well as three CBDS and employment sites.

Survey results highlighted JRI's striving at providing quality services to people and its positive practices. Surveyors found that allegations of abuse and neglect were reported as mandated, and action taken in a timely manner in response to allegations of abuse or neglect. In the area of Human Rights, the agency's human rights committees were effective, and the meetings were well attended by the required members. As it relates to satisfaction with services, input was sought from individuals, families, guardians, staff, and other stakeholders. This input was utilized to inform agency goal development and to make service delivery changes. Across all services, facilities operated by JRI were clean, inviting, and well-maintained.

Within the residential services grouping, JRI's commitment to the safety and well-being of the individuals was evident. Fire drills were conducted as required, and individuals were supported to evacuate in a timely manner in the event of emergency. Homes were maintained, comfortable and decorated to the tastes of individuals who reside in in them. In the area of health care, medication was administered according to physician's written orders, and individuals annual physical and dental screenings were supported; appointments with specialists were also made and kept. Funds management systems across JRI were found to be effective; the management of funds were in line with agreements reached between the agency and individuals served/guardians.

JRI residential staff had familiarity with and effectively supported the needs of individuals; in many cases, staff had been working with the same individuals for lengthy periods of time. JRI had a document at its residences called, "Individual Interactional Guidelines"; this document outlined specifics about every individual, from the practical, such as the level of independence with toileting, ambulation, and eating; to the emotional such as psychological, social, preferred activities, choice, and need for praise. This was a valuable tool for staff and others to understand the unique needs and personalities of the individuals serves. In the certification areas, JRI supported individuals with community outings based on interests. People were also given the opportunity to provide feedback at the time of new staff hiring, as well as on staff performance during evaluations.

Within day and employment supports; as it relates to safety, people in CBDS were supported to evacuate in a reasonable amount of time in the event of an emergency. Safety plans were signed and current; emergency back-up plans were in place; and the sites were clean and adapted to the needs of the individuals served. In the areas of independence and choice, individuals were trained in human rights, and were assessed as to their potential needs for assistive technology. Individuals had privacy when taking care of personal matters, and behavior plans when needed were in written format with data being collected consistently. Additionally, Individuals were supported to build skills which would enhance their interpersonal skills; they were also supported to gain and maintain skills necessary for their current and future employment.

The survey highlighted many positive practices at JRI; it however, also revealed many areas in need of further attention from the agency. Within residential services, relating to healthcare, data was not

being collected on the specific symptoms of conditions being treated with medication listed in medication treatment plans; additionally, any medication prescribed as pre-sedation for medical or dental appointments must have a treatment plan. As it relates to supports and health-related equipment, outlines for supports and health-related protection equipment must include all required information. The agency must also ensure that all staff are trained on the signs and symptoms of illness utilizing a full curriculum that includes "just not right". Relating to the ISP, required assessments and support strategies must be submitted within the required timelines in preparation for ISP meetings. Additionally, implementation of ISP goals and objectives must be supported and documented in line with the teaching strategies set forth in the provider support strategies. In the area of human rights, restrictive practices that affect all residents of a site must be in written format and contain all required elements and reviews. Staff must also be trained on the proper implementation of these restrictions. incidents must be submitted and finalized within the required timelines.

Within the day services, regarding environmental safety, all systems including sprinkler systems must be inspected annually as required; water temperature must also be maintained to be at required levels. In the area of health care, emergency fact sheets must contain all relevant and accurate information and medication must be administered in accordance with current physician's orders. When behavior modifying medication are administered, medication treatment plans must be developed with all required elements including data collection. When staff assist individuals with health-related equipment, all staff must be trained on the safe and proper utilization of these devices. The survey also revealed the need for staff to be trained on the signs and symptoms of illness utilizing the full curriculum that includes, "just not right". In the area of the ISP, required assessments and support strategies must be developed and submitted within the required timelines in preparation for the ISP. Similarly, incidents must be reported and finalized within the required timelines. As it relates to human rights, all individuals must receive human rights training which includes clear information on how to file a grievance. Also, environmental restrictions which impact individuals at day service sites must be in written format and contain all required elements; staff must be also trained to properly implement these environmental restrictions. To ensure consistency in supports and the addressing of identified issues, JRI must establish and abide by an effective ongoing system of supervision and staff development. It must ensure that staff are trained, and oversight provided in the proper implementation of requirements in all programmatic areas.

In the area of certification, JRI must work toward assessing and supporting individuals in its CBDS programs in various aspects of career interest exploration and job readiness. In employment supports, the agency must further its attempts at making connections with local businesses to generate employment options for people it serves. Individuals should be fully assessed for their skills, interests, and abilities relative to employment; and detailed written career plans should be developed accordingly. JRI should display greater effort in supporting individuals to obtain employment that match their skills and interests.

Based on the findings of this survey, JRI's met 91% of licensing indicators in residential services and will receive a two-year license for the residential service grouping. It will conduct its own follow-up of licensing indicators that were not met within 60 days of the service enhancement meeting and submit the results to the DDS Metro Office of Quality Enhancement. The residential services grouping is also certified having met 100% of certification indicators.

JRI day services met 75% of licensing indicators. Because the day services did not meet the standard required for two critical licensing indicators, the agency's day/employment services grouping will be in deferred licensure status. The agency will undergo a 60-day follow-up review conducted by the DDS Metro Office of Quality Enhancement within 60 days of the SEM meeting. If at follow-up the agency demonstrates correction of the critical indicators, the agency will receive a Two-Year License with Mid-Cycle Review for its day/employment services grouping. The agency's day/employment service grouping is certified with progress report having met 71% of certification indicators. It will submit a progress report to the DDS Metro Office of Quality Enhancement on all not met certification indicators

within one year of the SEM meeting.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	9/10	1/10	
Residential and Individual Home Supports	74/81	7/81	
Residential Services			
Critical Indicators	8/8	0/8	
Total	83/91	8/91	91%
2 Year License			
# indicators for 60 Day Follow-up		8	

	Met / Rated	Not Met / Rated	% Met
Organizational	9/10	1/10	
Employment and Day Supports	42/58	16/58	
Community Based Day Services Employment Support Services			
Critical Indicators	6/8	2/8	
Total	51/68	17/68	75%
Defer Licensure			
# indicators for 60 Day Follow-up		17	

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.	Six out of the seven restraints reported within the review period were submitted, and/ or finalized beyond the required timelines. The agency must ensure that restraints are reported and finalized within the required timelines.

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

Indicator #	Indicator	Area Needing Improvement
L56	Restrictive practices intended for one individual that affect all individuals served at a location need to have a written rationale that is reviewed as required and have provisions so as not to unduly restrict the rights of others.	For one of two individuals, environmental restrictions did not have a written outline which contained a rationale and all required components. The agency must ensure that all environmental restrictions are properly written up and reviewed by the required parties.
L63	Medication treatment plans are in written format with required components.	For three of six individuals, medication treatment plans did not include all required components. Medication treatment plans must contain all required components when in place because behavior modifying medication is being administered by the provider.
L78	Staff are trained to safely and consistently implement restrictive interventions.	At one of three locations, staff had not been trained on the proper implementation of restrictive interventions. Staff must be trained to safely and consistently implement restrictive interventions.
L80	Support staff are trained to recognize signs and symptoms of illness.	At five of six sites, staff had not been trained utilizing the full curriculum for signs and symptoms of illness training. All staff must be trained utilizing the full complement of training materials on this subject including "just not right."
L86	Required assessments concerning individual needs and abilities are completed in preparation for the ISP.	For two of four individuals, required assessments were not completed and submitted within the required timelines. The agency must ensure that assessments are developed and submitted in at least 15 days before the scheduled ISP meeting date.
L87	Support strategies necessary to assist an individual to meet their goals and objectives are completed and submitted as part of the ISP.	For two of four individuals, support strategies were not completed and submitted within the required timelines. The agency must ensure that support strategies are developed and submitted in preparation for the ISP at least 15 days before the scheduled meeting date.
L91	Incidents are reported and reviewed as mandated by regulation.	At four of six sites, incidents were submitted and/or finalized beyond the required timelines. Incidents must be submitted and finalized in accordance with mandatory timelines.

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

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

Indicator #	Indicator	Area Needing Improvement
L8	Emergency fact sheets are current and accurate and available on site.	For four of eighteen individuals, emergency fact sheets were not current and accurate. The agency must ensure that all emergency fact sheets contain all relevant and accurate information and are available where programming is taking place.
℞ L11	All required annual inspections have been conducted.	At one of three sites, required annual inspections had not been performed. All required inspections must be conducted annually in accordance with regulations.
L15	Hot water temperature tests between 110 and 120 degrees (as of 1/2014).	At two of three sites, water temperature tested outside of the required temperature range. Water temperatures must be maintained to be within the required temperature limits at all program sites.
℞ L46	All prescription medications are administered according to the written order of a practitioner and are properly documented on a Medication Treatment Chart.	For three of eight individuals, medication was not being administered according to the written order of a practitioner. Medications administered at all program sites must be administered in accordance with signed practitioner's order and MAP policy where applicable.
L56	Restrictive practices intended for one individual that affect all individuals served at a location need to have a written rationale that is reviewed as required and have provisions so as not to unduly restrict the rights of others.	For all ten individuals, environmental restrictions did not have a written outline which contained a rationale and all other required components. The agency must ensure that all environmental restrictions are properly outlined and reviewed by the required parties.
L61	Supports and health related protections are included in ISP assessments and the continued need is outlined.	For one individual, supports and health-related protections were not fully outlined. The agency must ensure that all required elements are included in outlines relative to all health-related supports utilized by individuals.
L63	Medication treatment plans are in written format with required components.	For six of seven individuals, medication treatment plans did not include all required components. In some cases, medication treatment plans were absent when a behavior modifying medication was being administered. The agency must ensure that medication treatment plans are developed to contain all required components when behavior modifying medication is being administered by the provider.
L64	Medication treatment plans are reviewed by the required groups.	For six of seven individuals, medication treatment plans had not been submitted to the ISP team.

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

Indicator #	Indicator	Area Needing Improvement
L78	Staff are trained to safely and consistently implement restrictive interventions.	At two of the three sites, staff were not trained on the restrictive interventions in use. The agency must ensure that staff are trained on all restrictive practices.
L80	Support staff are trained to recognize signs and symptoms of illness.	At three of the six sites, staff had not been trained on signs and symptoms of illness utilizing a full required curriculum. The agency must ensure that staff are trained utilizing the full complement of training materials on signs and symptoms including "just not right."
L84	Staff / care providers are trained in the correct utilization of health related protections per regulation.	At one site, staff had not been trained on the health-related supports utilized on site. The provider must ensure that all staff are trained on the proper utilization of health-related support equipment.
L85	The agency provides ongoing supervision, oversight and staff development.	At all the three-day service programs, supervision, staff development and oversight were found to be lacking. The agency needs to implement a consistent system for supervision and staff development which ensures compliance with regulations is maintained.
L86	Required assessments concerning individual needs and abilities are completed in preparation for the ISP.	For six of fourteen individuals, required assessments for the ISP were not completed and submitted within the required timelines. The agency must ensure that assessments are submitted in preparation for the ISP at least 15 days before the scheduled meeting date.
L87	Support strategies necessary to assist an individual to meet their goals and objectives are completed and submitted as part of the ISP.	For eight of the fifteen individuals, provider support strategies were not completed and submitted within the required timelines. The agency must ensure that support strategies are completed and submitted at least 15 days before in preparation for the ISP meeting date.
L88	Services and support strategies identified and agreed upon in the ISP for which the provider has designated responsibility are being implemented.	For nine of eighteen individuals, services and support strategies for goals which were identified and agreed upon in the ISP were not being implemented. The agency needs to ensure that services and support strategies for goals which were identified and agreed upon in the ISP are consistently implemented.
L91	Incidents are reported and reviewed as mandated by regulation.	At one of three sites, incidents were reported and/or finalized, beyond the required timelines. The agency must ensure that incidents are submitted and finalized in accordance with mandatory timelines.

CERTIFICATION FINDINGS

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	6/6	0/6	
Residential and Individual Home Supports	20/20	0/20	
Residential Services	20/20	0/20	
Total	26/26	0/26	100%
Certified			

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	6/6	0/6	
Employment and Day Supports	24/36	12/36	
Community Based Day Services	12/15	3/15	
Employment Support Services	12/21	9/21	
Total	30/42	12/42	71%
Certified with Progress Report			

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

Indicator #	Indicator	Area Needing Improvement
C38 (07/21)	Specific habilitative and behavioral goals necessary to prepare individuals for work are identified.	Four of eleven individuals did not have specific behavioral or habilitative goals identified. To prepare individuals for some manner of work, the agency must develop and support behavioral and habilitative goals for individuals.
C39 (07/21)	There is a plan developed to identify job goals and support needs that would lead to movement into supported employment.	For five of eleven individuals a plan identifying job goals and support needs had not been developed. The agency must ensure that a detailed written plan is developed for individuals that addresses job goals and support needs.

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

Indicator #	Indicator	Area Needing Improvement
C44	Staff have effective methods to assist individuals to explore their job interests if appropriate.	For three of eleven individuals, staff were not supporting them to explore potential job interests. The agency should employ effective methods to assess individual interests which may lead to exploration of supported employment.
C22	Staff have effective methods to assist individuals to explore their job interests.	For four of five individuals, staff did not demonstrate effective methods for assisting people to explore their job interests. The agency must employ effective methods for introducing individuals to and assisting them to explore potential employment 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 two of five individuals, an assessment of individual's skills, interests, or career goals was not evident. The agency must develop a robust assessment process which encompass various aspects of the individual's interests and reflect on potential support needs for employment.
C24	There is a plan developed to identify job goals and support needs.	For three of six individuals, there were no plans developed to identify job goals and support needs. The agency must ensure that a plan is developed to assist each individual with employment readiness.
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.	For five of seven individuals, the ways in which entitlements can be affected by paid employment had not been addressed. The agency must ensure that this topic is referred when educating individuals and their advocates around paid employment.
C27	Individuals and families are encouraged and supported to understand the benefits of integrated employment.	For two of seven individuals, support to understand the benefits of integrated employment was not evident. The agency must educate individuals and their guardians on the potential benefits of such integrated employment to encourage interest in this area.

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

Indicator #	Indicator	Area Needing Improvement
C28	Staff maintain and develop relationships with local businesses in order to facilitate job development opportunities.	At all three sites, job development activities were found to be lacking. The agency should endeavor to establish relationships with local businesses to facilitate potential employment opportunities for individuals served.
C29	Individuals are supported to obtain employment that matches their skills and interests.	Five of seven individuals had not been supported to obtain employment matching their skills and interests. The agency must assess the job interests of the individuals and find them employment that corresponds with these interests.
C36	Ongoing supports are provided to enhance job retention and advancement.	For four of six individuals, support to assist individuals with keeping their current jobs as well as potentially advancing in their job was not evident. The agency must develop a system for supporting both retention of the currently held positions, as well as potential advancement within organizations with whom they are employed.
C50	Individuals are supported to understand and become a part of the culture of the workplace (including workplace social activities and events).	One of three individuals had not been supported to learn about and become a part of their workplace culture. The agency must ensure that it supports people to become fully integrated into the fabric and culture of the organizations by whom they are employed.

MASTER SCORE SHEET LICENSURE

Organizational: JUSTICE RESOURCE INSTITUTE

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
Ⓡ L2	Abuse/neglect reporting	9/9	Met
L3	Immediate Action	15/15	Met
L4	Action taken	15/15	Met
L48	HRC	2/2	Met
L65	Restraint report submit	1/7	Not Met(14.29 %)
L66	HRC restraint review	7/7	Met
L74	Screen employees	5/6	Met(83.33 %)
L75	Qualified staff	4/4	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	6/6						6/6	Met
L5	Safety Plan	L	6/6						6/6	Met
R L6	Evacuation	L	6/6						6/6	Met
L7	Fire Drills	L	6/6						6/6	Met
L8	Emergency Fact Sheets	I	5/6						5/6	Met (83.33 %)
L9 (07/21)	Safe use of equipment	I	6/6						6/6	Met
L10	Reduce risk interventions	I	1/1						1/1	Met
R L11	Required inspections	L	6/6						6/6	Met
R L12	Smoke detectors	L	6/6						6/6	Met
R L13	Clean location	L	6/6						6/6	Met
L14	Site in good repair	L	5/5						5/5	Met
L15	Hot water	L	6/6						6/6	Met
L16	Accessibility	L	6/6						6/6	Met
L17	Egress at grade	L	6/6						6/6	Met
L18	Above grade egress	L	4/4						4/4	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
L19	Bedroom location	L	5/5						5/5	Met
L20	Exit doors	L	6/6						6/6	Met
L21	Safe electrical equipment	L	5/6						5/6	Met (83.33 %)
L22	Well-maintained appliances	L	6/6						6/6	Met
L23	Egress door locks	L	6/6						6/6	Met
L24	Locked door access	L	6/6						6/6	Met
L25	Dangerous substances	L	6/6						6/6	Met
L26	Walkway safety	L	6/6						6/6	Met
L27	Pools, hot tubs, etc.	L	1/1						1/1	Met
L28	Flammables	L	6/6						6/6	Met
L29	Rubbish /combustibles	L	6/6						6/6	Met
L30	Protective railings	L	6/6						6/6	Met
L31	Communication method	I	6/6						6/6	Met
L32	Verbal & written	I	6/6						6/6	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L33	Physical exam	I	6/6						6/6	Met
L34	Dental exam	I	6/6						6/6	Met
L35	Preventive screenings	I	6/6						6/6	Met
L36	Recommended tests	I	6/6						6/6	Met
L37	Prompt treatment	I	6/6						6/6	Met
℞ L38	Physician's orders	I	5/5						5/5	Met
L39	Dietary requirements	I	3/3						3/3	Met
L40	Nutritional food	L	6/6						6/6	Met
L41	Healthy diet	L	6/6						6/6	Met
L42	Physical activity	L	6/6						6/6	Met
L43	Health Care Record	I	6/6						6/6	Met
L44	MAP registration	L	5/5						5/5	Met
L45	Medication storage	L	6/6						6/6	Met
℞ L46	Med. Administration	I	5/5						5/5	Met
L47	Self medication	I	1/1						1/1	Met
L49	Informed of human rights	I	6/6						6/6	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
L50 (07/21)	Respect ful Comm.	I	6/6						6/6	Met
L51	Possess ions	I	6/6						6/6	Met
L52	Phone calls	I	6/6						6/6	Met
L53	Visitation	I	6/6						6/6	Met
L54 (07/21)	Privacy	I	6/6						6/6	Met
L55	Informed consent	I	2/2						2/2	Met
L56	Restrictive practices	I	1/2						1/2	Not Met (50.0 %)
L57	Written behavior plans	I	3/3						3/3	Met
L58	Behavior plan component	I	2/2						2/2	Met
L59	Behavior plan review	I	2/2						2/2	Met
L60	Data maintenance	I	3/3						3/3	Met
L61	Health protection in ISP	I	2/2						2/2	Met
L62	Health protection review	I	1/1						1/1	Met
L63	Med. treatment plan form	I	3/6						3/6	Not Met (50.0 %)

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L64	Med. treatment plan rev.	I	6/6						6/6	Met
L67	Money mgmt. plan	I	3/3						3/3	Met
L68	Funds expenditure	I	4/4						4/4	Met
L69	Expenditure tracking	I	4/4						4/4	Met
L70	Charges for care calc.	I	6/6						6/6	Met
L71	Charges for care appeal	I	5/6						5/6	Met (83.33 %)
L77	Unique needs training	I	6/6						6/6	Met
L78	Restrictive Int. Training	L	2/3						2/3	Not Met (66.67 %)
L79	Restraint training	L	1/1						1/1	Met
L80	Symptoms of illness	L	1/6						1/6	Not Met (16.67 %)
L81	Medical emergency	L	6/6						6/6	Met
L82	Medication admin.	L	6/6						6/6	Met
L84	Health protect. Training	I	2/2						2/2	Met
L85	Supervision	L	6/6						6/6	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L86	Required assessments	I	2/5						2/5	Not Met (40.0 %)
L87	Support strategies	I	2/5						2/5	Not Met (40.0 %)
L88	Strategies implemented	I	5/6						5/6	Met (83.33 %)
L90	Personal space/bedroom privacy	I	6/6						6/6	Met
L91	Incident management	L	2/6						2/6	Not Met (33.33 %)
L93 (05/22)	Emergency back-up plans	I	6/6						6/6	Met
L94 (05/22)	Assistive technology	I	6/6						6/6	Met
L96 (05/22)	Staff training in devices and applications	I	5/5						5/5	Met
#Std. Met/# 81 Indicator									74/81	
Total Score									83/91	
									91.21%	

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		11/11	18/18	Met
L5	Safety Plan	L			3/3	3/3	Met
℞ L6	Evacuation	L			3/3	3/3	Met
L7	Fire Drills	L			3/3	3/3	Met
L8	Emergency Fact Sheets	I	6/7		8/11	14/18	Not Met (77.78 %)
L9 (07/21)	Safe use of equipment	I	6/7		11/11	17/18	Met (94.44 %)
L10	Reduce risk interventions	I			1/1	1/1	Met
℞ L11	Required inspections	L			2/3	2/3	Not Met (66.67 %)
℞ L12	Smoke detectors	L			3/3	3/3	Met
℞ L13	Clean location	L			3/3	3/3	Met
L15	Hot water	L			1/3	1/3	Not Met (33.33 %)
L16	Accessibility	L			3/3	3/3	Met
L17	Egress at grade	L			3/3	3/3	Met
L18	Above grade egress	L			1/1	1/1	Met
L20	Exit doors	L			3/3	3/3	Met
L21	Safe electrical equipment	L			3/3	3/3	Met
L22	Well-maintained appliances	L			3/3	3/3	Met
L25	Dangerous substances	L			3/3	3/3	Met
L26	Walkway safety	L			3/3	3/3	Met
L28	Flammables	L			2/2	2/2	Met
L29	Rubbish/combustibles	L			2/2	2/2	Met
L31	Communication method	I	7/7		11/11	18/18	Met
L32	Verbal & written	I	7/7		11/11	18/18	Met

Ind. #	Ind.	Loc. or Indiv.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L37	Prompt treatment	I	5/5		7/7	12/12	Met
Ⓡ L38	Physician's orders	I	1/1		3/3	4/4	Met
L39	Dietary requirements	I	1/1		2/2	3/3	Met
L44	MAP registration	L			3/3	3/3	Met
L45	Medication storage	L			3/3	3/3	Met
Ⓡ L46	Med. Administration	I			5/8	5/8	Not Met (62.50 %)
L49	Informed of human rights	I	6/7		10/11	16/18	Met (88.89 %)
L50 (07/21)	Respectful Comm.	I	7/7		11/11	18/18	Met
L51	Possessions	I	7/7		9/10	16/17	Met (94.12 %)
L52	Phone calls	I	7/7		10/10	17/17	Met
L54 (07/21)	Privacy	I	7/7		11/11	18/18	Met
L55	Informed consent	I	1/1			1/1	Met
L56	Restrictive practices	I	0/2		0/8	0/10	Not Met (0 %)
L57	Written behavior plans	I			3/3	3/3	Met
L58	Behavior plan component	I			2/2	2/2	Met
L59	Behavior plan review	I			1/1	1/1	Met
L60	Data maintenance	I			3/3	3/3	Met
L61	Health protection in ISP	I			0/1	0/1	Not Met (0 %)
L63	Med. treatment plan form	I			1/7	1/7	Not Met (14.29 %)
L64	Med. treatment plan rev.	I			1/7	1/7	Not Met (14.29 %)
L77	Unique needs training	I	5/5		7/10	12/15	Met (80.0 %)

Ind. #	Ind.	Loc. or Indiv.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L78	Restrictive Int. Training	L	1/2		0/1	1/3	Not Met (33.33 %)
L79	Restraint training	L	2/2		2/2	4/4	Met
L80	Symptoms of illness	L	2/3		1/3	3/6	Not Met (50.0 %)
L81	Medical emergency	L	3/3		3/3	6/6	Met
L82	Medication admin.	L			3/3	3/3	Met
L84	Health protect. Training	I			0/1	0/1	Not Met (0 %)
L85	Supervision	L			0/3	0/3	Not Met (0 %)
L86	Required assessments	I	3/5		5/8	8/13	Not Met (61.54 %)
L87	Support strategies	I	2/5		5/9	7/14	Not Met (50.0 %)
L88	Strategies implemented	I	4/7		5/11	9/18	Not Met (50.0 %)
L91	Incident management	L			2/3	2/3	Not Met (66.67 %)
L93 (05/22)	Emergency back-up plans	I	7/7		11/11	18/18	Met
L94 (05/22)	Assistive technology	I	7/7		10/11	17/18	Met (94.44 %)
L96 (05/22)	Staff training in devices and applications	I	2/2		2/2	4/4	Met
#Std. Met/# 58 Indicator						42/58	
Total Score						51/68	
						75.00%	

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	6/6	Met
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	5/6	Met (83.33 %)
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	6/6	Met
C17	Community activities	6/6	Met
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	5/6	Met (83.33 %)
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

Community Based Day Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	11/11	Met
C8	Family/guardian communication	11/11	Met
C13	Skills to maximize independence	10/10	Met
C37	Interpersonal skills for work	11/11	Met
C38 (07/21)	Habilitative & behavioral goals	7/11	Not Met (63.64 %)
C39 (07/21)	Support needs for employment	6/11	Not Met (54.55 %)
C40	Community involvement interest	11/11	Met
C41	Activities participation	10/10	Met
C42	Connection to others	11/11	Met
C43	Maintain & enhance relationship	11/11	Met
C44	Job exploration	8/11	Not Met (72.73 %)
C45	Revisit decisions	11/11	Met
C46	Use of generic resources	10/10	Met
C47	Transportation to/ from community	11/11	Met
C51	Ongoing satisfaction with services/ supports	9/11	Met (81.82 %)

Employment Support Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	7/7	Met
C8	Family/guardian communication	7/7	Met
C22	Explore job interests	1/5	Not Met (20.0 %)
C23	Assess skills & training needs	3/5	Not Met (60.0 %)
C24	Job goals & support needs plan	3/6	Not Met (50.0 %)
C25	Skill development	7/7	Met
C26	Benefits analysis	2/7	Not Met (28.57 %)
C27	Job benefit education	5/7	Not Met (71.43 %)
C28	Relationships w/businesses	0/3	Not Met (0 %)
C29	Support to obtain employment	2/7	Not Met (28.57 %)
C30	Work in integrated settings	3/3	Met
C31	Job accommodations	2/2	Met
C32	At least minimum wages earned	2/2	Met

Employment Support Services

Indicator #	Indicator	Met/Rated	Rating
C33	Employee benefits explained	2/2	Met
C34	Support to promote success	2/2	Met
C35	Feedback on job performance	2/2	Met
C36	Supports to enhance retention	2/6	Not Met (33.33 %)
C37	Interpersonal skills for work	7/7	Met
C47	Transportation to/ from community	7/7	Met
C50	Involvement/ part of the Workplace culture	2/3	Not Met (66.67 %)
C51	Ongoing satisfaction with services/ supports	5/6	Met (83.33 %)