



**PROVIDER REPORT  
FOR**

**LATHAM CENTERS  
259 Willow St  
Yarmouth Port, MA 02675**

**Version**

**Public Provider Report**

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

## **SUMMARY OF OVERALL FINDINGS**

<b>Provider</b>	LATHAM CENTERS
<b>Review Dates</b>	8/23/2023 - 8/29/2023
<b>Service Enhancement Meeting Date</b>	9/12/2023
<b>Survey Team</b>	Katherine Gregory Tina Napolitan (TL) Michelle Boyd Kayla Condon Linda Griffith William Muguro
<b>Citizen Volunteers</b>	

### **Survey scope and findings for Residential and Individual Home Supports**

<b>Service Group Type</b>	<b>Sample Size</b>	<b>Licensure Scope</b>	<b>Licensure Level</b>	<b>Certification Scope</b>	<b>Certification Level</b>
<b>Residential and Individual Home Supports</b>	8 location(s) 12 audit (s)	Targeted Review	DDS 29/33 Provider 56 / 56  85 / 89 2 Year License 09/12/2023-09/12/2025		DDS 8 / 8 Provider 59 / 59  67 / 67 Certified 09/12/2023 - 09/12/2025
Residential Services	3 location(s) 7 audit (s)			DDS Targeted Review	20 / 20
Placement Services	4 location(s) 4 audit (s)			DDS Targeted Review	20 / 20
Individual Home Supports	1 location(s) 1 audit (s)			DDS Targeted Review	21 / 21
Planning and Quality Management (For all service groupings)				Full Review	6 / 6

### **Survey scope and findings for Remote Supports and Monitoring Services**

<b>Service Group Type</b>	<b>Sample Size</b>	<b>Licensure Scope</b>	<b>Licensure Level</b>	<b>Certification Scope</b>	<b>Certification Level</b>
<b>Remote Supports and Monitoring Services</b>	1 workstation location(s) 6 audit (s)	Full Review	31/34 2 Year License 09/12/2023-09/12/2025		10 / 11 Certified 09/12/2023 - 09/12/2025
Remote Supports and Monitoring Services	1 workstation location(s) 6 audit (s)			Full Review	4 / 5
Planning and Quality Management (For all service groupings)				Full Review	6 / 6

## **EXECUTIVE SUMMARY :**

Latham Centers was founded in 1970 to provide services for children with Prader Willi Syndrome (PWS). Since then, their services have expanded to include programs for children and adults with intellectual disabilities and Prader-Willi Syndrome in Massachusetts, New York, and other states. The agency currently provides 24-hour Residential Supports, Individual Home Supports (IHS), and Placement Supports throughout Cape Cod and Southeastern MA. The agency has expanded services and now offers Remote Supports and Monitoring Services (RSMS).

This review by the Department of Developmental Services' (DDS) Office of Quality Enhancement (OQE) includes a full review for licensure and certification of RSMS and a targeted reviewed for residential supports. Latham Centers Inc. was eligible for and chose to conduct a self-assessment of licensure and certification indicators for its residential services including 24/7 group home, placement and IHS. As a result, the scope of this DDS licensing review was limited to critical indicators, indicators receiving a rating of 'not met' during the previous survey, and any new or strengthened licensing indicators that came into effect since the last full review. The licensure score for residential is a combination of the agency's self-assessed ratings and those from DDS OQE. The licensing and certification scores for RSMS are a result of a full review by DDS OQE.

Organizationally, the agency demonstrated systems in which they analyze data, measure progress, and have goals to work towards future service development. The agency demonstrated effective systems to track required trainings and ensure actions are taken when there are incidents and/or investigations that require attention

The DDS OQE findings for the targeted review in residential services demonstrated several areas of strength from the agency within the licensing environmental domain. All homes were found to be clean and well maintained, had all required inspections and the fire detections systems were in working order. Continuing with the area of safety, the agency made significant progress on behalf of individuals who swim. Swim safety assessments were completed for people to enjoy the water independently and through supports. One individual expressed they were very happy to have completed the swim assessment as that demonstrated that he could swim in the deeper ends of the pool with a lifeguard on duty. Assistive technology was identified and matched to the needs of the individuals, supporting them to increase their self-determination. Some examples of assistive technology the individuals are utilizing include using exercised trackers, phone reminders to complete daily tasks, smart scales to upload weights to an iPad for monitoring purposes and smart toothbrushes. Within Certification, individuals were offered opportunities to be independent and had choice and control over the completion of activities and tasks independently while maximizing their skills.

Within the healthcare domain, Individuals were supported medically and their independence over their healthcare was enhanced with assistive technology. One individual utilized a medication dispenser, thus increasing his independence. The agency had developed health management protocol that defined, outlined, and met the needs of the individuals and staff were trained and knowledgeable in how to manage serious health diagnoses. Overall medication management was effective and well documented. Data was tracked that related to psychotropic medications and that data was presented to prescriber's to be considered towards medication management decisions.

The DDS OQE findings for the full review of licensing and certification indicators for the RSMS also demonstrated several positive outcomes. Within the human rights domain, people were treated with respect and dignity, individuals and guardians were informed of their human rights, how to file a grievance and mandated reporting. ISP goals were developed and progress towards achieving the goals was recorded and analyzed.

Within certification for RSMS individuals were supported to have choice and control in how supports were implemented and received. The agency was well versed on the satisfaction of supports. Individuals are trialing devises, making choices, and expressing preferences and changes are made accordingly. Latham communicates with and has established a collaboratively relationship with Safe In Home, the remote support agency.

Within residential services, the agency would benefit from increasing attention to adherence to ISP timelines for the submission of assessments and support strategies as well as the oversight of the frequency of fire drills to ensure they are conducted as often as outlined in the agency safety plans.

Within RSMS, the agency would benefit from increased attention to the development of comprehensive emergency fact sheets and the submission of required assessments. In RSMS, the content of the Signs and Symptoms training curriculum needs to include the main components of Health Observation Guidelines and Just Not Right. Within certification, it is recommended that the agency focus increased attention on obtaining feedback from individuals on the staff and provider performance at the time of hire and on an ongoing basis.

Regarding the license for residential programs, Latham Inc. has earned a Two-Year license. The agency met 85 of 89 indicators, earning a score of 96%. The agency will submit a follow-up report within 60 days. The agency met all Certification indicators and thus is Certified for two years.

The RSMS program has also earned a two-year license with a score of 91%, having met 31 of 34 licensing indicators. Additionally, the RSMS received met certification standards with a score of 91%, meeting 10 of 11 indicators. The agency will submit a follow-up report within 60 days. The agency met 91% of Certification indicators for RSMS and thus is Certified for two years.

### **Description of Self Assessment Process:**

Latham Centers' self-assessment process, the team is composed of two members, Rebecca Amaral, Director of QES, and Gina Sheehan, Vice President of Adult Services. This sample size was chosen to reflect the limited number of team members. The process ended with the completion of the self-assessment report at each location. Findings were gathered to be rated based on sample size.

The process was carried out on-site at each location. Visits were made to group homes, placements, and apartments. The self-assessment team accessed previously conducted audit results and used the self-assessment report to complete the process. Medical and clinical records were reviewed on-site, and a walk-through of each location was conducted to assess compliance with environmental safety standards. The involvement of various stakeholders within the agency were employed. Nursing was consulted as needed. The self-assessment team also accessed the agency training grid to ensure that training was for each location. As is typical in an annual audit, the self-assessment team interviewed the residential manager and staff on various aspects of programming and program operations to fully complete the self-assessment report. Financial expenditures were reviewed on-site to ensure accurate cash counts and up-to-date accounting of expenditures up to the date of the self-assessment visit.

These mechanisms are crucial in helping Latham Centers evaluate each indicator, ensuring compliance with DDS licensing standards, and providing the best possible care to the individuals we support. The comprehensive internal audits, coupled with meticulous planning and proactive actions, underscore Latham Centers' dedication to continuous improvement and their unwavering commitment to providing exceptional care and services for individuals with developmental disabilities.

## **LICENSURE FINDINGS**

	Met / Rated	Not Met / Rated	% Met
<b>Organizational</b>	<b>9/10</b>	<b>1/10</b>	
<b>Residential and Individual Home Supports</b>	<b>76/79</b>	<b>3/79</b>	
Residential Services Individual Home Supports Placement Services			
<b>Critical Indicators</b>	<b>8/8</b>	<b>0/8</b>	
<b>Total</b>	<b>85/89</b>	<b>4/89</b>	<b>96%</b>
<b>2 Year License</b>			
<b># indicators for 60 Day Follow-up</b>		<b>4</b>	

	Met / Rated	Not Met / Rated	% Met
<b>Organizational</b>	<b>9/9</b>	<b>0/9</b>	
<b>Remote Supports and Monitoring Services</b>	<b>22/25</b>	<b>3/25</b>	
Remote Supports and Monitoring Services			
<b>Critical Indicators</b>	<b>3/3</b>	<b>0/3</b>	
<b>Total</b>	<b>31/34</b>	<b>3/34</b>	<b>91%</b>
<b>2 Year License</b>			
<b># indicators for 60 Day Follow-up</b>		<b>3</b>	

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

Indicator #	Indicator	Area Needing Improvement
L65	Restraint reports are submitted within required timelines.	The agency did not meet the required timelines for the submission and/or finalization of restraints for twenty restraints. There was one restraint not filed. The agency needs to ensure that all restraints are filed within HCSIS while meeting the required timelines.

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

<b>Indicator #</b>	<b>Indicator</b>	<b>Area Needing Improvement</b>
L7	Fire drills are conducted as required.	In one of three locations, fire drills were not conducted in accordance with the approved safety plan. The agency needs to ensure that fire drills are conducted as stated in the safety plan.
L86	Required assessments concerning individual needs and abilities are completed in preparation for the ISP.	Four of six ISP timelines reviewed did not meet the required timelines for submission of ISP assessments. The agency needs to ensure that required ISP timelines for the submission of assessments are adhered to.
L87	Support strategies necessary to assist an individual to meet their goals and objectives are completed and submitted as part of the ISP.	Five of six ISP timelines reviewed did not meet the required timelines for submission of ISP support strategies. The agency needs to ensure that required ISP support strategies for the submission of assessments are adhered to.

**Remote Supports and Monitoring Services Areas Needing Improvement on Standards not met/Follow-up to occur:  
From DDS review:**

<b>Indicator #</b>	<b>Indicator</b>	<b>Area Needing Improvement</b>
L8	Emergency fact sheets are current and accurate and available on site.	For three of six individuals the emergency fact sheet (EFS) did not include all significant medical diagnoses. The agency needs to ensure that all significant medical diagnoses are included on the EFS.
L10	The provider implements interventions to reduce risk for individuals whose behaviors may pose a risk to themselves or others.	For two individuals with identified risks, monitoring staff had not received information on how to support the individual and/or action steps to take to minimize the impact of their risks. The agency needs to ensure all staff are knowledgeable about interventions to reduce risk for individuals whose behaviors may pose a risk to themselves or others.
L80	Support staff are trained to recognize signs and symptoms of illness.	Monitoring staff did not receive training in Health Observation Guidelines and "Just Not Right". The agency needs to ensure that all staff receive training to recognize signs and symptoms of illness.



## **CERTIFICATION FINDINGS**

	<b>Reviewed By</b>	<b>Met / Rated</b>	<b>Not Met / Rated</b>	<b>% Met</b>
<b>Certification - Planning and Quality Management</b>	<b>DDS</b>	<b>6/6</b>	<b>0/6</b>	
<b>Residential and Individual Home Supports</b>	<b>DDS 2/2 Provider 59/59</b>	<b>61/61</b>	<b>0/61</b>	
Individual Home Supports	DDS 0/0 Provider 21/21	21/21	0/21	
Placement Services	DDS 0/0 Provider 20/20	20/20	0/20	
Residential Services	DDS 2/2 Provider 18/18	20/20	0/20	
<b>Total</b>		<b>67/67</b>	<b>0/67</b>	<b>100%</b>
<b>Certified</b>				

	<b>Met / Rated</b>	<b>Not Met / Rated</b>	<b>% Met</b>
<b>Certification - Planning and Quality Management</b>	<b>6/6</b>	<b>0/6</b>	
<b>Remote Supports and Monitoring Services</b>	<b>4/5</b>	<b>1/5</b>	
Remote Supports and Monitoring Services	4/5	1/5	
<b>Total</b>	<b>10/11</b>	<b>1/11</b>	<b>91%</b>
<b>Certified</b>			

**Remote Supports and Monitoring Services- Areas Needing Improvement on Standards not met From DDS Review:**

<b>Indicator #</b>	<b>Indicator</b>	<b>Area Needing Improvement</b>
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.	Five individuals have not been provided with an opportunity to provide feedback on staff at the time of hire and on an ongoing basis. The agency needs to ensure individuals have been provided with an opportunity to provide feedback on staff at the time of hire and on an ongoing basis.

## MASTER SCORE SHEET LICENSURE

### Organizational: LATHAM CENTERS

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
☐ L2	Abuse/neglect reporting	10/10	Met
L3	Immediate Action	15/15	Met
L4	Action taken	15/15	Met
L48	HRC	1/1	Met
L65	Restraint report submit	21/42	Not Met(50.0 % )
L66	HRC restraint review	33/34	Met(97.06 % )
L74	Screen employees	2/2	Met
L75	Qualified staff	2/2	Met
L76	Track trainings	12/14	Met(85.71 % )
L83	HR training	14/14	Met
☐ L95 (05/22)	RSMS requirements	2/2	Met

### Residential and Individual Home Supports:

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L1	Abuse/neglect training	I	Provider	-	-	-		-	-	-	Met
L5	Safety Plan	L	Provider	-	-	-		-	-	-	Met
☐ L6	Evacuation	L	DDS	3/3	1/1	4/4				8/8	Met
L7	Fire Drills	L	DDS	2/3						2/3	Not Met (66.67 %)
L8	Emergency Fact Sheets	I	Provider	-	-	-		-	-	-	Met
L9 (07/21)	Safe use of equipment	I	Provider	-	-	-		-	-	-	Met
L10	Reduce risk interventions	I	Provider	-	-	-		-	-	-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
Ⓡ L11	Required inspections	L	DDS	3/3	1/1	4/4				8/8	Met
Ⓡ L12	Smoke detectors	L	DDS	3/3	1/1	4/4				8/8	Met
Ⓡ L13	Clean location	L	DDS	3/3	1/1	4/4				8/8	Met
L14	Site in good repair	L	Provider	-	-	-		-	-	-	Met
L15	Hot water	L	Provider	-	-	-		-	-	-	Met
L16	Accessibility	L	Provider	-	-	-		-	-	-	Met
L17	Egress at grade	L	Provider	-	-	-		-	-	-	Met
L18	Above grade egress	L	Provider	-	-	-		-	-	-	Met
L20	Exit doors	L	Provider	-	-	-		-	-	-	Met
L21	Safe electrical equipment	L	Provider	-	-	-		-	-	-	Met
L22	Well-maintained appliances	L	Provider	-	-	-		-	-	-	Met
L24	Locked door access	L	DDS	3/3	0/1	2/2				5/6	Met (83.33 %)
L25	Dangerous substances	L	Provider	-	-	-		-	-	-	Met
L26	Walkway safety	L	Provider	-	-	-		-	-	-	Met
L27	Pools, hot tubs, etc.	L	DDS	1/1	1/1	1/1				3/3	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L28	Flammables	L	Provider	-	-	-		-	-	-	Met
L29	Rubbish/combustibles	L	Provider	-	-	-		-	-	-	Met
L30	Protective railings	L	Provider	-	-	-		-	-	-	Met
L31	Communication method	I	Provider	-	-	-		-	-	-	Met
L32	Verbal & written	I	Provider	-	-	-		-	-	-	Met
L33	Physical exam	I	Provider	-	-	-		-	-	-	Met
L34	Dental exam	I	Provider	-	-	-		-	-	-	Met
L35	Preventive screenings	I	Provider	-	-	-		-	-	-	Met
L36	Recommended tests	I	Provider	-	-	-		-	-	-	Met
L37	Prompt treatment	I	Provider	-	-	-		-	-	-	Met
Ⓡ L38	Physician's orders	I	DDS	6/6	1/1	2/2				9/9	Met
L39	Dietary requirements	I	Provider	-	-	-		-	-	-	Met
L40	Nutritional food	L	Provider	-	-	-		-	-	-	Met
L41	Healthy diet	L	Provider	-	-	-		-	-	-	Met
L42	Physical activity	L	Provider	-	-	-		-	-	-	Met
L43	Health Care Record	I	DDS	5/7	1/1	4/4				10/12	Met (83.33 %)
L44	MAP registration	L	Provider	-	-	-		-	-	-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L45	Medication storage	L	Provider	-	-	-		-	-	-	Met
L46	Med. Administration	I	DDS	7/7	1/1	2/3				10/11	Met (90.91 %)
L47	Self medication	I	Provider	-	-	-		-	-	-	Met
L49	Informed of human rights	I	Provider	-	-	-		-	-	-	Met
L50 (07/21)	Respectful Comm.	I	Provider	-	-	-		-	-	-	Met
L51	Possessions	I	Provider	-	-	-		-	-	-	Met
L52	Phone calls	I	Provider	-	-	-		-	-	-	Met
L53	Visitation	I	Provider	-	-	-		-	-	-	Met
L54 (07/21)	Privacy	I	Provider	-	-	-		-	-	-	Met
L55	Informed consent	I	Provider	-	-	-		-	-	-	Met
L56	Restrictive practices	I	Provider	-	-	-		-	-	-	Met
L57	Written behavior plans	I	Provider	-	-	-		-	-	-	Met
L58	Behavior plan component	I	Provider	-	-	-		-	-	-	Met
L59	Behavior plan review	I	Provider	-	-	-		-	-	-	Met
L60	Data maintenance	I	Provider	-	-	-		-	-	-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L61	Health protection in ISP	I	DDS	2/3		1/1				3/4	Met
L63	Med. treatment plan form	I	DDS	7/7	1/1	4/4				12/12	Met
L64	Med. treatment plan rev.	I	Provider	-	-	-		-	-	-	Met
L67	Money mgmt. plan	I	Provider	-	-	-		-	-	-	Met
L68	Funds expenditure	I	Provider	-	-	-		-	-	-	Met
L69	Expenditure tracking	I	DDS	6/7		4/4				10/11	Met (90.91 %)
L70	Charges for care calc.	I	Provider	-	-	-		-	-	-	Met
L71	Charges for care appeal	I	Provider	-	-	-		-	-	-	Met
L77	Unique needs training	I	Provider	-	-	-		-	-	-	Met
L78	Restrictive Int. Training	L	Provider	-	-	-		-	-	-	Met
L79	Restraint training	L	DDS	3/3						3/3	Met
L80	Symptoms of illness	L	Provider	-	-	-		-	-	-	Met
L81	Medical emergency	L	Provider	-	-	-		-	-	-	Met
Ⓡ L82	Medication admin.	L	DDS	3/3	1/1					4/4	Met
L84	Health protect. Training	I	DDS	3/3		1/1				4/4	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L85	Supervision	L	Provider	-	-	-		-	-	-	Met
L86	Required assessments	I	DDS	1/4		1/2				2/6	Not Met (33.33 %)
L87	Support strategies	I	DDS	1/4		0/2				1/6	Not Met (16.67 %)
L88	Strategies implemented	I	DDS	7/7	1/1	4/4				12/12	Met
L90	Personal space/bedroom privacy	I	Provider	-	-	-		-	-	-	Met
L91	Incident management	L	Provider	-	-	-		-	-	-	Met
L93 (05/22)	Emergency back-up plans	I	DDS	7/7	1/1	4/4				12/12	Met
L94 (05/22)	Assistive technology	I	DDS	7/7	1/1	4/4				12/12	Met
L96 (05/22)	Staff training in devices and applications	I	DDS	5/5	1/1	4/4				10/10	Met



Ind. #	Ind.	Loc. or Indiv.	Reviewed by	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	DDS	1/1	1/1	1/1				3/3	Met
#Std. Met/# 79 Indicator										76/79	
Total Score										85/89	
										95.51%	

#### Remote Supports and Monitoring Services:

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Remote	Total Met/Rated	Rating
L1	Abuse/neglect training	I	DDS	6/6	6/6	Met
L8	Emergency Fact Sheets	I	DDS	3/6	3/6	Not Met (50.0 %)
L9 (07/21)	Safe use of equipment	I	DDS	6/6	6/6	Met
L10	Reduce risk interventions	I	DDS	0/2	0/2	Not Met (0 %)
L31	Communication method	I	DDS	6/6	6/6	Met
L32	Verbal & written	I	DDS	6/6	6/6	Met
L37	Prompt treatment	I	DDS	5/6	5/6	Met (83.33 %)
L49	Informed of human rights	I	DDS	6/6	6/6	Met
L50 (07/21)	Respectful Comm.	I	DDS	6/6	6/6	Met
L52	Phone calls	I	DDS	6/6	6/6	Met
L54 (07/21)	Privacy	I	DDS	6/6	6/6	Met
L77	Unique needs training	I	DDS	5/6	5/6	Met (83.33 %)
L80	Symptoms of illness	L	DDS	0/1	0/1	Not Met (0 %)
L81	Medical emergency	L	DDS	1/1	1/1	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Remote	Total Met/Rated	Rating
L85	Supervision	L	DDS	1/1	1/1	Met
L87	Support strategies	I	DDS	5/5	5/5	Met
L88	Strategies implemented	I	DDS	6/6	6/6	Met
L90	Personal space/ bedroom privacy	I	DDS	6/6	6/6	Met
L91	Incident management	L	DDS	1/1	1/1	Met
L93 (05/22)	Emergency back-up plans	I	DDS	6/6	6/6	Met
L94 (05/22)	Assistive technology	I	DDS	6/6	6/6	Met
L97 (05/22)	Remote supports plan	I	DDS	6/6	6/6	Met
L98 (05/22)	Monitoring staff training in plan	I	DDS	6/6	6/6	Met
L100 (05/22)	RSMS Assessment	I	DDS	2/2	2/2	Met
Ⓡ L101 (05/22)	Individual training and knowledge in RSMS	I	DDS	6/6	6/6	Met
<b>#Std. Met/# 25 Indicator</b>					<b>22/25</b>	
<b>Total Score</b>					<b>31/34</b>	
					<b>91.18%</b>	

## 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	<b>Met</b>
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### Residential Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C7	Feedback on staff / care provider performance	Provider	-	<b>Met</b>
C8	Family/guardian communication	Provider	-	<b>Met</b>
C9	Personal relationships	Provider	-	<b>Met</b>
C10	Social skill development	Provider	-	<b>Met</b>
C11	Get together w/family & friends	Provider	-	<b>Met</b>
C12	Intimacy	Provider	-	<b>Met</b>
C13	Skills to maximize independence	DDS	7/7	<b>Met</b>
C14	Choices in routines & schedules	Provider	-	<b>Met</b>
C15	Personalize living space	DDS	3/3	<b>Met</b>
C16	Explore interests	Provider	-	<b>Met</b>
C17	Community activities	Provider	-	<b>Met</b>
C18	Purchase personal belongings	Provider	-	<b>Met</b>
C19	Knowledgeable decisions	Provider	-	<b>Met</b>
C46	Use of generic resources	Provider	-	<b>Met</b>
C47	Transportation to/ from community	Provider	-	<b>Met</b>
C48	Neighborhood connections	Provider	-	<b>Met</b>
C49	Physical setting is consistent	Provider	-	<b>Met</b>
C51	Ongoing satisfaction with services/ supports	Provider	-	<b>Met</b>
C52	Leisure activities and free-time choices /control	Provider	-	<b>Met</b>
C53	Food/ dining choices	Provider	-	<b>Met</b>

### Placement Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C7	Feedback on staff / care provider performance	Provider	-	<b>Met</b>
C8	Family/guardian communication	Provider	-	<b>Met</b>
C9	Personal relationships	Provider	-	<b>Met</b>

## Placement Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C10	Social skill development	Provider	-	<b>Met</b>
C11	Get together w/family & friends	Provider	-	<b>Met</b>
C12	Intimacy	Provider	-	<b>Met</b>
C13	Skills to maximize independence	Provider	-	<b>Met</b>
C14	Choices in routines & schedules	Provider	-	<b>Met</b>
C15	Personalize living space	Provider	-	<b>Met</b>
C16	Explore interests	Provider	-	<b>Met</b>
C17	Community activities	Provider	-	<b>Met</b>
C18	Purchase personal belongings	Provider	-	<b>Met</b>
C19	Knowledgeable decisions	Provider	-	<b>Met</b>
C46	Use of generic resources	Provider	-	<b>Met</b>
C47	Transportation to/ from community	Provider	-	<b>Met</b>
C48	Neighborhood connections	Provider	-	<b>Met</b>
C49	Physical setting is consistent	Provider	-	<b>Met</b>
C51	Ongoing satisfaction with services/ supports	Provider	-	<b>Met</b>
C52	Leisure activities and free-time choices /control	Provider	-	<b>Met</b>
C53	Food/ dining choices	Provider	-	<b>Met</b>

## Individual Home Supports

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C7	Feedback on staff / care provider performance	Provider	-	<b>Met</b>
C8	Family/guardian communication	Provider	-	<b>Met</b>
C9	Personal relationships	Provider	-	<b>Met</b>
C10	Social skill development	Provider	-	<b>Met</b>
C11	Get together w/family & friends	Provider	-	<b>Met</b>
C12	Intimacy	Provider	-	<b>Met</b>
C13	Skills to maximize independence	Provider	-	<b>Met</b>
C14	Choices in routines & schedules	Provider	-	<b>Met</b>

### Individual Home Supports

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C15	Personalize living space	Provider	-	<b>Met</b>
C16	Explore interests	Provider	-	<b>Met</b>
C17	Community activities	Provider	-	<b>Met</b>
C18	Purchase personal belongings	Provider	-	<b>Met</b>
C19	Knowledgeable decisions	Provider	-	<b>Met</b>
C21	Coordinate outreach	Provider	-	<b>Met</b>
C46	Use of generic resources	Provider	-	<b>Met</b>
C47	Transportation to/ from community	Provider	-	<b>Met</b>
C48	Neighborhood connections	Provider	-	<b>Met</b>
C49	Physical setting is consistent	Provider	-	<b>Met</b>
C51	Ongoing satisfaction with services/ supports	Provider	-	<b>Met</b>
C52	Leisure activities and free-time choices /control	Provider	-	<b>Met</b>
C53	Food/ dining choices	Provider	-	<b>Met</b>

### Remote Supports and Monitoring Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	1/6	<b>Not Met (16.67 %)</b>
C8	Family/guardian communication	6/6	<b>Met</b>
C13	Skills to maximize independence	6/6	<b>Met</b>
C51	Ongoing satisfaction with services/ supports	6/6	<b>Met</b>
C53	Food/ dining choices	1/1	<b>Met</b>