

PROVIDER REPORT FOR

LIFESTREAM INC PO BOX 50487 New Bedford, MA 02745

Version

Public Provider Report

Prepared by the Department of Developmental Services
OFFICE OF QUALITY ENHANCEMENT

SUMMARY OF OVERALL FINDINGS

Provider LIFESTREAM INC

Review Dates 10/4/2023 - 10/11/2023

Service Enhancement

Meeting Date

10/25/2023

Survey Team Michelle Boyd

Kayla Condon

Katherine Gregory

Linda Griffith

Michael Marchese

William Muguro

Scott Nolan (TL)

Citizen Volunteers

Survey scope and finding	gs for Resider	ntial and Indi	<u>vidual Home S</u>	<u>upports</u>	
Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Residential and Individual Home Supports	15 location(s) 18 audit (s)	Targeted Review	DDS 27/27 Provider 65 / 65		DDS 6 / 6 Provider 81 / 81
			92 / 92 2 Year License 10/25/2023- 10/25/2025		87 / 87 Certified 10/25/2023 - 10/25/2025
Residential Services	7 location(s) 7 audit (s)			DDS Targeted Review	20 / 20
ABI-MFP Residential Services	1 location(s) 3 audit (s)			DDS Targeted Review	20 / 20
Placement Services	5 location(s) 5 audit (s)			DDS Targeted Review	20 / 20
Individual Home Supports	2 location(s) 3 audit (s)			DDS Targeted Review	21 / 21
Planning and Quality Management (For all service groupings)				Full Review	6/6
Survey scope and finding	gs for Remote	Supports ar	nd Monitoring S	Services	
Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Remote Supports and Monitoring Services	1 workstation location(s) 2 audit (s)	Full Review	34/35 2 Year License 10/25/2023- 10/25/2025		10 / 10 Certified 10/25/2023 - 10/25/2025
Remote Supports and Monitoring Services	1 workstation location(s) 2 audit (s)			Full Review	4 / 4
Planning and Quality Management (For all service groupings)				Full Review	6 / 6
Survey scope and finding	gs for Employ	ment and Da	y Supports		
Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Employment and Day Supports	1 location(s) 11 audit (s)	Targeted Review	DDS 22/24 Provider 44 / 45		DDS 10 / 11 Provider 31 / 31
			66 / 69 2 Year License 10/25/2023- 10/25/2025		41 / 42 Certified 10/25/2023 - 10/25/2025

	0 location(s) 5 audit (s)		DDS Targeted Review	20 / 21
Planning and Quality Management (For all service groupings)			Full Review	6/6

EXECUTIVE SUMMARY:

LifeStream, Inc. is a non-profit human service agency founded in 1976 by a group of concerned parents seeking better care for their adult children with intellectual and physical disabilities. The agency provides a range of residential services, community-based day, and employment training for adults. It supports individuals with developmental disabilities and Acquired Brain Injury (ABI) in the greater New Bedford and Fall River areas. The agency supports a total of 237 adults receiving 24-hour residential, placement and Individual Home Supports (IHS) and a total of 36 people participating in Community Based Day (CBDS) and Employment Services at the agency's day location.

The survey includes the agency's first full review for licensure and certification of Remote Support Monitoring Services (RSMS) along with the review of organizational systems. Lifestream Inc. was eligible for and chose to conduct a self-assessment of licensure and certification indicators for its residential and ABI services including 24/7 group home, placement and IHS. As a result, the scope of this 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 the Office of Quality Enhancement (OQE). The licensing and certification scores for RSMS are a result of a full review by OQE. In the area of certification for residential, day and employment, only indicators receiving a rating of "not met" from the prior review were surveyed.

An organizational strength of the agency is its systems and practices to collect and analyze data, measure progress, and make systemic changes to enhance services to individuals. The agency had effective systems to track required training, ensure the protection of human rights by holding regular meetings and take action to resolving investigations in an effective manner.

The agency demonstrated a number of strengths in the targeted review for residential and community-based day services. In the environmental domain, all home settings and the day program were clean, well maintained and had all required inspections. Fire detection systems were operational in all homes.

In the health domain, the agency had developed health management protocols that defined, outlined, and met the needs of the individuals. Staff were knowledgeable and implemented the protocols as prescribed by the Health Care Practitioner. A review of medications administered at Medication Administration Program (MAP) registered sites for residential homes and community-based day services were dispensed by certified staff in accordance with applicable policies and procedures. The agency's nursing staff routinely visited homes and made unannounced visits to ensure medications were given as prescribed and properly documented.

Continuing with licensing, assistive technology was found to be a strength of the agency with a focus on supporting individuals on using devices and or mobile apps on an iPad or smartphone to foster their independence in their homes, day, and employment sites. Individuals used different devices in their homes such as virtual assistant technology to turn on lights in their room or operate the television. For example, one individual had a comprehensive support plan which staff were trained in so she could learn to turn off the lights in her closet and bedroom. In CBDS and employment individuals used a mobile app on an iPad to assist them to think and visually organize their routines, create reminder lists, and attend to one task at a time in preparation for an activity or work. For example, individuals in CBDS used the mobile app to choose and organize their daily schedule, while in employment, individuals used the mobile app to prepare for work which was checked off Individuals expressed pride in being independent. RSMS demonstrated positive outcomes. Individuals and guardians were informed of their human rights, how to file a grievance and mandated reporting. All required components for the on-call system were in place with a comprehensive back up system to text devices to call Night Owl, the remote support agency. The agency routinely checked the remote monitoring system and established good communication with all stakeholders including the third-party provider and area offices to continue to enhance and support the new service.

Within certification, RSMS individuals were supported to maximize their independence by reducing the need for staff intervention or support. Individuals also reported increased service satisfaction due to

that independence

The agency needs to strengthen the following areas: the submission of assessments and support strategies to meet ISP timelines in CBDS and employment services. 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 for the third-party provider.

Lifestream Inc. has earned a Two-Year license in Residential and IHS services. The agency met 91 of 92 indicators earning a score of 100%. The agency has earned a Two-Year license in CBDS and Employment services. The agency met 66 of 69 indicators earning a score of 96%. The agency will conduct its own follow-up within 60 days. The RSMS program earned a two-year license with a score of 97%, having met 34 of 35 licensing indicators. The agency will submit a follow-up report days. The agency met Certification indicators across all services and is Certified for two years.

Description of Self Assessment Process:

LifeStream has an extensive Quality Management System. Our quality management program was developed to provide an ongoing review of services, to highlight success and to identify need areas requiring correction in a timely manner. Expected outcomes of the program include: the identification of agency-wide trends, on-going review of services, evaluation of the impact of quality management strategies and initiating modifications as needed, recognition for areas that exceed expectations and most importantly, ensuring a higher quality of services for individuals supported by LifeStream.

LifeStream's ongoing program evaluation process was developed using current Department of Developmental Services regulations, LifeStream protocols and standards and survey and certification requirements. Programs are assessed monthly using a standardized performance objectives scorecard. This review process includes a comprehensive, documented review of individuals' medical records, confidential records, ISP compliance, incident management review, a site review and a medication administration audit. On-site reviews are completed of all programs once a year by a team consisting of clinical and nursing staff along with the Program Assistant Directors and the Program and Quality Assurance Directors. Action plans generated from the review are documented using a standardized form. Identified areas needing correction must be completed and documented within 30 business days.

LifeStream collects and analyzes data through the HCSIS program on a regular and ongoing basis. The Director of Quality Assurance develops reports for review at Life Stream's monthly Senior Directors Meetings. The Director of Quality Assurance and Vice President of Clinical Supports report on significant incidents, medication errors, restraints and DPPC findings and reviews year-to-date statistics and patterns or trends of concern annually to LifeStream's Program Review Committee. This committee is comprised of the Vice President of Operations and four members of the organization's Board of Directors. The committee meets on a quarterly basis and additionally reviews outcome measures of employee turnover and employee satisfaction, as well as individual satisfaction. The purpose of the committee is to develop a system that monitors the ongoing performance for important aspects of LifeStreamS programs and services and does so in a manner that allows LifeStream to look at progress with respect to meaningful comparison of these aspects from year to year, to evaluate changes and trends in organizational performance and to identify areas which require further investigation and to develop goals based upon this information in order to enhance service delivery. Findings and action plans are shared between departments within LifeStream as well as externally, when warranted. Findings and actions are also presented by the committee to the full Board of Directors four times a year.

LifeStream uses a multilayered approach to ensure that all stakeholders have input into the evaluation of programs and initiates changes to systems and practices that best reflect the person-centered, quality-based delivery of services that the individuals supported by LifeStream expect and deserve. In addition to our standardized Quality Assurance Reviews, LifeStream has several other quality assurance systems in place:

- * Health and Safety: Nursing staff review all medication administration documentation monthly at the program site. This review occurs at the end of the month to ensure accuracy of current medication administration and carry over to the next month. Nursing staff along with management also review all PRN medication and documentation during this review. RN Coordinators act as a liaison for all hospitalization admissions and discharges, write quarterly medical assessments and review all physician encounters to address any concerns or follow-up required. Assessing RNs are available to help with hospital discharges and to provide person-specific trainings for new equipment or doctor orders as needed. Lab work is also tracked by our nursing department. An RN Coordinator is on call 24/7.
- * Property and Vehicle Safety: LifeStream's Director of Facilities and Asset Management oversees our Facility Department. The Facilities Manager is on call 24/7. Structural systems such as HVAC, fire alarms, sprinklers, generators and lift systems are inspected annually by licensed technicians in the respective areas, Annual inspections are conducted and work orders generated based on inspection findings. Work orders are submitted electronically as needed for routine corrective and preventive

maintenance. Vehicles are inspected monthly to ensure safety.

- * Staff Development: LifeStream's Education and Training Division is certified by the Commonwealth as a private business school. Our Training Department maintains a training database that tracks all required training. This information is distributed to all managers on a monthly and/or as needed basis to ensure on-going training compliance. All employees attend an extensive orientation program that includes: Introduction to Developmental Services, Human Rights and Mandated Reporting, CPR, First Aid, Medication Administration, Vital Signs, Universal Precautions, Body Mechanics, PABC, Nutrition, Dysphasia and Meal Preparation, Positive Behavior Supports, Formal Fire Safety, Human Service Worker Safety 1 and 2 and agency Policies and Procedures. Sitespecific and consumer-specific training occurs at the program location. LifeStream is an approved testing site for the Medication Administration Program. Registered Nurses provide training in q-tube nutrition, flushes and medication administration. LifeStream maintains a Staff Training and Development Course Catalog with over 100 training topics offered on an as- needed basis. LifeStream has trainers on staff in the following areas: Medication Administration, Certified Nursing Aide, NVMAB, Positive Behavior Supports, CPR, First Aid, Human Rights, Abuse Prevention, Dysphagia, Human Service Worker Safety and Nutrition, LifeStream employs six registered nurses who are all trained MAP consultants. LifeStream actively participates on the New Bedford and regional training committees.
- * Interdisciplinary Team: LifeStream's Interdisciplinary Team (IDT) members include nursing, quality assurance, therapy services, psychology, management and direct care support. DDS personnel are invited to participate in LifeStreamk IDT meetings. This IDT team meets twice a month to review individuals at risk medically or behaviorally. LifeStream employs 2 master's level clinicians, I doctorate level clinician and 1 doctorate level consultant within our Psychology Department.
- * Human Rights: Human Rights Committee meets 6 times yearly and has the full complement of required membership. The Human Rights Committee reviews incidents, restraints, restrictive procedures, behavior plans, investigations, human rights complaints, and supportive and protective devices. In addition, the committee reviews Agency analytics throughout the year including significant incident trends, satisfaction surveys etc. The Human Rights Committee conducts annual site visits to a sample of residential homes, meets with individuals and staff and shares findings and recommendations with the Agency. LifeStream mails a Human Rights newsletter to individuals and family quarterly along with the LifeStream grievance policy and specific information on abuse and DPPC annually. The Vice President of Clinical Services meets with all human rights officers annually to provide on-going education. Individuals meet with their Human Rights Officer monthly to review information regarding their rights. LifeStream also has a Human Rights Complaint Form that can be completed and submitted to the Human Rights Committee. A telephone hotline is also in place to assist those who would like to submit a complaint privately. Only the Vice President of Clinical Services and Human Rights Chair have access to retrieve messages from the Human Rights hotline.
- *Standards Committee: LifeStreamS Standards Committee includes representation across the agency with expertise in several disciplines. The committee meets monthly to develop standardized forms, procedures and to ensure implementation of systems throughout the agency. The Standards Committee keeps apprised of new initiatives and regulations and updates agency procedures as needed. This committee also audits programs to ensure consistent use and implementation of standardized procedures, protocols and forms.
- *Safety Committee: LifeStream's Safety Committee meets monthly to review all work-related injuries and safety concerns. ne committee has initiated several programs to ensure safe practices throughout the agency. Protocols such as 'safe lifting' and transportation safety' have been developed and implemented by the Safety Committee. fie committee conducts audits to ensure compliance with safe practices through unannounced van inspections and 1:1 observation of wheelchair securement procedures for transportation. The committee attends house meetings to discuss program-specific safety concerns as needed and provides education as it relates to safety procedures. Safety Concern forms are available at each location for individual and employee use. All completed forms are forwarded to the Safety Committee for review and recommendation.

Self-Assessment Process: LifeStream 's President and Chief Executive Officer, Vice President of

Operation, Vice President of Clinical Services and Director of Quality Assurance, along with the leadership of each program, utilized the DDS Licensure Tool along with the Office of Quality Management, Office of Quality Enhancement guidelines to develop the sample size and conduct each individual survey. The surveys were conducted between August 17th and September 13th of 2023. The Director of Quality Assurance, Director of AT and Therapy Services, Vice President of Operation, Vice President of Clinical Services, Director of Nursing and Program Directors worked in teams to conduct each individual survey. This approach ensured expertise in psychology, nursing and program management for each survey conducted. All program locations audited were given a 7-day notice. However, individuals being surveyed were only identified on the day of the audit. LifeStream used 80% as the threshold to determine if an indicator was Met or Not Met. All audits included interviews with staff/care provider and individuals along with documentation reviews and visits to the home/work location:

- *LifeStream assembled programs into cohorts, then from these cohorts, a random selection was chosen, allowing for a sampling across several different management teams. This approach was taken to ensure agency systems are in place throughout the organization. In total, 8 residential homes were audited, including 10 individuals from Cluster A and 8 individuals from ClusterB.
- *3 Individual/Home Support service locations were audited. 5 Placement services locations were visited, and 5 individuals were selected. The audit included interviews with the caregiver and the individual served along with documentation reviews and visits to the home location. The individuals chosen represented a sample across management in the New Bedford and Fall River areas.
- *Five individuals from Supported Employment and six individuals from Community-Based Day Support were audited. A combination of individuals from Cluster A and Cluster B were audited.
- *Each audit team was responsible for reviewing all data and determining what indicators were met or not met for each individual audited.
- *This information was given to the Director of Quality Assurance for review and inclusion in the Provider Assessment Report.
- All indicators at the Organizational level were reviewed by the Chief Executive Officer along with the Director of Quality Assurance.
- *All Organizational Licensing and Certification indicators were identified as MET.
- *There was one unmet licensing indicator in Residential and Home Supports: L87 Support Strategies were submitted within timelines in 14 of 18 records reviewed.(77%)
- *There were three unmet licensing indicators in Employment and Day Supports:
 - L 86 Required Assessments were submitted within timelines in 7 of 11 records reviewed. (63%)
 - L 87 Support Strategies were submitted within timelines in 7 of II records reviewed.(63%)
- L 91 (Incident Management) Initial reports were submitted within required timelines, but final reports were not submitted within
 - required timelines.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	10/10	0/10	
Residential and Individual Home Supports	82/82	0/82	
Residential Services Individual Home Supports Placement Services ABI-MFP Residential Services			
Critical Indicators	8/8	0/8	
Total	92/92	0/92	100%
2 Year License			
# indicators for 60 Day Follow-up		0	

	Met / Rated	Not Met / Rated	% Met
Organizational	9/9	0/9	
Remote Supports and Monitoring Services	25/26	1/26	
Remote Supports and Monitoring Services			
Critical Indicators	3/3	0/3	
Total	34/35	1/35	97%
2 Year License			
# indicators for 60 Day Follow-up		1	

	Met / Rated	Not Met / Rated	% Met
Organizational	10/10	0/10	
Employment and Day Supports	56/59	3/59	
Community Based Day Services Employment Support Services			
Critical Indicators	7/7	0/7	
Total	66/69	3/69	96%
2 Year License			
# indicators for 60 Day Follow-up		3	

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

From DDS review:

Indicator #	Indicator	Area Needing Improvement
	to assist an individual to meet their goals and objectives are completed	For one individual, a support strategy related to Remote Supports and Monitoring (RSM) was not created. The agency needs to ensure that all individuals receiving RSM have a support strategy related to this service included in the ISP and it is submitted within required timelines.

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

Indicator #	Indicator	Area Needing Improvement
L86	and abilities are completed in	For six of nine individuals, ISP Assessments were not submitted within the required timelines. The agency needs to ensure that assessments are submitted prior to the ISP within the required timelines.
L87		For five of nine individuals, ISP Support Strategies were not submitted within the required timelines. The agency needs to ensure that assessments are submitted prior to the ISP within the required timelines.

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

Indicator #	Indicator	Issue identified	Action planned to address
L91	reported and reviewed as		The Program Manager will monitor HCSIS alerts daily to ensure final reports are submitted within the required timelines.

Employment/Day Commendations on Standards Met:

Indicator #	Indicator	Commendations
L94 (05/22)	Individuals have assistive technology to maximize independence.	The agency secured a grant to offer individuals an opportunity to use a mobile app that helps to choose, organize, and plan activities throughout the day and/or follow job duties for their employer. Individuals utilized the mobile app to maximize their independence at the day program or work by using it to read or another individual lead a group playing BINGO by listing the preparation steps for the activity. For employment, individuals used the mobile app to create a list of tasks that needed to be completed to get ready for work such as reminding them to wear a uniform or listing the job duties to be completed for the day, choosing and doing these activities independently.

CERTIFICATION FINDINGS

	Reviewed By	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	DDS	6/6	0/6	
Residential and Individual Home Supports	DDS 0/0 Provider 81/81	81/81	0/81	
ABI-MFP Residential Services	DDS 0/0 Provider 20/20	20/20	0/20	
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 0/0 Provider 20/20	20/20	0/20	
Total		87/87	0/87	100%
Certified				

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	6/6	0/6	
Remote Supports and Monitoring Services	4/4	0/4	
Remote Supports and Monitoring Services	4/4	0/4	
Total	10/10	0/10	100%
Certified			

	Reviewed By	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	DDS	6/6	0/6	
Employment and Day Supports	DDS 4/5 Provider 31/31	35/36	1/36	
Community Based Day Services	DDS 1/1 Provider 14/14	15/15	0/15	
Employment Support Services	DDS 3/4 Provider 17/17	20/21	1/21	
Total		41/42	1/42	98%
Certified				

Employment Support Services- Areas Needing Improvement on Standards not met From DDS Review:

Indicator #	Indicator	Area Needing Improvement
C26	individual's entitlements can be managed in a way that allows them to work successfully in the community.	information on how to

MASTER SCORE SHEET LICENSURE

Organizational: LIFESTREAM INC

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
₽ L2	Abuse/neglect reporting	16/16	Met
L3	Immediate Action	15/15	Met
L4	Action taken	15/15	Met
L48	HRC	1/1	Met
L65	Restraint report submit	75/79	Met(94.94 %)
L66	HRC restraint review	70/70	Met
L74	Screen employees	5/5	Met
L75	Qualified staff	4/4	Met
L76	Track trainings	18/20	Met(90.0 %)
L83	HR training	20/20	Met
¹ L95 (05/22)	RSMS requirements	1/1	Met

Residential and Individual Home Supports:

Ind. #	Ind.	Loc. or Indiv.	Reviewe d by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI- MFP Res. Sup.	ABI- MFP Place.	Total Met/Rat ed	Rating
L1	Abuse/n eglect training	I	Provider	-	-	-		-	-	-	Met
L5	Safety Plan	L	Provider	-	-	-		-	-	-	Met
₽ L 6	Evacuat ion	L	DDS	7/7	1/1	5/5		1/1		14/14	Met
L7	Fire Drills	L	Provider	-	-	-		-	-	-	Met
L8	Emerge ncy Fact Sheets	I	Provider	-	-	-		-	-	-	Met
L9 (07/21)	Safe use of equipm ent	I	Provider	-	-	-		-	-	-	Met
L10	Reduce risk interven tions	I	Provider	-	-	-		-	-	-	Met

	Ind. #	Ind.	Loc. or Indiv.	Reviewe d by	Res. Sup.	Ind. Home Sup.		Resp.	ABI- MFP Res. Sup.	ABI- MFP Place.	Total Met/Rat ed	Rating
R 1	_11	Require d inspecti ons	L	DDS	7/7		5/5		1/1		13/13	Met
Æ [_12	Smoke detector s	L	DDS	7/7		4/5		1/1		12/13	Met (92.31 %)
P: [_13	Clean location	L	DDS	7/7		5/5		1/1		13/13	Met
I	_14	Site in good repair	L	Provider	-	-	-		-	-	-	Met
L	_15	Hot water	L	Provider	-	-	-		-	-	-	Met
I	_16	Accessi bility	L	Provider	-	-	-		-	-	-	Met
I	_17	Egress at grade	L	Provider	-	-	-		-	-	-	Met
I	_18	Above grade egress	L	Provider	-	-	-		-	-	-	Met
I	_19	Bedroo m location	L	DDS			4/4				4/4	Met
L	_20	Exit doors	L	Provider	-	-	-		-	-	-	Met
I	_21	Safe electrica I equipm ent	L	Provider	-	-	-		-	-	-	Met
I	_22	Well- maintain ed applianc es		Provider	-	-	-		-	-	-	Met
L	_24	Locked door access	L	DDS			4/4				4/4	Met
l	_25	Danger ous substan ces	L	Provider	-	-	-		-	-	-	Met
L	_26	Walkwa y safety	L	Provider	-	-	-		-	-	-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewe d by	Res. Sup.	Ind. Home Sup.		Resp.	ABI- MFP Res. Sup.	ABI- MFP Place.	Total Met/Rat ed	Rating
L27	Pools, hot tubs, etc.	L	Provider	-	-	-		-	-	-	Met
L28	Flamma bles	L	Provider	-	-	-		-	-	-	Met
L29	Rubbish /combus tibles	L	Provider	-	-	-		-	-	-	Met
L30	Protecti ve railings	L	Provider	-	-	-		-	-	-	Met
L31	Commu nication method	Ι	Provider	-	-	-		-	-	-	Met
L32	Verbal & written	I	Provider	-	-	-		-	-	-	Met
L33	Physical exam	I	Provider	-	-	-		-	-	-	Met
L34	Dental exam	I	Provider	-	-	-		-	-	-	Met
L35	Preventi ve screenin gs	I	Provider	-	-	-		-	-	-	Met
L36	Recom mended tests	I	Provider	-	-	-		-	-	-	Met
L37	Prompt treatme nt	I	Provider	-	-	-		-	-	-	Met
₽ L38	Physicia n's orders	Ι	DDS	7/7	2/2	3/3		3/3		15/15	Met
L39	Dietary require ments	I	Provider	-	-	-		-	-	-	Met
L40	Nutrition al food	L	Provider	-	-	-		-	-	-	Met
L41	Healthy diet	L	Provider	-	-	-		-	-	-	Met
L42	Physical activity	L	Provider	-	-	-		-	-	-	Met
L43	Health Care Record	I	Provider	-	-	-		-	-	-	Met

Ind.#	Ind.	Loc. or Indiv.	Reviewe d by	Res. Sup.	Ind. Home Sup.		Resp.	ABI- MFP Res. Sup.	ABI- MFP Place.	Total Met/Rat ed	Rating
L44	MAP registrat ion	L	Provider	-	-	-		-	-	-	Met
L45	Medicati on storage	L	Provider	-	-	-		-	-	-	Met
₽ L46	Med. Adminis tration	I	DDS	7/7		1/1		3/3		11/11	Met
L47	Self medicati on	I	Provider	-	-	-		-	-	-	Met
L49	Informe d of human rights	I	Provider	-	-	-		-	-	-	Met
L50 (07/21)	Respect ful Comm.	I	Provider	-	-	-		-	-	-	Met
L51	Possess ions	I	Provider	-	-	-		-	-	-	Met
L52	Phone calls	I	Provider	-	-	-		-	-	-	Met
L53	Visitatio n	ı	Provider	-	-	-		-	-	-	Met
L54 (07/21)	Privacy	I	Provider	-	-	-		-	-	-	Met
L55	Informe d consent	I	Provider	-	-	-		-	-	-	Met
L56	Restricti ve practice s	I	Provider	-	-	-		-	-	-	Met
L57	Written behavio r plans	I	Provider	-	-	-		-	-	-	Met
L58	Behavio r plan compon ent	I	Provider	-	-	-		-	-	-	Met
L59	Behavio r plan review	I	Provider	-	-	-		-	-	-	Met
L60	Data mainten ance	I	Provider	-	-	-		-	-	-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewe d by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI- MFP Res. Sup.	ABI- MFP Place.	Total Met/Rat ed	Rating
L61	Health protecti on in ISP	I	Provider	-	-	-		-	-	-	Met
L62	Health protecti on review	I	Provider	-	-	-		-	-	-	Met
L63	Med. treatme nt plan form	I	Provider	-	-	-		-	-	-	Met
L64	Med. treatme nt plan rev.	I	Provider	-	-	-		-	-	-	Met
L67	Money mgmt. plan	I	Provider	-	-	-		-	-	-	Met
L68	Funds expendit ure	I	Provider	-	-	-		-	-	-	Met
L69	Expendi ture tracking	I	Provider	-	-	-		-	-	-	Met
L70	Charges for care calc.	I	Provider	-	-	-		-	-	-	Met
L71	Charges for care appeal	I	DDS	7/7		5/5		3/3		15/15	Met
L77	Unique needs training	I	Provider		-	-		-	-	-	Met
L78	Restricti ve Int. Training	L	Provider	-	-	-		-	-	-	Met
L79	Restrain t training		Provider		-	-		-	-	-	Met
L80	Sympto ms of illness	L	Provider	-	-	-		-	-	-	Met
L81	Medical emerge ncy	L	Provider	-	-	-		-	-	-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewe d by	Res. Sup.	Ind. Home Sup.		Resp.	ABI- MFP Res. Sup.	ABI- MFP Place.	Total Met/Rat ed	Rating
₽ L82	Medicati on admin.	L	DDS	7/7				1/1		8/8	Met
L84	Health protect. Training	I	DDS	7/7		1/1		2/3		10/11	Met (90.91 %)
L85	Supervi sion	L	Provider	-	-	-		-	-	-	Met
L86	Require d assess ments	I	DDS	6/7	1/1	4/4		2/3		13/15	Met (86.67 %)
L87	Support strategi es	I	DDS	6/7	1/1	5/5		1/3		13/16	Met (81.25 %)
L88	Strategi es impleme nted	I	Provider	-	-	-		-	-	-	Met
L89	Complai nt and resolutio n process	L	Provider	-	-	-		-	-	-	Met
L90	Persona I space/ bedroo m privacy	I	Provider	-	-	-		-	-	-	Met
L91	Incident manage ment	L	Provider	-	-	-		-	-	-	Met
L93 (05/22)	Emerge ncy back-up plans	I	DDS	7/7	3/3	5/5		3/3		18/18	Met
L94 (05/22)	Assistiv e technolo gy	I	DDS	7/7	3/3	5/5		3/3		18/18	Met
L96 (05/22)	Staff training in devices and applicati ons	I	DDS	7/7	3/3	3/3		3/3		16/16	Met

Ind.#	Ind.	Loc. or Indiv.	Reviewe d by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI- MFP Res. Sup.	ABI- MFP Place.	Total Met/Rat ed	Rating
L99 (05/22)	Medical monitori ng devices	I	DDS	6/6				1/1		7/7	Met
#Std. Met/# 82 Indicat or										82/82	
Total Score										92/92	
										100%	

Remote Supports and Monitoring Services:

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Remote	Total Met/Rated	Rating
L1	Abuse/neglect training	I	DDS	2/2	2/2	Met
L8	Emergency Fact Sheets	I	DDS	2/2	2/2	Met
L9 (07/21)	Safe use of equipment	I	DDS	2/2	2/2	Met
L10	Reduce risk interventions	I	DDS	1/1	1/1	Met
L31	Communication method	I	DDS	2/2	2/2	Met
L32	Verbal & written	I	DDS	2/2	2/2	Met
L37	Prompt treatment	I	DDS	2/2	2/2	Met
L49	Informed of human rights	I	DDS	2/2	2/2	Met
L50 (07/21)	Respectful Comm.	I	DDS	2/2	2/2	Met
L52	Phone calls	I	DDS	2/2	2/2	Met
L54 (07/21)	Privacy	ı	DDS	2/2	2/2	Met
L55	Informed consent	I	DDS	1/1	1/1	Met
L77	Unique needs training	I	DDS	2/2	2/2	Met
L80	Symptoms of illness	L	DDS	1/1	1/1	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Remote	Total Met/Rated	Rating
L81	Medical emergency	L	DDS	1/1	1/1	Met
L85	Supervision	L	DDS	1/1	1/1	Met
L87	Support strategies	I	DDS	0/1	0/1	Not Met (0 %)
L88	Strategies implemented	I	DDS	1/1	1/1	Met
L90	Personal space/ bedroom privacy	I	DDS	2/2	2/2	Met
L91	Incident management	L	DDS	1/1	1/1	Met
L93 (05/22)	Emergency back-up plans	I	DDS	2/2	2/2	Met
L94 (05/22)	Assistive technology	I	DDS	2/2	2/2	Met
L97 (05/22)	Remote supports plan	I	DDS	2/2	2/2	Met
L98 (05/22)	Monitoring staff training in plan	I	DDS	2/2	2/2	Met
L100 (05/22)	RSMS Assessment	I	DDS	2/2	2/2	Met
[₹] L101 (05/22)	Individual training and knowledge in RSMS	I	DDS	2/2	2/2	Met
#Std. Met/# 26 Indicator					25/26	
Total Score					34/35	
					97.14%	

Employment and Day Supports:

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Emp. Sup.	Cent. Based Work		Total Met / Rated	Rating
L1	Abuse/neglec t training	I	Provider		-	-	-	Met
L5	Safety Plan	L	Provider		-	-	-	Met
₽ L6	Evacuation	L	DDS			1/1	1/1	Met
L7	Fire Drills	L	Provider		-	-	-	Met
L8	Emergency Fact Sheets	I	DDS	5/5		6/6	11/11	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L9 (07/21)	Safe use of equipment	I	Provider		-	-	-	Met
L10	Reduce risk interventions	I	Provider		-	-	-	Met
[₽] L11	Required inspections	L	DDS			1/1	1/1	Met
[₽] L12	Smoke detectors	L	DDS			1/1	1/1	Met
[₽] L13	Clean location	L	DDS			1/1	1/1	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
L25	Dangerous substances	L	Provider		-	-	-	Met
L26	Walkway safety	L	Provider		-	-	-	Met
L27	Pools, hot tubs, etc.	L	Provider		-	-	-	Met
L28	Flammables	L	Provider		-	-	-	Met
L29	Rubbish/com bustibles	L	DDS			1/1	1/1	Met
L30	Protective railings	L	Provider		-	-	-	Met
L31	Communicati on method	I	Provider		-	-	-	Met
L32	Verbal & written	I	Provider		-	-	-	Met
L37	Prompt treatment	I	Provider		-	-	-	Met
[№] L38	Physician's orders	I	DDS	3/3		3/3	6/6	Met

	Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
	L39	Dietary requirements	I	Provider		-	-	-	Met
	L44	MAP registration	L	Provider		-	-	-	Met
	L45	Medication storage	L	Provider		-	-	-	Met
Æ	L46	Med. Administratio n	I	DDS	2/2		4/4	6/6	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
	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
	L60	Data maintenance	I	Provider		-	-	-	Met
	L61	Health protection in ISP	I	Provider		-	-	-	Met
	L62	Health protection review	I	Provider		-	-	-	Met
	L63	Med. treatment plan form	I	Provider		-	-	-	Met
	L64	Med. treatment plan rev.	I	Provider		-	-	-	Met
	L77	Unique needs training	I	Provider		-	-	-	Met
	L78	Restrictive Int. Training	L	Provider		-	-	-	Met
	L79	Restraint training	L	Provider		-	-	-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L80	Symptoms of illness	L	Provider		-	-	-	Met
L81	Medical emergency	L	Provider		-	-	-	Met
№ L82	Medication admin.	L	Provider		-	-	-	Met
L84	Health protect. Training	I	DDS			1/1	1/1	Met
L85	Supervision	L	Provider		-	-	-	Met
L86	Required assessments	I	DDS	1/4		2/5	3/9	Not Met (33.33 %)
L87	Support strategies	I	DDS	1/4		3/5	4/9	Not Met (44.44 %)
L88	Strategies implemented	Ι	Provider		-	-	-	Met
L91	Incident management	L	Provider		-	-	-	Not Met
L93 (05/22)	Emergency back-up plans	I	DDS	5/5		6/6	11/11	Met
L94 (05/22)	Assistive technology	I	DDS	5/5		6/6	11/11	Met
L96 (05/22)	Staff training in devices and applications	I	DDS	3/3		6/6	9/9	Met
#Std. Met/# 59 Indicator							56/59	
Total Score							66/69	
							95.65%	

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

ABI-MFP Residential Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C7	Feedback on staff / care provider performance	Provider	-	Met
C8	Family/guardian communication	Provider	-	Met

ABI-MFP Residential Services

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

Placement Services

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

Placement Services

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

Individual Home Supports

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

Individual Home Supports

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C21	Coordinate outreach	Provider	-	Met
C46	Use of generic resources	Provider	-	Met
C47	Transportation to/ from community	Provider	-	Met
C48	Neighborhood connections	Provider	-	Met
C49	Physical setting is consistent	Provider	-	Met
C51	Ongoing satisfaction with services/ supports	Provider	-	Met
C52	Leisure activities and free-time choices /control	Provider	-	Met
C53	Food/ dining choices	Provider	-	Met

Remote Supports and Monitoring Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	2/2	Met
C8	Family/guardian communication	2/2	Met
C13	Skills to maximize independence	2/2	Met
C51	Ongoing satisfaction with services/ supports	2/2	Met

Community Based Day Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C7	Feedback on staff / care provider performance	Provider	-	Met
C8	Family/guardian communication	Provider	-	Met
C13	Skills to maximize independence	Provider	-	Met
C37	Interpersonal skills for work	Provider	-	Met
C38 (07/21)	Habilitative & behavioral goals	Provider	-	Met
C39 (07/21)	Support needs for employment	Provider	-	Met
C40	Community involvement interest	Provider	-	Met
C41	Activities participation	Provider	-	Met
C42	Connection to others	Provider	-	Met
C43	Maintain & enhance relationship	Provider	-	Met

Community Based Day Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C44	Job exploration	DDS	5/5	Met
C45	Revisit decisions	Provider	-	Met
C46	Use of generic resources	Provider	-	Met
C47	Transportation to/ from community	Provider	-	Met
C51	Ongoing satisfaction with services/ supports	Provider	-	Met

Employment Support Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C7	Feedback on staff / care provider performance	Provider	-	Met
C8	Family/guardian communication	Provider	-	Met
C22	Explore job interests	DDS	5/5	Met
C23	Assess skills & training needs	Provider	-	Met
C24	Job goals & support needs plan	DDS	5/5	Met
C25	Skill development	Provider	-	Met
C26	Benefits analysis	DDS	0/5	Not Met (0 %)
C27	Job benefit education	Provider	-	Met
C28	Relationships w/businesses	Provider	-	Met
C29	Support to obtain employment	DDS	5/5	Met
C30	Work in integrated settings	Provider	-	Met
C31	Job accommodations	Provider	-	Met
C32	At least minimum wages earned	Provider	-	Met
C33	Employee benefits explained	Provider	-	Met
C34	Support to promote success	Provider	-	Met
C35	Feedback on job performance	Provider	-	Met
C36	Supports to enhance retention	Provider	-	Met
C37	Interpersonal skills for work	Provider	-	Met
C47	Transportation to/ from community	Provider	-	Met

Employment Support Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C50	Involvement/ part of the Workplace culture	Provider	-	Met
C51	Ongoing satisfaction with services/ supports	Provider	-	Met