



**PROVIDER REPORT
FOR**

**Melmark New England
461 River Rd.
Andover, MA 01810**

August 02, 2021

Version

Public Provider Report

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

SUMMARY OF OVERALL FINDINGS

Provider	Melmark New England
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Review Dates	6/8/2021 - 6/11/2021
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Service Enhancement Meeting Date	6/25/2021
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Survey Team	Anne Carey (TL) Meagan Caccioppoli John Hazelton
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Citizen Volunteers	
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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	2 location(s) 6 audit (s)	Full Review	82/82 2 Year License 06/25/2021 - 06/25/2023		22 / 22 Certified 06/25/2021 - 06/25/2023
Residential Services	2 location(s) 6 audit (s)			Full Review	16 / 16
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	1 location(s) 3 audit (s)	Full Review	65/65 2 Year License 06/25/2021 - 06/25/2023		14 / 14 Certified 06/25/2021 - 06/25/2023
Community Based Day Services	1 location(s) 3 audit (s)			Full Review	8 / 8
Planning and Quality Management (For all service groupings)				Full Review	6 / 6

EXECUTIVE SUMMARY :

Melmark New England (Melmark NE) is a not-for-profit organization founded in 1988 as a division of Melmark, Inc., a Pennsylvania-based organization specializing in services to adults and children with complex developmental disabilities such as autism spectrum disorders and neurodevelopmental disorders. The agency specializes in serving individuals who present with support needs in communication and challenging behavior. The agency has been providing both residential and Community Based Day Supports (CBDS) to adults served by the Massachusetts Department of Developmental Services (DDS) since 2016.

For this 2021 DDS Licensing and Certification evaluation, Melmark received a full licensing and certification review of its Residential and Day services, which consisted of audits conducted within its twenty-four-hour homes, and its CBDS location. This survey was conducted virtually through electronic document exchange, virtual video conferencing interviews, and environmental reviews.

At an organizational level, the agency had a robust and effective staff training system that ensured that its staff received all mandated training and other pertinent training as needed, resulting in a highly-skilled workforce. For example, the agency utilized a staff training tracker, which ensured that all employees received training in all mandatory areas, including Human Rights, DPPC, Fire Safety, First Aid and CPR, OSHA, and transmission prevention protocols. Employees also receive training in the unique needs of individuals served, including medical and dietary protocols, behavioral support guidelines, communication protocols, and individualized preferences. The agency applied the same procedures and practices to ensure that all of its per diem employees received this training.

The agency had a solid and cogent supervision system that ensured effective oversight of critical and relative systems. Ongoing staff assessment occurred via staff meetings, shift observation tools, and regular group or individual supervision sessions. For example, methods for safeguarding individuals' funds and the safe and accurate administration of prescribed medications were effective. Additionally, the agency demonstrated supervisory diligence in ensuring that ISP documentation, incident reports, and restraint reports were documented and submitted according to regulatory standards.

The agency showed great strength across both Residential and CBDS service types in collecting and analyzing data to drive service quality improvement for individuals served. For example, when behavior modifying medication treatment plans were in place, detailed data was kept and analyzed regularly to help inform medication prescription decision making. As a result, physicians could make informed decisions when considering medication reductions, increases, or changes. This outcome was in line with the agency's strategic planning goal regarding the least restrictive pharmaceutical regimes for individuals served.

In the domain of Choice and Control, the agency demonstrated excellent adherence to this principle. For example, in the CBDS program, individuals were supported to choose various activities daily using the communication mode that best suited them. For instance, choices were offered utilizing an I-pad or alternative augmentative communication device to select activities, conversation topics, choice of task, or using visual and physical objects to communicate choice in these areas.

In the Residential programs, individuals also were supported to express choice and exhibit control over their daily routines. The agency ensured that staff were trained in offering choices via the best mode of communication for each person. Weekly house meeting agendas showed ongoing choice-making opportunities for individuals facilitated by support staff, such as choice making in meal planning, chore rotations and activity planning.

The agency demonstrated strength across service types in the domain of Communication. Communication adaptation was recognized as a need for 80% of individuals served by the agency.

The agency assesses each individual in this area, which informed the training needs for all direct support professionals. Each individual has a set of "General Interaction Guidelines," which ensure staff are knowledgeable about non-traditional communication strategies, such as a Meyer-Johnson communication book, modified American Sign Language, and the use of communication apps such as "Pictello." The agency also regularly facilitated pro-active communication between family members, guardians, and program staff teams. For example, each individual served was assigned a case manager, responsible for ensuring that a regular telephone call was made to inform parents, families and guardians of relevant updates about their family member.

Based on the findings of this survey review, Melmark met 100% of the licensing indicators across Residential and CBDS Services and will receive a Two-Year License for both Service Types. Additionally, Melmark met 100% of its certification indicators across Residential and CBDS Services and is certified within these two service groupings.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	10/10	0/10	
Residential and Individual Home Supports	72/72	0/72	
Residential Services			
Critical Indicators	8/8	0/8	
Total	82/82	0/82	100%
2 Year License			
# indicators for 60 Day Follow-up		0	

	Met / Rated	Not Met / Rated	% Met
Organizational	10/10	0/10	
Employment and Day Supports	55/55	0/55	
Community Based Day Services			
Critical Indicators	8/8	0/8	
Total	65/65	0/65	100%
2 Year License			
# indicators for 60 Day Follow- up		0	

Residential Commendations on Standards Met:

Indicator #	Indicator	Commendations
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Residential Commendations on Standards Met:

Indicator #	Indicator	Commendations
L31	Staff understand and can communicate with individuals in their primary language and method of communicating.	The agency is commended for its ability to not only communicate with individuals using their various individualized methods of communication, but also for their efforts to expand each individual's ability to express themselves through the use of assistive communication devices. Individuals are evaluated by an agency speech and language pathologist, who determines which communication devices and techniques are best suited to the individuals needs and abilities. At both homes surveyed, individuals were observed using these devices, with staff encouraging verbal communication, and providing prompting to use their devices only when needed. The SLP updates devices with new vocabulary or pictures as individuals gain skill or develop a need for new subject matter. Various other communication modalities were observed to be in use, including pictorial directions for tasks such as hand washing, showering, and cooking. Several individuals were also supported to use customized communication boards containing commonly desired activities or destinations. Laminated pictures of over 50 meals and snacks were used to allow individuals to choose preferred food items; interest inventories and staff evaluation feedback tools utilized extensive pictures, and sign language gestures were taught and utilized to supplement these devices. Behavioral support plans include detailed descriptions of how best to communicate with each individual, with details such as timing and amounts of eye contact, and progressions of prompting specific for each individual. The agency is recognized for the varied and customized way in which it supports individuals to communicate, and for the extensive training and capabilities of support staff to use and understand these methods.
L77	The agency assures that staff / care providers are familiar with and trained to support the unique needs of individuals.	The agency is commended for its efforts in ensuring that all direct support professionals are trained in the unique needs of each individual. Staff training documentation, staff interviews, and observation demonstrated that all staff members were extremely well educated in the medical protocols, extensive special dietary needs, communication best practices and risk prevention strategies for each person. Staff were well versed in each area of knowledge necessary to support the individual they were assigned to work with. Staff were familiar with where to find additional guidance and demonstrated great familiarity with the best way to support each person how to distract and de-escalate a person who began to demonstrate heightened emotion and challenging behavior.

Residential Commendations on Standards Met:

Indicator #	Indicator	Commendations
L85	The agency provides ongoing supervision, oversight and staff development.	The agency is commended for its extensive and thorough policies and practices around the provision of supervision. The agency employs a tiered system of observation and supervisory feedback, beginning with the use of various weekly observation and feedback tools. Tools include such topics as positive behavior management, educational and respectful interactions with individuals, professional dress and conduct, hygiene, use of personal protective equipment, maintaining a clean environment, and utilizing individualized communication devices and techniques. Supervisory feedback for these weekly tools includes a competency test, with modules being repeated for scores below specific thresholds. In addition to these weekly feedback meetings, a monthly supervisory meeting is held to review the observation modules, as well as other performance measures. Quarterly performance reviews are conducted, utilizing performance noted during weekly and monthly supervisory feedback meetings, as well as evaluation of all job functions; areas of focus include case management and clinical skills, communication with individuals and families, professionalism, and upholding the respect and dignity of those served. In addition to the use of these supervisory and evaluative tools, locations surveyed were found to be performing at the highest of standards. The agency is recognized for its effective practices relative to supervision, and for the exemplary performance of its staff.

Employment/Day Commendations on Standards Met:

Indicator #	Indicator	Commendations
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Employment/Day Commendations on Standards Met:

Indicator #	Indicator	Commendations
L31	Staff understand and can communicate with individuals in their primary language and method of communicating.	<p>The agency is commended for its ability to not only communicate with individuals using their various individualized methods of communication, but also for their efforts to expand each individual's ability to express themselves through the use of assistive communication devices. Individuals are evaluated by an agency speech and language pathologist, who determines which communication devices and techniques are best suited to the individuals needs and abilities. Within various room of the CBDS program, individuals were observed using these devices, with staff encouraging verbal communication, and providing prompting to use devices only when needed. Support staff report that if individuals come to the program without a device, the home is quickly prompted to bring the device in, or day staff travel to get devices. The SLP updates devices with new vocabulary or pictures as individuals gain skill or develop a need for new subject matter. One individual did not want to attend a class presentation on human rights, and instead chose to follow along using her iPad to participate in the training. Interest inventories and staff evaluation feedback tools utilized extensive pictures, and sign language gestures were taught and utilized to supplement these devices. Behavioral support plans include detailed descriptions of how best to communicate with each individual, with details such as timing and amounts of eye contact, and progressions of prompting specific for each individual. The agency is recognized for the varied and customized way in which it supports individuals to communicate, and for the extensive knowledge demonstrated by support staff in the use of all communication methods.</p>
L77	The agency assures that staff / care providers are familiar with and trained to support the unique needs of individuals.	<p>The agency is commended for its efforts in ensuring that all direct support professionals are trained in the unique needs of each individual. Staff training documentation demonstrated that all staff members were extremely well educated in the medical protocols, extensive special dietary needs, communication best practices and risk prevention strategies for each person. Staff interview and observation further evidenced that support staff were well versed in each area of knowledge necessary to support the individual they were assigned to work with. Staff were familiar with where to find additional guidance and demonstrated great familiarity with the best way to support each person, for example, how to distract and de-escalate a person who began to demonstrate heightened emotion and challenging behavior.</p>

Employment/Day Commendations on Standards Met:

Indicator #	Indicator	Commendations
L85	The agency provides ongoing supervision, oversight and staff development.	<p>The agency is commended for its extensive and thorough policies and practices around the provision of supervision. The agency employs a tiered system of observation and supervisory feedback, beginning with the use of various weekly observation and feedback tools. Tools include such topics as positive behavior management, educational and respectful interactions with individuals, professional dress and conduct, hygiene, use of personal protective equipment, maintaining a clean environment, utilizing individualized communication devices and techniques, and CBDS program specific tasks. Supervisory feedback for these weekly tools includes a competency test, with modules being repeated for scores below specific thresholds. Quarterly performance reviews are conducted, utilizing performance noted during weekly observations and supervisory feedback meetings, as well as evaluation of all job functions; areas of focus include case management and clinical skills, communication with individuals and families, professionalism, and upholding the respect and dignity of those served. In addition to the use of these supervisory and evaluative tools, staff within the CBDS program were found to be performing at the highest of standards; staff were observed having multiple positive interactions with individuals, offering choices to individuals, maintain attentiveness, making eye contact, and giving positive feedback when socially appropriate behavior was observed. Staff interviewed were knowledgeable of individual behavioral strategies, the use of individual communication techniques and devices, and of all details of individual medical protocols. The agency is recognized for its practices relative to supervision, and for the exemplary performance of its staff.</p>

CERTIFICATION FINDINGS

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	6/6	0/6	
Residential and Individual Home Supports	16/16	0/16	
Residential Services	16/16	0/16	
TOTAL	22/22	0/22	100%
Certified			

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	6/6	0/6	
Employment and Day Supports	8/8	0/8	
Community Based Day Services	8/8	0/8	
TOTAL	14/14	0/14	100%
Certified			

Residential Services Commendations on Standards Met:

Indicator #	Indicator	Commendations
C14	Staff (Home Providers) support individuals to make choices regarding daily household routines and schedules.	<p>In both of the residential homes surveyed, there were several examples of staff supporting individuals to make daily choices through a variety of schedules. A menu board was posted in each home, with pictures of what dinner would be served each night of the week. There were also alternatives to the main choice if needed. An activity board was also posted, with pictures of what outings were scheduled for each day. In addition, the houses had cleaning schedules, and used pictures to allow the individuals to decide which room they wanted to clean, and which task they wanted to complete in that room. The variety of visual schedules within the homes demonstrated the agency's dedication to providing individuals choice and control over daily decisions. While nearly 80% of the individuals served are nonverbal, the agency is commended for finding unique ways to incorporate choice and decision making into everyone's daily routine.</p>

Community Based Day Services Commendations on Standards Met:

Indicator #	Indicator	Commendations
C45	Individual's decisions of what to do during the day are revisited on a regular basis.	<p>Within the CBDS program, there were several examples of staff supporting individuals to make daily decisions, allowing the opportunity for individuals to change their minds and change choices throughout the day. Each room at the CBDS program location contained a bulletin board with a variety of information, including pictures of the community options for the day (parks, hikes, etc.). Some individuals were supported to make choices via the use of a flip schedule to indicate which vocational tasks they were working on, as well as to let staff know when they were finished or when they needed to take a break from a task. Other individuals were supported to express their desires and decision making through the use of "first/then" schedules. Individuals were supported to fully understand what had to be completed prior to taking a break or getting a preferred item. Two individuals who had writing abilities were able to make choices through this medium by creating written schedules of their chosen tasks and activities: building an individualized schedule throughout the day. Individuals demonstrated that they were supported to make choices in preferred environment for receiving information, for example, during a group on-site training, one individual chose to read material on her I-pad while on a beanbag whereas the rest of the group sat elsewhere in the room, participating differently. Each individual received the same training and information, in a medium and sensory environment which was comfortable to them.</p>

MASTER SCORE SHEET LICENSURE

Organizational: Melmark New England

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
Ⓡ L2	Abuse/neglect reporting	2/2	Met
L3	Immediate Action	2/2	Met
L4	Action taken	2/2	Met
L48	HRC	1/1	Met
L65	Restraint report submit	60/66	Met(90.91 %)
L66	HRC restraint review	70/71	Met(98.59 %)
L74	Screen employees	3/3	Met
L75	Qualified staff	1/1	Met
L76	Track trainings	8/8	Met
L83	HR training	8/8	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	2/2						2/2	Met
R L6	Evacuation	L	2/2						2/2	Met
L7	Fire Drills	L	2/2						2/2	Met
L8	Emergency Fact Sheets	I	6/6						6/6	Met
L9	Safe use of equipment	L	2/2						2/2	Met
L10	Reduce risk interventions	I	5/5						5/5	Met
R L11	Required inspections	L	2/2						2/2	Met
R L12	Smoke detectors	L	2/2						2/2	Met
R L13	Clean location	L	2/2						2/2	Met
L14	Site in good repair	L	2/2						2/2	Met
L15	Hot water	L	2/2						2/2	Met
L16	Accessibility	L	2/2						2/2	Met
L17	Egress at grade	L	2/2						2/2	Met
L18	Above grade egress	L	1/1						1/1	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	1/1						1/1	Met
L20	Exit doors	L	2/2						2/2	Met
L21	Safe electrical equipment	L	2/2						2/2	Met
L22	Well- maintained appliances	L	2/2						2/2	Met
L23	Egress door locks	L	1/1						1/1	Met
L24	Locked door access	L	2/2						2/2	Met
L25	Dangerous substances	L	2/2						2/2	Met
L26	Walkway safety	L	2/2						2/2	Met
L27	Pools, hot tubs, etc.	L	2/2						2/2	Met
L28	Flammables	L	2/2						2/2	Met
L29	Rubbish /combustibles	L	2/2						2/2	Met
L30	Protective railings	L	2/2						2/2	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	4/4						4/4	Met
L35	Preventive screenings	I	6/6						6/6	Met
L36	Recommended tests	I	6/6						6/6	Met
L37	Prompt treatment	I	5/5						5/5	Met
R L38	Physician's orders	I	4/4						4/4	Met
L39	Dietary requirements	I	3/3						3/3	Met
L40	Nutritional food	L	2/2						2/2	Met
L41	Healthy diet	L	2/2						2/2	Met
L42	Physical activity	L	2/2						2/2	Met
L43	Health Care Record	I	6/6						6/6	Met
L44	MAP registration	L	2/2						2/2	Met
L45	Medication storage	L	2/2						2/2	Met
R L46	Med. Administration	I	6/6						6/6	Met
L49	Informed of human rights	I	6/6						6/6	Met
L50	Respectful Comm.	L	2/2						2/2	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
L51	Possessions	I	6/6						6/6	Met
L52	Phone calls	I	6/6						6/6	Met
L53	Visitation	I	6/6						6/6	Met
L54	Privacy	L	2/2						2/2	Met
L55	Informed consent	I	6/6						6/6	Met
L61	Health protection in ISP	I	3/3						3/3	Met
L62	Health protection review	I	3/3						3/3	Met
L63	Med. treatment plan form	I	6/6						6/6	Met
L64	Med. treatment plan rev.	I	6/6						6/6	Met
L67	Money mgmt. plan	I	6/6						6/6	Met
L68	Funds expenditure	I	6/6						6/6	Met
L69	Expenditure tracking	I	6/6						6/6	Met
L70	Charges for care calc.	I	6/6						6/6	Met
L71	Charges for care appeal	I	6/6						6/6	Met
L77	Unique needs training	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
L78	Restrictive Int. Training	L	2/2						2/2	Met
L79	Restraint training	L	1/1						1/1	Met
L80	Symptoms of illness	L	2/2						2/2	Met
L81	Medical emergency	L	2/2						2/2	Met
L82	Medication admin.	L	2/2						2/2	Met
L84	Health protect. Training	I	3/3						3/3	Met
L85	Supervision	L	2/2						2/2	Met
L86	Required assessments	I	6/6						6/6	Met
L87	Support strategies	I	6/6						6/6	Met
L88	Strategies implemented	I	6/6						6/6	Met
L90	Personal space/bedroom privacy	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
L91	Incident management	L	2/2						2/2	Met
#Std. Met/# 72 Indicator									72/72	
Total Score									82/82	
									100%	

Employment and Day Supports:

Ind. #	Ind.	Loc. or Indiv.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L1	Abuse/neglect training	I			3/3	3/3	Met
L5	Safety Plan	L			1/1	1/1	Met
Ⓡ L6	Evacuation	L			1/1	1/1	Met
L7	Fire Drills	L			1/1	1/1	Met
L8	Emergency Fact Sheets	I			3/3	3/3	Met
L9	Safe use of equipment	L			1/1	1/1	Met
L10	Reduce risk interventions	I			2/2	2/2	Met
Ⓡ L11	Required inspections	L			1/1	1/1	Met
Ⓡ L12	Smoke detectors	L			1/1	1/1	Met
Ⓡ L13	Clean location	L			1/1	1/1	Met
L14	Site in good repair	L			1/1	1/1	Met
L15	Hot water	L			1/1	1/1	Met
L16	Accessibility	L			1/1	1/1	Met
L17	Egress at grade	L			1/1	1/1	Met

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L20	Exit doors	L			1/1	1/1	Met
L21	Safe electrical equipment	L			1/1	1/1	Met
L22	Well-maintained appliances	L			1/1	1/1	Met
L25	Dangerous substances	L			1/1	1/1	Met
L26	Walkway safety	L			1/1	1/1	Met
L28	Flammables	L			1/1	1/1	Met
L29	Rubbish/combustibles	L			1/1	1/1	Met
L30	Protective railings	L			1/1	1/1	Met
L31	Communication method	I			3/3	3/3	Met
L32	Verbal & written	I			3/3	3/3	Met
L37	Prompt treatment	I			1/1	1/1	Met
℞ L38	Physician's orders	I			3/3	3/3	Met
L39	Dietary requirements	I			2/2	2/2	Met
L44	MAP registration	L			1/1	1/1	Met
L45	Medication storage	L			1/1	1/1	Met
℞ L46	Med. Administration	I			3/3	3/3	Met
L49	Informed of human rights	I			3/3	3/3	Met
L50	Respectful Comm.	L			1/1	1/1	Met
L51	Possessions	I			3/3	3/3	Met
L52	Phone calls	I			3/3	3/3	Met
L54	Privacy	L			1/1	1/1	Met
L55	Informed consent	I			3/3	3/3	Met

Ind. #	Ind.	Loc. or Indiv.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L61	Health protection in ISP	I			2/2	2/2	Met
L62	Health protection review	I			2/2	2/2	Met
L63	Med. treatment plan form	I			3/3	3/3	Met
L64	Med. treatment plan rev.	I			3/3	3/3	Met
L67	Money mgmt. plan	I			3/3	3/3	Met
L68	Funds expenditure	I			3/3	3/3	Met
L69	Expenditure tracking	I			3/3	3/3	Met
L77	Unique needs training	I			3/3	3/3	Met
L78	Restrictive Int. Training	L			1/1	1/1	Met
L79	Restraint training	L			1/1	1/1	Met
L80	Symptoms of illness	L			1/1	1/1	Met
L81	Medical emergency	L			1/1	1/1	Met
L82	Medication admin.	L			1/1	1/1	Met
L84	Health protect. Training	I			2/2	2/2	Met
L85	Supervision	L			1/1	1/1	Met
L86	Required assessments	I			3/3	3/3	Met
L87	Support strategies	I			3/3	3/3	Met
L88	Strategies implemented	I			3/3	3/3	Met

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L91	Incident management	L			1/1	1/1	Met
#Std. Met/# 55 Indicator						55/55	
Total Score						65/65	
						100%	

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

Community Based Day Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	3/3	Met
C8	Family/guardian communication	3/3	Met
C13	Skills to maximize independence	3/3	Met
C37	Interpersonal skills for work	3/3	Met
C44	Job exploration	1/1	Met
C45	Revisit decisions	1/1	Met
C51	Ongoing satisfaction with services/ supports	3/3	Met
C54	Assistive technology	3/3	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
C10	Social skill development	6/6	Met
C11	Get together w/family & friends	6/6	Met
C12	Intimacy	6/6	Met
C13	Skills to maximize independence	6/6	Met
C14	Choices in routines & schedules	6/6	Met
C15	Personalize living space	2/2	Met
C18	Purchase personal belongings	6/6	Met
C19	Knowledgeable decisions	6/6	Met
C20	Emergency back-up plans	2/2	Met
C49	Physical setting is consistent	2/2	Met
C51	Ongoing satisfaction with services/ supports	6/6	Met
C52	Leisure activities and free-time choices /control	6/6	Met
C53	Food/ dining choices	6/6	Met
C54	Assistive technology	6/6	Met