



**PROVIDER REPORT
FOR
NEW ENGLAND VILLAGE
664 School St
Pembroke, MA 02359**

Version

Public Provider Report

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

SUMMARY OF OVERALL FINDINGS

Provider	NEW ENGLAND VILLAGE
Review Dates	7/31/2019 - 8/6/2019
Service Enhancement Meeting Date	8/20/2019
Survey Team	Michelle Boyd Kayla Condon Barbara Mazzella (TL) Tina Napolitan
Citizen Volunteers	

Survey scope and findings for Residential and Individual Home Supports

Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Residential and Individual Home Supports	7 location(s) 9 audit (s)	Full Review	64 / 87 Defer Licensure		40 / 51 Certified with Progress Report
Residential Services	4 location(s) 6 audit (s)			Full Review	17 / 22
Individual Home Supports	3 location(s) 3 audit (s)			Full Review	19 / 23
Planning and Quality Management (For all service groupings)				Full Review	4 / 6

Survey scope and findings for Employment and Day Supports

Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Employment and Day Supports	2 location(s) 8 audit (s)	Full Review	55 / 65 2 Year License 08/20/2019 - 08/20/2021		34 / 42 Certified 08/20/2019 - 08/20/2021
Community Based Day Services	1 location(s) 4 audit (s)			Full Review	10 / 14
Employment Support Services	1 location(s) 4 audit (s)			Full Review	20 / 22
Planning and Quality Management (For all service groupings)				Full Review	4 / 6

EXECUTIVE SUMMARY :

New England Village, Inc. (NEV) is a non-profit agency that provides residential and day supports to individuals with intellectual and developmental disabilities in southeastern Massachusetts. NEV provides Residential Services to approximately 80 individuals. Of these 80 individuals, nine people are supported to live in homes where they receive less than 24 hours of support per day. The agency also provides day services to 65 individuals. Day services offered consist of a combination of employment supports for those people who want to obtain a competitive job and community based day supports (CBDS) for those individuals whose main focus is volunteerism, skills training towards employment or enrichment activities. The agency also provides day habilitation services to individuals living in and around the Pembroke and Kingston area.

The current review, conducted by the Department of Developmental Services (DDS) Office of Quality Enhancement included a full review of all licensing and certification indicators applicable to the 24 hour Residential services, Individual Home Supports, Employment and CBDS.

The review demonstrated a number of effective practices across residential and day services. Homes and the location at which day services are provided, that were visited, were clean and well maintained. The administration of medication by staff was done in accordance to required procedures. Individuals were supported to receive routine and preventative health screenings and follow regular physical exercise routines. Several individuals commented enthusiastically on the activities provided at the agency's Solar Fitness Center including the use of the pool. Water safety assessments for individuals as well as water safety trainings for staff were present for all those who use the pool. Staff were respectful of individual's privacy and individuals were aware of their human rights officer. One individual was proud to share that she was supported to be a human rights advocate and often provides training to others regarding human rights and self-advocacy.

Residentially, individuals were assessed regarding their independence to remain home without 24 hours of support. Two individuals were extremely happy that they receive supports to develop skills that enabled them to live in their own apartments with less than 24 hours of support and are able to create their own schedules. In the area of supporting and enhancing relationships, findings revealed that staff promoted ongoing connections between individuals and their families. Several individuals are supported to visit family members' homes on weekends or other special occasions and family members are welcomed to visit them in their homes. Communication with staff at all levels of the organization was accessible to families.

Since the last survey, the agency relocated its CBDS/Employment program to a new location which has greater exposure to community businesses for potential employment opportunities for individuals interested in competitive employment as well as for new enrichment activities in the community. Individuals who were employed were successfully supported to sustain their jobs. The individuals were working in integrated competitive jobs, receiving minimum wages, were supported to learn new skills in order to advance at their places of employment. One individual was excited to share that he was given additional responsibilities and hours from his employer.

This review also identified several licensing areas within the agency's residential and employment/day supports that need strengthening. Particular focus need to be placed on ensuring that all protections that impact the rights of individuals' are in place including training for individuals and guardians and staff on reporting potential abuse and neglect as well as training on the agency's grievance procedures.

Within residential services oversight and monitoring needs to be strengthened to ensure that staff are aware of what constitutes a reportable incident and required timelines for reporting. Staff needs to be aware of all required components when supporting individuals who have supportive and health protective devices, including provisions for safety checks and receiving required reviews.

Within residential Services, staff needs to be knowledgeable of all significant health care conditions and trained to implement health management plans as directed by practitioners.

Across the agency efforts should be directed toward supporting individuals to provide feedback on staff performance at the time of hire and on an ongoing basis and to share this information with staff. Although the agency had implemented this process within the past two years, additional efforts are needed to ensure consistency across all service types. Staff need additional training to better support individuals to assess, identify and utilize assistive technology to maximize their independence at home.

The agency has made efforts to ensure that person centered choices and activities are embedded in all aspects of individual's supports, however findings revealed that staff need to better assist people to participate in activities which expand their opportunities for community integration and activities that are reflective of individual's interests and preferences across all service types.

Within residential services, additional support is needed to assist individuals to explore and define their needs for intimacy and companionship. Additionally training for staff is needed in this area so that staff are able to fully support individuals in this area.

For those individuals who are seeking competitive employment additional support needs to be provided on a more consistent basis to expand skill development to secure jobs.

In the certification areas of Planning and Quality Management, the agency needs to expand its efforts to collect data regarding quality of services across service types and identify patterns and trends in order to develop action steps to improve the provision of services. The agency indicated that a new tracking system was recently implemented to measure the presence of desired outcomes to guide oversight and monitoring.

The License level for residential services will be determined pending the results of a follow-up review which will occur within 60 days. That review will evaluate the status of correction for the critical indicator that is Not Met, as well as the other licensing indicators that were Not Met. The agency is certified with a progress review for its residential services as it met 78% of the indicators. In one year the agency will submit a progress report relative to any certification indicators rated a Not Met in Residential /Individual Home Supports.

The agency has earned a Two Year License for its Employment and Day Services as it met 85% of the licensure indicators. Day services are Certified receiving a met for 81% of the indicators. The DDS will conduct follow up within 60 days for any licensing indicators rated Not Met within Employment and Day Supports.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	7/10	3/10	
Residential and Individual Home Supports	57/77	20/77	
Residential Services Individual Home Supports			
Critical Indicators	7/8	1/8	
Total	64/87	23/87	74%
Defer Licensure			
# indicators for 60 Day Follow-up		23	

	Met / Rated	Not Met / Rated	% Met
Organizational	7/10	3/10	
Employment and Day Supports	48/55	7/55	
Community Based Day Services Employment Support Services			
Critical Indicators	8/8	0/8	
Total	55/65	10/65	85%
2 Year License			
# indicators for 60 Day Follow- up		10	

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

Indicator #	Indicator	Area Needing Improvement
L48	The agency has an effective Human Rights Committee.	Although the agency has a Human Rights Committee, there are a number of areas such as mandated composition, attendance and review of agency policy and procedures that potentially impact the rights of individuals that the agency needs to strengthen in order to improve its effectiveness. The agency needs to ensure that its Human Rights Committee serves as an effective safeguard for all individuals.
L65	Restraint reports are submitted within required timelines.	Eight restraint reports were reviewed. Of these, six did not meet required timeframes regarding the creation of the report as well as the finalization of the report in the department's HCSIS system. The agency needs to ensure that restraint reports are submitted and finalized within required timelines.
L83	Support staff are trained in human rights.	All agency staff were not trained in the mandated reporting requirements that were required by April 1, 2018. A Notice of Action was issued. The agency needs to ensure that all staff are trained in the most current mandated reporting requirements.

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

Indicator #	Indicator	Area Needing Improvement
L1	Individuals have been trained and guardians are provided with information in how to report alleged abuse/neglect.	Of the nine individuals reviewed, six guardians were not provided information regarding how to report potential abuse and neglect. The agency needs to ensure that all guardians are knowledgeable regarding reporting potential abuse and neglect.
L5	There is an approved safety plan in home and work locations.	In two of seven locations, required safety plan components were not in place including training of all staff, accurate descriptions of individuals' support needs and action steps to be implemented in the event that individuals are resistant to safely evacuate within allowable timeframes. The agency needs to ensure that approved safety plans are in place with all required components.
P L38	Physicians' orders and treatment protocols are followed (when agreement for treatment has been reached by the individual/guardian/team).	For three out four individuals, staff were not aware of or knowledgeable regarding their unique health management protocols. The agency needs to ensure that all staff are trained and are following treatment protocols as outlined by the physician.
L39	Special dietary requirements are followed.	For two out of four individuals who required specialized diets, all staff were not trained to support individuals to follow dietary recommendations. The agency needs to ensure that staff are implementing and supporting individuals to follow special dietary recommendations.
L43	The health care record is maintained and updated as required.	The health care record (HCR) for two individuals did not accurately reflect all of the individuals' medical information. The agency needs to ensure that health care records are updated.
L47	Individuals are supported to become self medicating when appropriate.	Four out of six individuals were not assessed regarding their ability to self-medicate. The agency needs to ensure that individuals are assessed regarding their ability to administer their medications.
L49	Individuals and guardians have been informed of their human rights and know how to file a grievance or to whom they should talk if they have a concern.	Six out of nine individuals and their guardians were not informed of how to file a grievance. The agency needs to ensure that individuals are informed and trained regarding the agency's grievance procedures, or to whom they should talk to if they have a concern.
L55	Informed consent is obtained from individuals or their guardians when required; Individuals or their guardians know that they have the right to withdraw consent.	In seven instances the agency obtained consent without identifying the purpose, the actual photo being utilized or to whom the information would be released. The agency needs to ensure that when informed consent is obtained from individuals or guardians, all required information is included.

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

Indicator #	Indicator	Area Needing Improvement
L56	Restrictive practices intended for one individual that affect all individuals served at a location need to have a written rationale that is reviewed as required and have provisions so as not to unduly restrict the rights of others.	For one individual out of three with restrictive practices, all required components such as a written rationale and a plan to fade were not in place. The agency needs to ensure that all required components are in place when restrictive practices are being implemented.
L60	Data are consistently maintained and used to determine the efficacy of behavioral interventions.	For one individual out of three with behavior plans, there was a lack of implementation of all identified strategies. The agency needs to ensure that staff are supported to implement behavior plans as designed.
L61	Supports and health related protections are included in ISP assessments and the continued need is outlined.	Supportive and health related protections were reviewed for two individuals. For one individual all required components such as the frequency of use and procedures for safety checks were not included. The agency needs to ensure that all required information is in place to ensure proper utilization of such supports.
L62	Supports and health related protections are reviewed by the required groups.	A supportive and health protection was not reviewed by the human rights committee. The agency needs to ensure that supportive and health related protections are reviewed by required groups.
L63	Medication treatment plans are in written format with required components.	Medication Treatment Plans (MTP) were reviewed for seven individuals. Issues were identified regarding two of these plans including a lack of data collection needed to inform the prescribing physician regarding the effectiveness of the medication and a plan to reduce the need for the medication. The agency needs to ensure that MTP's include all required components.
L64	Medication treatment plans are reviewed by the required groups.	Two medication treatment plans were not reviewed by the ISP team. The agency needs to ensure that medication treatment plans are reviewed by the ISP team.
L69	Individual expenditures are documented and tracked.	In four instances out of seven reviewed, staff were not documenting cash taken out of cash on hand. The agency needs to ensure that all expenditures are documented and tracked.
L84	Staff / care providers are trained in the correct utilization of health related protections per regulation.	For one individual, the staff were not trained in the correct utilization of health related protections. The agency needs to ensure that all staff are trained in the correct utilization of health related supports and protections.

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

Indicator #	Indicator	Area Needing Improvement
L85	The agency provides ongoing supervision, oversight and staff development.	At two out of seven locations, there was no evidence of supervisory oversight such as quality assurance reviews or regular staff meetings to identify areas that staff would need additional support and/or education to meet standards regarding individuals' health care management protocols, communication needs, supportive health related protections, evacuation procedures and dietary requirements. The agency needs to ensure that all staff are supported through supervision and training to meet the needs of the individuals.
L86	Required assessments concerning individual needs and abilities are completed in preparation for the ISP.	Assessments were not submitted within required timeframes for four individuals. The agency needs to ensure that assessments are submitted to the DDS Area office at least 15 days prior to the ISP.
L87	Support strategies necessary to assist an individual to meet their goals and objectives are completed and submitted as part of the ISP.	Support strategies were not submitted within required timeframes for five individuals. The agency needs to ensure that support strategies are submitted to the DDS Area Office at least 15 days prior to the scheduled ISP meeting.
L91	Incidents are reported and reviewed as mandated by regulation.	In three locations there were incidents that were not reported. In two of the seven locations where reportable incidents had occurred, there were instances in which reports had not been submitted and/or finalized within required timelines. The agency needs to ensure that all staff are knowledgeable of the criteria for reportable incidents and that these are reported within required timelines.

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

Indicator #	Indicator	Area Needing Improvement
L1	Individuals have been trained and guardians are provided with information in how to report alleged abuse/neglect.	Four guardians were not provided information regarding how to report potential abuse and neglect. The agency needs to ensure that all guardians are provide information regarding the reporting of potential abuse and neglect.
L61	Supports and health related protections are included in ISP assessments and the continued need is outlined.	Supportive and health related protections were reviewed for one individual. All required components such as the frequency of use, procedures for safety checks and authorization from a practitioner were not in place. The agency needs to ensure that all required information is in place to ensure proper utilization of such supports.

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

Indicator #	Indicator	Area Needing Improvement
L62	Supports and health related protections are reviewed by the required groups.	For one individual, the use of a supportive and health related protection device was not reviewed by the human rights committee. The agency needs to ensure that supportive and health related protections are reviewed by required groups.
L64	Medication treatment plans are reviewed by the required groups.	One medication treatment plan was not reviewed by the ISP team. The agency needs to ensure that medication treatment plans are reviewed by the ISP team.
L84	Staff / care providers are trained in the correct utilization of health related protections per regulation.	For one individual, the staff were not trained in the correct utilization of health related protections. The agency needs to ensure that all staff are trained in the correct utilization of health related protections.
L86	Required assessments concerning individual needs and abilities are completed in preparation for the ISP.	Assessments were not submitted within required timeframes for five individuals. The agency needs to ensure that assessments are submitted to the DDS Area office at least 15 days prior to the ISP.
L87	Support strategies necessary to assist an individual to meet their goals and objectives are completed and submitted as part of the ISP.	Support strategies were not submitted within required timeframes for four individuals. The agency needs to ensure that support strategies are submitted to the DDS Area Office at least 15 days prior to the scheduled ISP meeting.

CERTIFICATION FINDINGS

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	4/6	2/6	
Residential and Individual Home Supports	36/45	9/45	
Individual Home Supports	19/23	4/23	
Residential Services	17/22	5/22	
TOTAL	40/51	11/51	78%
Certified with Progress Report			

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	4/6	2/6	
Employment and Day Supports	30/36	6/36	
Community Based Day Services	10/14	4/14	
Employment Support Services	20/22	2/22	
TOTAL	34/42	8/42	81%
Certified			

Planning and Quality Management Areas Needing Improvement on Standards not met:

Indicator #	Indicator	Area Needing Improvement
C1	The provider collects data regarding program quality including but not limited to incidents, investigations, restraints, and medication occurrences.	The agency needs to collect data from a variety of measures for each discrete service type. This data should include information regarding program quality that is separate and apart from incident management. The agency needs to ensure that data collection is occurring for each service type as well as systemically and include information regarding program quality.
C2	The provider analyzes information gathered from all sources and identifies patterns and trends.	The agency's quality management system does not identify patterns and trends within each service type which could be beneficial in developing appropriate actions and ongoing strategies to enhance service. The agency needs to utilize data/information gathered to systemically evaluate the quality of services and identify trends and patterns which could assist in identifying areas of additional oversight and monitoring.

Individual Home Supports- Areas Needing Improvement on Standards not met:

Indicator #	Indicator	Area Needing Improvement
C7	Individuals have opportunities to provide feedback at the time of hire / time of the match and on an ongoing basis on the performance/actions of staff / care providers that support them.	The agency had not solicited feedback from two out of three individuals regarding the performance of staff at the time of annual performance reviews. The agency needs to solicit feedback from individuals regarding staff performance on an ongoing basis.
C12	Individuals are supported to explore, define, and express their need for intimacy and companionship.	For two out of three individuals, there were no formal or informal assessment of their need for intimacy and companionship. The agency needs to further assess individuals and provide staff training to support individuals to explore, define and express their need for intimacy and companionship based on their unique learning styles.
C49	The physical setting blends in with and is a natural part of the neighborhood and community.	Two of the three homes reviewed are situated on a large campus and are not fully integrated in the community. The agency needs to ensure that individuals are supported to live in settings that blend into the neighborhood and are integrated into the community.
C54	Individuals have the assistive technology and/or modifications to maximize independence.	An assessment regarding the need for assistive technology for one out of two individuals identified potential areas for enhanced independence, however there was a lack of exploration or support to actualize the identified goal. The agency needs to develop strategies and/or supports to provide assistive technology or modifications to maximize individual's independence.

Residential Services- Areas Needing Improvement on Standards not met:

Indicator #	Indicator	Area Needing Improvement
C7	Individuals have opportunities to provide feedback at the time of hire / time of the match and on an ongoing basis on the performance/actions of staff / care providers that support them.	Five out of six individuals were not provided opportunities to give feedback on the performance of employees at either the time of hire and/or on an ongoing basis. The agency needs to ensure that individuals have opportunities to provide feedback at the time of hire and on an ongoing basis.

Residential Services- Areas Needing Improvement on Standards not met:

Indicator #	Indicator	Area Needing Improvement
C12	Individuals are supported to explore, define, and express their need for intimacy and companionship.	Five out of six individuals needed additional supports in the area of companionship and intimacy. Additionally, staff were not providing education and guidance in this area. The agency needs to assess individuals' needs in this area and provide training to staff to assist individuals to explore, define and express their need for intimacy and companionship that is in concert with their unique needs.
C16	Staff (Home Providers) support individuals to explore, discover and connect with their interests for cultural, social, recreational and spiritual activities.	Two out of six individuals were not supported to explore or discover activities that are in line with their interests in cultural, social, recreational or spiritual activities. The agency needs to ensure that individuals are provided opportunities that connect individuals with their interests.
C49	The physical setting blends in with and is a natural part of the neighborhood and community.	All four of these homes are situated on a large campus and are not fully integrated in the community. The agency needs to ensure that individuals are supported to live in settings that blend into the neighborhood and are integrated into the community.
C54	Individuals have the assistive technology and/or modifications to maximize independence.	An assessment regarding the need for assistive technology to maximize independence was not completed for three out of six individuals. For two other individuals, in which an assistive technology assessment was completed, strategies and/or modifications were not identified or implemented. The agency needs to ensure that assessments regarding the need for assistive technology are completed and when areas of need are identified strategies or modifications to increase independence are implemented.

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

Indicator #	Indicator	Area Needing Improvement
C41	Individuals participate in activities, including those in the community, that reflect their interests and preferences.	Two individuals did not participate in community activities that reflected their interests and preferences. The agency needs to ensure that activities reflect individual's interests and preferences.

C42	Individuals are involved in activities that connect them to other people in the community.	Two individuals were not offered activities in the community that connect them to other people. The agency needs to ensure individuals are offered activities in the community that connect them to other people.
C44	Staff have effective methods to assist individuals to explore their job interests if appropriate.	One individual was not assisted to explore job interests nor participate in a vocational setting. The agency needs to ensure they have effective methods to assist individuals to explore job interests.
C54	Individuals have the assistive technology and/or modifications to maximize independence.	The agency had not conducted assessments nor supported individuals to use assistive technology and/or modifications to maximize their independence. The agency needs to ensure that individual's areas of need are identified and recommendations are implemented.

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

Indicator #	Indicator	Area Needing Improvement
C25	Staff assist individuals to work on skill development for job attainment and success.	For two individuals, opportunities to work on skill development towards job attainment were limited. The agency needs to ensure that individuals have opportunities for skill development that is available on an ongoing basis.
C29	Individuals are supported to obtain employment that matches their skills and interests.	For one individual additional supports are needed to secure employment which matches their skills and interests. The agency needs to ensure that sustained ongoing efforts are utilized to assist individuals to obtain employment within a reasonable amount of time.

MASTER SCORE SHEET LICENSURE

Organizational: NEW ENGLAND VILLAGE

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
R L2	Abuse/neglect reporting	8/8	Met
L3	Immediate Action	15/15	Met
L4	Action taken	10/10	Met
L48	HRC	0/1	Not Met(0 %)
L65	Restraint report submit	2/8	Not Met(25.00 %)
L66	HRC restraint review	6/7	Met(85.71 %)
L74	Screen employees	6/6	Met
L75	Qualified staff	1/1	Met
L76	Track trainings	17/20	Met(85.00 %)
L83	HR training	14/20	Not Met(70.0 %)

Residential and Individual Home Supports:

Ind. #	Ind.	Loc. or Individ.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L1	Abuse/neglect training	I	1/6	2/3					3/9	Not Met (33.33%)
L5	Safety Plan	L	2/4	3/3					5/7	Not Met (71.43%)
R L6	Evacuation	L	3/4	3/3					6/7	Met (85.71%)
L7	Fire Drills	L	3/4						3/4	Met
L8	Emergency Fact Sheets	I	5/6	3/3					8/9	Met (88.89%)
L9	Safe use of equipment	L	4/4	3/3					7/7	Met
L10	Reduce risk interventions	I	3/4	1/1					4/5	Met (80.0%)
R L11	Required inspections	L	4/4	3/3					7/7	Met
R L12	Smoke detectors	L	3/4	3/3					6/7	Met (85.71%)
R L13	Clean location	L	4/4	3/3					7/7	Met
L14	Site in good repair	L	3/3	3/3					6/6	Met
L15	Hot water	L	3/4	3/3					6/7	Met (85.71%)
L16	Accessibility	L	3/4	3/3					6/7	Met (85.71%)

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L17	Egress at grade	L	4/4	3/3					7/7	Met
L18	Above grade egress	L	2/2	1/1					3/3	Met
L19	Bedroom location	L	2/2	2/2					4/4	Met
L20	Exit doors	L	4/4	3/3					7/7	Met
L21	Safe electrical equipment	L	4/4	3/3					7/7	Met
L22	Well-maintained appliances	L	3/4	3/3					6/7	Met (85.71%)
L24	Locked door access	L	4/4						4/4	Met
L25	Dangerous substances	L	4/4	2/3					6/7	Met (85.71%)
L26	Walkway safety	L	3/4	3/3					6/7	Met (85.71%)
L27	Pools, hot tubs, etc.	L	4/4	3/3					7/7	Met
L28	Flammables	L	4/4	3/3					7/7	Met
L29	Rubbish/combustibles	L	4/4	3/3					7/7	Met
L30	Protective railings	L	2/3	2/2					4/5	Met (80.0%)
L31	Communication method	I	5/6	3/3					8/9	Met (88.89%)

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L32	Verbal & written	I	6/6	3/3					9/9	Met
L33	Physical exam	I	6/6	3/3					9/9	Met
L34	Dental exam	I	6/6	3/3					9/9	Met
L35	Preventive screenings	I	5/6	3/3					8/9	Met (88.89%)
L36	Recommended tests	I	5/6	3/3					8/9	Met (88.89%)
L37	Prompt treatment	I	6/6	3/3					9/9	Met
R L38	Physician's orders	I	1/4						1/4	Not Met (25.00%)
L39	Dietary requirements	I	1/3	1/1					2/4	Not Met (50.0%)
L40	Nutritional food	L	4/4	2/3					6/7	Met (85.71%)
L41	Healthy diet	L	4/4	2/3					6/7	Met (85.71%)
L42	Physical activity	L	4/4	3/3					7/7	Met
L43	Health Care Record	I	5/6	2/3					7/9	Not Met (77.78%)
L44	MAP registration	L	4/4	1/1					5/5	Met
L45	Medication storage	L	4/4	1/1					5/5	Met
R L46	Med. Administration	I	6/6	1/1					7/7	Met

Ind. #	Ind.	Loc. or Individ.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L47	Self medication	I	0/3	2/3					2/6	Not Met (33.33%)
L49	Informed of human rights	I	0/6	3/3					3/9	Not Met (33.33%)
L50	Respectful Comm.	L	4/4	3/3					7/7	Met
L51	Possessions	I	5/6	3/3					8/9	Met (88.89%)
L52	Phone calls	I	5/6	3/3					8/9	Met (88.89%)
L53	Visitation	I	6/6	3/3					9/9	Met
L54	Privacy	L	4/4	3/3					7/7	Met
L55	Informed consent	I	2/5	0/2					2/7	Not Met (28.57%)
L56	Restrictive practices	I	2/2	0/1					2/3	Not Met (66.67%)
L57	Written behavior plans	I	3/3						3/3	Met
L58	Behavior plan component	I	3/3						3/3	Met
L59	Behavior plan review	I	3/3						3/3	Met
L60	Data maintenance	I	2/3						2/3	Not Met (66.67%)
L61	Health protection in ISP	I	0/1	1/1					1/2	Not Met (50.0%)

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L62	Health protection review	I	0/1	1/1					1/2	Not Met (50.0%)
L63	Med. treatment plan form	I	4/6	1/1					5/7	Not Met (71.43%)
L64	Med. treatment plan rev.	I	4/6	1/1					5/7	Not Met (71.43%)
L67	Money mgmt. plan	I	6/6	0/1					6/7	Met (85.71%)
L68	Funds expenditure	I	6/6	1/2					7/8	Met (87.50%)
L69	Expenditure tracking	I	2/6	1/1					3/7	Not Met (42.86%)
L70	Charges for care calc.	I	6/6	2/2					8/8	Met
L71	Charges for care appeal	I	6/6	2/2					8/8	Met
L77	Unique needs training	I	6/6	3/3					9/9	Met
L78	Restrictive Int. Training	L	3/3	1/1					4/4	Met
L79	Restraint training	L	3/3						3/3	Met
L80	Symptoms of illness	L	4/4	3/3					7/7	Met
L81	Medical emergency	L	4/4	3/3					7/7	Met
R L82	Medication admin.	L	4/4	1/1					5/5	Met

Ind. #	Ind.	Loc. or Individ.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L84	Health protect. Training	I	0/1	1/1					1/2	Not Met (50.0 %)
L85	Supervision	L	2/4	3/3					5/7	Not Met (71.43 %)
L86	Required assessments	I	3/6	0/1					3/7	Not Met (42.86 %)
L87	Support strategies	I	2/6	0/1					2/7	Not Met (28.57 %)
L88	Strategies implemented	I	5/6	3/3					8/9	Met (88.89 %)
L90	Personal space/bedroom privacy	I	6/6	3/3					9/9	Met
L91	Incident management	L	1/4	1/3					2/7	Not Met (28.57 %)
#Std. Met/# 77 Indicator									57/77	
Total Score									64/87	
									73.56%	

Employment and Day Supports:

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L1	Abuse/neglect training	I	4/4		0/4	4/8	Not Met (50.0 %)
L5	Safety Plan	L			1/1	1/1	Met
L6	Evacuation	L			1/1	1/1	Met

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L7	Fire Drills	L			1/1	1/1	Met
L8	Emergency Fact Sheets	I	4/4		3/4	7/8	Met (87.50 %)
L9	Safe use of equipment	L	1/1		1/1	2/2	Met
L10	Reduce risk interventions	I			4/4	4/4	Met
R L11	Required inspections	L			1/1	1/1	Met
R L12	Smoke detectors	L			1/1	1/1	Met
R 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
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
L29	Rubbish/combustibles	L			1/1	1/1	Met
L31	Communication method	I	4/4		4/4	8/8	Met
L32	Verbal & written	I	4/4		4/4	8/8	Met
L37	Prompt treatment	I	4/4		2/2	6/6	Met
R L38	Physician's orders	I	2/2		3/3	5/5	Met
L39	Dietary requirements	I	2/2		3/4	5/6	Met (83.33 %)

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L44	MAP registration	L			1/1	1/1	Met
L45	Medication storage	L			1/1	1/1	Met
R L46	Med. Administration	I			4/4	4/4	Met
L49	Informed of human rights	I	4/4		4/4	8/8	Met
L50	Respectful Comm.	L	1/1		1/1	2/2	Met
L51	Possessions	I	4/4		4/4	8/8	Met
L52	Phone calls	I	4/4		4/4	8/8	Met
L54	Privacy	L	1/1		1/1	2/2	Met
L55	Informed consent	I	1/1		2/2	3/3	Met
L56	Restrictive practices	I			2/2	2/2	Met
L57	Written behavior plans	I			4/4	4/4	Met
L58	Behavior plan component	I			4/4	4/4	Met
L59	Behavior plan review	I			4/4	4/4	Met
L60	Data maintenance	I			4/4	4/4	Met
L61	Health protection in ISP	I			0/1	0/1	Not Met (0 %)
L62	Health protection review	I			0/1	0/1	Not Met (0 %)
L63	Med. treatment plan form	I			3/3	3/3	Met
L64	Med. treatment plan rev.	I			2/3	2/3	Not Met (66.67 %)
L77	Unique needs training	I	4/4		4/4	8/8	Met
L78	Restrictive Int. Training	L			1/1	1/1	Met
L79	Restraint training	L	1/1		1/1	2/2	Met

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L80	Symptoms of illness	L	1/1		1/1	2/2	Met
L81	Medical emergency	L	1/1		1/1	2/2	Met
R L82	Medication admin.	L			1/1	1/1	Met
L84	Health protect. Training	I			0/1	0/1	Not Met (0 %)
L85	Supervision	L	1/1		1/1	2/2	Met
L86	Required assessments	I	2/4		1/4	3/8	Not Met (37.50 %)
L87	Support strategies	I	3/4		1/4	4/8	Not Met (50.0 %)
L88	Strategies implemented	I	4/4		4/4	8/8	Met
L91	Incident management	L	1/1		1/1	2/2	Met
#Std. Met/# 55 Indicator						48/55	
Total Score						55/65	
						84.62%	

MASTER SCORE SHEET CERTIFICATION

Certification - Planning and Quality Management

Indicator #	Indicator	Met/Rated	Rating
C1	Provider data collection	0/1	Not Met (0 %)
C2	Data analysis	0/1	Not Met (0 %)
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	4/4	Met
C8	Family/guardian communication	4/4	Met
C13	Skills to maximize independence	4/4	Met
C37	Interpersonal skills for work	3/3	Met
C40	Community involvement interest	4/4	Met
C41	Activities participation	2/4	Not Met (50.0 %)
C42	Connection to others	2/4	Not Met (50.0 %)
C43	Maintain & enhance relationship	4/4	Met
C44	Job exploration	1/2	Not Met (50.0 %)
C45	Revisit decisions	4/4	Met
C46	Use of generic resources	3/4	Met
C47	Transportation to/ from community	4/4	Met
C51	Ongoing satisfaction with services/ supports	4/4	Met
C54	Assistive technology	0/3	Not Met (0 %)

Employment Support Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	4/4	Met
C8	Family/guardian communication	4/4	Met
C22	Explore job interests	2/2	Met
C23	Assess skills & training needs	2/2	Met
C24	Job goals & support needs plan	2/2	Met
C25	Skill development	0/2	Not Met (0 %)
C26	Benefits analysis	2/2	Met
C27	Job benefit education	3/3	Met
C28	Relationships w/businesses	1/1	Met
C29	Support to obtain employment	2/3	Not Met (66.67 %)
C30	Work in integrated settings	4/4	Met
C31	Job accommodations	4/4	Met
C32	At least minimum wages earned	4/4	Met
C33	Employee benefits explained	4/4	Met

Employment Support Services

Indicator #	Indicator	Met/Rated	Rating
C34	Support to promote success	4/4	Met
C35	Feedback on job performance	3/3	Met
C36	Supports to enhance retention	4/4	Met
C37	Interpersonal skills for work	4/4	Met
C47	Transportation to/ from community	4/4	Met
C50	Involvement/ part of the Workplace culture	4/4	Met
C51	Ongoing satisfaction with services/ supports	4/4	Met
C54	Assistive technology	4/4	Met

Individual Home Supports

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	1/3	Not Met (33.33 %)
C8	Family/guardian communication	3/3	Met
C9	Personal relationships	3/3	Met
C10	Social skill development	3/3	Met
C11	Get together w/family & friends	3/3	Met
C12	Intimacy	1/3	Not Met (33.33 %)
C13	Skills to maximize independence	3/3	Met
C14	Choices in routines & schedules	3/3	Met
C15	Personalize living space	3/3	Met
C16	Explore interests	3/3	Met
C17	Community activities	3/3	Met
C18	Purchase personal belongings	3/3	Met
C19	Knowledgeable decisions	3/3	Met
C20	Emergency back-up plans	3/3	Met
C21	Coordinate outreach	3/3	Met
C46	Use of generic resources	3/3	Met
C47	Transportation to/ from community	3/3	Met
C48	Neighborhood connections	3/3	Met
C49	Physical setting is consistent	1/3	Not Met (33.33 %)

Individual Home Supports

Indicator #	Indicator	Met/Rated	Rating
C51	Ongoing satisfaction with services/ supports	3/3	Met
C52	Leisure activities and free-time choices /control	3/3	Met
C53	Food/ dining choices	3/3	Met
C54	Assistive technology	1/2	Not Met (50.0 %)

Residential Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	1/6	Not Met (16.67 %)
C8	Family/guardian communication	6/6	Met
C9	Personal relationships	5/6	Met (83.33 %)
C10	Social skill development	6/6	Met
C11	Get together w/family & friends	6/6	Met
C12	Intimacy	1/6	Not Met (16.67 %)
C13	Skills to maximize independence	6/6	Met
C14	Choices in routines & schedules	6/6	Met
C15	Personalize living space	4/4	Met
C16	Explore interests	4/6	Not Met (66.67 %)
C17	Community activities	5/6	Met (83.33 %)
C18	Purchase personal belongings	6/6	Met
C19	Knowledgeable decisions	6/6	Met
C20	Emergency back-up plans	4/4	Met
C46	Use of generic resources	6/6	Met
C47	Transportation to/ from community	6/6	Met
C48	Neighborhood connections	6/6	Met
C49	Physical setting is consistent	0/4	Not Met (0 %)
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	1/6	Not Met (16.67 %)