



**PROVIDER REPORT  
FOR**

**Northeast ARC  
1 Southside Road  
Danvers, MA 01923**

**January 13, 2023**

**Version**

**Public Provider Report**

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

## **SUMMARY OF OVERALL FINDINGS**

<b>Provider</b>	Northeast ARC
<b>Review Dates</b>	11/15/2022 - 11/21/2022
<b>Service Enhancement Meeting Date</b>	12/6/2022
<b>Survey Team</b>	Anne Carey Raquel Rodriguez Meagan Caccioppoli John Hazelton (TL) John Downing Cheryl Hampton Lisa MacPhail Jennifer Conley-Sevier
<b>Citizen Volunteers</b>	

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

<b>Service Group Type</b>	<b>Sample Size</b>	<b>Licensure Scope</b>	<b>Licensure Level</b>	<b>Certification Scope</b>	<b>Certification Level</b>
<b>Residential and Individual Home Supports</b>	15 location(s) 18 audit (s)	Targeted Review	DDS 22/27 Provider 66 / 66  88 / 93 2 Year License 12/06/2022-12/06/2024		DDS 18 / 18 Provider 67 / 67  85 / 85 Certified 12/06/2022 - 12/06/2024
Residential Services	7 location(s) 7 audit (s)			DDS Targeted Review	20 / 20
ABI-MFP Residential Services	1 location(s) 3 audit (s)			Full Review	18 / 18
Placement Services	4 location(s) 5 audit (s)			DDS Targeted Review	20 / 20
Individual Home Supports	3 location(s) 3 audit (s)			DDS Targeted Review	21 / 21
Planning and Quality Management (For all service groupings)				DDS Targeted Review	6 / 6

### **Survey scope and findings for Employment and Day Supports**

<b>Service Group Type</b>	<b>Sample Size</b>	<b>Licensure Scope</b>	<b>Licensure Level</b>	<b>Certification Scope</b>	<b>Certification Level</b>
<b>Employment and Day Supports</b>	4 location(s) 18 audit (s)	Targeted Review	DDS 16/17 Provider 61 / 62  77 / 79 2 Year License 12/06/2022-12/06/2024		DDS 2 / 2 Provider 40 / 40  42 / 42 Certified 12/06/2022 - 12/06/2024
Community Based Day Services	2 location(s) 9 audit (s)			DDS Targeted Review	15 / 15
Employment Support Services	2 location(s) 9 audit (s)			DDS Targeted Review	21 / 21
Planning and Quality Management (For all service groupings)				DDS Targeted Review	6 / 6

**EXECUTIVE SUMMARY :**

The Northeast Arc is a multi-faceted agency which has provided services to adults and children with intellectual and developmental disabilities since 1954. Services include 24-hour Residential Supports; 24 hour Residential Supports to individuals in the ABI/MFP program; Individual Home Supports (IHS); Shared Living/Placement; Employment Supports; Community-Based Day Supports (CBDS), and services to individuals who are deaf/heard of hearing within the IHS and CBDS programs. The agency continues to operate its well-established Autism Support Center and Early Intervention Programs.

For the purposes of this Licensing and Certification review, audits were conducted in 24-hour Residential Supports; IHS; Shared Living/Placement; 24 hour ABI/MFP; Employment Supports and CBDS.

Due to the results of the agency's 2019 survey, Northeast Arc was eligible and elected to complete a self-assessment for the current licensing cycle, with DDS conducting a targeted review of the eight critical licensing indicators, licensure and certification indicators receiving a rating of not met during the previous survey, and indicators that were either not reviewed (ABI/MFP certification indicators), newly created or revised since the last survey. The overall ratings from this survey process are a combination of the agency's self-assessment and the DDS targeted review.

Within the agency's Residential Services, there were a number of positive practices identified throughout the survey. Although not required, individuals supported within the agency's shared living program benefited from the agency practice of following Department of Public Health Medication Administration Program (MAP) standards, which ensured medications were administered as prescribed. Individuals in all settings were found to be treated with respect and their choices valued as evidenced by staff knowledge and utilization of each person's favorite clothing options and colors. Within the ABI program, staff adjusted their stance when communicating with individuals using wheelchairs so as to be at eye level with them, and exhibiting patience when individuals used communication devices to convey their thoughts and needs. Across all settings, individuals were found to have needed assistive technology devices in place, and support staff were found to be well trained in the use of these devices.

Several positive practices were noted within the agency's Employment and Day Supports program. The agency completed comprehensive assistive technology (AT) assessments on all individuals surveyed, and sought additional assessment through a Suffolk University assistive technology fair. All needed AT supports were in place; one individual was found to have benefited from the use of a Life Sherpa Remote Support phone application that afforded him increased privacy and independence by remotely accessing employment supports from staff in real time. The agency's career planning process was found to be comprehensive and dynamic, with current support needs clearly defined and continually updated as individuals achieved stated goals.

Some areas of need were identified during the survey process. On an organizational level, the agency needs to place increased focus on ensuring that restraint reports are created and finalized within required timelines. Within the Residential programs, additional support is needed in areas such as meeting ISP assessment and support strategy submission timelines, and ensuring hot water temperatures at all programs are within required ranges. Within the Day Supports program, the provider self-assessment process identified a need for increased focus on submitting ISP support strategies within the required timelines.

As a result of this survey, Northeast Arc will receive a Two-Year License for its Residential and Individual Home Supports Service Group, meeting 95% of licensing indicators. The agency's Employment and Day Supports Services Group will receive a Two-Year License with 97% of licensing indicators met. The agency is certified, meeting 100% of certification indicators across both of its Service Groups. Northeast Arc will complete its own follow-up on licensing indicators not met during the survey for both Service Groups, to be submitted to OQE within 60 days of the SEM.

The following is a description of the agency's self-assessment process:

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

The Northeast Arc prides itself on providing quality services to the people we serve. To ensure this, we utilize multiple QA systems to provide ongoing assessment of services and supports. This includes systems to identify patterns, reassess procedures and implement corrective action if indicated. There are agency wide systems in place, as well as those that are more program specific. To complete the Self-Assessment process, Residential Services and Day Services established their own audit teams to survey all indicators.

**Residential Services Self-Assessment Process (including 24-hour homes, 24-hour ABI, Placement, and Individual Home Supports):**

A large sample of homes/people were reviewed using a computerized random selection process. For Residential, the sample included 20% of our 24-hour homes, 100% of our ABI homes, 25% of our Individual Home Supports and 20% of our Placement Supports.

The Self-Assessment QA process reviewed all licensure and certification indicators using the DDS QE Licensure and Certification Audit Tools. The guidelines detailed in the tool were used to establish if a specific indicator was met or not met. The Self-Assessment Audit team included people not working directly in each home/service including the Residential Division Director and other team members. All applicable indicators were assessed in each service area. The audit included reviews of individual records, program logs and documentation, HCSIS, observations, individual interviews, and staff interviews. The QE standard of 80% was used to establish whether a standard was met, however, any indicators not at 100% were communicated to the program supervisor with an action plan for corrective action and follow up. All follow up was required to be completed within 5 business days.

For some indicators a full sample of all homes and supports was assessed. For example, for trainings a random sample consisting of 15% of all staff (including DSPs, LPNs, Per Diem and Management) was used. For other areas including fire drills all services were assessed to ensure compliance with standards.

In addition to the Agency Self-Assessment QA there are many other ongoing systems in place that assure monitoring of services, including all of the license and certification indicators.

**Residential Ongoing Quality Assurance:**

Residential maintains an ongoing schedule for on-site QAs consisting of audits of paperwork and also interviews with both staff and people supported. Additionally, all services areas complete a quarterly Service Indicator Report to audit compliance in many areas, including consents, medical appointments, protocols, finances, ISP timelines, staff trainings, maintenance issues and fire drills. The Division Director reviews all reports, compiles data and uses this to address any themes identified.

**Employment and Community Day Supports:**

A large sample of individuals in the Community Employment Division programs were reviewed during this survey. The sample per program ranged from 15% to 25% and the programs reviewed consisted of all divisional programs which include: Steps to Independence, Steps to Create, Journeys, Supported Employment, Heritage Shredding Business, and the Caning Company. An excel random sampling system was used for this process.

The Self-Assessment QA process reviewed most licensure and certification indicators except for health protections and staff training in devices and applications due to the selected sample not consisting of individuals with this support need. The Self-Assessment Audit team consisted of two management level divisional staff who do not directly supervise any of the selected programs. These staff conducted all self-assessment reviews to ensure consistency throughout the process. The audit included reviews of individuals confidential records, daily data records, HCSIS, observations, staff training logs and backup documentation, individual interviews and staff interviews. The QE standard of

80% was used to establish whether a standard was met, however, any indicators not at 100% were communicated to the program supervisor with an action plan for corrective action and follow up. All follow up on areas that were not met were either corrected immediately or are in process of being corrected. Staff Trainings were sampled with 100% of full-time staff from each program and all physical site/fire drills were assessed at 100% as well at each location. Note that financial indicators were not rated due to the fact that individual's money is held or managed by any of the programs.

In addition to the Agency Self-Assessment QA there are many other ongoing systems in place that assure monitoring of services, including all of the license and certification indicators.

#### Community Employment Ongoing Quality Assurance:

Community Employment maintains regular quality checks of individual confidential records, daily data books and individualized competitive employment (ICE) manuals. Monthly review of all staff training is conducted by the divisional service manager and yearly satisfaction surveys are conducted with each individual on the services they receive as well as on feedback for staff performance. Medication reviews are conducted monthly as well as incident and restraint reports. Safety inspections are conducted quarterly by the assigned safety officer for each location.

## **LICENSURE FINDINGS**

	Met / Rated	Not Met / Rated	% Met
<b>Organizational</b>	<b>9/10</b>	<b>1/10</b>	
<b>Residential and Individual Home Supports</b>	<b>79/83</b>	<b>4/83</b>	
Residential Services Individual Home Supports ABI-MFP Placement Services Placement Services ABI-MFP Residential Services			
<b>Critical Indicators</b>	<b>8/8</b>	<b>0/8</b>	
<b>Total</b>	<b>88/93</b>	<b>5/93</b>	<b>95%</b>
<b>2 Year License</b>			
<b># indicators for 60 Day Follow-up</b>		<b>5</b>	

	Met / Rated	Not Met / Rated	% Met
<b>Organizational</b>	<b>10/11</b>	<b>1/11</b>	
<b>Employment and Day Supports</b>	<b>67/68</b>	<b>1/68</b>	
Community Based Day Services Employment Support Services			
<b>Critical Indicators</b>	<b>8/8</b>	<b>0/8</b>	
<b>Total</b>	<b>77/79</b>	<b>2/79</b>	<b>97%</b>
<b>2 Year License</b>			
<b># indicators for 60 Day Follow-up</b>		<b>2</b>	

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

Indicator #	Indicator	Area Needing Improvement
L65	Restraint reports are submitted within required timelines.	Three of three Restraint Reports were either not created or finalized within the required timeframes. The agency needs to ensure that Restraint Reports are created within three calendar days and finalized within five business days of the restraint.



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

<b>Indicator #</b>	<b>Indicator</b>	<b>Area Needing Improvement</b>
L15	Hot water temperature tests between 110 and 120 degrees (as of 1/2014).	The hot water temperatures at three locations were outside of the acceptable range. The agency needs to ensure hot water temperatures are between 110-112 degrees at showers, and 110-120 degrees at sinks.
L86	Required assessments concerning individual needs and abilities are completed in preparation for the ISP.	For five individuals, ISP assessments were not submitted to the DDS Area Office within the required timeframe. The agency needs to ensure that ISP assessments are submitted at least 15 days prior to ISP meetings.
L87	Support strategies necessary to assist an individual to meet their goals and objectives are completed and submitted as part of the ISP.	For four individuals, ISP support strategies were not submitted to the DDS Area Office within the required timeframe. The agency needs to ensure that ISP support strategies are submitted at least 15 days prior to ISP meetings.
L91	Incidents are reported and reviewed as mandated by regulation.	At 3 locations, Incident Reports were either not submitted or finalized with the required timeframes. The agency needs to ensure that Incident Reports are submitted and finalized within the required timeframes.

**Residential Commendations on Standards Met:**

<b>Indicator #</b>	<b>Indicator</b>	<b>Commendations</b>
L94 (05/22)	Individuals have assistive technology to maximize independence.	The agency is commended for its thorough process of assessing the assistive technology (AT) needs of individuals, and in obtaining and supporting the use of AT devices to increase the independence of those served. All individuals surveyed had received AT assessments, and many individuals were using devices, examples of which include a phone with pictures of family/friends, allowing individuals to push the picture instead of requiring staff to dial the phone for them. One individual was provided with a modified television remote control that allowed for independent use of the television, while another utilized a communication device controlled by his ear. Several individuals were found to be using the Alexa voice command device, allowing them to listen to music or gain further knowledge in a myriad of areas without needing staff to assist them. One individual used an iPad to organize his schedule and have visual phone calls with family members; another individual was supported to obtain books on tape from the Library of Congress. The use of these devices not only allowed individuals to explore and interact with the world around them, but to do it as independently as possible.

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

Indicator #	Indicator	Issue identified	Action planned to address
L87	Support strategies necessary to assist an individual to meet their goals and objectives are completed and submitted as part of the ISP.	Only 79% compliance was identified in this area.	The division will be provided with weekly reminders related to submission due dates vs monthly to ensure compliance with this indicator.

**Employment/Day Commendations on Standards Met:**

Indicator #	Indicator	Commendations
L54 (07/21)	Individuals have privacy when taking care of personal needs and discussing personal matters.	<p>The agency is commended for highly prioritizing individuals' right to privacy. This was evidenced through the design at one community based day (CBDS) program location which afforded privacy for personal conversations throughout the program, including offices and other private quiet areas.</p> <p>In particular, within this CBDS program there were two designated private booth spaces which can be used for personal phone calls/zoom calls without interruption. Bathroom spaces allowed for privacy with personal care through individual stall design.</p> <p>In Employment Supports, several individuals were noted to receive remote job coaching through the 'Life Sherpa' app, which afforded individuals privacy in receiving real time guidance, support and personal communication to support their success in positions of community based employment, which, without the use of the app may have been conducted in a more public manner.</p>

## **CERTIFICATION FINDINGS**

	<b>Reviewed By</b>	<b>Met / Rated</b>	<b>Not Met / Rated</b>	<b>% Met</b>
<b>Certification - Planning and Quality Management</b>	<b>DDS 0/0 Provider 6/6</b>	<b>6/6</b>	<b>0/6</b>	
<b>Residential and Individual Home Supports</b>	<b>DDS 18/18 Provider 61/61</b>	<b>79/79</b>	<b>0/79</b>	
ABI-MFP Residential Services	DDS	18/18	0/18	
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	
<b>Total</b>		<b>85/85</b>	<b>0/85</b>	<b>100%</b>
<b>Certified</b>				

	<b>Reviewed By</b>	<b>Met / Rated</b>	<b>Not Met / Rated</b>	<b>% Met</b>
<b>Certification - Planning and Quality Management</b>	<b>DDS 0/0 Provider 6/6</b>	<b>6/6</b>	<b>0/6</b>	
<b>Employment and Day Supports</b>	<b>DDS 2/2 Provider 34/34</b>	<b>36/36</b>	<b>0/36</b>	
Community Based Day Services	DDS 2/2 Provider 13/13	15/15	0/15	
Employment Support Services	DDS 0/0 Provider 21/21	21/21	0/21	
<b>Total</b>		<b>42/42</b>	<b>0/42</b>	<b>100%</b>
<b>Certified</b>				

## MASTER SCORE SHEET LICENSURE

Organizational: Northeast ARC

Indicator #	Indicator	Reviewed by	Met/Rated	Rating(Met,Not Met,NotRated)
Ⓡ L2	Abuse/neglect reporting	DDS	17/17	Met
L3	Immediate Action	Provider	-	Met
L4	Action taken	Provider	-	Met
L48	HRC	Provider	-	Met
L65	Restraint report submit	DDS	0/3	Not Met(0 % )
L66	HRC restraint review	Provider	-	Met
L74	Screen employees	Provider	-	Met
L75	Qualified staff	Provider	-	Met
L76	Track trainings	Provider	-	Met
L83	HR training	Provider	-	Met
L92 (07/21)	Licensed Sub-locations (e/d).	DDS	1/1	Met

### Residential and Individual Home Supports:

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L1	Abuse/neglect training	I	Provider	-	-	-		-	-	-	Met
L5	Safety Plan	L	Provider	-	-	-		-	-	-	Met
Ⓡ L6	Evacuation	L	DDS	7/7	3/3	4/4		1/1		15/15	Met
L7	Fire Drills	L	Provider	-	-	-		-	-	-	Met
L8	Emergency Fact Sheets	I	Provider	-	-	-		-	-	-	Met
L9 (07/21)	Safe use of equipment	I	DDS	7/7	3/3			3/3		13/13	Met
L10	Reduce risk interventions	I	Provider	-	-	-		-	-	-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
☑ L11	Required inspections	L	DDS	7/7	2/2	4/4		1/1		14/14	Met
☑ L12	Smoke detectors	L	DDS	7/7	1/2	4/4		1/1		13/14	Met (92.86 %)
☑ L13	Clean location	L	DDS	7/7	2/2	4/4		1/1		14/14	Met
L14	Site in good repair	L	Provider	-	-	-		-	-	-	Met
L15	Hot water	L	DDS	5/7	2/2	3/4				10/13	Not Met (76.92 %)
L16	Accessibility	L	Provider	-	-	-		-	-	-	Met
L17	Egress at grade	L	Provider	-	-	-		-	-	-	Met
L18	Above grade egress	L	Provider	-	-	-		-	-	-	Met
L19	Bedroom location	L	DDS			1/1				1/1	Met
L20	Exit doors	L	Provider	-	-	-		-	-	-	Met
L21	Safe electrical equipment	L	Provider	-	-	-		-	-	-	Met
L22	Well-maintained appliances	L	Provider	-	-	-		-	-	-	Met
L23	Egress door locks	L	DDS		2/2					2/2	Met
L24	Locked door access	L	DDS		2/2	4/4				6/6	Met
L25	Dangerous substances	L	Provider	-	-	-		-	-	-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L26	Walkway safety	L	Provider	-	-	-		-	-	-	Met
L27	Pools, hot tubs, etc.	L	Provider	-	-	-		-	-	-	Met
L28	Flammables	L	Provider	-	-	-		-	-	-	Met
L29	Rubbish /combustibles	L	Provider	-	-	-		-	-	-	Met
L30	Protective railings	L	Provider	-	-	-		-	-	-	Met
L31	Communication method	I	Provider	-	-	-		-	-	-	Met
L32	Verbal & written	I	Provider	-	-	-		-	-	-	Met
L33	Physical exam	I	Provider	-	-	-		-	-	-	Met
L34	Dental exam	I	Provider	-	-	-		-	-	-	Met
L35	Preventive screenings	I	Provider	-	-	-		-	-	-	Met
L36	Recommended tests	I	Provider	-	-	-		-	-	-	Met
L37	Prompt treatment	I	Provider	-	-	-		-	-	-	Met
Ⓡ L38	Physician's orders	I	DDS	5/6	0/1			3/3		8/10	Met (80.0 %)
L39	Dietary requirements	I	Provider	-	-	-		-	-	-	Met
L40	Nutritional food	L	Provider	-	-	-		-	-	-	Met
L41	Healthy diet	L	Provider	-	-	-		-	-	-	Met
L42	Physical activity	L	Provider	-	-	-		-	-	-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L43	Health Care Record	I	Provider	-	-	-		-	-	-	Met
L44	MAP registration	L	Provider	-	-	-		-	-	-	Met
L45	Medication storage	L	Provider	-	-	-		-	-	-	Met
Ⓡ L46	Med. Administration	I	DDS	5/5		5/5		3/3		13/13	Met
L47	Self medication	I	Provider	-	-	-		-	-	-	Met
L49	Informed of human rights	I	Provider	-	-	-		-	-	-	Met
L50 (07/21)	Respectful Comm.	I	DDS	7/7	3/3	5/5		3/3		18/18	Met
L51	Possessions	I	Provider	-	-	-		-	-	-	Met
L52	Phone calls	I	Provider	-	-	-		-	-	-	Met
L53	Visitation	I	Provider	-	-	-		-	-	-	Met
L54 (07/21)	Privacy	I	DDS	7/7	3/3	5/5		3/3		18/18	Met
L55	Informed consent	I	DDS	2/2	1/1	5/5		3/3		11/11	Met
L56	Restrictive practices	I	Provider	-	-	-		-	-	-	Met
L57	Written behavior plans	I	Provider	-	-	-		-	-	-	Met
L58	Behavior plan component	I	DDS					1/1		1/1	Met
L59	Behavior plan review	I	DDS					1/1		1/1	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L60	Data maintenance	I	Provider	-	-	-		-	-	-	Met
L61	Health protection in ISP	I	DDS	5/5	1/1	1/1		3/3		10/10	Met
L62	Health protection review	I	Provider	-	-	-		-	-	-	Met
L63	Med. treatment plan form	I	Provider	-	-	-		-	-	-	Met
L64	Med. treatment plan rev.	I	Provider	-	-	-		-	-	-	Met
L67	Money mgmt. plan	I	Provider	-	-	-		-	-	-	Met
L68	Funds expenditure	I	Provider	-	-	-		-	-	-	Met
L69	Expenditure tracking	I	Provider	-	-	-		-	-	-	Met
L70	Charges for care calc.	I	Provider	-	-	-		-	-	-	Met
L71	Charges for care appeal	I	Provider	-	-	-		-	-	-	Met
L77	Unique needs training	I	Provider	-	-	-		-	-	-	Met
L78	Restrictive Int. Training	L	Provider	-	-	-		-	-	-	Met
L79	Restraint training	L	Provider	-	-	-		-	-	-	Met
L80	Symptoms of illness	L	Provider	-	-	-		-	-	-	Met



Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L81	Medical emergency	L	Provider	-	-	-		-	-	-	Met
L82	Medication admin.	L	DDS	5/5				1/1		6/6	Met
L84	Health protect. Training	I	Provider	-	-	-		-	-	-	Met
L85	Supervision	L	Provider	-	-	-		-	-	-	Met
L86	Required assessments	I	DDS	4/6	2/3	5/5		1/3		12/17	Not Met (70.59 %)
L87	Support strategies	I	DDS	4/6	3/3	5/5		1/3		13/17	Not Met (76.47 %)
L88	Strategies implemented	I	Provider	-	-	-		-	-	-	Met
L89	Complaint and resolution process	L	Provider	-	-	-		-	-	-	Met
L90	Personal space/bedroom privacy	I	Provider	-	-	-		-	-	-	Met
L91	Incident management	L	DDS	4/7	3/3	4/4				11/14	Not Met (78.57 %)
L93 (05/22)	Emergency back-up plans	I	DDS	7/7	3/3	5/5		3/3		18/18	Met
L94 (05/22)	Assistive technology	I	DDS	7/7	3/3	5/5		3/3		18/18	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L96 (05/22)	Staff training in devices and applications	I	DDS	7/7	3/3	5/5		3/3		18/18	Met
L99 (05/22)	Medical monitoring devices	I	DDS					3/3		3/3	Met
#Std. Met/# 83 Indicator										79/83	
Total Score										88/93	
										94.62%	

#### Employment and Day Supports:

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L1	Abuse/neglect training	I	Provider		-	-	-	Met
L5	Safety Plan	L	Provider		-	-	-	Met
☞ L6	Evacuation	L	DDS			2/2	2/2	Met
L7	Fire Drills	L	Provider		-	-	-	Met
L8	Emergency Fact Sheets	I	Provider		-	-	-	Met
L9 (07/21)	Safe use of equipment	I	DDS	9/9		9/9	18/18	Met
L10	Reduce risk interventions	I	Provider		-	-	-	Met
☞ L11	Required inspections	L	DDS			2/2	2/2	Met
☞ L12	Smoke detectors	L	DDS			2/2	2/2	Met
☞ L13	Clean location	L	DDS			2/2	2/2	Met

<b>Ind. #</b>	<b>Ind.</b>	<b>Loc. or Indiv.</b>	<b>Reviewed by</b>	<b>Emp. Sup.</b>	<b>Cent. Based Work</b>	<b>Com. Based Day</b>	<b>Total Met / Rated</b>	<b>Rating</b>
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	Provider		-	-	-	Met
L30	Protective railings	L	Provider		-	-	-	Met
L31	Communication method	I	Provider		-	-	-	Met
L32	Verbal & written	I	Provider		-	-	-	Met
L37	Prompt treatment	I	Provider		-	-	-	Met
Ⓡ L38	Physician's orders	I	DDS			1/1	1/1	Met
L39	Dietary requirements	I	Provider		-	-	-	Met
L44	MAP registration	L	Provider		-	-	-	Met
L45	Medication storage	L	Provider		-	-	-	Met
Ⓡ L46	Med. Administration	I	DDS			1/1	1/1	Met

<b>Ind. #</b>	<b>Ind.</b>	<b>Loc. or Indiv.</b>	<b>Reviewed by</b>	<b>Emp. Sup.</b>	<b>Cent. Based Work</b>	<b>Com. Based Day</b>	<b>Total Met / Rated</b>	<b>Rating</b>
L49	Informed of human rights	I	Provider		-	-	-	Met
L50 (07/21)	Respectful Comm.	I	DDS	9/9		9/9	18/18	Met
L51	Possessions	I	Provider		-	-	-	Met
L52	Phone calls	I	Provider		-	-	-	Met
L54 (07/21)	Privacy	I	DDS	9/9		9/9	18/18	Met
L55	Informed consent	I	Provider		-	-	-	Met
L56	Restrictive practices	I	Provider		-	-	-	Met
L57	Written behavior plans	I	Provider		-	-	-	Met
L58	Behavior plan component	I	Provider		-	-	-	Met
L59	Behavior plan review	I	Provider		-	-	-	Met
L60	Data maintenance	I	Provider		-	-	-	Met
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
L67	Money mgmt. plan	I	Provider		-	-	-	Met
L68	Funds expenditure	I	Provider		-	-	-	Met
L69	Expenditure tracking	I	Provider		-	-	-	Met
L72	DOL requirements	I	Provider		-	-	-	Met
L73	DOL certificate	L	Provider		-	-	-	Met
L77	Unique needs training	I	Provider		-	-	-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L78	Restrictive Int. Training	L	Provider		-	-	-	Met
L79	Restraint training	L	Provider		-	-	-	Met
L80	Symptoms of illness	L	Provider		-	-	-	Met
L81	Medical emergency	L	Provider		-	-	-	Met
☐ L82	Medication admin.	L	DDS			1/1	1/1	Met
L84	Health protect. Training	I	Provider		-	-	-	Met
L85	Supervision	L	Provider		-	-	-	Met
L86	Required assessments	I	Provider		-	-	-	Met
L87	Support strategies	I	Provider		-	-	-	Not Met
L88	Strategies implemented	I	Provider		-	-	-	Met
L91	Incident management	L	Provider		-	-	-	Met
L93 (05/22)	Emergency back-up plans	I	DDS	9/9		9/9	18/18	Met
L94 (05/22)	Assistive technology	I	DDS	9/9		9/9	18/18	Met
L96 (05/22)	Staff training in devices and applications	I	DDS	8/8		9/9	17/17	Met
L99 (05/22)	Medical monitoring devices	I	DDS	1/1			1/1	Met
<b>#Std. Met/# 68 Indicator</b>							<b>67/68</b>	
<b>Total Score</b>							<b>77/79</b>	
							<b>97.47%</b>	

## MASTER SCORE SHEET CERTIFICATION

### Certification - Planning and Quality Management

	Indicator #	Indicator	Reviewed By	Met/Rated	Rating
	C1	Provider data collection	Provider	-	<b>Met</b>
	C2	Data analysis	Provider	-	<b>Met</b>
	C3	Service satisfaction	Provider	-	<b>Met</b>
	C4	Utilizes input from stakeholders	Provider	-	<b>Met</b>
	C5	Measure progress	Provider	-	<b>Met</b>
	C6	Future directions planning	Provider	-	<b>Met</b>

### Residential Services

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

**Residential Services**

<b>Indicator #</b>	<b>Indicator</b>	<b>Reviewed By</b>	<b>Met/Rated</b>	<b>Rating</b>
C52	Leisure activities and free-time choices /control	Provider	-	<b>Met</b>
C53	Food/ dining choices	Provider	-	<b>Met</b>

**ABI-MFP Residential Services**

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

**Placement Services**

<b>Indicator #</b>	<b>Indicator</b>	<b>Reviewed By</b>	<b>Met/Rated</b>	<b>Rating</b>
C7	Feedback on staff / care provider performance	Provider	-	<b>Met</b>
C8	Family/guardian communication	Provider	-	<b>Met</b>
C9	Personal relationships	Provider	-	<b>Met</b>
C10	Social skill development	Provider	-	<b>Met</b>

## Placement Services

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

## Individual Home Supports

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C7	Feedback on staff / care provider performance	Provider	-	<b>Met</b>
C8	Family/guardian communication	Provider	-	<b>Met</b>
C9	Personal relationships	Provider	-	<b>Met</b>
C10	Social skill development	Provider	-	<b>Met</b>
C11	Get together w/family & friends	Provider	-	<b>Met</b>
C12	Intimacy	Provider	-	<b>Met</b>
C13	Skills to maximize independence	Provider	-	<b>Met</b>
C14	Choices in routines & schedules	Provider	-	<b>Met</b>
C15	Personalize living space	Provider	-	<b>Met</b>



### Individual Home Supports

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

### Community Based Day Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C7	Feedback on staff / care provider performance	Provider	-	<b>Met</b>
C8	Family/guardian communication	Provider	-	<b>Met</b>
C13	Skills to maximize independence	Provider	-	<b>Met</b>
C37	Interpersonal skills for work	Provider	-	<b>Met</b>
C38 (07/21)	Habilitative & behavioral goals	DDS	9/9	<b>Met</b>
C39 (07/21)	Support needs for employment	DDS	9/9	<b>Met</b>
C40	Community involvement interest	Provider	-	<b>Met</b>
C41	Activities participation	Provider	-	<b>Met</b>
C42	Connection to others	Provider	-	<b>Met</b>
C43	Maintain & enhance relationship	Provider	-	<b>Met</b>
C44	Job exploration	Provider	-	<b>Met</b>
C45	Revisit decisions	Provider	-	<b>Met</b>
C46	Use of generic resources	Provider	-	<b>Met</b>

### Community Based Day Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C47	Transportation to/ from community	Provider	-	<b>Met</b>
C51	Ongoing satisfaction with services/ supports	Provider	-	<b>Met</b>

### Employment Support Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C7	Feedback on staff / care provider performance	Provider	-	<b>Met</b>
C8	Family/guardian communication	Provider	-	<b>Met</b>
C22	Explore job interests	Provider	-	<b>Met</b>
C23	Assess skills & training needs	Provider	-	<b>Met</b>
C24	Job goals & support needs plan	Provider	-	<b>Met</b>
C25	Skill development	Provider	-	<b>Met</b>
C26	Benefits analysis	Provider	-	<b>Met</b>
C27	Job benefit education	Provider	-	<b>Met</b>
C28	Relationships w/businesses	Provider	-	<b>Met</b>
C29	Support to obtain employment	Provider	-	<b>Met</b>
C30	Work in integrated settings	Provider	-	<b>Met</b>
C31	Job accommodations	Provider	-	<b>Met</b>
C32	At least minimum wages earned	Provider	-	<b>Met</b>
C33	Employee benefits explained	Provider	-	<b>Met</b>
C34	Support to promote success	Provider	-	<b>Met</b>
C35	Feedback on job performance	Provider	-	<b>Met</b>
C36	Supports to enhance retention	Provider	-	<b>Met</b>
C37	Interpersonal skills for work	Provider	-	<b>Met</b>
C47	Transportation to/ from community	Provider	-	<b>Met</b>
C50	Involvement/ part of the Workplace culture	Provider	-	<b>Met</b>

**Employment Support Services**

<b>Indicator #</b>	<b>Indicator</b>	<b>Reviewed By</b>	<b>Met/Rated</b>	<b>Rating</b>
C51	Ongoing satisfaction with services/ supports	Provider	-	<b>Met</b>