



**PROVIDER REPORT
FOR**

**Open Sky Community
Services
50 Douglas Rd
Whitinsville, MA 01588**

February 18, 2026

Version

Public Provider Report

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

SUMMARY OF OVERALL FINDINGS

Provider Open Sky Community Services

Review Dates 1/13/2026 - 1/21/2026

Service Enhancement Meeting Date 2/4/2026

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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	22 location (s) 24 audit (s)	Full Review	85/91 2 Year License 02/04/2026 - 02/04/2028		80 / 87 Certified 02/04/2026 - 02/04/2028
Residential Services	9 location(s) 9 audit (s)			Full Review	16 / 20
ABI-MFP Residential Services	1 location(s) 3 audit (s)			Full Review	17 / 20
Placement Services	10 location (s) 10 audit (s)			Full Review	20 / 20
Individual Home Supports	2 location(s) 2 audit (s)			Full Review	21 / 21
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	8 location(s) 16 audit (s)	Full Review	58/64 2 Year License 02/04/2026 - 02/04/2028		Certified 02/04/2026 - 02/04/2028
Community Based Day Services	4 location(s) 9 audit (s)			Deemed	
Employment Support Services	4 location(s) 7 audit (s)			Deemed	
Planning and Quality Management (For all service groupings)				Full Review	6 / 6

EXECUTIVE SUMMARY :

Open Sky Community Services (Open Sky) is a not-for-profit human services agency based in Central Massachusetts; the agency offers various services and supports to adults with Intellectual and Developmental Disabilities (ID/DD), Autism-Spectrum-Disorder (ASD), and Acquired Brain Injury (ABI). The agency also provides services to LGBTQIA+ youth, homeless individuals, as well as behavioral support services to different age ranges.

For this 2026 Department of Developmental Services (DDS) survey, the DDS Metro Office of Quality Enhancement (OQE) conducted a full licensing and certification survey of Open Sky's Residential Services and a full licensing review of Day and Employment Services. As the agency's Day and Employment Services are accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), it elected to use the results of its CARF review to meet certification requirements for this service grouping. OQE reviewed the agency's organizational systems, twenty-four-hour Residential Services, twenty-four-hour ABI Residential Services, Placement Services, Individual Home Supports, Community Based Day Supports (CBDS), Group Supported Employment Supports, and Employment Supports.

The results of this survey yielded many positive results. At the organizational level, in the area of licensing, Open Sky had a fully constituted Human Rights Committee that met quarterly and fulfilled its regulatory responsibilities. The organizational system related to allegations of abuse and neglect was effective; the agency reported allegations as mandated, and it implemented immediate actions to protect individuals for whom allegations of abuse and neglect were made. Agency staff completed DDS mandatory trainings, and newly hired staff were qualified for their positions.

Relative to certification at the organizational level, Open Sky extended its strategic plan for an additional year and retained its service goal of whole-person health as it relates to service delivery; diversity, equity, inclusion, and belonging; employee care and engagement; and planful growth and infrastructure. The agency routinely collected and analyzed internal and external data, including feedback from its stakeholders. Agency staff regularly identified trends and adjusted strategies, as needed, to further increase the quality of services provided to individuals.

Open Sky demonstrated effective strategies to meet residential licensing standards. Homes visited were clean, well-maintained, and safe. All residential locations visited had current inspections, functioning smoke and carbon monoxide detectors in proper locations, and approved emergency evacuation safety plans. The agency trained staff and individuals on evacuation strategies and emergency situations,

The agency's oversight system for ensuring individuals' optimal health was largely effective. The agency supported most individuals to receive annual physical and dental exams and consistently administered medication according to physicians' orders. Individuals who experienced episodic illnesses or minor injuries received prompt medical evaluation and treatment. For individuals requiring specialty diets, staff were trained and knowledgeable about individuals' dietary needs and ensured that diet recommendations were followed. Additionally, individuals were supported to eat a healthy diet and were encouraged to engage in regular physical activity.

Open Sky employed positive practices to promote individuals' human rights. Individuals and guardians were provided with information about human rights, how to report allegations of abuse and neglect, and the agency's grievance policy. Individuals interviewed as part of this review reported that they would feel comfortable talking to staff about any concerns and confident that they would receive support to resolve any issues. Staff interactions with individuals were observed to be respectful.

In the area of certification, residential locations blended naturally with their neighborhoods and the interior common areas and bedrooms were decorated in accordance with individuals' personal tastes.

Observations and interviews confirmed that staff empowered individuals subject to this review to make choices throughout the day about their household routines, leisure activities, and meals. Staff also supported individuals to increase their independence using verbal instruction, visual cues, and when indicated, assistive technology.

Relative to licensing for Day and Employment Services, Open Sky's practices for ensuring environmental and personal safety were effective. Locations surveyed were clean, in good repair, and had current inspections. Staff and individuals received monthly training on various topics, including the emergency evacuation safety plan, weather emergencies, and workplace violence. The agency developed individual emergency back up plans of which individuals and staff were aware.

Open Sky's oversight of individuals' healthcare needs within Day and Employment Services yielded positive findings. Staff were trained and aware of what to do in a medical emergency and how to obtain care for individuals experiencing episodic medical conditions. Medications were stored in accordance with Medication Administration Program (MAP) requirements, and staff administered medications consistent with doctors' orders. For individuals diagnosed with significant medical conditions, staff were trained and knowledgeable about individuals' health care protocols and implemented them consistently as written.

In addition to these positive findings, several areas were identified for the agency to further focus its attention. Organizationally, the agency should complete and finalize restraint reports within DDS required timelines.

Relative to residential licensing, the agency should confirm that water temperatures test within the required range and must ensure that individuals receive routine and preventative screenings consistent with their age and sex and that health care records are current and updated as required. It also should ensure that staff are correctly implementing instructions for the cleaning and maintenance of individuals' health-related supports.

must ensure that individuals receive routine and preventative screenings consistent with their age and sex and that health care records are current and updated as required. It also should ensure that staff are correctly implementing instructions for the cleaning and maintenance of individuals' health-related supports and medical monitoring devices.

Relative to Day and Employment services licensing, the agency must submit ISP assessments and support strategies at least fifteen days prior to individuals' ISP meetings and agreed upon support strategies need to be implemented consistently. Regular data collection is required for individuals' support strategies and all target behaviors identified in medication treatment plans. When an individual has a special dietary need, the agency should have written information about the dietary requirements and provide training for staff.

As a result of this licensing and certification survey, Open Sky's Residential Service Group received an overall score of 93% of licensure indicators met. The agency will receive a Two-Year License for Residential Services. This service group is Certified with an overall score of 92% of certification indicators met.

Open Sky's Day and Employment Service Group received an overall score of 91% of licensure indicators met. The agency will receive a Two-Year License for Residential Services.

For both Residential and Day and Employment Services groupings, Open Sky will complete follow-up on licensing indicators not met during the survey and will submit their results to OQE within 60 days following the Service Enhancement Meeting.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	9/10	1/10	
Residential and Individual Home Supports	76/81	5/81	
Residential Services Individual Home Supports Placement Services ABI-MFP Residential Services			
Critical Indicators	8/8	0/8	
Total	85/91	6/91	93%
2 Year License			
# indicators for 60 Day Follow-up		6	

	Met / Rated	Not Met / Rated	% Met
Organizational	9/10	1/10	
Employment and Day Supports	49/54	5/54	
Community Based Day Services Employment Support Services			
Critical Indicators	8/8	0/8	
Total	58/64	6/64	91%
2 Year License			
# indicators for 60 Day Follow-up		6	

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

Indicator #	Indicator	Area Needing Improvement
L65	Restraint reports are submitted within required timelines.	Seven of seventeen restraint reports were not submitted within DDS timelines. The agency needs to ensure that restraint reports are created within three calendar days of a physical restraint and are finalized within five calendar days.

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

Indicator #	Indicator	Area Needing Improvement
L15	Hot water temperature tests between 110 and 120 degrees (as of 1/2014).	At six of twenty locations, the water temperature tested outside of the required parameters. The agency needs to ensure that water temperatures are consistently maintained within the required parameters.
L35	Individuals receive routine preventive screenings.	Ten of twenty-three individuals had not received routine and preventative screenings. The agency needs to ensure that individuals receive preventive health screenings in accordance with their age and sex.
L43	The health care record is maintained and updated as required.	Seven of twenty-four Health Care Records were not updated and maintained as required. The agency needs to ensure Health Care Records are maintained and updated as required.
L84	Staff / care providers are trained in the correct utilization of health related protections per regulation.	For four of sixteen individuals who used health-related devices, staff were not trained in the proper use, care, and cleaning of the equipment or were not correctly following instructions as trained for the proper care and maintenance of the devices. The agency needs to ensure that staff are trained in the safe use, application, proper care, and cleaning of health-related devices and are correctly following instructions as trained to make sure devices are safe, clean, and well-maintained.
L99 (05/22)	Medical monitoring devices needed for health and safety are authorized, agreed to, used and data collected appropriately. (eg seizure watches; fall sensors).	For two of five individuals, the agency did not demonstrate that specific instructions for the care and maintenance of medical monitoring devices were being followed. When individuals require the use of medical monitoring devices, the agency needs to ensure that these devices are cleaned and maintained in accordance with the authorized instructions.

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

Indicator #	Indicator	Area Needing Improvement
L39	Special dietary requirements are followed.	One individual had a diagnosis which indicated they should be supported to adhere to special dietary considerations without clear written instructions for support staff to follow regarding this topic. The agency needs to ensure that when medical conditions exist requiring special dietary considerations, clear recommendations from a medical professional are obtained for the purpose of developing written guidelines and training staff.

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

Indicator #	Indicator	Area Needing Improvement
L63	Medication treatment plans are in written format with required components.	For one of three individuals, the agency did not track all target behaviors identified in the medication treatment plan. The agency needs to ensure that medication treatment plans are developed where necessary and contain all required components, inclusive of ensuring that data for all target behaviors identified in the medication treatment plans are collected.
L86	Required assessments concerning individual needs and abilities are completed in preparation for the ISP.	For four of twelve individuals, the agency did not submit ISP assessments within DDS timelines. The agency needs to ensure that ISP assessments are submitted to DDS fifteen 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.	For four of twelve individuals, the agency did not submit their support strategies within DDS timelines. The agency needs to ensure that support strategies are submitted to DDS fifteen days prior to the ISP.
L88	Services and support strategies identified and agreed upon in the ISP for which the provider has designated responsibility are being implemented.	For six of sixteen individuals, their ISP objectives were not implemented as designed. The agency needs to ensure that individuals' ISP objectives are implemented in accordance with their provider support strategies and that data are consistently collected on individuals' progress toward personal goal accomplishment.

CERTIFICATION FINDINGS

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	6/6	0/6	
Residential and Individual Home Supports	74/81	7/81	
ABI-MFP Residential Services	17/20	3/20	
Placement Services	20/20	0/20	
Individual Home Supports	21/21	0/21	
Residential Services	16/20	4/20	
Total	80/87	7/87	92%
Certified			

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	6/6	0/6	
Employment and Day Supports			
Total			
Certified			

ABI-MFP 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.	All three individuals did not have the opportunity to provide input on the hiring or ongoing performance evaluation of the staff who support them. The agency needs to develop mechanisms for incorporating individuals' input into the process of hiring and evaluating the staff who support them.

ABI-MFP Residential Services- Areas Needing Improvement on Standards not met:

Indicator #	Indicator	Area Needing Improvement
C9	Staff (Home Providers) act as bridge builders and provide opportunities to develop, and/or increase personal relationships and social contacts.	Two of nine individuals were not provided regular opportunities to develop and/or increase personal relationships and social contacts. The agency must support individuals to maintain existing relationships as well as provide support for individuals to socialize with people as a means to potentially develop new relationships.
C16	Staff (Home Providers) support individuals to explore, discover and connect with their interests for cultural, social, recreational and spiritual activities.	Two of three individuals were not supported to explore and connect with their interests in integrated social and recreational activities. The agency needs to support all individuals to explore integrated social, cultural, recreational, and spiritual activities of interest to them.
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.	Four of nine individuals did not have the opportunity to provide input on the hiring or ongoing performance evaluation of the staff who support them. The agency needs to develop mechanisms for incorporating individuals' input into the process of hiring and evaluating the staff who support them.
C9	Staff (Home Providers) act as bridge builders and provide opportunities to develop, and/or increase personal relationships and social contacts.	Two of nine individuals were not provided with regular opportunities to develop and/or increase personal relationships and social contacts. The agency must support individuals to maintain existing relationships as well as provide support for individuals to socialize with people to potentially develop new relationships.
C12	Individuals are supported to explore, define, and express their need for intimacy and companionship.	For five of nine individuals, interests and need for support and education in the areas of intimacy, sexuality, or companionship had not been assessed. The agency needs to ensure that all individuals have been assessed for their support needs in the areas of intimacy, sexuality, and companionship, and that support, education, and training are provided based on these assessments.

ABI-MFP Residential Services- Areas Needing Improvement on Standards not met:

Indicator #	Indicator	Area Needing Improvement
C16	Staff (Home Providers) support individuals to explore, discover and connect with their interests for cultural, social, recreational and spiritual activities.	Two of nine individuals were not supported to explore and connect with their interests in integrated social and recreational activities. The agency needs to support all individuals to explore integrated social, cultural, recreational, and spiritual activities of interest to them.

MASTER SCORE SHEET LICENSURE

Organizational: Open Sky Community Services

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
L2	Abuse/neglect reporting	27/27	Met
L3	Immediate Action	14/14	Met
L4	Action taken	29/34	Met(85.29 %)
L48	HRC	1/1	Met
L65	Restraint report submit	10/17	Not Met(58.82 %)
L66	HRC restraint review	16/16	Met
L74	Screen employees	8/8	Met
L75	Qualified staff	4/4	Met
L76	Track trainings	20/20	Met
L83	HR training	20/20	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	8/9	2/2	10/10		3/3		23/24	Met (95.83%)
L5	Safety Plan	L	9/9	2/2	10/10		1/1		22/22	Met
℞ L6	Evacuation	L	9/9	2/2	10/10		1/1		22/22	Met
L7	Fire Drills	L	7/9				1/1		8/10	Met (80.0%)
L8	Emergency Fact Sheets	I	9/9	2/2	10/10		1/3		22/24	Met (91.67%)
L9 (07/21)	Safe use of equipment	I	9/9	2/2			3/3		14/14	Met
L10	Reduce risk interventions	I	4/4		1/1				5/5	Met
℞ L11	Required inspections	L	9/9		10/10		1/1		20/20	Met
℞ L12	Smoke detectors	L	9/9		10/10		1/1		20/20	Met
℞ L13	Clean location	L	8/9		10/10		1/1		19/20	Met (95.00%)
L14	Site in good repair	L	9/9		10/10				19/19	Met
L15	Hot water	L	7/9		6/10		1/1		14/20	Not Met (70.0%)
L16	Accessibility	L	8/8		8/8		1/1		17/17	Met
L17	Egress at grade	L	9/9		10/10		1/1		20/20	Met

Ind. #	Ind.	Loc. or Individ.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L18	Above grade egress	L	6/6		1/1				7/7	Met
L19	Bedroom location	L	7/7		5/5		1/1		13/13	Met
L20	Exit doors	L	9/9				1/1		10/10	Met
L21	Safe electrical equipment	L	9/9		10/10		1/1		20/20	Met
L22	Well-maintained appliances	L	9/9		3/3		1/1		13/13	Met
L23	Egress door locks	L	4/4				1/1		5/5	Met
L24	Locked door access	L	7/9		10/10				17/19	Met (89.47%)
L25	Dangerous substances	L	9/9				1/1		10/10	Met
L26	Walkway safety	L	8/9		10/10		1/1		19/20	Met (95.00%)
L27	Pools, hot tubs, etc.	L		1/1					1/1	Met
L28	Flammables	L	7/7				1/1		8/8	Met
L29	Rubbish/combustibles	L	9/9		10/10		1/1		20/20	Met
L30	Protective railings	L	9/9	1/1	10/10		1/1		21/21	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L31	Communication method	I	9/9	2/2	10/10		3/3		24/24	Met
L32	Verbal & written	I	9/9	2/2	10/10		3/3		24/24	Met
L33	Physical exam	I	8/9	1/1	8/10		3/3		20/23	Met (86.96%)
L34	Dental exam	I	9/9	1/1	8/10		2/3		20/23	Met (86.96%)
L35	Preventive screenings	I	5/8	1/1	6/10		1/3		13/22	Not Met (59.09%)
L36	Recommended tests	I	9/9	2/2	9/10		1/3		21/24	Met (87.50%)
L37	Prompt treatment	I	9/9	2/2	10/10		3/3		24/24	Met
L38	Physician's orders	I	9/9		8/8		2/3		19/20	Met (95.00%)
L39	Dietary requirements	I	5/5		3/3		1/1		9/9	Met
L40	Nutritional food	L	9/9	2/2			1/1		12/12	Met
L41	Healthy diet	L	9/9	2/2	10/10		1/1		22/22	Met
L42	Physical activity	L	9/9	2/2	10/10		1/1		22/22	Met
L43	Health Care Record	I	7/9	1/2	8/10		1/3		17/24	Not Met (70.83%)
L44	MAP registration	L	9/9				1/1		10/10	Met
L45	Medication storage	L	9/9				1/1		10/10	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L46	Med. Administration	I	9/9		8/8		3/3		20/20	Met
L47	Self medication	I	1/1	1/1	2/2		2/2		6/6	Met
L49	Informed of human rights	I	8/9	2/2	10/10		3/3		23/24	Met (95.83%)
L50 (07/21)	Respectful Comm.	I	9/9	2/2	10/10		3/3		24/24	Met
L51	Possessions	I	9/9	2/2	10/10		3/3		24/24	Met
L52	Phone calls	I	9/9	2/2	10/10		3/3		24/24	Met
L53	Visitation	I	9/9	2/2	10/10		3/3		24/24	Met
L54 (07/21)	Privacy	I	8/9	2/2	10/10		3/3		23/24	Met (95.83%)
L55	Informed consent	I					1/1		1/1	Met
L56	Restrictive practices	I	6/6		1/1				7/7	Met
L57	Written behavior plans	I	9/9		1/1				10/10	Met
L60	Data maintenance	I	9/9		1/1				10/10	Met
L61	Health protection in ISP	I	7/8	1/1	4/4		3/3		15/16	Met (93.75%)
L62	Health protection review	I		1/1			1/1		2/2	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L63	Med. treatment plan form	I	7/9		8/8		3/3		18/20	Met (90.0%)
L64	Med. treatment plan rev.	I	7/9		8/8		3/3		18/20	Met (90.0%)
L67	Money mgmt. plan	I	8/8	1/1	8/8		1/1		18/18	Met
L68	Funds expenditure	I	8/8	1/1	7/7		1/1		17/17	Met
L69	Expenditure tracking	I	6/8	1/1	6/7		1/1		14/17	Met (82.35%)
L70	Charges for care calc.	I	8/9		9/10		2/3		19/22	Met (86.36%)
L71	Charges for care appeal	I	9/9		8/10		2/3		19/22	Met (86.36%)
L77	Unique needs training	I	9/9	1/1	10/10		3/3		23/23	Met
L78	Restrictive Int. Training	L	7/7		1/1				8/8	Met
L79	Restraining training	L	6/6						6/6	Met
L80	Symptoms of illness	L	9/9	2/2	10/10		1/1		22/22	Met
L81	Medical emergency	L	9/9	2/2	10/10		1/1		22/22	Met
L82	Medication admin.	L	8/9				1/1		9/10	Met (90.0%)
L84	Health protect. Training	I	7/8	1/1	4/4		0/3		12/16	Not Met (75.00%)

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L85	Supervision	L	9/9	2/2	10/10		0/1		21/22	Met (95.45%)
L86	Required assessments	I	6/6	1/2	6/6		1/1		14/15	Met (93.33%)
L87	Support strategies	I	7/7	1/2	4/6		1/1		13/16	Met (81.25%)
L88	Strategies implemented	I	8/9	2/2	10/10		0/3		20/24	Met (83.33%)
L89	Complaint and resolution process	L					1/1		1/1	Met
L90	Personal space/bedroom privacy	I	7/9	2/2	10/10		3/3		22/24	Met (91.67%)
L91	Incident management	L	6/9	2/2	9/10		1/1		18/22	Met (81.82%)
L93 (05/22)	Emergency back-up plans	I	9/9	2/2	10/10		3/3		24/24	Met
L94 (05/22)	Assistive technology	I	8/9	2/2	9/10		2/3		21/24	Met (87.50%)
L96 (05/22)	Staff training in devices and applications	I	6/6	2/2	5/5		2/2		15/15	Met

Ind. #	Ind.	Loc. or Individ.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L99 (05/22)	Medical monitoring devices	I	1/1		1/1		1/3		3/5	Not Met (60.0%)
#Std. Met/#									76/81	
Indicator										
Total Score									85/91	
									93.41%	

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	7/7		9/9	16/16	Met
L5	Safety Plan	L			4/4	4/4	Met
℞ L6	Evacuation	L			4/4	4/4	Met
L7	Fire Drills	L			4/4	4/4	Met
L8	Emergency Fact Sheets	I	7/7		9/9	16/16	Met
L9 (07/21)	Safe use of equipment	I	7/7		9/9	16/16	Met
℞ L11	Required inspections	L			4/4	4/4	Met
℞ L12	Smoke detectors	L			4/4	4/4	Met
℞ L13	Clean location	L			4/4	4/4	Met
L14	Site in good repair	L			4/4	4/4	Met
L15	Hot water	L			4/4	4/4	Met
L16	Accessibility	L			4/4	4/4	Met
L17	Egress at grade	L			4/4	4/4	Met

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L18	Above grade egress	L			1/1	1/1	Met
L20	Exit doors	L			4/4	4/4	Met
L21	Safe electrical equipment	L			4/4	4/4	Met
L22	Well-maintained appliances	L			4/4	4/4	Met
L25	Dangerous substances	L			3/3	3/3	Met
L26	Walkway safety	L			4/4	4/4	Met
L28	Flammables	L			4/4	4/4	Met
L29	Rubbish/combustibles	L			4/4	4/4	Met
L30	Protective railings	L			3/3	3/3	Met
L31	Communication method	I	7/7		9/9	16/16	Met
L32	Verbal & written	I	7/7		9/9	16/16	Met
L37	Prompt treatment	I	7/7		9/9	16/16	Met
℞ L38	Physician's orders	I			8/8	8/8	Met
L39	Dietary requirements	I			0/1	0/1	Not Met (0 %)
L44	MAP registration	L	3/3		4/4	7/7	Met
L45	Medication storage	L	3/3		4/4	7/7	Met
℞ L46	Med. Administration	I	2/2		4/4	6/6	Met
L49	Informed of human rights	I	6/6		9/9	15/15	Met
L50 (07/21)	Respectful Comm.	I	7/7		9/9	16/16	Met
L51	Possessions	I	7/7		9/9	16/16	Met
L52	Phone calls	I	7/7		9/9	16/16	Met
L54 (07/21)	Privacy	I	7/7		9/9	16/16	Met

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L57	Written behavior plans	I			5/5	5/5	Met
L60	Data maintenance	I			5/5	5/5	Met
L61	Health protection in ISP	I			1/1	1/1	Met
L63	Med. treatment plan form	I	1/1		1/2	2/3	Not Met (66.67 %)
L64	Med. treatment plan rev.	I			1/1	1/1	Met
L77	Unique needs training	I	7/7		9/9	16/16	Met
L79	Restraint training	L	3/3		3/3	6/6	Met
L80	Symptoms of illness	L	4/4		4/4	8/8	Met
L81	Medical emergency	L	4/4		4/4	8/8	Met
L82	Medication admin.	L	2/2		4/4	6/6	Met
L84	Health protect. Training	I			1/1	1/1	Met
L85	Supervision	L	4/4		4/4	8/8	Met
L86	Required assessments	I	2/5		6/7	8/12	Not Met (66.67 %)
L87	Support strategies	I	3/5		5/7	8/12	Not Met (66.67 %)
L88	Strategies implemented	I	5/7		5/9	10/16	Not Met (62.50 %)
L91	Incident management	L	4/4		4/4	8/8	Met
L93 (05/22)	Emergency back-up plans	I	7/7		9/9	16/16	Met
L94 (05/22)	Assistive technology	I	7/7		8/9	15/16	Met (93.75 %)

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L96 (05/22)	Staff training in devices and applications	I	4/4		3/3	7/7	Met
#Std. Met/# 54 Indicator						49/54	
Total Score						58/64	
						90.62%	

MASTER SCORE SHEET CERTIFICATION

Certification - Planning and Quality Management

Indicator #	Indicator	Met/Rated	Rating
C1	Provider data collection	1/1	Met
C2	Data analysis	1/1	Met
C3	Service satisfaction	1/1	Met
C4	Utilizes input from stakeholders	1/1	Met
C5	Measure progress	1/1	Met
C6	Future directions planning	1/1	Met

Residential Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	5/9	Not Met (55.56 %)
C8	Family/guardian communication	9/9	Met
C9	Personal relationships	7/9	Not Met (77.78 %)
C10	Social skill development	9/9	Met
C11	Get together w/family & friends	9/9	Met
C12	Intimacy	4/9	Not Met (44.44 %)
C13	Skills to maximize independence	9/9	Met
C14	Choices in routines & schedules	9/9	Met
C15	Personalize living space	9/9	Met
C16	Explore interests	7/9	Not Met (77.78 %)

Residential Services

Indicator #	Indicator	Met/Rated	Rating
C17	Community activities	9/9	Met
C18	Purchase personal belongings	9/9	Met
C19	Knowledgeable decisions	9/9	Met
C46	Use of generic resources	9/9	Met
C47	Transportation to/ from community	9/9	Met
C48	Neighborhood connections	9/9	Met
C49	Physical setting is consistent	9/9	Met
C51	Ongoing satisfaction with services/ supports	9/9	Met
C52	Leisure activities and free-time choices /control	9/9	Met
C53	Food/ dining choices	9/9	Met

ABI-MFP Residential Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	0/3	Not Met (0 %)
C8	Family/guardian communication	3/3	Met
C9	Personal relationships	2/3	Not Met (66.67 %)
C10	Social skill development	3/3	Met
C11	Get together w/family & friends	3/3	Met
C12	Intimacy	3/3	Met
C13	Skills to maximize independence	3/3	Met
C14	Choices in routines & schedules	3/3	Met
C15	Personalize living space	1/1	Met
C16	Explore interests	1/3	Not Met (33.33 %)
C17	Community activities	3/3	Met
C18	Purchase personal belongings	3/3	Met
C19	Knowledgeable decisions	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	1/1	Met

ABI-MFP Residential Services

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

Placement Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	10/10	Met
C8	Family/guardian communication	10/10	Met
C9	Personal relationships	10/10	Met
C10	Social skill development	10/10	Met
C11	Get together w/family & friends	10/10	Met
C12	Intimacy	8/10	Met (80.0 %)
C13	Skills to maximize independence	10/10	Met
C14	Choices in routines & schedules	10/10	Met
C15	Personalize living space	10/10	Met
C16	Explore interests	9/10	Met (90.0 %)
C17	Community activities	10/10	Met
C18	Purchase personal belongings	10/10	Met
C19	Knowledgeable decisions	10/10	Met
C46	Use of generic resources	10/10	Met
C47	Transportation to/ from community	10/10	Met
C48	Neighborhood connections	10/10	Met
C49	Physical setting is consistent	10/10	Met
C51	Ongoing satisfaction with services/ supports	10/10	Met
C52	Leisure activities and free-time choices /control	10/10	Met
C53	Food/ dining choices	10/10	Met

Individual Home Supports

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	2/2	Met
C8	Family/guardian communication	2/2	Met
C9	Personal relationships	2/2	Met
C10	Social skill development	2/2	Met
C11	Get together w/family & friends	2/2	Met
C12	Intimacy	2/2	Met
C13	Skills to maximize independence	2/2	Met
C14	Choices in routines & schedules	2/2	Met
C15	Personalize living space	2/2	Met
C16	Explore interests	2/2	Met
C17	Community activities	2/2	Met
C18	Purchase personal belongings	2/2	Met
C19	Knowledgeable decisions	2/2	Met
C21	Coordinate outreach	2/2	Met
C46	Use of generic resources	2/2	Met
C47	Transportation to/ from community	2/2	Met
C48	Neighborhood connections	2/2	Met
C49	Physical setting is consistent	2/2	Met
C51	Ongoing satisfaction with services/ supports	2/2	Met
C52	Leisure activities and free-time choices /control	2/2	Met
C53	Food/ dining choices	2/2	Met