|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | | --- | |  | |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  | |  | | --- | | **PROVIDER REPORT FOR** | | | |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  | |  | | --- | | **Opportunity Works, Inc. 10 Opportunity Way  Newburyport, MA 01950** | | | | | | |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  | |  | | --- | |  | | | | | | | |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |  | | --- | | **Version** | | | | | | |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  | |  | | --- | | **Public Provider Report** | | | | | | | | | | |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  | | --- | | **Prepared by the Department of Developmental Services OFFICE OF QUALITY ENHANCEMENT** | | | | | | | | | | | | |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  | |  | | --- | | **SUMMARY OF OVERALL FINDINGS** | |  |  |
|  |  |  |  |  |
|  | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  | |  | |  | | --- | | **Provider** | |  | |  | | --- | | Opportunity Works, Inc. | |  |  | |  |  |  |  |  |  | |  | |  | | --- | | **Review Dates** | |  | |  | | --- | | 2/9/2022 - 2/15/2022 | |  |  | |  |  |  |  |  |  | |  | |  | | --- | | **Service Enhancement  Meeting Date** | |  | |  | | --- | | 3/1/2022 | |  |  | |  |  |  |  |  | |  |  |  |  |  |  | |  | |  | | --- | | **Survey Team** | |  | |  | | --- | | John Downing (TL) | | |  | |  |  |  |  |  |  | |  | |  | | --- | | **Citizen Volunteers** | |  | |  | | --- | |  | |  |  | |  |  |  |  |  |  | | | |  |

|  |  |  |
| --- | --- | --- |
|  |  |  |
|  | |  |  | | --- | --- | |  |  | |  | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **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** | 4 location(s)  18 audit (s) | Targeted Review | DDS 11/14 Provider 51 / 52   62 / 66 2 Year License 03/01/2022- 03/01/2024 |  | DDS 4 / 4 Provider 40 / 42   44 / 46 Certified 03/01/2022 - 03/01/2024 | | Community Based Day Services | 2 location(s)  11 audit (s) |  |  | DDS Targeted Review | 17 / 17 | | Employment Support Services | 2 location(s)  7 audit (s) |  |  | DDS Targeted Review | 21 / 23 | | Planning and Quality Management |  |  |  | DDS Targeted Review | 6 / 6 | | |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | |  |  | | --- | --- | |  |  | | |  | | --- | | **EXECUTIVE SUMMARY :** | |  | |  |  | | |  | | --- | | Opportunity Works Inc. is a non-profit agency, established in 1974, serving individuals with developmental disability and acquired brain injury from the Merrimack Valley and North Shore communities. Services include Employment Supports, Community Based Day Services (CBDS) and Day Habilitation supports.   During the agency's 2019 survey, Opportunity Works, Inc. met 94% of licensing indicators within their Day and Employment Service programs. As a result of the highly positive licensing outcome, the agency was eligible and elected to complete a self-assessment during this licensing review. The scope of this DDS licensing review was a Targeted Review limited to critical indicators, indicators receiving a rating of 'not met' during the 2019 survey, and any new or strengthened licensing and/or certification indicators since the last full review in 2019. The ratings from this survey process are a combination of the agency's self-assessment and DDS application of licensing and certification standards.  The agency demonstrated notable strength in the domains of Personal and Environmental Safety. Comprehensive assessments had been completed for individuals, evaluating each person's skills and abilities to ensure their safe use of equipment at the program. Allegations of abuse were reported as mandated, and all incident reports were reviewed as required. In general, sites surveyed were found to be clean, and with all required inspections completed. Fire safety in terms of equipment, functionality, inspection, and program evacuation times was noteworthy.   Through record review and personal observations of interactions between staff and individuals, the agency's use of respectful communication and implementation of privacy policies/practices at each location was witnessed. Each location had designated areas for individuals to access when privacy was required or requested.  Within the domain of Goal Development, there were two areas identified during the survey and self-assessment process as requiring further attention. Specific to licensing, one area identified was the timely submission of required ISP documentation. The agency needs to develop a mechanism to ensure that required ISP assessments and support strategies are submitted within required time frames. Although the agency had revised its Medication Treatment Plan forms since the 2019 review, the agency also needs to ensure that behavior modifying medication treatment plans are reviewed by a person's ISP team.   Opportunity Works, Inc. received a rating of met in 94% of licensing indicators with all critical indicators rated as met. The agency also met 96% of certification indicators and is certified. As a result, the agency will receive a Two-Year License for Day and Employment Supports. Opportunity Works, Inc. will complete its own follow up on licensing indicators that received a rating of not met, within 60 days of the Service Enhancement Meeting.   Below is a description of the self-assessment process completed by the provider. | | | |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | |  |  | | --- | --- | |  |  | | |  | | --- | | **Description of Self Assessment Process:** | |  | |  |  | | |  | | --- | | In order to obtain a non-biased and truthful survey result, Opportunity Works utilized a randomized online application to select names and files to rate accordingly. The threshold for rating indicators as met was 80%. The following is a summarization of the findings from Opportunity Work's self-assessment:   Personal Safety: Individuals and guardians are informed on how to file a complaint and how to report alleged abuse and neglect via initial and ongoing trainings through both consents and trainings annually. Opportunity Works has policies and procedures in place that outline staff's role as mandated reporters, what is reportable, and how to file a complaint with DPPC. Immediate action is taken to protect the health and safety of individuals when potential abuse and neglect is reported. A formal complaint and grievance process is in place and available for all stakeholders involved in the agency to report any allegations of abuse or misconduct. This process is followed to ensure senior management has direct oversight of allegations, grievances, and complaints. In addition to this process, all critical incidents are documented, reviewed and discussed with the Human Rights committee and our internal critical incident team on a quarterly basis to identify patterns and trends within our agency and to minimum any future risk for participants. Every 2 years, a safety plan is submitted to DDS for approval, ensuring adequate supports are in place for emergency preparedness. Opportunity Works conducts quarterly fire drills and corresponding safety improvement action plans as needed for any drills that receive a rating of poor. All documented emergency drills indicated that individuals evacuated within a reasonable amount of time. A Safety Assessment is completed for all DDS funded individuals via HCSIS outlining their ability to safely utilize a variety of workplace/household tools, appliances, and machinery. Opportunity Works also has individual trainings for the safe use of machinery unique to specific job tasks in a personalized success plan for those who are employed in the community. In addition, a comprehensive assessment and Positive Personal Profile and Career Plan are completed to include safety strategies that help educate participants of proper safety precautions and procedures. Staff are knowledgeable about participant's particular behaviors and/or conditions as well as strategies in place to address them.   Environmental Safety: At Opportunity Works, all Health and Safety matters are reviewed on an ongoing basis through monthly checklists, Health and Safety meetings and site inspections. All required inspections have been conducted and are up to date. Smoke detectors and carbon monoxide detectors are located throughout both locations and are in proper operating order. Each site is free of infestation, is clean and environmentally safe. During a recent Carf survey, it was noted that "the space within each building is clean, comfortable, and inviting and is conducive to providing safe and nurturing support for participants." All environmental safety indicators are met within agency standards. The hot water temperature throughout both sites is within the indicator standards.   Communication: Opportunity Works supports participants with many diverse backgrounds and communication abilities. A variety of styles are utilized and include basic ASL for participants who are deaf and hard of hearing, video phone for deaf and hard of hearing, vision boards, picture books, adaptive communication devices for non-verbal participants, cell phones, iPads, emails and Google translator is utilized to communicate to families and guardians who are not English or Spanish speaking.   Individuals have an opportunity to provide feedback when employees are hired and annually thereafter.  Health: Opportunity Works employs four RNs, two at each location, who serve as Healthcare Coordinators for persons served. Program nurses conduct weekly and monthly medical audits to ensure compliance with regulations. These audits include but are not limited to compliance with physician orders and treatment protocols, medication count, adequate supply of medical and all healthcare supplies, proper storage and the security of all medications. Many participants require dining protocols due to diet textures, allergies, pacing needs etc. and staff are trained annually and as needed on said protocols. During to the COVID pandemic, Opportunity Works implemented new safety protocols including the proper use of PPE, a strengthened building cleaning processes, a restriction of in-house meeting and visitor policies and environmental changes to ensure social distancing occurred.  Human Rights: The organization has an active and very committed Human Rights Committee. The committee is comprised of the required LPN, paralegal, social worker (LICSW), 2 family members, and one person supported/self-advocate. The committee reviews all human rights related issues including approving Level I PBS Behavior Support Plans, reviewing all initial and annual behavior protocols, incident and restraint reports involving individuals, alleged DPPC allegations, supportive/protective devices, and behavior modifying medications.  Participants and guardians are informed of their human rights upon entrance and annually thereafter. People supported receive regular human rights training including how to file a complaint and/or grievance and reporting abuse.   All communications pertaining to participants both written and oral are clear concise and objective. Participants are supported to use technology and are able to receive and make phone calls and emails as needed. Opportunity Works does not lock any personal possessions and participants have access to their belongings at all time. All personal care is done in private locations within program, i.e.: changing areas and bathrooms. Personal information/conversations are private. Confidential files are locked and private information is not posted. Informed consent documentation is given annually to all participants and can be revoked at any time.  All components listed within the behavior plan indicators are included in our target support plans.  Competent Workforce: Prior to being employed with Opportunity Works all candidates are screened for an acceptable driving record, the DDS abuser registry, the Officer of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE), CORI, and Fingerprinting. Professional licensures for those employees whose role require them are screened annually to ensure they are not expired. If an employee's job description indicates they require a degree or certificate, it is confirmed prior to hire. All employees have an updated resume on file as well as a signed job description. The agency has a supervision policy in place for bi-monthly supervisions to occur. The agency utilizes an online training platform called Relias. All mandatory trainings are reviewed annually and are followed with competency based testing. The Relias software has reporting capabilities to highlight what trainings have been completed. Support staff are trained in human rights annually. The organization has 3 DDS trained Human Rights Officers; 2 currently in Newburyport and 1 currently in Haverhill. These officers are trained annually to include DPPC, and DDS Mandated Reporter Training. Staff is trained to support participant's unique needs and abilities.   Opportunity Works recently went through a CARF accreditation and was commended on an exemplary Positive Behavior Supports Program (PBS). The PBS Team utilizes a QUIC Tool, QUIC Tool Follow Up, and Coach Swap checklist. The QUIC Tool focuses on interaction skills, suggestions/areas to strengthen, positive feedback, and PBS Team follow up on any suggested areas.  In addition to PBS, support staff are trained in Proactive Alternatives for Behavioral Challenges (PABC). An assortment of medical trainings are reviewed by staff annually to include how to safely implement health related protections, how to respond to medical emergencies, and signs and symptoms of illness.  Goal Development Implementation: Managers and Case Managers are responsible for ensuring support strategies and goals are submitted in accordance to DDS timelines. Although a failsafe system has been implemented to cross-check deadlines and ensures implementation timeliness, this area continues to be not met.   Planning and Quality Improvement: Opportunity Works has a Quality Outcomes Management System that is analyzed to determine goal obtainment and areas needing improvement throughout the organization. The Quality Outcomes Management System thoroughly reviews the satisfaction of all stakeholders including families, guardians and DDS, as well as the efficiency and effectiveness of the organization's operations. Through these systems, Opportunity Works monitors outcomes, makes recommendations, and prioritizes areas needing improvement. Opportunity Works develops improvement strategies, action plans, and assesses outcomes of these activities. Opportunity Works most recent strategic plan was facilitated by an outside consultant. The mission and core values were updated and the plan included a SWOT analysis (strengths, weaknesses, opportunities, and threats) as well as strategic goals for the board, programs, development, workforce, and finances.  Choice, Control, and Growth: Participants are supported to maximize their independence. Individual choice drives program scheduling and all services offered are person centered and based on individual's personal and vocational interests.   The organization has an extensive Health and Safety plan to include an emergency backup plan in the event of an emergency or disaster. Staff and participants are knowledgeable of these plans and they are reviewed monthly.   Career Planning, Development, and Employment: Every participant who is on a pathway toward employment or who is currently employed is supported to develop appropriate work related interpersonal skills. A Positive Personal Profile and Career plan is completed annually and updated thereafter which outlines an individual's successes, current abilities and areas needing improvement related to social skills within the workplace. For those who are actively employed, feedback from the employer should be obtained on individual job performance. When feedback indicates difficulties, such areas are transferred toward the newly developed Success Plan for participants to work on.   Participant ISP goals are developed based on personal and professional interests as well as areas identified that need improvement as agreed upon by the participant and their support team.  All working participants have access to a benefit analysis plan which helps them understand how their benefits may be impacted with community employment. A strong effort is made for all work sites to be integrated and all participants are paid at least minimum wage. At this time, there are no participants who require specific job accommodations, however staff are knowledgeable and able to provide accommodations for those who need it. Participants who are employed competitively within the community are immersed within the workplace culture. Several examples include attending holiday parties, fundraisers, receiving company accolades and gifts and receiving internal promotions. One participant was hired independently after working with Opportunity Works peers at a group supported site.   Access and Integration and Meaningful and Satisfying Day Activities:  Participants are supported to explore their specific interests both in program and in the community. Interest leisure surveys and comprehensive assessments document participant stated interests which are then translated into their schedule and community activities. When out in the community all activities are engaging and meaningful based on each participant's professional and personal interests. Transportation is available and accessible both to and from program and throughout the day for community activities. | | | |  |

|  |  |
| --- | --- |
|  |  |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | |  | |  | | --- | | **LICENSURE FINDINGS** | | |  | |  |  | |  | |  | |  |  |  |  | | --- | --- | --- | --- | |  | **Met / Rated** | **Not Met / Rated** | **% Met** | | **Organizational** | **10/10** | **0/10** |  | | **Employment and Day Supports** | **52/56** | **4/56** |  | | Community Based Day Services  Employment Support Services |  |  |  | | **Critical Indicators** | **7/7** | **0/7** |  | | **Total** | **62/66** | **4/66** | **94%** | | **2 Year License** |  |  |  | | **# indicators for 60 Day Follow-up** |  | **4** |  | |  |  |  |  | |  | | |  |  | |  | |  |
|  |  |
| |  |  | | --- | --- | |  |  | |  | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  |  |  | | |  | |  | **Employment/Day Areas Needing Improvement on Standards not met/Follow-up to occur: From DDS review:** |  |  | | | |  | **Indicator #** | | | **Indicator** | **Area Needing Improvement** | |  | L64 | | | Medication treatment plans are reviewed by the required groups. | One individual's Medication Treatment Plan was not reviewed by the required groups. The existence or review of the plan was not identified in the ISP. The agency needs to ensure all medication treatment plans are reviewed by the required groups. | |  | L86 | | | Required assessments concerning individual needs and abilities are completed in preparation for the ISP. | For four individuals, their required assessments were not completed and submitted 15 days prior to the ISP date. The agency needs to ensure all required ISP assessments are submitted within the required ISP timelines. | |  | 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, their required support strategies were not completed and submitted 15 days prior to the ISP date. The agency needs to ensure all required support strategies are completed and submitted within the required ISP timelines. | | |  |  | |  | |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  | | | |  |  | |  | **Employment/Day Areas Needing Improvement on Standards not met/Follow-up to occur: From Provider review:** |  |  |  | | | | |  | **Indicator #** | | | | **Indicator** | **Issue identified** | **Action planned to address** | |  | L85 | | | | The agency provides ongoing supervision, oversight and staff development. | While the agency has a system in place to provide supervisions on an ongoing basis, the system is not being consistently followed per policy. | Quarterly and Annual Outcomes were modified to include the addition of supervisions. Each program Manager will be responsible for conducting supervisions every other month at which time they will discuss employee professional development goals. The completion of such supervisions will then be transferred onto programmatic outcomes to track progress made in this area. Opportunity Works is also revising the annual evaluation tool which will include the successful completion of supervisions as summarized in the annual outcomes under each program manager. | | |  |  | |  |

|  |  |
| --- | --- |
|  |  |
| |  |  |  |  | | --- | --- | --- | --- | |  |  | |  | |  | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  | | | |  | | --- | | **CERTIFICATION FINDINGS** | |  | |  | | |  |  | | |  |  |  |  |  | | --- | --- | --- | --- | --- | |  | **Reviewed By** | **Met / Rated** | **Not Met / Rated** | **% Met** | | **Certification - Planning and Quality Management** | **DDS 0/0 Provider 6/6** | **6/6** | **0/6** |  | | **Employment and Day Supports** | **DDS 4/4 Provider 34/36** | **38/40** | **2/40** |  | | Community Based Day Services | DDS 3/3 Provider 14/14 | 17/17 | 0/17 |  | | Employment Support Services | DDS 1/1 Provider 20/22 | 21/23 | 2/23 |  | | **Total** |  | **44/46** | **2/46** | **96%** | | **Certified** |  |  |  |  | |  |  | | | |  | | |  |  | |  | |  |  | | |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | |  | **Employment Support Services- Areas Needing Improvement on Standards not met From Provider review:** |  |  |  | | | | |  | **Indicator #** | | | | **Indicator** | **Issues identified** | **Action planned to address** | |  | C26 | | | | Career planning includes an analysis of how an individual's entitlements can be managed in a way that allows them to work successfully in the community. | Out of the 7 individuals surveyed in employment, only one had a benefit analysis. | Opportunity Works will provide individuals and families with a letter annually at the time of the ISP that notifies them of a benefit analysis tool available for them. A benefits analysis will be completed as needed so that the concerns about the impact of employment on disability benefits can be addressed. | |  | C35 | | | | Individuals are given feedback on job performance by their employer. | Out of the 7 individuals surveyed in employment, 3 did not have feedback from their employers on their job performance. | In instances where the employer does not have formal feedback, the Job Developers note their performance and any areas needing improvement on activity sheets and the newly developed success plan. Opportunity Works will be creating a performance evaluation for anyone who has an in-house job. Additionally, the quarterly check in report will be modified to include this area. | |  |  | | | |  |  |  | | |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  | | --- | |  | |  |  |  |  |  | | | | | | | | | | |  |
|  | | | | | |  | | | | | |  |  |  |  |  |
|  | | | | | | |  | | --- | | **MASTER SCORE SHEET LICENSURE** | |  | | | | | |  |  |  |  |
|  | | | | | |  | | | | | |  |  |  |  |  |
|  | | | | | | |  | | --- | | **Organizational: Opportunity Works, Inc.** | |  |  | | | | | |  |  |  |
|  | | | | | |  | | | | | |  |  |  |  |  |
|  | | | | | | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  | **Indicator #** | **Indicator** | **Reviewed by** | **Met/Rated** | **Rating(Met,Not Met,NotRated)** | | O | L2 | Abuse/neglect reporting | **DDS** | **1/1** | **Met** | |  | L3 | Immediate Action | **Provider** | **-** | **Met** | |  | L4 | Action taken | **Provider** | **-** | **Met** | |  | L48 | HRC | **Provider** | **-** | **Met** | |  | L65 | Restraint report submit | **Provider** | **-** | **Met** | |  | 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** | |  |  |  |  | | | | | |  |
|  | | | | | |  | | | | | |  |  |  |  |  |
|  | | | | | | |  | | --- | | **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** | | O | 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** | 7/7 |  | 11/11 | **18/18** | **Met** | |  | L10 | Reduce risk interventions | I | **Provider** |  | - | - | **-** | **Met** | | O | L11 | Required inspections | L | **DDS** |  |  | 2/2 | **2/2** | **Met** | | O | L12 | Smoke detectors | L | **DDS** |  |  | 2/2 | **2/2** | **Met** | | O | L13 | Clean location | L | **DDS** |  |  | 2/2 | **2/2** | **Met** | |  | L14 | Site in good repair | L | **Provider** |  | - | - | **-** | **Met** | |  | L15 | Hot water | L | **Provider** |  | - | - | **-** | **Met** | |  | L16 | Accessibility | L | **Provider** |  | - | - | **-** | **Met** | |  | L17 | Egress at grade | L | **Provider** |  | - | - | **-** | **Met** | |  | L18 | Above grade egress | L | **Provider** |  | - | - | **-** | **Met** | |  | L20 | Exit doors | L | **Provider** |  | - | - | **-** | **Met** | |  | L21 | Safe electrical equipment | L | **Provider** |  | - | - | **-** | **Met** | |  | L22 | Well-maintained appliances | L | **Provider** |  | - | - | **-** | **Met** | |  | L25 | Dangerous substances | L | **Provider** |  | - | - | **-** | **Met** | |  | L26 | Walkway safety | L | **Provider** |  | - | - | **-** | **Met** | |  | 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** | |  | L37 | Prompt treatment | I | **Provider** |  | - | - | **-** | **Met** | | O | L38 | Physician's orders | I | **Provider** |  | - | - | **-** | **Met** | |  | L39 | Dietary requirements | I | **Provider** |  | - | - | **-** | **Met** | |  | L44 | MAP registration | L | **Provider** |  | - | - | **-** | **Met** | |  | L45 | Medication storage | L | **Provider** |  | - | - | **-** | **Met** | | O | L46 | Med. Administration | I | **DDS** | 1/1 |  | 1/1 | **2/2** | **Met** | |  | L49 | Informed of human rights | I | **Provider** |  | - | - | **-** | **Met** | |  | L50 (07/21) | Respectful Comm. | I | **DDS** | 7/7 |  | 11/11 | **18/18** | **Met** | |  | L51 | Possessions | I | **Provider** |  | - | - | **-** | **Met** | |  | L52 | Phone calls | I | **Provider** |  | - | - | **-** | **Met** | |  | L54 (07/21) | Privacy | I | **DDS** | 7/7 |  | 11/11 | **18/18** | **Met** | |  | L55 | Informed consent | 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 | **DDS** | 1/1 |  | 1/1 | **2/2** | **Met** | |  | L64 | Med. treatment plan rev. | I | **DDS** | 1/1 |  | 0/1 | **1/2** | **Not Met (50.0 %)** | |  | 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** | |  | L81 | Medical emergency | L | **Provider** |  | - | - | **-** | **Met** | | O | L82 | Medication admin. | L | **DDS** | 1/1 |  | 2/2 | **3/3** | **Met** | |  | L84 | Health protect. Training | I | **Provider** |  | - | - | **-** | **Met** | |  | L85 | Supervision | L | **Provider** |  | - | - | **-** | **Not Met** | |  | L86 | Required assessments | I | **DDS** | 4/6 |  | 8/10 | **12/16** | **Not Met (75.00 %)** | |  | L87 | Support strategies | I | **DDS** | 3/5 |  | 7/9 | **10/14** | **Not Met (71.43 %)** | |  | L88 | Strategies implemented | I | **Provider** |  | - | - | **-** | **Met** | |  | L91 | Incident management | L | **Provider** |  | - | - | **-** | **Met** | |  | **#Std. Met/# 56 Indicator** |  |  |  |  |  |  | **52/56** |  | |  | **Total Score** |  |  |  |  |  |  | **62/66** |  | |  |  |  |  |  |  |  |  | **93.94%** |  | |  |  |  |  |  | | | | | |
|  | | | | | |  | | | | | |  |  |  |  |  |
|  | | | | | | |  | | --- | | **MASTER SCORE SHEET CERTIFICATION** | |  |  | | | | | |  |  |  |
|  | | | | | |  | | | | | |  |  |  |  |  |
|  | | | | | | |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  | **Certification - Planning and Quality Management** |  |  |  |  | | | | | |  | **Indicator #** | | | | | **Indicator** | **Reviewed By** | **Met/Rated** | **Rating** | |  | C1 | | | | | Provider data collection | Provider | - | **Met** | |  | C2 | | | | | Data analysis | Provider | - | **Met** | |  | C3 | | | | | Service satisfaction | Provider | - | **Met** | |  | C4 | | | | | Utilizes input from stakeholders | Provider | - | **Met** | |  | C5 | | | | | Measure progress | Provider | - | **Met** | |  | C6 | | | | | Future directions planning | Provider | - | **Met** | |  |  | | | | |  |  |  |  | |  |  |  |  |  | | | | | |
|  | | | | | |  | | | | | |  |  |  |  |  |
|  | | | | | | |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Community Based Day Services** |  |  |  |  | | | | | | **Indicator #** | | | | | **Indicator** | **Reviewed By** | **Met/Rated** | **Rating** | | C7 | | | | | Feedback on staff / care provider performance | Provider | - | **Met** | | C8 | | | | | Family/guardian communication | Provider | - | **Met** | | C13 | | | | | Skills to maximize independence | Provider | - | **Met** | | C20 (07/21) | | | | | Emergency back-up plans | DDS | 11/11 | **Met** | | C37 | | | | | Interpersonal skills for work | Provider | - | **Met** | | C38 (07/21) | | | | | Habilitative & behavioral goals | DDS | 11/11 | **Met** | | C39 (07/21) | | | | | Support needs for employment | DDS | 11/11 | **Met** | | C40 | | | | | Community involvement interest | Provider | - | **Met** | | C41 | | | | | Activities participation | Provider | - | **Met** | | C42 | | | | | Connection to others | Provider | - | **Met** | | C43 | | | | | Maintain & enhance relationship | Provider | - | **Met** | | C44 | | | | | Job exploration | Provider | - | **Met** | | C45 | | | | | Revisit decisions | Provider | - | **Met** | | C46 | | | | | Use of generic resources | Provider | - | **Met** | | C47 | | | | | Transportation to/ from community | Provider | - | **Met** | | C51 | | | | | Ongoing satisfaction with services/ supports | Provider | - | **Met** | | C54 | | | | | Assistive technology | Provider | - | **Met** | | **Employment Support Services** |  |  |  |  | | | | | | **Indicator #** | | | | | **Indicator** | **Reviewed By** | **Met/Rated** | **Rating** | | C7 | | | | | Feedback on staff / care provider performance | Provider | - | **Met** | | C8 | | | | | Family/guardian communication | Provider | - | **Met** | | C20 (07/21) | | | | | Emergency back-up plans | DDS | 7/7 | **Met** | | C22 | | | | | Explore job interests | Provider | - | **Met** | | C23 | | | | | Assess skills & training needs | Provider | - | **Met** | | C24 | | | | | Job goals & support needs plan | Provider | - | **Met** | | C25 | | | | | Skill development | Provider | - | **Met** | | C26 | | | | | Benefits analysis | Provider | - | **Not Met (0 %)** | | C27 | | | | | Job benefit education | Provider | - | **Met** | | C28 | | | | | Relationships w/businesses | Provider | - | **Met** | | C29 | | | | | Support to obtain employment | Provider | - | **Met** | | C30 | | | | | Work in integrated settings | Provider | - | **Met** | | C31 | | | | | Job accommodations | Provider | - | **Met** | | C32 | | | | | At least minimum wages earned | Provider | - | **Met** | | C33 | | | | | Employee benefits explained | Provider | - | **Met** | | C34 | | | | | Support to promote success | Provider | - | **Met** | | C35 | | | | | Feedback on job performance | Provider | - | **Not Met (0 %)** | | C36 | | | | | Supports to enhance retention | Provider | - | **Met** | | C37 | | | | | Interpersonal skills for work | Provider | - | **Met** | | C47 | | | | | Transportation to/ from community | Provider | - | **Met** | | C50 | | | | | Involvement/ part of the Workplace culture | Provider | - | **Met** | | C51 | | | | | Ongoing satisfaction with services/ supports | Provider | - | **Met** | | C54 | | | | | Assistive technology | Provider | - | **Met** | |  | | | | |  |  |  |  | |  |  |  | | | | | |  |  |