



**PROVIDER REPORT  
FOR**

**PEOPLE INC  
4 South Main St  
Fall River, MA 02721**

**July 11, 2025**

**Version**

**Public Provider Report**

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

# **SUMMARY OF OVERALL FINDINGS**

<b>Provider</b>	PEOPLE INC
<b>Review Dates</b>	6/9/2025 - 6/13/2025
<b>Service Enhancement Meeting Date</b>	6/27/2025
<b>Survey Team</b>	Kayla Condon (TL) Gina Ford Katherine Gregory Linda Griffith William Muguro Tina Napolitan Scott Nolan Roberto Polanco-Santana Michelle Boyd

**Citizen Volunteers**

**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) 17 audit (s)	Full Review	83/88 2 Year License 06/27/2025 - 06/27/2027		65 / 67 Certified 06/27/2025 - 06/27/2027
Residential Services	8 location(s) 8 audit (s)			Full Review	20 / 20
ABI-MFP Residential Services	1 location(s) 3 audit (s)			Full Review	19 / 20
Placement Services	4 location(s) 4 audit (s)			Deemed	
Individual Home Supports	2 location(s) 2 audit (s)			Full Review	20 / 21
Planning and Quality Management (For all service groupings)				Full 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>	2 location(s) 16 audit (s)	Full Review	56/61 2 Year License 06/27/2025 - 06/27/2027		Certified 06/27/2025 - 06/27/2027
Community Based Day Services	1 location(s) 7 audit (s)			Deemed	
Employment Support Services	1 location(s) 9 audit (s)			Deemed	
Planning and Quality Management (For all service groupings)				Full Review	6 / 6

## **EXECUTIVE SUMMARY :**

People Incorporated, established in 1968, provides a comprehensive array of services to adults and children with intellectual and developmental disabilities, as well as their families, throughout Fall River and southeastern Massachusetts. They offer a variety of adult services not limited to Agency with Choice, Residential and In-home Supports, Day Habilitation, Community Based Day Services (CBDS), and Employment services. Additionally, their children's services provide Early Intervention, pre-school, and parenting programs. Across the lifespan they provide support through Autism Services, Family Support, and Assistive Technology. More than 2500 people are supported through their services.

For this 2025 survey, The Department of Developmental Services' (DDS) Office of Quality Enhancement (OQE) conducted a full licensing review of People Inc.'s Residential and Individual Home Supports (IHS) and Employment and Day Service Groupings. This was inclusive of 24-Hour Residential Supports, 24-Hour ABI/MFP Residential Supports, IHS, Shared Living, Employment Supports, and CBDS. As the agency is 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 its Shared Living, CBDS, and Employment Supports. A certification review was conducted by OQE for 24-Hour Residential Supports, 24-Hour ABI/MFP Residential Supports, and IHS.

The licensing review revealed several positive practices at an organizational level that enhanced the quality of supports offered at various programs. The agency showed effective systems related to staff training and screening. Staff completed all the mandated training, new hires met all required qualifications, and all licensed professionals had current and active licenses. Within certification, the agency demonstrated a variety of mechanisms for collecting and analyzing data. This data was then utilized to determine trends and make quality improvements such as hiring additional nursing for oversight and to support the individuals' growing medical needs.

Within Residential and Individual Home Supports (IHS) strengths were noted across various domains. In the domain of communication, staff communicated effectively with individuals, including some individuals who were bilingual, and staff present in their homes could speak their languages with them. For one individual who was non-verbal staff were in-tune their unique body language, facial expressions, and gestures and were able to understand their wants and needs based on these signals. Regarding healthcare, medications were administered as ordered. In one instance a complex seizure protocol required the use of a rescue-medication at specific intervals, and the medications were administered appropriately. All the homes had nutritional food present, and menus reflected a balance of healthy food choices and preferences; staff also received training in nutritional standards. In the domain of human rights, strengths were evident. All individuals and guardians received information on human rights, DPPC, and the agency's grievance procedure. Individuals were supported to visit and call friends and family based on their preferences. Data was present and being collected for individual's behavior plans and medication treatment plans. Relative to the ISP, goal implementation was occurring, and data was well documented leading to individuals consistently working towards their ISP goals. The workforce demonstrated skill and competence through their knowledge of individuals' unique needs. Staff received training in all relevant medical diagnoses and individualized quick reference sheets were present that outlined pertinent medical information, communication methods and interactions styles, and general likes/dislikes.

Certification areas also had multiple effective outcomes within 24-Hour Residential Supports, 24-Hour ABI/MFP Residential Supports, and IHS. Individuals were afforded many opportunities for choice and control. All the homes and bedrooms were personalized to and reflected individuals' preferences. Photos of family and friends were prominently displayed. Allegiance to sports team were proudly demonstrated through posters, displayed memorabilia, and even bedroom paint colors. Individuals were able to determine their own schedules for the day, deciding when they want to do things such as

shower, eat, watch TV, and go to bed. For one individual, showers were preferred during the morning hours, so an additional staff was added during that time to accommodate this.

Positive findings in relation to licensing indicators were also present within CBDS and Employment services. Within the domain of human rights, individuals were supported to have private conversations when needed and all communication with and about the individuals was respectful. When photographs were used for publications, media releases were present, and consent obtained. Behavioral plans were implemented as outlined and data regularly collected. Effective data collection allowed behavior plans to be modified and reduced or eliminated based on the individual's positive progress. Additionally, staff were knowledgeable about what to do in a medical emergency, trained in signs and symptoms of illness, and were supported by regular supervision and staff meetings.

There were areas identified as needing continued improvement within the licensing indicators. In the Residential and IHS grouping, staff need to be knowledgeable about individuals requiring specific physician ordered diets and implement them as outlined. Healthcare records (HCR) should be updated to reflect the most recent immunizations, evaluations, all diagnoses and contact information for members of their support system. ISP assessments and support strategies, as well as incidents reports, need to be submitted and finalized within the required timelines. Within certification, for individuals in 24-hour ABI/MFP Residential Supports, support should be offered to create or increase relationships and social connections. In IHS, individual feedback regarding staff performance needs to be solicited and shared with the staff to improve support services.

In Employment and CBDS, individuals need to be assessed to determine their ability to safely use equipment and machinery. Individuals should also be assessed to determine if assistive technology could potentially be used to maximize their independence. When there is an area of potential need, trials of various technologies should occur to determine which is effective. ISP assessments and support strategies, as well as incidents reports, need to be submitted and finalized within the required timelines.

Within Residential and Individual Home Supports, People Inc. received a rating of Met in 94% of licensing indicators, including all critical indicators, and will be issued a Two-Year License for the Residential service grouping. The agency met 97% of certification indicators and is fully certified.

The Employment and Day Supports grouping met 92% of licensing indicators, including all critical indicators, and will also be issued a Two-Year License.

Based on the scores, follow-up on all licensing indicators that were not met during the survey will be completed by People Inc. and the results submitted to OQE within 60 days of the Service Enhancement Meeting.

## LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
<b>Organizational</b>	8/8	0/8	
<b>Residential and Individual Home Supports</b>	75/80	5/80	
Residential Services Individual Home Supports Placement Services ABI-MFP Residential Services			
<b>Critical Indicators</b>	8/8	0/8	
<b>Total</b>	83/88	5/88	94%
<b>2 Year License</b>			
<b># indicators for 60 Day Follow-up</b>		5	

	Met / Rated	Not Met / Rated	% Met
<b>Organizational</b>	9/9	0/9	
<b>Employment and Day Supports</b>	47/52	5/52	
Community Based Day Services Employment Support Services			
<b>Critical Indicators</b>	8/8	0/8	
<b>Total</b>	56/61	5/61	92%
<b>2 Year License</b>			
<b># indicators for 60 Day Follow-up</b>		5	

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

Indicator #	Indicator	Area Needing Improvement
L39	Special dietary requirements are followed.	For two of seven individuals requiring a special diet, staff were not trained in their unique dietary requirements. The agency needs to ensure that staff receive training when a physician ordered diet is in place.

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

<b>Indicator #</b>	<b>Indicator</b>	<b>Area Needing Improvement</b>
L43	The health care record is maintained and updated as required.	Four of the sixteen healthcare records (HCRs) did not have all current diagnoses and/or the most recent immunizations and evaluations date. The agency needs to ensure that all HCRs are updated and maintained as changes occur.
L86	Required assessments concerning individual needs and abilities are completed in preparation for the ISP.	For five of fifteen individuals reviewed ISP assessments were not submitted at least 15 days prior to the ISP. The agency needs to ensure all ISP assessments are submitted within the required 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 five of fifteen individuals reviewed, ISP support strategies were not submitted at least 15 days prior to the ISP. The agency needs to ensure all ISP support strategies are submitted within the required timelines.
L91	Incidents are reported and reviewed as mandated by regulation.	Incident reports were submitted and/or finalized late at nine of the fifteen locations reviewed. The agency needs to ensure all incidents are submitted and finalized within the required timelines.

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

<b>Indicator #</b>	<b>Indicator</b>	<b>Area Needing Improvement</b>
L9 (07/21)	Individuals are able to utilize equipment and machinery safely.	For thirteen individuals reviewed, safety assessment had not been completed to assess them for safe use of equipment and machinery, agency need to ensure that Individuals are assessed and supported to utilize equipment and machinery safely.
L86	Required assessments concerning individual needs and abilities are completed in preparation for the ISP.	For ten of fourteen individuals reviewed ISP assessments were not submitted at least 15 days prior to the ISP. The agency needs to ensure all ISP assessments are submitted within the required 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 eight of fourteen individuals reviewed, ISP support strategies were not submitted at least 15 days prior to the ISP. The agency needs to ensure all ISP support strategies are submitted within the required timelines.
L91	Incidents are reported and reviewed as mandated by regulation.	Incident reports were submitted and/or finalized late at one of two locations reviewed. The agency needs to ensure all incidents are submitted and finalized within the required timelines.

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

<b>Indicator #</b>	<b>Indicator</b>	<b>Area Needing Improvement</b>
L94 (05/22)	Individuals have assistive technology to maximize independence.	For thirteen individuals reviewed, assistive technology assessments had not been completed to assess their support needs for use of assistive technology to maximize independence. The agency needs to ensure that individuals are supported to use assistive technology to maximize independence where support needs have been identified.

## **CERTIFICATION FINDINGS**

	<b>Met / Rated</b>	<b>Not Met / Rated</b>	<b>% Met</b>
<b>Certification - Planning and Quality Management</b>	<b>6/6</b>	<b>0/6</b>	
<b>Residential and Individual Home Supports</b>	<b>59/61</b>	<b>2/61</b>	
ABI-MFP Residential Services	19/20	1/20	
Individual Home Supports	20/21	1/21	
Residential Services	20/20	0/20	
<b>Total</b>	<b>65/67</b>	<b>2/67</b>	<b>97%</b>
<b>Certified</b>			

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

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

<b>Indicator #</b>	<b>Indicator</b>	<b>Area Needing Improvement</b>
C9	Staff (Home Providers) act as bridge builders and provide opportunities to develop, and/or increase personal relationships and social contacts.	One of three individuals was not supported or afforded opportunities to create or increase relationships outside of the home. The agency needs to ensure staff act as bridge builders and provide opportunities to increase personal relationships and social contacts.
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.	Two individuals' opinions on their staff's performance were not solicited and shared with their staff. The agency needs to ensure that they are giving all individuals the opportunity to give feedback on their staff and share the feedback with those staff.

## MASTER SCORE SHEET LICENSURE

Organizational: PEOPLE INC

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
L2	Abuse/neglect reporting	17/17	Met
L3	Immediate Action	15/15	Met
L4	Action taken	15/15	Met
L48	HRC	1/1	Met
L74	Screen employees	20/20	Met
L75	Qualified staff	18/18	Met
L76	Track trainings	20/20	Met
L83	HR training	20/20	Met
L92 (07/21)	Licensed Sub-locations (e/d).	4/4	Met

**Residential and Individual Home Supports:**

Ind. #	Ind.	Loc. or Individ.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L1	Abuse/neglect training	I	8/8	2/2	4/4		3/3		17/17	Met
L5	Safety Plan	L	8/8	2/2	4/4		1/1		15/15	Met
℞ L6	Evacuation	L	8/8	2/2	4/4		1/1		15/15	Met
L7	Fire Drills	L	8/8				1/1		9/9	Met
L8	Emergency Fact Sheets	I	8/8	2/2	4/4		3/3		17/17	Met
L9 (07/21)	Safe use of equipment	I	8/8	2/2			3/3		13/13	Met
L10	Reduce risk interventions	I	4/4	1/1					5/5	Met
℞ L11	Required inspections	L	8/8	1/1	4/4		1/1		14/14	Met
℞ L12	Smoke detectors	L	8/8	1/1	4/4		1/1		14/14	Met
℞ L13	Clean location	L	8/8	1/1	3/4		1/1		13/14	Met (92.86%)
L14	Site in good repair	L	8/8	1/1	4/4		1/1		14/14	Met
L15	Hot water	L	8/8	1/1	3/4		1/1		13/14	Met (92.86%)
L16	Accessibility	L	8/8	1/1	4/4		1/1		14/14	Met
L17	Egress at grade	L	8/8	1/1	4/4		1/1		14/14	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	7/7	1/1	2/2				10/10	Met
L19	Bedroom location	L	8/8	1/1	2/2		1/1		12/12	Met
L20	Exit doors	L	8/8	1/1			1/1		10/10	Met
L21	Safe electrical equipment	L	8/8	1/1	4/4		1/1		14/14	Met
L22	Well-maintained appliances	L	8/8	1/1	4/4		1/1		14/14	Met
L23	Egress door locks	L	4/4	1/1			1/1		6/6	Met
L24	Locked door access	L	7/7	0/1	4/4		1/1		12/13	Met (92.31%)
L25	Dangerous substances	L	8/8	1/1			1/1		10/10	Met
L26	Walkway safety	L	8/8	1/1	4/4		1/1		14/14	Met
L27	Pools, hot tubs, etc.	L	2/2		1/2				3/4	Met
L28	Flammables	L	8/8	1/1			1/1		10/10	Met
L29	Rubbish/combustibles	L	8/8	1/1	4/4		1/1		14/14	Met
L30	Protective railings	L	8/8	1/1	4/4		1/1		14/14	Met
L31	Communication method	I	8/8	2/2	4/4		3/3		17/17	Met

Ind. #	Ind.	Loc. or Indiv	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L32	Verbal & written	I	8/8	2/2	4/4		3/3		17/17	Met
L33	Physical exam	I	8/8	2/2	4/4		3/3		17/17	Met
L34	Dental exam	I	7/8	2/2	3/4		3/3		15/17	Met (88.24 %)
L35	Preventive screenings	I	7/7	1/2	3/3		3/3		14/15	Met (93.33 %)
L36	Recommended tests	I	5/7	2/2	4/4		3/3		14/16	Met (87.50 %)
L37	Prompt treatment	I	8/8	2/2	4/4		3/3		17/17	Met
Ⓡ L38	Physician's orders	I	6/7				3/3		9/10	Met (90.0 %)
L39	Dietary requirements	I	4/6				1/1		5/7	Not Met (71.43 %)
L40	Nutritional food	L	8/8	1/1			1/1		10/10	Met
L41	Healthy diet	L	8/8	2/2	4/4		1/1		15/15	Met
L42	Physical activity	L	8/8	2/2	4/4		1/1		15/15	Met
L43	Health Care Record	I	7/8	1/2	2/3		2/3		12/16	Not Met (75.00 %)
L44	MAP registration	L	8/8	1/1			1/1		10/10	Met
L45	Medication storage	L	8/8	1/1			1/1		10/10	Met
Ⓡ L46	Med. Administration	I	8/8	1/1	4/4		3/3		16/16	Met
L47	Self medication	I	2/2	1/1	1/1				4/4	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L49	Informed of human rights	I	8/8	2/2	4/4		3/3		17/17	Met
L50 (07/21)	Respectful Comm.	I	8/8	2/2	4/4		3/3		17/17	Met
L51	Possessions	I	8/8	2/2	4/4		3/3		17/17	Met
L52	Phone calls	I	8/8	2/2	4/4		3/3		17/17	Met
L53	Visitation	I	8/8	2/2	4/4		3/3		17/17	Met
L54 (07/21)	Privacy	I	8/8	2/2	4/4		3/3		17/17	Met
L55	Informed consent	I	2/2		1/1		1/1		4/4	Met
L56	Restrictive practices	I	1/1				1/1		2/2	Met
L57	Written behavior plans	I	2/2						2/2	Met
L60	Data maintenance	I	2/2						2/2	Met
L61	Health protection in ISP	I	4/5				3/3		7/8	Met (87.50%)
L63	Med. treatment plan form	I	8/8	1/1	3/4		3/3		15/16	Met (93.75%)
L64	Med. treatment plan rev.	I	8/8	1/1	3/3		3/3		15/15	Met
L67	Money mgmt. plan	I	7/8	1/1	3/4		2/3		13/16	Met (81.25%)

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L68	Funds expenditure	I	8/8	1/1	2/3		2/2		13/14	Met (92.86%)
L69	Expenditure tracking	I	8/8	1/1	3/3		2/2		14/14	Met
L70	Charges for care calc.	I	8/8		4/4		3/3		15/15	Met
L71	Charges for care appeal	I	8/8		4/4		3/3		15/15	Met
L77	Unique needs training	I	8/8	2/2	4/4		3/3		17/17	Met
L78	Restrictive Int. Training	L	3/3						3/3	Met
L79	Restraint training	L	4/4						4/4	Met
L80	Symptoms of illness	L	8/8	2/2	4/4		1/1		15/15	Met
L81	Medical emergency	L	8/8	2/2	4/4		1/1		15/15	Met
L82	Medication admin.	L	8/8	1/1			1/1		10/10	Met
L84	Health protect. Training	I	4/5				3/3		7/8	Met (87.50%)
L85	Supervision	L	8/8	2/2	4/4		1/1		15/15	Met
L86	Required assessments	I	4/8	1/2	3/3		3/3		11/16	Not Met (68.75%)
L87	Support strategies	I	4/8	2/2	2/3		3/3		11/16	Not Met (68.75%)

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L88	Strategies implemented	I	8/8	2/2	4/4		3/3		17/17	Met
L89	Complaint and resolution process	L					1/1		1/1	Met
L90	Personal space/bedroom privacy	I	8/8	2/2	3/4		3/3		16/17	Met (94.12%)
L91	Incident management	L	1/8	1/2	4/4		0/1		6/15	Not Met (40.0%)
L93 (05/22)	Emergency back-up plans	I	8/8	1/2	4/4		3/3		16/17	Met (94.12%)
L94 (05/22)	Assistive technology	I	7/8	2/2	4/4		3/3		16/17	Met (94.12%)
L96 (05/22)	Staff training in devices and applications	I	7/7	1/1	2/2				10/10	Met
L99 (05/22)	Medical monitoring devices	I	4/5						4/5	Met (80.0%)
<b>#Std. Met/# 80 Indicator</b>									<b>75/80</b>	
<b>Total Score</b>									<b>83/88</b>	
									<b>94.32%</b>	

**Employment and Day Supports:**

<b>Ind. #</b>	<b>Ind.</b>	<b>Loc. or Indiv.</b>	<b>Emp. Sup.</b>	<b>Cent. Based Work</b>	<b>Com. Based Day</b>	<b>Total Met / Rated</b>	<b>Rating</b>
L1	Abuse/neglect training	I	9/9		7/7	<b>16/16</b>	<b>Met</b>
L5	Safety Plan	L			1/1	<b>1/1</b>	<b>Met</b>
℞ L6	Evacuation	L			1/1	<b>1/1</b>	<b>Met</b>
L7	Fire Drills	L			1/1	<b>1/1</b>	<b>Met</b>
L8	Emergency Fact Sheets	I	9/9		6/7	<b>15/16</b>	<b>Met (93.75 %)</b>
L9 (07/21)	Safe use of equipment	I	2/9		1/7	<b>3/16</b>	<b>Not Met (18.75 %)</b>
L10	Reduce risk interventions	I	1/1		7/7	<b>8/8</b>	<b>Met</b>
℞ L11	Required inspections	L			1/1	<b>1/1</b>	<b>Met</b>
℞ L12	Smoke detectors	L			1/1	<b>1/1</b>	<b>Met</b>
℞ L13	Clean location	L			1/1	<b>1/1</b>	<b>Met</b>
L14	Site in good repair	L			1/1	<b>1/1</b>	<b>Met</b>
L15	Hot water	L			1/1	<b>1/1</b>	<b>Met</b>
L16	Accessibility	L			1/1	<b>1/1</b>	<b>Met</b>
L17	Egress at grade	L			1/1	<b>1/1</b>	<b>Met</b>
L20	Exit doors	L			1/1	<b>1/1</b>	<b>Met</b>
L21	Safe electrical equipment	L			1/1	<b>1/1</b>	<b>Met</b>
L22	Well-maintained appliances	L			1/1	<b>1/1</b>	<b>Met</b>
L25	Dangerous substances	L			1/1	<b>1/1</b>	<b>Met</b>
L26	Walkway safety	L			1/1	<b>1/1</b>	<b>Met</b>
L28	Flammables	L			1/1	<b>1/1</b>	<b>Met</b>
L29	Rubbish/combustibles	L			1/1	<b>1/1</b>	<b>Met</b>
L31	Communication method	I	9/9		7/7	<b>16/16</b>	<b>Met</b>

<b>Ind. #</b>	<b>Ind.</b>	<b>Loc. or Individ.</b>	<b>Emp. Sup.</b>	<b>Cent. Based Work</b>	<b>Com. Based Day</b>	<b>Total Met / Rated</b>	<b>Rating</b>
L32	Verbal & written	I	9/9		7/7	16/16	Met
L37	Prompt treatment	I	9/9		7/7	16/16	Met
Ⓡ L38	Physician's orders	I	2/3		6/6	8/9	Met (88.89 %)
L44	MAP registration	L			1/1	1/1	Met
L45	Medication storage	L			1/1	1/1	Met
Ⓡ L46	Med. Administration	I			6/6	6/6	Met
L49	Informed of human rights	I	9/9		7/7	16/16	Met
L50 (07/21)	Respectful Comm.	I	9/9		7/7	16/16	Met
L51	Possessions	I	9/9		7/7	16/16	Met
L52	Phone calls	I	9/9		7/7	16/16	Met
L54 (07/21)	Privacy	I	9/9		7/7	16/16	Met
L55	Informed consent	I	1/1			1/1	Met
L57	Written behavior plans	I	1/1		3/3	4/4	Met
L60	Data maintenance	I	1/1		3/3	4/4	Met
L63	Med. treatment plan form	I			1/1	1/1	Met
L64	Med. treatment plan rev.	I			1/1	1/1	Met
L77	Unique needs training	I	9/9		7/7	16/16	Met
L78	Restrictive Int. Training	L	1/1		1/1	2/2	Met
L79	Restraint training	L	1/1		1/1	2/2	Met
L80	Symptoms of illness	L	1/1		1/1	2/2	Met
L81	Medical emergency	L	1/1		1/1	2/2	Met
Ⓡ L82	Medication admin.	L			1/1	1/1	Met

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L85	Supervision	L	1/1		1/1	2/2	Met
L86	Required assessments	I	1/8		3/6	4/14	Not Met (28.57 %)
L87	Support strategies	I	3/8		3/6	6/14	Not Met (42.86 %)
L88	Strategies implemented	I	9/9		7/7	16/16	Met
L91	Incident management	L	1/1		0/1	1/2	Not Met (50.0 %)
L93 (05/22)	Emergency back-up plans	I	9/9		7/7	16/16	Met
L94 (05/22)	Assistive technology	I	2/9		1/7	3/16	Not Met (18.75 %)
L99 (05/22)	Medical monitoring devices	I			3/3	3/3	Met
<b>#Std. Met/# 52 Indicator</b>						<b>47/52</b>	
<b>Total Score</b>						<b>56/61</b>	
						<b>91.80%</b>	

## 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	8/8	Met

### Residential Services

Indicator #	Indicator	Met/Rated	Rating
C8	Family/guardian communication	8/8	Met
C9	Personal relationships	8/8	Met
C10	Social skill development	8/8	Met
C11	Get together w/family & friends	8/8	Met
C12	Intimacy	8/8	Met
C13	Skills to maximize independence	8/8	Met
C14	Choices in routines & schedules	8/8	Met
C15	Personalize living space	8/8	Met
C16	Explore interests	7/8	Met (87.50 %)
C17	Community activities	7/8	Met (87.50 %)
C18	Purchase personal belongings	8/8	Met
C19	Knowledgeable decisions	8/8	Met
C46	Use of generic resources	7/8	Met (87.50 %)
C47	Transportation to/ from community	8/8	Met
C48	Neighborhood connections	8/8	Met
C49	Physical setting is consistent	7/8	Met (87.50 %)
C51	Ongoing satisfaction with services/ supports	8/8	Met
C52	Leisure activities and free-time choices /control	8/8	Met
C53	Food/ dining choices	8/8	Met

### ABI-MFP Residential Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	3/3	Met
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

### ABI-MFP Residential Services

Indicator #	Indicator	Met/Rated	Rating
C15	Personalize living space	1/1	<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>
C49	Physical setting is consistent	1/1	<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>

### Individual Home Supports

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	0/2	<b>Not Met (0 %)</b>
C8	Family/guardian communication	2/2	<b>Met</b>
C9	Personal relationships	2/2	<b>Met</b>
C10	Social skill development	2/2	<b>Met</b>
C11	Get together w/family & friends	2/2	<b>Met</b>
C12	Intimacy	2/2	<b>Met</b>
C13	Skills to maximize independence	2/2	<b>Met</b>
C14	Choices in routines & schedules	2/2	<b>Met</b>
C15	Personalize living space	1/1	<b>Met</b>
C16	Explore interests	2/2	<b>Met</b>
C17	Community activities	2/2	<b>Met</b>
C18	Purchase personal belongings	2/2	<b>Met</b>
C19	Knowledgeable decisions	2/2	<b>Met</b>
C21	Coordinate outreach	2/2	<b>Met</b>
C46	Use of generic resources	2/2	<b>Met</b>

### Individual Home Supports

<b>Indicator #</b>	<b>Indicator</b>	<b>Met/Rated</b>	<b>Rating</b>
C47	Transportation to/ from community	2/2	<b>Met</b>
C48	Neighborhood connections	2/2	<b>Met</b>
C49	Physical setting is consistent	2/2	<b>Met</b>
C51	Ongoing satisfaction with services/ supports	2/2	<b>Met</b>
C52	Leisure activities and free-time choices /control	2/2	<b>Met</b>
C53	Food/ dining choices	2/2	<b>Met</b>