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|  | |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  | |  | | --- | | **Provider:** | | |  | | --- | | PEOPLE INC | |  | |  | | --- | | **Provider Address:** | | |  | | --- | | 4 South Main St , Fall River | |  | |  |  |  |  |  |  |  | |  | |  | | --- | | **Name of Person Completing Form:** | | |  | | --- | | Jerilyn Ingham | |  | |  | | --- | | **Date(s) of Review:** | | |  | | --- | | 09-SEP-21 to 15-SEP-21 | |  | |  |
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| |  |  |  | | --- | --- | --- | | **Follow-up Scope and results :** |  |  | | Service Grouping | Licensure level and duration | # Indicators std. met/ std. rated | | Employment and Day Supports | 2 Year License | 1/1 | |  |  |  | | |  |

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| |  | | --- | | **Summary of Ratings** | |  |
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| |  |  | | --- | --- | |  |  | | |  |  | | --- | --- | | **Employment and Day Supports Areas Needing Improvement on Standard not met - Identified by DDS** | | | **Indicator #** | L88 | | **Indicator** | Strategies implemented | | **Area Need Improvement** | For two of six individuals, data was not being collected to show support strategies were being implemented. | | **Process Utilized to correct and review indicator** | Process Utilized to correct and review indicator Direct support staff were trained on completing data sheets. The employment specialists will collect data sheets on the 1st of each month for the previous month. | | **Status at follow-up** | All individuals have data sheets for ISP goals | | **Rating** | Met | |  | |  |  | | |