



**PROVIDER REPORT  
FOR**

**Riverside Community Care,  
Inc.  
270 Bridge Street, #301  
Dedham, MA 02026**

**September 12, 2025**

**Version**

**Public Provider Report**

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

# **SUMMARY OF OVERALL FINDINGS**

**Provider** Riverside Community Care, Inc.

**Review Dates** 8/11/2025 - 8/15/2025

**Service Enhancement Meeting Date** 8/29/2025

**Survey Team** Cristina Calderon  
Mark Boghoian (TL)  
David Bullard  
Melanie Cruz  
Cheryl Hampton  
Melanie Hutchison  
Lisa MacPhail  
Marie Fabiola Louis-Disla  
Dumitru Condratchi

**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>	17 location (s) 21 audit (s)	Full Review	72/89 Defer Licensure		95 / 102 Certified
Residential Services	5 location(s) 5 audit (s)			Full Review	18 / 20
ABI-MFP Residential Services	3 location(s) 6 audit (s)			Full Review	17 / 20
Placement Services	4 location(s) 4 audit (s)			Full Review	19 / 20
ABI-MFP Placement Services	3 location(s) 4 audit (s)			Full Review	20 / 20
Individual Home Supports	2 location(s) 2 audit (s)			Full Review	15 / 16
Planning and Quality Management				Full Review	6 / 6

## **EXECUTIVE SUMMARY :**

Riverside Community Care Inc. is a human services agency based in Dedham, Massachusetts. The agency provides a wide range of services including adult disabilities services, mental health counseling, and services to children, youth, adults, and families across the Metro-Boston, Northeast and Southeast regions of Massachusetts. The organization provides adult residential services, that include; twenty-four-hour residential supports for those with Intellectual Disability/Developmental Disability (ID/DD) and Acquired Brain Injury (ABI), shared living/placement services (including ABI placement services) and Individual Home Supports (IHS) for individuals diagnosed with ID/DD and ABI.

For this 2025 Department of Developmental Services (DDS) Licensing and Certification Survey, the agency underwent a full licensing and certification review conducted by the DDS Metro Region Office of Quality Enhancement. The scope of the survey included a review of the agency's organizational systems and supports offered in its twenty-four-hour ID/DD and ABI residential programs, IHS, and ID/DD and ABI placement homes.

Organizationally, Riverside Community Care had systems in place to ensure qualified staffing, adequate training, data-driven oversight, and stakeholder involvement. The agency had a system to screen and hire qualified employees including licensed staff and maintained an effective process for tracking mandated trainings to ensure all staff completed requirements in human rights and abuse reporting. When allegations of abuse or neglect were made, the agency took precautionary measures to protect people's safety and was able to show evidence that corrective actions were implemented following investigations. In addition, the organization collected and analyzed data from various sources including HCSIS and from its internal programs to identify trends and inform decision making. The agency also conducted satisfaction surveys with stakeholders across all settings. Although most outcomes were positive, the satisfaction surveys prompted the agency to develop and implement a policy and procedures for covering site supervisory vacancies in an attempt to bolster increased communication with stakeholders and to increase program oversight. Moving forward, relative to ensuring people's human rights are safeguarded, the agency would benefit from ensuring that its Human Rights Committee remains fully constituted with all of the mandated members and it needs to review all topics that fall under the purview of the committee.

In general, across all residential settings, homes were clean and in good repair. Appliances and equipment were well maintained and functional. The agency ensured that locations had DDS authorized safety plans and that staff were trained to support individuals to evacuate in an emergency within the established timeframe. The agency assessed individuals relative to their safety within the home and their ability to utilize equipment. Staff communication with and about individuals was respectful, and the agency provided and provided information to individuals guardians regarding human rights and abuse reporting. Individuals had privacy within their homes, used various communication modalities to communicate with family and friends and were supported to maintain their own personal possessions.

In general, Riverside Community Care Inc. supported individuals to schedule and attend routine medical and dental appointments, and it supported and encouraged people to eat nutritional food and engage in physical activities. The agency also ensured that when individual behavioral supports were required, written plans were developed that contained the required components and data was collected and reviewed by an agency clinician overseeing the implementation of the plan. Similarly, when environmental restrictions at homes were in place the agency had developed plans that contained all required components and those plans received requisite approval by the agency's Human Rights Committee.

Moving forward, to ensure greater compliance with licensing indicators, Riverside Community Care Inc. would benefit by focusing on several areas. With respect to environmental/site based indicators,

the agency needs to ensure that at all locations, smoke and carbon monoxide detection systems are properly functioning and installed where required. The agency also needs to ensure that bedrooms containing an external means of egress do not have a lock on the interior door leading into the bedroom. The agency needs to make sure that water temperatures at all locations consistently remain within the established parameters. In addition, for homes that have swimming pools, the agency needs to implement and adhere to all aspects of the DDS Water Safety Policy as it pertains to each location.

To ensure greater compliance with individual-based licensing indicators the agency needs to focus on the following areas. The agency needs to ensure that medications are consistently administered in accordance with the prescribing practitioner's order and it needs to ensure that it advocates for people to receive recommended preventative healthcare screenings. The agency also needs to ensure that staff support individuals who are prescribed specialized diets to adhere to them. The agency needs to make sure that Emergency Fact Sheets and Health Care Records contain all of the required information and are updated as required. Timely submission of incident reports, ISP assessments and provider support strategies into HCSIS should also be a priority. In addition, staff need to support individuals to work toward the achievement of their identified ISP goals and document those efforts. Relative to money management, the agency needs to ensure that when it has a shared or delegated money management responsibility for an individual's funds, that money management plans are agreed to by the individual and/or guardian that identify the specific actions the agency will take to disseminate, safeguard and account for people's money in a manner that is transparent and in accordance with established accounting principles.

Relative to certification, across all settings, the agency supported people to live in homes that blended in with the neighborhoods they were part of and they were assisted to maintain relationships with family and friends, who were welcome to visit them. Individuals were also supported to personalize their own spaces and make choices about what they wanted to do at home in their leisure time. Individuals had access to the community through transportation provided by Riverside Community Care Inc, and they were able to access the community for the purpose of shopping, dining out and accessing various generic resources.

Although the agency had positively supported people in numerous areas related to certification, it could further support people in a few identified areas. The agency needs to ensure that across all settings, individuals are encouraged to provide input relative to the ongoing performance of those who provide support to them. In addition, within its twenty-four-hour supports, the agency could benefit by assisting people to explore their personal interests for engaging in both new and existing community-based interests and it would also benefit by ensuring that individuals are assessed relative to their desire for intimacy.

In summary, Riverside Community Care achieved a Licensing score of 81% and received a Not Met rating in two critical indicators L12 and L46; therefore, the agency's license will be deferred. The DDS Office of Quality Enhancement (OQE) will conduct a follow-up review within 60 days of the Service Enhancement Meeting (SEM) on all licensing indicators rated as Not Met, including the two critical indicators. To be issued a Two-Year License with a mid-cycle review, the agency must demonstrate at least 80% compliance within the critical indicators during the follow-up review. The agency is Certified with 93% of the certification indicators having received an overall rating of Met.

## LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
<b>Organizational</b>	7/8	1/8	
<b>Residential and Individual Home Supports</b>	65/81	16/81	
Residential Services Individual Home Supports ABI-MFP Placement Services Placement Services ABI-MFP Residential Services			
<b>Critical Indicators</b>	6/8	2/8	
<b>Total</b>	72/89	17/89	81%
<b>Defer Licensure</b>			
<b># indicators for 60 Day Follow-up</b>		17	

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

Indicator #	Indicator	Area Needing Improvement
L48	The agency has an effective Human Rights Committee.	The agency's Human Rights Committee did not have adequate representation from a medical professional, as required and the committee did not routinely review DPPC investigations. The agency needs to ensure that the committee is comprised with all of the required members and that it reviews all matters under its purview.

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

Indicator #	Indicator	Area Needing Improvement
L8	Emergency fact sheets are current and accurate and available on site.	Eight of twenty-one emergency fact sheets were missing required information. The agency needs to ensure that all emergency fact sheets contain all of the required information.
PL L12	Smoke detectors and carbon monoxide detectors, and other essential elements of the fire alarm system required for evacuation are located where required and are operational.	At four of fourteen locations elements essential to the fire alarm system were either not located where required or operational. The agency needs to ensure that all essential elements of fire alarm systems are operational and located where required.

**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 four of fifteen 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.
L23	There are no locks on bedroom doors that provide access to an egress.	At one of two locations where there were external means of egress from a bedroom, a locking door handle was contained on the interior door. The agency needs to ensure that there are no locks on bedroom doors that provide access to an egress.
L27	If applicable, swimming pools and other bodies of water are safe and secure according to policy.	At two locations where swimming pools were present, the agency did not ensure that the pools were secure, that caregivers had received requisite training in water safety, and individuals had not been assessed relative to their individualized water safety skills. The agency needs to ensure that where swimming pools and bodies of water are present, DDS Water Safety guidelines are adhered to, inclusive of physical environmental safety measures, water safety training for support staff, and water safety assessment for each individual.
L35	Individuals receive routine preventive screenings.	Eight of eighteen 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 gender.
L43	The health care record is maintained and updated as required.	Seven of twenty-one Health Care Records were not updated and maintained as required. The agency needs to ensure Health Care Records are maintained and updated as required.
L46	All prescription medications are administered according to the written order of a practitioner and are properly documented on a Medication Treatment Chart.	Four of seventeen individuals were not administered medication in accordance with the written order of their practitioner. The agency needs to ensure that all medications are administered in accordance with the written order of the prescribing practitioner.
L55	Informed consent is obtained from individuals or their guardians when required; Individuals or their guardians know that they have the right to withdraw consent.	For two of six individuals, the signed media release consent did not specify the ways that individuals and guardians can limit their consent. The agency's media consent form must clearly explain that an individuals and guardian can choose to limit the individual's personal information used and limit how it is used.

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

Indicator #	Indicator	Area Needing Improvement
L67	There is a written plan in place accompanied by a training plan when the agency has shared or delegated money management responsibility.	For six of sixteen individuals where the agency had a shared or delegated money management responsibility, written plans did not contain all required components, for example, clearly identifying parameters on the amounts of money the person could hold, and containing teaching strategies for identified goals relative to supporting individuals to increase their money management skills. The agency needs to develop funds-management plans that outline the roles and responsibilities of the agency in supporting individuals to manage and spend their personal funds. The agency needs to ensure that plans are individualized, and if supported by the individual's ISP, they need to include a training plan to reduce the need for assistance. Additionally, the agency needs to obtain annual written agreement from the individual or his/her guardian, on each funds management plan.
L69	Individual expenditures are documented and tracked.	For four of fifteen individuals, expenditures were not documented and tracked in a clear and transparent manner. The agency needs to ensure that all expenditures are clearly documented and tracked in a transparent manner.
L86	Required assessments concerning individual needs and abilities are completed in preparation for the ISP.	Four of fifteen individuals' ISP assessments were not completed and submitted within the established timeline. The agency needs to ensure that it completes and submits ISP assessments at least 15 days prior to each ISP meeting.
L87	Support strategies necessary to assist an individual to meet their goals and objectives are completed and submitted as part of the ISP.	Four of sixteen individuals' ISP support strategies were not completed and submitted within the established timeline. The agency needs to ensure that it completes and submits ISP support strategies at least 15 days prior to each ISP meeting.
L88	Services and support strategies identified and agreed upon in the ISP for which the provider has designated responsibility are being implemented.	Five of nineteen individuals were not supported to work towards accomplishing their identified ISP goals through the implementation of support strategies identified and agreed upon in their ISP. The agency needs to ensure that staff implement identified support strategies to support individuals to achieve their identified goals, and that corresponding data collection is occurring in an ongoing and sustained manner.
L91	Incidents are reported and reviewed as mandated by regulation.	At seven of seventeen locations incidents were not reported and/or reviewed by the agency within the required timelines. The agency needs to ensure that all incidents are submitted and reviewed within the required timelines.

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

<b>Indicator #</b>	<b>Indicator</b>	<b>Area Needing Improvement</b>
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 one of two individuals who required the use of medical monitoring devices there was no written authorization for the use of the device. The agency needs to ensure that all medical monitoring devices are authorized and agreed to.

## **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>89/96</b>	<b>7/96</b>	
ABI-MFP Residential Services	17/20	3/20	
ABI-MFP Placement Services	20/20	0/20	
Individual Home Supports	15/16	1/16	
Residential Services	18/20	2/20	
Placement Services	19/20	1/20	
<b>Total</b>	<b>95/102</b>	<b>7/102</b>	<b>93%</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>
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.	For six of six individuals, the agency had not implemented a process to ensure that people had an opportunity to provide input relative to the performance of staff that support them. The agency needs to ensure that all individuals are offered the opportunity to provide ongoing input relative to the ongoing performance evaluation of their support staff.
C16	Staff (Home Providers) support individuals to explore, discover and connect with their interests for cultural, social, recreational and spiritual activities.	Four of six individuals were not fully supported to explore, define, and express their need for intimacy. The agency needs to ensure that all individuals are supported to explore, define and express their need for intimacy.
C17	Community activities are based on the individual's preferences and interests.	For two of six individuals, community activities were not based on their preferences and interests. The agency needs to ensure that community activities are based on each individual's preferences and interests.

**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.	For one of two individuals, the agency had not implemented a process to ensure that people had an opportunity to provide input relative to the performance of staff that support them. The agency needs to ensure that all individuals are offered the opportunity to provide ongoing input relative to the ongoing performance evaluation of their support staff.
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.	For two of three individuals, the agency had not implemented a process to ensure that people had an opportunity to provide input relative to the performance of staff that support them. The agency needs to ensure that all individuals are offered the opportunity to provide ongoing input relative to the ongoing performance evaluation of their caregivers.
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.	For two of five individuals, the agency had not implemented a process to ensure that each person had an opportunity to provide input relative to the performance of staff that support them. The agency needs to ensure that individuals are offered the opportunity to provide ongoing input relative to the ongoing performance evaluation of their staff.
C12	Individuals are supported to explore, define, and express their need for intimacy and companionship.	Two of five individuals were not fully supported to explore, define, and express their need for intimacy. The agency needs to ensure that all individuals are supported to explore, define and express their need for intimacy.

## MASTER SCORE SHEET LICENSURE

Organizational: Riverside Community Care, 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	13/15	Met(86.67 % )
L48	HRC	0/1	Not Met(0 % )
L74	Screen employees	11/11	Met
L75	Qualified staff	2/2	Met
L76	Track trainings	20/20	Met
L83	HR training	20/20	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	4/5	2/2	3/4		6/6	4/4	19/21	Met (90.48%)
L5	Safety Plan	L	5/5	2/2	4/4		3/3	3/3	17/17	Met
℞ L6	Evacuation	L	5/5	2/2	4/4		3/3	3/3	17/17	Met
L7	Fire Drills	L	4/5				3/3		7/8	Met (87.50%)
L8	Emergency Fact Sheets	I	4/5	2/2	2/4		4/6	1/4	13/21	Not Met (61.90%)
L9 (07/21)	Safe use of equipment	I	5/5	2/2			6/6		13/13	Met
L10	Reduce risk interventions	I						2/2	2/2	Met
℞ L11	Required inspections	L	5/5		4/4		2/3	2/3	13/15	Met (86.67%)
℞ L12	Smoke detectors	L	4/5		2/3		3/3	1/3	10/14	Not Met (71.43%)
℞ L13	Clean location	L	5/5		4/4		3/3	3/3	15/15	Met
L14	Site in good repair	L	5/5		4/4		3/3	3/3	15/15	Met
L15	Hot water	L	4/5		3/4		3/3	1/3	11/15	Not Met (73.33%)
L16	Accessibility	L	5/5		3/3		3/3	3/3	14/14	Met
L17	Egress at grade	L	5/5		4/4		3/3	3/3	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
L18	Above grade egress	L	3/3				1/1		4/4	Met
L19	Bedroom location	L	2/2				2/2		4/4	Met
L20	Exit doors	L	5/5				3/3		8/8	Met
L21	Safe electrical equipment	L	5/5		4/4		3/3	3/3	15/15	Met
L22	Well-maintained appliances	L	5/5				3/3		8/8	Met
L23	Egress door locks	L	0/1				1/1		1/2	Not Met (50.0%)
L24	Locked door access	L	4/5		4/4		2/3		10/12	Met (83.33%)
L25	Dangerous substances	L	5/5				3/3		8/8	Met
L26	Walkway safety	L	5/5		4/4		3/3	3/3	15/15	Met
L27	Pools, hot tubs, etc.	L						0/2	0/2	Not Met (0%)
L28	Flammables	L	5/5				2/2		7/7	Met
L29	Rubbish/combustibles	L	5/5		4/4		3/3	2/3	14/15	Met (93.33%)
L30	Protective railings	L	3/4		4/4		3/3	3/3	13/14	Met (92.86%)
L31	Communication method	I	5/5	2/2	4/4		6/6	4/4	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
L32	Verbal & written	I	5/5	2/2	4/4		6/6	4/4	21/21	Met
L33	Physical exam	I	5/5	2/2	3/3		6/6	4/4	20/20	Met
L34	Dental exam	I	5/5	2/2	3/3		6/6	4/4	20/20	Met
L35	Preventive screenings	I	3/5	2/2	2/2		3/6	1/3	11/18	Not Met (61.11%)
L36	Recommended tests	I	5/5	2/2	4/4		4/6	1/3	16/20	Met (80.0%)
L37	Prompt treatment	I	5/5	2/2	4/4		6/6	4/4	21/21	Met
℞ L38	Physician's orders	I	4/4		2/2		4/4	4/4	14/14	Met
L39	Dietary requirements	I	3/3		2/2		2/2	4/4	11/11	Met
L40	Nutritional food	L	5/5				3/3		8/8	Met
L41	Healthy diet	L	5/5	2/2	4/4		3/3	3/3	17/17	Met
L42	Physical activity	L	5/5	2/2	4/4		3/3	3/3	17/17	Met
L43	Health Care Record	I	4/5	2/2	3/4		4/6	2/4	15/21	Not Met (71.43%)
L44	MAP registration	L	5/5				3/3		8/8	Met
L45	Medication storage	L	5/5				3/3		8/8	Met
℞ L46	Med. Administration	I	5/5		3/3		2/6	3/3	13/17	Not Met (76.47%)
L47	Self medication	I	3/3	1/1	1/1		1/1	1/2	7/8	Met (87.50%)

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	4/5	2/2	3/4		6/6	4/4	19/21	Met (90.48%)
L50 (07/21)	Respectful Comm.	I	5/5	2/2	4/4		6/6	4/4	21/21	Met
L51	Possessions	I	5/5	2/2	4/4		6/6	3/4	20/21	Met (95.24%)
L52	Phone calls	I	5/5	2/2	4/4		6/6	4/4	21/21	Met
L53	Visitation	I	5/5	2/2	4/4		6/6	4/4	21/21	Met
L54 (07/21)	Privacy	I	5/5	2/2	4/4		6/6	4/4	21/21	Met
L55	Informed consent	I	1/3	1/1			1/1	1/1	4/6	Not Met (66.67%)
L56	Restrictive practices	I	2/2						2/2	Met
L57	Written behavior plans	I	3/3				1/1		4/4	Met
L60	Data maintenance	I	3/3				1/1		4/4	Met
L61	Health protection in ISP	I	2/3		3/3		6/6	3/4	14/16	Met (87.50%)
L62	Health protection review	I					1/1		1/1	Met
L63	Med. treatment plan form	I	5/5		4/4		3/6	4/4	16/19	Met (84.21%)
L64	Med. treatment plan rev.	I	3/4		3/3		3/5	4/4	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
L67	Money mgmt. plan	I	4/4		2/3		3/4	1/4	10/15	Not Met (66.67 %)
L68	Funds expenditure	I	4/4		2/3		4/4	4/4	14/15	Met (93.33 %)
L69	Expenditure tracking	I	3/4		2/3		2/4	4/4	11/15	Not Met (73.33 %)
L70	Charges for care calc.	I	5/5		1/3		5/5	4/4	15/17	Met (88.24 %)
L71	Charges for care appeal	I	5/5		3/3		6/6	3/4	17/18	Met (94.44 %)
L77	Unique needs training	I	5/5	2/2	4/4		6/6	3/4	20/21	Met (95.24 %)
L78	Restrictive Int. Training	L	3/3						3/3	Met
L79	Restraint training	L	2/2						2/2	Met
L80	Symptoms of illness	L	5/5	2/2	3/3		3/3	2/2	15/15	Met
L81	Medical emergency	L	5/5	2/2	4/4		3/3	3/3	17/17	Met
L82	Medication admin.	L	5/5				3/3		8/8	Met
L84	Health protect. Training	I	2/3		3/3		6/6	4/4	15/16	Met (93.75 %)
L85	Supervision	L	5/5	2/2	4/4		3/3	1/3	15/17	Met (88.24 %)
L86	Required assessments	I	3/4	1/1	1/1		2/5	4/4	11/15	Not Met (73.33 %)

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L87	Support strategies	I	3/4	2/2	1/1		2/5	4/4	12/16	Not Met (75.00%)
L88	Strategies implemented	I	4/5	2/2	2/2		2/6	4/4	14/19	Not Met (73.68%)
L89	Complaint and resolution process	L					3/3	3/3	6/6	Met
L90	Personal space/bedroom privacy	I	5/5		4/4		6/6	3/4	18/19	Met (94.74%)
L91	Incident management	L	0/5	2/2	4/4		1/3	3/3	10/17	Not Met (58.82%)
L93 (05/22)	Emergency back-up plans	I	5/5	2/2	4/4		6/6	4/4	21/21	Met
L94 (05/22)	Assistive technology	I	5/5	2/2	3/3		6/6	4/4	20/20	Met
L96 (05/22)	Staff training in devices and applications	I	5/5	1/1	2/2		4/4	3/3	15/15	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L99 (05/22)	Medical monitoring devices	1					1/1	0/1	1/2	Not Met (50.0 %)
<b>#Std. Met/#</b>									<b>65/81</b>	
<b>Indicator</b>										
<b>Total Score</b>									<b>72/89</b>	
									<b>80.90%</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	3/5	Not Met (60.0 %)
C8	Family/guardian communication	5/5	Met
C9	Personal relationships	5/5	Met
C10	Social skill development	5/5	Met
C11	Get together w/family & friends	5/5	Met
C12	Intimacy	3/5	Not Met (60.0 %)

## Residential Services

Indicator #	Indicator	Met/Rated	Rating
C13	Skills to maximize independence	5/5	<b>Met</b>
C14	Choices in routines & schedules	5/5	<b>Met</b>
C15	Personalize living space	5/5	<b>Met</b>
C16	Explore interests	5/5	<b>Met</b>
C17	Community activities	5/5	<b>Met</b>
C18	Purchase personal belongings	5/5	<b>Met</b>
C19	Knowledgeable decisions	5/5	<b>Met</b>
C46	Use of generic resources	5/5	<b>Met</b>
C47	Transportation to/ from community	5/5	<b>Met</b>
C48	Neighborhood connections	5/5	<b>Met</b>
C49	Physical setting is consistent	5/5	<b>Met</b>
C51	Ongoing satisfaction with services/ supports	5/5	<b>Met</b>
C52	Leisure activities and free-time choices /control	5/5	<b>Met</b>
C53	Food/ dining choices	5/5	<b>Met</b>

## ABI-MFP Residential Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	0/6	<b>Not Met (0 %)</b>
C8	Family/guardian communication	6/6	<b>Met</b>
C9	Personal relationships	5/6	<b>Met (83.33 %)</b>
C10	Social skill development	6/6	<b>Met</b>
C11	Get together w/family & friends	6/6	<b>Met</b>
C12	Intimacy	6/6	<b>Met</b>
C13	Skills to maximize independence	6/6	<b>Met</b>
C14	Choices in routines & schedules	6/6	<b>Met</b>
C15	Personalize living space	3/3	<b>Met</b>
C16	Explore interests	2/6	<b>Not Met (33.33 %)</b>
C17	Community activities	4/6	<b>Not Met (66.67 %)</b>
C18	Purchase personal belongings	6/6	<b>Met</b>
C19	Knowledgeable decisions	6/6	<b>Met</b>

### ABI-MFP Residential Services

Indicator #	Indicator	Met/Rated	Rating
C46	Use of generic resources	6/6	<b>Met</b>
C47	Transportation to/ from community	6/6	<b>Met</b>
C48	Neighborhood connections	6/6	<b>Met</b>
C49	Physical setting is consistent	3/3	<b>Met</b>
C51	Ongoing satisfaction with services/ supports	6/6	<b>Met</b>
C52	Leisure activities and free-time choices /control	6/6	<b>Met</b>
C53	Food/ dining choices	6/6	<b>Met</b>

### Placement Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	1/3	<b>Not Met (33.33 %)</b>
C8	Family/guardian communication	4/4	<b>Met</b>
C9	Personal relationships	4/4	<b>Met</b>
C10	Social skill development	4/4	<b>Met</b>
C11	Get together w/family & friends	4/4	<b>Met</b>
C12	Intimacy	3/4	<b>Met</b>
C13	Skills to maximize independence	4/4	<b>Met</b>
C14	Choices in routines & schedules	4/4	<b>Met</b>
C15	Personalize living space	4/4	<b>Met</b>
C16	Explore interests	4/4	<b>Met</b>
C17	Community activities	4/4	<b>Met</b>
C18	Purchase personal belongings	4/4	<b>Met</b>
C19	Knowledgeable decisions	4/4	<b>Met</b>
C46	Use of generic resources	4/4	<b>Met</b>
C47	Transportation to/ from community	4/4	<b>Met</b>
C48	Neighborhood connections	4/4	<b>Met</b>
C49	Physical setting is consistent	4/4	<b>Met</b>
C51	Ongoing satisfaction with services/ supports	4/4	<b>Met</b>
C52	Leisure activities and free-time choices /control	4/4	<b>Met</b>

### Placement Services

Indicator #	Indicator	Met/Rated	Rating
C53	Food/ dining choices	4/4	Met

### ABI-MFP Placement Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	3/4	Met
C8	Family/guardian communication	4/4	Met
C9	Personal relationships	4/4	Met
C10	Social skill development	4/4	Met
C11	Get together w/family & friends	4/4	Met
C12	Intimacy	4/4	Met
C13	Skills to maximize independence	4/4	Met
C14	Choices in routines & schedules	4/4	Met
C15	Personalize living space	3/3	Met
C16	Explore interests	3/4	Met
C17	Community activities	3/4	Met
C18	Purchase personal belongings	4/4	Met
C19	Knowledgeable decisions	4/4	Met
C46	Use of generic resources	4/4	Met
C47	Transportation to/ from community	4/4	Met
C48	Neighborhood connections	3/4	Met
C49	Physical setting is consistent	3/3	Met
C51	Ongoing satisfaction with services/ supports	4/4	Met
C52	Leisure activities and free-time choices /control	4/4	Met
C53	Food/ dining choices	4/4	Met

### Individual Home Supports

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	1/2	Not Met (50.0 %)
C8	Family/guardian communication	2/2	Met
C9	Personal relationships	1/1	Met
C10	Social skill development	2/2	Met

## Individual Home Supports

<b>Indicator #</b>	<b>Indicator</b>	<b>Met/Rated</b>	<b>Rating</b>
C11	Get together w/family & friends	2/2	<b>Met</b>
C12	Intimacy	1/1	<b>Met</b>
C13	Skills to maximize independence	2/2	<b>Met</b>
C16	Explore interests	2/2	<b>Met</b>
C17	Community activities	2/2	<b>Met</b>
C18	Purchase personal belongings	1/1	<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>
C47	Transportation to/ from community	2/2	<b>Met</b>
C51	Ongoing satisfaction with services/ supports	2/2	<b>Met</b>
C52	Leisure activities and free-time choices /control	1/1	<b>Met</b>