



**PROVIDER REPORT
FOR
ROAD TO RESPONSIBILITY
1831 Ocean Street
Marshfield, MA 02050**

February 10, 2026

Version

Public Provider Report

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

SUMMARY OF OVERALL FINDINGS

Provider ROAD TO RESPONSIBILITY

Review Dates 1/7/2026 - 1/13/2026

Service Enhancement Meeting Date 1/27/2026

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Survey scope and findings for Residential and Individual Home Supports

Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Residential and Individual Home Supports	18 location (s) 21 audit (s)	Full Review	82/91 2 Year License 01/27/2026 - 01/27/2028		81 / 87 Certified 01/27/2026 - 01/27/2028
Residential Services	12 location (s) 12 audit (s)			Full Review	19 / 20
ABI-MFP Residential Services	1 location(s) 2 audit (s)			Full Review	20 / 20
Placement Services	3 location(s) 4 audit (s)			Full Review	16 / 20
Individual Home Supports	2 location(s) 3 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

Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Employment and Day Supports	4 location(s) 22 audit (s)	Full Review	61/71 2 Year License 01/27/2026 - 01/27/2028		35 / 42 Certified 01/27/2026 - 01/27/2028
Community Based Day Services	3 location(s) 11 audit (s)			Full Review	13 / 15
Employment Support Services	1 location(s) 11 audit (s)			Full Review	16 / 21
Planning and Quality Management (For all service groupings)				Full Review	6 / 6

EXECUTIVE SUMMARY :

Road to Responsibility, Inc. (RTR) is a Southeast-based private not for profit organization founded in 1988 which provides residential and community-based support and services to adults with developmental/ intellectual disabilities, acquired brain injury, autism spectrum and behavioral health needs. The agency's geographic service area includes the greater Southcoast, Boston Metro South, and Southeast regions. RTR services include 24-Hour Residential, ABI/MFP Residential, Placement, Individual Home Supports (IHS), Employment Services, and Community Based Day Services (CBDS).

As part of this 2025 licensing review, the Department of Developmental Services (DDS), Office of Quality Enhancement (OQE), conducted a full review of RTR's residential services which comprised 24-hour Residential, Individual Home Supports (IHS), 24-Hour ABI/MFP Residential Supports, and Placement Supports. Additionally, DDS conducted a full review of RTR's Community Based Day Services and Employment Support Services. Similarly, a full licensure and certification review of the agency's organizational indicators was also completed.

Organizationally, the agency demonstrated several areas of strength. In the domain of personal safety, the agency consistently identified and reported allegations of abuse and neglect which resulted in no evidence of unreported allegations. In the domain of human rights, the agency's committees maintained required membership, attendance, and quorum standards. In addition, all pertinent documentation was reviewed during the agency's Human Rights meetings. Similarly, in the domain of employee screening, the agency demonstrated to have had an effective system for screening and/or verifying prospective employees' credentials so as to ensure the agency was hiring competent staff.

Within certification indicators in the organizational level, the agency utilized multiple methods for collecting and analyzing data regarding the quality of their programs as well as collecting input aimed at an informed improvement of their services and with clear strategies to plan for the future. For example, data was collected from individuals served and their family members and/or guardians to further strengthen diversity of supports.

In Licensing, positive practices were noted within the agency's Residential Services (Residential, IHS, Placement, and ABI/MFP). In the domain of Environmental Safety, smoke detectors were fully functional, required heating inspections were current, and locations appeared to have been clean and well-maintained. In the health domain, medications were administered by MAP- certified staff in accordance with a physician's medical order. Similarly, staff demonstrated familiarity with the individuals' medical needs and consistently implemented established medical protocols. Additionally, individuals' dental exam appointments were regularly scheduled and kept.

The review of certification indicators for residential supports also demonstrated positive outcomes. In the domain of Choice and Growth, the review revealed the individuals freely exercised choice and control over their daily routines, which included a preference for what and when they ate, their preferred time to go to bed, and how they preferred to spend their leisure time. Also, staff implemented an array of communication modalities aiming at assisting the individuals verbalize their needs and wants. Such modalities included the utilization of an iPad and the PEC system. A strength that stood out was the extent to which the individuals were able to decorate their homes and bedrooms which resulted in the reflection of their own personal preferences. The individuals' bedrooms included personal photos, preferred sport teams memorabilia, and bedding of their choosing. Additionally, residential staff planned individualized community activities. Lastly, supervision and oversight of residential homes showed consistency with staff meetings happening regularly and minutes showing substance and focusing on individual care.

The employment and CBDS programs also showed strengths across several licensing areas. In the

health domain, staff demonstrated consistency collecting and analyzing data for intensive and/or targeted PBS plans. Additionally, medications were given as ordered and all staff were duly certified to administer the medications. When significant medical needs warranted a healthcare protocol all components were present, and staff were trained on the required actions steps. Individuals with dietary requirements were supported to follow recommendations made by a health care provider. Lastly, Staff were aware of individuals' unique needs resulting in supports that were individualized to each person served.

Within the certification indicators, the agency demonstrated consistent practices at the employment and CBDS sites. In the choice domain, the individuals participated in meaningful and satisfying activities, with a variety of in-house and community-based options available each day based on their interests and preferences. Community activities were varied, person-centered, and supported individuals in building connections with others. Additionally, the individuals were supported to maintain and enhance interpersonal relationships. Lastly, written and oral communication were reviewed and/or deemed to be respectful.

The review also identified several areas that need strengthening. Organizationally, the agency needs to ensure that all staff receive the mandated DDS trainings including Health Observation guidelines. In addition, the agency needs to ensure that action plans for investigations are completed and that documentation is submitted within the established timelines.

Within the residential services, the survey revealed areas where improvement is needed. In the personal safety domain, the agency must ensure that water safety training be provided to all staff escorting individuals to a body of water including swimming pools. In the health domain, the agency must ensure that special dietary requirements are followed and staff are appropriately trained. Similarly, the agency must ensure that health care records are updated and maintained as required per DDS regulations. Additionally, the agency needs to ensure that health-related supports and medical monitoring devices are authorized by a Health Care Provider with completion of all required components. Lastly, the agency must ensure that incidents are reported and reviewed as mandated by DDS regulations.

Certification indicators that revealed a need for improvement in the residential area include affording the opportunity for the individuals to develop or increase personal relationships, exploring community activities based on the individuals' preferences and/or interests as well as gaining the individuals to provide feedback on staff at the time of hiring and on an ongoing basis.

Within the licensing and certification indicators in the employment and CBDS programs, the survey revealed additional areas needing improvement. Within the domain of safety, all incidents must be reported and finalized within the required timelines. Within the domain of career planning and development, for individuals who are actively seeking employment or are employed, each individual requires a written plan that addresses their career goals and potential support needs. Additionally, individuals were not consistently educated on benefits and worker rights related to their jobs. For individuals who are on a pathway to employment, there needs to be a written plan that describes their employment goals, their strengths and support needs, and have specific habilitative and behavioral goals that support the person to move towards employment.

Within all residential services, RTR received a rating of Met in 90% of licensing indicators including all critical indicators and will receive a two- year license for the residential service grouping. Follow-up on all licensing indicators that were Not Met during the survey will be completed by RTR and submitted to OQE within 60 days of the Service Enhancement Meeting. This service grouping is certified with 93% of certification indicators met.

The Employment and Day Supports service grouping will receive a Two-Year License, having met 86% of licensing indicators. OQE will also conduct a follow-up review within 60 days of the SEM on all indicators rated as Not Met. This service grouping is also certified with 83% of certification indicators met.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	9/10	1/10	
Residential and Individual Home Supports	73/81	8/81	
Residential Services Individual Home Supports Placement Services ABI-MFP Residential Services			
Critical Indicators	8/8	0/8	
Total	82/91	9/91	90%
2 Year License			
# indicators for 60 Day Follow-up		9	

	Met / Rated	Not Met / Rated	% Met
Organizational	10/11	1/11	
Employment and Day Supports	51/60	9/60	
Community Based Day Services Employment Support Services			
Critical Indicators	8/8	0/8	
Total	61/71	10/71	86%
2 Year License			
# indicators for 60 Day Follow-up		10	

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

Indicator #	Indicator	Area Needing Improvement
L4	Action is taken when an individual is subject to abuse or neglect.	For five of fifteen sampled investigations, documentation verifying completion of action plan items had not been submitted within the required timelines. The agency needs to ensure that action plans for investigations are completed and that documentation is submitted within the established timelines.

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

Indicator #	Indicator	Area Needing Improvement
L27	If applicable, swimming pools and other bodies of water are safe and secure according to policy.	At one location, staff who escorted individuals to a local indoor pool were not trained in water safety. The agency needs to ensure that water safety training is provided to all staff who escort/supervise individuals while swimming.
L39	Special dietary requirements are followed.	For two out of eight individuals, special dietary requirements were not followed and/or staff had not been trained on those special diets. The agency needs to ensure that special dietary requirements are followed and that staff are trained on the individuals' dietary needs.
L43	The health care record is maintained and updated as required.	The health care record for eight of twenty-one individuals reviewed did not contain the most updated information. The agency needs to ensure that health care records are maintained and kept up to date.
L61	Supports and health related protections are included in ISP assessments and the continued need is outlined.	For three of eight individuals, supports and health-related protections were not authorized or were not utilized appropriately. The agency needs to ensure that health-related supports and protective equipment are authorized with completion of required components.
L80	Support staff are trained to recognize signs and symptoms of illness.	The agency was not using the appropriate Health Observations Guidelines curriculum when training staff on Signs and Symptoms of Illness. The agency needs to ensure the correct curriculum is used and that all staff are subsequently trained.
L84	Staff / care providers are trained in the correct utilization of health related protections per regulation.	For two of eight individuals, staff had not received training in the proper application of their health-related protective equipment. The agency needs to ensure all staff are trained in the correct utilization of all health-related protective equipment.
L91	Incidents are reported and reviewed as mandated by regulation.	Incident report filing for seven of sixteen individuals were not created and/or finalized within the required timelines. The agency needs to ensure to create and finalize incident reports within the required timelines.
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 three out of four individuals, medical authorization had not been obtained for their medical monitoring devices. The agency needs to ensure that authorization is obtained for all such devices, that instructions are clear for use/care of the device, and that data is collected as needed.

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

Indicator #	Indicator	Area Needing Improvement
L5	There is an approved safety plan in home and work locations.	At one location, 58% of the staff were trained on the safety plan. The agency needs to ensure that all staff are trained on the safety plan.
L7	Fire drills are conducted as required.	In two out of three locations, fire drills were completed but did not specify the time it took to evacuate the building. In one location, the fire drills did not list the staff who participated in the fire drills, it could not be determined if the fire drills were completed at minimum ratios. The agency needs to ensure all fire drills are run at the minimum staff ratios and documented appropriately.
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 four of 19 individuals, the authorized consent for the release of photographs did not contain the purpose of the publication. The agency must ensure to identify the purpose of the publication of photographs when obtaining consent.
L78	Staff are trained to safely and consistently implement restrictive interventions.	In one out of two locations, staff were not trained on how to safely and consistently implement restrictive interventions. The agency needs to ensure that all staff are trained in restrictive interventions.
L79	Staff are trained in safe and correct administration of restraint.	In one out of three locations, staff were not trained in an individual's behavior support plan which included restrictive procedures. The agency needs to ensure staff are trained in safe and correct administration of restraint.
L80	Support staff are trained to recognize signs and symptoms of illness.	The agency was not using the appropriate Health Observations Guidelines curriculum when training staff on Signs and Symptoms of Illness. The agency needs to ensure the correct curriculum is used and that all staff are subsequently trained.
L86	Required assessments concerning individual needs and abilities are completed in preparation for the ISP.	For five of sixteen individuals, the submission of ISP assessments did not meet the required timelines. The agency needs to ensure to meet the required timelines of the ISP assessment.
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 seventeen individuals, the submission of ISP support strategies did not meet the required timelines. The agency needs to ensure to meet the required timelines of the ISP support strategies.
L91	Incidents are reported and reviewed as mandated by regulation.	Incident report filing for two of four locations were not created and/or finalized within the required timelines. The agency needs to ensure to create and finalize incident reports within the required timelines.

CERTIFICATION FINDINGS

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	6/6	0/6	
Residential and Individual Home Supports	75/81	6/81	
Placement Services	16/20	4/20	
ABI-MFP Residential Services	20/20	0/20	
Individual Home Supports	20/21	1/21	
Residential Services	19/20	1/20	
Total	81/87	6/87	93%
Certified			

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	6/6	0/6	
Employment and Day Supports	29/36	7/36	
Community Based Day Services	13/15	2/15	
Employment Support Services	16/21	5/21	
Total	35/42	7/42	83%
Certified			

Individual Home Supports- 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.	One out of three individuals reviewed were not given the opportunity to provide feedback on incoming staff or on staff on an ongoing basis. The agency needs to ensure that individuals are given the opportunity to provide their input on staff both at the time of hire and on an ongoing basis.

Individual Home Supports- Areas Needing Improvement on Standards not met:

Indicator #	Indicator	Area Needing Improvement
C9	Staff (Home Providers) act as bridge builders and provide opportunities to develop, and/or increase personal relationships and social contacts.	For two individuals, the home provider had not provided them with opportunities to develop, and/ or increase personal relationships and social contacts, the agency needs to ensure that individuals are supported to develop, and/ or increase personal relationships and social contacts.
C16	Staff (Home Providers) support individuals to explore, discover and connect with their interests for cultural, social, recreational and spiritual activities.	For two individuals, the home provider had not supported them to explore, discover, and connect with their interests for cultural, social, recreational, and spiritual activities. The Agency needs to ensure that individuals are supported to explore, discover and connect with their interest for cultural, social, recreational and spiritual activities.
C17	Community activities are based on the individual's preferences and interests.	For two individuals, the home provider had not supported them to participate in community of their preferences and interests. The agency needs to ensure that individuals are supported to participate in community activities of their preferences and interests.
C46	Staff (Home Providers) support individuals to learn about and use generic community resources.	For two individuals, the home provider had not provided the individuals with opportunities to learn about and/or use generic community resources. The agency needs to ensure that all individuals are afforded the opportunity to learn about and utilize generic community resources.
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.	Five out of twelve individuals reviewed were not given the opportunity to provide feedback on incoming staff or on staff on an ongoing basis. The agency needs to ensure that individuals are given the opportunity to provide their input on staff both at the time of hire and on an ongoing basis.

Community Based Day Services- Areas Needing Improvement on Standards not met:

Indicator #	Indicator	Area Needing Improvement
C38 (07/21)	Specific habilitative and behavioral goals necessary to prepare individuals for work are identified.	For four out of eleven individuals, habilitative and behavioral goals were not identified. The agency needs to ensure that individuals in CBDS services have a habilitative and/or behavioral goal identified to be supported on.
C39 (07/21)	There is a plan developed to identify job goals and support needs that would lead to movement into supported employment.	For four out of eleven individuals, there was no plan identified for job goals and supports needed for movement in employment. The agency needs to ensure that there are job goals and supports for all individuals in CBDS services.
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.	Three out of ten individuals reviewed were not given the opportunity to provide feedback on incoming staff or on staff on an ongoing basis. The agency needs to ensure that individuals are given the opportunity to provide their input on staff both at the time of hire and on an ongoing basis.
C24	There is a plan developed to identify job goals and support needs.	Seven out of nine individuals were not supported with a plan based on the individuals' skill set. The agency needs to ensure that the individuals are supported with an individualized plan that addresses the individuals' career goals and support needs.
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.	For eight individuals there was no information provided to individuals and/or family members on how current and future earnings will affect individual entitlements that allows them to work in the community. The agency needs to ensure that career planning includes information on how the individual's entitlements can be managed that enables them to work in the community.
C30	Individuals are supported to work in integrated job settings.	Four out of six people did not work in an integrated job setting. The agency needs to ensure individuals are supported to work in integrated job settings.

Community Based Day Services- Areas Needing Improvement on Standards not met:

Indicator #	Indicator	Area Needing Improvement
C33	Employee benefits and rights are clearly explained to the individual.	Five of the seven individuals were not aware they earned sick time benefits, nor were they aware where they could find this information. The agency needs to ensure individuals are familiar with their employee benefits and rights.

MASTER SCORE SHEET LICENSURE

Organizational: ROAD TO RESPONSIBILITY

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
L2	Abuse/neglect reporting	20/20	Met
L3	Immediate Action	14/15	Met(93.33 %)
L4	Action taken	10/15	Not Met(66.67 %)
L48	HRC	2/2	Met
L65	Restraint report submit	198/219	Met(90.41 %)
L66	HRC restraint review	172/174	Met(98.85 %)
L74	Screen employees	15/15	Met
L75	Qualified staff	4/4	Met
L76	Track trainings	19/20	Met(95.00 %)
L83	HR training	18/20	Met(90.0 %)
L92 (07/21)	Licensed Sub-locations (e/d).	1/1	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	12/12	3/3	4/4		2/2		21/21	Met
L5	Safety Plan	L	12/12	2/2	3/3		1/1		18/18	Met
℞ L6	Evacuation	L	12/12	2/2	3/3		1/1		18/18	Met
L7	Fire Drills	L	12/12				1/1		13/13	Met
L8	Emergency Fact Sheets	I	11/12	1/3	4/4		1/2		17/21	Met (80.95%)
L9 (07/21)	Safe use of equipment	I	12/12	3/3			2/2		17/17	Met
L10	Reduce risk interventions	I	2/2				1/1		3/3	Met
℞ L11	Required inspections	L	12/12	1/1	3/3		1/1		17/17	Met
℞ L12	Smoke detectors	L	12/12	2/2	3/3		1/1		18/18	Met
℞ L13	Clean location	L	12/12	2/2	3/3		1/1		18/18	Met
L14	Site in good repair	L	10/11	2/2	2/2		1/1		15/16	Met (93.75%)
L15	Hot water	L	11/12	2/2	3/3		1/1		17/18	Met (94.44%)
L16	Accessibility	L	12/12	2/2	2/2		1/1		17/17	Met
L17	Egress at grade	L	12/12	2/2			1/1		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	9/9	1/1	1/1		1/1		12/12	Met
L19	Bedroom location	L	6/6	1/1	1/1		1/1		9/9	Met
L20	Exit doors	L	12/12	2/2			1/1		15/15	Met
L21	Safe electrical equipment	L	12/12	2/2	3/3		1/1		18/18	Met
L22	Well-maintained appliances	L	12/12	2/2	3/3		1/1		18/18	Met
L23	Egress door locks	L	4/4				1/1		5/5	Met
L24	Locked door access	L	12/12	1/1	3/3		1/1		17/17	Met
L25	Dangerous substances	L	12/12	2/2			1/1		15/15	Met
L26	Walkway safety	L	10/12	2/2	3/3		1/1		16/18	Met (88.89%)
L27	Pools, hot tubs, etc.	L	0/1	1/1					1/2	Not Met (50.0%)
L28	Flammables	L	10/10	2/2			0/1		12/13	Met (92.31%)
L29	Rubbish/combustibles	L	11/12	2/2	3/3		1/1		17/18	Met (94.44%)
L30	Protective railings	L	12/12	2/2	3/3		1/1		18/18	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L31	Communication method	I	12/12	3/3	4/4		2/2		21/21	Met
L32	Verbal & written	I	12/12	3/3	4/4		2/2		21/21	Met
L33	Physical exam	I	12/12	3/3	3/4		2/2		20/21	Met (95.24 %)
L34	Dental exam	I	12/12	3/3	4/4		2/2		21/21	Met
L35	Preventive screenings	I	10/12	3/3	4/4		2/2		19/21	Met (90.48 %)
L36	Recommended tests	I	12/12	3/3	3/4		2/2		20/21	Met (95.24 %)
L37	Prompt treatment	I	12/12	3/3	4/4		2/2		21/21	Met
PL L38	Physician's orders	I	10/11	2/2	2/2		2/2		16/17	Met (94.12 %)
L39	Dietary requirements	I	6/8						6/8	Not Met (75.00 %)
L40	Nutritional food	L	12/12	2/2			1/1		15/15	Met
L41	Healthy diet	L	12/12	2/2	3/3		1/1		18/18	Met
L42	Physical activity	L	12/12	1/1	3/3		1/1		17/17	Met
L43	Health Care Record	I	9/12	0/3	4/4		0/2		13/21	Not Met (61.90 %)
L44	MAP registration	L	12/12	1/2			1/1		14/15	Met (93.33 %)
L45	Medication storage	L	12/12	2/2			1/1		15/15	Met
PL L46	Med. Administration	I	12/12	0/1	4/4		1/2		17/19	Met (89.47 %)

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L47	Self medication	I	2/2	2/3	1/1				5/6	Met (83.33%)
L49	Informed of human rights	I	9/12	3/3	4/4		2/2		18/21	Met (85.71%)
L50 (07/21)	Respectful Comm.	I	12/12	3/3	4/4		2/2		21/21	Met
L51	Possessions	I	12/12	3/3	4/4		2/2		21/21	Met
L52	Phone calls	I	11/12	3/3	4/4		2/2		20/21	Met (95.24%)
L53	Visitation	I	12/12	3/3	4/4		2/2		21/21	Met
L54 (07/21)	Privacy	I	12/12	3/3	4/4		2/2		21/21	Met
L55	Informed consent	I	4/4						4/4	Met
L56	Restrictive practices	I	5/5				1/1		6/6	Met
L57	Written behavior plans	I	7/7						7/7	Met
L60	Data maintenance	I	6/7						6/7	Met (85.71%)
L61	Health protection in ISP	I	5/6				0/2		5/8	Not Met (62.50%)
L62	Health protection review	I	1/1						1/1	Met
L63	Med. treatment plan form	I	9/11	1/1	3/3		1/1		14/16	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
L64	Med. treatment plan rev.	I	11/11	1/1	1/3		1/1		14/16	Met (87.50 %)
L67	Money mgmt. plan	I	10/12		3/3				13/15	Met (86.67 %)
L68	Funds expenditure	I	11/12		3/3				14/15	Met (93.33 %)
L69	Expenditure tracking	I	11/12		3/3				14/15	Met (93.33 %)
L70	Charges for care calc.	I	12/12		4/4		2/2		18/18	Met
L71	Charges for care appeal	I	12/12		4/4		2/2		18/18	Met
L77	Unique needs training	I	12/12	3/3	4/4		2/2		21/21	Met
L78	Restrictive Int. Training	L	3/3		2/2				5/5	Met
L79	Restraint training	L	4/5		2/2				6/7	Met (85.71 %)
L80	Symptoms of illness	L	0/12	0/2	0/3		0/1		0/18	Not Met (0 %)
L81	Medical emergency	L	12/12	2/2	3/3		1/1		18/18	Met
L82	Medication admin.	L	12/12	2/2			1/1		15/15	Met
L84	Health protect. Training	I	6/7				0/1		6/8	Not Met (75.00 %)
L85	Supervision	L	12/12	2/2	3/3		1/1		18/18	Met

Ind. #	Ind.	Loc. or Individ.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L86	Required assessments	I	9/10	1/2	3/3				13/15	Met (86.67%)
L87	Support strategies	I	9/10	1/2	3/3		2/2		15/17	Met (88.24%)
L88	Strategies implemented	I	11/11	2/2	4/4		2/2		19/19	Met
L89	Complaint and resolution process	L					1/1		1/1	Met
L90	Personal space/bedroom privacy	I	12/12	3/3	4/4		2/2		21/21	Met
L91	Incident management	L	6/10	0/2	3/3		0/1		9/16	Not Met (56.25%)
L93 (05/22)	Emergency back-up plans	I	12/12	3/3	4/4		2/2		21/21	Met
L94 (05/22)	Assistive technology	I	12/12	3/3	4/4		2/2		21/21	Met
L96 (05/22)	Staff training in devices and applications	I	7/7	3/3	3/3		2/2		15/15	Met

Ind. #	Ind.	Loc. or Individ.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L99 (05/22)	Medical monitoring devices	I	0/2		1/1		0/1		1/4	Not Met (25.00 %)
#Std. Met/# 81 Indicator									73/81	
Total Score									82/91	
									90.11%	

Employment and Day Supports:

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L1	Abuse/neglect training	I	11/11		9/11	20/22	Met (90.91 %)
L5	Safety Plan	L			2/3	2/3	Not Met (66.67 %)
℞ L6	Evacuation	L			3/3	3/3	Met
L7	Fire Drills	L			1/3	1/3	Not Met (33.33 %)
L8	Emergency Fact Sheets	I	10/11		9/11	19/22	Met (86.36 %)
L9 (07/21)	Safe use of equipment	I	11/11		11/11	22/22	Met
L10	Reduce risk interventions	I	1/1		8/8	9/9	Met
℞ L11	Required inspections	L			3/3	3/3	Met
℞ L12	Smoke detectors	L			3/3	3/3	Met
℞ L13	Clean location	L			3/3	3/3	Met
L14	Site in good repair	L			1/1	1/1	Met
L15	Hot water	L			3/3	3/3	Met

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L16	Accessibility	L			3/3	3/3	Met
L17	Egress at grade	L			3/3	3/3	Met
L20	Exit doors	L			3/3	3/3	Met
L21	Safe electrical equipment	L			3/3	3/3	Met
L22	Well-maintained appliances	L			3/3	3/3	Met
L25	Dangerous substances	L			3/3	3/3	Met
L26	Walkway safety	L			3/3	3/3	Met
L28	Flammables	L			2/2	2/2	Met
L29	Rubbish/combustibles	L			3/3	3/3	Met
L30	Protective railings	L			2/2	2/2	Met
L31	Communication method	I	11/11		11/11	22/22	Met
L32	Verbal & written	I	11/11		11/11	22/22	Met
L37	Prompt treatment	I	11/11		11/11	22/22	Met
℞ L38	Physician's orders	I	3/3		10/10	13/13	Met
L39	Dietary requirements	I			3/3	3/3	Met
L44	MAP registration	L			3/3	3/3	Met
L45	Medication storage	L			3/3	3/3	Met
℞ L46	Med. Administration	I	1/1		11/11	12/12	Met
L49	Informed of human rights	I	10/11		9/11	19/22	Met (86.36 %)
L50 (07/21)	Respectful Comm.	I	11/11		11/11	22/22	Met
L51	Possessions	I	11/11		11/11	22/22	Met
L52	Phone calls	I	11/11		11/11	22/22	Met

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L54 (07/21)	Privacy	I	11/11		11/11	22/22	Met
L55	Informed consent	I	7/9		8/10	15/19	Not Met (78.95 %)
L56	Restrictive practices	I	9/9		10/10	19/19	Met
L57	Written behavior plans	I	3/3		10/10	13/13	Met
L60	Data maintenance	I	2/2		11/11	13/13	Met
L61	Health protection in ISP	I	1/1		5/5	6/6	Met
L62	Health protection review	I	1/1		1/1	2/2	Met
L63	Med. treatment plan form	I			7/7	7/7	Met
L64	Med. treatment plan rev.	I			5/5	5/5	Met
L72	DOL requirements	I			1/1	1/1	Met
L77	Unique needs training	I	11/11		11/11	22/22	Met
L78	Restrictive Int. Training	L			1/2	1/2	Not Met (50.0 %)
L79	Restraint training	L			2/3	2/3	Not Met (66.67 %)
L80	Symptoms of illness	L	0/1		0/3	0/4	Not Met (0 %)
L81	Medical emergency	L	1/1		3/3	4/4	Met
Ⓜ L82	Medication admin.	L			3/3	3/3	Met
L84	Health protect. Training	I	1/1		5/5	6/6	Met
L85	Supervision	L	1/1		3/3	4/4	Met
L86	Required assessments	I	4/7		7/9	11/16	Not Met (68.75 %)
L87	Support strategies	I	5/7		7/10	12/17	Not Met (70.59 %)
L88	Strategies implemented	I	7/9		11/11	18/20	Met (90.0 %)

Ind. #	Ind.	Loc. or Indiv.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L91	Incident management	L	1/1		1/3	2/4	Not Met (50.0 %)
L93 (05/22)	Emergency back-up plans	I	11/11		11/11	22/22	Met
L94 (05/22)	Assistive technology	I	6/6		11/11	17/17	Met
L96 (05/22)	Staff training in devices and applications	I	1/1		7/7	8/8	Met
L99 (05/22)	Medical monitoring devices	I			1/1	1/1	Met
#Std. Met/# 60 Indicator						51/60	
Total Score						61/71	
						85.92%	

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	7/12	Not Met (58.33 %)
C8	Family/guardian communication	12/12	Met
C9	Personal relationships	12/12	Met
C10	Social skill development	12/12	Met

Residential Services

Indicator #	Indicator	Met/Rated	Rating
C11	Get together w/family & friends	12/12	Met
C12	Intimacy	12/12	Met
C13	Skills to maximize independence	12/12	Met
C14	Choices in routines & schedules	12/12	Met
C15	Personalize living space	12/12	Met
C16	Explore interests	12/12	Met
C17	Community activities	12/12	Met
C18	Purchase personal belongings	12/12	Met
C19	Knowledgeable decisions	12/12	Met
C46	Use of generic resources	12/12	Met
C47	Transportation to/ from community	12/12	Met
C48	Neighborhood connections	12/12	Met
C49	Physical setting is consistent	12/12	Met
C51	Ongoing satisfaction with services/ supports	12/12	Met
C52	Leisure activities and free-time choices /control	12/12	Met
C53	Food/ dining choices	12/12	Met

ABI-MFP Residential Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	2/2	Met
C8	Family/guardian communication	2/2	Met
C9	Personal relationships	2/2	Met
C10	Social skill development	2/2	Met
C11	Get together w/family & friends	2/2	Met
C12	Intimacy	2/2	Met
C13	Skills to maximize independence	2/2	Met
C14	Choices in routines & schedules	2/2	Met
C15	Personalize living space	1/1	Met
C16	Explore interests	2/2	Met
C17	Community activities	2/2	Met

ABI-MFP Residential Services

Indicator #	Indicator	Met/Rated	Rating
C18	Purchase personal belongings	2/2	Met
C19	Knowledgeable decisions	2/2	Met
C46	Use of generic resources	2/2	Met
C47	Transportation to/ from community	2/2	Met
C48	Neighborhood connections	2/2	Met
C49	Physical setting is consistent	1/1	Met
C51	Ongoing satisfaction with services/ supports	2/2	Met
C52	Leisure activities and free-time choices /control	2/2	Met
C53	Food/ dining choices	2/2	Met

Placement Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	4/4	Met
C8	Family/guardian communication	4/4	Met
C9	Personal relationships	2/4	Not Met (50.0 %)
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	2/4	Not Met (50.0 %)
C17	Community activities	2/4	Not Met (50.0 %)
C18	Purchase personal belongings	4/4	Met
C19	Knowledgeable decisions	4/4	Met
C46	Use of generic resources	2/4	Not Met (50.0 %)
C47	Transportation to/ from community	4/4	Met
C48	Neighborhood connections	4/4	Met
C49	Physical setting is consistent	3/3	Met
C51	Ongoing satisfaction with services/ supports	4/4	Met

Placement Services

Indicator #	Indicator	Met/Rated	Rating
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	2/3	Not Met (66.67 %)
C8	Family/guardian communication	3/3	Met
C9	Personal relationships	2/2	Met
C10	Social skill development	3/3	Met
C11	Get together w/family & friends	3/3	Met
C12	Intimacy	1/1	Met
C13	Skills to maximize independence	3/3	Met
C14	Choices in routines & schedules	1/1	Met
C15	Personalize living space	2/2	Met
C16	Explore interests	3/3	Met
C17	Community activities	3/3	Met
C18	Purchase personal belongings	3/3	Met
C19	Knowledgeable decisions	3/3	Met
C21	Coordinate outreach	3/3	Met
C46	Use of generic resources	3/3	Met
C47	Transportation to/ from community	3/3	Met
C48	Neighborhood connections	3/3	Met
C49	Physical setting is consistent	2/2	Met
C51	Ongoing satisfaction with services/ supports	3/3	Met
C52	Leisure activities and free-time choices /control	1/1	Met
C53	Food/ dining choices	1/1	Met

Community Based Day Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	11/11	Met
C8	Family/guardian communication	11/11	Met

Community Based Day Services

Indicator #	Indicator	Met/Rated	Rating
C13	Skills to maximize independence	11/11	Met
C37	Interpersonal skills for work	11/11	Met
C38 (07/21)	Habilitative & behavioral goals	7/11	Not Met (63.64 %)
C39 (07/21)	Support needs for employment	7/11	Not Met (63.64 %)
C40	Community involvement interest	11/11	Met
C41	Activities participation	11/11	Met
C42	Connection to others	11/11	Met
C43	Maintain & enhance relationship	11/11	Met
C44	Job exploration	11/11	Met
C45	Revisit decisions	11/11	Met
C46	Use of generic resources	11/11	Met
C47	Transportation to/ from community	11/11	Met
C51	Ongoing satisfaction with services/ supports	11/11	Met

Employment Support Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	7/10	Not Met (70.0 %)
C8	Family/guardian communication	11/11	Met
C22	Explore job interests	6/7	Met (85.71 %)
C23	Assess skills & training needs	6/7	Met (85.71 %)
C24	Job goals & support needs plan	2/9	Not Met (22.22 %)
C25	Skill development	5/5	Met
C26	Benefits analysis	0/8	Not Met (0 %)
C27	Job benefit education	5/5	Met
C28	Relationships w/businesses	1/1	Met
C29	Support to obtain employment	5/5	Met
C30	Work in integrated settings	2/6	Not Met (33.33 %)
C31	Job accommodations	1/1	Met
C32	At least minimum wages earned	7/7	Met
C33	Employee benefits explained	2/7	Not Met (28.57 %)
C34	Support to promote success	3/3	Met

Employment Support Services

Indicator #	Indicator	Met/Rated	Rating
C35	Feedback on job performance	5/5	Met
C36	Supports to enhance retention	2/2	Met
C37	Interpersonal skills for work	7/7	Met
C47	Transportation to/ from community	11/11	Met
C50	Involvement/ part of the Workplace culture	11/11	Met
C51	Ongoing satisfaction with services/ supports	11/11	Met