



**PROVIDER REPORT
FOR**

**THE SHARED LIVING
COLLABORATIVE
43 Highland Road
Merrimac, MA 01860**

June 09, 2023

Version

Public Provider Report

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

SUMMARY OF OVERALL FINDINGS

Provider THE SHARED LIVING COLLABORATIVE

Review Dates 4/12/2023 - 4/19/2023

Service Enhancement Meeting Date 5/2/2023

Survey Team Meagan Caccioppoli (TL)
Anne Carey
Cheryl Dolan
John Downing
Cheryl Hampton
Margareth Larrieux
Raquel Rodriguez

Citizen Volunteers

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 | 16 location(s) 17 audit (s) | Targeted Review | DDS 27/31 Provider 49 / 50 76 / 81 2 Year License 05/02/2023-05/02/2025 | | DDS 0 / 0 Provider 47 / 47 47 / 47 Certified 05/02/2023 - 05/02/2025 |
| Placement Services | 14 location(s) 15 audit (s) | | | DDS Targeted Review | 20 / 20 |
| Individual Home Supports | 2 location(s) 2 audit (s) | | | DDS Targeted Review | 21 / 21 |
| Planning and Quality Management (For all service groupings) | | | | DDS Targeted 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 | 1 location(s) 12 audit (s) | Targeted Review | DDS 15/15 Provider 58 / 58 73 / 73 2 Year License 05/02/2023-05/02/2025 | | DDS 5 / 8 Provider 29 / 33 34 / 41 Certified 05/02/2023 - 05/02/2025 |
| Community Based Day Services | 0 location(s) 7 audit (s) | | | DDS Targeted Review | 11 / 15 |
| Employment Support Services | 1 location(s) 5 audit (s) | | | DDS Targeted Review | 17 / 20 |
| Planning and Quality Management (For all service groupings) | | | | DDS Targeted Review | 6 / 6 |

EXECUTIVE SUMMARY :

The Shared Living Collaboration has been providing residential supports to adults with developmental disabilities in the Northeast region of Massachusetts since 2007. Current residential supports include Placement Services and Individual Home Supports, and day supports include Community Based Day and Employment Services.

Due to the results of the agency's 2021 survey, The Shared Living Collaborative was eligible and elected to complete a self-assessment for the current licensing cycle, with DDS conducting a targeted review of the eight critical licensing indicators, licensure and certification indicators receiving a rating of not met during the previous survey, and indicators that were newly created or revised since the last survey. The overall ratings from this survey process are a combination of the agency's self-assessment and the DDS targeted review.

One strength observed across all services included respectful communication and interactions with all individuals supported by the agency. This included thoughtful attention to past trauma and extensive training in person-centered approaches. All staff were observed to respectfully include individuals in any discussions about them, and all written documentation included respectful, inclusive, and empowering language.

In Residential Services, homes were found to be clean and up to date on required inspections. All individuals surveyed had been assessed and trained on the evacuation procedures for their homes. This represents adherence to both personal and environmental safety guidelines. Within the medical domain, medication administration and medical protocols were found to be areas of strength. Provider staff were knowledgeable of individuals' medical needs and ensured that medications were administered as prescribed. Monthly site visits provided further oversight and training opportunities by the agency to further support home care providers and individuals.

In CBDS and Employment Services, 100% of the licensing indicators reviewed by DDS were met. Within certification, goal development and implementation was an area of strength. Many individuals had thoughtful habilitative goals to better prepare them for future employment, with support needs/strategies in place that assisted individuals in overcoming identified obstacles.

Some areas of need were identified during the survey process. In residential services, it was found that medication treatment plans needed more descriptive target behaviors in order to better track data needed for prescribing physicians. In Employment Support Services, individuals should be supported to work in integrated work settings and ensure that an analysis of how the individual's entitlements would be impacted by employment earnings has been completed. In addition, career plans should include a plan to minimize support as individuals become more independent.

Based on the findings of this survey review, The Shared Living Collaborative's Residential Services/Individual Home Supports service group met 94 percent of licensing indicators, including all critical indicators, and will receive a Two-Year License for Residential/Individual Home Supports. The agency will also receive a Two-Year License for Employment and Day Supports, meeting 100 percent of licensing indicators. The agency met 83 percent of the certification indicators within this service grouping and is certified.

Description of Self Assessment Process:

The Shared Living Collaborative is pleased to participate in the Self-Assessment process once again. We are grateful for the things that we learned and the opportunity to reflect on the process and our systems.

However long we have been doing this, we still appreciate the enlightenment that a self-assessment affords.

After coming out of the unending COVID constraints, our focus this year has been "Nothing is Impossible!"

To enable the Agency to continuously offer services and not close due to staff shortages, as well as to protect our individuals, SLC continued COVID restrictions until last month. Beginning March 2023, we have resumed indoor and community recreational group activities, removed the indoor mask mandate, opened transportation to more people, and launched community job exploration. With the extended safety measures, SLC Day Program has been able to avoid emergency closures since our last audit.

We utilized the DDS Survey Worksheets for day and residential services with a 15% sample of each, with indicators reflecting substantial compliance at 80%. The survey team consisted of Collette Demers, George McWilliam, and Jennifer Bognanno reviewing Individual, Employee and Provider confidential files, conducting interviews, medication and money reviews, Day Program site and home visits. The survey represents individuals from every contract, each Life Coach, people with physical and mental health needs, and new people supported ... a cross section of our collaborative.

Quality Assurance

The Shared Living Collaborative has a variety of systems in place to assure that standards are met. The systems include the following:

Monthly Monitoring forms perform a wide range of measures completed by Life Coaches. The form reports medical information, goal progress, money, fire drills, environmental reviews, risk, and a narrative.

Mandatory Training database maintained by Human Resources

Quarterly reviews of incident reports, investigations, and restraints

Nursing monitors monthly medication logs, Doctor Visit forms, and annual appointment database
Annual review of Rep Payee accounts and systems

Staff Training and Development

The Shared Living Collaborative offers all required trainings in the office, remotely, and in-home, as needed, including a MAP consultant for training and re-certification. The Agency maintains a training database for employees and providers, with reminders being mailed out a month before trainings are due. We have expanded our numbers of Human Rights and Fire Safety Officers to include Day Program Site Managers and Life Coaches. We continue to offer trainings, host Staff Development Days, offer wellness days, and fund scholarships for continuing education. Our Nurse and Life Coaches meet with Senior Managers at a weekly staff meeting to review developments, needs, discuss challenges, brainstorm solutions, and participate in trainings. We have begun a collection of video trainings done by our own staff experts. Our goal is to expand this program to include individual-specific trainings conducted by providers for our staff. We are working on systems to ensure trainings are protected for privacy, consents are obtained, and done with dignity.

Human Rights

The Shared Living Collaborative has an established Human Rights Committee which meets on a quarterly basis and as needed. The Committee reviews by-laws, human rights, DPPC, confidentiality training materials, and the DDS Human Rights Committee regulations annually. The Committee reviews all incident reports, orders for supportive and protective devices, restraints (no restraints during this reporting period), investigations, consent for supports, and Behavior Modifying Medication Forms.

Committee suggestions and concerns are reported to the Executive Director and leadership team.

Program Supports and Implementation

Since our last Quality Assurance Audit, our community of individuals has changed. Though the numbers are comparable, we have 20 new people in our residential services. Due to changing needs, 11 people have required a higher level of care and moved into group homes, 4 are no longer receiving DDS residential supports, 2 have moved home with family, and we are sad to report, 7 people have passed away. We supported individuals, housemates, families, and staff through the difficult process of grief and loss, and we are in the planning stages of a memorial garden to honor people who have been a part of our lives.

Our day program has welcomed 16 new people and 2 new Day Program Coordinators in the last two years. The Day Program Coordinator position is new for the Shared Living Collaborative. Coordinators are responsible for the overall supervision of each day program site. They work with Individuals and Site Managers on the creation and implementation of ISP goals, monthly monitoring reports, maintain attendance records, complete incident reports, and help with general day-to-day creative problem solving. They visit the sites regularly and are developing meaningful relationships with the people supported in the day program. Since the restrictions have been lifted in March, our Coordinators have taken groups to a local auto mechanic, a veterinary hospital, and a private farm. Future trips include a construction site, a hair salon, a department store, and a coffee shop.

As anticipated, hiring new staff proves to be a challenge. We currently have a number of open positions due to our continued growth. While we are not recruiting, we are committed to the individuals we support on the children's side of our agency who are aging out of DCF care, and assisting when we can with the Department's urgent needs. Our current open positions are for Nurses, Life Coaches, and Direct Care staff.

We offer competitive wages, great benefits, and perks like horseback riding lessons, family farm visits, pick-your-own fresh produce and berries, and other recreational activities and events.

We are finalizing a therapeutic framework that facilitates and prioritizes a dignified Person-Centered approach which meets the complex needs of the people we serve, in addition to, or in place of, the DDS mandated Positive Behavior Supports framework.

Health Promotion and Medical Supports

For the majority of the last year, Shared Living has only had one nurse who works diligently to support our individuals, staff, and providers. She has conducted countless COVID clinics at our day program sites, supported people with end-of-life care, medication reviews, tracking appointments, trained and retrained providers as needed, supported families and staff through significant physical and mental health challenges, and is still smiling! We have also simplified our medication charts! The pilot was met with rave reviews, and we implemented the charts in January of this year.

In Closing

Over the last years, we continued to celebrate life and our connections within a framework of safety. Shared Living hosted a semi-formal dinner dance held outdoors at Stoloff Farm. The night was filled with beautiful dresses and suits, great food, music, and people dancing the night away under the disco ball! We collaborated with Waystone to host a Fall Day at Stoloff Farm for their Family Support program, including horseback riding, crafts, food trucks, and a small petting zoo. It was so successful, they asked to join us for our Holiday Stroll at Sons of the Wind Farm. The Holiday Stroll grew this year to include food, storytelling, horseback riding, candle dipping, a visit with Santa, carnival games, cookie decorating, a horsemanship show, and beautiful light displays throughout the property.

The Shared Living Collaborative hosts Development Days each summer. These are a wonderful opportunity to reinvigorate and reenergize our team!! We incorporate outside trainers with a variety of topics and presentations, have team-building challenges, and celebrate our Spirit Award winners. The Spirit Award is designed to celebrate Staff, Providers and Individuals who demonstrate a positive attitude, enabling others to succeed, modeling humility, kindness, and integrity. Winners are committed

to teamwork and help to make our small world a better place. We also offer the Robert Morehouse Award to a member of the community who enriches the lives of the people that we support.

We enjoyed reflecting back, and are now looking forward to the next year with restrictions lifted, to begin fully engaging with our community because we survived and thrived... Now we know, "Nothing is Impossible!"

LICENSURE FINDINGS

| | Met / Rated | Not Met / Rated | % Met |
|---|-------------|-----------------|-------|
| Organizational | 8/8 | 0/8 | |
| Residential and Individual Home Supports | 68/73 | 5/73 | |
| Placement Services Individual Home Supports | | | |
| Critical Indicators | 8/8 | 0/8 | |
| Total | 76/81 | 5/81 | 94% |
| 2 Year License | | | |
| # indicators for 60 Day Follow-up | | 5 | |

| | Met / Rated | Not Met / Rated | % Met |
|---|-------------|-----------------|-------|
| Organizational | 9/9 | 0/9 | |
| Employment and Day Supports | 64/64 | 0/64 | |
| Community Based Day Services Employment Support Services | | | |
| Critical Indicators | 7/7 | 0/7 | |
| Total | 73/73 | 0/73 | 100% |
| 2 Year License | | | |
| # indicators for 60 Day Follow-up | | 0 | |

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

| Indicator # | Indicator | Area Needing Improvement |
|-------------|---|--|
| L19 | Bedrooms for individuals requiring hands on physical assistance to evacuate or who have mobility impairments are on a floor at grade or with a horizontal exit. | At one location, an individual requiring hands-on physical assistance to evacuate did not have a bedroom on a floor at grade level. The agency needs to ensure that individuals with mobility impairments have bedrooms on the first floor/at grade. |

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

| Indicator # | Indicator | Area Needing Improvement |
|--------------------|--|---|
| L63 | Medication treatment plans are in written format with required components. | For four individuals, the medication treatment plans did not have all of the required components. The agency needs to ensure that written plans include descriptions of target behaviors to control or modify, as well as corresponding data for each of those behaviors. |
| L86 | Required assessments concerning individual needs and abilities are completed in preparation for the ISP. | For five individuals, required assessments had not been submitted within ISP timelines. The agency needs to ensure that ISP assessments are submitted at least 15 days in advance of the ISP meeting. |
| L91 | Incidents are reported and reviewed as mandated by regulation. | At one location, incidents were not reported and reviewed (submitted and finalized) as mandated by DDS regulation. The agency needs to ensure that timelines are followed for both minor and major incidents and that all reportable events are entered into HCSIS and finalized. |

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

| Indicator # | Indicator | Issue identified | Action planned to address |
|--------------------|--|---|--|
| L36 | Recommended tests and appointments with specialists are made and kept. | In some instances, follow up appointments were not completed in a timely manner or we had no evidence that appointments or labs were completed. | Shared Living Collaborative is updating our system to reflect that all doctor visit forms will be turned in to Life Coaches to be printed, reviewed for clarity and comprehension, and initialed, prior to sending to nursing. Life Coaches will ensure that follow ups are completed. Goal May 31, 2023 |

Residential Commendations on Standards Met:

| Indicator # | Indicator | Commendations |
|-------------|--|--|
| L50 (07/21) | Written and oral communication with and about individuals is respectful. | The agency is commended for its universal approach to ensuring each individual served is treated with the utmost respect. Written communication about each individual used person-first language and demonstrated a comprehensive trauma informed approach to understanding each person's complex background and current support needs. The agency ensured that all staff members were trained and extremely knowledgeable in best practice guidelines which were a detailed and person-centered written overview of each individual's relevant medical, educational, and psycho-social history that outlined how best to interact with the individual to elicit their best self. The efforts taken by employees within the agency ensured that all written and oral communication with individuals was positive, acknowledged each person's inherent human value and communicated about each person using dignified normative adult descriptions. |

CERTIFICATION FINDINGS

| | Reviewed By | Met / Rated | Not Met / Rated | % Met |
|--|---------------------------------------|--------------|-----------------|-------------|
| Certification - Planning and Quality Management | DDS 0/0 Provider 6/6 | 6/6 | 0/6 | |
| Residential and Individual Home Supports | DDS 0/0 Provider 41/41 | 41/41 | 0/41 | |
| Individual Home Supports | DDS 0/0 Provider 21/21 | 21/21 | 0/21 | |
| Placement Services | DDS 0/0 Provider 20/20 | 20/20 | 0/20 | |
| Total | | 47/47 | 0/47 | 100% |
| Certified | | | | |

| | Reviewed By | Met / Rated | Not Met / Rated | % Met |
|--|---------------------------------------|--------------|-----------------|------------|
| Certification - Planning and Quality Management | DDS 0/0 Provider 6/6 | 6/6 | 0/6 | |
| Employment and Day Supports | DDS 5/8 Provider 23/27 | 28/35 | 7/35 | |
| Community Based Day Services | DDS 2/2 Provider 9/13 | 11/15 | 4/15 | |
| Employment Support Services | DDS 3/6 Provider 14/14 | 17/20 | 3/20 | |
| Total | | 34/41 | 7/41 | 83% |
| Certified | | | | |

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

| Indicator # | Indicator | Issues identified | Action planned to address |
|--------------------|---|---|--|
| C40 | Individuals are supported to explore, discover and connect with their personal interest and options for community involvement, personal interest and hobbies. | Individuals had little opportunity for community involvement. | With the COVID restriction lifted, SLC will be able to work on this certification. Surveys have been conducted and field trips have already started and will continue. We will forward a list of activities planned and completed by the end of May. Goal May 31, 2023 |
| C41 | Individuals participate in activities, including those in the community, that reflect their interests and preferences. | Individuals had little opportunity for community involvement. | With the COVID restriction lifted, SLC will be able to work on this certification. Surveys have been conducted and field trips have already started and will continue. We will forward a list of activities planned and completed by the end of May. Goal May 31, 2023 |
| C42 | Individuals are involved in activities that connect them to other people in the community. | Individuals had little opportunity for community involvement. | With the COVID restriction lifted, SLC will be able to work on this certification. Surveys have been conducted and field trips have already started and will continue. We will forward a list of activities planned and completed by the end of May. Goal May 31, 2023 |
| C46 | Staff (Home Providers) support individuals to learn about and use generic community resources. | Individuals had little opportunity for community involvement. | With the COVID restriction lifted, SLC will be able to work on this certification. We will forward a list of community resources planned and completed by the end of May. Goal May 31, 2023 |

Employment Support Services- Areas Needing Improvement on Standards not met From DDS Review:

| Indicator # | Indicator | Area Needing Improvement |
|-------------|--|--|
| 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. | Individuals had not been supported to have an analysis of how their entitlements can be managed so that the impact of income earned through employment upon entitlements is assessed and understood. The agency needs to ensure that benefits analysis occurs for each individual and educates individuals (and their families as applicable) of the impact of future earnings on their current disability benefits, for example, SSI, SSDI, SSP and Mass Health, Section 8 Housing etc. |
| C30 | Individuals are supported to work in integrated job settings. | Two out of five individuals surveyed were not working in an integrated job setting. The agency needs to assist individuals with obtaining employment and support them to ensure their work environment is integrated with other employees of the company. |
| C34 | The agency provides the optimal level of support to promote success with a specific plan for minimizing supports. | None of the five Employment Services individuals had a plan to minimize supports. The agency needs to ensure that each individual has a plan to minimize supports when they are able to work independently. |

MASTER SCORE SHEET LICENSURE

Organizational: THE SHARED LIVING COLLABORATIVE

| Indicator # | Indicator | Reviewed by | Met/Rated | Rating(Met,Not Met,NotRated) |
|-------------|-------------------------------|-------------|-----------|------------------------------|
| ☐ L2 | Abuse/neglect reporting | DDS | 4/4 | Met |
| L3 | Immediate Action | Provider | - | Met |
| L4 | Action taken | Provider | - | Met |
| L48 | HRC | Provider | - | Met |
| L74 | Screen employees | Provider | - | Met |
| L75 | Qualified staff | Provider | - | Met |
| L76 | Track trainings | Provider | - | Met |
| L83 | HR training | Provider | - | Met |
| L92 (07/21) | Licensed Sub-locations (e/d). | DDS | 7/7 | Met |

Residential and Individual Home Supports:

| Ind. # | Ind. | Loc. or Individ. | Reviewed by | Res. Sup. | Ind. Home Sup. | Place. | Resp. | ABI-MFP Res. Sup. | ABI-MFP Place. | Total Met/Rated | Rating |
|------------|---------------------------|------------------|-------------|-----------|----------------|--------|-------|-------------------|----------------|-----------------|--------|
| L1 | Abuse/neglect training | I | Provider | | - | - | | - | - | - | Met |
| L5 | Safety Plan | L | Provider | | - | - | | - | - | - | Met |
| ☐ L6 | Evacuation | L | DDS | | 2/2 | 14/14 | | | | 16/16 | Met |
| L8 | Emergency Fact Sheets | I | Provider | | - | - | | - | - | - | Met |
| L9 (07/21) | Safe use of equipment | I | DDS | | 2/2 | | | | | 2/2 | Met |
| L10 | Reduce risk interventions | I | DDS | | 2/2 | 3/3 | | | | 5/5 | Met |
| ☐ L11 | Required inspections | L | DDS | | 2/2 | 14/14 | | | | 16/16 | Met |
| ☐ L12 | Smoke detectors | L | DDS | | 2/2 | 14/14 | | | | 16/16 | Met |

| Ind. # | Ind. | Loc. or Indiv. | Reviewed by | Res. Sup. | Ind. Home Sup. | Place. | Resp. | ABI-MFP Res. Sup. | ABI-MFP Place. | Total Met/Rated | Rating |
|--------|----------------------------|----------------|-------------|-----------|----------------|--------|-------|-------------------|----------------|-----------------|------------------|
| Ⓡ L13 | Clean location | L | DDS | | 2/2 | 14/14 | | | | 16/16 | Met |
| L14 | Site in good repair | L | Provider | | - | - | | - | - | - | Met |
| L15 | Hot water | L | Provider | | - | - | | - | - | - | Met |
| L16 | Accessibility | L | Provider | | - | - | | - | - | - | Met |
| L17 | Egress at grade | L | Provider | | - | - | | - | - | - | Met |
| L18 | Above grade egress | L | Provider | | - | - | | - | - | - | Met |
| L19 | Bedroom location | L | DDS | | | 2/3 | | | | 2/3 | Not Met (66.67%) |
| L20 | Exit doors | L | Provider | | - | - | | - | - | - | Met |
| L21 | Safe electrical equipment | L | Provider | | - | - | | - | - | - | Met |
| L22 | Well-maintained appliances | L | Provider | | - | - | | - | - | - | Met |
| L23 | Egress door locks | L | DDS | | 1/1 | | | | | 1/1 | Met |
| L24 | Locked door access | L | DDS | | 1/1 | 11/14 | | | | 12/15 | Met (80.0%) |
| L25 | Dangerous substances | L | Provider | | - | - | | - | - | - | Met |
| L26 | Walkway safety | L | Provider | | - | - | | - | - | - | Met |
| L27 | Pools, hot tubs, etc. | L | Provider | | - | - | | - | - | - | Met |

| Ind. # | Ind. | Loc. or Indiv. | Reviewed by | Res. Sup. | Ind. Home Sup. | Place. | Resp. | ABI-MFP Res. Sup. | ABI-MFP Place. | Total Met/Rated | Rating |
|--------|-----------------------|----------------|-------------|-----------|----------------|--------|-------|-------------------|----------------|-----------------|--------------|
| L28 | Flammables | L | Provider | | - | - | | - | - | - | Met |
| L29 | Rubbish/combustibles | L | Provider | | - | - | | - | - | - | Met |
| L30 | Protective railings | L | Provider | | - | - | | - | - | - | Met |
| L31 | Communication method | I | Provider | | - | - | | - | - | - | Met |
| L32 | Verbal & written | I | Provider | | - | - | | - | - | - | Met |
| L33 | Physical exam | I | Provider | | - | - | | - | - | - | Met |
| L34 | Dental exam | I | Provider | | - | - | | - | - | - | Met |
| L35 | Preventive screenings | I | DDS | | 2/2 | 14/15 | | | | 16/17 | Met (94.12%) |
| L36 | Recommended tests | I | Provider | | - | - | | - | - | - | Not Met |
| L37 | Prompt treatment | I | Provider | | - | - | | - | - | - | Met |
| Ⓡ L38 | Physician's orders | I | DDS | | 1/1 | 8/8 | | | | 9/9 | Met |
| L39 | Dietary requirements | I | Provider | | - | - | | - | - | - | Met |
| L40 | Nutritional food | L | Provider | | - | - | | - | - | - | Met |
| L41 | Healthy diet | L | Provider | | - | - | | - | - | - | Met |
| L42 | Physical activity | L | Provider | | - | - | | - | - | - | Met |
| L43 | Health Care Record | I | Provider | | - | - | | - | - | - | Met |
| Ⓡ L46 | Med. Administration | I | DDS | | 1/1 | 13/13 | | | | 14/14 | Met |

| Ind. # | Ind. | Loc. or Indiv. | Reviewed by | Res. Sup. | Ind. Home Sup. | Place. | Resp. | ABI-MFP Res. Sup. | ABI-MFP Place. | Total Met/Rated | Rating |
|-------------|--------------------------|----------------|-------------|-----------|----------------|--------|-------|-------------------|----------------|-----------------|------------------|
| L47 | Self medication | I | Provider | | - | - | | - | - | - | Met |
| L49 | Informed of human rights | I | DDS | | 2/2 | 15/15 | | | | 17/17 | Met |
| L50 (07/21) | Respectful Comm. | I | DDS | | 2/2 | 15/15 | | | | 17/17 | Met |
| L51 | Possessions | I | Provider | | - | - | | - | - | - | Met |
| L52 | Phone calls | I | Provider | | - | - | | - | - | - | Met |
| L53 | Visitation | I | Provider | | - | - | | - | - | - | Met |
| L54 (07/21) | Privacy | I | DDS | | 2/2 | 15/15 | | | | 17/17 | Met |
| L55 | Informed consent | I | Provider | | - | - | | - | - | - | Met |
| L61 | Health protection in ISP | I | Provider | | - | - | | - | - | - | Met |
| L62 | Health protection review | I | Provider | | - | - | | - | - | - | Met |
| L63 | Med. treatment plan form | I | DDS | | 1/1 | 7/11 | | | | 8/12 | Not Met (66.67%) |
| L64 | Med. treatment plan rev. | I | DDS | | 1/1 | 9/11 | | | | 10/12 | Met (83.33%) |
| L67 | Money mgmt. plan | I | DDS | | 2/2 | 12/13 | | | | 14/15 | Met (93.33%) |
| L68 | Funds expenditure | I | Provider | | - | - | | - | - | - | Met |
| L69 | Expenditure tracking | I | DDS | | 1/1 | 9/9 | | | | 10/10 | Met |

| Ind. # | Ind. | Loc. or Indiv. | Reviewed by | Res. Sup. | Ind. Home Sup. | Place. | Resp. | ABI-MFP Res. Sup. | ABI-MFP Place. | Total Met/Rated | Rating |
|--------|----------------------------------|----------------|-------------|-----------|----------------|--------|-------|-------------------|----------------|-----------------|-------------------|
| L70 | Charges for care calc. | I | DDS | | 1/2 | 11/13 | | | | 12/15 | Met (80.0 %) |
| L71 | Charges for care appeal | I | DDS | | 2/2 | 13/13 | | | | 15/15 | Met |
| L77 | Unique needs training | I | Provider | | - | - | | - | - | - | Met |
| L80 | Symptoms of illness | L | Provider | | - | - | | - | - | - | Met |
| L81 | Medical emergency | L | Provider | | - | - | | - | - | - | Met |
| L82 | Medication admin. | L | DDS | | 1/1 | | | | | 1/1 | Met |
| L84 | Health protect. Training | I | Provider | | - | - | | - | - | - | Met |
| L85 | Supervision | L | DDS | | 2/2 | 14/14 | | | | 16/16 | Met |
| L86 | Required assessments | I | DDS | | 0/2 | 11/14 | | | | 11/16 | Not Met (68.75 %) |
| L87 | Support strategies | I | DDS | | 1/2 | 14/14 | | | | 15/16 | Met (93.75 %) |
| L88 | Strategies implemented | I | Provider | | - | - | | - | - | - | Met |
| L89 | Complaint and resolution process | L | Provider | | - | - | | - | - | - | Met |
| L90 | Personal space/bedroom privacy | I | Provider | | - | - | | - | - | - | Met |
| L91 | Incident management | L | DDS | | 1/2 | | | | | 1/2 | Not Met (50.0 %) |

| Ind. # | Ind. | Loc. or Individ. | Reviewed by | Res. Sup. | Ind. Home Sup. | Place. | Resp. | ABI-MFP Res. Sup. | ABI-MFP Place. | Total Met/Rated | Rating |
|---------------------------------|--|------------------|-------------|-----------|----------------|--------|-------|-------------------|----------------|-----------------|--------|
| L93 (05/22) | Emergency back-up plans | I | DDS | | 2/2 | 15/15 | | | | 17/17 | Met |
| L94 (05/22) | Assistive technology | I | DDS | | 2/2 | 15/15 | | | | 17/17 | Met |
| L96 (05/22) | Staff training in devices and applications | I | DDS | | 1/1 | 12/12 | | | | 13/13 | Met |
| L99 (05/22) | Medical monitoring devices | I | DDS | | | 1/1 | | | | 1/1 | Met |
| #Std. Met/# 73 Indicator | | | | | | | | | | 68/73 | |
| Total Score | | | | | | | | | | 76/81 | |
| | | | | | | | | | | 93.83% | |

Employment and Day Supports:

| Ind. # | Ind. | Loc. or Individ. | Reviewed by | Emp. Sup. | Cent. Based Work | Com. Based Day | Total Met / Rated | Rating |
|------------|------------------------|------------------|-------------|-----------|------------------|----------------|-------------------|--------|
| L1 | Abuse/neglect training | I | Provider | | - | - | - | Met |
| L5 | Safety Plan | L | Provider | | - | - | - | Met |
| L6 | Evacuation | L | DDS | 1/1 | | | 1/1 | Met |
| L7 | Fire Drills | L | Provider | | - | - | - | Met |
| L8 | Emergency Fact Sheets | I | Provider | | - | - | - | Met |
| L9 (07/21) | Safe use of equipment | I | DDS | 5/5 | | 7/7 | 12/12 | Met |

| Ind. # | Ind. | Loc. or Individ. | Reviewed by | Emp. Sup. | Cent. Based Work | Com. Based Day | Total Met / Rated | Rating |
|---------------|----------------------------|-------------------------|--------------------|------------------|-------------------------|-----------------------|--------------------------|---------------|
| L10 | Reduce risk interventions | I | Provider | | - | - | - | Met |
| Ⓡ L11 | Required inspections | L | DDS | 1/1 | | | 1/1 | Met |
| Ⓡ L12 | Smoke detectors | L | DDS | 1/1 | | | 1/1 | Met |
| Ⓡ L13 | Clean location | L | DDS | 1/1 | | | 1/1 | Met |
| L14 | Site in good repair | L | Provider | | - | - | - | Met |
| L15 | Hot water | L | Provider | | - | - | - | Met |
| L16 | Accessibility | L | Provider | | - | - | - | Met |
| L17 | Egress at grade | L | Provider | | - | - | - | Met |
| L20 | Exit doors | L | Provider | | - | - | - | Met |
| L21 | Safe electrical equipment | L | Provider | | - | - | - | Met |
| L22 | Well-maintained appliances | L | Provider | | - | - | - | Met |
| L25 | Dangerous substances | L | Provider | | - | - | - | Met |
| L26 | Walkway safety | L | Provider | | - | - | - | Met |
| L28 | Flammables | L | Provider | | - | - | - | Met |
| L29 | Rubbish/com bustibles | L | Provider | | - | - | - | Met |
| L30 | Protective railings | L | Provider | | - | - | - | Met |
| L31 | Communication method | I | Provider | | - | - | - | Met |
| L32 | Verbal & written | I | Provider | | - | - | - | Met |
| L37 | Prompt treatment | I | Provider | | - | - | - | Met |
| Ⓡ L38 | Physician's orders | I | DDS | 1/1 | | 1/1 | 2/2 | Met |
| L39 | Dietary requirements | I | Provider | | - | - | - | Met |
| L44 | MAP registration | L | Provider | | - | - | - | Met |
| L45 | Medication storage | L | Provider | | - | - | - | Met |

| Ind. # | Ind. | Loc. or Individ. | Reviewed by | Emp. Sup. | Cent. Based Work | Com. Based Day | Total Met / Rated | Rating |
|---------------|--------------------------|-------------------------|--------------------|------------------|-------------------------|-----------------------|--------------------------|---------------|
| Ⓜ L46 | Med. Administration | | Provider | | - | - | - | Met |
| L49 | Informed of human rights | | DDS | 5/5 | | 7/7 | 12/12 | Met |
| L50 (07/21) | Respectful Comm. | | DDS | 5/5 | | 7/7 | 12/12 | Met |
| L51 | Possessions | | Provider | | - | - | - | Met |
| L52 | Phone calls | | Provider | | - | - | - | Met |
| L54 (07/21) | Privacy | | DDS | 5/5 | | 7/7 | 12/12 | Met |
| L55 | Informed consent | | Provider | | - | - | - | Met |
| L56 | Restrictive practices | | Provider | | - | - | - | Met |
| L57 | Written behavior plans | | Provider | | - | - | - | Met |
| L58 | Behavior plan component | | Provider | | - | - | - | Met |
| L59 | Behavior plan review | | Provider | | - | - | - | Met |
| L60 | Data maintenance | | Provider | | - | - | - | Met |
| L61 | Health protection in ISP | | Provider | | - | - | - | Met |
| L62 | Health protection review | | Provider | | - | - | - | Met |
| L63 | Med. treatment plan form | | Provider | | - | - | - | Met |
| L64 | Med. treatment plan rev. | | Provider | | - | - | - | Met |
| L67 | Money mgmt. plan | | Provider | | - | - | - | Met |
| L68 | Funds expenditure | | Provider | | - | - | - | Met |
| L69 | Expenditure tracking | | Provider | | - | - | - | Met |
| L72 | DOL requirements | | Provider | | - | - | - | Met |

| Ind. # | Ind. | Loc. or Individ. | Reviewed by | Emp. Sup. | Cent. Based Work | Com. Based Day | Total Met / Rated | Rating |
|---------------------------------|--|------------------|-------------|-----------|------------------|----------------|-------------------|---------------|
| L73 | DOL certificate | L | Provider | | - | - | - | Met |
| L77 | Unique needs training | I | Provider | | - | - | - | Met |
| L78 | Restrictive Int. Training | L | Provider | | - | - | - | Met |
| L79 | Restraint training | L | Provider | | - | - | - | Met |
| L80 | Symptoms of illness | L | Provider | | - | - | - | Met |
| L81 | Medical emergency | L | Provider | | - | - | - | Met |
| Ⓡ L82 | Medication admin. | L | DDS | 1/1 | | | 1/1 | Met |
| L84 | Health protect. Training | I | Provider | | - | - | - | Met |
| L85 | Supervision | L | Provider | | - | - | - | Met |
| L86 | Required assessments | I | Provider | | - | - | - | Met |
| L87 | Support strategies | I | Provider | | - | - | - | Met |
| L88 | Strategies implemented | I | Provider | | - | - | - | Met |
| L91 | Incident management | L | Provider | | - | - | - | Met |
| L93 (05/22) | Emergency back-up plans | I | DDS | 5/5 | | 7/7 | 12/12 | Met |
| L94 (05/22) | Assistive technology | I | DDS | 4/5 | | 7/7 | 11/12 | Met (91.67 %) |
| L96 (05/22) | Staff training in devices and applications | I | DDS | 5/5 | | | 5/5 | Met |
| #Std. Met/# 64 Indicator | | | | | | | 64/64 | |
| Total Score | | | | | | | 73/73 | |
| | | | | | | | 100% | |

MASTER SCORE SHEET CERTIFICATION

Certification - Planning and Quality Management

| | Indicator # | Indicator | Reviewed By | Met/Rated | Rating |
|--|--------------------|----------------------------------|--------------------|------------------|---------------|
| | C1 | Provider data collection | Provider | - | Met |
| | C2 | Data analysis | Provider | - | Met |
| | C3 | Service satisfaction | Provider | - | Met |
| | C4 | Utilizes input from stakeholders | Provider | - | Met |
| | C5 | Measure progress | Provider | - | Met |
| | C6 | Future directions planning | Provider | - | Met |

Placement Services

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

Placement Services

| Indicator # | Indicator | Reviewed By | Met/Rated | Rating |
|-------------|---|-------------|-----------|------------|
| C52 | Leisure activities and free-time choices /control | Provider | - | Met |
| C53 | Food/ dining choices | Provider | - | Met |

Individual Home Supports

| Indicator # | Indicator | Reviewed By | Met/Rated | Rating |
|-------------|---|-------------|-----------|------------|
| C7 | Feedback on staff / care provider performance | Provider | - | Met |
| C8 | Family/guardian communication | Provider | - | Met |
| C9 | Personal relationships | Provider | - | Met |
| C10 | Social skill development | Provider | - | Met |
| C11 | Get together w/family & friends | Provider | - | Met |
| C12 | Intimacy | Provider | - | Met |
| C13 | Skills to maximize independence | Provider | - | Met |
| C14 | Choices in routines & schedules | Provider | - | Met |
| C15 | Personalize living space | Provider | - | Met |
| C16 | Explore interests | Provider | - | Met |
| C17 | Community activities | Provider | - | Met |
| C18 | Purchase personal belongings | Provider | - | Met |
| C19 | Knowledgeable decisions | Provider | - | Met |
| C21 | Coordinate outreach | Provider | - | Met |
| C46 | Use of generic resources | Provider | - | Met |
| C47 | Transportation to/ from community | Provider | - | Met |
| C48 | Neighborhood connections | Provider | - | Met |
| C49 | Physical setting is consistent | Provider | - | Met |
| C51 | Ongoing satisfaction with services/ supports | Provider | - | Met |
| C52 | Leisure activities and free-time choices /control | Provider | - | Met |
| C53 | Food/ dining choices | Provider | - | Met |

Community Based Day Services

| Indicator # | Indicator | Reviewed By | Met/Rated | Rating |
|-------------|---|-------------|-----------|------------|
| C7 | Feedback on staff / care provider performance | Provider | - | Met |

Community Based Day Services

| Indicator # | Indicator | Reviewed By | Met/Rated | Rating |
|-------------|--|-------------|-----------|----------------------|
| C8 | Family/guardian communication | Provider | - | Met |
| C13 | Skills to maximize independence | Provider | - | Met |
| C37 | Interpersonal skills for work | Provider | - | Met |
| C38 (07/21) | Habilitative & behavioral goals | DDS | 7/7 | Met |
| C39 (07/21) | Support needs for employment | DDS | 7/7 | Met |
| C40 | Community involvement interest | Provider | - | Not Met (0 %) |
| C41 | Activities participation | Provider | - | Not Met (0 %) |
| C42 | Connection to others | Provider | - | Not Met (0 %) |
| C43 | Maintain & enhance relationship | Provider | - | Met |
| C44 | Job exploration | Provider | - | Met |
| C45 | Revisit decisions | Provider | - | Met |
| C46 | Use of generic resources | Provider | - | Not Met (0 %) |
| C47 | Transportation to/ from community | Provider | - | Met |
| C51 | Ongoing satisfaction with services/ supports | Provider | - | Met |

Employment Support Services

| Indicator # | Indicator | Reviewed By | Met/Rated | Rating |
|-------------|---|-------------|-----------|----------------------|
| C7 | Feedback on staff / care provider performance | Provider | - | Met |
| C8 | Family/guardian communication | Provider | - | Met |
| C22 | Explore job interests | DDS | 5/5 | Met |
| C23 | Assess skills & training needs | Provider | - | Met |
| C24 | Job goals & support needs plan | Provider | - | Met |
| C25 | Skill development | Provider | - | Met |
| C26 | Benefits analysis | DDS | 0/5 | Not Met (0 %) |
| C27 | Job benefit education | DDS | 5/5 | Met |
| C28 | Relationships w/businesses | Provider | - | Met |
| C29 | Support to obtain employment | DDS | 5/5 | Met |

Employment Support Services

| Indicator # | Indicator | Reviewed By | Met/Rated | Rating |
|-------------|--|-------------|-----------|-------------------------|
| C30 | Work in integrated settings | DDS | 3/5 | Not Met (60.0 %) |
| C31 | Job accommodations | Provider | - | Met |
| C32 | At least minimum wages earned | Provider | - | Met |
| C33 | Employee benefits explained | Provider | - | Met |
| C34 | Support to promote success | DDS | 0/5 | Not Met (0 %) |
| C35 | Feedback on job performance | Provider | - | Met |
| C37 | Interpersonal skills for work | Provider | - | Met |
| C47 | Transportation to/ from community | Provider | - | Met |
| C50 | Involvement/ part of the Workplace culture | Provider | - | Met |
| C51 | Ongoing satisfaction with services/ supports | Provider | - | Met |