



**PROVIDER REPORT
FOR
SOUTH SHORE SUPPORT
SERVICES, INC.
317 Libbey Industrial Pkwy.
B300
Weymouth, MA 02189**

Version

Public Provider Report

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

SUMMARY OF OVERALL FINDINGS

Provider	SOUTH SHORE SUPPORT SERVICES, INC.
-----------------	------------------------------------

Review Dates	11/15/2022 - 11/21/2022
---------------------	-------------------------

Service Enhancement Meeting Date	12/8/2022
---	-----------

Survey Team	Michael Marchese Katherine Gregory Tina Napolitan Barbara Mazzella Scott Nolan Linda Griffith (TL)
--------------------	---

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	7 location(s) 10 audit (s)	Full Review	79/84 2 Year License 12/08/2022-12/08/2024		65 / 67 Certified 12/08/2022 - 12/08/2024
Residential Services	2 location(s) 5 audit (s)			Full Review	19 / 20
Placement Services	2 location(s) 2 audit (s)			Full Review	19 / 20
Individual Home Supports	3 location(s) 3 audit (s)			Full Review	21 / 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	3 location(s) 14 audit (s)	Targeted Review	DDS 19/19 Provider 35 / 36 54 / 55 2 Year License 12/08/2022-12/08/2024		DDS 8 / 9 Provider 32 / 33 40 / 42 Certified 12/08/2022 - 12/08/2024
Community Based Day Services	2 location(s) 7 audit (s)			DDS Targeted Review	14 / 15
Employment Support Services	1 location(s) 7 audit (s)			DDS Targeted Review	20 / 21
Planning and Quality Management (For all service groupings)				Full Review	6 / 6

EXECUTIVE SUMMARY :

South Shore Support Services, incorporated in April 1995, is a non-profit agency providing supports to individuals with disabilities and their families in the South Shore area. Services provided by the agency include Residential and Individual Home Supports, Placement Services, Community-Based Day Services, Employment Services, and Remote Supports and Monitoring Services.

This licensing and certification review conducted by the Department of Developmental Disabilities (DDS) Office of Quality Enhancement (OQE) included a full review of all licensure and certification indicators for 24/7 Residential Supports, Individual Home Supports, and Placement Services. Based on the previous DDS licensure and certification review, the agency earned and opted to conduct a self-assessment for Community-Based Day Supports and Employment Services for this review. As a result, the DDS survey team conducted a targeted review of the agency's Employment Services and Community-Based Day Support (CBDS) services. This targeted review consisted of evaluating the eight critical licensure indicators, any new/revised licensure and certification indicators, and any indicators that had received a 'Not Met' rating in the agency's previous survey.

Several strengths were noted at the organization level. The Human Rights Committee met regularly, with consistently maintained requirements for membership and quorum. In the domain of Competent and Skilled Workforce, the agency had a strong system to ensure that all mandated trainings were completed by staff. Training materials had even been modified for increased staff comprehension. Individuals were consistently given the opportunity to provide feedback about caregivers and/or staff through participation in hiring interviews, monthly supervisions, and annual performance evaluations. Satisfaction surveys were regularly conducted with individuals, their guardians, and agency employees. Individuals and guardians were made aware of how to file a grievance with the agency, what their human rights are, and how to report potential abuse/neglect.

In Residential Services, several strengths were noted in relation to respect, choice, and rights. Mutually respectful relationships between staff and individuals, as well as increased knowledge and familiarity with the individuals' unique needs, was identified as a strength. Across all service types, written and oral communications about individuals were found to be respectful, and individuals were afforded privacy when discussing personal matters. In the domain of Environmental Safety, locations were clean and in good repair overall. Bedrooms and common spaces of homes were decorated with personalized items and artwork that reflected the interests of the individuals.

Another area of strength was within the Health domain. The agency worked collaboratively with families and guardians to ensure that annual physicals, dental exams, and appointments with medical specialists were attended as scheduled. Staff administering medications were MAP certified as required, and individuals were supported and assessed in their ability to self-medicate.

Within CBDS/Employment Services, individuals were assessed for their safe use of equipment, which was used at the specific volunteer and job sites. Staff were well trained on individuals' medical protocols, as well as unique diagnoses and needs of the individuals being served.

In regard to certification indicators in both residential and day services, individuals have been active in their communities, including outings to stores, restaurants, movies, sporting events, vacations, and volunteer opportunities. Family involvement is encouraged and supported in both service types, with consistent communication. Community activities are meaningful and individualized to personal preferences. For example, an individual served in Placement Services has been supported to remain very involved in his church, consistently participating in mission trips to repair homes in the Appalachian Mountains. In CBDS/Employment, Launch has expanded its programming into the evenings/weekends with game nights, movie nights, and overnight trips to further support and enhance relationships for individuals. By providing a more flexible service, individuals have the opportunity to participate in activities that match their expressed interests. Individuals participating in the Launch program have continued to provide an array of services to the elderly and local citizens in need, including increased opportunities for socialization, preparation/delivery of healthy meals and snacks, cleaning and yardwork services, and pet walking services that allow people to remain in their homes. Individuals were

consistently observed to demonstrate choice and control over their daily routine and the activities in which they participated.

While there were many areas of strength found during this survey, there were also some licensure and certification areas that would benefit from additional attention.

In Residential Services, the agency is encouraged to develop emergency back-up plans to be more individualized, with subsequent training to staff and individuals on how to respond in an emergency. Related to finances, individuals were incurring frequent, ongoing charges from the use of money orders and bank checks, and these expenditures did not benefit the individuals. Increased oversight is needed toward monitoring assets and supporting individuals to spend their funds to ensure that their benefits are not at risk. Lastly, additional efforts are recommended to ensure that individuals are receiving support to explore and define their preferences for intimacy and companionship through formal and informal assessments, implementation of a curriculum, and subsequent training as needed.

Based on the findings of this report, South Shore Support Services has earned a Two-Year License for Residential Services and is certified, with scores of 94% for licensure and 97% for certification. The agency has also earned a Two-Year license for its Employment and Day Supports and is certified, with scores of 98% for licensure and 95% for certification. The agency will conduct its own follow-up for any licensure indicators in Residential Supports and Employment and Day Supports rated as Not Met and submit the results within 60 days to the DDS Office of Quality Enhancement.

The provider's description of its self-assessment process follows.

Description of Self Assessment Process:

On October 2022, SSSS had a total of 39 individuals in CBDS and 36 in Group Supported Employment and 5 in Supported Employment. Using a target sample size of 25%, SSSS reviewed: 9 of the 36 in group supported, 10 of the 39 in CBDS, and 2 of the 5 in supported employment. We reviewed 21 records, 12 from Launch Cohasset and 9 from Launch Hingham without duplication. The sample size for individual supported employment is inflated to allow for an 25% scoring indicator. The review sample was non-duplicated across service delivery models.

Our assessment tool was an EXCEL spreadsheet which SSSS created using the tool used in DDS licensing and certification. We measured our indicators using the information source and how measured in the current DDS tool. The criteria for a standard being met or not mirrored the survey and certification tool. The methodology used to determine if an indicator was met for the agency was 80% or above for surveyed participants.

The Self-Assessment Team Members work in other departments at SSSS. Those departments include the Quality Assurance department, Human Resources and the Training Department. The team members have combined knowledge in ISP development and implementation, human resources, human rights, employee and participant training, mental health and adult family care services, community resources, and vocational service delivery models.

Smoke detectors were operational at both locations. At the time of the initial inspection dangerous/flammable chemicals were not stored properly at Launch Hingham. The workspace is shared with the Hingham Community Center (HCC). They own and maintain the building. There was a bottle of bleach in the kitchen area. The HCC staff removed and secured the bleach.

Safety plans were up to date at both locations. Fire drills are being conducted as outlined in the safety plans. The team advised that more frequent fire drills should be conducted that reflect the unique schedules of the part-time individuals served.

Regarding emergency fact sheets, this area was considered to be NOT MET (L8) as inconsistencies were found between the information on the physicals and that on the emergency fact sheets. Other areas requiring action were as follows: pattern of movement if lost, and response to search efforts. Evidence of emergency backup plan training and support for individuals was present at Launch Cohasset, but not for Launch Hingham.

It was reported that neither location administered medications. Both Launch Cohasset and Hingham have current MAP site certificates. In reviewing specialized diets, it was determined that this area was MET. While individuals pack and bring their own lunches to program, staff were aware of dietary issues and actively monitor when food is offered.

Both indicators (C51/C54) were met for choice, growth, and control. Support staff report that individuals are offered choices throughout each day, starting with the daily morning meeting, where individuals are encouraged to express themselves and their opinions. Support staff also report that individuals are encouraged to sign up for the job/volunteer sites that interest them. Support staff report that they also encourage each individual to be as independent as possible while working/volunteering in the community. Each individual had a satisfaction survey located in their clinical book. Individuals and their families are also encouraged to fill out a satisfaction survey on a yearly basis (those surveys are located at the SSSS main office). At both Launch locations, the Assistive Technology indicator was NOT MET. Each individual had a completed assistive technology assessment in their clinical book and are provided access to various assistive technology devices throughout the day, including I-pads, computers and Bluetooth devices to assist individuals with travel training. However, we found the assessments to be either incomplete or insufficient with adequate individualization.

Both indicators (C44/C45) were met for meaningful and satisfying day activities. All individuals have several assessments in their clinical books to help determine which volunteer/job sites may appeal to them. Both locations also have many community connections - Launch Hingham has 20 job training

sites, while Launch Cohasset has over 15 job training sites. Support staff report that individuals are encouraged to make decisions throughout the day and that individuals can sign up for each volunteer/job site either in advance or on a daily basis. It was also reported that individuals are encouraged to enter the community with staff for various social activities, including community safety scavenger hunts, cardio walks, and "Find it out Fridays."

All required inspections were up to date. Both locations have interconnected smoke alarms which are in working condition. The interior of each building was in good condition. Doors, walkways, and stairs were clear of debris. All cleaning chemicals and combustibles at Launch Cohasset were stored in separately in a safe manner. At Launch Hingham, we found bleach in the kitchen. This was immediately corrected by HCC.

All critical indicators were met for Human Rights (HR) at Launch. All consumers were trained in their rights and documentation is kept within their books at the program. Human Rights are also discussed at morning and afternoon meetings. Both staff and individuals were trained in DPPC identification and reporting. The DPPC hotline number is posted at both locations. Launch Cohasset retrains individuals annually. The team felt this was a best practice and has recommended that Launch Hingham does the same.

Both Launch programs are part of the SSSS Human Rights Committee. The committee meets at least 4 times per year. All incidents that have been submitted into HCSIS have or will be reviewed by the committee. Recommendations from the committee are followed. There were no reported restraints. All individuals had access to their belongings and times were available for cell phone use.

All individuals surveyed submitted the required ISP paperwork within the allotted time frame. Two of the individuals were not rated due to the upcoming ISP's and the HCSIS system being locked. It is anticipated, given the results of those we were able to check, that these two individuals. Notes were kept on every individual's progress. Goals were reflective of each individual's unique needs and interests. Goals were geared towards competitive employment and building the skills needed to maintain employment. Other goals were in regard to assisting others to further their education through Quincy College and Well-Spring. One individual is working on his degree while another is trying to obtain her high school diploma. Assistive technology assessments were completed as part of the ISP. Many of these assessments did not have information on the last section identifying what assistive tech could be used for the individual. In one program, they were using the same overall goal. This resulted in a Not Met in this area (L94/96)

While there are no formal behavior plans at either Launch at the present time, the QA teams feels one individual could benefit from a plan being in place. This person has been added to our Risk Review and a meeting will be taking place soon with all the appropriate parties. He currently has ABA consulting supports in place at the program, but the number of incidents has increased even with this support. We anticipate a further increase in behaviors due to an upcoming residential move.

Both Launch programs have collaborated with several other agencies to enhance the services they provide. They regularly check in at the Hingham and Cohasset Libraries and the Council on Elder Affairs (CEA) in Cohasset Scituate and Hingham. Volunteer examples include the CEA, Meals on Wheels, cooking at the CEA, setting tables and clean up for lunches, Wellspring Hull, and the Hull Animal Shelter. The Launch crews are seen volunteering in the local communities doing beatification jobs. Community opportunities are regularly offered such as swim with a friend at Weymouth's Connell Pool, Cohasset Town Pool, Julie Quill's Arts and Recreation Center, vocational exploration trips, and survival cooking at Elm St Cohasset community room. Find it out Fridays has proved to be an effective way to incorporate travel training on the bus and train. Volunteer/work/community opportunities were posted on the wall at Launch with a sign-up sheet for those interested. Both programs take part in community events and stay connected to the community by making active donations to needy families and elders to brighten their lives. They continue to make donations at Christmas to Toys for Tots and seasonally to hurricane relief funds.

Program staff were observed to have an understanding of the individual's communication needs and effectively communicated as well as made concerted efforts to communicate with the individual by

evidence and observation of the use of picture/vision boards as well as technological devices that enhanced communication between individuals served, program staff, outside employers and family members. In regard to feedback on staff performance the program allows individuals served to provide feedback throughout the intake admission process and provides feedback during program support staff performance reviews/evaluations. Communication between family/guardians is effective through mediums including but not limited to mailings, emails, telephone and community message boards located at the program location sites. We continue to send out yearly surveys to individuals and family members.

During Covid-19: Although the Launch program sites were closed, we continued to provide training, enrichment, and various classes via zoom throughout the day. Support staff worked together to enrich the lives of individuals who wanted to participate in art, music, trivia, explore the word, community safety and other classes. Staff made cooking and art bags that were delivered safely to each individual who wanted to participate.

Support staff worked to maintain the Elder Concierge program throughout the pandemic. We continued to help and support needy, isolated elders in surrounding communities. We cooked meals and delivered to them. As of today, the Launch program continues to cook for over 90 elders in the local communities. We plan the menu, shop, prep, cook, label and deliver healthy meals. This is a paid opportunity for all the individuals in the program.

Another initiative that started during the pandemic was collaborating with JVS (Jewish Vocational Services) transition to work program. They offered a Serve Safe certificate training program and we successfully graduated five individuals who want to work in culinary.

We also purchased a food trailer which has been very successful and is building our Social Enterprise aspect of the Launch programs. The Launch Eats trailer is hired for various events throughout the communities. The Launch crew is working together to make this all happen.

Career planning, job development, and employment are the programs' central focus during the individual's served hiring/screening/assessment/orientation process and then ongoing after that. Individuals served are given the opportunity to explore a wide range of employment opportunities while developing their skills individually as well as in a group setting. Support staff are knowledgeable of individuals abilities and work closely with them to help overcome any external barriers that may inhibit employment/workforce development. Individuals served interviewed during this survey period reported feeling supported by the program staff in their employment/career goals and felt they were closer to reaching their goals by attending this program.

Launch Cohasset consistently reviewed benefits with their individuals. This was not evidenced annually during the survey at Launch Hingham. They have begun the process to get all their individuals up to date on this training. This resulted in a NOT MET rating for C26.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	8/8	0/8	
Residential and Individual Home Supports	71/76	5/76	
Individual Home Supports Placement Services Residential Services			
Critical Indicators	8/8	0/8	
Total	79/84	5/84	94%
2 Year License			
# indicators for 60 Day Follow-up		5	

	Met / Rated	Not Met / Rated	% Met
Organizational	8/8	0/8	
Employment and Day Supports	46/47	1/47	
Community Based Day Services Employment Support Services			
Critical Indicators	6/6	0/6	
Total	54/55	1/55	98%
2 Year License			
# indicators for 60 Day Follow-up		1	

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

Indicator #	Indicator	Area Needing Improvement
L15	Hot water temperature tests between 110 and 120 degrees (as of 1/2014).	In two of six locations water temperatures exceeded allowable limits. The agency needs to ensure that water temperatures are maintained between 110 and 120 degrees.
L67	There is a written plan in place accompanied by a training plan when the agency has shared or delegated money management responsibility.	Three out of seven money management plans did not include all required components. The agency needs to ensure that money management plans contain all required components.

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

Indicator #	Indicator	Area Needing Improvement
L68	Expenditures of individual's funds are made only for purposes that directly benefit the individual.	For five out of seven individuals an ongoing and frequent use of money orders has been identified which does not benefit the individual. The costs for these money orders were deducted from the individual's personal accounts. The agency needs to explore other financial mechanisms to purchase personal items, community trips or pay bills so that ongoing monthly costs could be avoided. The agency needs to ensure that expenditures are made only for purposes that benefit the individual.
L69	Individual expenditures are documented and tracked.	Four out of seven individuals have assets exceeding allowable limits to maintain health insurance and/or Social Security Benefits. The agency has not supported individuals to explore protected savings options such as ABLE accounts. The agency needs to ensure that individuals funds are maintained at a level to not exceed allowable limits to maintain health benefits.
L93 (05/22)	The provider has emergency back up plans to assist individuals to plan for emergencies and/or disasters.	For five of nine individuals, the agency had not developed individualized back up plans related to emergencies other than fire and/or disasters. The agency needs to have policies, procedures and/or guidelines in place to instruct Residential and home care providers of when and how to implement emergency back-up plans. Individuals, staff, and/or home care providers need to be aware of generic and individual emergency back-up systems.

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

Indicator #	Indicator	Issue identified	Action planned to address
L8	Emergency fact sheets are current and accurate and available on site.	EFS needs to have accurate diagnoses listed. Categories need to be updated to reflect changes if there is a history of elopement.	Launch support staff have been given the changes needed from the QA department.

CERTIFICATION FINDINGS

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

	Reviewed By	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	DDS	6/6	0/6	
Employment and Day Supports	DDS 2/3 Provider 32/33	34/36	2/36	
Community Based Day Services	DDS 2/3 Provider 12/12	14/15	1/15	
Employment Support Services	DDS 0/0 Provider 20/21	20/21	1/21	
Total		40/42	2/42	95%
Certified				

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

Indicator #	Indicator	Area Needing Improvement
C12	Individuals are supported to explore, define, and express their need for intimacy and companionship.	For one out of two individuals, the agency had not reviewed (formally or informally) an individual's desire to explore opportunities to develop companionship. Staff were unaware or lacked training in how to support an individual's needs or interests for intimacy. The agency needs to support individuals to explore, define and express their need for companionship.

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

Indicator #	Indicator	Area Needing Improvement
C12	Individuals are supported to explore, define, and express their need for intimacy and companionship.	For three out of four individuals, the agency had not reviewed (formally or informally) an individual's desire to explore opportunities to develop companionship. Staff were unaware or lacked training in how to support an individual's needs or interests for intimacy. The agency needs to support individuals to explore, define and express their need for companionship.

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

Indicator #	Indicator	Area Needing Improvement
C39 (07/21)	There is a plan developed to identify job goals and support needs that would lead to movement into supported employment.	For two of seven individuals there was no detailed, written plan in place outlining the individuals' goals and the supports needed to assist them in progressing toward their chosen fields of interest.

Employment Support Services- Areas Needing Improvement on Standards not met From Provider review:

Indicator #	Indicator	Issues identified	Action planned to address
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.	Launch Hingham did not provide annual benefit analysis training in support. Training was provided, but it was not annually. Families need more assistance of understanding how employment effects benefit allocations and the importance of prompt and accurate reporting to Social Security.	Benefit training resource materials will be forwarded to individuals and families annually by both Launch Cohasset and Launch Hingham. Social Security will be contacted about offering training/counseling to families.

MASTER SCORE SHEET LICENSURE

Organizational: SOUTH SHORE SUPPORT SERVICES, INC.

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
☐ L2	Abuse/neglect reporting	11/12	Met(91.67 %)
L3	Immediate Action	5/6	Met(83.33 %)
L4	Action taken	3/3	Met
L48	HRC	1/1	Met
L74	Screen employees	4/4	Met
L75	Qualified staff	3/3	Met
L76	Track trainings	19/20	Met(95.00 %)
L83	HR training	19/20	Met(95.00 %)

Residential and Individual Home Supports:

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L1	Abuse/neglect training	I	4/4	3/3	2/2				9/9	Met
L5	Safety Plan	L	2/2	2/3	2/2				6/7	Met (85.71 %)
☐ L6	Evacuation	L	2/2	2/3	2/2				6/7	Met (85.71 %)
L7	Fire Drills	L	2/2						2/2	Met
L8	Emergency Fact Sheets	I	4/4	3/3	2/2				9/9	Met
L9 (07/21)	Safe use of equipment	I	4/4	3/3					7/7	Met
L10	Reduce risk interventions	I			1/1				1/1	Met
☐ L11	Required inspections	L	2/2	2/2	2/2				6/6	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
Ⓡ L12	Smoke detectors	L	2/2	2/2	2/2				6/6	Met
Ⓡ L13	Clean location	L	2/2	2/2	2/2				6/6	Met
L14	Site in good repair	L		2/2	2/2				4/4	Met
L15	Hot water	L	2/2	1/2	1/2				4/6	Not Met (66.67 %)
L16	Accessibility	L	2/2	2/2	2/2				6/6	Met
L17	Egress at grade	L	2/2	2/2	1/1				5/5	Met
L18	Above grade egress	L		1/1	1/1				2/2	Met
L19	Bedroom location	L	2/2	2/2	1/1				5/5	Met
L20	Exit doors	L	2/2	2/2					4/4	Met
L21	Safe electrical equipment	L	2/2	2/2	2/2				6/6	Met
L22	Well-maintained appliances	L	2/2	2/2	2/2				6/6	Met
L23	Egress door locks	L		2/2					2/2	Met
L24	Locked door access	L	2/2	2/2	2/2				6/6	Met
L25	Dangerous substances	L	2/2	2/2					4/4	Met
L26	Walkway safety	L	2/2	2/2	2/2				6/6	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L27	Pools, hot tubs, etc.	L		1/1	1/1				2/2	Met
L28	Flammables	L	1/1	2/2					3/3	Met
L29	Rubbish/combustibles	L	1/1	2/2	2/2				5/5	Met
L30	Protective railings	L	1/1	1/2	2/2				4/5	Met (80.0 %)
L31	Communication method	I	4/4	3/3	2/2				9/9	Met
L32	Verbal & written	I	4/4	3/3	2/2				9/9	Met
L33	Physical exam	I	4/4	3/3	2/2				9/9	Met
L34	Dental exam	I	4/4	2/2	2/2				8/8	Met
L35	Preventive screenings	I	3/4	3/3	2/2				8/9	Met (88.89 %)
L36	Recommended tests	I	4/4	2/3	2/2				8/9	Met (88.89 %)
L37	Prompt treatment	I	4/4	3/3	2/2				9/9	Met
Ⓡ L38	Physician's orders	I	4/4	2/2	1/1				7/7	Met
L39	Dietary requirements	I	2/2	0/1	1/1				3/4	Met
L40	Nutritional food	L	2/2	2/2					4/4	Met
L41	Healthy diet	L	2/2	3/3	2/2				7/7	Met
L42	Physical activity	L	2/2	2/3	2/2				6/7	Met (85.71 %)
L43	Health Care Record	I	4/4	3/3	2/2				9/9	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L44	MAP registration	L	2/2	2/2					4/4	Met
L45	Medication storage	L	2/2	2/2					4/4	Met
L46	Med. Administration	I	4/4	2/2	1/1				7/7	Met
L47	Self medication	I	1/1	3/3	2/2				6/6	Met
L49	Informed of human rights	I	4/4	3/3	2/2				9/9	Met
L50 (07/21)	Respectful Comm.	I	4/4	3/3	2/2				9/9	Met
L51	Possessions	I	4/4	3/3	2/2				9/9	Met
L52	Phone calls	I	4/4	3/3	2/2				9/9	Met
L53	Visitation	I	4/4	3/3	2/2				9/9	Met
L54 (07/21)	Privacy	I	4/4	3/3	2/2				9/9	Met
L55	Informed consent	I			1/1				1/1	Met
L61	Health protection in ISP	I	3/3	1/1	1/1				5/5	Met
L62	Health protection review	I	3/3	1/1	1/1				5/5	Met
L63	Med. treatment plan form	I	4/4						4/4	Met
L64	Med. treatment plan rev.	I	3/3						3/3	Met

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	2/4	2/2	0/1				4/7	Not Met (57.14 %)
L68	Funds expenditure	I	1/4	1/2	0/1				2/7	Not Met (28.57 %)
L69	Expenditure tracking	I	3/4	0/2	0/1				3/7	Not Met (42.86 %)
L70	Charges for care calc.	I	4/4		2/2				6/6	Met
L71	Charges for care appeal	I	4/4		2/2				6/6	Met
L77	Unique needs training	I	4/4	3/3	2/2				9/9	Met
L78	Restrictive Int. Training	L	1/1						1/1	Met
L80	Symptoms of illness	L	2/2	3/3	2/2				7/7	Met
L81	Medical emergency	L	2/2	3/3	2/2				7/7	Met
L82	Medication admin.	L	2/2	2/2					4/4	Met
L84	Health protect. Training	I	3/3	1/1	1/1				5/5	Met
L85	Supervision	L	2/2	3/3	2/2				7/7	Met
L86	Required assessments	I	3/3	3/3	1/1				7/7	Met
L87	Support strategies	I	4/4	2/3	1/1				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
L88	Strategies implemented	I	4/4	2/3	2/2				8/9	Met (88.89 %)
L90	Personal space/ bedroom privacy	I	4/4	3/3	2/2				9/9	Met
L91	Incident management	L	1/2	3/3	2/2				6/7	Met (85.71 %)
L93 (05/22)	Emergency back-up plans	I	1/4	2/3	1/2				4/9	Not Met (44.44 %)
L94 (05/22)	Assistive technology	I	3/4	3/3	2/2				8/9	Met (88.89 %)
L96 (05/22)	Staff training in devices and applications	I	3/3	1/1	2/2				6/6	Met
L99 (05/22)	Medical monitoring devices	I			1/1				1/1	Met
#Std. Met/# 76 Indicator									71/76	
Total Score									79/84	
									94.05%	

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		2/2	3/3	Met
L7	Fire Drills	L	Provider		-	-	-	Met
L8	Emergency Fact Sheets	I	Provider		-	-	-	Not Met
L9 (07/21)	Safe use of equipment	I	DDS	7/7		7/7	14/14	Met
L10	Reduce risk interventions	I	Provider		-	-	-	Met
☐ L11	Required inspections	L	DDS	1/1		2/2	3/3	Met
☐ L12	Smoke detectors	L	DDS	1/1		2/2	3/3	Met
☐ L13	Clean location	L	DDS	1/1		2/2	3/3	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

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L37	Prompt treatment	I	Provider		-	-	-	Met
L38	Physician's orders	I	DDS	3/3		4/4	7/7	Met
L39	Dietary requirements	I	Provider		-	-	-	Met
L44	MAP registration	L	Provider		-	-	-	Met
L49	Informed of human rights	I	Provider		-	-	-	Met
L50 (07/21)	Respectful Comm.	I	DDS	7/7		7/7	14/14	Met
L51	Possessions	I	Provider		-	-	-	Met
L52	Phone calls	I	Provider		-	-	-	Met
L54 (07/21)	Privacy	I	DDS	7/7		7/7	14/14	Met
L55	Informed consent	I	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
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	7/7		7/7	14/14	Met
L94 (05/22)	Assistive technology	I	DDS	6/6		5/6	11/12	Met (91.67 %)

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L96 (05/22)	Staff training in devices and applications	I	DDS	6/6		5/5	11/11	Met
#Std. Met/# 47 Indicator							46/47	
Total Score							54/55	
							98.18%	

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	4/4	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	1/4	Not Met (25.00 %)
C13	Skills to maximize independence	4/4	Met
C14	Choices in routines & schedules	4/4	Met
C15	Personalize living space	2/2	Met

Residential Services

Indicator #	Indicator	Met/Rated	Rating
C16	Explore interests	4/4	Met
C17	Community activities	4/4	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	4/4	Met
C49	Physical setting is consistent	2/2	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

Placement 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	1/2	Not Met (50.0 %)
C13	Skills to maximize independence	2/2	Met
C14	Choices in routines & schedules	2/2	Met
C15	Personalize living space	2/2	Met
C16	Explore interests	2/2	Met
C17	Community activities	2/2	Met
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

Placement Services

Indicator #	Indicator	Met/Rated	Rating
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

Individual Home Supports

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	3/3	Met
C8	Family/guardian communication	3/3	Met
C9	Personal relationships	2/2	Met
C10	Social skill development	3/3	Met
C11	Get together w/family & friends	3/3	Met
C12	Intimacy	3/3	Met
C13	Skills to maximize independence	3/3	Met
C14	Choices in routines & schedules	3/3	Met
C15	Personalize living space	3/3	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	3/3	Met
C51	Ongoing satisfaction with services/ supports	3/3	Met
C52	Leisure activities and free-time choices /control	3/3	Met

Individual Home Supports

Indicator #	Indicator	Met/Rated	Rating
C53	Food/ dining choices	3/3	Met

Community Based Day Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C7	Feedback on staff / care provider performance	DDS	7/7	Met
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	5/7	Not Met (71.43 %)
C40	Community involvement interest	Provider	-	Met
C41	Activities participation	Provider	-	Met
C42	Connection to others	Provider	-	Met
C43	Maintain & enhance relationship	Provider	-	Met
C44	Job exploration	Provider	-	Met
C45	Revisit decisions	Provider	-	Met
C46	Use of generic resources	Provider	-	Met
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	Provider	-	Met
C23	Assess skills & training needs	Provider	-	Met
C24	Job goals & support needs plan	Provider	-	Met
C25	Skill development	Provider	-	Met
C26	Benefits analysis	Provider	-	Not Met (0 %)

Employment Support Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C27	Job benefit education	Provider	-	Met
C28	Relationships w/businesses	Provider	-	Met
C29	Support to obtain employment	Provider	-	Met
C30	Work in integrated settings	Provider	-	Met
C31	Job accommodations	Provider	-	Met
C32	At least minimum wages earned	Provider	-	Met
C33	Employee benefits explained	Provider	-	Met
C34	Support to promote success	Provider	-	Met
C35	Feedback on job performance	Provider	-	Met
C36	Supports to enhance retention	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