



**PROVIDER REPORT
FOR**

**The Judge Rotenberg
Educational Center, Inc
240 Turnpike Street
Canton, MA 02021**

Version

Public Provider Report

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

SUMMARY OF OVERALL FINDINGS

Provider The Judge Rotenberg Educational Center, Inc

Review Dates 3/30/2023 - 4/5/2023

Service Enhancement Meeting Date 4/18/2023

Survey Team Michelle Boyd
Kayla Condon
Linda Griffith
Scott Nolan (TL)
Katherine Gregory

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	8 location(s) 8 audit (s)	Targeted Review	DDS 23/27 Provider 63 / 63 86 / 90 2 Year License 04/18/2023-04/18/2025		DDS 0 / 1 Provider 25 / 25 25 / 26 Certified 04/18/2023 - 04/18/2025
Residential Services	8 location(s) 8 audit (s)			DDS Targeted Review	19 / 20
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	2 location(s) 18 audit (s)	Targeted Review	DDS 16/18 Provider 57 / 57 73 / 75 2 Year License 04/18/2023-04/18/2025		DDS 3 / 4 Provider 38 / 38 41 / 42 Certified 04/18/2023 - 04/18/2025
Community Based Day Services	1 location(s) 11 audit (s)			DDS Targeted Review	15 / 15
Employment Support Services	1 location(s) 7 audit (s)			DDS Targeted Review	20 / 21
Planning and Quality Management (For all service groupings)				DDS Targeted Review	6 / 6

EXECUTIVE SUMMARY :

The Judge Rotenberg Educational Center, Inc (JRC) is a private not for profit organization that provides day and residential services to children and adults from Massachusetts as well as other states. Since 1971, JRC has provided education and treatment to both emotionally disturbed students with conduct, behavior, emotional, and/or psychiatric problems, as well as those with intellectual disabilities or on the autism spectrum. At the time of this survey, the agency supported 157 adults in both residential and day services within its network of services.

This review included services of adults who received residential services, Community Based Day Supports (CBDS), and employment supports. The agency was eligible for and chose to conduct a self-assessment of licensure and certification indicators for both its day and residential services, with DDS conducting a targeted review. The current targeted review by the DDS Office of Quality Enhancement included critical indicators and all licensing and certification indicators which were not met in its day and residential services from the previous survey in 2020, in addition to new or revised licensure indicators. The results of this licensing and certification review reflect a combination of the DDS targeted review and the ratings from the agency's self-assessment.

During the survey, a number of positive outcomes were observed throughout the agency. In the environmental domain, all locations were found to be safe, in good repair and required inspections were current. In the health domain, staff supported individuals to make regular visits with specialists as scheduled and follow-up on additional appointments as recommended. Staff who administered medications were in compliance with all training requirements. Staff interactions and conversations with individuals were observed to be respectful. In residential and CBDS/employment services, the longevity of staff's relationship and knowledge of individuals promoted respectful interactions. Staff focused on social skills training in one home that assisted an individual to make changes in the way they communicated and cooperated with others. In employment, individuals were supported to work independently as possible in housekeeping and food services.

While the agency demonstrated positive outcomes, the survey identified some areas that needed to be strengthened. The provider needs to ensure that individuals have privacy in their own personal space including review for the need of ongoing visual supervision. In the area of assistive technology, while all individuals had been assessed in various areas such as daily living or planning skills, and the individual's limitations had been identified, the assessment did not identify what modifications or assistive technology would support them to be more independent nor were there any current use of assistive technology. Individuals should be further supported to gain independence and take actions in line with their interests. The agency also needs to address two issues within the domain of Human Rights. The Human Rights Committee did not have the expertise of a lawyer to review practices and policies that may impact individual services to meet composition requirements; the agency should continue its efforts in recruiting a lawyer.

In the certification area for residential services, the agency needs to increase assistance to individuals to explore, pursue and express their needs related to intimacy and developing relationships that may lead to companionship. For employment services, the agency had administered vocational assessments to identify behavioral and goals for individuals who were employed by the agency. There were no goals developed leading toward employment for individuals in community-based day services. The agency needs to conduct an analysis of how current and future earnings can affect entitlements and communicate this information to the individual/and or family.

Based on the findings of this report and the agency's self-assessment, JRC has earned Two-Year Licenses for both its Residential supports with 96% of indicators met and Employment/Day supports with 97% of indicators met. The agency is also Certified for both Residential and Employment/Day services. The agency will conduct its own follow-up in licensure indicators not met within 60 days, and submit findings to the Office of Quality Enhancement.

Description of Self Assessment Process:

Under the direction of JRC's ED, we used the DDS Licensure/Certification Indicator to establish criteria used to measure each indicator to ensure consistency among reviewers. Audits were completed using the corresponding worksheets and rating sheet. JRC used 80% as a threshold, as well as other measurements, to determine if an indicator was Met or Not Met.

In determining sample sizes, JRC ensured that a representative sample of records and programs were visited and reviewed. JRC's Administrations was responsible for determining the sample size, randomly choosing the sample, and reporting the sample to the staff conducting the audits. Staff responsible for conducting the audits were notified of the sample on March 23, 2023, and audits were conducted from March 24, 2023 through March 27, 2023. Eight DDS homes were reviewed and two clients from each residence were chosen. In addition, 11 clients were selected from JRC's CBDS Program, and seven clients from JRC's Employment Support Services Program. Staff completed the Residential and Individual Home, Employment, and Day Supports indicator audits through record reviews, client and staff interviews, and site visits. Worksheets and supporting documentation were provided to the Director, who was responsible for analyzing the data and determining which indicators were Met or Not Met. JRC's Administration reviewed numerous indicators at the organizational level:

The JRC Policy on Reporting Abuse outlines staff responsibilities as mandated reporters, including what constitutes a reportable condition, the role as a mandated reporter, practices for filing with DPPC, and reporting to supervisory personnel. JRC staff are provided on-line abuse/neglect training every 6 months, quarterly policy reminders, and annual client rights training. JRC takes immediate action once it becomes aware of an allegation. JRC has an incident review committee to identify programmatic, staff, and systematic issues for investigations. JRC's Administration interviewed direct and administrative staff to determine knowledge of the Policy; interviewed the Director of Student Services, and requested copies of DPPC/DDS action plans and supporting documentation for the last 2 years, which were reviewed.

Each client is annually trained on abuse and neglect reporting. Training is documented and maintained as part of the record. JRC also has a procedure to solicit information about any possible incident or concern a client may have and has two staff to serve as investigators, providing regular reports to management. Each client is also educated about all aspects of their Human Rights through JRC's Human Rights Curriculum which is presented to each client yearly.

The Student Services Department updates residential safety plans as necessary, and ensures that the Plans are maintained in each residential and Day location. They are also responsible for maintaining residential and workplace fire drill and evacuation documentation. Fire drills are coordinated and conducted at the residences by the Residential Team Leader, and at the Day Program by the Student Services department.

JRC maintains systems for tracking, monitoring and responding to behavioral issues, and reducing risk for clients whose behavior may pose a risk to themselves and others, including 24-hour clinical and administrator on-call that permits direct care staff to seek advice from clinicians and administrators at any time; direct care, supervisory, and administrative end-of-shift reports; staff incident reporting system; 24-hour behavior frequency data collection system, clinical review of significant behavioral incidents via DVR; current status documentation that is updated with behavioral, medical, and other information; a program that includes positive/replacement behavior targets, consideration of relevant antecedents, and differential reinforcement components; ongoing FBAs to develop the most individualized treatment program; and a dynamic behavioral intervention program (BIP) change system that enables changes to BIP components to respond to changing needs. Clients participate in behavioral counseling. This assists clients with self-management and interventions to promote their educational, vocational, social, and behavioral progress. Within JRC's ABA-based approach, supports and services are provided in a manner that promotes the opportunity to undergo typical developmental experiences, even though such experiences may entail an element of risk; however, the client's safety and well-being is always paramount.

JRC maintains an effective Human Rights Committee, providing safeguards for clients served. The minutes were audited for mandated composition, meeting frequency, and quorums and to assess whether specific behavior plans were reviewed. Interviews were also conducted with JRC's HR Coordinator, by-laws were reviewed, and training provided to HRC members.

Restraint information via HCSIS was reviewed, ensuring that information was entered in a timely and accurate manner. JRC provides DDS with copies of each restraint on a monthly basis as agreed upon by JRC and DDS. Restraints are reviewed by JRC's HRC within 120 days, which was confirmed through a review of HCSIS and HRC minutes.

JRC implements its program in a manner that promotes humane care and treatment of its clients. No client at JRC shall be subject to any form of abuse, mistreatment or neglect by any act or omission by a staff member or other client. The Director of Student Services serves as JRC's Human Rights Coordinator; and the client's Case Manager acts as their Human Rights Officer. The HRO annually trains clients in their human rights, to the maximum of their capabilities and interests, and assists them to exercise those rights, including informing them of the grievance procedures and the right to go to the HRC on any issue involving human rights.

JRC screens prospective staff per applicable requirements, and ensures staff have the required qualifications and certifications. JRC utilizes a database to track all trainings and in-services for staff, including, safety awareness, environmental modifications, fire safety, first aid, CPR, human rights, and abuse and neglect reporting. A sample of employee files were audited to ensure that staff had the necessary qualifications and certifications that are required and specific to their job. Each staff member is required to complete a minimum of 3 weeks of intensive training and testing prior to providing support to clients and 30 hours of in-service training per year. JRC tracks the training requirements of each of its staff in a database maintained by Human Resources. The Training department notifies each staff member on a monthly basis when s/he needs to update any aspect of their training. Attendance is documented with attendance sheets that are completed by the staff trainer, and provided to HR for recordkeeping. All completed trainings and renewal dates are tracked via JRC's database.

JRC staff are required to complete reports after each shift, documenting repairs and maintenance needs. JRC residential monitors evaluate residences for cleanliness and report any problems to Housekeeping or Maintenance.

Residential Team Leaders are assigned roving shifts at the residences, reporting any repairs or needs that are discovered. All staff members are required to report repair or maintenance needs. Internal reports citing any residential repair issues or maintenance needs are generated through JRC's database and are automatically disseminated to Maintenance. When a repair is completed, maintenance signs and dates the documentation and files it. JRC schedules required maintenance and inspections as required.

The communication needs for each client is indicated on the recording sheet, enabling staff to communicate with clients in their method of communication, to the greatest extent possible. During the ISP process, JRC develops a written plan to implement necessary modifications and support services to identify and serve clients with special communication needs.

JRC's nursing services are available 24 hours per day, 7 days per week. Nursing works with the Nutritionist and Director of PE, ensuring that each client's dietary and physical education needs are met. JRC ensures that annual physical and dental exams, preventive screenings, and recommended tests are completed. JRC utilizes emergency services at nearby hospitals as needed.

Nursing provides all medical information to the treatment team and all necessary personnel and is responsible for updating each client's packet. Nursing maintains and updates binders that contain all relevant medical information. A binder is kept at the main building and in the residence. JRC also maintains a full electronic record for each client.

JRC ensures that all sites where MAP certified staff members are administering medication is registered by DPH. Nursing maintains a MAP that outlines all of the medications that clients are taking. All medication is locked in a secure cabinet out of reach of clients. Medication is self-administered when appropriate, in accordance with JRC's Policy.

15 days prior to the ISP meeting, JRC will send the progress summaries of the goals for the previous year, the new provider support agreements (goals), and any assessments and documents required by DDS. JRC will also provide DDS with copies of the client's program description, residential practices, the 3-month treatment summary, a list of current medications, a medication plan if the client has a Roger's treatment plan, and copies of the last physical and dental exam. After the ISP meeting, the new goals are tracked to ensure that the client is working on and making progress towards his/her goals. If the client fails to make reasonable progress, changes are made to the program.

Progress reports are completed by the treatment team, and include residential and vocational status, behavioral progress, topography changes, medical issues, replacement behaviors, discharge plans, a summary and goals.

JRC provides training to staff members to support the needs and goals reflected in the ISPs. Staff members learn and are trained on the ISP and the clients' goals during their initial 3-week training period. This is also reviewed during Supervisor training which occurs when any staff receives a supervisory position and during scheduled in-service trainings.

JRC staff have received trainings on Assistive Technology, staff have been trained in devices and applications, as well as medical monitoring devices where appropriate. Training will be ongoing. JRC has contracted with an AT consultant for assessment purposes to ensure that we are promoting as much independence as possible for each client.

JRC collects data and analyses it in many ways to assist in planning and quality improvement of the organization. Satisfaction surveys are sent annually to the clients, the guardians, and the agencies responsible for the individual. The Student Services department and the treatment team are responsible for follow up. JRC utilizes input from stakeholders to change and grow. The JRC Parent's association is an active group that meets regularly and offers suggestions. JRC has both an Executive Committee which meets monthly and a Board of Directors which meets quarterly. These two groups are responsible for future planning.

JRC treatment teams work closely with each individual on developing relationships and acquiring appropriate and useful social skills. Clients are encouraged to meet with family and friends at the residence, the Day program and in the community. Intimacy assessments are completed on each client by his/her clinician and discussions take place regarding relationship building.

Skills to maximize independence, choices in routines and schedules, personalize living space, purchase personal belongings, knowledgeable decisions, satisfaction with services, leisure activities and free time choices, as well as food choices are important parts of the JRC program. Clients have meetings with administrators and treatment teams regarding wants and suggestions. Individuals have choices in outings and activities they attend, and with their daily routines at the day program and residence.

Preference assessments are completed with clients to determine opportunities they would like to explore. JRC encourages clients to explore interests, attend community activities, use generic resources, utilize transportation to/from the community either through JRC staff, rideshare, or public transportation. Clients are encouraged to make neighborhood connections. Individuals attend social events with friends and co-workers when safe and appropriate. Individuals are encouraged to use community resources.

During the day, many clients have paid employment opportunities. These jobs include working in the APR, the kitchen, housekeeping, as an admin assistant, or in any area where the client has shown interest. Other clients may choose to spend their time participating in various games, athletic opportunities, community outings, or other activities.

JRC has a document that keeps track of employees, hire dates, termination dates, positions, work responsibilities, and independence. This is based on many factors. Employment for clients is monitored by staff to build skills, work ethic, to ensure job responsibilities are fulfilled and interactions with colleagues are professional and appropriate. As clients develop and remain stable they have the opportunity to increase responsibilities and independence.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	9/10	1/10	
Residential and Individual Home Supports	77/80	3/80	
Residential Services			
Critical Indicators	8/8	0/8	
Total	86/90	4/90	96%
2 Year License			
# indicators for 60 Day Follow-up		4	

	Met / Rated	Not Met / Rated	% Met
Organizational	9/10	1/10	
Employment and Day Supports	64/65	1/65	
Community Based Day Services Employment Support Services			
Critical Indicators	8/8	0/8	
Total	73/75	2/75	97%
2 Year License			
# indicators for 60 Day Follow-up		2	

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

Indicator #	Indicator	Area Needing Improvement
L48	The agency has an effective Human Rights Committee.	The agency Human Right's Committee met regularly in fulfilling its roles and responsibilities. The committee did not have an attorney as the member resigned a year ago. The agency needs to ensure it has the required membership for the Human Rights Committee.

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

Indicator #	Indicator	Area Needing Improvement
L5	There is an approved safety plan in home and work locations.	In two locations, staff were not trained in the safety plan and/or there was not adequate coverage of trained staff on shift. The agency needs to ensure staff are knowledgeable and trained in the safety plan. safety plan.
L90	Individuals are able to have privacy in their own personal space.	Two homes, have multiple monitors located in common areas of the home (dining room/kitchen) that is visible to all individuals, staff and visitors in the home. The agency needs to ensure individuals have privacy in their personal space.
L94 (05/22)	Individuals have assistive technology to maximize independence.	Five individuals did not have any assistive technology explored, in place, or modified to maximize independence. The agency needs to ensure individuals are afforded opportunities to have assistive technology or other modifications to maximize their independence.

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

Indicator #	Indicator	Area Needing Improvement
L94 (05/22)	Individuals have assistive technology to maximize independence.	Four individuals did not have any assistive technology explored, in place or modified to maximize independence. The agency needs to ensure individuals are afforded opportunities to have assistive technology or other modifications to maximize their independence.

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 0/1 Provider 19/19	19/20	1/20	
Residential Services	DDS 0/1 Provider 19/19	19/20	1/20	
Total		25/26	1/26	96%
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 3/4 Provider 32/32	35/36	1/36	
Community Based Day Services	DDS 2/2 Provider 13/13	15/15	0/15	
Employment Support Services	DDS 1/2 Provider 19/19	20/21	1/21	
Total		41/42	1/42	98%
Certified				

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.	No support strategies were in place for three individuals to explore, define, and actualize their interests in companionship and intimacy. The agency needs to support individuals to define and express their need for intimacy and companionship.

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.	The agency has not completed an analysis for individuals who earn wages to manage wages so it does not impact entitlements as part of the career planning process. The agency needs to ensure that individuals and guardians understand how earned income impacts their entitlements and be managed to work successfully in the community.

MASTER SCORE SHEET LICENSURE

Organizational: The Judge Rotenberg Educational Center, Inc

Indicator #	Indicator	Reviewed by	Met/Rated	Rating(Met,Not Met,NotRated)
☐ L2	Abuse/neglect reporting	DDS	11/11	Met
L3	Immediate Action	Provider	-	Met
L4	Action taken	Provider	-	Met
L48	HRC	DDS	0/1	Not Met(0 %)
L65	Restraint report submit	Provider	-	Met
L66	HRC restraint review	DDS	204/204	Met
L74	Screen employees	Provider	-	Met
L75	Qualified staff	Provider	-	Met
L76	Track trainings	Provider	-	Met
L83	HR training	Provider	-	Met

Residential and Individual Home Supports:

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
L1	Abuse/neglect training	I	Provider	-						-	Met
L5	Safety Plan	L	DDS	6/8						6/8	Not Met (75.00 %)
☐ L6	Evacuation	L	DDS	8/8						8/8	Met
L7	Fire Drills	L	Provider	-						-	Met
L8	Emergency Fact Sheets	I	DDS	8/8						8/8	Met
L9 (07/21)	Safe use of equipment	I	DDS	7/8						7/8	Met (87.50 %)
L10	Reduce risk interventions	I	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
☑ L11	Required inspections	L	DDS	7/7						7/7	Met
☑ L12	Smoke detectors	L	DDS	8/8						8/8	Met
☑ L13	Clean location	L	DDS	8/8						8/8	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
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	Provider	-						-	Met
L24	Locked door access	L	Provider	-						-	Met
L25	Dangerous substances	L	Provider	-						-	Met
L26	Walkway safety	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
L27	Pools, hot tubs, etc.	L	Provider	-						-	Met
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	Provider	-						-	Met
L36	Recommended tests	I	DDS	7/7						7/7	Met
L37	Prompt treatment	I	Provider	-						-	Met
Ⓡ L38	Physician's orders	I	DDS	8/8						8/8	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	DDS	7/8						7/8	Met (87.50 %)

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
L44	MAP registration	L	Provider	-						-	Met
L45	Medication storage	L	Provider	-						-	Met
L46	Med. Administration	I	DDS	8/8						8/8	Met
L49	Informed of human rights	I	DDS	8/8						8/8	Met
L50 (07/21)	Respectful Comm.	I	DDS	8/8						8/8	Met
L51	Possessions	I	DDS	8/8						8/8	Met
L52	Phone calls	I	Provider	-						-	Met
L53	Visitation	I	Provider	-						-	Met
L54 (07/21)	Privacy	I	DDS	7/8						7/8	Met (87.50 %)
L55	Informed consent	I	Provider	-						-	Met
L56	Restrictive practices	I	Provider	-						-	Met
L57	Written behavior plans	I	Provider	-						-	Met
L58	Behavior plan component	I	Provider	-						-	Met
L59	Behavior plan review	I	Provider	-						-	Met
L60	Data maintenance	I	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
L61	Health protection in ISP	I	DDS	5/5						5/5	Met
L62	Health protection review	I	Provider	-						-	Met
L63	Med. treatment plan form	I	Provider	-						-	Met
L64	Med. treatment plan rev.	I	Provider	-						-	Met
L67	Money mgmt. plan	I	Provider	-						-	Met
L68	Funds expenditure	I	Provider	-						-	Met
L69	Expenditure tracking	I	Provider	-						-	Met
L70	Charges for care calc.	I	DDS	8/8						8/8	Met
L71	Charges for care appeal	I	DDS	8/8						8/8	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

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
Ⓡ L82	Medication admin.	L	DDS	8/8						8/8	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
L90	Personal space/bedroom privacy	I	DDS	6/8						6/8	Not Met (75.00 %)
L91	Incident management	L	Provider	-						-	Met
L93 (05/22)	Emergency back-up plans	I	DDS	8/8						8/8	Met
L94 (05/22)	Assistive technology	I	DDS	3/8						3/8	Not Met (37.50 %)
L96 (05/22)	Staff training in devices and applications	I	DDS	2/2						2/2	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
L99 (05/22)	Medical monitoring devices	I	DDS	1/1						1/1	Met
#Std. Met/# 80 Indicator										77/80	
Total Score										86/90	
										95.56%	

Employment and Day Supports:

Ind. #	Ind.	Loc. or Indiv.	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	2/2	Met
L7	Fire Drills	L	Provider		-	-	-	Met
L8	Emergency Fact Sheets	I	Provider		-	-	-	Met
L9 (07/21)	Safe use of equipment	I	DDS	7/7		11/11	18/18	Met
L10	Reduce risk interventions	I	Provider		-	-	-	Met
Ⓟ L11	Required inspections	L	DDS	1/1		1/1	2/2	Met
Ⓟ L12	Smoke detectors	L	DDS	1/1		1/1	2/2	Met
Ⓟ L13	Clean location	L	DDS	1/1		1/1	2/2	Met
L14	Site in good repair	L	Provider		-	-	-	Met
L15	Hot water	L	Provider		-	-	-	Met
L16	Accessibility	L	DDS	1/1		1/1	2/2	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L17	Egress at grade	L	Provider		-	-	-	Met
L18	Above grade egress	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		10/11	11/12	Met (91.67 %)
L39	Dietary requirements	I	Provider		-	-	-	Met
L44	MAP registration	L	Provider		-	-	-	Met
L45	Medication storage	L	Provider		-	-	-	Met
Ⓡ L46	Med. Administration	I	DDS	5/5		9/9	14/14	Met
L49	Informed of human rights	I	Provider		-	-	-	Met
L50 (07/21)	Respectful Comm.	I	DDS	7/7		9/11	16/18	Met (88.89 %)
L51	Possessions	I	Provider		-	-	-	Met
L52	Phone calls	I	Provider		-	-	-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L54 (07/21)	Privacy	I	DDS	7/7		11/11	18/18	Met
L55	Informed consent	I	Provider		-	-	-	Met
L56	Restrictive practices	I	Provider		-	-	-	Met
L57	Written behavior plans	I	Provider		-	-	-	Met
L58	Behavior plan component	I	Provider		-	-	-	Met
L59	Behavior plan review	I	Provider		-	-	-	Met
L60	Data maintenance	I	Provider		-	-	-	Met
L61	Health protection in ISP	I	Provider		-	-	-	Met
L62	Health protection review	I	Provider		-	-	-	Met
L63	Med. treatment plan form	I	Provider		-	-	-	Met
L64	Med. treatment plan rev.	I	Provider		-	-	-	Met
L67	Money mgmt. plan	I	Provider		-	-	-	Met
L68	Funds expenditure	I	Provider		-	-	-	Met
L69	Expenditure tracking	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
Ⓡ L82	Medication admin.	L	DDS	1/1		1/1	2/2	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
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	7/7		11/11	18/18	Met
L94 (05/22)	Assistive technology	I	DDS	5/7		9/11	14/18	Not Met (77.78 %)
L96 (05/22)	Staff training in devices and applications	I	DDS	1/1			1/1	Met
L99 (05/22)	Medical monitoring devices	I	DDS			2/2	2/2	Met
#Std. Met/# 65 Indicator							64/65	
Total Score							73/75	
							97.33%	

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

Residential 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	DDS	5/8	Not Met (62.50 %)
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
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
C8	Family/guardian communication	Provider	-	Met
C13	Skills to maximize independence	Provider	-	Met
C37	Interpersonal skills for work	Provider	-	Met

Community Based Day Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C38 (07/21)	Habilitative & behavioral goals	DDS	7/7	Met
C39 (07/21)	Support needs for employment	DDS	6/7	Met (85.71 %)
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	DDS	0/7	Not Met (0 %)
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	DDS	7/7	Met

Employment Support Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
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