



**PROVIDER REPORT  
FOR**

**VINFEN  
950 Cambridge Street  
Cambridge, MA 02141**

**Version**

**Provider Web Report**

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

# **SUMMARY OF OVERALL FINDINGS**

<b>Provider</b>	VINFEN
<b>Review Dates</b>	1/7/2019 - 1/11/2019
<b>Service Enhancement Meeting Date</b>	1/25/2019
<b>Survey Team</b>	Anne Carey John Hazelton Joseph W. Weru Mark Boghoian (TL) Cheryl Hampton (TL) Margareth Larrieux Lisa MacPhail Leslie Hayes Jennifer Conley-Sevier
<b>Citizen Volunteers</b>	

**Survey scope and findings for Residential and Individual Home Supports**

<b>Service Group Type</b>	<b>Sample Size</b>	<b>Licensure Scope</b>	<b>Licensure Level</b>	<b>Certification Scope</b>	<b>Certification Level</b>
<b>Residential and Individual Home Supports</b>	26 location(s) 32 audit (s)	Full Review	81 / 88 2 Year License 01/25/2019 - 01/25/2021		115 / 117 Certified 01/25/2019 - 01/25/2021
Residential Services	17 location(s) 17 audit (s)			Full Review	21 / 22
ABI-MFP Residential Services	2 location(s) 6 audit (s)			Full Review	22 / 22
Placement Services	3 location(s) 3 audit (s)			Full Review	22 / 22
ABI-MFP Placement Services	1 location(s) 1 audit (s)			Full Review	22 / 22
Respite Services	1 location(s) 2 audit (s)			No Review	No Review
Individual Home Supports	2 location(s) 3 audit (s)			Full Review	22 / 23
Planning and Quality Management (For all service groupings)				Full Review	6 / 6

**Survey scope and findings for Employment and Day Supports**

<b>Service Group Type</b>	<b>Sample Size</b>	<b>Licensure Scope</b>	<b>Licensure Level</b>	<b>Certification Scope</b>	<b>Certification Level</b>
<b>Employment and Day Supports</b>	3 location(s) 8 audit (s)	Full Review	65 / 66 2 Year License 01/25/2019 - 01/25/2021		28 / 28 Certified 01/25/2019 - 01/25/2021
Community Based Day Services	1 location(s) 4 audit (s)			Deemed	
Employment Support Services	2 location(s) 4 audit (s)			Full Review	22 / 22
Planning and Quality Management (For all service groupings)				Full Review	6 / 6

## **EXECUTIVE SUMMARY :**

Vinfen is a large, private, non-profit human service organization that provides an array of services to adults and children with developmental and intellectual disabilities, acquired brain injury, mental illness and behavioral health issues. The services provided to individuals supported by the Department of Developmental Services (DDS) include both residential and day supports. Residentially, the agency provides Twenty-Four Hour Residential Supports, Acquired Brain Injury (ABI) supports, Individual Home Supports (IHS), Placement (Shared Living) and Respite Services. Employment/Day supports provided by the agency include Community Based Day Supports and Employment.

For the purpose of this 2019 DDS Licensing and Certification evaluation Vinfen received a full licensing and certification review of its residential services, and a full licensure review for the Employment / Day service grouping. Residentially this consisted of the audits being conducted at Twenty-Four Hour Homes, ABI homes, Individual Home Supports, Placement Services and at Respite homes. With regard to the agency's employment and day supports, the agency used its 3-year CARF Accreditation to deem for the certification portion of this DDS review of Community Based Day Supports (CBDS) where licensing audits were conducted; it also received a full licensure and certification review of its Supported Employment.

Organizationally, Vinfen measures its progress toward meeting its strategic planning initiatives and it solicits input from all of its stakeholders to ensure satisfaction with its services. The agency uses a quality management audit system to monitor compliance and this review confirmed this as all critical indicators were met across all services. The agency focused on reducing Medication Occurrences (MORs) by conducting an analysis of data collected, which determined that a significant amount of medication errors were caused due to issues related to the timely refilling of medications. It took corrective measures, such as revamping the agency's medication refill practices and further staff training combined with increased monitoring at the local level. The implementation of these measures resulted in a decrease in MOR's for those served by agency as the survey revealed. Another area of focus for the agency related to ensuring timely HCSIS timeline submission through increased monitoring; this resulted in the agency meeting all HCSIS reporting requirements for Provider Support Strategies, Assessments, Restraints, and Incidents. Moving forward, one organizational area requiring further attention is the effectiveness of two of the agency's Human Rights Committees. These committees often lacked involvement and input from members with medical expertise when reviewing materials and making decisions on matters that come under their purview.

Residentially, the survey showed that the agency supported people to have good quality lives. Relative to licensing, the agency provided supports across all residential service models in homes that were well maintained and portrayed a sense of value and ownership by the individuals that resided there. Individuals were supported to receive routine and specialized healthcare services, and staff supported people to use medications as prescribed by physicians. People were supported for the most part to work towards accomplishing their identified ISP goals, and staff understood how to interact with and effectively support people. In the area of certification measures, people were supported to be part of their communities and to have choice. They had choice of how to decorate their homes and personal spaces, and supported to acquire skills to maximize their independence. They also had choice in their routines and schedules and also dining options. In general, people were supported to regularly access the community for exploration and to engage in activities based on their preferences. Individuals were supported to access the community to pursue interests such as on-line gaming, and volunteerism at local homeless shelters. The agency made strides in the area of relationships and sexuality by having numerous staff trained by a professional in the field, and completed sexuality assessments for people.

The agency's ABI and Placement Services reviews revealed that people's medical and social needs were consistently met. Individuals receiving ABI supports often had complex medical issues and their

supports were provided in a consistent manner and in conjunction with recommendations from various healthcare practitioners, as such, individuals were supported to learn how to conduct their own self-care checks and understand when changes in their positioning was necessary. In both of these services it was noted that people were generally supported by staff and care providers to explore their interests for community activities and to connect with family and friends. The agency implemented a thorough process for matching individuals with placement support care providers that proved to be successful, as interviews with those served revealed a high level of satisfaction with their care providers.

The survey showed that the agency supported people to actualize in many areas; however, there were other areas that would benefit from concentrated efforts. The agency needs to ensure that it maintains established parameters for water temperature at homes. When the agency is responsible for administering behavior modifying medications to individuals, it needs to ensure that treatment plans are written in a format that contains all of the required components, and that plans are reviewed by the required groups. Relative to finances, when the agency has shared/delegated money management responsibility, it needs to develop a written plan that contains a training component to support people to increase their skills in managing their own money. Additionally, the agency needs to ensure that when it is responsible for helping people manage funds, it documents and tracks all expenditures. The survey also identified a need for consistency in ongoing supervision, oversight and staff development at all of its residential programs.

In the CBDS services, licensure outcomes were met and the agency had effective systems to ensure safety. Environmental inspections were current and fire drills were conducted in accordance with approved Safety Plan guidelines. Staff was knowledgeable regarding peoples unique needs, and medications were administered as prescribed. For those taking behavior modifying medications, there were detailed Medication and Treatment plans and supporting data. In the area of the ISP, people were supported to accomplish their goals and progress towards goals was consistently tracked. The survey revealed that some individuals were engaged in paid work, and opportunities offered fostered individual's personal growth and skill development. Individuals and staff interviewed conveyed their satisfaction with the array of choices offered such as cooking group, games, exercise, crafts and outings.

In Employment services, participants communicated that they enjoyed the jobs they were engaged in. One program focused on promoting individuals as "Artists" and supported them to develop skills in the creation and sale of their art via local and national exhibitions and store sales. The other focused on skill building and supporting people to obtain meaningful employment in the community. People were supported in onsite skill development, work interests were formally assessed, and action steps outlined to assist people to achieve desired work. In their bid to create opportunities for people, the agency established relationships in the community with local businesses to facilitate ongoing job procurement. For internal work enclaves and external competitive work opportunities individuals were earning at least minimum wage.

In summary, Vinfen received a Two-Year License for its Residential / Individual Home Supports Services Grouping with 92% of licensing indicators being "Met" and is Certified with 98% of all certification indicators being "Met." The agency's Employment and Day Supports Services Grouping received a Two-Year License with 98% of all licensing indicators being "Met" and it is Certified with 100%. As a result of these scores, the agency will perform its own follow-up for the licensing indicators that were not met in both Residential and Day service groupings and submit its findings to the DDS Office of Quality Enhancement within 60 days of the Service Enhancement Meeting (SEM).

## LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
<b>Organizational</b>	9/10	1/10	
<b>Residential and Individual Home Supports</b>	72/78	6/78	
Residential Services ABI-MFP Residential Services Placement Services ABI-MFP Placement Services Respite Services Individual Home Supports			
<b>Critical Indicators</b>	8/8	0/8	
<b>Total</b>	81/88	7/88	92%
<b>2 Year License</b>			
<b># indicators for 60 Day Follow-up</b>		7	

	Met / Rated	Not Met / Rated	% Met
<b>Organizational</b>	9/10	1/10	
<b>Employment and Day Supports</b>	56/56	0/56	
Community Based Day Services Employment Support Services			
<b>Critical Indicators</b>	7/7	0/7	
<b>Total</b>	65/66	1/66	98%
<b>2 Year License</b>			
<b># indicators for 60 Day Follow-up</b>		1	

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

Indicator #	Indicator	Area Needing Improvement
L48	The agency has an effective Human Rights Committee.	The three Human Rights Committees conducted reviews of all the topics under their purview including behavior plans, restrictive practices, investigations and supports and health related protections. However two of three Human Rights Committees did not meet the mandate of ensuring consistent involvement/input by medical professionals. Additionally, one committee also lacked input on several occasions from peer advocates. The agency needs to ensure that all of its Human Rights Committees function effectively by ensuring that input is consistently garnered from all mandated members.

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

Indicator #	Indicator	Area Needing Improvement
L15	Hot water temperature tests between 110 and 120 degrees (as of 1/2014).	At six out of twenty-five locations the water temperature measured outside of the 110 to 120 degree range. The agency needs to ensure that water temperatures at all locations are maintained within the required range.
L63	Medication treatment plans are in written format with required components.	Fifteen out of twenty-five medication treatment plans were missing essential information such as the target behaviors being treated and/or baseline data. The agency needs to ensure that all medication treatment plans are written in a format that contains all of the required components.
L64	Medication treatment plans are reviewed by the required groups.	Six out of twenty-four medication treatment plans were not incorporated or referenced within the ISP. The agency needs to ensure that medication treatment plans are reviewed by the required groups.
L67	There is a written plan in place accompanied by a training plan when the agency has shared or delegated money management responsibility.	Six out of twenty-six people for whom the agency had shared and/or delegated money management responsibility, had no plan developed, and most did not have an associated training plan relative to supporting them to increase their ability to manage their money. The agency needs to ensure that it develops individualized money management plans, and that they include training components designed to support individuals to increase their ability to manage their own money.
L69	Individual expenditures are documented and tracked.	Six out of twenty-five individuals' expenditures were not documented and tracked according to agency and DDS tracking requirements. The agency needs to ensure that individuals' funds are documented and tracked.
L85	The agency provides ongoing supervision, oversight and staff development.	At six out of twenty-six locations the agency had not provided regular and ongoing supervision, oversight and staff development as per their policy. Issues with medical, funds and environmental highlighted the lax supervision at these sites. The agency needs to ensure that programmatic supervision and oversight occurs on an ongoing basis along with staff development.

## CERTIFICATION FINDINGS

	Met / Rated	Not Met / Rated	% Met
<b>Certification - Planning and Quality Management</b>	6/6	0/6	
<b>Residential and Individual Home Supports</b>	109/111	2/111	
ABI-MFP Residential Services	22/22	0/22	
ABI-MFP Placement Services	22/22	0/22	
Individual Home Supports	22/23	1/23	
Residential Services	21/22	1/22	
Placement Services	22/22	0/22	
<b>TOTAL</b>	<b>115/117</b>	<b>2/117</b>	<b>98%</b>
<b>Certified</b>			

	Met / Rated	Not Met / Rated	% Met
<b>Certification - Planning and Quality Management</b>	6/6	0/6	
<b>Employment and Day Supports</b>	22/22	0/22	
Employment Support Services	22/22	0/22	
<b>TOTAL</b>	<b>28/28</b>	<b>0/28</b>	<b>100%</b>
<b>Certified</b>			

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

Indicator #	Indicator	Area Needing Improvement
C16	Staff (Home Providers) support individuals to explore, discover and connect with their interests for cultural, social, recreational and spiritual activities.	For one out of three individuals, community activities were not based on the person's preferences and interests. The agency needs to ensure that people are supported to explore, discover and connect with interests of their choice.

### **Residential Services- Areas Needing Improvement on Standards not met:**

Indicator #	Indicator	Area Needing Improvement
C12	Individuals are supported to explore, define, and express their need for intimacy and companionship.	Five out of seventeen individuals were not supported to explore and define their need for companionship and intimacy. The agency needs to ensure that individuals are supported to explore their need for companionship and intimacy.



**MASTER SCORE SHEET LICENSURE**

**Organizational: VINFEN**

<b>Indicator #</b>	<b>Indicator</b>	<b>Met/Rated</b>	<b>Rating(Met,Not Met,NotRated)</b>
☐ L2	Abuse/neglect reporting	<b>29/29</b>	<b>Met</b>
L3	Immediate Action	<b>12/12</b>	<b>Met</b>
L4	Action taken	<b>2/2</b>	<b>Met</b>
L48	HRC	<b>1/3</b>	<b>Not Met(33.33 % )</b>
L65	Restraint report submit	<b>235/248</b>	<b>Met(94.76 % )</b>
L66	HRC restraint review	<b>248/248</b>	<b>Met</b>
L74	Screen employees	<b>20/20</b>	<b>Met</b>
L75	Qualified staff	<b>18/18</b>	<b>Met</b>
L76	Track trainings	<b>20/20</b>	<b>Met</b>
L83	HR training	<b>20/20</b>	<b>Met</b>

**Residential and Individual Home Supports:**

Ind. #	Ind.	Loc. or Individ.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L1	Abuse/neglect training	I	16/17	3/3	3/3	2/2	6/6	1/1	31/32	Met (96.88 %)
L5	Safety Plan	L	17/17	2/2	3/3	1/1	2/2	1/1	26/26	Met
Ⓜ L6	Evacuation	L	15/17	2/2	3/3	1/1	2/2	1/1	24/26	Met (92.31 %)
L7	Fire Drills	L	15/17				2/2		17/19	Met (89.47 %)
L8	Emergency Fact Sheets	I	17/17	3/3	3/3	2/2	6/6	1/1	32/32	Met
L9	Safe use of equipment	L	17/17	2/2		1/1	2/2		22/22	Met
L10	Reduce risk interventions	I	9/9						9/9	Met
Ⓜ L11	Required inspections	L	17/17	1/1	3/3	1/1	2/2	1/1	25/25	Met
Ⓜ L12	Smoke detectors	L	16/17	1/1	3/3	1/1	2/2	1/1	24/25	Met (96.00 %)
Ⓜ L13	Clean location	L	17/17	1/1	3/3	1/1	2/2	1/1	25/25	Met
L14	Site in good repair	L	16/17	1/1	3/3	1/1	2/2	1/1	24/25	Met (96.00 %)
L15	Hot water	L	11/17	1/1	3/3	1/1	2/2	1/1	19/25	Not Met (76.00 %)
L16	Accessibility	L	15/15		3/3		2/2	1/1	21/21	Met
L17	Egress at grade	L	17/17	1/1	3/3	1/1	2/2	1/1	25/25	Met
L18	Above grade egress	L	16/16	1/1	3/3	1/1	1/1	1/1	23/23	Met
L19	Bedroom location	L	12/13				2/2		14/15	Met (93.33 %)
L20	Exit doors	L	16/17	1/1		1/1	2/2		20/21	Met (95.24 %)

L21	Safe electrical equipment	L	17/17	1/1	3/3	1/1	2/2	1/1	<b>25/25</b>	<b>Met</b>
L22	Well-maintained appliances	L	16/17	1/1	3/3	0/1	2/2	1/1	<b>23/25</b>	<b>Met (92.00 %)</b>
L23	Egress door locks	L	12/13				2/2		<b>14/15</b>	<b>Met (93.33 %)</b>
L24	Locked door access	L	17/17						<b>17/17</b>	<b>Met</b>
L25	Dangerous substances	L	17/17	1/1		1/1	2/2		<b>21/21</b>	<b>Met</b>
L26	Walkway safety	L	17/17	1/1	3/3	1/1	2/2	1/1	<b>25/25</b>	<b>Met</b>
L28	Flammables	L	16/17	1/1		1/1	1/1		<b>19/20</b>	<b>Met (95.00 %)</b>
L29	Rubbish/combustibles	L	16/17	1/1	3/3	1/1	2/2	1/1	<b>24/25</b>	<b>Met (96.00 %)</b>
L30	Protective railings	L	17/17	1/1	3/3	1/1	1/1	1/1	<b>24/24</b>	<b>Met</b>
L31	Communication method	I	17/17	3/3	3/3	2/2	6/6	1/1	<b>32/32</b>	<b>Met</b>
L32	Verbal & written	I	17/17	3/3	3/3	2/2	6/6	1/1	<b>32/32</b>	<b>Met</b>
L33	Physical exam	I	17/17	3/3	3/3		6/6	1/1	<b>30/30</b>	<b>Met</b>
L34	Dental exam	I	16/17	1/2	3/3		6/6	1/1	<b>27/29</b>	<b>Met (93.10 %)</b>
L35	Preventive screenings	I	17/17	2/2	2/2		6/6	1/1	<b>28/28</b>	<b>Met</b>
L36	Recommended tests	I	14/17	3/3	3/3		6/6	1/1	<b>27/30</b>	<b>Met (90.0 %)</b>
L37	Prompt treatment	I	16/16	1/1	3/3	2/2	4/4	1/1	<b>27/27</b>	<b>Met</b>
Ⓜ L38	Physician's orders	I	13/13	2/2	2/2		6/6		<b>23/23</b>	<b>Met</b>
L39	Dietary requirements	I	8/8		2/2		2/2		<b>12/12</b>	<b>Met</b>
L40	Nutritional food	L	17/17	1/1		1/1	2/2		<b>21/21</b>	<b>Met</b>
L41	Healthy diet	L	17/17	2/2	3/3	1/1	2/2	1/1	<b>26/26</b>	<b>Met</b>
L42	Physical activity	L	16/17	2/2	3/3		2/2	1/1	<b>24/25</b>	<b>Met (96.00 %)</b>
L43	Health Care Record	I	17/17	3/3	3/3		6/6	1/1	<b>30/30</b>	<b>Met</b>
L44	MAP registration	L	17/17	1/1		1/1	2/2		<b>21/21</b>	<b>Met</b>

L45	Medication storage	L	16/17	1/1		1/1	2/2		20/21	Met (95.24%)
Ⓜ L46	Med. Administration	I	16/17	2/2	2/2	2/2	6/6	0/1	28/30	Met (93.33%)
L47	Self medication	I	17/17	3/3	3/3		6/6	1/1	30/30	Met
L49	Informed of human rights	I	16/17	3/3	3/3	2/2	6/6	1/1	31/32	Met (96.88%)
L50	Respectful Comm.	L	16/17	2/2	3/3	1/1	2/2	1/1	25/26	Met (96.15%)
L51	Possessions	I	17/17	3/3	3/3	2/2	6/6	1/1	32/32	Met
L52	Phone calls	I	17/17	3/3	3/3	2/2	6/6	1/1	32/32	Met
L53	Visitation	I	17/17	3/3	3/3	2/2	6/6	1/1	32/32	Met
L54	Privacy	L	17/17	2/2	3/3	1/1	2/2	1/1	26/26	Met
L55	Informed consent	I	1/2	1/1	1/1		2/2		5/6	Met (83.33%)
L56	Restrictive practices	I	12/12						12/12	Met
L57	Written behavior plans	I	11/11			1/1			12/12	Met
L58	Behavior plan component	I	11/11			1/1			12/12	Met
L59	Behavior plan review	I	11/11			1/1			12/12	Met
L60	Data maintenance	I	9/10			0/1			9/11	Met (81.82%)
L61	Health protection in ISP	I	5/6	1/1			6/6		12/13	Met (92.31%)
L62	Health protection review	I	5/6	1/1			6/6		12/13	Met (92.31%)
L63	Med. treatment plan form	I	7/17		2/2		0/5	1/1	10/25	Not Met (40.0%)
L64	Med. treatment plan rev.	I	11/16		2/2		5/5	0/1	18/24	Not Met (75.00%)
L67	Money mgmt. plan	I	11/17	3/3	3/3		3/3		20/26	Not

										<b>Met (76.92 %)</b>
L68	Funds expenditure	I	15/17	2/2	3/3		3/3		<b>23/25</b>	<b>Met (92.00 %)</b>
L69	Expenditure tracking	I	13/17	0/2	3/3		3/3		<b>19/25</b>	<b>Not Met (76.00 %)</b>
L70	Charges for care calc.	I	16/17	2/2	3/3	1/1	6/6	1/1	<b>29/30</b>	<b>Met (96.67 %)</b>
L71	Charges for care appeal	I	17/17	2/2	3/3	1/1	6/6	1/1	<b>30/30</b>	<b>Met</b>
L77	Unique needs training	I	17/17	3/3	3/3	2/2	6/6	1/1	<b>32/32</b>	<b>Met</b>
L78	Restrictive Int. Training	L	14/14			1/1			<b>15/15</b>	<b>Met</b>
L79	Restraint training	L	11/11			1/1			<b>12/12</b>	<b>Met</b>
L80	Symptoms of illness	L	17/17	2/2	3/3	1/1	2/2	1/1	<b>26/26</b>	<b>Met</b>
L81	Medical emergency	L	17/17	2/2	3/3	1/1	2/2	1/1	<b>26/26</b>	<b>Met</b>
<sup>PH</sup> L82	Medication admin.	L	17/17	1/1		1/1	2/2		<b>21/21</b>	<b>Met</b>
L84	Health protect. Training	I	4/6	1/1			6/6		<b>11/13</b>	<b>Met (84.62 %)</b>
L85	Supervision	L	12/17	2/2	3/3	0/1	2/2	1/1	<b>20/26</b>	<b>Not Met (76.92 %)</b>
L86	Required assessments	I	15/16	1/2	3/3		6/6	1/1	<b>26/28</b>	<b>Met (92.86 %)</b>
L87	Support strategies	I	15/16	0/1	3/3		6/6	1/1	<b>25/27</b>	<b>Met (92.59 %)</b>
L88	Strategies implemented	I	14/17	2/3	3/3		6/6		<b>25/29</b>	<b>Met (86.21 %)</b>
L89	Complaint and resolution process	L					2/2	1/1	<b>3/3</b>	<b>Met</b>
L90	Personal space/ bedroom privacy	I	17/17	3/3	3/3		6/6	1/1	<b>30/30</b>	<b>Met</b>
L91	Incident management	L	13/17	2/2	3/3	0/1	2/2	1/1	<b>21/26</b>	<b>Met (80.77 %)</b>

<b>#Std. Met/# 78 Indicator</b>										<b>72/78</b>	
<b>Total Score</b>										<b>81/88</b>	
										<b>92.05%</b>	

**Employment and Day Supports:**

<b>Ind. #</b>	<b>Ind.</b>	<b>Loc. or Individ.</b>	<b>Emp. Sup.</b>	<b>Cent. Based Work</b>	<b>Com. Based Day</b>	<b>Total Met / Rated</b>	<b>Rating</b>
L1	Abuse/neglect training	I	4/4		4/4	<b>8/8</b>	<b>Met</b>
L5	Safety Plan	L	2/2		1/1	<b>3/3</b>	<b>Met</b>
Ⓟ L6	Evacuation	L	2/2		1/1	<b>3/3</b>	<b>Met</b>
L7	Fire Drills	L	2/2		1/1	<b>3/3</b>	<b>Met</b>
L8	Emergency Fact Sheets	I	4/4		4/4	<b>8/8</b>	<b>Met</b>
L9	Safe use of equipment	L	2/2		1/1	<b>3/3</b>	<b>Met</b>
Ⓟ L11	Required inspections	L	2/2		1/1	<b>3/3</b>	<b>Met</b>
Ⓟ L12	Smoke detectors	L	2/2		1/1	<b>3/3</b>	<b>Met</b>
Ⓟ L13	Clean location	L	2/2		1/1	<b>3/3</b>	<b>Met</b>
L14	Site in good repair	L	1/1			<b>1/1</b>	<b>Met</b>
L15	Hot water	L	2/2		1/1	<b>3/3</b>	<b>Met</b>
L16	Accessibility	L	2/2		1/1	<b>3/3</b>	<b>Met</b>
L17	Egress at grade	L	2/2		1/1	<b>3/3</b>	<b>Met</b>
L18	Above grade egress	L	1/1			<b>1/1</b>	<b>Met</b>
L20	Exit doors	L	2/2		1/1	<b>3/3</b>	<b>Met</b>
L21	Safe electrical equipment	L	2/2		1/1	<b>3/3</b>	<b>Met</b>
L22	Well-maintained appliances	L	2/2		1/1	<b>3/3</b>	<b>Met</b>
L25	Dangerous substances	L	2/2		1/1	<b>3/3</b>	<b>Met</b>
L26	Walkway safety	L	2/2		1/1	<b>3/3</b>	<b>Met</b>
L27	Pools, hot tubs, etc.	L	1/1			<b>1/1</b>	<b>Met</b>

L28	Flammables	L	2/2		1/1	3/3	Met
L29	Rubbish/combustibles	L	2/2		1/1	3/3	Met
L30	Protective railings	L	2/2			2/2	Met
L31	Communication method	I	4/4		4/4	8/8	Met
L32	Verbal & written	I	4/4		4/4	8/8	Met
L39	Dietary requirements	I			1/1	1/1	Met
L44	MAP registration	L			1/1	1/1	Met
L45	Medication storage	L			1/1	1/1	Met
Ⓟ L46	Med. Administration	I			3/3	3/3	Met
L49	Informed of human rights	I	4/4		4/4	8/8	Met
L50	Respectful Comm.	L	2/2		1/1	3/3	Met
L51	Possessions	I	4/4		4/4	8/8	Met
L52	Phone calls	I	4/4		4/4	8/8	Met
L54	Privacy	L	2/2		1/1	3/3	Met
L55	Informed consent	I	3/3			3/3	Met
L57	Written behavior plans	I			2/2	2/2	Met
L58	Behavior plan component	I			2/2	2/2	Met
L59	Behavior plan review	I			2/2	2/2	Met
L60	Data maintenance	I			2/2	2/2	Met
L61	Health protection in ISP	I			1/1	1/1	Met
L62	Health protection review	I			1/1	1/1	Met
L63	Med. treatment plan form	I			2/2	2/2	Met
L64	Med. treatment plan rev.	I			2/2	2/2	Met
L72	DOL requirements	I	3/3			3/3	Met
L73	DOL certificate	L	1/1			1/1	Met
L77	Unique needs training	I	3/3		1/1	4/4	Met
L79	Restraint training	L	1/1		1/1	2/2	Met
L80	Symptoms of illness	L	2/2		1/1	3/3	Met
L81	Medical emergency	L	2/2		1/1	3/3	Met

L82	Medication admin.	L			1/1	1/1	Met
L84	Health protect. Training	I			1/1	1/1	Met
L85	Supervision	L	2/2		1/1	3/3	Met
L86	Required assessments	I	4/4		4/4	8/8	Met
L87	Support strategies	I	3/4		3/3	6/7	Met (85.71 %)
L88	Strategies implemented	I	4/4		4/4	8/8	Met
L91	Incident management	L	2/2		1/1	3/3	Met
<b>#Std. Met/# 56 Indicator</b>						56/56	
<b>Total Score</b>						65/66	
						98.48%	

## 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

### ABI-MFP Placement Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	1/1	Met
C8	Family/guardian communication	1/1	Met
C9	Personal relationships	1/1	Met
C10	Social skill development	1/1	Met
C11	Get together w/family & friends	1/1	Met



C12	Intimacy	1/1	<b>Met</b>
C13	Skills to maximize independence	1/1	<b>Met</b>
C14	Choices in routines & schedules	1/1	<b>Met</b>
C15	Personalize living space	1/1	<b>Met</b>
C16	Explore interests	1/1	<b>Met</b>
C17	Community activities	1/1	<b>Met</b>
C18	Purchase personal belongings	1/1	<b>Met</b>
C19	Knowledgeable decisions	1/1	<b>Met</b>
C20	Emergency back-up plans	1/1	<b>Met</b>
C46	Use of generic resources	1/1	<b>Met</b>
C47	Transportation to/ from community	1/1	<b>Met</b>
C48	Neighborhood connections	1/1	<b>Met</b>
C49	Physical setting is consistent	1/1	<b>Met</b>
C51	Ongoing satisfaction with services/ supports	1/1	<b>Met</b>
C52	Leisure activities and free-time choices /control	1/1	<b>Met</b>
C53	Food/ dining choices	1/1	<b>Met</b>
C54	Assistive technology	1/1	<b>Met</b>

#### **ABI-MFP Residential Services**

<b>Indicator #</b>	<b>Indicator</b>	<b>Met/Rated</b>	<b>Rating</b>
C7	Feedback on staff / care provider performance	6/6	<b>Met</b>
C8	Family/guardian communication	6/6	<b>Met</b>
C9	Personal relationships	6/6	<b>Met</b>
C10	Social skill development	6/6	<b>Met</b>
C11	Get together w/family & friends	6/6	<b>Met</b>
C12	Intimacy	6/6	<b>Met</b>
C13	Skills to maximize independence	6/6	<b>Met</b>
C14	Choices in routines & schedules	6/6	<b>Met</b>
C15	Personalize living space	2/2	<b>Met</b>
C16	Explore interests	6/6	<b>Met</b>
C17	Community activities	6/6	<b>Met</b>

C18	Purchase personal belongings	6/6	<b>Met</b>
C19	Knowledgeable decisions	6/6	<b>Met</b>
C20	Emergency back-up plans	2/2	<b>Met</b>
C46	Use of generic resources	6/6	<b>Met</b>
C47	Transportation to/ from community	6/6	<b>Met</b>
C48	Neighborhood connections	6/6	<b>Met</b>
C49	Physical setting is consistent	2/2	<b>Met</b>
C51	Ongoing satisfaction with services/ supports	6/6	<b>Met</b>
C52	Leisure activities and free-time choices /control	6/6	<b>Met</b>
C53	Food/ dining choices	6/6	<b>Met</b>
C54	Assistive technology	6/6	<b>Met</b>

### **Employment Support Services**

<b>Indicator #</b>	<b>Indicator</b>	<b>Met/Rated</b>	<b>Rating</b>
C7	Feedback on staff / care provider performance	4/4	<b>Met</b>
C8	Family/guardian communication	4/4	<b>Met</b>
C22	Explore job interests	4/4	<b>Met</b>
C23	Assess skills & training needs	4/4	<b>Met</b>
C24	Job goals & support needs plan	4/4	<b>Met</b>
C25	Skill development	4/4	<b>Met</b>
C26	Benefits analysis	4/4	<b>Met</b>
C27	Job benefit education	4/4	<b>Met</b>
C28	Relationships w/businesses	2/2	<b>Met</b>
C29	Support to obtain employment	4/4	<b>Met</b>
C30	Work in integrated settings	4/4	<b>Met</b>
C31	Job accommodations	3/3	<b>Met</b>
C32	At least minimum wages earned	4/4	<b>Met</b>
C33	Employee benefits explained	3/3	<b>Met</b>
C34	Support to promote success	3/3	<b>Met</b>
C35	Feedback on job performance	3/3	<b>Met</b>
C36	Supports to enhance retention	3/3	<b>Met</b>
C37	Interpersonal skills for work	4/4	<b>Met</b>

C47	Transportation to/ from community	4/4	<b>Met</b>
C50	Involvement/ part of the Workplace culture	4/4	<b>Met</b>
C51	Ongoing satisfaction with services/ supports	4/4	<b>Met</b>
C54	Assistive technology	4/4	<b>Met</b>

### Individual Home Supports

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	3/3	<b>Met</b>
C8	Family/guardian communication	3/3	<b>Met</b>
C9	Personal relationships	3/3	<b>Met</b>
C10	Social skill development	3/3	<b>Met</b>
C11	Get together w/family & friends	3/3	<b>Met</b>
C12	Intimacy	3/3	<b>Met</b>
C13	Skills to maximize independence	3/3	<b>Met</b>
C14	Choices in routines & schedules	3/3	<b>Met</b>
C15	Personalize living space	1/1	<b>Met</b>
C16	Explore interests	2/3	<b>Not Met (66.67 %)</b>
C17	Community activities	3/3	<b>Met</b>
C18	Purchase personal belongings	3/3	<b>Met</b>
C19	Knowledgeable decisions	3/3	<b>Met</b>
C20	Emergency back-up plans	2/2	<b>Met</b>
C21	Coordinate outreach	3/3	<b>Met</b>
C46	Use of generic resources	3/3	<b>Met</b>
C47	Transportation to/ from community	3/3	<b>Met</b>
C48	Neighborhood connections	3/3	<b>Met</b>
C49	Physical setting is consistent	1/1	<b>Met</b>
C51	Ongoing satisfaction with services/ supports	3/3	<b>Met</b>
C52	Leisure activities and free-time choices /control	3/3	<b>Met</b>
C53	Food/ dining choices	3/3	<b>Met</b>
C54	Assistive technology	3/3	<b>Met</b>

## Placement Services

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	3/3	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
C20	Emergency back-up plans	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
C53	Food/ dining choices	3/3	Met
C54	Assistive technology	3/3	Met

## Residential Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	15/17	Met (88.24 %)
C8	Family/guardian communication	17/17	Met
C9	Personal relationships	15/17	Met (88.24 %)
C10	Social skill development	17/17	Met

C11	Get together w/family & friends	15/17	<b>Met (88.24 %)</b>
C12	Intimacy	12/17	<b>Not Met (70.59 %)</b>
C13	Skills to maximize independence	17/17	<b>Met</b>
C14	Choices in routines & schedules	17/17	<b>Met</b>
C15	Personalize living space	17/17	<b>Met</b>
C16	Explore interests	16/17	<b>Met (94.12 %)</b>
C17	Community activities	15/17	<b>Met (88.24 %)</b>
C18	Purchase personal belongings	17/17	<b>Met</b>
C19	Knowledgeable decisions	17/17	<b>Met</b>
C20	Emergency back-up plans	17/17	<b>Met</b>
C46	Use of generic resources	17/17	<b>Met</b>
C47	Transportation to/ from community	17/17	<b>Met</b>
C48	Neighborhood connections	16/17	<b>Met (94.12 %)</b>
C49	Physical setting is consistent	17/17	<b>Met</b>
C51	Ongoing satisfaction with services/ supports	17/17	<b>Met</b>
C52	Leisure activities and free-time choices /control	17/17	<b>Met</b>
C53	Food/ dining choices	17/17	<b>Met</b>
C54	Assistive technology	14/17	<b>Met (82.35 %)</b>