



**PROVIDER REPORT  
FOR**

**The ARC of the South Shore  
371 RIVER STREET  
North Weymouth, MA 02191**

**Version**

**FINAL PROVIDER REPORT  
October 4, 2018**

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

# **SUMMARY OF OVERALL FINDINGS**

<b>Provider</b>	The ARC of the South Shore
<b>Review Dates</b>	9/17/2018 - 9/21/2018
<b>Service Enhancement Meeting Date</b>	10/4/2018
<b>Survey Team</b>	Leslie Hayes Michael Marchese Scott Nolan (TL) Michelle Boyd Katherine Gregory
<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>	6 location(s) 12 audit (s)	Full Review	76 / 79 2 Year License 10/04/2018 - 10/04/2020		69 / 73 Certified 10/04/2018 - 10/04/2020
Residential Services	3 location(s) 7 audit (s)			Full Review	20 / 22
Placement Services	1 location(s) 2 audit (s)			Full Review	22 / 22
Individual Home Supports	2 location(s) 3 audit (s)			Full Review	21 / 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>	2 location(s) 6 audit (s)	Full Review	60 / 63 2 Year License 10/04/2018 - 10/04/2020		33 / 36 Certified 10/04/2018 - 10/04/2020
Community Based Day Services	1 location(s) 3 audit (s)			Full Review	13 / 14
Employment Support Services	1 location(s) 3 audit (s)			Full Review	14 / 16
Planning and Quality Management (For all service groupings)				Full Review	6 / 6

## **EXECUTIVE SUMMARY :**

The Arc of the South Shore (the Arc), which was incorporated in 1951, is a community-based non-profit agency that provides an extensive network of supports to adults and children with intellectual and developmental disabilities, including those diagnosed within the Autism Spectrum Disorder (ASD). The agency opened an Autism Resource Center which serves individuals with ASD and their families. The agency also provides early intervention services to children, personal care management supports to individuals, adult foster care, day habilitation services and family support services.

The scope of the review was a full licensing and certification review, and included the following service types: 24 hour Residential, Placement, Individual Home Supports, and Community Based Day and Employment services. The agency organizational practices were also included as part of the review.

Since the last DDS licensing and certification process, the agency has developed a new residential home and two new positions were created, a Chief Operations Officer and a finance position.

A continued strength seen within Residential Services was its provision of health care supports. The survey findings revealed that individuals received all routine and preventative health services as well as met with specialists when recommended. Staff was proficient in documenting and coordinating health care to ensure timely follow-up and consulted with the agency nurse when questions arose. In one instance, an individual who had an undiagnosed medical condition which impacted her ability to ambulate; was able to walk after being properly diagnosed by her doctor after staff's advocacy and monitoring and presentation of occurrence of symptoms. To achieve such outcomes, the agency used a team approach comprised of the nurse and staff to coordinate care of individuals with complex health care needs including timely follow-up, in addition to training in case management, safety improvements to address fall risks, dietary education and trainings that addressed the needs of an aging population. Residential staff were observed to promote respect and affirm that individuals have privacy in their homes. Staff were respectful and encouraged individuals to communicate their wants regarding daily routines. Individuals were observed to enjoy time socializing or quiet time the privacy of their rooms afforded.

The licensing review of the employment/day services group also resulted in positive findings which noted the environment was well maintained. Efforts were made to rearrange the limited space by adding dividers to promote privacy for individuals to participate in activities of interest. Staff interactions were respectful and encouraged individuals to freely engage in conversation.

A review of organizational licensure indicators revealed the ongoing strength of the agency's Human Rights Committee which met composition requirements and on a regular basis. It was noted the HRC kept comprehensive notes on all investigations, incident reporting, and site visits while responding in a timely manner when questions were posed by the committee or when members identified concerns during site visits.

In the certification areas, a strength across residential and CBDS services was the agency's efforts to offer individuals opportunities to access community activities and participate in interests of their choice. For example, two sisters who lived with their placement provider were supported to pursue their separate interests for the first time such as one going on vacation to a ranch. In the CBDS program, individuals selected the type of activities they chose to participate in such as golf or visiting a museum. The use of schedules and a pictorial learning aids enhanced individuals ability to maximize their independence through the use of visual aids.

A focus of the agency's strategic plan was to increase the variety and opportunities for individuals to access community activities of personal interest. Strategies were in place to monitor progress and make the necessary service improvements for individuals to experience success in this area. As evidenced by the agency receiving a met for supporting individuals to participate and be involved in community activities, across all residential services, efforts have been successful. Individuals were found to

participate in community activities and supported to pursue individual interest such as horseback riding or choral group.

It was evident in the survey process, staff at all levels of the organization communicated with family members to keep them informed and involved in the well-being of their family members and soliciting feedback on services. In one instance, a mutually respectful, long-standing relationship built with one family led to a continuity of health care for one individual, when the agency assumed this responsibility when family members could no longer keep up with medical care.

The current DDS licensure and certification review also identified areas that needed additional strengthening across all services including: ensuring that medication treatment plans are in place when individuals are supported with behavior modifying medication and that individuals are supported to assess, and identify assistive technologies/and or modifications that can maximize their independence.

Within day services, additional efforts are needed to ensure that when supporting people with health related protections that the required components and reviews are in place.

Organizationally, although documentation demonstrated that staff had required training, it was identified the agency's data based tracking system was not accurate. Additionally, across all services it was identified that the agency needs to strengthen its process for individuals to provide feedback on the performance of staff. It is suggested that an agency wide system is developed to track all required training and incorporate individual feedback into staff evaluations.

Based on the findings of this report, The Arc, South Shore has earned a Two-Year License and is Certified for both the Residential Supports group and the Employment and Day Supports group. Residential scores were 96% in licensing and 95% in certification; employment/day support scores were 95% for licensing and 92% for certification. Within sixty days, the agency will conduct its own follow-up on any licensing indicators rated Not Met and submit the results to the DDS Office of Quality Enhancement.

## LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
<b>Organizational</b>	10/10	0/10	
<b>Residential and Individual Home Supports</b>	66/69	3/69	
Placement Services Residential Services Individual Home Supports			
<b>Critical Indicators</b>	8/8	0/8	
<b>Total</b>	76/79	3/79	96%
<b>2 Year License</b>			
<b># indicators for 60 Day Follow-up</b>		3	

	Met / Rated	Not Met / Rated	% Met
<b>Organizational</b>	10/10	0/10	
<b>Employment and Day Supports</b>	50/53	3/53	
Community Based Day Services Employment Support Services			
<b>Critical Indicators</b>	8/8	0/8	
<b>Total</b>	60/63	3/63	95%
<b>2 Year License</b>			
<b># indicators for 60 Day Follow-up</b>		3	

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

Indicator #	Indicator	Area Needing Improvement
L63	Medication treatment plans are in written format with required components.	For two out of six individuals, a medication treatment plan was either not developed or did not include all of the behavior modifying medications ordered. The agency needs to ensure that medication treatment plans are in written format with the required components including all the medications ordered.
L64	Medication treatment plans are reviewed by the required groups.	Two out of six Medication Treatment Plans (MTP's) did not have the required reviews. The agency needs to ensure all treatment plans are reviewed by the required groups.
L91	Incidents are reported and reviewed as mandated by regulation.	For the three locations visited at which reportable incidents had occurred, there were instances in which incident reports had not been submitted and/or finalized within required timelines. The agency needs to ensure that incident reports are submitted and/or finalized as mandated by regulation.

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

<b>Indicator #</b>	<b>Indicator</b>	<b>Area Needing Improvement</b>
L62	Supports and health related protections are reviewed by the required groups.	For one out of two support and health related protections a review by the required groups was not completed. The agency needs to ensure support and health related protections are reviewed by the required groups.
L63	Medication treatment plans are in written format with required components.	One of two individuals, who were administered medication during day supports, did not have a Medication Treatment Plan (MTP) for the administration of a behavior modifying medication. The agency needs to ensure that a Medication Treatment Plan includes all required components and is written for all individuals prescribed behavior modifying medications.
L79	Staff are trained in safe and correct administration of restraint.	A review of training records revealed the staff that performed an emergency restraint and had done so after the training expired. The agency needs to ensure staff are trained in safe and correct administration of restraint.

## CERTIFICATION FINDINGS

	Met / Rated	Not Met / Rated	% Met
<b>Certification - Planning and Quality Management</b>	<b>6/6</b>	<b>0/6</b>	
<b>Residential and Individual Home Supports</b>	<b>63/67</b>	<b>4/67</b>	
Individual Home Supports	21/23	2/23	
Placement Services	22/22	0/22	
Residential Services	20/22	2/22	
<b>TOTAL</b>	<b>69/73</b>	<b>4/73</b>	<b>95%</b>
<b>Certified</b>			

	Met / Rated	Not Met / Rated	% Met
<b>Certification - Planning and Quality Management</b>	<b>6/6</b>	<b>0/6</b>	
<b>Employment and Day Supports</b>	<b>27/30</b>	<b>3/30</b>	
Community Based Day Services	13/14	1/14	
Employment Support Services	14/16	2/16	
<b>TOTAL</b>	<b>33/36</b>	<b>3/36</b>	<b>92%</b>
<b>Certified</b>			

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

<b>Indicator #</b>	<b>Indicator</b>	<b>Area Needing Improvement</b>
C7	Individuals have opportunities to provide feedback at the time of hire / time of the match and on an ongoing basis on the performance/actions of staff / care providers that support them.	For three individuals there was no mechanism in place to solicit feedback on the ongoing performance of staff supporting them in their homes. The agency needs to ensure individuals have opportunities to provide feedback on staff that support them.
C54	Individuals have the assistive technology and/or modifications to maximize independence.	Two out of three individuals had not been assessed to determine how they might benefit from the use of assistive technology, and there was no evidence that assistive technology and/or modification was in place to maximize their independence. The agency needs to ensure that individuals have been assessed regarding the need for assistive technology and modifications to maximize their independence.



**Placement Services Commendations on Standards Met:**

<b>Indicator #</b>	<b>Indicator</b>	<b>Commendations</b>
C17	Community activities are based on the individual's preferences and interests.	The agency has encouraged and continues to encourage twin sisters who have been living in a placement home for two years to pursue independent interests for the first time in their lives. They are clearly excited to do this and have had separate vacations. They express their excitement to continue to explore new activities and possibilities. The agency is commend for supporting individuals to participate in community activities based on their individual preferences and interests.

**Residential Services Commendations on Standards Met:**

<b>Indicator #</b>	<b>Indicator</b>	<b>Commendations</b>
C17	Community activities are based on the individual's preferences and interests.	Staff provided ongoing support to ensure that individuals were offered opportunities to participate in community based activities based on their individual preference and interests. Staff used an interest inventory to learn more about individual interests and exploring community activities. For example, one individual was supported to attend weekly Zumba classes at local community center and participate in horseback riding lessons on a regular basis, while another individual was supported to participate in a local choral group. The agency is commend for supporting individuals to participate in community activities based on their interests.

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

<b>Indicator #</b>	<b>Indicator</b>	<b>Area Needing Improvement</b>
C7	Individuals have opportunities to provide feedback at the time of hire / time of the match and on an ongoing basis on the performance/actions of staff / care providers that support them.	Two out of seven individuals had opportunities to provide feedback at the time of hire. Although the agency solicited feedback in house meetings, there was no a mechanism to solicit individual feedback on staff performance across all residential homes. The agency needs to ensure individuals have opportunities to provide feedback on staff that support them.

C54	Individuals have the assistive technology and/or modifications to maximize independence.	Five out of seven individuals had not been assessed to identify any use of assistive devices and/or modify existing technology to maximize their independence. The agency needs to conduct assistive technology evaluations with each individual to determine which modifications or adaptive devices could help them to maximize their independence.
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**Community Based Day Services- Areas Needing Improvement on Standards not met:**

Indicator #	Indicator	Area Needing Improvement
C54	Individuals have the assistive technology and/or modifications to maximize independence.	Three individuals had not been assessed to identify and/or use any assistive technology and/or to maximize their independence. The agency needs to conduct an assessment with each individual to identify if there are any areas that modifications or assistive technology could help them to maximize their independence.

**Employment Support Services- Areas Needing Improvement on Standards not met:**

Indicator #	Indicator	Area Needing Improvement
C35	Individuals are given feedback on job performance by their employer.	One out of three individuals who was competitively employed was not provided with feedback on their job performance. The agency needs to ensure individuals are given feedback on their performance by their employer.
C54	Individuals have the assistive technology and/or modifications to maximize independence.	Three individuals had not been assessed to identify and/or use any assistive technology and/or to maximize their independence. The agency needs to conduct an assessment with each individual to identify if there are any areas that modifications or assistive technology could help them to maximize their independence.

# Survey Detail Report

## Back-up documentation

### Licensure Organizational:

### Licensure Residential and Individual Home Supports

#### Issues on Not Met Indicators

Indicator	Service Type	Location	Individual	Issue
Ⓜ L12 Smoke detectors and carbon monoxide detectors, and other essential elements of the fire alarm system required for evacuation are located where required and are operational.	Residential Services	49 Sherbrooke Avenue Braintree MA 02184		One smoke alarm located in the living room area did not sound when tested. Another alarm was also present that was in working order but was not interconnected with the rest of the system. The interconnected alarm was immediately replaced and is now functional. Corrected
L15 Hot water temperature tests between 110 and 120 degrees (as of 1/2014).	Residential Services	49 Sherbrooke Avenue Braintree MA 02184		Initial readings were below the required temperature at 105.5 at the kitchen sink and 108.1 at the shower. Temperature was adjusted temperatures were 110.2 and 111.2 respectively. Corrected.
L17 There are two means of egress from floor at grade level.	Residential Services	49 Sherbrooke Avenue Braintree MA 02184		At the time of the survey there was no second means of egress from the first floor due to the demolition of the exterior deck. Because it could not be safely used, second means of egress was blocked.

L30 Every porch, balcony, deck or roof used as a porch or deck has a wall or protective railing in good repair.	Residential Services	49 Sherbrooke Avenue Braintree MA 02184		The exterior deck of the home is currently under construction and is partially unsafe or non-existent at this time
L63* Medication treatment plans are in written format with required components.	Residential Services	40 Drinkwater Avenue Braintree MA 02184	KO	All components were present in the MTP for most medications, however the agency did not include Melatonin which was prescribed for sleep.
L63* Medication treatment plans are in written format with required components.	Individual Home Supports	17 Town Way Scituate MA 02066	GS	There is no Medication Treatment Plan in place for the individual's prescribed medication (Celexa) for his diagnosis of depression.
L64* Medication treatment plans are reviewed by the required groups.	Residential Services	40 Drinkwater Avenue Braintree MA 02184	KO	Although the MTP had been reviewed by the required groups, the plan did not contain Melatonin.
L64* Medication treatment plans are reviewed by the required groups.	Individual Home Supports	17 Town Way Scituate MA 02066	GS	The individual's ISP (1/11/18) contains no reference to a Medication Treatment Plan for the use of Celexa.
L70 Charges for care are calculated appropriately.	Residential Services	76-78 Rhodes Circle Hingham MA 02043	WR	The most recent Residential Charge Agreement, signed by the individual on 2/8/18 does not include the calculated monthly residential charge amount.
L77 The agency assures that staff / care providers are familiar with and trained to support the unique needs of individuals.	Residential Services	76-78 Rhodes Circle Hingham MA 02043	WR	The individual wears a knee brace on his right needed for support when ambulating, but there is no protocol in place to familiarize staff with the parameters for when

				it is to be used.
L77 The agency assures that staff / care providers are familiar with and trained to support the unique needs of individuals.	Residential Services	76-78 Rhodes Circle Hingham MA 02043	MS	There was no evidence that staff had reviewed his updated Glucose Monitoring Protocol revised by his PCP on 9/13/18. The updated protocol included changes to the procedures for re-testing, and additional follow-up steps when his blood sugar is outside of normal range.
L86 Required assessments concerning individual needs and abilities are completed in preparation for the ISP.	Residential Services	76-78 Rhodes Circle Hingham MA 02043	MS	The individual's three ISP assessments were submitted on 5/7/18, three days prior to his scheduled ISP meeting date.
L91* Incidents are reported and reviewed as mandated by regulation.	Residential Services	40 Drinkwater Avenue Braintree MA 02184		Not all Incidents were submitted and/or finalized within required timelines
L91* Incidents are reported and reviewed as mandated by regulation.	Residential Services	76-78 Rhodes Circle Hingham MA 02043		A HCSIS incident report was not completed for a reportable incident.
L91* Incidents are reported and reviewed as mandated by regulation.	Individual Home Supports	37 RIVER ST. Braintree MA 02184		3 incidents were submitted past the 3 day timeline, and one incident was not finalized within the required 7 day timeline

\* Indicators subject to follow-up within 60 days

#### Licensure Employment and Day Supports

#### Issues on Not Met Indicators

Indicator	Service Type	Location	Individual	Issue
L62* Supports and health related protections are reviewed by the required groups.	Community Based Day Services	371 River Street Weymouth MA 02191	DB	There was no review by the ISP team or the Human Rights Committee for the

				use of a gait belt for DB.
L63* Medication treatment plans are in written format with required components.	Community Based Day Services	371 River Street Weymouth MA 02191	RT	Staff administered Klonopin to the individual while at the CBDS program. A medication treatment plan had not been developed. The agency needs to work with the individual's ISP team to develop a Medication Treatment Plan that includes the following: description of behavior(s) to be modified; data on behavior prior to the use of the medication(s); information about side effects, procedures to minimize risk, and clinical indications for terminating the medication. In addition, a process needs to be created for reporting documented behavior(s) to the prescribing practitioner for review.
L79* Staff are trained in safe and correct administration of restraint.	Community Based Day Services	371 River Street Weymouth MA 02191		One staff's restraint training had expired on 3/15/18. At the time of the review (9/20/18), it was identified that the staff person needed to complete refresher training. The agency responded in a timely manner and the staff attended DDS sponsored training on 9/26/18. (Corrected)

\* Indicators subject to follow-up within 60 days

## Planning and Quality Management

### Certification Community Based Day Services

#### Issues on Not Met Indicators

Indicator	Location	Individual	Issue
C54 Individuals have the assistive technology and/or modifications to maximize independence.	371 River Street Weymouth MA 02191	DL	There was no evidence that staff have assessed the individual's need for assistive technology, or that any technology was in place to assist him to maximize his independence.
C54 Individuals have the assistive technology and/or modifications to maximize independence.	371 River Street Weymouth MA 02191	RL	There was no evidence that staff have assessed the individual's need for assistive technology, or that any technology was in place to assist him to maximize his independence.
C54 Individuals have the assistive technology and/or modifications to maximize independence.	371 River Street Weymouth MA 02191	JD	There was no evidence that an assessment of the need for assistive technology or that any technology was in place to assist JD to maximize her independence.

### Certification Employment Support Services

#### Issues on Not Met Indicators

Indicator	Location	Individual	Issue
C35 Individuals are given feedback on job performance by their employer.	371 River Street Weymouth MA 02191	JH	The last annual performance evaluation was completed on 4/2017 by the supervisor where JH is competitively employed.
C54 Individuals have the assistive technology and/or modifications to maximize independence.	371 River Street Weymouth MA 02191	JH	An assessment has not been conducted to determine if any assistive technology and/or modifications could be used to enhance his independence at his job sites.
C54 Individuals have the assistive technology and/or modifications to maximize independence.	371 River Street Weymouth MA 02191	MC	There is no evidence that this individual has been assessed to determine how assistive technology could maximize his skills or independence at work.

C54 Individuals have the assistive technology and/or modifications to maximize independence.	371 River Street Weymouth MA 02191	JD	There is no evidence that JD has received an assessment of how assistive technology could benefit her to maximize her independence in the workplace.
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**Certification Individual Home Supports**

**Issues on Not Met Indicators**

Indicator	Location	Individual	Issue
C7 Individuals have opportunities to provide feedback at the time of hire / time of the match and on an ongoing basis on the performance/actions of staff / care providers that support them.	17 Town Way Scituate MA 02066	GS	There was no evidence that the individual has been offered opportunities to provide input regarding his staff's performance.
C7 Individuals have opportunities to provide feedback at the time of hire / time of the match and on an ongoing basis on the performance/actions of staff / care providers that support them.	37 RIVER ST. Braintree MA 02184	KS	There was no evidence that this individual's input regarding staff performance was solicited.
C7 Individuals have opportunities to provide feedback at the time of hire / time of the match and on an ongoing basis on the performance/actions of staff / care providers that support them.	37 RIVER ST. Braintree MA 02184	LW	There is no evidence that LW's opinion was solicited for the evaluation of hers staff's performance.
C54 Individuals have the assistive technology and/or modifications to maximize independence.	37 RIVER ST. Braintree MA 02184	LW	There is no evidence that the agency has assessed LS to determine how she could benefit from assistive technology in order to maximize her independence.
C54 Individuals have the assistive technology and/or modifications to maximize independence.	37 RIVER ST. Braintree MA 02184	KS	There has been no assessment of this individuals needs to ascertain whether she could benefit from the use of assistive technology to maximize her independence.



## Certification Residential Services

### Issues on Not Met Indicators

Indicator	Location	Individual	Issue
C7 Individuals have opportunities to provide feedback at the time of hire / time of the match and on an ongoing basis on the performance/actions of staff / care providers that support them.	76-78 Rhodes Circle Hingham MA 02043	CC	While the individual was involved with the interviewing new staff, there was no evidence that he had been afforded opportunities to provide feedback on an ongoing basis on the performance of staff that support him.
C7 Individuals have opportunities to provide feedback at the time of hire / time of the match and on an ongoing basis on the performance/actions of staff / care providers that support them.	76-78 Rhodes Circle Hingham MA 02043	JG	While the individual was involved in interviewing staff applicants, there was no evidence that he had been afforded opportunities to provide feedback on an ongoing basis on the performance of staff that support him.
C17 Community activities are based on the individual's preferences and interests.	76-78 Rhodes Circle Hingham MA 02043	CC	While staff have explored and are familiar with some of the individual's social and recreational interests, there was no individualized strategy or plan to motivate and support his involvement in community activities of his preference and interest.
C48 Individuals are a part of the neighborhood.	76-78 Rhodes Circle Hingham MA 02043	CC	There was no evidence that opportunities have been provided to the individual to develop connections with his neighbors, or to explore local community clubs or groups of interest.
C54 Individuals have the assistive technology and/or modifications to maximize independence.	40 Drinkwater Avenue Braintree MA 02184	KO	An assessment has not been conducted to determine if any assistive technology and/or modifications could be used to enhance her independence.
C54 Individuals have the assistive technology and/or modifications to maximize independence.	76-78 Rhodes Circle Hingham MA 02043	WR	An assessment had not been conducted to determine if the individual could benefit from any assistive technology and/or modifications could be used to increase his level of independence.

C54 Individuals have the assistive technology and/or modifications to maximize independence.	76-78 Rhodes Circle Hingham MA 02043	MS	An assessment had not been conducted to determine if the individual could benefit from any assistive technology and/or modifications could be used to maximize his independence.
C54 Individuals have the assistive technology and/or modifications to maximize independence.	40 Drinkwater Avenue Braintree MA 02184	BO	An assessment has not been conducted to determine if any assistive technology and/or modifications could be used to enhance her independence.
C54 Individuals have the assistive technology and/or modifications to maximize independence.	40 Drinkwater Avenue Braintree MA 02184	PM	An assessment has not been done to identify any assistive technology that may be of benefit and/ or modifications to maximize independence in their routines.

## MASTER SCORE SHEET LICENSURE

### Organizational: The ARC of the South Shore

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
Ⓜ L2	Abuse/neglect reporting	7/7	Met
L3	Immediate Action	9/9	Met
L4	Action taken	4/4	Met
L48	HRC	1/1	Met
L65	Restraint report submit	1/1	Met
L66	HRC restraint review	1/1	Met
L74	Screen employees	4/4	Met
L75	Qualified staff	2/2	Met
L76	Track trainings	20/21	Met(95.24 % )
L83	HR training	20/21	Met(95.24 % )

### 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	7/7	3/3	2/2				12/12	Met

L5	Safety Plan	L	3/3	2/2	1/1				6/6	Met
Ⓜ L6	Evacuation	L	3/3	2/2	1/1				6/6	Met
L7	Fire Drills	L	3/3						3/3	Met
L8	Emergency Fact Sheets	I	7/7	3/3	2/2				12/12	Met
L9	Safe use of equipment	L	3/3	2/2					5/5	Met
Ⓜ L11	Required inspections	L	3/3	1/1	1/1				5/5	Met
Ⓜ L12	Smoke detectors	L	2/3	2/2	1/1				5/6	Met (83.33%)
Ⓜ L13	Clean location	L	3/3	1/1	1/1				5/5	Met
L14	Site in good repair	L	3/3	1/1	1/1				5/5	Met
L15	Hot water	L	2/3	1/1	1/1				4/5	Met (80.0%)
L16	Accessibility	L	3/3	2/2	1/1				6/6	Met
L17	Egress at grade	L	2/3	2/2	1/1				5/6	Met (83.33%)
L18	Above grade egress	L	1/1	2/2					3/3	Met
L19	Bedroom location	L	3/3	2/2					5/5	Met
L20	Exit doors	L	3/3	2/2					5/5	Met
L21	Safe electrical equipment	L	3/3	1/1	1/1				5/5	Met
L22	Well-maintained appliances	L	3/3	1/1	1/1				5/5	Met
L23	Egress door locks	L	1/1						1/1	Met
L24	Locked door access	L	3/3						3/3	Met
L25	Dangerous substances	L	3/3	1/1					4/4	Met
L26	Walkway safety	L	3/3	1/1	1/1				5/5	Met
L28	Flammables	L	3/3	1/1					4/4	Met
L29	Rubbish/combustibles	L	3/3	1/1	1/1				5/5	Met
L30	Protective railings	L	2/3	2/2	1/1				5/6	Met (83.33%)
L31	Communication method	I	7/7	3/3	2/2				12/12	Met
L32	Verbal & written	I	7/7	3/3	2/2				12/12	Met
L33	Physical exam	I	7/7	3/3	2/2				12/12	Met

L34	Dental exam	I	7/7	3/3	2/2				12/12	Met
L35	Preventive screenings	I	7/7	3/3	2/2				12/12	Met
L36	Recommended tests	I	7/7	3/3	2/2				12/12	Met
L37	Prompt treatment	I	7/7	2/2	2/2				11/11	Met
Ⓜ L38	Physician's orders	I	5/5	2/2					7/7	Met
L39	Dietary requirements	I	4/4						4/4	Met
L40	Nutritional food	L	3/3	2/2					5/5	Met
L41	Healthy diet	L	3/3	2/2	1/1				6/6	Met
L42	Physical activity	L	3/3	2/2	1/1				6/6	Met
L43	Health Care Record	I	7/7	3/3	2/2				12/12	Met
L44	MAP registration	L	2/2						2/2	Met
L45	Medication storage	L	3/3	1/1					4/4	Met
Ⓜ L46	Med. Administration	I	5/5	1/1					6/6	Met
L47	Self medication	I	7/7	3/3	2/2				12/12	Met
L49	Informed of human rights	I	7/7	3/3	2/2				12/12	Met
L50	Respectful Comm.	L	3/3	2/2	1/1				6/6	Met
L51	Possessions	I	7/7	3/3	2/2				12/12	Met
L52	Phone calls	I	7/7	3/3	2/2				12/12	Met
L53	Visitation	I	7/7	3/3	2/2				12/12	Met
L54	Privacy	L	3/3	2/2	1/1				6/6	Met
L56	Restrictive practices	I	1/1						1/1	Met
L61	Health protection in ISP	I	2/2						2/2	Met
L62	Health protection review	I	2/2						2/2	Met
L63	Med. treatment plan form	I	4/5	0/1					4/6	Not Met (66.67%)
L64	Med. treatment plan rev.	I	4/5	0/1					4/6	Not Met (66.67%)
L67	Money mgmt. plan	I	7/7	3/3	2/2				12/12	Met
L68	Funds expenditure	I	7/7	2/2	2/2				11/11	Met
L69	Expenditure tracking	I	7/7	2/2	2/2				11/11	Met
L70	Charges for care calc.	I	6/7	2/2	2/2				10/11	Met

										(90.91 %)
L71	Charges for care appeal	I	7/7	2/2	2/2				11/11	Met
L77	Unique needs training	I	5/7	3/3	2/2				10/12	Met (83.33 %)
L80	Symptoms of illness	L	3/3	2/2	1/1				6/6	Met
L81	Medical emergency	L	3/3	2/2	1/1				6/6	Met
☞ L82	Medication admin.	L	2/2						2/2	Met
L84	Health protect. Training	I	2/2						2/2	Met
L85	Supervision	L	3/3	2/2	1/1				6/6	Met
L86	Required assessments	I	6/7	1/1	2/2				9/10	Met (90.0 %)
L87	Support strategies	I	7/7	2/2	2/2				11/11	Met
L88	Strategies implemented	I	7/7	3/3	2/2				12/12	Met
L90	Personal space/ bedroom privacy	I	7/7	3/3	2/2				12/12	Met
L91	Incident management	L	0/2	0/1					0/3	Not Met (0 %)
<b>#Std. Met/# 69 Indicator</b>									66/69	
<b>Total Score</b>									76/79	
									96.20%	

**Employment and Day Supports:**

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L1	Abuse/neglect training	I	3/3		3/3	6/6	Met
L5	Safety Plan	L			1/1	1/1	Met
☞ L6	Evacuation	L			1/1	1/1	Met
L7	Fire Drills	L			1/1	1/1	Met
L8	Emergency Fact	I	3/3		3/3	6/6	Met

	Sheets						
L9	Safe use of equipment	L	1/1		1/1	2/2	Met
L10	Reduce risk interventions	I	2/2		3/3	5/5	Met
Ⓜ L11	Required inspections	L			1/1	1/1	Met
Ⓜ L12	Smoke detectors	L			1/1	1/1	Met
Ⓜ L13	Clean location	L			1/1	1/1	Met
L14	Site in good repair	L			1/1	1/1	Met
L15	Hot water	L			1/1	1/1	Met
L16	Accessibility	L			1/1	1/1	Met
L17	Egress at grade	L			1/1	1/1	Met
L20	Exit doors	L			1/1	1/1	Met
L21	Safe electrical equipment	L			1/1	1/1	Met
L22	Well-maintained appliances	L			1/1	1/1	Met
L25	Dangerous substances	L			1/1	1/1	Met
L26	Walkway safety	L			1/1	1/1	Met
L28	Flammables	L			1/1	1/1	Met
L29	Rubbish/combustibles	L			1/1	1/1	Met
L31	Communication method	I	3/3		3/3	6/6	Met
L32	Verbal & written	I	3/3		3/3	6/6	Met
L37	Prompt treatment	I	2/2		1/1	3/3	Met
Ⓜ L38	Physician's orders	I	1/1		3/3	4/4	Met
L39	Dietary requirements	I			2/2	2/2	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	3/3		3/3	6/6	Met
L50	Respectful Comm.	L	1/1		1/1	2/2	Met
L51	Possessions	I	3/3		3/3	6/6	Met
L52	Phone calls	I	3/3		3/3	6/6	Met
L54	Privacy	L	1/1		1/1	2/2	Met

L61	Health protection in ISP	I			2/2	2/2	Met
L62	Health protection review	I			1/2	1/2	Not Met (50.0 %)
L63	Med. treatment plan form	I			1/2	1/2	Not Met (50.0 %)
L64	Med. treatment plan rev.	I			1/1	1/1	Met
L67	Money mgmt. plan	I			3/3	3/3	Met
L68	Funds expenditure	I			3/3	3/3	Met
L69	Expenditure tracking	I			3/3	3/3	Met
L72	DOL requirements	I			1/1	1/1	Met
L77	Unique needs training	I	3/3		3/3	6/6	Met
L79	Restraint training	L			0/1	0/1	Not Met (0 %)
L80	Symptoms of illness	L	1/1		1/1	2/2	Met
L81	Medical emergency	L	1/1		1/1	2/2	Met
Ⓜ L82	Medication admin.	L			1/1	1/1	Met
L84	Health protect. Training	I			2/2	2/2	Met
L85	Supervision	L	1/1		1/1	2/2	Met
L86	Required assessments	I	2/2		3/3	5/5	Met
L87	Support strategies	I	1/1		3/3	4/4	Met
L88	Strategies implemented	I	3/3		3/3	6/6	Met
L91	Incident management	L			1/1	1/1	Met
<b>#Std. Met/# 53 Indicator</b>						<b>50/53</b>	
<b>Total Score</b>						<b>60/63</b>	
						<b>95.24%</b>	

## 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	<b>Met</b>
C4	Utilizes input from stakeholders	1/1	<b>Met</b>
C5	Measure progress	1/1	<b>Met</b>
C6	Future directions planning	1/1	<b>Met</b>

### Community Based Day Services

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>
C13	Skills to maximize independence	3/3	<b>Met</b>
C37	Interpersonal skills for work	3/3	<b>Met</b>
C40	Community involvement interest	3/3	<b>Met</b>
C41	Activities participation	3/3	<b>Met</b>
C42	Connection to others	3/3	<b>Met</b>
C43	Maintain & enhance relationship	3/3	<b>Met</b>
C44	Job exploration	3/3	<b>Met</b>
C45	Revisit decisions	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>
C51	Ongoing satisfaction with services/ supports	3/3	<b>Met</b>
C54	Assistive technology	0/3	<b>Not Met (0 %)</b>

### Employment Support Services

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>
C27	Job benefit education	1/1	<b>Met</b>
C28	Relationships w/businesses	1/1	<b>Met</b>
C30	Work in integrated settings	3/3	<b>Met</b>
C31	Job accommodations	2/2	<b>Met</b>
C32	At least minimum wages earned	3/3	<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	2/3	<b>Not Met (66.67 %)</b>
C36	Supports to enhance retention	3/3	<b>Met</b>
C37	Interpersonal skills for work	3/3	<b>Met</b>
C47	Transportation to/ from community	3/3	<b>Met</b>
C50	Involvement/ part of the Workplace culture	3/3	<b>Met</b>
C51	Ongoing satisfaction with services/ supports	3/3	<b>Met</b>
C54	Assistive technology	0/3	<b>Not Met (0 %)</b>

### Individual Home Supports

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	0/3	<b>Not Met (0 %)</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	2/2	<b>Met</b>
C16	Explore interests	3/3	<b>Met</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	2/2	<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	1/3	<b>Not Met (33.33 %)</b>
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### Placement Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	2/2	<b>Met</b>
C8	Family/guardian communication	2/2	<b>Met</b>
C9	Personal relationships	2/2	<b>Met</b>
C10	Social skill development	2/2	<b>Met</b>
C11	Get together w/family & friends	2/2	<b>Met</b>
C12	Intimacy	2/2	<b>Met</b>
C13	Skills to maximize independence	2/2	<b>Met</b>
C14	Choices in routines & schedules	2/2	<b>Met</b>
C15	Personalize living space	1/1	<b>Met</b>
C16	Explore interests	2/2	<b>Met</b>
C17	Community activities	2/2	<b>Met</b>
C18	Purchase personal belongings	2/2	<b>Met</b>
C19	Knowledgeable decisions	2/2	<b>Met</b>
C20	Emergency back-up plans	1/1	<b>Met</b>
C46	Use of generic resources	2/2	<b>Met</b>
C47	Transportation to/ from community	2/2	<b>Met</b>
C48	Neighborhood connections	2/2	<b>Met</b>
C49	Physical setting is consistent	1/1	<b>Met</b>
C51	Ongoing satisfaction with services/ supports	2/2	<b>Met</b>
C52	Leisure activities and free-time choices /control	2/2	<b>Met</b>
C53	Food/ dining choices	2/2	<b>Met</b>
C54	Assistive technology	2/2	<b>Met</b>

### Residential Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	5/7	<b>Not Met (71.43 %)</b>

C8	Family/guardian communication	7/7	<b>Met</b>
C9	Personal relationships	7/7	<b>Met</b>
C10	Social skill development	7/7	<b>Met</b>
C11	Get together w/family & friends	7/7	<b>Met</b>
C12	Intimacy	7/7	<b>Met</b>
C13	Skills to maximize independence	7/7	<b>Met</b>
C14	Choices in routines & schedules	7/7	<b>Met</b>
C15	Personalize living space	3/3	<b>Met</b>
C16	Explore interests	7/7	<b>Met</b>
C17	Community activities	6/7	<b>Met (85.71 %)</b>
C18	Purchase personal belongings	7/7	<b>Met</b>
C19	Knowledgeable decisions	7/7	<b>Met</b>
C20	Emergency back-up plans	3/3	<b>Met</b>
C46	Use of generic resources	7/7	<b>Met</b>
C47	Transportation to/ from community	6/6	<b>Met</b>
C48	Neighborhood connections	6/7	<b>Met (85.71 %)</b>
C49	Physical setting is consistent	3/3	<b>Met</b>
C51	Ongoing satisfaction with services/ supports	7/7	<b>Met</b>
C52	Leisure activities and free-time choices /control	7/7	<b>Met</b>
C53	Food/ dining choices	7/7	<b>Met</b>
C54	Assistive technology	2/7	<b>Not Met (28.57 %)</b>

## ADDENDUM OF ISSUES BEYOND THE PROVIDER'S CONTROL:

Licensure:

<b>Employment and Day Supports</b>				
<b>Indicator</b>	<b>Service Type</b>	<b>Location</b>	<b>Individual</b>	<b>Issue</b>
L64 Medication treatment plans are reviewed by the required groups.	Community Based Day Services	371 River Street Weymouth MA 02191	RT	There is was no evidence that a Medication Treatment Plan is in place. Once developed, the provider needs to collaborate with the individual's ISP team to ensure that a Medication Treatment Plan is included in his ISP.
L86 Required assessments concerning individual needs and abilities are completed in preparation for the ISP.	Employment Support Services	371 River Street Weymouth MA 02191	JD	Assessments were requested late on 9/14/17, submitted one date late 9/27/17
L87 Support strategies necessary to assist an individual to meet their goals and objectives are completed and submitted as part of the ISP.		371 River Street Weymouth MA 02191	JD	As there was no formal work related goal goal being worked on, there are no work-related support strategies for developed for this individual as part of their ISP.
			MC	As this individual has no formal no work-related goal, a support strategy has not been developed as part of the ISP.

<b>Residential and Individual Home Supports</b>				
<b>Indicator</b>	<b>Service Type</b>	<b>Location</b>	<b>Individual</b>	<b>Issue</b>
L86 Required assessments concerning individual needs and abilities are completed in preparation for the ISP.	Individual Home Supports	37 RIVER ST. Braintree MA 02184	LW	The assessments were requested late, and provider has completed them.
			KS	This individual began services with the agency in 8/2017. There is no ISP scheduled, and the agency continues to work wit the area office to resolve this.
L87 Support strategies necessary to assist an individual to meet their goals and objectives are completed and submitted as part of the ISP.		37 RIVER ST. Braintree MA 02184	KS	This individual began services with the agency in 8/2017. There is no ISP scheduled, and the agency continues to work wit the area office to resolve this.
L91 Incidents are reported and reviewed as mandated by regulation.	Residential Services	49 Sherbrooke Avenue Braintree MA 02184		Incident report was finalized within the required timelines. There was no evidence of unreported incidents.

**Certification:**

N/A
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**GUARDIAN/FAMILY MEMBER/CITIZEN FEEDBACK ADDENDUM:**