



A. Jackson Class Member Demographics – Northeast Region

At the time the sample was selected for the Northeast Review, there were 23 Active Jackson Class Members in the Region. Ten individuals were chosen to be part of the review sample.

Chart #1: Active Class Member Demographics in the Northeast Region

Male	14	Hispanic	13	Adult Habilitation (AH)	12
Female	9	Caucasian	7	Adult Hab/Supp Empl (SE)	1
		Native American	2	Adult Hab/Community Access (CA)	1
		Black	1	Community Access	1
		Asian	0	Mi Via	6
30-39	0			ICF/MR	1
40-49	1	Supported Living	13	None	1
50-59	9	Family Living	3		
60-69	6	Mi Via	6		
70-79	4	ICF/MR	1		
80+	3				
Average Age:	65				

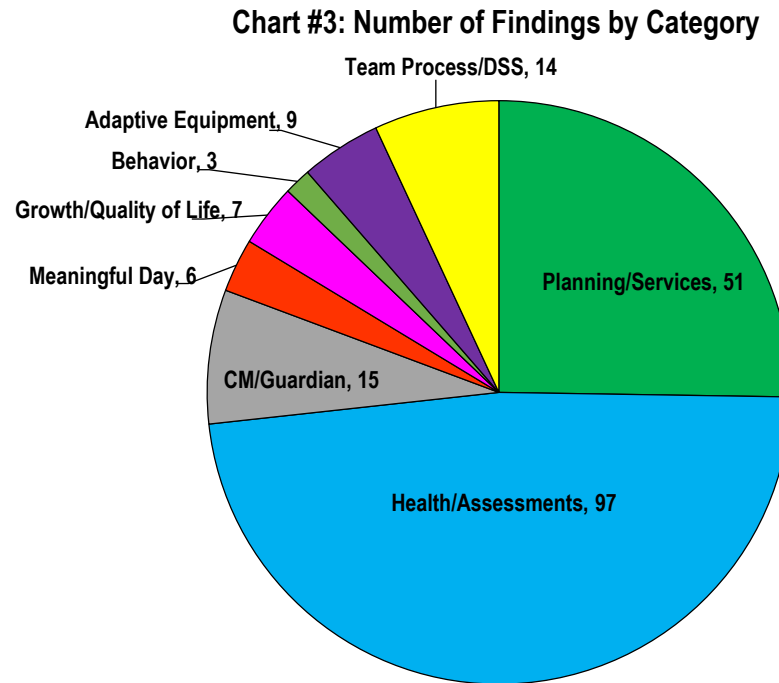
Chart #2: Agencies Serving Class Members in the Northeast Region:

(#) = The number of Jackson Class Members being served by the identified agency or service.

Case Management	NERO (1)	Unidas (3)	Visions (13)	Mi Via (6)						
Residential	AWS/ Benchmark (5)	CDD (2)	Community Options (3)	Ensuenos (2)	ESEM (1)	Family Options (1)	Mi Via (6)	NNMQC (1)	R-Way (1)	Santa Lucia (1)
Day	AWS/ Benchmark (4)	CDD (2)	Community Options (3)	Ensuenos (2)	ESEM (1)	Family Options (1)	Mi Via (6)	NONE (1)	Phame (3)	Santa Lucia (1)

B. Most Frequently Identified Findings by Category

The Northeast Region had a total of 203 Findings and Recommendations. The table below shows the number of findings in each category identified below.



C. Most Frequently Identified Findings by Provider

IQR Findings include the identification of good and exemplary as well as deficient practice. Findings are developed by the reviewer, reviewed by a Case Judge, the Community Monitor, Regional Office and State DDSD and DHI Staff, the individual and his/her Team before they become final. The expectation is that the identified issue will be resolved not only for the individual but, if applicable, for everyone in that agency, and resolved in a way that is sustainable so that the identified issue remains “fixed”.

Of the 203 Findings and Recommendations in the Northeast Region’s Review, there were 46 Recommendations that were identified as “repeat recommendations/issues” within the last ten years. The category where the repeats are most frequent is in the area of Planning and Services, followed by Health/Assessments.

Chart #4: Repeat Findings by Area and Residential Provider								
Area	AWS/ Benchmark (2)	CDD (1)	Community Options (2)	Ensuenos (ELADC) (1)	Family Options (1)	Mi Via (2)	NNMQC (1)	Total
Adaptive Equipment / Augmentative Communication	0	0	1	1	0	1	0	3
Behavior	0	0	0	0	0	0	0	0
Case Manager/ Guardian	4	1	3	0	1	0	0	9
Expectations of Growth/Quality of Life	0	0	0	0	0	0	0	0
Health/Assessments	3	2	3	3	3	0	1	15
Meaningful Day	0	1	0	0	1	0	0	2
Planning and Services	6	4	3	0	2	0	0	15
Team Process/DSS	1	1	0	0	0	0	0	2
TOTAL	14	9	10	4	7	1	1	46

Chart #5: Repeat Findings by Area and Case Management Agency				
Area	Mi Via (2)	Unidas (2)	Visions (6)	Total
Adaptive Equipment / Augmentative Communication	1	0	2	3
Behavior	0	0	0	0
Case Manager/ Guardian	0	2	7	9
Expectations of Growth/Quality of Life	0	0	0	0
Health/Assessments	0	5	10	15
Meaningful Day	0	1	1	2
Planning and Services	0	3	12	15
Team Process/DSS	0	0	2	2
TOTAL	1	11	34	46

D. Immediate and Special Findings

There were ten (10) Class Members reviewed in the Northeast Region as part of the 2018 IQR. Five individuals (50% of the total sample) were found to have Immediate Needs. Three of those five also had Special findings. Two additional individuals were found to have Special needs. A total of seven people were found to have Immediate and/or Special needs, 70% of the sample. There was a total of six Immediate findings and seven Special findings. Details of the issues of these findings are available in the table below.

Class Members identified as “**needing immediate attention**” are persons for whom urgent health, safety, environment and/or abuse/neglect/exploitation issues were identified which the team is not successfully and actively in the process of addressing in a timely fashion.

Class Members identified as “**needing special attention**” are individuals for whom issues have been identified that, if not addressed, are likely to become an urgent health and safety concern.

Chart #6: Immediate/Special Identified Individual Issues – 2018 IQR Northeast

DETAILS REGARDING THE SPECIFIC FINDINGS HAVE BEEN REMOVED FOR POSTING ON THE COMMUNITY MONITOR WEBSITE

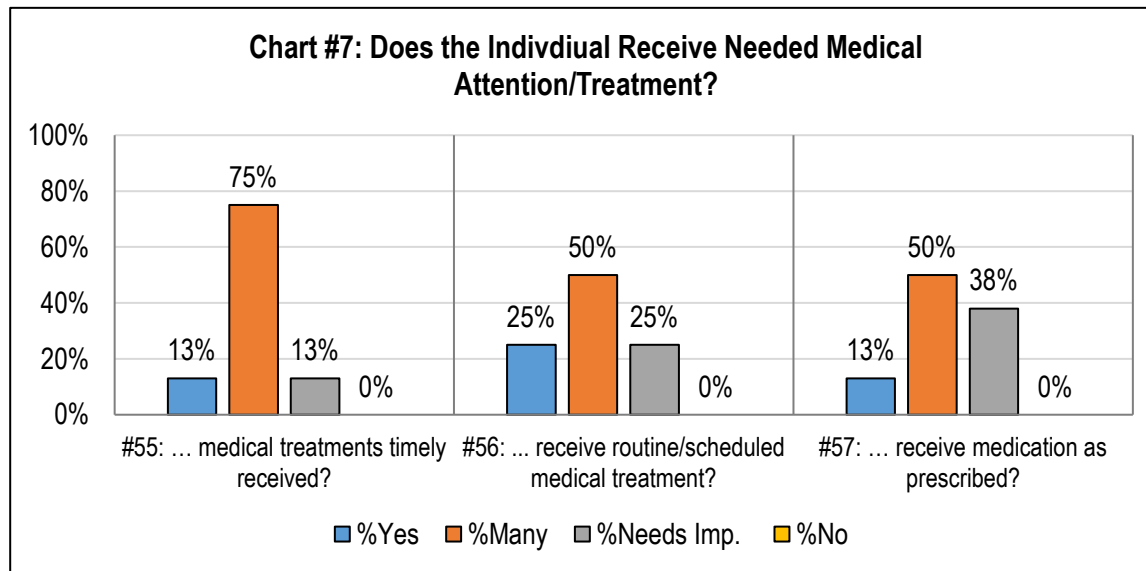
Immediate/Special Identified Individual Issues – 2018 IQR						
Reg	CM	Res	Day	Immd	Spec	IR
Health Oversight Issues						
NE	Unidas	Community Options	Community Options	X		
NE	Visions	AWS	AWS	X		
NE	Visions	ELADC	ELADC	X		
NE	Visions	AWS	Phame		X	
Medication/Side Effects						
NE	Visions	Community Options	Community Options		X	
Aspiration/CARMP Issues						
NE	Mi Via	Mi Via	Mi Via		X	
NE	Visions	ELADC	ELADC	X		
NE	Visions	ELADC	ELADC		X	
NE	Visions	AWS	Phame	X		
Falls/Fractures/Safety						
NE	Mi Via	Mi Via	Mi Via		X	
DNR issues						
NE	Visions	Community Options	Community Options	X		
NE	Visions	NNMQC	None		X	
Other						
NE	Mi Via	Mi Via	Mi Via		X	

E. Health, Assessments and Overall Wellness

There is a series of scored questions in the IQR protocol that specifically relate to medical attention received by class members. The charts which follow detail the findings based on related questions which are summarized first.

- Question #55: Are all of the individual's needed medical treatments timely received?
- Question #56: Does the individual receive routine/scheduled medical treatment?
- Question #57: Does the individual receive medication as prescribed?

Ensuring individuals have the medical treatment they require includes scheduling and obtaining needed assessments, and using the information from those assessments to influence treatment and inform future planning. The IQR also evaluates the assessments needed by the individual and obtained by the teams as summarized below.



Additional Question probe the acquisition of assessments.

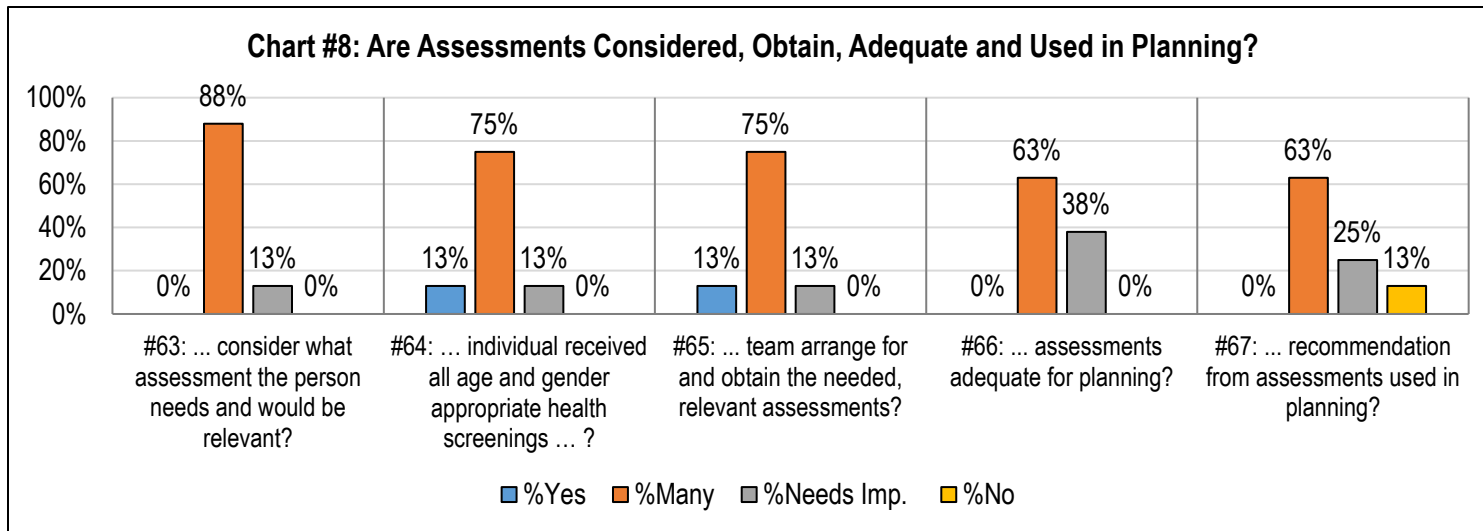
Question #63: Did the team consider what assessment the person needs and would be relevant to the Team's planning efforts?

Question #64: Has the individual received all age and gender appropriate health screenings, in accordance with national best practice and/or as recommended by his/her PCP or other health care professionals?

Question #65: Did the team arrange for and obtain the needed, relevant assessments?

Question #66: Are the assessments adequate for planning?

Question #67: Were the recommendations from assessments used in planning?



As indicated earlier, a letter of Findings and Recommendations is issued for each class member. This letter is developed by the reviewer, reviewed by the Case Judge, Community Monitor, Regional and State DDSD and DHI staff, the individual and his/her team prior to becoming final. The table below summarizes some of the issues which were identified. It is important to note that the indications are number of issues found; not the number of findings. For example, if one individual was found to have a Medication Administration Record (MAR) which called for the administration of a medication for which a doctors order was not found AND was also found to have been given a medication twice a day when the doctor's order called for one time a day, that might be ONE finding regarding medication but TWO different issues.

Chart #9: Type of Issues identified by Residential Agency

Residential Agency (# in sample):								
Area	AWS/ Benchmark (2)	CDD (1)	Community Options (2)	Ensuenos (ELADC) (1)	Family Options (1)	Mi Via (2)	NNMQC (1)	Total
AIMS/TD Screen needed			2					2
Audiology/ABR: Not Current/Missing/Inaccurate				1	1			2
Vision/Optomety/Ophthalmology missing/needed				1				1
Nutrition: Not Current/Missing/Inaccurate	1		5					6
Bone Density/Dexa: Not Current/Missing/Inaccurate			2	1		1		4
Hep B vaccine not done						2		2
HepC vaccine not done (healthfinder.gov)	1		2	1	1	2	1	8
Shingles vaccine not done (healthfinder.gov)		1	1		1	2		5
Pneumonia vaccine not done (healthfinder.gov)	1				1	1		3
Colon cancer screen not done (healthfinder.gov)			1	1		1		3

Residential Agency (# in sample):								
Area	AWS/ Benchmark (2)	CDD (1)	Community Options (2)	Ensuenos (ELADC) (1)	Family Options (1)	Mi Via (2)	NNMQC (1)	Total
TDap not completed as recommended (healthfinder)		1			1	2		4
HIV Testing not completed (healthfinder.gov)						1		1
Flu vaccine not done (healthfinder.gov)	1		2					3
Weight tracking/monitoring issues	1	1	8					10
Fluid input/output tracking not done/has issues	1		6	4				11
Bowel tracking inaccurate/not done/no follow up	80		37	17				134
Labs missing (PSA, pre-Physical, pre-Neuro appt.)			1					1
Breast exam/Mammogram missing/not current			1					1
Pap smear/well woman exam			1					1
Poor oral hygiene noted			4					4
Follow up with specialist not complete			1	2				3
MAR/Medication/Dr. Order do not match			9	1	5			15
MAAT note timely			1					1
Medication distribution errors found/reported	1		45	1				47
MERPs/HCPs Not found/not specific/incorrect	8		12	7	2		4	33
eChat incorrect/incomplete/has errors	9	17	27		9		4	66
CARMP inaccurate/incomplete/not current			5	9	2	4		20
CARMP implementation incorrect/issues					1			1
Inconsistency between HCP/CARMP/MERP/eChat	8		3		3			14
Total	112	20	176	46	27	16	9	406

For health care management, oversight and monitoring, I/DD services rely heavily on nurses, primary care physicians and referrals to needed specialists. Nurses and the supports they can provide are essential for the protection and healthy living of class members. Relevant scored protocol questions related directly to nursing include:

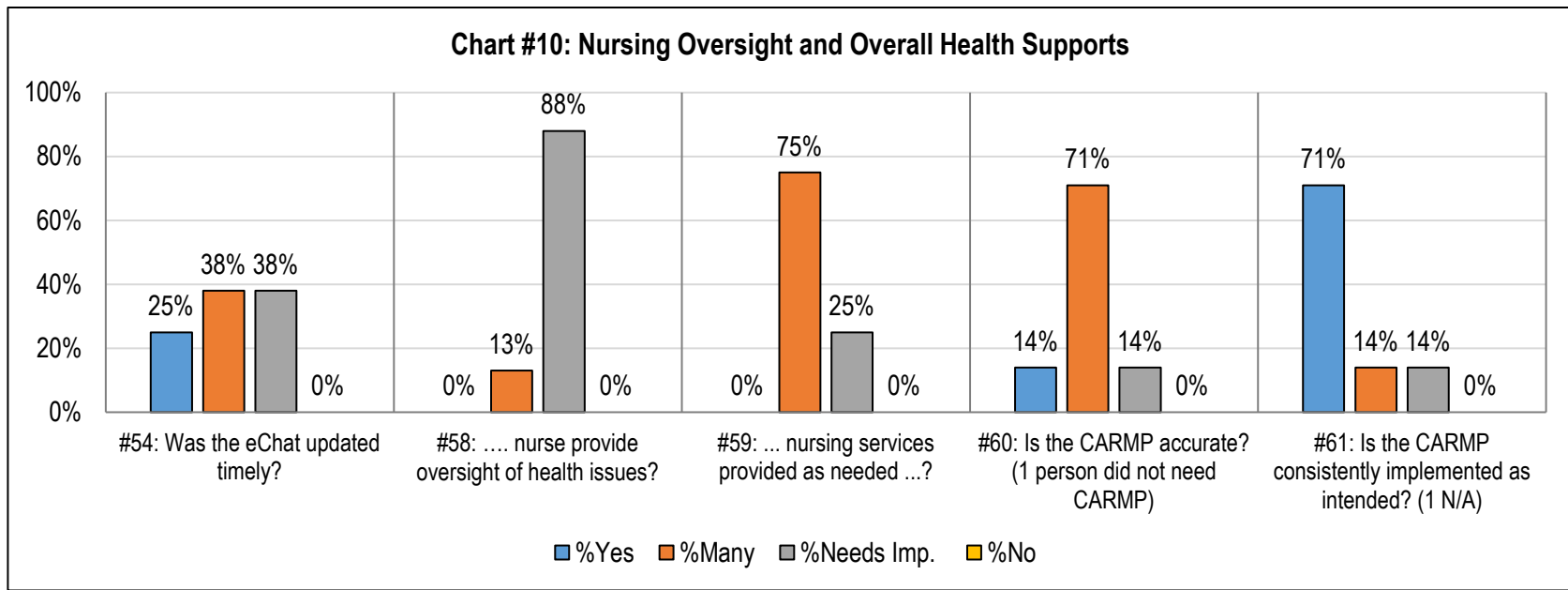
Question #54: Was the eChat updated timely?

Question #58: Does my nurse provide oversight of health issues (i.e. weight records, vitals, lab reports, PRN medication use, seizure records) in order to ensure accuracy, identify and respond to new issues?

Question #59: Are nursing services provided as needed by the individual?

Question #60: Is the CARMP accurate?

Question #61: Is the CARMP consistently implemented as intended?



Oversight provided by nurses is a critical safeguard for Jackson Class Members, direct support professionals and their supervisors. The table below provides specific details, by residential provider, of nursing related issues identified during the 2018 IQR. Again, this represents the number of issues found; not the number of findings.

Chart #11: Type of Nursing Related Issues Identified by Residential Provider

Area	Residential Agency (# in sample):							Total
	AWS/ Benchmark (2)	CDD (1)	Community Options (2)	Ensuenos (ELADC) (1)	Family Options (1)	Mi Via (2)	NNMQC (1)	
Nursing Quarter/Annual/Monthly report not timely	10	0	9	2	2	0	0	23
Nursing documentation not accurate	6	10	0	1	0	0	1	18
Nurse report(s) not accurate/missing information	4	2	10	0	3	0	1	20
Nurse not monitoring as required	2	8	1	0	30	0	0	41
Total # of Issues	22	20	20	3	35	0	2	102

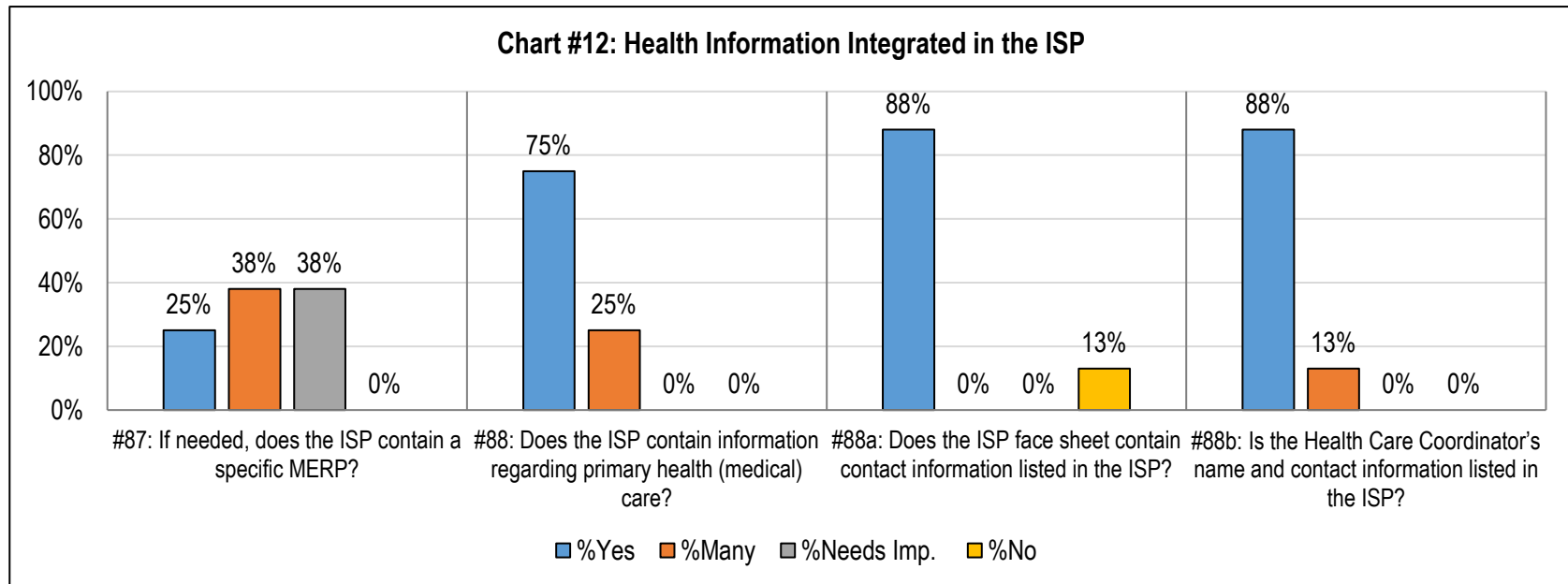
In addition to the issues and questions noted above, the individual's nurse is responsible, with the assistance of the rest of the Team, to assure that the documents presented and created for planning, such as the ISP, are accurate and thorough and contain the needed plans and information required. The protocol questions related to these issues include:

Question #87: If needed, does the ISP contain a specific MERP?

Question #88: Does the ISP contain information regarding primary health (medical) care?

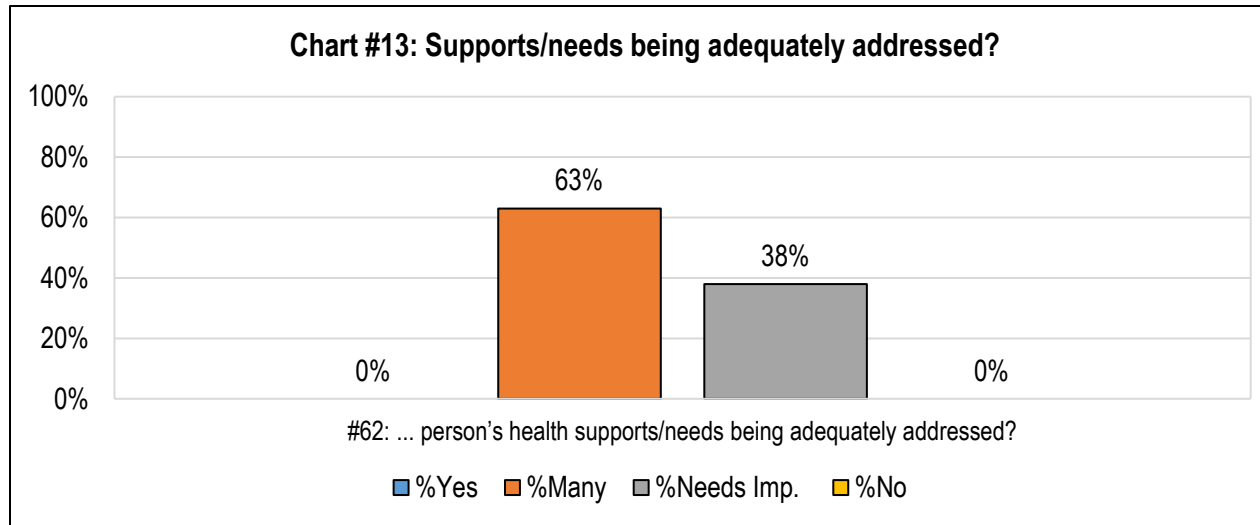
Question #88a: Does the ISP face sheet contain contact information listed in the ISP?

Question #88b: Is the Health Care Coordinator's name and contact information listed in the ISP?



There are many components to ensuring the health and safety of individuals with I/DD. These components vary and are unique to each individual. While the scored protocol questions cannot encompass each and every issue, they do allow for a score that measures the adequacy of response to the individual's overall health needs. That question is **#62: Are the person's health supports/needs being adequately addressed?**

As noted in the chart below, for the 8 people scored in the Northeast review, no individual had their health supports/needs adequately addressed. There were five people who had many of their needs addressed (63%), and three are receiving supports that need improvement (38%).



As noted, beyond the scored protocol questions, the Findings Letter issued for each class member in a review provides person-specific detail about the issues which impact the answer to protocol question #62. This includes the adequacy and incorporation of needed care plans (CARMP, MERP, HCPs) into the Team's planning process, and other areas to ensure the health and safety of the individual being reviewed. Again, it is important to note that the indications are number of issues found; not the number of findings in the Findings Letters. For example, if one individual had a finding that noted four different inconsistencies in that person's MERP, that would be counted as a "4", for the number of issues, not just a "1" for the overall MERP related finding.

Chart #14: Issues Found Which Affect the Adequacy of Health Care Provision, by Provider

NOTE: Therapists and Behavior Support Consultants are independent providers with separate DD Waiver Provider numbers.

Area	Residential Agency (# in sample):							Total
	AWS/ Benchmark (2)	CDD (1)	Community Options (2)	Ensuenos (ELADC) (1)	Family Options (1)	Mi Via (2)	NNMQC (1)	
PT Evaluation Needed/missing	1	0	2	2	0	1	0	6
PT Evaluation does not identify baseline/progress	0	2	0	0	1	0	0	3
PT Report (Annual/Semi) inaccurate/inadequate	0	2	0	0	0	0	0	2
PT Report not found/provided; missing	0	0	2	0	0	0	0	2
OT Evaluation Needed/missing	0	0	0	0	0	1	0	1
OT Evaluation does not identify baseline/progress	1	0	2	0	0	0	0	3
OT Report not found/provided; missing	0	0	2	0	0	0	0	2
SLP Report (Annual/Semi) inaccurate/inadequate	0	1	0	0	0	0	0	1

Residential Agency (# in sample):								
Area	AWS/ Benchmark (2)	CDD (1)	Community Options (2)	Ensuenos (ELADC) (1)	Family Options (1)	Mi Via (2)	NNMQC (1)	Total
SLP Evaluation Needed/missing	0	0	0	1	0	0	0	1
SLP Evaluation does not identify baseline/progress	1	1	2	0	0	0	0	4
SLP Report not found/provided; missing	0	1	2	0	0	0	0	3
SLP WDSI missing/not provided	0	0	1	0	0	0	0	1
Behavior Eval not completed/submitted timely	1	0	1	0	0	0	0	2
Behavior Eval does not identify baseline/progress	1	0	0	0	1	0	0	2
Behavior Report inaccurate/inadequate	1	0	0	0	1	0	0	2
Total # of Issues	6	7	14	3	3	2	0	35

F. Adequacy of Planning, Adequacy of Services, Individual Service Plan

Before a plan can be implemented, it must first be created. ISPs are intended to provide details regarding the individuals' visions and outcomes and are to be developed by an Interdisciplinary Team that includes the Individual and those who know and provide supports to that person. This includes the Case Manager, Guardian, the Direct Support Staff, Therapists, Nurse, and any additional persons who are needed to ensure the implementation of the Plan. The 2018 IQR protocol specifically probes many of the aspects of the planning process, including specifics of who participates in plan creation. The chart below details the answers to related questions in the 2018 review.

Question #70: Was the ISP developed by an appropriately constituted IDT?

Question #71: For any team members not physically present at the IDT meeting, is there evidence of their participation in the development of the ISP?

Question #35: Did the [day/employment] direct service staff have input into the person's ISP?

Question #43: Did the [residential] staff have input into the person's ISP?

Question #100: Was the person provided the assistance and support needed to participate meaningfully in the planning process?

Chart #15: Participation in the ISP planning meeting

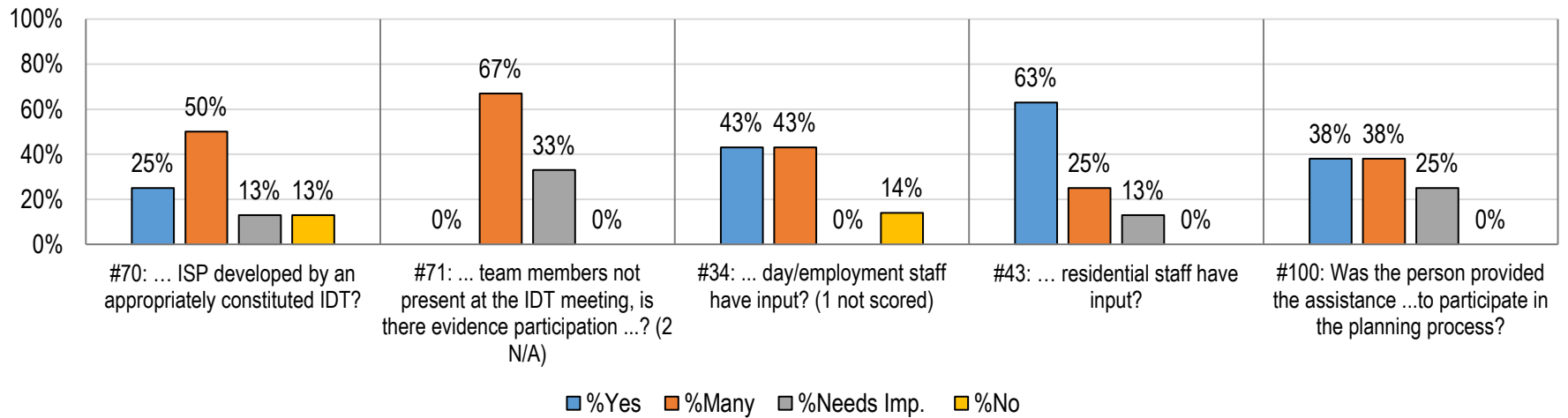


Chart #16: ISP Development Participation, by Provider

Question	Residential Agency (# in sample):					
	AWS/ Benchmark (2)	CDD (1)	Community Options (2)	Ensuenos (ELADC) (1)	Family Options (1)	NNMQC (1)
Q# 70	0% Yes 50% Many (1) 50% Needs Impv (1)	0% Yes 100% Many (1)	0% Yes 50% Many (1) 50% No (1)	0% Yes 100% Many (1)	100% Yes (1)	100% Yes (1)
Q# 71	0% Yes 50% Many (1) 50% Needs Impv (1)	0% Yes 100% Many (1)	0% Yes 50% Many (1) 50% Needs Impv (1)	0% Yes 100% Many (1)	(1 N/A)	(1 N/A)
Q# 34	50% Yes (1) 50% Many (1)	0% Yes 100% Many (1)	0% Yes 50% Many (1) 50% No (1)	100% Yes (1)	100% Yes (1)	(1 not scored)
Q# 43	50% Yes (1) 50% Many (1)	100% Yes (1)	0% Yes 50% Many (1) 50% Needs Impv (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)
Q# 100	50% Yes (1) 50% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Needs Impv (2)	100% Yes (1)	0% Yes 100% Many (1)	100% Yes (1)

Chart #17: ISP Development Participation, by Case Management Agency

Question	Case Management Agency (# in sample):	
	Unidas (2)	Visions (6)
Q# 70	50% Yes (1) 50% Many (1)	17% Yes (1) 50% Many (3) 17% Needs Impv (1) 17% No (1)
Q# 71	0% Yes 100% Many (1) (1 N/A)	0% Yes 60% Many (3) 40% Needs Impv (2) (1 N/A)
Q# 34	50% Yes (1) 50% Many (1)	40% Yes (2) 40% Many (2) 20% No (1) (1 not scored)
Q# 43	50% Yes (1) 50% Many (1)	83% Yes (4) 17% Many (1) 17% Needs Impv (1)
Q# 100	0% Yes 50% Many (1) 50% Needs Impv (1)	50% Yes (3) 33% Many (2) 17% Needs Impv (1)

One foundational component of an individual's ISP is the Long Term Vision, which summarizes what the individual wants to accomplish in the near future (3 to 5 years) in each life area. To that end, Outcomes are to be developed by the Team in a way that results in an accomplishable path to the visions. The 2018 IQR protocol specifically probes the content of identified visions as well as the content and clarity of related outcomes. The chart below details the findings related to identified questions for class members ISPs in the 2018 review.

- Question #73: Overall, does the long term vision show expectations for growth and skill building?
- Question #169: Does the person have an ISP that contains a complete Vision Section that is based on a long term view?
- Question #74: Overall, does the ISP give adequate guidance to achieving the person's long term vision?
- Question #82: Overall, are the ISP outcomes related to achieving the person's long term vision?
- Question #83: Overall, do the ISP outcomes address the person's major needs?
- Question #81: Overall, do the outcomes in the ISP include criteria by which the team can determine when the outcomes have been achieved?

Chart #18: Long Term Vision and Outcomes Protocol Questions

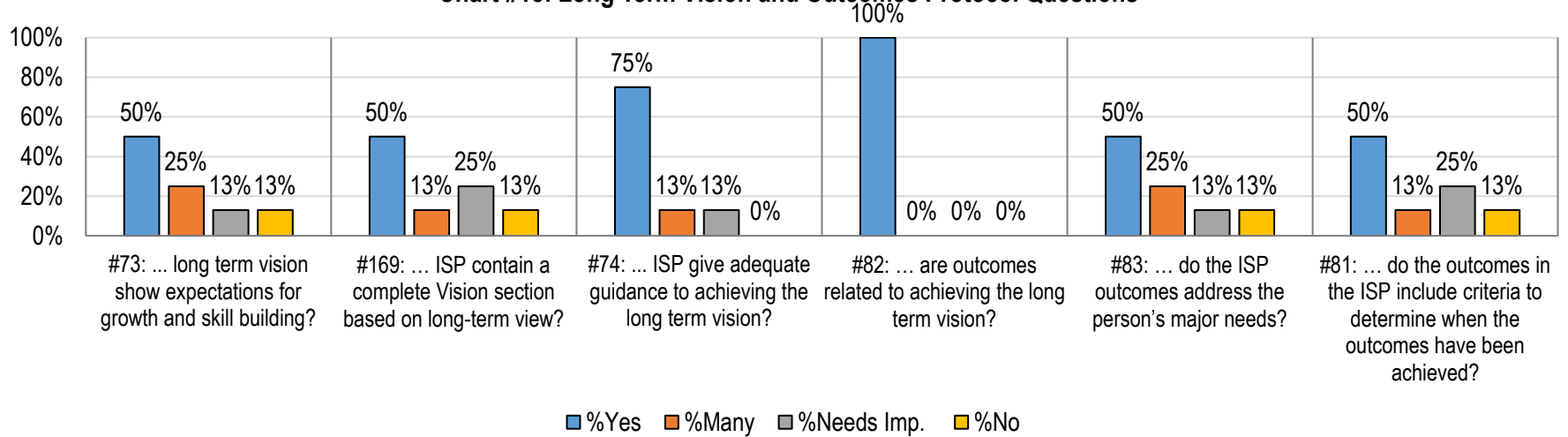


Chart #19: Vision and Outcome Scores, by Residential Agency

Question	Residential Agency (# in sample):					
	AWS/ Benchmark (2)	CDD (1)	Community Options (2)	Ensuenos (ELADC) (1)	Family Options (1)	NNMQC (1)
Q# 73	50% Yes (1) 50% No (1)	0% Yes 100% Many (1)	0% Yes 50% Many (1) 50% Needs Impv (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)
Q# 169	50% Yes (1) 50% No (1)	0% Yes 100% Needs Impv (1)	0% Yes 50% Many (1) 50% Needs Impv (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)
Q# 74	50% Yes (2)	0% Yes 100% Needs Impv (1)	50% Yes (1) 50% Many (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)
Q# 82	50% Yes (2)	100% Yes (1)	50% Yes (2)	100% Yes (1)	100% Yes (1)	100% Yes (1)
Q# 83	50% Yes (1) 50% No (1)	100% Yes (1)	0% Yes 50% Many (1) 50% Needs Impv (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)
Q# 81	50% Yes (1) 50% Needs Impv (1)	0% Yes 100% Many (1)	50% Yes (1) 50% No (1)	100% Yes (1)	0% Yes 100% Needs Impv (1)	100% Yes (1)

Chart #20: Vision and Outcome Scores by Case Management Agency

Question	Case Management Agency (# in sample):	
	Unidas (2)	Visions (6)
Q# 73	50% Yes (1) 50% Needs Impv (1)	50% Yes (3) 33% Many (2) 17% No (1)
Q# 169	50% Yes (1) 50% Needs Impv (1)	50% Yes (3) 17% Many (1) 17% Needs Impv (1) 17% No (1)
Q# 74	100% Yes (2)	67% Yes (4) 17% Many (1) 17% Needs Impv (1)
Q# 82	100% Yes (2)	100% Yes (3)
Q# 83	0% Yes 50% Many (1) 50% Needs Impv (1)	67% Yes (4) 17% Many (1) 17% No (1)
Q# 81	50% Yes (1) 50% Needs Impv (1)	50% Yes (3) 17% Many (1) 17% Needs Impv (1) 17% No (1)

Additional components of an individual's ISP include Action Steps, which should be written in measurable terms, in sequential order which logically leads to the achievement of the related outcome. The data gathered during the implementation of the Action Steps should also be written in measurable terms, so team members can review them and determine if measurable progress toward the outcome is being made. The chart below details the findings related to specific questions which probe the action steps and data collection for class members ISPs in the 2018 review.

- Question #75: Is measureable data kept which verifies the consistent implementation of each of the action steps?
- Question #76: Does the data kept identify what the person does so a determination can be made regarding the progress/lack of progress?
- Question #77: Is each action step in the ISP implemented at a frequency that enables the person to learn new skills?
- Question #78: If the person is not successful in achieving action steps, has the team tried to determine why, and change their approach as needed?
- Question #79: If the person achieves action steps, does the team move to the next in a progress of steps or develops a new one?
- Question #80: Has the person made measureable progress on action steps during the past year?

Chart #21 Data Measurability and Action Steps

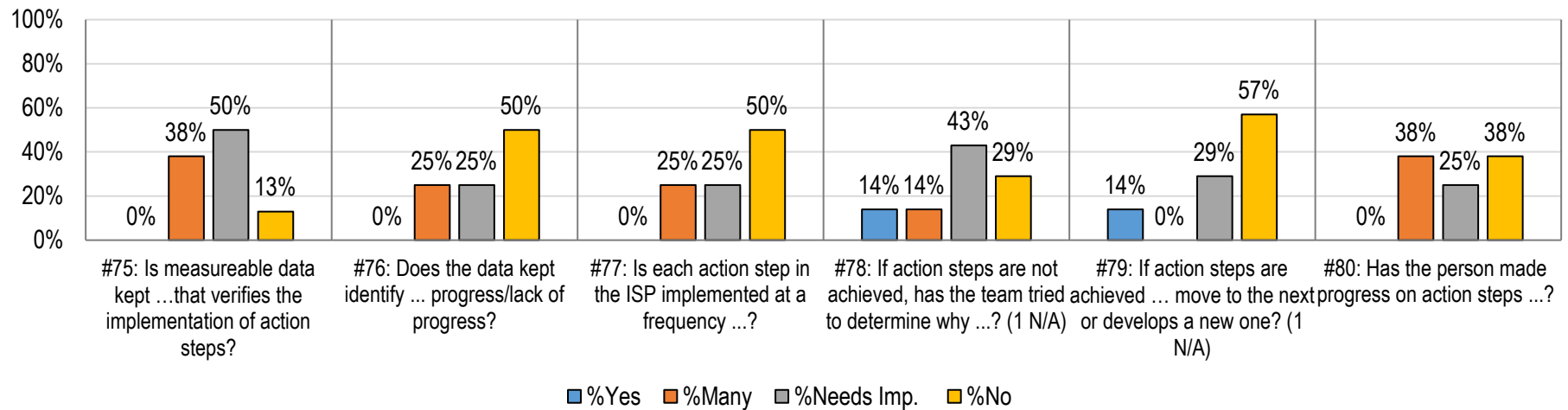


Chart #22: Data and Related ISP Action Step Scores by Residential Agency

Residential Agency (# in sample):						
Area	AWS/ Benchmark (2)	CDD (1)	Community Options (2)	Ensuenos (ELADC) (1)	Family Options (1)	NNMQC (1)
Q# 75	0% Yes 50% Many (1) 50% Needs Impv (1)	0% Yes 100% Many (1)	0% Yes 50% Needs Impv (1) 50% No (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Many (1)
Q# 76	0% Yes 100% No (2)	0% Yes 100% Many (1)	0% Yes 50% Needs Impv (1) 50% No (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% No (1)	0% Yes 100% Many (1)
Q# 77	0% Yes 50% Many (1) 50% No(1)	0% Yes 100% No (1)	0% Yes 50% Needs Impv (1) 50% No (1)	0% Yes 100% Many (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% No (1)
Q# 78	0% Yes 50% Needs Impv (1) 50% No (1)	0% Yes 100% No (1)	0% Yes 100% Needs Impv (2)	100% Yes (1)	0% Yes 100% Many (1)	(1 N/A)
Q# 79	0% Yes 100% Needs Impv (2)	(1 N/A)	0% Yes 100% No (2)	100% Yes (1)	0% Yes 100% No (1)	0% Yes 100% No (1)

Residential Agency (# in sample):						
Area	AWS/ Benchmark (2)	CDD (1)	Community Options (2)	Ensuenos (ELADC) (1)	Family Options (1)	NNMQC (1)
Q# 80	0% Yes 50% Needs Impv (1) 50% No (1)	0% Yes 100% No (1)	0% Yes 50% Needs Impv (1) 50% No (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)

Chart #23: Data and Related Action Step Scores by Case Management Agency

Case Management Agency (# in sample):		
Question	Unidas (2)	Visions (6)
Q# 75	0% Yes 100% Needs Impv (2)	0% Yes 50% Many (3) 33% Needs Impv (2) 17% No (1)
Q# 76	0% Yes 50% Needs Impv (1) 50% No (1)	0% Yes 33% Many (2) 17% Needs Impv (1) 50% No (3)
Q# 77	0% Yes 100% Needs Impv (2)	0% Yes 33% Many (2) 67% No (4)
Q# 78	0% Yes 50% Many (1) 50% Needs Impv (1)	20% Yes (1) 40% Needs Impv (2) 40% No (2) (1 N/A)
Q# 79	0% Yes 100% No (2)	20% Yes (1) 40% Needs Impv (2) 40% No (2) (1 N/A)
Q# 80	0% Yes 50% Many (1) 50% Needs Impv (1)	0% Yes 33% Many (2) 17% Needs Impv (1) 50% No (3)

In addition to the components listed above, the Teaching and Support Strategies (T&SS) are also an integral part of the ISP. T&SS should be developed by the residential and/or day provider responsible for implementing the T&SS. Input from others such as therapists should be included as needed. WDSIs are developed by therapists as a

complement to the T&SS. All T&SS and WDSIs should provide guidance for those direct support professionals who support the person in achieving his/her Vision/Outcomes. The following protocol questions in the 2018 IQR relate to the T&SS and implementation of the ISP.

Question #84: Overall, are the T&SS sufficient to ensure consistent implementation of the services planned?

Question #85: Overall, are the recommendations and/or objectives/strategies of ancillary provider integrated into the ISP?

Question #97: Overall, do the progress notes or other documentation in the record reflect the status of the outcomes and services of the key life areas stated in the ISP?

Question #96: Overall, were the direct service staff able to describe their responsibilities in providing daily care/supports to the person?

Question #95: Overall, was the direct service staff trained on the implementation of this person's ISP?

Question #93/94a: Is the ISP being implemented?

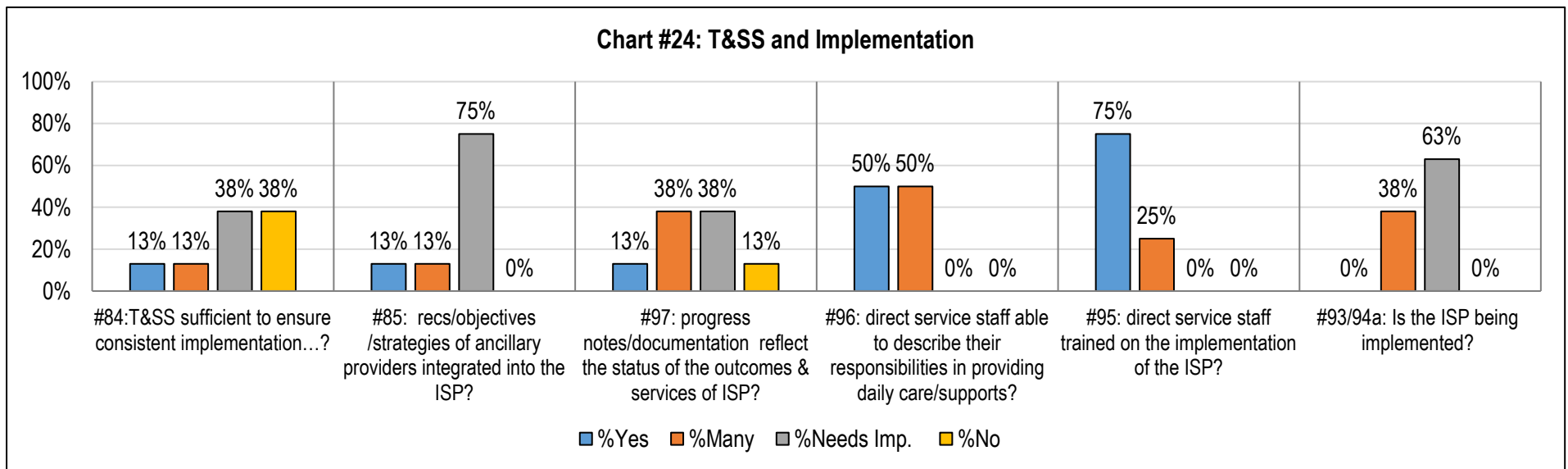


Chart #25: T&SS and ISP Implementation Scores by Residential Agency

Area	Residential Agency (# in sample):					
	AWS/ Benchmark (2)	CDD (1)	Community Options (2)	Ensuenos (ELADC) (1)	Family Options (1)	NNMQC (1)
#84	50% Yes (1) 50% No (1)	0% Yes 100% Needs Impv (1)	0% Yes 50% Needs Impv (1) 50% No (1)	0% Yes 100% Many (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% No (1)

Residential Agency (# in sample):						
Area	AWS/ Benchmark (2)	CDD (1)	Community Options (2)	Ensuenos (ELADC) (1)	Family Options (1)	NNMQC (1)
#85	0% Yes 50% Many (1) 50% Needs Impv (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Needs Impv (2)		0% Yes 100% Needs Impv (1)	0% Yes 100% Needs Impv (1)
#97	0% Yes 100% Needs Impv (2)	0% Yes 100% Many (1)	0% Yes 50% Needs Impv (1) 50% No (1)	0% Yes 100% Many (1)	100% Yes (1)	0% Yes 100% Many (1)
#96	50% Yes (1) 50% Many (1)	100% Yes (1)	0% Yes 100% Many (2)	0% Yes 100% Many (1)	100% Yes (1)	100% Yes (1)
#95	100% Yes (2)	100% Yes (1)	0% Yes 100% Many (2)		100% Yes (1)	100% Yes (1)
#94a	0% Yes 100% Needs Impv (2)	0% Yes 100% Needs Impv (1)	0% Yes 100% Needs Impv (2)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)

Chart #26: T&SS and ISP Implementation Scores by Case Management Agency

Question	Case Management Agency (# in sample):	
	Unidas (2)	Visions (6)
#84	0% Yes 100% Needs Impv (2)	17% Yes (1) 17% Many (1) 17% Needs Impv (1) 50% No (3)
#85	0% Yes 100% Needs Impv (2)	17% Yes (1) 17% Many (1) 67% Needs Impv (4)
#97	50% Yes (1) 50% Need Impv (1)	0% Yes 50% Many (3) 67% Needs Impv (2) 17% No (1)
#96	50% Yes (1) 50% Many (1)	50% Yes (3) 50% Many (3)
#95	50% Yes (1) 50% Many (1)	83% Yes (5) 17% Many (1)
#94a	0% Yes 50% Many (1) 50% Needs Impv (1)	0% Yes 33% Many (2) 67% Needs Impv (4)

As evidenced above, the different components of each person's ISP are evaluated. Based on that analysis, an overview of the adequacy of ISP content as well as implementation and effectiveness of the ISP can be determined. There are multiple questions in the 2018 IQR protocol that probe these items, and the level of intensity of services that individuals in the review receive.

- Question #72: Does my ISP contain current and accurate information?
- Question #133: Has the IDT process been adequate for assessing, planning, implementing and monitoring of services for this person?
- Question #92/173: Overall, is the ISP adequate to meet the person's needs?
- Question #170: Does the person receive services and supports recommended in the ISP?
- Question #94b: Are current services adequate to meet the person's needs?
- Question #174: Is the total program of the level of intensity adequate to meet this person's needs?

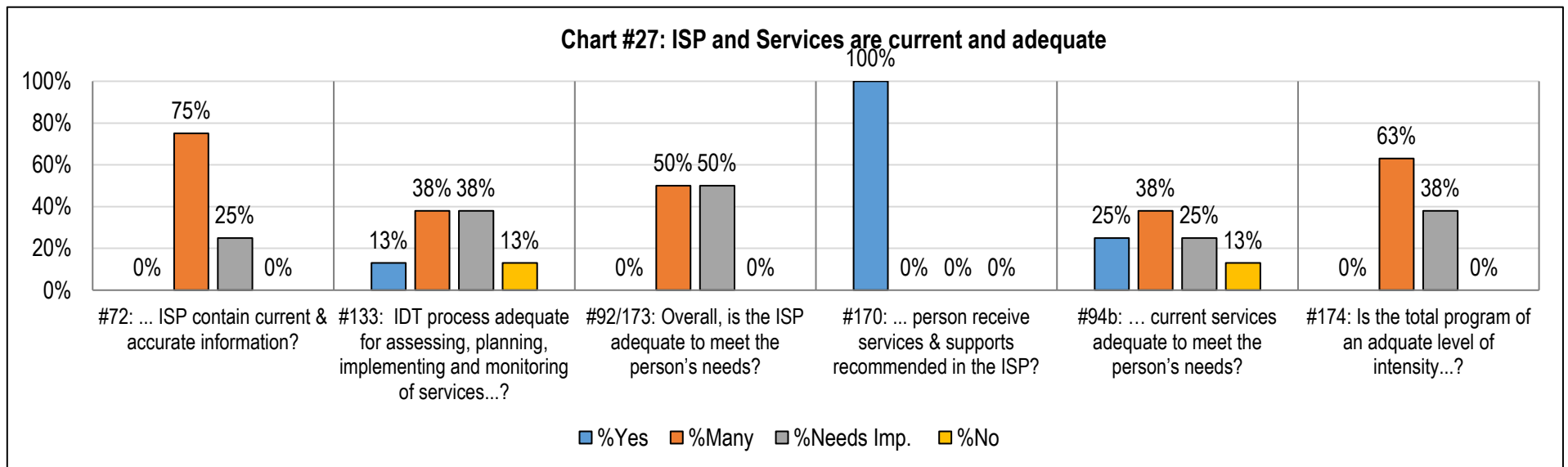


Chart #28: ISP Content and Adequacy Scores, by Residential Agency

Area	Residential Agency (# in sample):					
	AWS/ Benchmark (2)	CDD (1)	Community Options (2)	Ensuenos (ELADC) (1)	Family Options (1)	NNMQC (1)
#72	0% Yes 100% Needs Impv (2)	0% Yes 100% Many (1)	0% Yes 100% Many (2)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)
#133	0% Yes	0% Yes	0% Yes	0% Yes	100% Yes (1)	0% Yes

Residential Agency (# in sample):						
Area	AWS/ Benchmark (2)	CDD (1)	Community Options (2)	Ensuenos (ELADC) (1)	Family Options (1)	NNMQC (1)
	50% Needs Impv (1) 50% No (1)	100% Needs Impv (1)	50% Many (1) 50% Needs Impv (1)	100% Many (1)		100% Many (1)
#92/173	0% Yes 100% Needs Impv (2)	0% Yes 100% Many (1)	0% Yes 100% Needs Impv (2)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)
#170	100% Yes (2)	100% Yes (1)	100% Yes (2)	100% Yes (1)	100% Yes (1)	100% Yes (1)
#94b	0% Yes 50% Many (1) 50% Needs Impv (1)	0% Yes 100% Many (1)	0% Yes 50% Many (1) 50% Needs Impv (1)	0% Yes 100% Many (1)	100% Yes (1)	100% Yes (1)
#174	0% Yes 100% Needs Impv (2)	0% Yes 100% Many (1)	0% Yes 50% Many (1) 50% Needs Impv (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)

Chart #29: ISP Content and Adequacy Scores, by Case Management Agency

Question	Case Management Agency (# in sample):	
	Unidas (2)	Visions (6)
#72	0% Yes 100% Many (2)	0% Yes 67% Many (4) 33% Needs Impv (2)
#133	50% Yes (1) 50% Many (1)	0% Yes 33% Many (2) 50% Needs Impv (3) 17% No (1)
#92/173	0% Yes 50% Many (1) 50% Needs Impv (1)	0% Yes 50% Many (3) 50% Needs Impv (3)
#170	100% Yes (2)	100% Yes (6)
#94b	50% Yes 50% Needs Impv (1)	17% Yes (1) 50% Many (3) 17% Needs Impv (1) 17% No (1)
#174	0% Yes 100% Many (2)	0% Yes 50% Many (3) 50% Needs Impv (3)

G. Case Management

Case Management services are intended to be person-centered and are key to enabling people to pursue their desired life outcomes while gaining as much independence as possible along with access to needed services and supports. The region scored well on a couple of the case management questions. The charts below detail the related findings.

Question #24: Does the case manager “know” the person?

Question #25: Does the case manager understand his/her role/job?

Question #26: Did the case manager receive training on the topics needed to assist him/her in meeting the needs of this person?

Question #27: Is the case manager available to the person?

Question #28: Was the case manager able to describe the person’s health related needs?

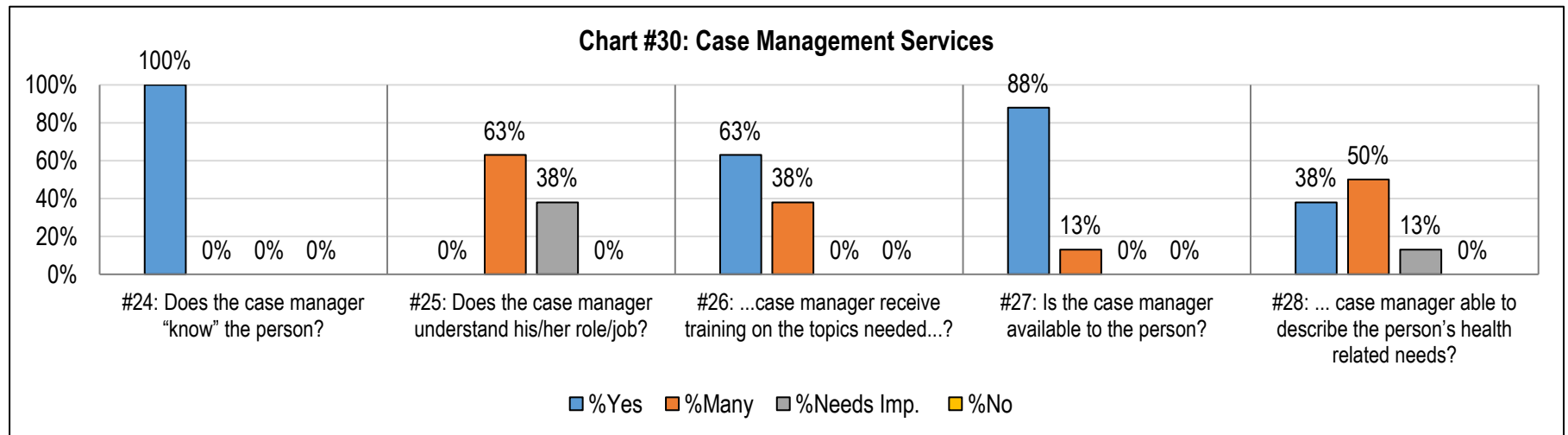


Chart #31: Case Management Scores, by Case Management Agency

Question	Case Management Agency (# in sample):	
	Unidas (2)	Visions (6)
Q# 24	100% Yes (2)	100% Yes (6)
Q# 25	0% No 100% Many (2)	0% Yes 50% Many (3) 50% Needs Impv (3)
Q# 26	100% Yes (2)	50% Yes (3)

Question	Case Management Agency (# in sample):	
	Unidas (2)	Visions (6)
		50% Many (3)
Q# 27	100% Yes (2)	83% Yes (5) 17% Many (1)
Q# 28	100% Yes (2)	17% Yes (1) 67% Many (4) 17% Needs Impv (1)

Question #29: Does the case manager have an appropriate expectation of growth for this person?

Question #30: Does the case management record contain documentation that the case manager is monitoring and tracking the delivery of services as outlined in the ISP?

Question #31: Does the case manager provide case management services at the level needed by this person?

Question #32: Does the case manager receive the type of level of support needed to do his/her job?

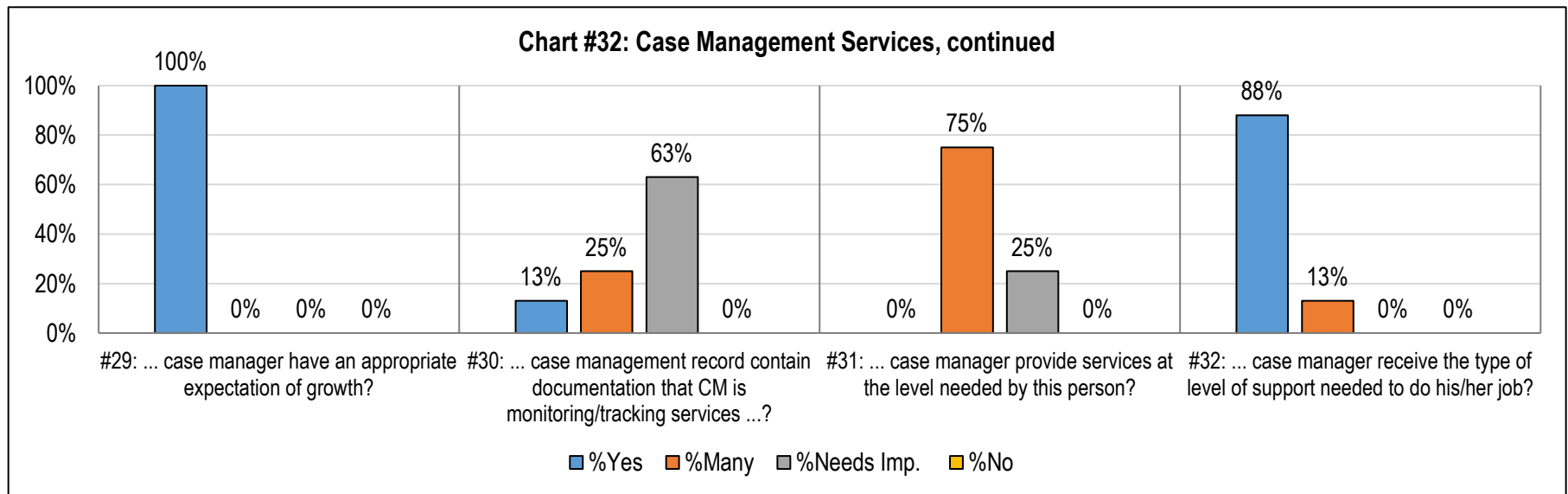


Chart #33: Case Management Scores, by Case Management Agency

Question	Case Management Agency (# in sample):	
	Unidas (2)	Visions (6)
Q# 29	100% Yes (2)	100% Yes (6)
Q# 30	0% Yes 100% Many (2)	17% Yes (1) 83% Yes (5)
Q# 31	0% Yes 100% Many (2)	0% Yes 67% Many (4) 33% Needs Impv (2)
Q# 32	100% Yes (2)	83% Yes (5) 17% Many (1)

H. Supported Employment

Access to competitive integrated employment enables an individual to engage in community life, increase personal resources, improve self-sufficiency and contribute back to the community. The 2018 Waiver Standards emphasize that, “employment should be the first consideration. If someone does not choose employment, the decision should be based on informed choice”. Making an informed choice about employment is an individualized process. All people have unique histories and backgrounds, which means that some people may have limited experiences and will require more information to make a decision about employment while others may have a rich and varied employment history and can make an informed choice based on that history.

There are multiple components that make up the process of ensuring Informed Choice. These are probed as part of the Individual Quality Review, and detailed in the tables below. The questions in this section have been updated for 2018 IQR Protocol and reflect questions negotiated with the Parties. Provided in the charts below is the information regarding the participation of the Jackson Class Members in the Northeast 2018 IQR in Supported Employment related areas.

1. Components of Informed Choice: Assessment

Question #134. Does (Name) have a current Person Centered Assessment?

Question #135. Did this assessment address vocational interests, abilities and needs?

Question #136. Did the individual participate personally in the Person Centered Assessment?

Question #137. Did the Guardian participate in the Person Centered Assessment?

Question #138. Is the individual engaged in the Informed Choice Project?

Chart #34: Supported Employment

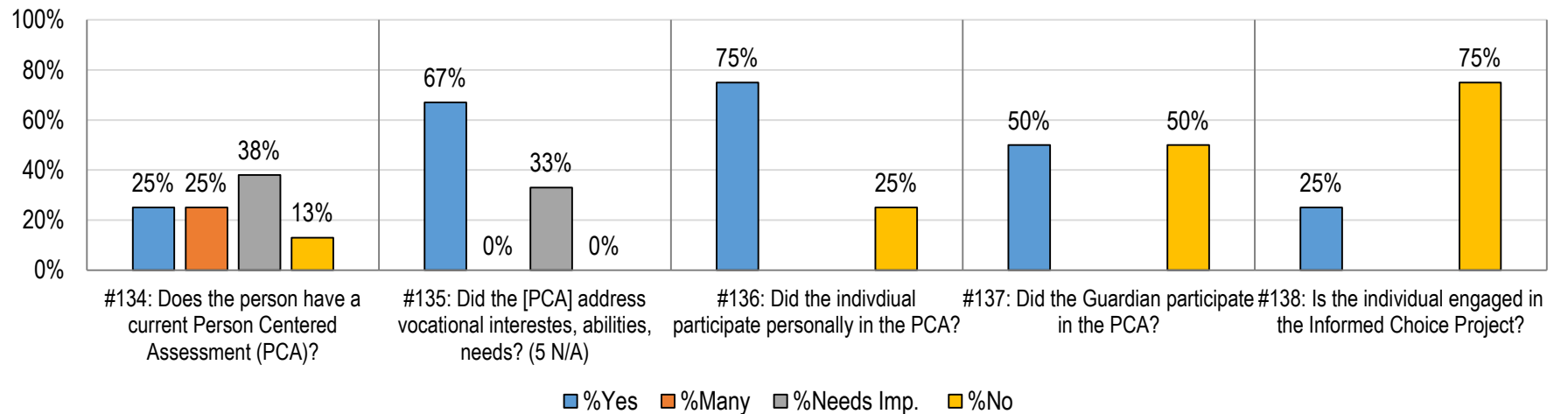


Chart #35: Supported Employment Scores by Provider Agency

Area	Residential Agency (# in sample):					
	AWS/ Benchmark (2)	CDD (1)	Community Options (2)	Ensuenos (ELADC) (1)	Family Options (1)	NNMQC (1)
#134	50% Yes (1) 50% Many (1)	0% Yes 100% Needs Impv (1)	0% Yes 50% Many (1) 50% Needs Impv (1)	100% Yes (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% No (1)
#135	(2 N/A)	(1 N/A)	100% Yes (1) (1 N/A)	100% Yes (1)	0% Yes 100% Needs Impv (1)	(1 N/A)
#136	100% Yes (2)	0% Yes 100% No (1)	100% Yes (2)	100% Yes (1)	100% Yes (1)	0% Yes 100% No (1)
#137	50% Yes (1) 50% No (1)	0% Yes 100% No (1)	50% Yes (1) 50% No (1)	100% Yes (1)	100% Yes (1)	0% Yes 100% No (1)
#138	0% Yes 100% No (2)	0% Yes 100% No (1)	50% Yes (1) 50% No (1)	100% Yes (1)	0% Yes 100% No (1)	0% Yes 100% No (1)

Chart #36: Supported Employment Scores by Case Management Agency

Question	Case Management Agency (# in sample):	
	Unidas (2)	Visions (6)
#134	0% Yes 50% Many (1) 50% Needs Impv (1)	33% Yes (2) 17% Many (1) 33% Needs Impv (2) 17% No (1)
#135	50% Yes (1) 50% Needs Impv (1)	100% Yes (1) (5 N/A)
#136	100% Yes (2)	67% Yes (4) 33% No (2)
#137	100% Yes (2)	33% Yes (2) 67% No (4)
#138	50% Yes (1) 50% No (1)	17% Yes (1) 83% No (5)

2. Components of Informed Choice: Information and Experience

Question #139. Has the individual been offered the opportunity to participate in work or job exploration including volunteer work and/or trial work opportunities?

Question #140. If #139 is Yes, are these new experiences clearly documented in the ISP Work, Education and/or Volunteer History section?

Question #141. If #139 is No, is the individual trying new discovery experiences in the community to determine interests, abilities, skills and needs?

Question #142. Has the Guardian had the opportunity to gain information on how the individual responded during job exploration activities such as volunteering and/or trial work experiences?

Question #143. Has the individual received information regarding the range of employment options available to him/her?

Question #144. Has the Guardian received information regarding the range of employment options available for the individual?

Chart #37: Supported Employment, continued

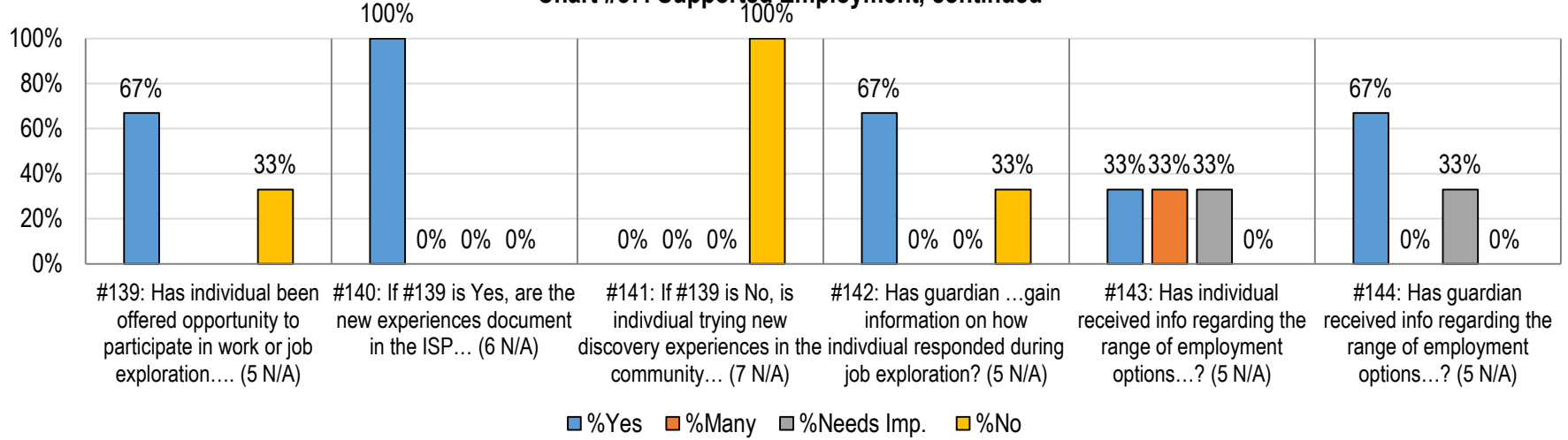


Chart #38: Supported Employment Scores by Provider Agency

Area	Residential Agency (# in sample):					
	AWS/ Benchmark (2)	CDD (1)	Community Options (2)	Ensuenos (ELADC) (1)	Family Options (1)	NNMQC (1)
#139	(2 N/A)	(1 N/A)	100% Yes (1) (1 N/A)	100% Yes (1)	0% Yes 100% No (1)	(1 N/A)
#140	(2 N/A)	(1 N/A)	100% Yes (1) (1 N/A)	100% Yes (1)	(1 N/A)	(1 N/A)
#141	(2 N/A)	(1 N/A)	(2 N/A)	(1 N/A)	0% Yes 100% No (1)	(1 N/A)
#142	(2 N/A)	(1 N/A)	100% Yes (1) (1 N/A)	100% Yes (1)	0% Yes 100% No (1)	(1 N/A)
#143	(2 N/A)	(1 N/A)	0% Yes 100% Many (1) (1 N/A)	100% Yes (1)	0% Yes 100% Needs Impv (1)	(1 N/A)
#144	(2 N/A)	(1 N/A)	100% Yes (1) (1 N/A)	100% Yes (1)	0% Yes 100% Needs Impv (1)	(1 N/A)

Chart #39: Supported Employment Scores by Case Management Agency

Question	Case Management Agency (# in sample):	
	Unidas (2)	Visions (6)
#139	50% Yes (1) 50% No (1)	100% Yes (1) (5 N/A)
#140	100% Yes (1) (1 N/A)	100% Yes (1) (5 N/A)
#141	0% Yes 100% No (1) (1 N/A)	(6 N/A)
#142	50% Yes (1) 50% No (1)	100% Yes (1) (5 N/A)
#143	0% Yes 50% Many (1) 50% Needs Impv (1)	100% Yes (1) (5 N/A)
#144	50% Yes (1) 50% Needs Impv (1)	100% Yes (1) (5 N/A)

3. Components of Informed Choice: Identification of Employment Barriers/Issues.

Question #145. If there are barriers to employment, has the Team, including the individual, addressed how to overcome those barriers to employment and integrating clinical info, AT, & therapies as necessary...?

Question #146. If there are barriers to employment, has the Team addressed with the Guardian how to overcome those barriers to employment and integrating clinical info, AT, & therapies as necessary...?

Question #147. Has the individual participated in work or volunteer activities during the past year?

Question #148. Has the individual identified what type of work or volunteer activities he/she would like to do?

Question #149. Does the Guardian support him/her working?

Chart #40: Supported Employment, continued

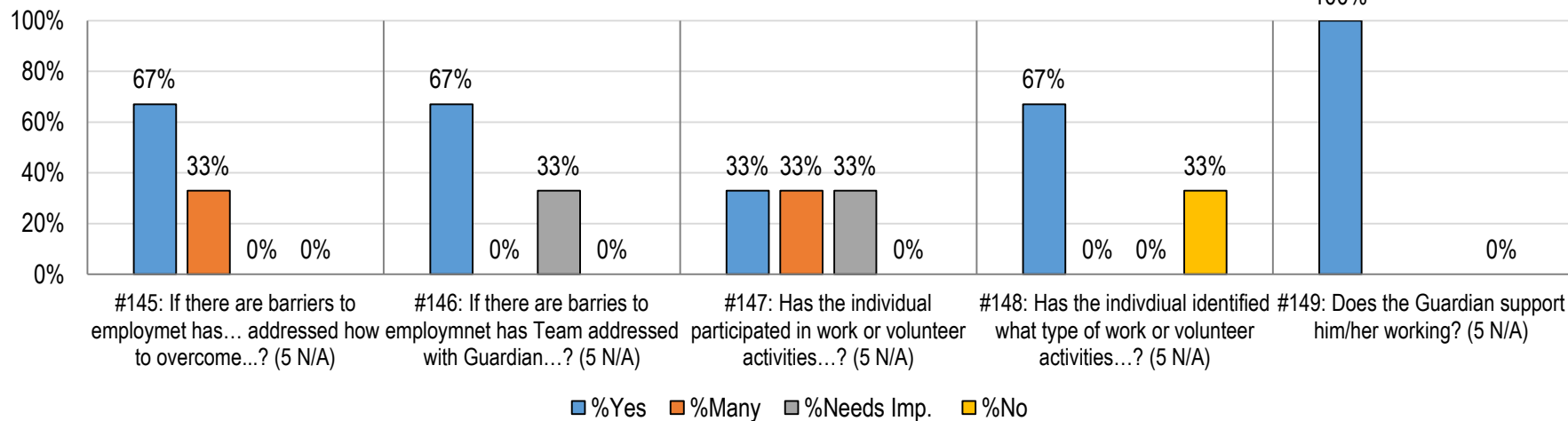


Chart #41: Supported Employment Scores by Provider Agency

Area	Residential Agency (# in sample):					
	AWS/ Benchmark (2)	CDD (1)	Community Options (2)	Ensuenos (ELADC) (1)	Family Options (1)	NNMQC (1)
#145	(2 N/A)	(1 N/A)	50% Yes (1 N/A)	100% Yes (1)	0% Yes 100% Many (1)	(1 N/A)
#146	(2 N/A)	(1 N/A)	50% Yes (1 N/A)	100% Yes (1)	0% Yes 100% Needs Impv (1)	(1 N/A)
#147	(2 N/A)	(1 N/A)	0% Yes 100% Needs Impv (1) (1 N/A)	100% Yes (1)	0% Yes 100% Many (1)	(1 N/A)
#148	(2 N/A)	(1 N/A)	50% Yes (1 N/A)	100% Yes (1)	0% Yes 100% No (1)	(1 N/A)
#149	(2 N/A)	(1 N/A)	50% Yes (1 N/A)	100% Yes (1)	100% Yes (1)	(1 N/A)

Chart #42: Supported Employment Scores by Case Management Agency

Question	Case Management Agency (# in sample):	
	Unidas (2)	Visions (6)
#145	50% Yes (1) 50% Many (1)	100% Yes (1) (5 N/A)
#146	50% Yes (1) 50% Needs Impv (1)	100% Yes (1) (5 N/A)
#147	0% Yes 50% Many (1) 50% Needs Impv (1)	100% Yes (1) (5 N/A)
#148	50% Yes (1) 50% No (1)	100% Yes (1) (5 N/A)
#149	100% Yes (2)	100% Yes (1) (5 N/A)

4. JCMs Involved in Supported Employment

Question #150. Is (Name) involved in the DVR Outreach Project?

Question #151. Is the individual engaged in Supported Employment?

Question #152. Is the individual working in accordance with the following?

Question #153. Does the person have a Career Development Plan?

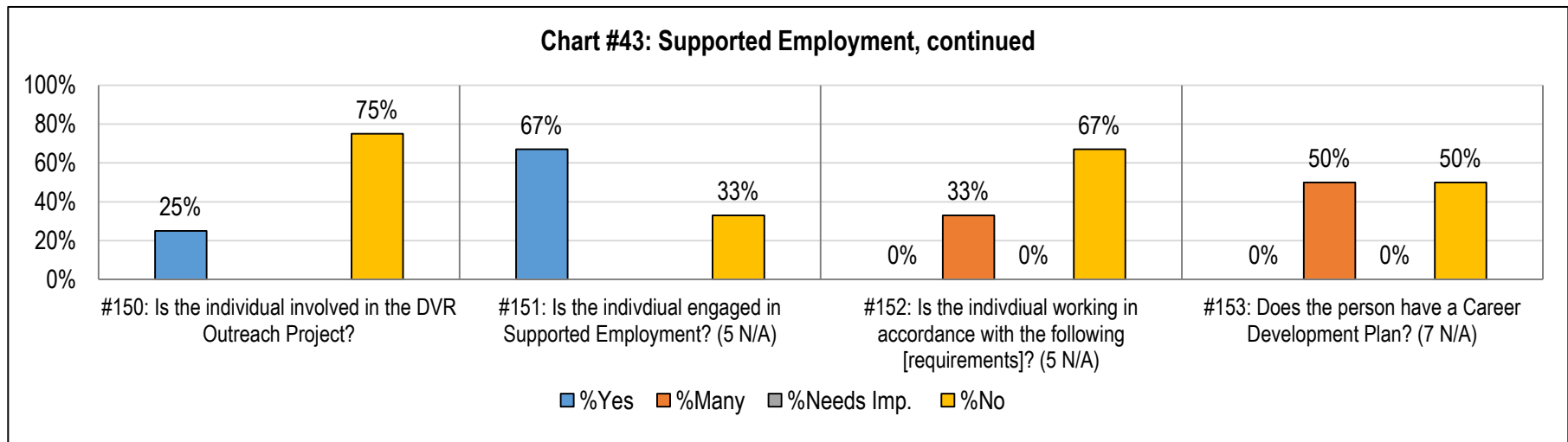


Chart #44: Supported Employment Scores by Provider Agency

Residential Agency (# in sample):						
Area	AWS/ Benchmark (2)	CDD (1)	Community Options (2)	Ensuenos (ELADC) (1)	Family Options (1)	NNMQC (1)
#150	0% Yes 100% No (2)	0% Yes 100% No (1)	50% Yes (1) 50% No (1)	100% Yes (1)	0% Yes 100% No (1)	0% Yes 100% No (1)
#151	(2 N/A)	(1 N/A)	100% Yes (1) (1 N/A)	100% Yes (1)	0% Yes 100% No (1)	(1 N/A)
#152	(2 N/A)	(1 N/A)	0% Yes 100% No (1) (1 N/A)	0% Yes 100% Many (1)	0% Yes 100% No (1)	(1 N/A)
#153	(2 N/A)	(1 N/A)	0% Yes 100% No (1) (1 N/A)	0% Yes 100% Many (1)	(1 N/A)	(1 N/A)

Chart #45: Supported Employment Scores by Case Management Agency

Case Management Agency (# in sample):		
Question	Unidas (2)	Visions (6)
#150	50% Yes (1) 50% No (1)	17% Yes (1) 53% No (5)
#151	50% Yes (1) 50% No (1)	100% Yes (1) (5 N/A)
#152	0% Yes 100% No (2)	0% Yes 100% Many (1) (5 N/A)
#153	0% Yes 100% No (1) (1 N/A)	0% Yes 100% Many (1) (5 N/A)

I. IQR Scored Protocol Questions

Below are all of the questions in the protocol and the scores of the Northwest Region Review. The questions that are highlighted below are also included in the data above.

Question	2018 (sample=10)
CASE MANAGEMENT	
24. Does the case manager "know" the person? CPRQ26; '17IQR#8c	100% Yes (8)
25. Does the case manager understand his/her role/job? CPRQ27 '17IQR#16	0% Yes 63% Many (5) 38% Needs Impv (3)
26. Did the case manager receive training on the topics needed to assist him/her in meeting the needs of this person? CPRQ28	63% Yes (5) 38% Many (3)
27. Is the case manager available to the person? CPRQ29; '17IQR#16a	88% Yes (7) 13% Many (1)
28. Was the case manager able to describe the person's health related needs? CPRQ30	38% Yes (3) 50% Many (4) 13% Needs Impv (1)
29. Does the case manager have an appropriate expectation of growth for this person? CPRQ31	100% Yes (8)
30. Does the case management record contain documentation that the case manager is monitoring and tracking the delivery of services as outlined in the ISP? CPRQ32; '17IQR#16b	13% Yes (1) 25% Many (2) 63% Needs Impv (5)
31. Does the case manager provide case management services at the level needed by this person? CPRQ33; '17IQR#16c	0% Yes 75% Many (6) 25% Needs Impv (2)
32. Does the case manager receive the type and level of support needed to do his/her job? CPRQ34	88% Yes (7) 13% Many (1)
EMPLOYMENT AND DAY	
33. Does the direct services staff "know" the person? CPRQ35; '17IQR#8a	86% Yes (6) 14% Many (1)

Question	2018 (sample=10)
34. Does the direct service staff have input into the person's ISP? CPRQ36	43% Yes (3) 43% Many (3) 14% No (1)
35. Did the direct service staff receive training on implementing this person's ISP? CPRQ37	71% Yes (5) 29% Many (2)
36. Was the direct service staff able to describe this person's health-related needs? CPRQ38	29% Yes (2) 71% Many (5)
37. Was the direct service staff able to describe his/her responsibilities in providing daily care/supports to the person? CPRQ39	57% Yes (4) 43% Many (3)
37a. Was the direct service staff able to provide specific information regarding the person's daily activities? CPRQ39a	86% Yes (6) 14% Many (1)
37b. Can the direct service staff describe his/her responsibilities in implementing this person's ISP, including outcomes, action plans, and WDSIs? CPRQ39b	57% Yes (4) 43% Many (3)
38. Did the direct service staff have training in the ISP process? CPRQ40	71% Yes (5) 14% Many (1) 14% No (1)
39. Did the direct service staff have training on the provider's complaint process and how to report abuse, neglect and exploitation? CPRQ41	100% Yes (7)
40. Does the direct service staff have an appropriate expectation of growth for this person? CPRQ42	86% Yes (6) 14% No (1)
41. Does the person's day/work environment generally clean, free of safety hazards and conducive to the work/activity intended? CPRQ43	86% Yes (6) 14% Many (1)
RESIDENTIAL	
42. Does the residential direct services staff "know" the person? CPRQ44; '17IQR#8b	100% Yes (8)
43. Does the direct service staff have input into the person's ISP? CPRQ45	63% Yes (5) 25% Many (2) 13% Needs Impv (1)
44. Did the direct service staff receive training on implementing this person's ISP? CPRQ46	88% Yes (7) 13% Many (1)
45. Is the residence safe for individuals (void of hazards)? CPRQ47	88% Yes (7) 13% Many (1)
46. Was the residential direct service staff able to describe this person's health-related needs? CPRQ48	50% Yes (4) 50% Many (4)

Question	2018 (sample=10)
47. Was the direct service staff able to describe his/her responsibilities in providing daily care/supports to the person? CPRQ49	63% Yes (5) 38% Many (3)
47a. Was the direct service staff able to provide specific information regarding the person's daily activities? CPRQ49a	100% Yes (8)
47b. Can the direct service staff describe his/her responsibilities in implementing this person's ISP, including outcomes, action plans, and WDSIs? CPRQ49b	63% Yes (5) 38% Many (3)
48. Did the residential direct service staff have training in the ISP process? CPRQ50	50% Yes (4) 50% Many (4)
49. Did the direct service staff have training on the provider's complaint process and how to report abuse, neglect and exploitation? CPRQ51	100% Yes (8)
50. Does the residential direct service staff have an appropriate expectation of growth for this person? CPRQ52	88% Yes (7) 13% Needs Impv (1)
51. Does the person's residential environment offer a minimal level of quality of life? CPRQ53	88% Yes (7) 13% Needs Impv (1)
HEALTH	
52. Overall, were the team members interviewed able to describe the person's health-related needs? CPRQ54; '17IQR#21b	13% Yes (1) 88% Many (7)
53. Is there evidence that the IDT discussed the person's health related issues? CPRQ55; '17IQR#21	13% Yes (1) 63% Many (5) 25% Needs Impv (2)
54. Was the eChat updated timely? '17IQR#18g	25% Yes (2) 38% Many (3) 38% Needs Impv (3)
55. Are all of the individual's needed medical treatments timely received? 17IQR#19	13% Yes (1) 75% Many (6) 13% Needs Impv (1)
56. Does the individual receive routine/scheduled medical treatment? 17IQR#19a	25% Yes (2) 50% Many (4) 25% Needs Impv (2)
57. Does the individual receive medication as prescribed? 17IQR#19e	13% Yes (1) 50% Many (4) 38% Needs Impv (3)
58. Does my nurse provide oversight of health needs (i.e. weight records, vitals, lab reports, PRN medication use, seizure records) in order to ensure accuracy, identify and respond to new issues? '17IQR#20b	0% Yes 13% Many (1)

Question	2018 (sample=10)
	88% Needs Impv (7)
59. Are nursing services provided as needed by the individual? 17IQR#20	0% Yes 75% Many (6) 25% Needs Impv (2)
60. Is the CARMP is accurate? '17IQR#21f	14% Yes (1) 71% Many (5) 14% Needs Impv (1) (1 N/A)
61. Is the CARMP consistently implemented as intended?	71% Yes (5) 14% Many (1) 14% Needs Impv (1) (1 N/A)
62. Are the person's health supports/needs being adequately addressed? CPRQ56; '17IQR#19	0% Yes 63% Many (5) 38% Needs Impv (3)
ASSESSMENTS	
63. Did the team consider what assessments the person needs and would be relevant to the team's planning efforts? CPRQ57	0% Yes 88% Many (7) 13% Needs Impv (1)
64. Has the individual received all age and gender appropriate health screenings, in accordance with national best practice and/or as recommended by his/her PCP or other health care professionals? '17IQR#18a	13% Yes (1) 75% Many (6) 13% Needs Impv (1)
65. Did the team arrange for and obtain the needed, relevant assessments? CPRQ58; '17IQR#18	13% Yes (1) 75% Many (6) 13% Needs Impv (1)
66. Are the assessments adequate for planning? CPRQ59; '17IQR#4f	0% Yes 63% Many (5) 38% Needs Impv (3)
67. Were the recommendations from assessments used in planning? CPRQ60; '17IQR#5	0% Yes 63% Many (5) 25% Needs Impv (2) 13% No (1)
68. For medical, clinical or health related rec's, has a DCF been completed if the individual and/or their guardian/health care decision maker have decided not to follow all or part of an order, rec, or suggestion? '17IQR#5c	17% Yes (1) 50% Many (3) 33% Needs Impv (2)

Question	2018 (sample=10)
	(2 N/A)
ADEQUACY OF PLANNING AND ADEQUACY OF SERVICES	
69. Is there a document called an Individual Service Plan (ISP) that was developed within the past year? CPRQ61; '17IQR#9	100% Yes (8)
70. Was the ISP developed by an appropriately constituted IDT? CPRQ62; '17IQR#3	25% Yes (2) 50% Many (4) 13% Needs Impv (1) 13% No (1)
71. For any team members not physically present at the IDT meeting, is there evidence of their participation in the development of the ISP? CPRQ63; '17IQR#3d	0% Yes 67% Many (4) 33% Needs Impv (2) (2 N/A)
72. Does my ISP contain current and accurate information? '17IQR#6	0% Yes 75% Many (6) 25% Needs Impv (2)
73. Overall, does the long term vision show expectations for growth and skill building? CPRQ64; '17IQR#7b	50% Yes (4) 25% Many (2) 13% Needs Impv (1) 13% No (1)
74. Overall, does the ISP give adequate guidance to achieving the person's long-term vision? CPRQ65; '17IQR#7c	75% Yes (6) 13% Many (1) 13% Needs Impv (1)
75. Is measurable data kept which verifies the consistent implementation of each of the action steps? '17IQR#12a	0% Yes 38% Many (3) 50% Needs Impv (4) 13% No (1)
76. Does the data kept identify what the person does so a determination regarding progress/lack of progress? '17IQR#12b	0% Yes 25% Many (2) 25% Needs Impv (2) 50% No (4)
77. Is each action step in the ISP implemented at a frequency that enables the person to learn new skills? '17IQR#12c	0% Yes 25% Many (2) 25% Needs Impv (2) 50% No (4)
78. If the person is not successful in achieving actions steps, has the team tried to determine why, and change their approach if needed? 17IQR#12d	14% Yes (1) 14% Many (1)

Question	2018 (sample=10)
	43% Needs Impv (3) 29% No (2) (1 N/A)
79. If the person achieves action steps, does the team move to the next in the progression of steps or develops a new one? '17IQR#12e	14% Yes (1) 29% Needs Impv (2) 57% No (4) (1 N/A)
80. Has the person made measurable progress on actions steps during this past year?'17IQR#13b	0% Yes 38% Many (3) 25% Needs Impv (2) 38% No (3)
81. Overall, do the outcomes in the ISP include criteria by which the team can determine when the outcome(s) have been achieved? CPRQ67; '17IQR#7e	50% Yes (4) 13% Many (1) 25% Needs Impv (2) 13% No (1)
82. Overall, are the ISP outcomes related to achieving the person's long-term vision? CPRQ68; '17IQR#7d	100% Yes (8)
83. Overall, do the ISP outcomes address the person's major needs? CPRQ69; '17IQR#7g	50% Yes (4) 25% Many (2) 13% Needs Impv (1) 13% No (1)
84. Overall, are the Teaching and Support Strategies sufficient to ensure consistent implementation of the services planned? CPRQ71; '17IQR#7i	13% Yes (1) 13% Many (1) 38% Needs Impv (3) 38% No (3)
85. Overall, are the recommendations and/or objectives/strategies of ancillary providers integrated into the ISP? CPRQ72; '17IQR#7m	13% Yes (1) 13% Many (1) 75% Needs Impv (6)
86. Has the person made measurable progress in therapy this year? '17IQR#13a	13% Yes (1) 13% Many (1) 75% Needs Impv (6)
87. If needed, does the ISP contain a specific Medical Emergency Response Plan (MERP)? CPRQ73b '17IQR#20c	25% Yes (2) 38% Many (3) 38% Needs Impv (3)
88. Does the ISP contain information regarding primary health (medical) care? CPRQ74	75% Yes (6) 25% Many (2)

Question	2018 (sample=10)
88a. Does the ISP face sheet contain contact information for the PCP? CPRQ74a	88% Yes (7) 13% No (1)
88b. Is the Healthcare coordinator's name and contact information listed in the ISP? CPRQ74b	88% Yes (7) 13% Many (1)
89. Does the ISP reflect how the person will obtain prescribed medications? CPRQ76	88% Yes (7) 13% Many (1)
90. Does the ISP reflect how the person will get to work/day activities, shopping, and social activities? CPRQ75	88% Yes (7) 13% No (1)
91. Does the ISP contain a list of adaptive equipment needed and who will provide it? CPRQ77; '17IQR#25a	38% Yes (3) 50% Many (4) 13% No (1)
92. Overall, is the ISP adequate to meet the person's needs? CPRQ78; '17IQR#7	13% Yes (1) 38% Many (3) 50% Needs Impv (4)
93. Is the ISP being implemented? (If 92 is "3") CPRQ79 '17IQR#12	(8 N/A)
94a. Is the ISP being implemented? (If 92 is "0", "1", or "2") CPRQ80a '17IQR#12	0% Yes 38% Many (3) 63% Needs Impv (5)
94b. Are current services adequate to meet the person's needs? CPRQ80b '17IQR#11	25% Yes (2) 38% Many (3) 25% Needs Impv (2) 13% No (1)
95. Overall, was the direct service staff trained on the implementation of this person's ISP? CPRQ81	75% Yes (6) 25% Many (2)
96. Overall, were the direct service staff able to describe their responsibilities in providing daily care/supports to the person? CPRQ82;	50% Yes (4) 50% Many (4)
97. Overall, do the progress notes or other documentation in the record reflect the status of the outcomes and services of the key life areas stated in the ISP? CPRQ83	13% Yes (1) 38% Many (3) 38% Needs Impv (3) 13% No (1)
EXPECTATION OF GROWTH AND QUALITY OF LIFE, SATISFACTION	
98. Based on all of the evidence, has the person achieved progress in the past year? CPRQ84; '17IQR#13	0% Yes 50% Many (4)

Question	2018 (sample=10)
	50% Needs Impv (4)
99. Overall, does the IDT have an appropriate expectation of growth for this person? CPRQ85; '17IQR#8d	75% Yes (6) 25% Many (2)
100. Was the person provided the assistance and support needed to participate meaningfully in the planning process? CPRQ86; '17IQR#1b	38% Yes (3) 38% Many (3) 25% Needs Impv (2)
101. Is the person offered a range of opportunities for participation in each life area? CPRQ87	50% Yes (4) 38% Many (3) 13% Needs Impv (1)
102. Does the person have the opportunity to make informed choices? CPRQ88; '17IQR#30	50% Yes (2) 25% Many (1) 25% Needs Impv (1) (4 CND)
102a. About where and with whom to live? CPRQ89; '17IQR#23c	(8 CND)
102b. About where and with whom to work/spend his/her day? CPRQ90; '17IQR#23d	100% Yes (3) (5 CND)
102c. About where and with whom to socialize/spend leisure time? CPRQ91	67% Yes (2) 33% Many (1) (5 CND)
103. Does the evidence support that providers do not prevent the person from pursuing relationships and are respecting the rights of this person? CPRQ92; '17IQR#31f	88% Yes (7) 13% Needs Impv (1)
104. Overall, were the direct service staff interviewed trained on the provider's complaint process? CPRQ93*	88% Yes (7) 13% Many (1)
105. Overall, were all team members interviewed trained or knowledgeable on how to report abuse, neglect and exploitation? CPR 93*; '17IQR#35a	88% Yes (7) 13% Many (1)
106. Does this person and/or guardian have access to the complaint processes/procedures? CPRQ94	50% Yes (4) 50% No (4)
107. Does the individual have restrictions that should be reviewed by a Human Rights Committee? '17IQR#34h	100% Yes (3) (5 CND)
108. If there are restrictions that should be reviewed by HRC, have the restrictions been reviewed (quarterly) and approved (annually) by the HRC? If no, describe why. '17IQR#34i	50% Yes (2) 50% No (2) (4 N/A)
109. If there are restrictions that should be reviewed by HRC, is a plan to enable the individual to regain his/her rights and reduce or eliminate these restrictions? '17IQR#34j	50% Yes (2) 50% No (2)

Question	2018 (sample=10)
	(4 N/A)
110. Is the person protected from abuse, neglect and exploitation? '17IQR#35	63% Yes (5) 38% Needs Impv (3)
111. Have all incidents of suspected abuse, neglect and exploitation been reported and investigated? '17IQR#35b	40% Yes (2) 60% Many (3) (3 N/A)
112. Is the individual safe? '17IQR#24	75% Yes (6) 25% Many (2)
113. What is the level of participation of the legal guardian in this person's life and service planning? CPRQ 97; '17IQR#15a	38% Yes (3) 38% Many (3) 25% Needs Impv (2)
114. If the person is retired, does he/she have opportunities to engage in activities of interest during the day? CPRQ 100; '17IQR#29b	33% Yes (2) 50% Many (3) 17% Needs Impv (1) (2 N/A)
115. Does the person have daily choices/appropriate autonomy over his/her life? CPRQ101 '17IQR#30	75% Yes (6) 13% Many (1) 13% Needs Impv (1)
116. Have the person's cultural preferences been accommodated? CPRQ102; '17IQR#31e	88% Yes (7) 13% Needs Impv (1)
117. Is the person treated with dignity and respect? CPRQ103; '17IQR#34c	13% Yes (1) 38% Many (3) 50% Needs Impv (4)
118. Does the person have food and drink available according to their specific nutritional needs and recommendations? CPRQ108; '17IQR#23e	88% Yes (7) 13% Many (1)
119. Does the person have sufficient personal money? CPRQ110 '17IQR#34f	88% Yes (7) 13% No (1)
120. Does the person get along with their day program/employment provider staff? CPRQ111	100% Yes (7) (1 not scored)
121. Does the person get along with their residential provider staff? CPRQ112	100% Yes (8)
TEAM PROCESS	
122. Are the individual members of the IDT following up on their responsibilities? CPRQ 114; '17IQR#10	13% Yes (1) 63% Many (5)

Question	2018 (sample=10)
	25% Needs Impv (2)
123. If there is evidence of situations in which the team failed to reach a consensus on the person's service and support needs, has the team made efforts to build consensus? CPRQ 115; '17IQR#17c	50% Yes (2) 25% Needs Impv (1) 25% No (1) (4 N/A)
124. Do records or facts exist to indicate that the team convened meetings as needed due to changed circumstances and/or needs? CPRQ 116; '17IQR#17d	13% Yes (1) 75% Many (6) 13% Needs Impv (1)
125. Is there adequate communication among team members between meetings to ensure the person's program can be/is being implemented? CPRQ117	50% Yes (4) 25% Many (2) 25% Needs Impv (2)
126. Do you recommend Dispute Resolution for this IDT? CPRQ118	13% Yes (1) 88% No (7)
127. Is there evidence or documentation of physical regression in the last year? CPRQ119 '17IQR#14a	38% Yes (3) 63% No (5)
128. Is there evidence or documentation of behavioral or functional regression in the last year? CPRQ120; '17IQR14c	25% Yes (2) 75% No (6)
129. If #127 OR #128 is scored "Yes", is the IDT adequately addressing the regression? CPRQ121;	75% Yes (3) 25% No (1) (4 N/A)
130. Has the person changed residential/day services in the last year? CPRQ122	13% Yes (1) 88% No (7)
131. If #130 is Yes, was the change Planned by the IDT? CPRQ122a	0% Yes 100% No (1) (7 N/A)
132. If #130 is Yes, did the change meet the person's needs and/or preferences? CPRQ122b	100% Yes (1) (7 N/A)
133. Has the IDT process been adequate for assessing, planning, implementing and monitoring of services for this person? CPRQ123; '17IQR#7n	13% Yes (1) 38% Many (3) 38% Needs Impv (3) 13% No (1)
SUPPORTED EMPLOYMENT	
134. Does (Name) have a current Person Centered Assessment?	25% Yes (2) 25% Many (2)

Question	2018 (sample=10)
	38% Needs Impv (3) 13% No (1)
135. Did this assessment address vocational interests, abilities and needs? CPRQ126; '17IQR#26a	67% Yes (2) 33% Needs Impv (1) (5 N/A)
136. Did the individual participate personally in the Person Centered Assessment?	75% Yes (6) 25% No (2)
137. Did the Guardian participate in the Person Centered Assessment?	50% Yes (4) 50% No (4)
138. Is the individual engaged in the Informed Choice Project?	25% Yes (2) 75% No (6)
139. Has the individual been offered the opportunity to participate in work or job exploration including volunteer work and/or trial work opportunities? '17IQR#26e	67% Yes (2) 33% No (1) (5 N/A)
140. If #139 is Yes, are these new experiences clearly documented in the ISP Work, Education and/or Volunteer History section?	100% Yes (2) (6 N/A)
141. If #139 is No, is the individual trying new discovery experiences in the community to determine interests, abilities, skills and needs?	0% Yes 100% No (1) (7 N/A)
142. Has the Guardian had the opportunity to gain information on how the individual responded during job exploration activities such as volunteering and/or trial work experiences?	67% Yes (2) 33% No (1) (5 N/A)
143. Has the individual received information regarding the range of employment options available to him/her? '17IQR#26c	33% Yes (1) 33% Many (1) 33% Needs Impv (1) (5 N/A)
144. Has the Guardian received information regarding the range of employment options available for the individual?	67% Yes (2) 33% Needs Impv (1) (5 N/A)
145. If there are barriers to employment, has the Team, including the individual, addressed how to overcome those barriers to employment and integrating clinical info., AT, & therapies as necessary ... '17IQR#27b	67% Yes (2) 33% Many (1) (5 N/A)
146. If there are barriers to employment, has the Team addressed with the Guardian how to overcome those barriers to employment and integrating clinical info., AT, & therapies as necessary ...?	67% Yes (2) 33% Needs Impv (1) (5 N/A)

Question	2018 (sample=10)
147. Has the individual participated in work or volunteer activities during the past year?	33% Yes (1) 33% Many (1) 33% Needs Impv (1) (5 N/A)
148. Has the individual identified what type of work or volunteer activities he/she would like to do?	67% Yes (2) 33% No (1) (5 N/A)
149. Does the Guardian support him/her working?	100% Yes (3) (5 N/A)
150. Is (Name) is involved in the DVR Outreach Project?	25% Yes (2) 75% No (6)
151. Is the individual engaged in Supported Employment? CPRQ129	67% Yes (2) 33% No (1) (5 N/A)
152. Is the individual Working in accordance with the following: CPRQ 130 '17IQR#28	0% Yes 33% Many (1) 67% No (2) (5 N/A)
153. Does the person have a Career Development Plan? CPRQ128	0% Yes 50% Many (1) 50% No (1) (6 N/A)
BEHAVIOR	
154. Is the person considered by the IDT to need behavior services now? CPRQ131; '17IQR#5d	88% Yes (7) 13% No (1)
155. Does the person need behavior services now? CPRQ132 '17IQR#11e	88% Yes (7) 13% No (1)
156. Have behavioral assessments been completed? CPRQ133	57% Yes (4) 14% Many (1) 14% Needs Impv (1) 14% No (1) (1 N/A)
157. Does the person have a positive behavior support plan developed out of the behavior assessments that meets the person's needs? CPRQ134 '17IQR#5g	71% Yes (5) 29% Needs Impv (2) (1 N/A)

Question	2018 (sample=10)
158. Has the staff been trained on the Positive Behavior Support Plan? CPRQ135; '17IQR#10d	100% Yes (7) (1 N/A)
159. If needed, does the person have a Behavior Crisis Intervention Plan that meets the person's needs? CPRQ 73a; '17IQR#5h	0% Yes 100% Many (1) (7 N/A)
160. Does the person receive behavioral services consistent with his/her needs? CPRQ 136 '17IQR#5i	71% Yes (5) 14% Many (1) 14% Needs Impv (1) (1 N/A)
161. Are behavior support services integrated into the ISP? CPRQ 137; '17IQR#11d	29% Yes (2) 29% Many (2) 29% Needs Impv (2) 14% No (1) (1 N/A)
ADAPTIVE EQUIPMENT / AUGMENTATIVE COMMUNICATION	
162. Has the person received all adaptive equipment needed? CPRQ138; '17IQR#25b	53% Yes (5) 38% Many (3)
163. Has the person received all assistive technology needed? CPRQ139; '17IQR#25c	60% Yes (3) 20% Many (1) 20% Needs Impv (1) (3 N/A)
164. Do direct care staff know how to appropriately help the person use his/her equipment? '17IQR#25f	88% Yes (7) 13% Many (1)
165. Is the person's equipment and technology in good repair?'17IQR#25d	75% Yes (6) 25% Many (2)
166. Is the person's equipment/technology available in all appropriate environments? '17IQR#25e	63% Yes (5) 25% Many (2) 13% Needs Impv (1)
167. Has the person received all communication assessments and services? CPRQ140 ; '17IQR#10b	57% Yes (4) 14% Many (1) 29% Needs Impv (2) (1 N/A)
INDIVIDUAL SERVICE PLANNING	

Question	2018 (sample=10)
168. Does the person have an ISP that addresses live, work/learn, fun/relationships and health/other that correlates with the person's desires and capabilities, in accordance with DOH Regulations? CPRQ141 '17IQR#7o	100% Yes (8)
169. Does the person have an ISP that contains a complete Vision Section that is based on a long-term view? CPRQ142 '17IQR#7a	50% Yes (4) 13% Many (1) 25% Needs Impv (2) 13% No (1)
170. Does the person receive services and supports recommended in the ISP? CPRQ143; '17IQR#11a	100% Yes (8)
171. Does the person have adequate access to and use of generic services and natural supports? CPRQ144; '17IQR#33f	63% Yes (5) 38% Many (3)
172. Is the person integrated into the community? CPRQ145; '17IQR#29g	75% Yes (6) 25% Needs Impv (2)
173. Overall is the ISP adequate to meet the person's needs? CPRQ146; '17IQR#7	0% Yes 50% Many (4) 50% Needs Impv (4)
174. Is the total program of the level of intensity adequate to meet this person's needs? CPRQ147; '17IQR#36	0% Yes 63% Many (5) 38% Needs Impv (3)