

2016 COMMUNITY PRACTICE REVIEW

PROTOCOL #6: SUMMARY AND ANALYSIS Jackson v. Ft. Stanton

Class Member Reviewed:	Reviewer:	Date:
HEALTH		
ASSESSMENTS		
ADEQUACY OF PLANNING		
EXPECTATIONS FOR GROWTH		
QUALITY OF LIFE		
SATISFACTION		
TEAM PROCESS		
Behavior		
ADAPTIVE EQUIPMENT/AUGMENTATIVE COMMUNICATI	ON	
INDIVIDUAL SERVICE PLANNING		
SUMMARY		

Summary

*55.

Ratings Guide

0 - Information not present or not adequate (non-compliance)

1 - Information is not completed or partially adequate (partial compliance)

2 - Information present and found to be adequate (full compliance)

NA - Item not applicable to this person

CND - Cannot determine answer based on information available

For each question your possible responses are limited to the optional responses listed. For instance, if a question does not list NA as a possible response, you may not use it. *In your notes YOU MUST use a (+) to indicate examples of compliance; Use a (-) to indicate examples of non-compliance.*

YOU MUST PROVIDE AN ANSWER TO EVERY QUESTION.

<u>Health</u>

*54. Overall, were the team members interviewed able to describe the person's health-related needs? Before answering this question, you must review your answers to questions #30 [CM], #38 [Day], #48 [Res].

> **0** is the score for Question #30 **0** is the score for Question #38 **0** is the score for Question #48 If these three scores are all 2's the answer to this question is a "2". If the answers are mixed (one is scored a "1", one a "2" and another a "0"), this must be scored a "1". No additional justifications are necessary

These scores must be entered from the Case Management,, Day and Residential Sections.

Case Judge remarks:

Is there evidence that the IDT discussed the person's health related issues? Note: In addition to information gathered during interviews, consider the health and safety section of the ISP.,CM progress notes, provider and therapy reports and progress notes. This cannot be a "2" if the documentation and what was expressed by the team members interviewed were not consistent, or if team members interviewed did not note the person's significant health issues (seizure disorder, aspiration, diabetes, etc)

Justification:

Case Judge remarks:

Choose

*56 In the opinion of the Reviewer, are the person's health supports/needs being adequately addressed?

Note: Needed assessments must be secured/scheduled; recommendations must be followed up on in a timely way. New DME and Augmentative Communication Devices are required to be delivered within 150 days from the date requested. Repairs or modifications to DME are required to be completed 60 days from the date requested. Therapy assessments should begin within 30 days of receipt of the Freedom of Choice and no later than 90 days of being identified as a need by the IDT team. Appointments with neurologists, psychiatrists, dentists and other medical specialists should be scheduled/in place no later than 45 days following the identified need by the IDT. Symptoms should be noted and pursued; dangers should be identified and eliminated/reduced; etc. This cannot be a "2" if there are outstanding assessments/evaluations, no evidence of follow-up of expressed symptoms, or no follow-through on health care recommendations, (e.g. the doctor ordered the person to have a C-Pap machine for use when sleeping at night, and there is no C-Pap machine at the person's home or the C-Pap machine is there but does not work), or lack of timely attention to/resolution of issues.

Justification:

Case Judge remarks:

Assessments

Examples of assessments "types": physical health; dental; psychological; behavioral; psychiatric; physical therapy; occupational therapy; daily living skills; vision; hearing; communication/speech; social/recreational; vocational/employment; other: i.e., neurological; self-administration of medications; nutritional; etc. Written/paper assessments that are not dated and/or not signed by the evaluator cannot be considered; however, assessments automatically dated and given "electronic signature" through the Therap system for E-CHAT, MAAT and Aspiration Risk Screening Tool are acceptable. An assessment cannot be considered adequate if it does not include clear information that can be used for planning. The mere presence of a piece of paper titled an assessment does not automatically warrant a "2" rating if the contents do not approach the Professional Judgment Standard. Note: Assessments provide information to guide planning. Assessments should identify the individual's preferences, desires and interests (this can be used to develop and/or enhance vision statements for individual's who cannot communicate directly with the IDT): strengths and skills (to identify what is currently in place to support the vision); challenges to adaptations/assistive technology); and learning style and culture (to identify the Action Plans, needed strategies and supports that are the least restrictive and most likely to be effective in assisting the individual to attain his or her vision). Assessments should be ongoing, as IDT members learn new information about the person through the provision of ongoing supports and services. Relevant information should be included in guarterly/semi-annual reports, as it is discovered. Assessment information should be formally updated and summarized annually.

and sent out to team members two weeks prior to the ISP meeting. The team should be sure:

- o All assessments the individual needs, in order for planning to be relevant, were considered.
- o Relevant input from all team members was obtained prior to the annual meeting.
- \circ Assessments identify needs, strengths, learning style, and preferences of the individual.
- o Assessments identify presenting disabilities and if possible, causes and proposed solutions.
- Assessments include clearly stated recommendations. If the IDT determines one or more recommendations are not appropriate, team consensus on why not is documented in the Decision Consultation Form (for medically related

recommendations); for non-medically related recommendations team consensus may be documented in IDT minutes or in a Decision Justification Form.

If the team identifies need for a new service/assessment at the annual meeting, this should be completed in a timely manner and the team must convene to review implications for planning and recommendations based on the new assessment and the ISP must be revised to incorporate the new information.

*57. Did the team consider what assessments the person needs and would be relevant to the team's planning efforts?

Note: Assessments should be sent out to Team members two weeks in advance of the ISP meeting. Consider recommendations for assessments made as a part of other evaluations, as well as other information found in the CM primary record. This cannot be a "2" if any of the required assessments were not considered. Required assessments include but are not limited to: History & Physical Exam, e-CHAT, Nurses quarterly/semi-annual reports for people at moderate or high on the e-CHAT, Medication Administration Assessment Tool (MAAT) if the person takes medication. Other assessments that may be considered based on the person's needs include: Behavior Support Consultation (BSC), Occupational Therapy (OT), Physical Therapy (PT), Speech Therapy (SLP), Vision Exam, Dental Exam, Neurological Exam, Psychiatric Exam, Vocational Assessment, Aspiration Screens (required annually if they do not already have a CARMP), TEASC, SAFE clinic, and other clinic exams/assessments.

Justification:

Case Judge remarks:

*58. Did the team arrange for and obtain the needed, relevant assessments?

Note: The Action Plan section of the ISP should address only those assessments that are still needed. Routine assessments that have been completed will not be listed in the action plan section. Case Managers are to track assessments provided and assessments needed – reviewers should review the tracking sheet being used by the CM. The information you have gathered regarding this person's needs including assessments found in the CM primary record should guide your answer to this question. This cannot be a "2" if any of the required assessments were not obtained. Nurses are required to provide quarterly/semi-annual reports for people at e-CHAT acuity of moderate or high. OT, PT and SLP provide reports every 6 months unless the ISP states differently. BSCs are to send their Quarterly/Semi-annual Reports to both OBS and Case Manager.

Justification: Case Judge remarks:

*59. Are the assessments adequate for planning?

Note: Determine if the assessments provide information that will guide the Team to support the individual and develop a comprehensive plan to help the person learn or develop a skill, achieve an outcome, address a medical or behavioral issue, etc. This cannot be a "2" if provider assessments (e.g. BT, OT, PT, SLP, e-CHAT, etc.) do not have information and recommendations which can be used in developing the ISP, outcomes, and Action Plans. If a Provider assessment recommendation simply states to continue the service, this cannot be a "2".

Justification:

Choose

Choose

*60. Were the recommendations from assessments used in planning?

Note: Determine if information and recommendations from the assessments were used throughout the ISP, such as in narrative section, outcome criteria, Action Plans and strategies, or other areas of the plan. This cannot be a "2" if #59 was a "1" or "0" or if the recommendations from any of the assessments were not found in the ISP.

Justification: Case Judge remarks:

Adequacy of Planning and Adequacy of Services

*61. Is there a document called an Individual Service Plan (ISP) that was developed within the past year? Effective Date: Choose

If you answered "No" to question #61, then mark questions #62 through #79 as "NA" and then proceed to question #80.

*62. Was the ISP developed by an appropriately constituted IDT?

Note: The IDT shall consist of the following members: person served; case manager; guardian (if applicable); direct service staff from each provider agency; ancillary service providers (if applicable) such as therapists; nurses; vocational specialists; physicians; psychiatrists; psychologists; these professions rarely attend team meeting, but may have submitted written assessments or evaluations for team consideration. The team may also include a friend advocate, family member and/or legal representative. "Applicable" depends on the preferences and needs of the individual. Check the ISP signature page, as well as interviewees' responses, to determine if there was an appropriately constituted Team. If the individual scores a moderate or high on the e-CHAT and there is no evidence that a nurse participated in the meeting, this cannot be a "2". If the individual is behaviorally involved, and there is no evidence a Behavior Support Consultant participated in the meeting, this cannot be a "2".

lustification:
Case Judge remarks:

*63. For any team members not physically present at the IDT meeting, is there evidence of their participation in the development of the ISP?

Note: Participation of ancillary service providers does not require the provider's physical presence at the IDT meeting. Their participation can be accomplished through conference call, or through meeting with another team member prior to the meeting to

Choose

Choose

discuss issues/concerns/recommendations. This applies to therapists and nurses. If the e-CHAT acuity is moderate or high the nurse MUST participate in the ISP, must do quarterly/semi-annual reports on the person's health care plan, must have a health care plans for which the e-CHAT summary indicates an "R" for required. Healthcare plans may be combined as determined by the class member's nurse and a separate Aspiration Health Care Plan is not required in addition to the CARMP since the CARMP is considered a type of healthcare plan that combines several health related issues.

Justification:

Case Judge remarks:

*64. Overall, is the long-term vision adequate?

Note: An individual's vision (i.e. dream for the future) should state what the individual wants to achieve over the next 1 to 3 years. Most people value and want: family and friends; a place to live that is comfortable, safe and meets preferences for design and furnishings; people with whom they live to be compatible; work that is interesting and that promotes success and accomplishment; to be a part of and valued by the community; enough money to feel secure and support life's desires; good health, etc. It is the job of the team to find out from the individual (through assessment, questions, observations, etc.) what he/she wants to focus on for the next few years. As a general rule, vision statements should not be repeated verbatim from one plan to the next. They should change and grow as the person does. Exception to this rule, however, would be if none of the vision has been accomplished – in spite of documented clear and consistent work towards the vision – and/or the vision statement is still the desired dream of the individual.

Note: The only allowable way for an individual not to have a vision in Live, Work/Learn and Relationships/Fun is if two criteria are met: 1) the person is not receiving any paid supports in that area AND 2) the team documents why the individual does not require the team's supports in that area (e.g. natural supports are sufficient, the individual is independent in that area...)

Justification:

Case Judge remarks:

*65. Overall, does the Narrative and Vision Section of the ISP give adequate guidance to achieving the person's long-term vision?

Note: The Vision section of the ISP includes questions to prompt the analysis that compares life today and the desired life stated in the vision. It is the team's review and discussion of the assessment information (strengths, preferences, interests, non-negotiables, supports, etc.) to identify what is in place and what needs to be included in planning to support the individual's transition from his/her present status to successful accomplishment of the stated vision for the future. The team should analyze each life area separately. This Section is to address, for each vision statement: the person's strengths, abilities, challenges, skills to be developed to achieve the vision, and what needs to occur including services and supports the persons needs. This cannot be a "2" if any of the Narrative or Vision Sections are not completed and overall does not relate to the achievement of the specified LTV in each life area.

Justification:

Case Judge remarks:

Choose

Justification:

*67.

*68.

*66.

Overall, do the outcomes in the ISP include criteria by which the team can determine when the outcome(s) have been achieved? Note: Outcomes are the formal steps (learning a new skill or completing an action/responsibility) necessary to achieve the person's desired vision. Each outcome relates to a relevant component of the vision; vision statements that have many components will require multiple outcomes for that specific life area. Outcomes are discussed, agreed upon and written at the IDT meeting; primary responsibilities for the accomplishment of each outcome are assigned. The IDT must meet when outcomes are accomplished in order to identify the next logical step in the process; the ISP is revised based on this discussion. Outcomes are written for the individual; skill maintenance or actions provided by the staff are included in the Vision Section of the ISP, steps of the Action Plans Teaching & Support Strategies and, when necessary, detailed in medical or therapy support plans (i.e. positioning, communication plans, CARMP etc.). In order for this to be a "2" <u>each</u> outcome that is developed must be measurable and state what the person is to do to accomplish it (that is, anyone reading it can tell when the outcome has been accomplished, e.g. the person will lose 50 pounds in the next year; or the person will develop a resume, practice job interview skills, make application and acquire a job in the next year).

Note: Consider each life area of the ISP separately. ISP outcomes should come directly from the Vision section, but may be in other parts of the ISP also. This

Overall, is the Vision Section of the ISP used as the basis for outcome development?

cannot be a "2" if the ISP outcomes did not come directly from the Vision Section for each life area.

Justification:

Case Judge remarks:

Overall, are the ISP outcomes related to achieving the person's long-term vision? Note: For this to be a "2" each outcome that is developed must relate to the person's Long Term Vision for that life area. Review the LTV and the outcomes to show if there is a direct connection or not. This score is "0" if no outcomes were developed. Consult with your Case Judge if you find vision statements with no outcome. Outcomes may be re-statements of the vision, as long as the steps are identified in the Action Plans.

Justification:
Case Judge remarks:

*69. Overall, do the ISP outcomes address the person's major needs?

Note: The ISP is centered on achieving what the person wants, and the outcomes are developed to assist the person in achieving their desires. If there are barriers to the accomplishment of the person's LTV these should be addressed in the person's ISP. The Personal Challenges and Obstacles That Need to be Addressed In Order to Achieve the Desired Outcomes section of the ISP (at the top of each action plan) should address these barriers. These challenges in turn should be addressed in the action steps, strategy(s) and/or support plans. There should be at least one related outcome for each vision statement. Consult with

Choose

Choose

Choose

your Case Judge if you find a vision statement with no outcome.

Justification:

Case Judge remarks:

*70. Overall, are the Action Plans specific and relevant to assisting the person in achieving his/her outcomes? Note: Action Plans are the steps the team has identified in order for the individual to accomplish his/her outcome. Each Action Plan in the ISP must relate to a specific outcome (and therefore the vision for that life area). Action Plans must contain necessary components in order to ensure they are implemented and progress measured consistently. Look for: measurable action the individual/others will perform; frequency; documentation and reporting requirements; and the assignment of a responsible party(ies). For Action Steps which require strategies, look for the Teaching and Support Strategies sheet which is to be completed within two weeks of the ISP. As most Action Plans require more than one step to complete (some will be worked on concurrently and some in sequence), the IDT should develop all of these steps and specify when each step is to be implemented. This item is "0" if there are no Action Plan/Action Steps. For this to be a "2" each Action Plan must meet the criteria as articulated here, specifically relate to the outcome and state what the person is to do along with others as needed.

Justification:

Case Judge remarks:

*71. Overall, are the Teaching and Support Strategies sufficient to ensure consistent implementation of the services planned? Note: Teaching and Support Strategies are detailed directions written to guide the staff in consistent implementation and documentation of the Action Step. These strategies must be directly related to accomplishing the Action Step in the most effective manner for the individual (learning style, specialized equipment, positioning, etc.). Strategies would address conditions for success (type/level of staff support and special equipment/materials necessary to successfully perform the action. The strategies must specify who will assist the individual, what staff will do (preparation, type/level of staff support, how to provide the support, etc.), when and where the Action Step will be implemented, how often the person will do the activity, when and how data will be collected, and when progress will be reviewed. Therapists may provide direct support to develop the provider strategies, or review and insert recommendations before submission for inclusion in the ISP. For those under the new DD Waiver, the therapist provides Written Direct Support Instructions to be attached to relevant Teaching and Support Strategies. For ongoing strategies these are due two weeks prior to the expiration of the previous ISP. For new strategies, these instructions will be added once the therapist has completed trials with the individual to determine the effectiveness prior to submitting and training DSP on Written Direct Support Instructions. This score is "0" if strategies are needed but not developed/present. For this to be a "2" each strategy must give clear directions so that anyone can read the strategy and know what to do. These directions should note who will assist the person, what type of support is needed, what materials are needed, when and where to do the action step, how often or for how long to do the action step and how and when data will be collected. If the strategy simply states what the staff will do or if the accomplishment of the Action Step is related to the activity of the staff, this cannot be a "2". (e.g., The strategy states: "go on a van ride everyday", this would be a "0", as it is dependent on a staff activity and does not state what the person will do.)

Justification:

Case Judge remarks:

*72. Overall, are the recommendations and/or objectives/strategies of ancillary providers integrated into the outcomes, action plans, and Teaching and Support Strategies of the ISP?

Note: Does the ISP incorporate information from ancillary providers (from plans, assessments, recommendations, etc.) dealing with how to reinforce skill

Choose

2016 CPR: Updated 11/16/15

Choose

building/maintenance, personal traits and abilities appropriately? Relevant Desired Outcomes and associated Teaching and Support Strategies, as needed, contain information from the ancillary providers that supports attainment of the individual's related vision areas. A mere reference to ancillary providers or specific plans/documents is not considered to have sufficient detail to be understood and consistently implemented, unless Written Direct Support Instructions are attached to the Teaching and Support Strategies from the therapist(s). This cannot be a "2" if the person receives therapies and there is no information from the therapists' plans in any of the ISP outcomes/action plans, or strategies. For this to be a "2" there must be relevant information from the therapist in the ISP outcomes, action plans and/or strategies such as information from the BSC on how to approach the person to ask them to do a task; or information from the SLP on how to communicate a request to the person.

Justification:	
Case Judge remarks:	
If needed, does the ISP contain a specific Crisis Prevention and Intervention Plan that meets the person's needs?	Choose
Note: Score a and h first then score this last. For this to be a "2" all Crisis Prevention and Intervention Plans and/or MERPs, that are developed must specify:	

Note: Score a. and b. first, then score this last. For this to be a "2" <u>all</u> Crisis Prevention and Intervention Plans and/or MERPs that are developed must specify: how to prevent the crisis; when the situation becomes a crisis: what the staff need to do to provide appropriate intervention; and describe what that intervention is to be.

a. If needed does the ISP contain a specific Crisis Intervention Plan for dangerous behavior that meets the person's needs?

Choose

Note: Has it been made clear in terms of what to do, where to go and who to call in the event of a behavioral crisis as appropriate to this person? Not all PBSPs require a Crisis Plan. For this to be a "2" <u>all</u> Crisis Intervention Plans that are developed must specify: how to prevent the crisis; when the situation becomes a crisis: what the staff need to do to provide appropriate intervention; and describe what that intervention is to be.

Justification: Q78			
Case Judge remarks:			

b. If needed, does the ISP contain a specific Medical Emergency Response Plan (MERP)?

Choose

Note: Has it been made clear in terms of what to do, where to go and who to call in the event of a medical crisis as appropriate to this person? If a person has a chronic condition with the potential to result in a life threatening situation (some types of seizures, asthma, some types of diabetes, etc.) they should have a MERP. Not all healthcare plans require an associated MERP. The e-CHAT summary report will indicate an "R" for health issues that require creation of a MERP. For this to be a "2" all MERPs that are developed must specify: how to prevent the crisis; when the situation becomes a crisis: what the staff need to do to provide appropriate intervention; and describe what that intervention is to be.

Justification:	
Case Judge remarks:	

*74. Does the ISP contain information regarding primary health (medical) care? Note: The name and contact information for the Primary Care Physician (PCP) should be on the face sheet of the ISP. The ISP should identify the healthcare coordinator responsible for supporting the individual to make such arrangements. The Health Action Plan page of the ISP should

Choose

*73.

address new/changes to health care that needs to be arranged/followed up on.

74.a. Does the ISP face sheet contain contact information for the PCP?

Justification:	
Case Judge remarks:	

74.b. Is the Healthcare coordinator's name and contact information listed in the ISP? Note: This should be on the Additional Healthcare Information page of the ISP.

Justification:
Case Judge remarks:

*75. Does the ISP reflect how the person will get to work/day activities, shopping, and social activities? Note: For this to be a "2" the ISP must note not just that the person needs transportation, but who [either agency or person by name or title] will provide that transportation. This information is expected to be in the Action Plan of the ISP, but if it is found in other sections (i.e. Strategy, Vision) that is acceptable. (This can be answered N/A IF Question <u>#109</u> is a "2".)

Justification:

Case Judge remarks:

*76. Does the ISP reflect how the person will obtain prescribed medications? Note: For this to be a "2" the name and phone number of the pharmacy (face sheet), and the person responsible for getting medications refilled and obtaining new medications (Medication Delivery section of Additional Healthcare Information page) must be noted.

Justification:	
Case Judge remarks:	

*77. Does the ISP contain a list of adaptive equipment needed and who will provide it? Note: For this to be a "2" the ISP and/or Equipment Inventory must note ALL of the adaptive equipment the person is to have available for use, and who is responsible for obtaining it. This question pertains to adaptive equipment. Examples of Adaptive Equipment includes: Durable Medical Equipment such as wheelchairs of any type, walkers, shower chairs, shower trolleys, hospital beds, eating and drinking equipment. Also personal items such as glasses, dentures, hearing aids.

Justification:

Choose

Choose

Choose

Choose

*78. Overall, is the ISP adequate to meet the person's needs?

Choose

Note: This question focuses on the adequacy of the ISP... the written plan. Based on the rating you have given Questions #61 through #77, does the ISP adequately address the person's living, working/learning, social/leisure and health needs/supports? The ISP does not have to be "perfect" and all of the scores for #61 to #77 do not have to be "2's" in order for you to find the ISP adequate and rate this as a "2". However, the individual's ISP should be based on the person's assessed needs and strengths and include relevant interventions designed to enable and move the person closer to his/her vision. The ISP should be directed towards the acquisition skills and behaviors necessary for the individual to function with as much self-determination as possible, should prevent or decelerate regression and attempt to keep the person safe and free from harm. The reviewer is to consider all the scores and rationales from questions #61-77, using those rationales here to substantiate the score. As you review the ISP in total, you are being asked to apply professional judgment to determine the overall adequacy of this person's ISP. (See guidance on Professional Judgment in Expectations of Reviewers and Case Judges, as provided by the Community Monitor.)

PRINT PREVIEW THIS SECTION TO REFERENCE THE SCORESFOR #61-77

#61= Choose	#62= Choose	#63= Choose	#64= Choose	#65= Choose	#66= Choose
#67= Choose	#68= Choose	#69= Choose	#70= Choose	#71= Choose	#72= Choose
#73= Choose	#74= Choose	#75= Choose	#76= Choose	#77= Choose	

(Return to <u>*146</u>)

Justification:	
Case Judge remarks:	

If you answered question 78 as "0", "1" or "NA", then answer question 79 as "NA". If you answered question 78 as "2" then proceed to select an appropriate answer for question 79.

*79. Is the ISP being implemented?

Note: Determine if the ISP is being implemented by looking at outcome and action plan data collection, provider and therapist monthly, quarterly or bi-annual

reports noting progress made or the reason for lack of progress, and information obtained from interviewees. Score this question accordingly, noting the corresponding rationale, then proceed to question #81. This can only be a "2" if the data collection and provider and therapist reports note progress or the reason for lack of progress –and if all IDT members interviewed indicated progress has been made or stated why they thought progress was not made and how it is being addressed

Justification:

Case Judge remarks:

If you answered question 78 as "0", "1" or "NA", then answer question 80 as appropriate. If you answered question 78 as "2", then answer question 80 as "NA".

*80. a. Is the ISP being implemented?

Note: Answer this question if this person's ISP was NOT rated as a 2. The Note in #79 applies here as well.

Justification:

Case Judge remarks:

b. Are current services adequate to meet the person's needs?

Note: Consider all of the services the individual receives, including Case Management, Community Living, Nursing, Nutrition, Day, Employment, and all Therapies. The reviewer is to note what is determined as adequate, and for those that are considered to be inadequate note the reason for that determination. This cannot be a "2" if the person is to receive a particular therapy but there was no progress report from the therapist, and no evidence the therapist had seen the person at home or during the day program. This cannot be a "2" if the person is to receive a specific staffing support during specific times, and the documentation (or your observations) indicates that the support has not been there on a regular basis for a substantial amount of time.

Justification:	
Case Judge remarks:	

*81.	Overall, was the direct service staff trained on the implementation of this person's ISP?
	Note: This should be scored "0" if #61 was answered "No".

Before answering this question, you must review your answers to questions #37 [Day], and #46 [Res]

0 is the score for Question #37 **0** is the score for Question #46

If both of these are "2" the answer to this question is a "2". If the answers are mixed (one is scored a "1" and one is "2"), this must be scored a "1". No additional justifications are necessary

These scores must be entered from the Day and Residential Sections.

Choose

Choose

Choose

*82. Overall, were the direct service staff able to describe their responsibilities in providing daily care/supports to the person?

Before answering this question, you must review your answers to questions #39 [Day], #49 [Res].

0 is the score for Question #39 **0** is the score for Question #49

If both of these are "2" the answer to this question is a "2". If the answers are mixed (one is scored a "1" and one is "2"), this must be scored a "1". No additional justifications are necessary

These scores must be entered from the Day and Residential Sections.

Case Judge remarks:

*83. Overall, do the progress notes or other documentation in the case management record reflect the status of the outcomes and services of the key life areas stated in the ISP?

Note: This should be scored "0" if #61 was answered as "No" – there is no ISP. Consider documents such as: progress notes and monthly/quarterly/(semiannual) reports from each provider; quarterly/6-month reports from each therapist; and monthly reports from the Case Manager. This can be a "2" if all reports specify if outcomes/action plans have been met (not just worked on) and if not met what the plan is (e.g. continue for 3 more months or have an IDT meeting to revise the outcome, action steps or strategies). This cannot be a "2" if any reports just state the outcome has been worked on (e.g. did outcomes this month.

Justification:
Case Judge remarks:

Expectations for Growth

*84. Based on all of the evidence, in the opinion of the Reviewer, has the person achieved progress in the past year? Note: Reviewers will base this score on documentation reviewed and interviews. For this to be a "2" outcome, action plans or action steps would have to have been met, or evidence of other positive growth would need to be evident.

Justification: Case Judge remarks:

*85. Overall, does the IDT have an appropriate expectation of growth for this person? Before answering this guestion, you must review your answers to guestions #31 [CM], #42 [Day], #52 [Res].

0 is the score for Question #31 **0** is the score for Question #42 **0** is the sco

0 is the score for Question #52

Choose

Choose

Choose

If these three scores are all 2's the answer to this question is a "2". If the answers are mixed (one is scored a "1", one a "2" and another a "0"), this must be scored a "1". No additional justifications are necessary

These scores must be entered from Case Management, Day and Residential Sections.

Case Judge remarks:

Quality of Life

- *86. Was the person provided the assistance and support needed to participate meaningfully in the planning process? Choose Note: Use the signature sheet and Section IV of the ISP to determine if the person attended their own meeting and what their level of involvement was. Also refer to case management interview question "K" if the person attended the meeting; if the case manager met with the person prior to the meeting to discuss things with the person; if the person gave their input during the meeting; or if the guardian or other members of the team spoke for the person. If there is no indication they attended the meeting and no explanation as to why, either in the ISP, the IDT meeting minutes, or the Case Manager notes, then this is to be scored "0".
- *87. Is the person offered a range of opportunities for participation in each life area? Note: Scoring is determined by evidence of a variety of opportunities being offered to the person in each life area daily/weekly/monthly. If the person is to choose between two objects/activities, determine if those things vary regularly. If not, then this cannot be a "2".

Justification:	
Case Judge remarks:	
Does the person have the opportunity to make informed choices?	Choose

*88. Does the person have the opportunity to make informed choices? Note: Questions 89-91 should be scored first. If 89, 90 or 91 are scored "0" or "1", this cannot be a "2".

 *89. About where and with whom to live?
 Choose

 Justification:
 Case Judge remarks:

 *90. About where and with whom to work/spend his/her day?
 Choose

Justification:

		Case Judge remarks:	
	*91.	About where and with whom to socialize/spend leisure time?	Choose
		Justification:	
		Case Judge remarks:	
*92.		Does the evidence support that providers do not prevent the person from pursuing relationships and are respecting the rights of this person? Note: Reviewers will make this determination based on interviews and documentation reviewed.	Choose
		Justification:	
		Case Judge remarks:	
*93.		Overall, were the direct service staff interviewed trained on the provider's complaint process and on abuse, neglect and exploitation? Before answering this question, you must review your answers to questions #41 [Day], #51 [Res]. 0 is the score for Question #41 0 is the score for Question #51 If both of these are "2", the answer to this question is a "2". If the answers are mixed (one is scored a "1", one is a "2"), this must be scored a "1". No additional justifications are necessary These scores must be entered from the Day and Residential Sections.	Choose
		Case Judge remarks:	
*94.		Does this person and/or guardian have adequate access to the available complaint processes/procedures? Note: Reviewers will score this item based on interviews.	Choose
		Justification:	
		Case Judge remarks:	
*95.		Does the person know his/her guardian?	Choose
		Justification:	
		Case Judge remarks:	

*96. Does the person believe the guardian is helpful?

Justification:

*97.

*99.

Case Judge remarks:

What is the level of participation of the legal guardian in this person's life and service planning? (Check one of the boxes to the right.) Note: Based on the information you recorded during all interviews, you should know how often the guardian calls and/or visits the individual--daily, weekly, monthly, holidays only, on an as needed basis only, not at all. Consider if documents sent/provided to guardians are returned promptly. Consider any problems because needed documents are not signed and returned, such as permission for medical treatment and medical releases; or if the guardian is unable to continue in the role of guardian and there is no one else acting as co-guardian. Power of Attorney, or ready to step into the role of guardian, and therefore documents are not getting signed; or if there is no explanation to the case manager from the guardian as to why things are not being done. Note: This is only N/A if the person is his or her own guardian. If the person is SUPPOSED to have a guardian, but currently does not, the answer is "None". None Limited: Less than 12 times per year.

Moderate: 1 or more times per month. Active: 3 or more times a month NA

Justification: Case Judge remarks:

*98. In the Reviewer's opinion, does the person need a friend advocate?

Note: The "friend advocate" is a non-paid individual who assists the person in service planning, making his/her preferences known, and in decision making. Individuals are at greater risk and therefore should be considered for a friend advocate when they have few if any people in their lives who are not paid to be in their lives. When personal safeguards are missing, the reviewer will consider recommending a friend advocate for the person. If the reviewer thinks the person is an active self-advocate or the Case Manager and/or other IDT members and/or the guardian speak out for the person or assist the person in speaking out for her/him self then this can be "No".

Justification:	
Case Judge remarks:	

Does the person have a friend advocate? Note: This should be scored "NA" if #98 was answered as "No".

Justification:

Choose

Choose

Choose

*100.	If the person is retired, does he/she have adequate opportunities to engage in activities of interest during the day? Note: The reviewer needs to consider the person's age in relation to the retirement age of the general population. A 45 year old person who has never worked cannot be considered "retired". The usual retirement age in the general population begins at about age 65 years.	Choose
	Justification:	
	Case Judge remarks:	
*101.	Does the person have daily choices/appropriate autonomy over his/her life? Note: This score should be based on documentation verifying regular and integrated-into-daily-life opportunities to make choices, observation of examples, and information gained during interviews.	Choose
	Justification:	
	Case Judge remarks:	
*102.	Have the person's cultural preferences been accommodated? Note: Reviewers will be looking to documentation, observation and interviews to verify. Evidence includes foods provided regularly that the person likes, preferred music available and being played, schedules verifying attendance at cultural events of the persons choice; support staff who speak the person's language, etc. Culture is not only ethnic, but may be other things, such as age or lifestyle.	Choose
	Justification:	
	Case Judge remarks:	
*103.	Is the person treated with dignity and respect? Note: Reviewers will be observing things like how the person is addressed and talked about; whether the person has personally chosen possessions and privacy; and whether the person's preferences and support/service needs are planned for/met in a timely manner.	Choose
	Justification:	
	Case Judge remarks:	
	Satisfaction	
*104.	Overall, is the person satisfied with current services?	Choose

Case Judge remarks:

Overall, is the person satisfied with current services? Note: Reviewers will interview the class member and be looking for evidence that the person exhibits/reports satisfaction with: a. Living arrangements?

- b. Employment/training opportunities?c. Freedom to make choices?d. Suitability of adaptive equipment?e. Contact with the case manager?f. Contact with family?

- g. Opportunity to participate in community activities?

	Justification:	
	Case Judge remarks:	
*105.	Does the person get along with the case manager?	Choose
	Justification:	
	Case Judge remarks:	
*106.	Does the person find the case manager helpful?	Choose
	Justification:	
	Case Judge remarks:	
*107.	Does the legal guardian find the case manager helpful?	Choose
	Justification:	
	Case Judge remarks:	
*108.	Does the person have adequate food and drink available? Note: Must match your answer (g) on page 84.	Choose
	Justification:	
	Case Judge remarks:	
*109.	Does the person have adequate transportation to meet his/her needs?	Choose

(Return to *75) Justification:

*111.

Case Judge remarks:

*110. Does the person have sufficient personal money? Note: Reviewers will be looking to be sure that lack of money does not prevent the person from doing and going places they want. Reviewers will gather this information from interviews and documentation.

Justification: Case Judge remarks: Does the person get along with their day program/employment provider staff? Choose

Justification: Case Judge remarks:

*112. Does the person get along with their residential provider staff?

Justification:	
Case Judge remarks:	

Team Process

Successful planning requires the greatest possible involvement of the individual, his/her family, guardian, friends, case manager, support staff and specialists specific to the needs of the person. Each participant is expected to work together, to demonstrate a continuing commitment to learn about the individual and his/her current vision, outcomes, and circumstances, and to consistently carry out the roles and responsibilities necessary to support the individual to realize those aspirations.

- *113. Deleted. Question related to the 6 month ISP which is no longer required.
- *114. Are the individual members of the IDT following up on their responsibilities? Note: Base this score on the interviewee responses, as well as documentation indicating if a service or support has been carried out or not, and if follow-up has been done. Consider if the therapists are providing therapy according to their plan, that the assigned persons are getting the individual to medical and other appointments, that the providers are implementing ISP or outcomes/action plans. If interviewees stated everyone is following up, yet the record indicated no

Choose

Choose

follow up on getting a service into place, this cannot be scored a "2".

Justification:
Case Judge remarks:
If there is evidence of team conflict, in the Reviewer's opinion, has the team made efforts to build consensus? Note: This item is scored "NA" if there is no evidence of team conflict.
Justification:
Case Judge remarks:
Do records or facts exist to indicate that the team convened meetings as needed due to changed circumstances and/or needs? Note: Consider things such as whether or not outcomes are being met timely, or if there has been no progress on outcomes they are changed timely, job status change, housing situation change, loss of someone close to the person, loss of skill or physical ability, change of housemate, or other significant events in the person's life that would require the IDT to meet. In the case of any unusual circumstances mentioned during interviews, determine if the IDT met and discussed the situation, if appropriate medical care was received, if measures were put in place to prevent a recurrence of the situation. The ISP regulation requires IDT to meet for the following: 1. significant life change, including change in medication that affects behavior or emotional state 2. risk of significant harm (this includes a trend of 3 reportable, substantiated incidents in a 3 month period of time) 3. changes in desired outcomes or loss of a job 4. loss or death of significant person in the individual's life 5. serious accident, illness, injury or hospitalization that disrupts the implementation of the ISP 6. individual, guardian or provider request a program change or relocation, or when termination of services is proposed 7. If the person is the victim of abuse, neglect or exploitation 8. Criminal justice involvement 9. when proposed services are denied by DDSD or New Mexico Medicaid Utilization Review 10. reasonable request of any IDT member
Justification:
Case Judge remarks:
Is there adequate communication among team members between meetings to ensure the person's program can be/is being implemented?
Justification:

*118.	Do you recommend Team Process Training for this IDT? Note: If the reviewer observes things such as unresolved team conflict, team members who appear to not know or understand their responsibilities the reviewer may answer this yes. If the reviewer believes a different type of intervention would be more helpful to the team, answer this "no" and make recommendations in the Summary of Findings and Recommendations Section.	Choose
	Justification:	
	Case Judge remarks:	
*119.	Is there evidence or documentation of physical regression in the last year? If Yes, describe. Note: Consider changes identified during interviews as well as documented evidence and all other information provided during the review.	Choose
	Justification:	
	Case Judge remarks:	
*120.	Is there evidence or documentation of behavioral or functional regression in the last year? If Yes, describe. Note: Consider changes identified during interviews as well as documented evidence and all other information provided during the review.	Choose
	Justification:	
	Case Judge remarks:	
*121.	If #119 OR #120 is scored "Yes", is the IDT adequately addressing the regression? Note: This response would be "NA" only if BOTH #119 and #120 are scored " <u>No</u> ".	Choose
	Justification:	
	Case Judge remarks:	
*122.	Has the person changed residential/day services in the last year? If Yes, was the change:	Choose
	Note: This includes a change(s) in provider(s) or change in services within the same provider agency. a. Planned by the IDT? Note: "Planned" means the team met and a transition plan was developed.	Choose
	Justification:	

b. Appropriate to meet needs?

Justification: Case Judge remarks:

*123. Has the IDT process been adequate for assessing, planning, implementing and monitoring of services for this person? Note: This looks at the <u>complete</u> process and the effect it had on the provision of services to the person. Not every item needs to be a + to make this a "2". For example, if the dental exam was not completed, yet all other assessments were obtained and used in developing the plan; the plan was scored as adequate; evidence indicated the plan was being implemented; and the CM, providers and therapists were monitoring service delivery, then this can be scored "2". Choose

Choose

Justification: Case Judge remarks:

<u>Behavior</u>

*131. Is the person considered by the IDT to need behavior services now? Note: There is evidence in the person's record that the IDT determined that the person needs behavioral services.

Justification:		
Case Judge remarks:		

In the opinion of the Reviewer, does the person need behavior services now? Note: Behavioral services are broad ranging set of possibilities, not limited exclusively to behavioral therapy. Behavioral services may include other forms of intervention designed to address the underlying issue(s) identified. If the things outlined in #131 above are happening (the person has restricted access to the community, no or few relationships, limited vision for potential in growth) because of the person's behavior and the team has not addressed these issues, then the person needs behavioral services.

 Justification:

 Case Judge remarks:

If the answers to BOTH #131 and #132 are "No", then score questions 133-137 as NA and go on to question 138.

*132.

Choose

Otherwise proceed to read and answer questions 133-137.

*133. Have adequate behavioral assessments been completed? Note: In addition to frequency, intensity and duration, determine if the assessments add to the team's knowledge of what motivates, sustains or changes the behavior. Are the assessments anecdotal, data based or both?

Note: Does the assessment identify the factors that contribute to the occurrence of challenging behavior? Those factors may be environmental, personal, psychological, past abuse, interpersonal or other internal or external stimuli.

Justification: Case Judge remarks: *134. Does the person have a positive behavior support plan developed out of the behavior assessments that meets the person's needs? Note: In addition to seeing the relationship between the assessment and the positive behavior support plan prevention, long-term change, and, when needed, crisis intervention components should be included. The intervention/s should seek to enhance the individual's quality of life rather than simply reduce the behavior. Do the strategies emerge consistently from the assessment? Do they make sense? Choose

Note: The person only needs a crisis plan if the intensity, severity, or duration exceeds the usual strategies of the PBSP. A Crisis Plan is not universally required.

Justification:

Case Judge remarks:

*135. Has the staff been trained on the positive behavior support plan? Note: If staff can reasonably indicate how the PBSP and/or BSC guides and informs their support of the individual, then you can assume this person has been trained. If you have observed interventions in line with the PBSP/BSC this is confirmation that the staff have been trained. If, however, the staff articulate what to do correctly but your observation of interventions are not in line with the PBSP/BSC, this cannot be a "2".

Justification:

Case Judge remarks:

*136. Does the person receive behavioral services consistent with his/her needs? Note: Reviewers will look to see if the IDT has successfully enabled this person to experience a broad range of preferred environments, activities, relationships regardless of behavioral change and/or whether or not the person's competency is increasing and staff is more effective at preventing and or addressing challenging behavior.

Justification:

Case Judge remarks:

Choose

*137. Are behavior support services integrated into the ISP?

Note: Does the ISP incorporate information from the PBSP in important personal traits, skills and abilities and refer to behavioral challenges appropriately? Progress towards the Vision, action plan (challenges) and/or strategies for all vision areas should contain information from the PBSP that supports attainment of the individual's vision/outcomes for that area. A mere reference to the behavior plan (i.e. "behavior services" or "see behavior plan") is not considered to have sufficient detail to be understood and consistently implemented; neither is word for word repetition of the plan required.

Justification:

Case Judge remarks:

Adaptive Equipment/Augmentative Communication

*138. Has the person received all adaptive equipment needed?

Note: Adaptive equipment identified as being needed is available and used by the person in all relevant environments; it works as intended; and continues to be appropriate to the person. If the person refuses to use the equipment identified, there is evidence that the appropriate specialist has been consulted and alternative devices/interventions assessed, sought and tried. Devices designed specifically for use to support work tasks only; need not be used at home, and vice versa.

Examples of Adaptive Equipment includes: Durable Medical Equipment such as wheelchairs of any type, walkers, shower chairs, shower trolleys, hospital beds, eating and drinking equipment. Also personal items such as glasses, dentures, hearing aids.

NOTE: Environmental Modification issues would be referenced in this question. If you note that a piece of adaptive equipment is present/not here you may NOT also note that it is present/not in Question #139.

Justification:	
Case Judge remarks:	

*139. Has the person received all assistive technology needed?

Note: Assistive technology identified as being needed is available and used by the person in all relevant environments; it works as intended; and continues to be appropriate to the person. If the person refuses to use the devices identified, there is evidence that the appropriate specialist has been consulted and alternative devices/interventions assessed, sought and tried.

Examples of Assistive Technology includes: any type of device, including but not limited to communication systems, switches, electronic devices (anything with an on/off switch) and/or simple non-electric items such as picture devices communication systems including communication rings. If you note that a specific Assistive Technology device is present/not here you may NOT also note that it is present/not in Question #138.

Note: Environmental Modifications should not be referenced in this question.

Page 24

Choose

Choose

Justification:

Justification:

Case Judge remarks:

*140.

Case Judge remarks:

Has the person received all communication assessments and services? Note: People with limited ability to engage in communication and be understood will have reviewers paying particular attention to the efforts on the part of the IDT's to expand the person's ability to communicate and be understood (not just by staff). Recommendations made by Speech Therapist will be reviewed and the expectation will be that those recommendations are followed timely or alternatives noted. The Reviewer will take into consideration cultural preferences of the individual.

Individual Service Planning

*141. 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? Note: This item does not evaluate the adequacy of any one component, but the existence of the ISP document with the required elements in it. This item cannot be rated "NA". If the person does not have an ISP, ("No" on question #61), then rate this as a "0".

Justification:	
Case Judge remarks:	

*142. Does the person have an ISP that contains a complete Vision Section that is based on a long-term view? Note: This item evaluates whether the ISP contains progress information reflective of the person's long-term vision. Does the ISP contain a thorough analysis of the individual's progress toward each of their vision statements, including existing skills that can contribute to success as well as skills they need to learn and supports they will need? This information can be found in the Vision section of the ISP Narrative if the prompts in the ISP form have been answered consistent with the class member's likes, preferences, experiences, etc. This item cannot be rated "NA". If the person does not have an ISP ("No" on question #61) then rate this as a "0".

	Justification:
	Case Judge remarks:

Choose

Does the person receive services and supports recommended in the ISP? Note: This item does not evaluate the adequacy of the ISP. It only measures those services stated in the ISP and whether or not those services are being provided to the person. This item cannot be rated "NA". If the person does not have an ISP, ("No" on guestion #61) then rate this as a "0".

ousincution.	
Case Judge remarks:	
Does the person have adequate access to and use of generic services and natural supports?	
Note: "Natural supports" are people (e.g., family, friends, co-workers, neighbors) or supports (e.g., environmental, equipment, technology) used to enable people to do what they want to do. "Generic services" are community services and activities available to the general public (banks, local community senior centers, restaurants).	
Justification:	
Case Judge remarks:	

*145. Is the person adequately integrated into the community?

Note: Evidence of "adequate integration" includes things like: the person has friends who are not paid to be in his/her life and who are not all disabled; the person regularly participates in activities in the community and engages with non-disabled people; the person has memberships, hobbies and/or interests in which he/she participates and engages with people not paid to be in his/her life; the person is recognized by members of his/her community. Consider if the person works, volunteers, and contributes to his/her community in some way. Is he/she seen as a 'regular', known by name and missed when absent? Consider how often the person does these things. The Reviewer will take into consideration cultural preferences of the individual.

Justification:

Justification

*143.

*144.

Case Judge remarks:

<u>Summary</u>

*146. Overall is the ISP adequate to meet the person's needs?

Note: To ensure consistency, this rating and rationale must be the same as <u>#78</u>, (If the person does not have an ISP, ("No" on question #61) then rate this as a "0". As you review the ISP in total, you are being asked to apply professional judgment to determine the overall adequacy of this person's ISP. (See guidance on Professional Judgment in Expectations of Reviewers and Case Judges, as provided by the Community Monitor.)

Justification:

Case Judge remarks:

*147. Is the total program of the level of intensity adequate to meet this person's needs?

Choose

Choose

Choose

Note: Only consider the services and supports provided, not the ISP document. This can be a "2" if the person has all the staffing supports as required by the ISP, if all adaptive equipment is in place and being used, if all medical plans are being implemented, if there is evidence that outcomes and action plans are being implemented, if all assessments have been completed and followed up on, and if all therapies are occurring per the ISP and therapy plans. As you review this person's total program, you are being asked to apply professional judgment to determine the overall level of intensity and if it is adequate to meet this person's needs. (See guidance on Professional Judgment in Expectations of Reviewers and Case Judges.)

Justification:

Case Judge remarks:

QUESTIONS

#	Question	Score
<u>*54</u>	Overall, were the team members interviewed able to describe the person's health-related needs?	Choose
<u>*55</u>	Is there evidence that the IDT discussed the person's health related issues?	
*56	In the opinion of the Reviewer, are the person's health supports/needs being adequately addressed?	Choose
<u>*57</u>	Did the team consider what assessments the person needs and would be relevant to the team's planning efforts?	Choose
<u>*58</u>	Did the team arrange for and obtain the needed, relevant assessments?	Choose
<u>*59</u>	Are the assessments adequate for planning?	Choose
<u>*60</u>	Were the recommendations from assessments used in planning?	Choose
<u>*61</u>	Is there a document called an Individual Service Plan (ISP) that was developed within the past year?	Choose
<u>*62</u>	Was the ISP developed by an appropriately constituted IDT?	Choose
<u>*63</u>	For any team members not physically present at the IDT meeting, is there evidence of their participation in the development of the ISP?	Choose
<u>*64</u>	Overall, is the long-term vision adequate?	Choose
<u>*65</u>	Overall, does the Narrative and Vision Section of the ISP give adequate guidance to achieving the person's long-term vision?	Choose
<u>*66</u>	Overall, is the Vision Section of the ISP used as the basis for outcome development?	Choose
<u>*67</u>	Overall, do the outcomes in the ISP include criteria by which the team can determine when the outcome(s) have been achieved?	Choose
<u>*68</u>	Overall, are the ISP outcomes related to achieving the person's long-term vision?	Choose
<u>*69</u>	Overall, do the ISP outcomes address the person's major needs?	Choose
<u>*70</u>	Overall, are the Action Plans specific and relevant to assisting the person in achieving his/her outcomes?	Choose
<u>*71</u>	Overall, are the Teaching and Support Strategies sufficient to ensure consistent implementation of the services planned?	Choose
<u>*72</u>	Overall, are the recommendations and/or objectives/strategies of ancillary providers integrated into the outcomes, action plans, and Teaching and Support Strategies of the ISP?	Choose
<u>*73</u>	If needed, does the ISP contain a specific Crisis Prevention and Intervention Plan that meets the person's needs?	Choose
*74	Does the ISP contain information regarding primary health (medical) care?	Choose
*75	Does the ISP reflect how the person will get to work/day activities, shopping, and social activities?	Choose
*76	Does the ISP reflect how the person will obtain prescribed medications?	Choose
*77	Does the ISP contain a list of adaptive equipment needed and who will provide it?	Choose
*78	Overall, is the ISP adequate to meet the person's needs?	Choose
*79	Is the ISP being implemented? (Should be NA if 78 is 0, 1, or NA) (Should be scored if 78 is 2)	
		Choose
<u>*80</u> a.	Is the ISP being implemented? (Should be scored if 78 is 0, 1, or NA) (Should be scored NA if 78 is scored 2)	Choose

<u>*80</u> b.	Are current services adequate to meet the person's needs?	Choose
*81	Overall, was the direct service staff trained on the implementation of this person's ISP?	Choose
*82	Overall, were the direct service staff able to describe their responsibilities in providing daily care/supports to the person?	Choose
<u>*83</u>	Overall, do the progress notes or other documentation in the case management record reflect the status of the outcomes and services of the key life areas stated in the ISP?	Choose
<u>*84</u>	Based on all of the evidence, in the opinion of the Reviewer, has the person achieved progress in the past year?	Choose
<u>*85</u>	Overall, does the IDT have an appropriate expectation of growth for this person?	Choose
<u>*86</u>	Was the person provided the assistance and support needed to participate meaningfully in the planning process?	Choose
<u>*87</u>	Is the person offered a range of opportunities for participation in each life area?	Choose
<u>*88</u>	Does the person have the opportunity to make informed choices?	Choose
<u>*89</u>	About where and with whom to live?	Choose
<u>*90</u>	About where and with whom to work/spend his/her day?	Choose
<u>*91</u>	About where and with whom to socialize/spend leisure time?	Choose
<u>*92</u>	Does the evidence support that providers do not prevent the person from pursuing relationships and are respecting the rights of this person?	Choose
<u>*93</u>	Overall, were the direct service staff interviewed trained on the provider's complaint process and on abuse, neglect and exploitation	Choose
<u>*94</u>	Does this person and/or guardian have adequate access to the available complaint processes/procedures? Note: Reviewers will score this item based on interviews.	Choose
*95	Does the person know his/her guardian?	Choose
*96	Does the person believe the guardian is helpful?	Choose
<u>*97</u>	What is the level of participation of the legal guardian in this person's life and service planning? (Check one of the boxes to the right.)	Choose
<u>*98</u>	In the Reviewer's opinion, does the person need a friend advocate?	Choose
*99	Does the person have a friend advocate?	Choose
<u>*100</u>	If the person is retired, does he/she have adequate opportunities to engage in activities of interest during the day?	Choose
<u>*101</u>	Does the person have daily choices/appropriate autonomy over his/her life?	Choose
<u>*102</u>	Have the person's cultural preferences been accommodated?	Choose
<u>*103</u>	Is the person treated with dignity and respect?	Choose
<u>*104</u>	Overall, is the person satisfied with current services?	Choose
<u>*105</u>	Does the person get along with the case manager?	Choose
<u>*106</u>	Does the person find the case manager helpful?	Choose
<u>*107</u>	Does the legal guardian find the case manager helpful?	Choose
<u>*108</u>	Does the person have adequate food and drink available?	Choose
<u>*109</u>	Does the person have adequate transportation to meet his/her needs?	Choose
<u>*110</u>	Does the person have sufficient personal money?	Choose
<u>*111</u>	Does the person get along with their day program/employment provider staff?	Choose
<u>*112</u>	Does the person get along with their residential provider staff?	Choose

*113	Deleted. Question related to the 6 month ISP which is no longer required.	
<u>*114</u>	Are the individual members of the IDT following up on their responsibilities?	Choose
<u>*115</u>	If there is evidence of team conflict, in the Reviewer's opinion, has the team made efforts to build consensus?	Choose
<u>*116</u>	Do records or facts exist to indicate that the team convened meetings as needed due to changed circumstances and/or needs?	Choose
<u>*117</u>	Is there adequate communication among team members between meetings to ensure the person's program can be/is being implemented?	Choose
<u>*118</u>	Do you recommend Team Process Training for this IDT?	Choose
<u>*119</u>	Is there evidence or documentation of physical regression in the last year?	Choose
<u>*120</u>	Is there evidence or documentation of behavioral or functional regression in the last year?	Choose
<u>*121</u>	If #119 OR #120 is scored "Yes", is the IDT adequately addressing the regression?	Choose
<u>*122</u>	Has the person changed residential/day services in the last year?	Choose
	. a. Planned by the IDT?	Choose
	b. appropriate to meet needs?	Choose
<u>*123</u>	Has the IDT process been adequate for assessing, planning, implementing and monitoring of services for this person?	Choose
<u>*131</u>	Is the person considered by the IDT to need behavior services now?	Choose
<u>*132</u>	In the opinion of the Reviewer, does the person need behavior services now?	Choose
*133	Have adequate behavioral assessments been completed? Note: In addition to frequency, intensity and duration, determine if the	Choose
	assessments add to the team's knowledge of what motivates, sustains or changes the behavior. Are the assessments anecdotal, data	
	based or both?	
<u>*134</u>	Does the person have a positive behavior support plan developed out of the behavior assessments that meets the person's needs?	Choose
<u>*135</u>	Has the staff been trained on the positive behavior support plan?	Choose
<u>*136</u>	Does the person receive behavioral services consistent with his/her needs?	Choose
<u>*137</u>	Are behavior support services integrated into the ISP?	Choose
<u>*138</u>	Has the person received all adaptive equipment needed?	Choose
<u>*139</u>	Has the person received all assistive technology needed?	Choose
<u>*140</u>	Has the person received all communication assessments and services?	Choose
<u>*141</u>	Does the person have an ISP that addresses live, work/learn, fun/relationships and health/other that correlates with the person's desires	Choose
	and capabilities, in accordance with DOH Regulations?	
<u>*142</u>	Does the person have an ISP that contains a complete Vision Section that is based on a long-term view?	Choose
<u>*143</u>	Does the person receive services and supports recommended in the ISP?	Choose
<u>*144</u>	Does the person have adequate access to and use of generic services and natural supports?	Choose
<u>*145</u>	Is the person adequately integrated into the community?	Choose
<u>*146</u>	Overall is the ISP adequate to meet the person's needs?	Choose
<u>*147</u>	Is the total program of the level of intensity adequate to meet this person's needs?	Choose