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A. Jackson Class Member Demographics – SW Region

At the time of the SW Review, there were 34 Jackson Class Members in the Southwest Region. Ten individuals were chosen to be a part of the review sample.

Gender	Gender			Day Service Type		Residential Service Type		
Male	20	Hispanic	22	Adult Habilitation (AH)	19	Supported Living	31	
Female	14	Caucasian	10	Adult Hab/Supp Empl (SE)	8	Family Living	1	
		Native American	2	Adult Hab/Community Access (CA)	1	Mi Via	0	
Age		Black	0	Community Access	3	Independent Living	2	
30-39	0	Asian	0	Community Access/Supp Empl	2	ICF/I/DD	0	
40-49	2			Supported Employment	1		-	
50-59	20			Mi Via	0			
60-69	7			NONE	0			
70-79	5							
80+	0							
Average Age:	60							

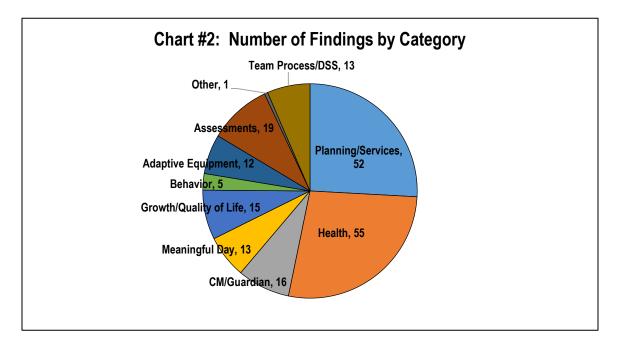
Chart #1: Active Class Member Demographics

There are 5 agencies serving Jackson Class Members in the SW Region:

Tresco serves 16 (48%); Lessons of Life 10 (30%); PRS 3 (9%); Community Options 3 (9%); and Nezzy Care 1 (3%).

B. Most Frequently Identified Findings by Category





C. Repeat Findings

IQR Finding 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 201 Findings and Recommendations in the SW region, 41 Recommendations were identified as having been previously identified as a problem. The following chart identifies, by residential provider, the topical area where repeat findings were most frequently identified.

Area	Community Options (1)	Lessons of Life (3)	Nezzy Care (1)	PRS (1)	Tresco (4)	Total
Adaptive Equipment / Augmentative Communication	0	3	0	0	0	3
Assessments	0	1	0	1	2	4
Case Manager/ Guardian	1	3	0	0	2	6
Expectations of Growth	0	1	0	0	0	1
Health	0	1	3	1	1	6
Meaningful Day	0	3	1	0	1	5
Planning and Services	2	3	2	1	5	13
Team Process	1	2	0	0	0	3
TOTAL	4	17	6	3	11	41

Chart #3: Repeat Findings by Area and Residential Provider

Chart #4: Repeat Findings by Area and Case Management Agency

Area	Peak (2)	SCCM (8)
Adaptive Equipment / Augmentative Communication	3	0
Assessments	1	3
Case Manager/ Guardian	3	3
Expectations of Growth	1	0
Health	1	5
Meaningful Day	1	4
Planning and Services	1	12
Team Process	2	1
TOTAL	13	28

D. Immediate and Special Findings

There were ten (10) Class Members reviewed in the Southwest Region as part of the 2018 IQR. Three of those ten (30% of the sample) were found to have Immediate Needs. Two of those three had issues that triggered Incident Reports. Three additional individuals (30% of the sample) were found to have Special Needs. There were a total of seven Immediate findings and five 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 #5: Immediate and Special Identified Issues by Person, Topic Area and Region

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

Immed	diate/Special	Identified Indivi	dual Issues -	2018 IQF	R SW Reg	ion
Reg	СМ	Res	Day	Immd	Spec	IR
Health C	Oversight Issu	Jes				
SW	SCCM	Tresco	Tresco	X		
Not follo	wing orders	recommendation	ons			
SW	SCCM	Community Options	Community Options		Х	
SW	SCMM	Nezzy Care	Nezzy Care	Х		Х
SW	SCCM	PRS	PRS		Х	
Aspirati	on/CARMP Is	sues				
SW	SCMM	Nezzy Care	Nezzy Care	Х		Х
SW	SCCM	Tresco	Tresco	Х		
SW	SCCM	Tresco	Tresco	Х		
SW	SCCM	PRS	PRS		Х	
	actures/Safet					
SW	SCCM	Tresco	Tresco	Х		

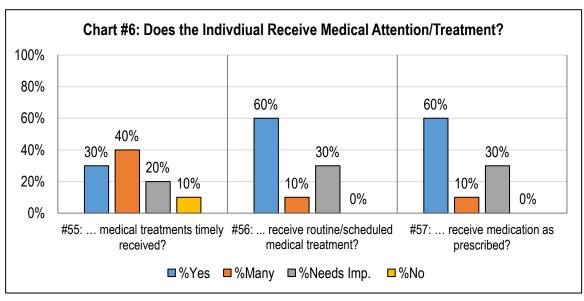
Immed	Immediate/Special Identified Individual Issues – 2018 IQR SW Region						
Reg	CM	Res	Day	Immd	Spec	IR	
SW	Peak	Lessons of Life	Lessons of Life		Х		
Equipm	Equipment Issues						
SW	SCCM	Tresco	Tresco	Х			
SW	SCCM	PRS	PRS		Х		

E. Health, Assessments and Overall Wellness

There is a series of scored questions in the IQR protocol that specifically relate to the medical attention received by the class members. The charts which follow details how those questions were scored in the 2018 review.

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 continue treatment and inform future planning. The IQR also evaluates the assessments needed by the individual and obtained by the teams; those scores are detailed below.

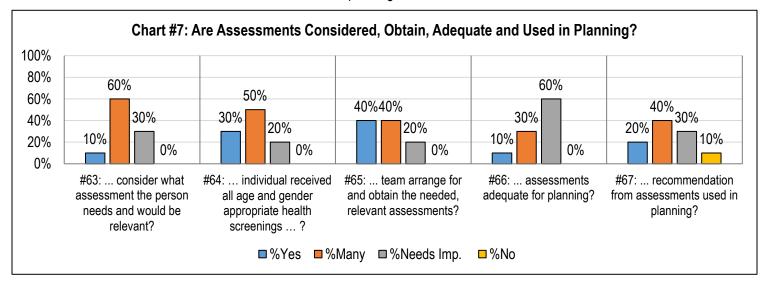
Question #63: Did the team consider what assessment the person needs and would be relevant to the Team's planning efforts?

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 recommendation from assessments used in planning?



Beyond the protocol questions, 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 <u>number of issues found</u>; 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.

		Residential Agency	(# in sample):			Total
Issue	Community Options (1)	Lessons of Life (3)	Nezzy Care (1)	PRS (1)	Tresco (4)	
Needs TEASC/Specialty Assessment	1		1			2
AIMS: Not Current/Missing/Inaccurate		1				1
Audiology/ABR: Not Current/Missing/Inaccurate	1	2		1	2	6
Vision: Not Current/Missing/Inaccurate				1		1
Nutrition: Not Current/Missing/Inaccurate		1		1	2	4
Bone Density: Not Current/Missing/Inaccurate		2				2
Medication not given as prescribed			2			2
Expired medications in Med Box					1	1
MAR/Medication/Dr. Order do not match	1				3	4
Medication not available (Rx or PRN)			5		4	9
Tdap not done (healthfinder.gov)	1	1			1	3
Shingles vaccine not done (healthfinder.gov)	1				1	2
HepC vaccine not done (healthfinder.gov)	1	2			1	4
Colon cancer screen not done (healthfinder.gov)		1			1	2
Flu vaccine not done (healthfinder.gov)				1		1
Labs missing (PSA, pre-Physical, pre-Neuro appt.)				1	2	3
Totals	6	10	8	5	18	47

Chart #8: Type of Issues identified by Residential Agency.

For health care coordination, 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:

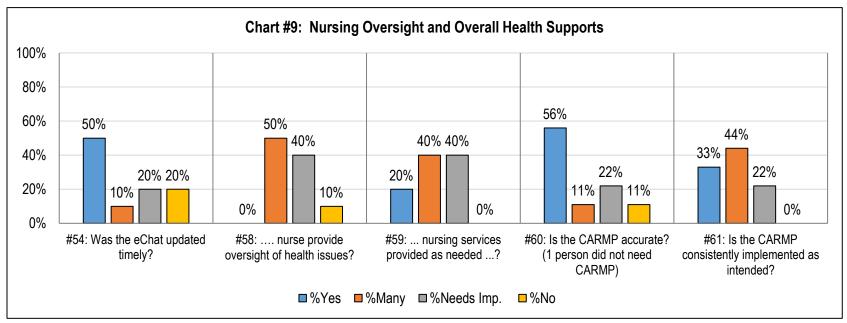
Question #54: Was the eChat updated timely?

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?



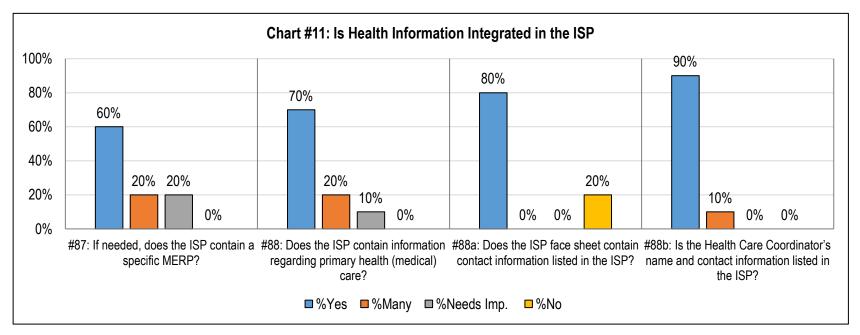
Question #62: Are the person's health supports/needs being adequately addressed?

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 <u>number of issues found</u>; not the number of findings.

Residential Agency (# in sample):					Total	
Issue	Community Options (1)	Lessons of Life (3)	Nezzy Care (1)	PRS (1)	Tresco (4)	
Nursing Quarterly report not completed timely		2	2		12	16
Nursing Annual Report not completed timely			1			1
Nurse report not accurate			1			1
Nurse assessment not provided for review				4		4
Nurse not monitoring as required	1	2		1	3	7
Nurse not familiar with health needs during interview	1				2	3
Nurse not at ISP meeting					1	1
Nurse needs to increase communication					2	2
Totals	2	4	4	5	20	35

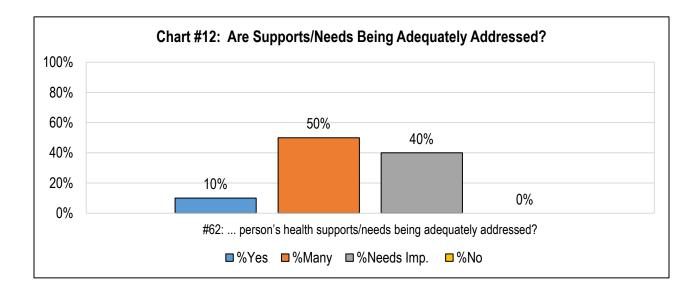
In addition to the issues and questions noted above, the individual's nurse is responsible, with the assistance of the rest of the Team, to assure that the documents presented and created for planning, such as the ISP, are accurate and thorough and contain the needed plans and information required. The protocol questions related to ensuring this is done 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, it does allow for a general 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 10 people in the Southwest review, 1 person did have their health supports/needs adequately addressed. There were five people who had many of their needs addressed, and four are receiving supports that need improvement.



As noted, beyond the scored protocol questions, the Findings Letters 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 <u>number of issues found</u>; 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 individual to whom the findings apply.

		Residential Agency (# in sample):					
Issue	Community Options (1)	Lessons of Life (3)	Nezzy Care (1)	PRS (1)	Tresco (4)		
CARMP inaccurate/incomplete		2		3	8		
MERP not created, but needed			1				
MERP in home not current/not found				1	1		
MERP inaccurate/incomplete	4						
HCP inaccurate/incomplete	4		1		4		
HCP in home not current/not found					9		
eChat has errors/inconsistent/needs review	6	3	3		7		
eChat not updated timely after change in condition					1		
ARST not accurate			1				
Bowel/Bladder input/output not tracked					1		
Weight not tracked		1					
O2 Tracking not complete					1		

Chart #13: Issues Found Which Affect the Adequacy of Health Care Provision, by Provider

	Residential Agency (# in sample):						
Issue	Community Options (1)	Lessons of Life (3)	Nezzy Care (1)	PRS (1)	Tresco (4)		
Tube residual tracking not provided					1		
PT Eval does not identify baseline/measure progress	1				1		
PT Report (Annual/Semi) inaccurate/inadequate	1			1	2		
PT Eval not provided for review/missing			1				
PT not provided, is needed		3					
OT Eval does not identify baseline/measure progress				1			
OT Report (Annual/Semi) inaccurate/inadequate				2	1		
OT Eval not provided for review/missing	1		1				
OT not provided, is needed		3					
SLP Eval does not identify baseline/measure progress	1						
SLP Report (Annual/Semi) inaccurate/inadequate	1	2		1	1		
SLP Eval not provided for review/missing		1					
SLP not provided; is needed		2					
Behavior Eval does not identify baseline/measure progress	1						
Behavior Report (Annual/Semi) inaccurate/inadequate		1	1		3		
Behavior Eval not provided for review/missing							
BSC did not participate in IDT meeting			1				
BSC not provided; is needed		2					
Nutrition Quarterly Reports not provided					2		
Total # of Issues	20	20	10	9	43		

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

Before a plan can be implemented, it must first be created. The ISPs that provide details regarding the individuals' visions and outcomes are to be developed by an Interdisciplinary Team that includes the Individual and those who support that person. This includes the Case Manager, Guardian, the Direct Support Staff, Therapists, Nurse, and any additional persons who know and work the person to implement the Plan including those invited by the person to participate. The 2018 IQR protocol specifically probes many of the aspects of the planning process, including detail of who participates in plan creation. The chart below details how those questions were scored 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 of 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?

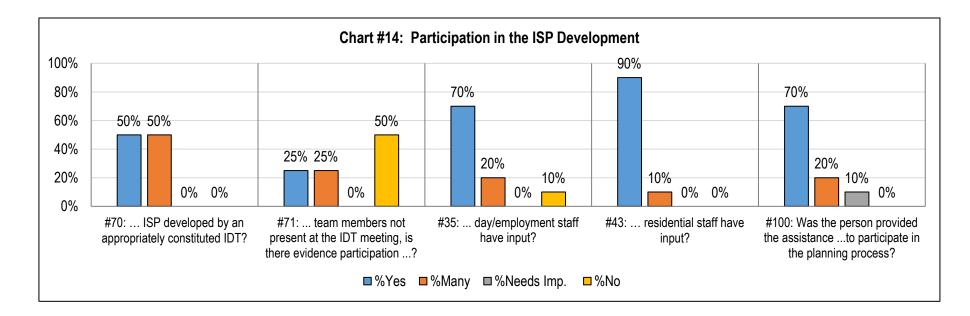


Chart #15: ISP Development Participation, by Provider

		Residential Agency (# in sample):					
Question	Community Options (1)	Lessons of Life (3)	Nezzy Care (1)	PRS (1)	Tresco (4)		
Q# 70	100% Many	67% Yes	100% Many	100% Yes	50% Yes		
		33% Many			50% Many		
Q# 71	100% No		100% Many	1 N/A	50% Yes		
					50% No		
		(3 N/A)			(2 N/A)		
Q# 35	100% Needs Imp	67% Yes	100% Needs Imp	100% Yes	75% Yes		
		33% Needs Imp			25% Many		
Q# 43	100% Many	100% Yes	100% Yes	100% Yes	100% Yes		
Q# 100	100% Yes	67% Yes	100% Yes	100% Yes	50% Yes		
		33% Needs Imp			50% Many		

Chart #16: ISP Development Participation, by Case Management Agency

	Case Management Agency (# in sample):			
Question	Peak (2)	SCCM (8)		
Q# 70	50% Yes	50% Yes		
	50% Many	50% Many		

	Case Management Agency (# in sample):			
Question	Peak (2)	SCCM (8)		
Q# 71	(2 N/A)	25% Yes		
		25% Many		
		50% No		
Q# 35	50% Yes	63% Yes 5		
	50% Needs Imp	13% Many 1		
		25% Needs Imp		
Q# 43	100% Yes	88% Yes		
		13% Many		
Q# 100	50% Yes	75% Yes		
	50% Needs Imp	25% Many		

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 how those questions were scored 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?

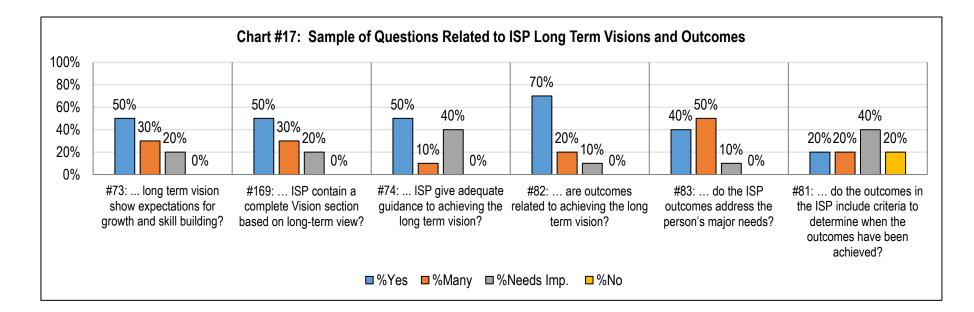


Chart #18: Visior	and Outcome	Scores, b	y Agency
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	Chart #10. Vision and Outcome Scores, by Agency				
	Residential Agency (# in sample):				
Question	Community Options (1)	Lessons of Life (3)	Nezzy Care (1)	PRS (1)	Tresco (4)
Q# 73	100% Needs Imp	67% Yes	100% Yes	100% Needs Imp	50% Yes
		33% Many			50% Many
Q# 169	100% Many	67% Yes	100% Yes	100% Needs Imp	50% Yes
		33% Many			25% Many
					25% Needs Imp
Q# 74	100% Needs Imp	67% Yes	100% Yes	100% Needs Imp	50% Yes
		33% Needs Imp			25% Many
					25% Needs Imp
Q# 82	100% Yes	67% Yes	100% Yes	100% Many	75% Yes
		33% Many			25% Needs Imp
Q# 83	100% Yes	67% Yes	100% Many	100% Many	25% Yes
		33% Needs Imp			75% Many
Q# 81	100% Needs Imp	33% Many	100% Yes	100% Many	25% Yes
		67% No			75% Needs Imp

	Case Management Agency (# in sample):			
Question	Peak (2)	SCCM (8)		
Q# 73	50% Yes	50% Yes		
	50% Many	25% Many		
		25% Needs Imp		
Q# 169	50% Yes	50% Yes		
	50% Many	25% Many		
		25% Needs Imp		
Q# 74	50% Yes	50% Yes		
	50% Needs Imp	38% Many		
		13% Needs Imp		
Q# 82	50% Yes	75% Yes		
	50% Many	13% Many		
		13% Needs Imp		
Q# 83	50% Yes	38% Yes		
	50% Needs Imp	63% Many		
Q# 81	100% No	25% Yes		
		25% Many		
		50% Needs Imp		

Chart #19: Vision and Outcome Scores by Case Management Agency

Additional components of an individual's ISP include Action Steps, which should be written in measurable terms, in sequential order in a way 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 how questions related to action steps and data collection were scored in the 2018 review.

Question #75: Is measurable 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 measurable progress on action steps during the past year?

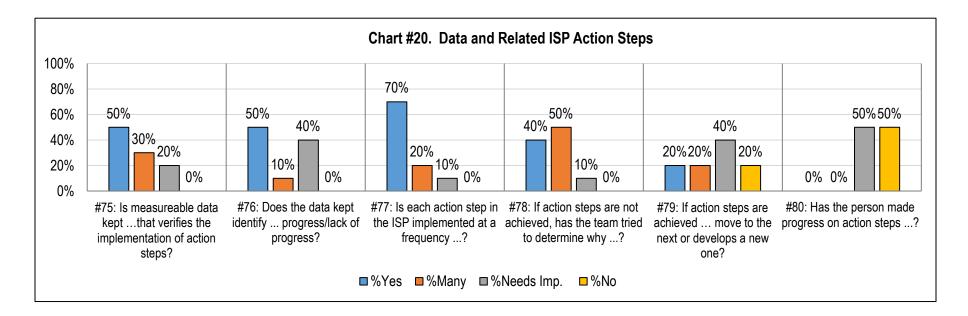


Chart #21: Data and Related ISP Action Step Scores by Agency

	Residential Agency (# in sample):				
Question	Community Options (1)	Lessons of Life (3)	Nezzy Care (1)	PRS (1)	Tresco (4)
Q# 75	100% No	67% Yes 33% No	100% Needs Imp	100% No	75% Needs Imp 25% No
Q# 76	100% No	33% Yes 33% Many 33% No	100% Needs Imp	100% No	50% Needs Imp 50% No
Q# 77	100% No	67% Yes 33% Many	100% Needs Imp	100% No	75% Needs Imp 25% No
Q# 78	100% No	100% Yes	100% Yes	100% No	75% Many 25% No
Q# 79	100% No	33% Yes 67% No	(1 N/A)	(1 N/A)	33% Needs Imp 67% No (1 N/A)
Q# 80	100% No	67% Needs Imp 33% No	100% Needs Imp	100% No	50% Needs Imp 50% No

	Case Management Agency (# in sample):			
Question	Peak (2)	SCCM (8)		
Q# 75	50% Yes	13% Yes		
	50% No	50% Needs Imp		
		38% No		
Q# 76	50% Yes	13% Many		
	50% No	38% Needs Imp		
		50% No		
Q# 77	100% Yes	13% Many		
		50% Needs Imp		
		38% No		
Q# 78	100% Yes	25% Yes		
		38% Many		
		38% No		
Q# 79	100% No	20% Yes		
		20% Needs Imp		
		60% No		
		(3 N/A)		
Q# 80	50% Needs Imp	50% Needs Imp		
	50% No	50% No		

Chart #22: Data and Related Action Step Scores by Case Management Agency

In addition to the components listed above, the Teaching and Support Strategies (TSS) 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?

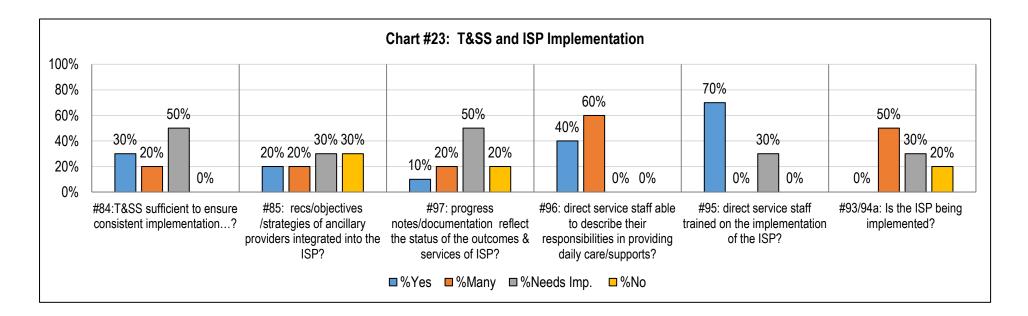


Chart #24: TSS and ISP Implementation Scores by A

	Residential Agency (# in sample):				
Question	Community Options (1)	Lessons of Life (3)	Nezzy Care (1)	ej. PRS (1)	Tresco (4)
#84	100% Needs Imp	67% Yes 33% Needs Imp	100% Needs Imp	100% Yes	50% Many 50% Needs Imp
#85	100% No	33% Yes 33% Needs Imp 33% No	100% No	100% Yes	50% Many 50% Needs Imp
#97	100% Needs Imp	33% Yes 33% Needs Imp 33% No	100% Needs Imp	100% Needs Imp	50% Many 25% Needs Imp 25% No
#96	100% Many	33% Yes 67% Many	100% Many	100% Many	75% Yes 25% Many
#95	100% Needs Imp	67% Yes 33% Needs Imp	100% Needs Imp	100% Yes	100% Yes
#94a	100% Many	67% Many 33% No	100% Needs Imp	100% Needs Imp	50% Many 25% Needs Imp 25% No

	Case Management Agency (# in sample):			
Question	Peak (2)	SCCM (8)		
#84	50% Yes	25% Yes		
	50% Needs Imp	25% Many		
		50% Needs Imp		
#85	50% Yes	13% Yes		
	50% No	25% Many		
		38% Needs Imp		
		13% No		
#97	50% Yes	25% Many		
	50% No	63% Needs Imp		
		13% No		
#96	100% Many	50% Yes		
	-	50% Many		
#95	50% Yes	75% Yes		
	50% Needs Imp	25% Needs Imp		
#94a	50% Many	50% Many		
	50% No	38% Needs Imp		
		13% No		

Chart #25: TSS and ISP Implementation Scores by Case Management Agency

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 these individuals 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?

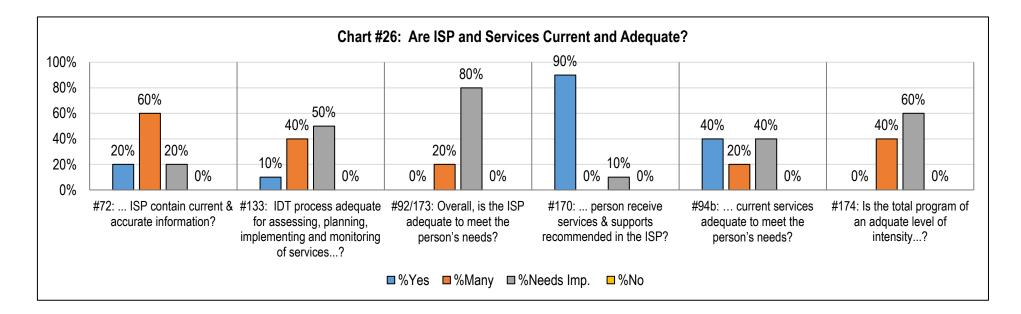


Chart #27: ISP Content and Adequacy Scores, by Agency

	Residential Agency (# in sample):				
Question	Community Options (1)	Lessons of Life (3)	Nezzy Care (1)	PRS (1)	Tresco (4)
#72	100% Needs Imp	67% Many	100% Yes	100% Many	25% Yes
		33% Needs Imp			75% Many
#133	100% Needs Imp	67% Many	100% Needs Imp	100% Many	25% Yes
		33% Needs Imp			25% Many
					50% Needs Imp
#92/173	100% Needs Imp	67% Many	100% Needs Imp	100% Needs Imp	100% Needs Imp
		33% Needs Imp			
#170	100% Yes	100% Yes	100% Yes	100% Yes	75% Yes
					25% Needs Imp
#94b	100% Yes	67% Yes	100% Needs Imp	100% Many	25% Yes
		33% Needs Imp			25% Many
					50% Needs Imp
#174	100% Many	67% Many	100% Needs Imp	100% Needs Imp	25% Many
		33% Needs Imp			75% Needs Imp

	Case Management Age	ency (# in sample):
Question	Peak (2)	SCCM (8)
#72	50% Many	25% Yes
	50% Needs Imp	63% Many
		13% Needs Imp
#133	50% Many	13% Yes
	50% Needs Imp	38% Many
		50% Needs Imp
#92/173	50% Many	13% Many
	50% Needs Imp	88% Needs Imp
#170	100% Yes	88% Yes
		13% Needs Imp
#94b	50% Yes	38% Yes
	50% Needs Imp	25% Many
		38% Needs Imp
#174	50% Many	38% Many
	50% Needs Imp	63% Needs Imp

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

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 independence and access to needed services and supports. While the number of findings in the 2018 Southwest Region IQR in the Case Management area are the third highest of the findings area, the region scored well on some of the case management questions. The charts below detail how the questions are scored.

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?

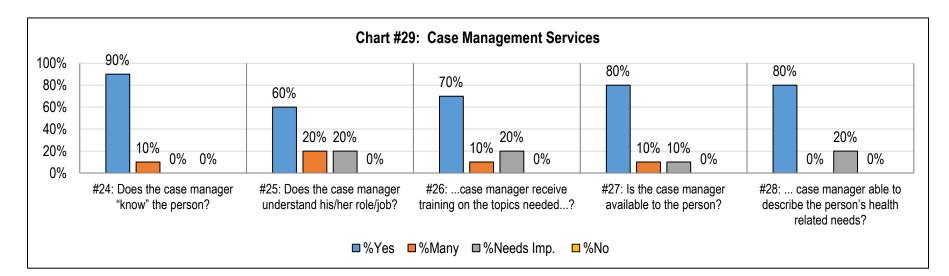


Chart #30: Case Management Scores, by Case Management Agency

	Case Management Agency (# in sample):			
Question	Peak (2)	SCCM (8)		
Q# 24	50% Yes	100% Yes		
	50% Many			
Q# 25	50% Yes	63% Yes		
	50% Needs Imp	25% Many		
		13% Needs Imp		
Q# 26	50% Yes	75% Yes		
	50% Needs Imp	13% Many		
		13% Needs Imp		
Q# 27	50% Yes	88% Yes		
	50% Many	13% Needs Imp		
Q# 28	50% Yes	88% Yes		
	50% Needs Imp	13% Needs Imp		

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?

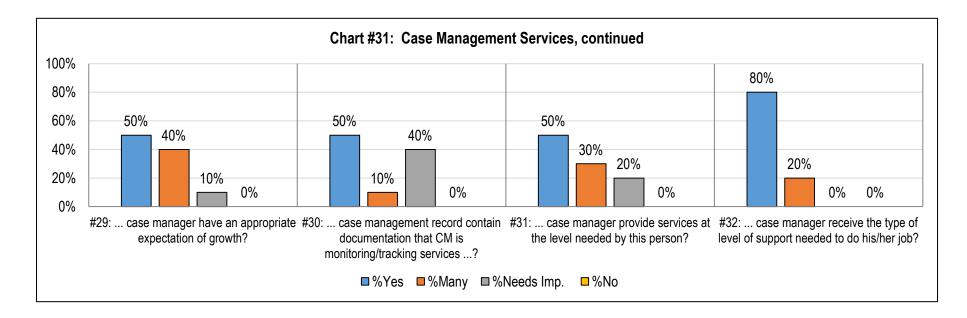


Chart #32: Case Management Scores, by Case Management Agency

	Case Management Agency (# in sample):			
Question	Peak (2)	SCCM (8)		
Q# 29	50% Many	63% Yes		
	50% Needs Imp	38% Many		
Q# 30	50% Yes	50% Yes		
	50% Needs Imp	13% Many		
		38% Needs Imp		
Q# 31	50% Yes	50% Yes		
	50% Needs Imp	38% Many		
		13% Needs Imp		
Q# 32	50% Yes	88% Yes		
	50% Many	13% Many		

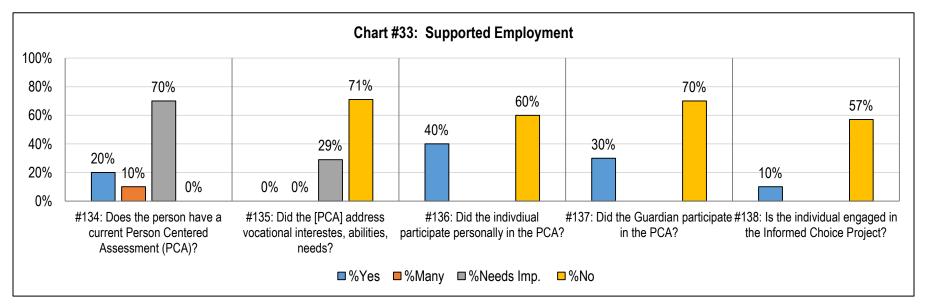
H. Supported Employment

Access to competitive integrated employment enables an individual to engage in community life, control personal resources, increase self-sufficiency and receive services in the community. 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 Southwest 2018 IQR in Supported Employment related areas.

1. Components of Informed Choice: <u>Assessment</u>

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?



	Residential Agency (# in sample):					
Question	Community Options (1)	Lessons of Life (3)	Nezzy Care (1)	PRS (1)	Tresco (4)	
#134	100% Needs Imp	100% Needs Imp	100% Needs Imp	100% Needs Imp	50% Yes 25% Many 25% Needs Imp	
#135	100% No	50% Needs Imp 50% No (1 N/A)	100% Needs Imp	100% No	100% No (2 N/A)	
#136	100% No	100% No	100% Yes	100% No	75% Yes 25% No	
#137	100% No	100% No	100% No	100% No	75% Yes 25% No	
#138	100% No	100% No	100% Yes	100% No	100% No	

Chart #34: Supported Employment Scores by Provider Agency

Chart #35: Supported Employment Scores by Case Management Agency

Cas	Case Management Agency (# in sample):				
Question	Peak (2)	SCCM (8)			
#134	100% Needs Imp	25% Yes			
		13% Many			
		63% Needs Imp			
#135	100% No	33% Needs Imp			
	(1 N/A)	67% No			
		(2 N/A)			
#136	100% No	50% Yes			
		50% No			
#137	100% No	38% Yes			
		63% No			
#138	100% No	13% Yes			
		88% No			

2. Components of Informed Choice: 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?

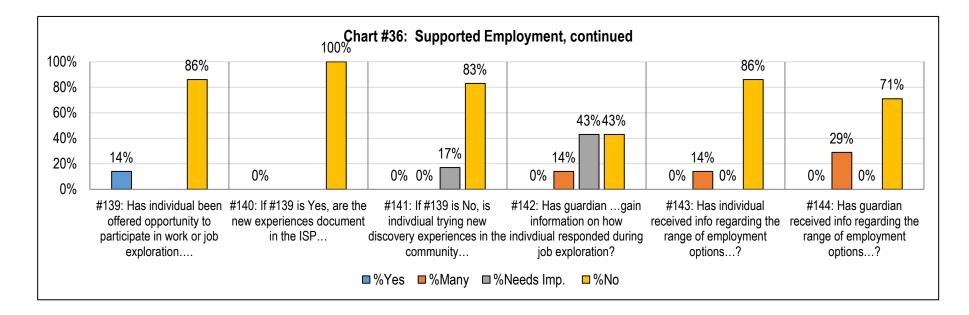


Chart #37: Supported Employment Scores by Provider Agency

	Residential Agency (# in sample):					
Question	Community Options (1)	Lessons of Life (3)	Nezzy Care (1)	PRS (1)	Tresco (4)	
#139	100% No	100% No	100% No	100% Yes	100% No	
		(1 N/A)			(2 N/A)	
#140	(1 N/A)	(3 N/A)	(1 N/A)	100% No	(4 N/A)	
#141	100% No	100% No	100% Needs Imp	(1 N/A)	100% No	
		(1 N/A)			(2 N/A)	
#142	100% No	50% Needs Imp	100% Many	100% Needs Imp	50% Needs Imp	
		50% No			50% No	
		(1 N/A)			(2 N/A)	
#143	100% No	100% No	100% Many	100% No	100% No	
		(1 N/A)			(2 N/A)	

	Residential Agency (# in sample):				
Question	Community Options (1)	Lessons of Life (3)	Nezzy Care (1)	PRS (1)	Tresco (4)
#144	100% No	100% No	100% Many	100% Many	100% No
		(1 N/A)			(2 N/A)

Chart #37: Supported Employment Scores by Case Management Agency

Case	Case Management Agency (# in sample):				
Question	Peak (2)	SCCM (8)			
#139	100% No	17% Yes			
	(1 N/A)	83% No			
#140	(2 N/A)	100% No			
		(7 N/A)			
#141	100% No	20% Needs Imp			
	(1 N/A)	80% No			
		(3 N/A)			
#142	100% No	17% Many			
	(1 N/A)	50% Needs Imp			
		33% No			
		(2 N/A)			
#143	100% No	17% Many			
	(1 N/A)	83% No			
		(2 N/A)			
#144	100% No	33% Many			
	(1 N/A)	67% No			
		(2 N/A)			

3. Components of Informed Choice: Employment Barriers

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?

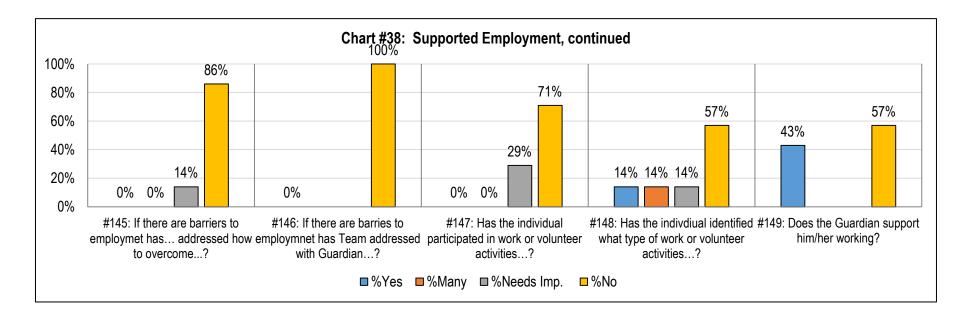


Chart #39: Supported Employment Scores by Provider Agency

	Residential Agency (# in sample):					
Question	Community Options (1)	Lessons of Life (3)	Nezzy Care (1)	PRS (1)	Tresco (4)	
#145	100% No	100% No (1 N/A)	100% No	100% No	50% Needs Imp 50% No (2 N/A)	
#146	100% No	100% No (1 N/A)	100% No	100% No	100% No (2 N/A)	
#147	100% No	100% No (1 N/A)	100% No	100% Needs Imp	50% Needs Imp 50% No (2 N/A)	
#148	100% No	100% No (1 N/A)	100% Many	100% Needs Imp	50% Yes 50% No (2 N/A)	
#149	100% No	50% Yes 50% No (1 N/A)	100% Yes	100% No	50% Yes 50% No (2 N/A)	

Case Management Agency (# in sample):			
Question	Peak (2)	SCCM (8)	
#145	100% No	17% Needs Imp	
	(1 N/A)	83% No	
		(2 N/A)	
#146	100% No	100% No	
	(1 N/A)	(2 N/A)	
#147	100% No	33% Needs Imp	
	(1 N/A)	67% No	
		(2 N/A)	
#148	100% No	17% Yes	
	(1 N/A)	17% Many	
		17% Needs Imp	
		50% No	
		(2 N/A)	
#149	100% Yes	33% Yes	
	(1 N/A)	67% No	
		(2 N/A)	

Chart #40: Supported Employment Scores by Case Management Agency

4. JCMs Involved in Supported Employment

Question #150. Is (Name) is 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?

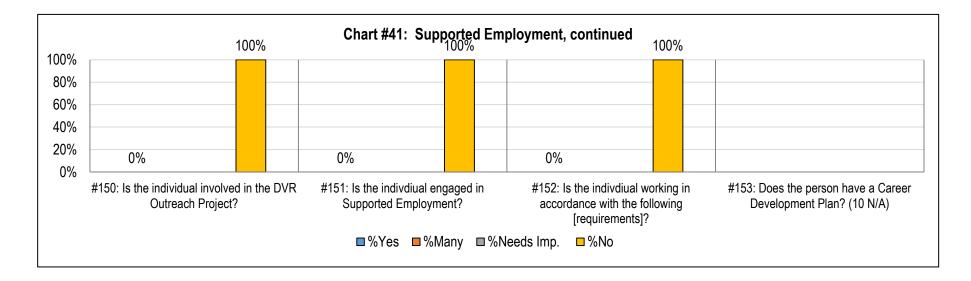


Chart #42: Supported Employment Scores by Provider Agency

	Residential Agency (# in sample):				
Question	Community Options (1)	Lessons of Life (3)	Nezzy Care (1)	PRS (1)	Tresco (4)
#150	100% No	100% No	100% No	100% No	100% No
#151	100% No	100% No (1 N/A)	100% No	100% No	100% No (2 N/A)
#152	100% No	100% No (1 N/A)	100% No	100% No	100% No (2 N/A)
#153	(1 N/A)	(3 N/A)	(1 N/A)	(1 N/A)	(4 N/A)

Chart #43: Supported Employment Scores by Case Management Agency

Case Management Agency (# in sample):				
Question	Peak (2)	SCCM (8)		
#150	100% No	100% No		
#151	100% No	100% No		
	(1 N/A)	(2 N/A)		
#152	100% No	100% No		
	(1 N/A)	(2 N/A)		
#153	(2 N/A)	(8 N/A)		

I. IQR Scored Protocol Questions

Below are all of the questions in the protocol and the scores of the Southwest Region. 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	90% Yes (9) 10% Many (1)
25. Does the case manager understand his/her role/job? CPRQ27 '17IQR#16	60% Yes (6) 20% Many (2) 20% Needs Imp (2)
26. Did the case manager receive training on the topics needed to assist him/her in meeting the needs of this person? CPRQ28	70% Yes (7) 10% Many (1) 20% Needs Imp (2)
27. Is the case manager available to the person? CPRQ29; '17IQR#16a	80% Yes (8) 10% Many (1) 10% Needs Imp (1)
28. Was the case manager able to describe the person's health related needs? CPRQ30	80% Yes (8) 20% Needs Imp (2)
29. Does the case manager have an appropriate expectation of growth for this person? CPRQ31	50% Yes (5) 40% Many (4) 10% Needs Imp (1)
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	50% Yes (5) 10% Many (1) 40% Needs Imp (4)
31. Does the case manager provide case management services at the level needed by this person? CPRQ33; '17IQR#16c	50% Yes (5) 30% Many (3) 20% Needs Imp (2)
32. Does the case manager receive the type and level of support needed to do his/her job? CPRQ34	80% Yes (8) 20% Many (2)
EMPLOYMENT AND DAY	

Chart #44: All IQR Scored Questions

Question	2018 (sample=10)
33. Does the direct services staff "know" the person? CPRQ35; '17IQR#8a	90% Yes (9) 10% Many (1)
34. Does the direct service staff have input into the person's ISP? CPRQ36	70% Yes (7) 20% Many (2) 10% No (1)
35. Did the direct service staff receive training on implementing this person's ISP? CPRQ37	60% Yes (6) 10% Many (1) 30% Needs Imp (3
36. Was the direct service staff able to describe this person's health-related needs? CPRQ38	70% Yes (7) 10% Many (1) 10% Needs Imp (1 10% No (1)
37. Was the direct service staff able to describe his/her responsibilities in providing daily care/supports to the person? CPRQ39	50% Yes (5) 40% Many (4) 10% Needs Imp (1
37a. Was the direct service staff able to provide specific information regarding the person's daily activities? CPRQ39a	80% Yes (8) 20% Many (2)
37b. Can the direct service staff describe his/her responsibilities in implementing this person's ISP, including outcomes, action plans, and WDSIs? CPRQ39b	60% Yes (6) 10% Many (1) 30% Needs Imp (3
RESIDENTIAL	
42. Does the residential direct services staff "know" the person? CPRQ44; '17IQR#8b	90% Yes (9) 10% Needs Imp (1
43. Does the direct service staff have input into the person's ISP? CPRQ45	90% Yes (9) 10% Many (1)
44. Did the direct service staff receive training on implementing this person's ISP? CPRQ46	60% Yes (6) 30% Many (3) 10% Needs Imp (1
45. Is the residence safe for individuals (void of hazards)? CPRQ47	90% Yes (9) 10% Needs Imp (1
46. Was the residential direct service staff able to describe this person's health-related needs? CPRQ48	70% Yes (7) 20% Many (2) 10% Needs Imp (1
47. Was the direct service staff able to describe his/her responsibilities in providing daily care/supports to the person? CPRQ49	60% Yes (6)

Question	2018 (sample=10)
	40% Many (4)
47a. Was the direct service staff able to provide specific information regarding the person's daily activities? CPRQ49a	100% Yes (10)
47b. Can the direct service staff describe his/her responsibilities in implementing this person's ISP, including outcomes, action plans, and WDSIs? CPRQ49b	60% Yes (6) 30% Many (3) 10% Needs Imp (1)
48. Did the residential direct service staff have training in the ISP process? CPRQ50	80% Yes (8) 10% Many (1) 10% Needs Imp (1)
49. Did the direct service staff have training on the provider's complaint process and how to report abuse, neglect and exploitation? CPRQ51	90% Yes (9) 10% Many (1)
49a. Did the direct service staff have training on the provider's complaint process? CPRQ51a	100% Yes (10)
49b. Did the direct service staff have training on how and to whom to report abuse, neglect and exploitation? CPRQ51b	90% Yes (9) 10% Needs Imp (1)
50. Does the residential direct service staff have an appropriate expectation of growth for this person? CPRQ52	70% Yes (7) 30% Many (3)
51. Does the person's residential environment offer a minimal level of quality of life? CPRQ53	60% Yes (6) 40% Many (4)
HEALTH	
52. Overall, were the team members interviewed able to describe the person's health-related needs? CPRQ54; '17IQR#21b	60% Yes (6) 20% Many (2) 20% Needs Imp (2)
53. Is there evidence that the IDT discussed the person's health related issues? CPRQ55; '17IQR#21	60% Yes (6) 20% Many (2) 20% Needs Imp (2)
54. Was the eChat updated timely? '17IQR#18g	50% Yes (5) 10% Many (1) 20% Needs Imp (2) 20% No (2)
55. Are all of the individual's needed medical treatments timely received? 17IQR#19	30% Yes (3) 40% Many (4) 20% Needs Imp (2) 10% No (1)

Question	2018 (sample=10)
56. Does the individual receive routine/scheduled medical treatment? 17IQR#19a	60% Yes (6) 10% Many (1) 30% Needs Imp (3)
57. Does the individual receive medication as prescribed? 17IQR#19e	60% Yes (6) 10% Many (1) 30% Needs Imp (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 50% Many (5) 40% Needs Imp (4) 10% No (1)
59. Are nursing services provided as needed by the individual? 17IQR#20	20% Yes (2) 40% Many (4) 40% Needs Imp (4)
60. Is the CARMP is accurate? '17IQR#21f	56% Yes (5) 11% Many (1) 22% Needs Imp (2) 11% No (1) (1 N/A)
61. Is the CARMP consistently implemented as intended?	33% Yes (3) 44% Many (4) 22% Needs Imp (2) (1 N/A)
62. Are the person's health supports/needs being adequately addressed? CPRQ56; '17IQR#19	10% Yes (1) 50% Many (5) 40% Needs Imp (4)
ASSESSMENTS	
63. Did the team consider what assessments the person needs and would be relevant to the team's planning efforts? CPRQ57	10% Yes (1) 60% Many (6) 30% Needs Imp (3)
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	30% Yes (3) 50% Many (5) 20% Needs Imp (2)
65. Did the team arrange for and obtain the needed, relevant assessments? CPRQ58; '17IQR#18	40% Yes (4) 40% Many (4) 20% Needs Imp (2)

Question	2018 (sample=10)
66. Are the assessments adequate for planning? CPRQ59; '17IQR#4f	10% Yes (1) 30% Many (3) 60% Needs Imp (6)
67. Were the recommendations from assessments used in planning? CPRQ60; '17IQR#5	20% Yes (2) 40% Many (4) 30% Needs Imp (3) 10% 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	25% Yes (1) 50% Needs Imp (2) 25% No (1) (6 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 (10)
70. Was the ISP developed by an appropriately constituted IDT? CPRQ62; '17IQR#3	50% Yes (5) 50% Many (5)
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	25% Yes (1) 25% Many (1) 50% No (2) (6 N/A)
72. Does my ISP contain current and accurate information? '17IQR#6	20% Yes (2) 60% Many (6) 20% Needs Imp (2)
73. Overall, does the long term vision show expectations for growth and skill building? CPRQ64; '17IQR#7b	50% Yes (5) 30% Many (3) 20% Needs Imp (2)
74. Overall, does the ISP give adequate guidance to achieving the person's long-term vision? CPRQ65; '17IQR#7c	50% Yes (5) 10% Many (1) 40% Needs Imp (4)
75. Is measurable data kept which verifies the consistent implementation of each of the action steps? '17IQR#12a	20% Yes (2) 40% Needs Imp (4) 40% No (4)
76. Does the data kept identify what the person does so a determination regarding progress/lack of progress? '17IQR#12b	10% Yes (1) 10% Many (1) 30% Needs Imp (3) 50% No (5)

Question	2018 (sample=10)
77. Is each action step in the ISP implemented at a frequency that enables the person to learn new skills? '17IQR#12c	20% Yes (2) 10% Many (1) 40% Needs Imp (4) 30% No (3)
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	40% Yes (4) 30% Many (3) 30% No (3)
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) 14% Needs Imp (1) 71% No (5) (3 N/A)
80. Has the person made measurable progress on actions steps during this past year?'17IQR#13b	0% Yes 50% Needs Imp (5) 50% No (5)
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	20% Yes (2) 20% Many (2) 40% Needs Imp (4) 20% No (2)
82. Overall, are the ISP outcomes related to achieving the person's long-term vision? CPRQ68; '17IQR#7d	70% Yes (7) 20% Many (2) 10% Needs Imp (1)
83. Overall, do the ISP outcomes address the person's major needs? CPRQ69; '17IQR#7g	40% Yes (4) 50% Many (5) 10% Needs Imp (1)
84. Overall, are the Teaching and Support Strategies sufficient to ensure consistent implementation of the services planned? CPRQ71; '17IQR#7i	30% Yes (3) 20% Many (2) 50% Needs Imp (5)
85. Overall, are the recommendations and/or objectives/strategies of ancillary providers integrated into the ISP? CPRQ72; '17IQR#7m	20% Yes (2) 20% Many (2) 30% Needs Imp (3) 30% No (3)
86. Has the person made measurable progress in therapy this year? '17IQR#13a	10% Yes (1) 10% Many (1) 70% Need Imp (7) 10% No (1)
87. If needed, does the ISP contain a specific Medical Emergency Response Plan (MERP)? CPRQ73b '17IQR#20c	60% Yes (6) 20% Many (2)

Question	2018 (sample=10)
	20% Needs Imp (2)
88. Does the ISP contain information regarding primary health (medical) care? CPRQ74	70% Yes (7) 20% Many (2) 10% Needs Imp (1)
88a. Does the ISP face sheet contain contact information for the PCP? CPRQ74a	80% Yes (8) 20% No (2)
88b. Is the Healthcare coordinator's name and contact information listed in the ISP? CPRQ74b	90% Yes (9) 10% Many (1)
89. Does the ISP reflect how the person will obtain prescribed medications? CPRQ76	100% Yes (10)
90. Does the ISP reflect how the person will get to work/day activities, shopping, and social activities? CPRQ75	70% Yes (7) 10% Many (1) 20% Needs Imp (2)
91. Does the ISP contain a list of adaptive equipment needed and who will provide it? CPRQ77; '17IQR#25a	30% Yes (3) 30% Many (3) 30% Needs Imp (3) 10% No (1)
92. Overall, is the ISP adequate to meet the person's needs? CPRQ78; '17IQR#7	0% Yes 20% Many (2) 80% Needs Imp (8)
93. Is the ISP being implemented? (If 92 is "3") CPRQ79 '17IQR#12	(10 N/A)
94a. Is the ISP being implemented? (If 92 is "0", "1", or "2") CPRQ80a '17IQR#12	0% Yes 50% Many (5) 30% Needs Imp (3) 20% No (2)
94b. Are current services adequate to meet the person's needs? CPRQ80b '17IQR#11	40% Yes (4) 20% Many (2) 40% Needs Imp (4)
95. Overall, was the direct service staff trained on the implementation of this person's ISP? CPRQ81	70% Yes (7) 30% Needs Imp (3)
96. Overall, were the direct service staff able to describe their responsibilities in providing daily care/supports to the person? CPRQ82;	40% Yes (4) 60% Many (6)
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	10% Yes (1) 20% Many (2)

Question	2018 (sample=10)
	50% Needs Imp (5) 20% No (2)
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	10% Yes (1) 60% Many (6) 30% Needs Imp (3)
99. Overall, does the IDT have an appropriate expectation of growth for this person? CPRQ85; '17IQR#8d	60% Yes (6) 30% Many (3) 10% Needs Imp (1)
100. Was the person provided the assistance and support needed to participate meaningfully in the planning process? CPRQ86; '17IQR#1b	70% Yes (7) 20% Many (2) 10% Needs Imp (1)
101. Is the person offered a range of opportunities for participation in each life area? CPRQ87	50% Yes (5) 20% Many (2) 20% Needs Imp (2) 10% No (1)
102. Does the person have the opportunity to make informed choices? CPRQ88; '17IQR#30	67% Yes (2) 33% Needs Imp (1) (7 CND)
102a. About where and with whom to live? CPRQ89; '17IQR#23c	0% Yes 50% Many (1) 50% Needs Imp (1) (8 CND)
102b. About where and with whom to work/spend his/her day? CPRQ90; '17IQR#23d	33% Yes (1) 33% Needs Imp (1) 33% No (1) (7 CND)
102c. About where and with whom to socialize/spend leisure time? CPRQ91	100% Yes (3) (7 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	100% Yes (10)
104. Overall, were the direct service staff interviewed trained on the provider's complaint process? CPRQ93*	80% Yes (8) 10% Many (1) 10% Needs Imp (1)

Question	2018 (sample=10)
105. Overall, were all team members interviewed trained or knowledgeable on how to report abuse, neglect and exploitation? CPR 93*; '17IQR#35a	50% Yes (5) 20% Many (2) 30% Needs Imp (3
106. Does this person and/or guardian have access to the complaint processes/procedures? CPRQ94	100% Yes (10)
107. Does the individual have restrictions that should be reviewed by a Human Rights Committee? '17IQR#34h	90% Yes (9) 10% No (1)
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	89% Yes (8) 11% Needs Imp (1 (1 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	0% Yes 22% Many (2) 11% Needs Imp (67% No (6) (1 N/A)
110. Is the person protected from abuse, neglect and exploitation? '17IQR#35	50% Yes (5) 40% Many (4) 10% Needs Imp (
111. Have all incidents of suspected abuse, neglect and exploitation been reported and investigated? '17IQR#35b	88% Yes (7) 13% Many (1) (2 N/A)
112. Is the individual safe? '17IQR#24	70% Yes (7) 10% Many (1) 20% Needs Imp (
113. What is the level of participation of the legal guardian in this person's life and service planning? CPRQ 97; '17IQR#15a	40% Active (4) 50% Moderate (5 10% Limited (1)
114. If the person is retired, does he/she have opportunities to engage in activities of interest during the day? CPRQ 100; '17IQR#29b	67% Yes (2) 33% Many (1) (7 N/A)
115. Does the person have daily choices/appropriate autonomy over his/her life? CPRQ101 '17IQR#30	70% Yes (7) 10% Many (1) 20% Needs Imp (
116. Have the person's cultural preferences been accommodated? CPRQ102; '17IQR#31e	100% Yes (10)
117. Is the person treated with dignity and respect? CPRQ103; '17IQR#34c	40% Yes (4) 30% Many (3)

Question	2018 (sample=10)
	30% Needs Imp (3)
118. Does the person have food and drink available according to their specific nutritional needs and recommendations? CPRQ108; '17IQR#23e	90% Yes (9) 10% Needs Imp (1)
119. Does the person have sufficient personal money? CPRQ110 '17IQR#34f	90% Yes (9) 10% Many (1)
120. Does the person get along with their day program/employment provider staff? CPRQ111	100% Yes (8) (2 CND)
121. Does the person get along with their residential provider staff? CPRQ112	100% Yes (7) (3 CND)
TEAM PROCESS	
122. Are the individual members of the IDT following up on their responsibilities? CPRQ 114; '17IQR#10	30% Yes (3) 40% Maybe (4) 30% Needs Imp (3)
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	75% Yes (3) 25% Many (1) (6 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	60% Yes (6) 30% Many (3) 10% No (1)
125. Is there adequate communication among team members between meetings to ensure the person's program can be/is being implemented? CPRQ117	70% Yes (7) 20% Many (2) 10% Needs Imp (1)
126. Do you recommend Dispute Resolution for this IDT? CPRQ118	0% Yes 100% No (10)
127. Is there evidence or documentation of physical regression in the last year? CPRQ119 '17IQR#14a	60% Yes (6) 40% No (4)
128. Is there evidence or documentation of behavioral or functional regression in the last year? CPRQ120; '17IQR14c	20% Yes (2) 80% No (8)
129. If #127 OR #128 is scored "Yes", is the IDT adequately addressing the regression? CPRQ121;	83% Yes (5) 17% No (1) (4 N/A)
130. Has the person changed residential/day services in the last year? CPRQ122	20% Yes (2) 80% No (8)

Question	2018 (sample=10)
131. If #130 is Yes, was the change Planned by the IDT? CPRQ122a	100% Yes (2) (8 N/A)
132. If #130 is Yes, did the change meet the person's needs and/or preferences? CPRQ122b	100% Yes (2) (8 N/A)
133. Has the IDT process been adequate for assessing, planning, implementing and monitoring of services for this person? CPRQ123; '17IQR#7n	10% Yes (1) 40% Many (4) 50% Needs Imp (5)
SUPPORTED EMPLOYMENT	
134. Does (Name) have a current Person Centered Assessment?	20% Yes (2) 10% Many (1) 70% Needs Imp (7)
135. Did this assessment address vocational interests, abilities and needs? CPRQ126; '17IQR#26a	0% Yes 29% Needs Imp (2) 71% No (5) (3 N/A)
136. Did the individual participate personally in the Person Centered Assessment?	40% Yes (4) 60% No (6)
137. Did the Guardian participate in the Person Centered Assessment?	30% Yes (3) 70% No (7)
138. Is the individual engaged in the Informed Choice Project?	10% Yes (1) 90% No (9)
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	14% Yes (1) 86% No (6) (3 N/A)
140. If #139 is Yes, are these new experiences clearly documented in the ISP Work, Education and/or Volunteer History section?	0% Yes 100% No (1) (9 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 17% Needs Imp (1) 83% No (5) (4 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?	0% Yes 14% Many (1) 43% Needs Imp (3) 43% No (3)

Question	2018 (sample=10)
	(3 N/A)
143. Has the individual received information regarding the range of employment options available to him/her? '17IQR#26c	0% Yes 14% Many (1) 86% No (6) (3 N/A)
144. Has the Guardian received information regarding the range of employment options available for the individual?	0% Yes 29% Many (2) 71% No (5) (3 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	0% Yes 14% Needs Imp (1) 86% No (6) (3 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?	0% Yes 100% No (7) (3 N/A)
147. Has the individual participated in work or volunteer activities during the past year?	0% Yes 29% Needs Imp (2) 71% No (5) (3 N/A)
148. Has the individual identified what type of work or volunteer activities he/she would like to do?	14% Yes (1) 14% Many (1) 14% Needs Imp (1) 57% No (4) (3 N/A)
149. Does the Guardian support him/her working?	43% Yes (3) 57% No (4) (3 N/A)
150. Is (Name) is involved in the DVR Outreach Project?	0% Yes 100% No (10)
151. Is the individual engaged in Supported Employment? CPRQ129	0% Yes 100% No (7) (3 N/A)
152. Is the individual Working in accordance with the following: CPRQ 130 '17IQR#28	0% Yes 100% No (7) (3 N/A)

Question	2018 (sample=10)
153. Does the person have a Career Development Plan? CPRQ128	(10 N/A)
BEHAVIOR	
154. Is the person considered by the IDT to need behavior services now? CPRQ131; '17IQR#5d	70% Yes (7) 30% No (3)
155. Does the person need behavior services now? CPRQ132 '17IQR#11e	90% Yes (9) 10% No (1)
156. Have behavioral assessments been completed? CPRQ133	75% Yes (6) 13% Many (1) 13% No (1) (2 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	88% Yes (7) 13% No (1) (2 N/A)
158. Has the staff been trained on the Positive Behavior Support Plan? CPRQ135; '17IQR#10d	63% Yes (5) 13% Many (1) 13% Needs Imp (1) 13% No (1) (2 N/A)
159. If needed, does the person have a Behavior Crisis Intervention Plan that meets the person's needs? CPRQ 73a; '17IQR#5h	80% Yes (4) 20% No (1) (5 N/A)
160. Does the person receive behavioral services consistent with his/her needs? CPRQ 136 '17IQR#5i	50% Yes (4) 25% Many (2) 13% Needs Imp (1) 13% No (1) (2 N/A)
161. Are behavior support services integrated into the ISP? CPRQ 137; '17IQR#11d	13% Yes (1) 13% Many (1) 50% Needs Imp (4) 25% No (2) (2 NA)
ADAPTIVE EQUIPMENT / AUGMENTATIVE COMMUNICATION	
162. Has the person received all adaptive equipment needed? CPRQ138; '17IQR#25b	40% Yes (4) 30% Many (3)

Question	2018 (sample=10)
	20% Needs Imp (2) 10% No (1)
163. Has the person received all assistive technology needed? CPRQ139; '17IQR#25c	63% Yes (5) 13% Many (1) 13% Needs Imp (1) 13% No (1) (2 N/A)
164. Do direct care staff know how to appropriately help the person use his/her equipment? '17IQR#25f	89% Yes (8) 11% Many (1) (1 N/A)
165. Is the person's equipment and technology in good repair?'17IQR#25d	60% Yes (6) 30% Many (3) 10% Needs Imp (1)
166. Is the person's equipment/technology available in all appropriate environments? '17IQR#25e	60% Yes (6) 20% Many (2) 20% Needs Imp (2)
167. Has the person received all communication assessments and services? CPRQ140 ; '17IQR#10b	38% Yes (3) 25% Many (2) 25% Needs Imp (2) 13% No (1) (2 N/A)
INDIVIDUAL SERVICE PLANNING	
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#70	80% Yes (8) 20% Needs Imp (2)
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 (5) 30% Many (3) 20% Needs Imp (2)
170. Does the person receive services and supports recommended in the ISP? CPRQ143; '17IQR#11a	90% Yes (9) 10% Needs Imp (1)
171. Does the person have adequate access to and use of generic services and natural supports? CPRQ144; '17IQR#33f	60% Yes (6) 10% Many (1) 30% Needs Imp (3)
172. Is the person integrated into the community? CPRQ145; '17IQR#29g	20% Yes (2) 20% Many (2) 60% Needs Imp (6)

Question	2018 (sample=10)
173. Overall is the ISP adequate to meet the person's needs? CPRQ146; '17IQR#7	0% Yes 20% Many (2) 80% Needs Imp (8)
174. Is the total program of the level of intensity adequate to meet this person's needs? CPRQ147; '17IQR#36	6 0% Yes 40% Many (4) 60% Needs Imp (6)