

# A. Jackson Class Member Demographics – Northwest Region

At the time the sample was selected for the Northwest Review, there were 18 Active Jackson Class Members in Region. Nine individuals were chosen to be part of the review sample.

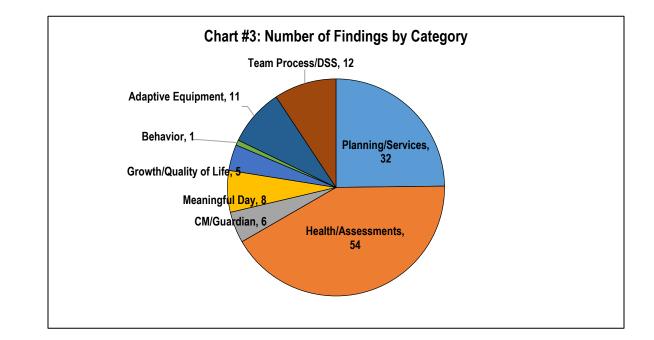
Gender		Ethnicity		Day Service Type	
Male	7	Hispanic	1	Adult Habilitation (AH)	11
Female	11	Caucasian	5	Adult Hab/Supp Empl (SE)	0
		Native American	12	Adult Hab/Community Access (CA)	2
Age		Black	0	Community Access	3
30-39	0	Asian	0	Mi Via	2
40-49	1				<u> </u>
50-59	7			Service Type	
60-69	10			Supported Living	15
70-79	0			Mi Via	2
80+	0			Family Living	1
Average Age:	60			<u> </u>	

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

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

Case Management	A Step Above (2)	Excel (8)	Peak (3)	Rio Puerco (3)	Mi Via (2)
Residential	Dungarvin (7)	Ramah Care (4)	Tungland (5)		Mi Via (2)
Day	Dungarvin (8)	Empowerment (2)	Ramah Care (2)	Tungland (4)	Mi Via (2)

# B. Most Frequently Identified Findings by Category



The Northwest Region had a total of 129 Findings and Recommendations. The table below shows what categories they fall into.

#### C. Most Frequently Identified Findings by Provider

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

Of the 129 Findings and Recommendations in the Northwest Region Review, there were 37 Recommendations that were identified as repeated within the last ten years. The category where the repeats are most frequent is in the area of Planning and Services, followed by Health/Assessments.

Chart #4: Repeat Findings by Area and Residential Provider							
Area	Dungarvin (4)	Mi Via (1)	Ramah Care (1)	Tungland (3)	Total		
Adaptive Equipment / Augmentative Communication	2		1	2	5		
Behavior					0		
Case Manager/ Guardian	2			1	3		
Expectations of Growth/Quality of Life				1	1		
Health/Assessments	4	2	1	3	10		
Meaningful Day	1			2	3		
Planning and Services	7		1	4	12		
Team Process/DSS	1			2	3		
TOTAL	17	2	3	15	37		

Chart #5: Repeat Findings by Area and Case Management Agency							
Area	A Step Above (1)	Excel (5)	Mi Via (1)	Peak (1)	Rio Puerco (1)	Total	
Adaptive Equipment / Augmentative Communication	1	2		1	1	5	
Behavior						0	
Case Manager/ Guardian		3				3	
Expectations of Growth/Quality of Life		1				1	
Health/Assessments	1	5	2		2	10	
Meaningful Day		3				3	
Planning and Services	1	7		2	2	12	
Team Process/DSS		3				3	
TOTAL	3	24	2	3	5	37	

#### D. Immediate and Special Findings

There were nine (9) Class Members reviewed in the Northwest Region as part of the 2018 IQR. Four individuals (44% of the total sample) were found to have Special findings. (None were found to have Immediate Needs.) There were a total of four Special findings. Details of the issues of these findings are available in the table below.

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.

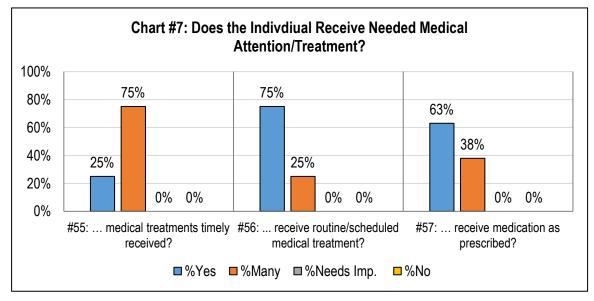
### DETAILS REGARDING THE SPECIFIC FINDINGS HAVE BEEN REMOVED FOR POSTING ON THE COMMUNITY MONITOR WEBSITE

Reg	СМ	Res	Day	Immd	Spec	IR		
Sympto	Symptoms/Issues not being followed up							
NW	A Step Above	Ramah Care	Empowerment		Х			
DNR Iss	ues							
NW	Excel	Tungland	Tungland		Х			
HCP/ME	RPs/eChat di	screpancies						
NW	A Step Above	Ramah Care	Empowerment		Х			
Other								
NW	Peak	Dungarvin	Dungarvin		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 detail the findings based on related questions which are summarized first.

Question #55: Are all of the individual's needed medical treatments timely received? Question #56: Does the individual receive routine/scheduled medical treatment? Question #57: Does the individual receive medication as prescribed? Ensuring individuals have the medical treatment they require includes scheduling and obtaining needed assessments, and using the information from those assessments to influence treatment and inform future planning. The IQR also evaluates the assessments needed by the individual and obtained by the teams as summarized below.



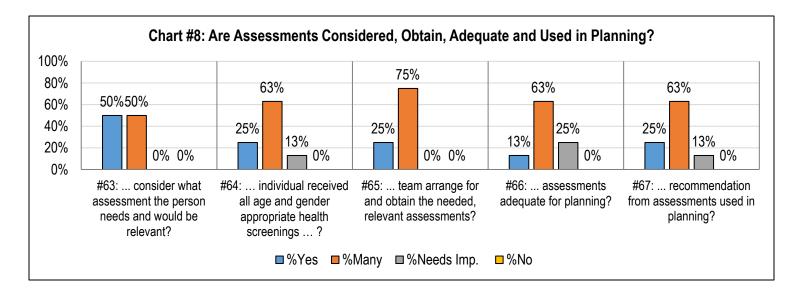
Question #63: Did the team consider what assessment the person needs and would be relevant to the Team's planning efforts?

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.

Chart #9: Type of Issues identi	fied by Residential Agency

Residential Agency (# in sample):						
Area	Dungarvin (4)	Mi Via (1)	Ramah Care (1)	Tungland (3)	Total	
AIMS/TD Screen needed	2				2	
Audiology/ABR: Not Current/Missing/Inaccurate	1				1	
Nutrition: Not Current/Missing/Inaccurate	3				3	
Bone Density/Dexa: Not Current/Missing/Inaccurate	1	1		2	4	
Hep B vaccine not done			1		1	
HepC vaccine not done (healthfinder.gov)	1	1	1	1	4	
Shingles vaccine not done (healthfinder.gov)	2	1		1	4	
Pneumonia vaccine not done (healthfinder.gov)	1	1			2	
Colon cancer screen not done (healthfinder.gov)	1	1		2	4	
TDap not completed as recommended (healthfinder)	1	1			2	

	Residential Agency (# in sample):							
Area	Dungarvin (4)	Mi Via (1)	Ramah Care (1)	Tungland (3)	Total			
HIV Testing not completed (healthfinder.gov)	2				2			
Flu vaccine not done (healthfinder.gov)		1			1			
Statin discussion needed		1			1			
Labs missing (PSA, pre-Physical, pre-Neuro appt.)	1				1			
Pap smear/well woman exam				2	2			
PCP follow up not complete				1	1			
Follow up with specialist not complete			1	1	2			
MAR/Medication/Dr. Order do not match	1				1			
Med delivery instructions unclear	1				1			
Medication on MAR not found in home	1				1			
MERPs/HCPs Not found/not specific/incorrect	14		7	5	26			
eChat incorrect/incomplete	8		3	3	14			
CARMP inaccurate/incomplete/not current	1			2	3			
Inconsistency between HCP/CARMP/MERP/eChat	1		1	3	5			
Totals	43	8	14	23	88			

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:

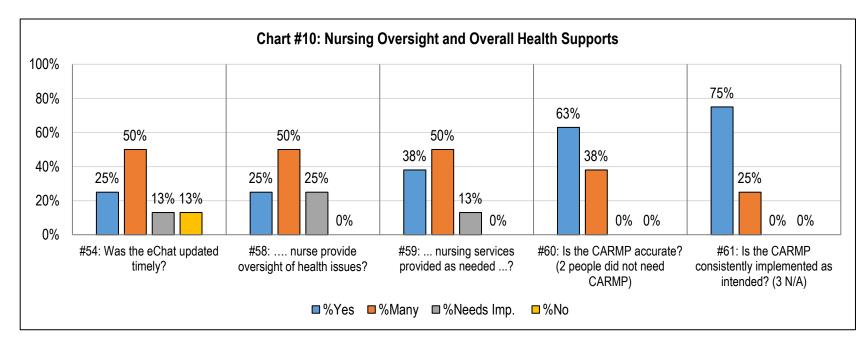
Question #54: Was the eChat updated timely?

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?



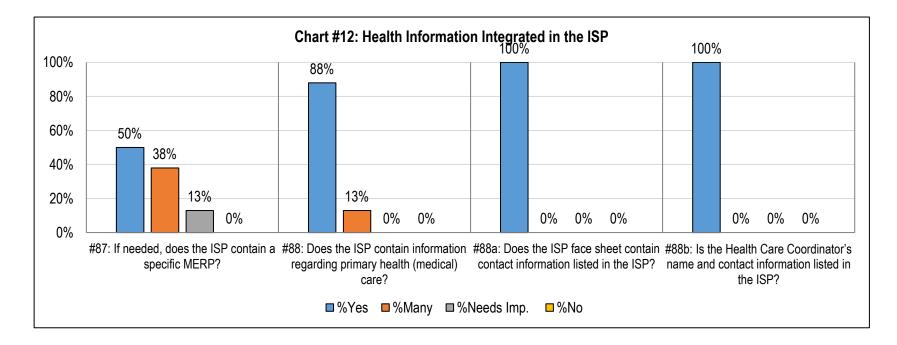
Oversight provided by nurses is a critical safeguard for Jackson Class Members, direct support professionals and their supervisors. The table below provides specific details, by Residential provider, of nursing related issues identified during the 2018 IQR. Again, this represents the <u>number of issues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

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

Residential Agency (# in sample):						
Area	Dungarvin (4)	Mi Via (1)	Ramah Care (1)	Tungland (3)	Total	
Nursing Quarterly report not timely completed	1		4	2	7	
Nursing not providing info to team/PCP as needed	1				1	
Nursing documentation not accurate	1				1	
Nurse report(s) not accurate/missing information	4			12	16	
Nurse not Monitoring as required	2			2	4	
Totals	9	0	4	16	29	

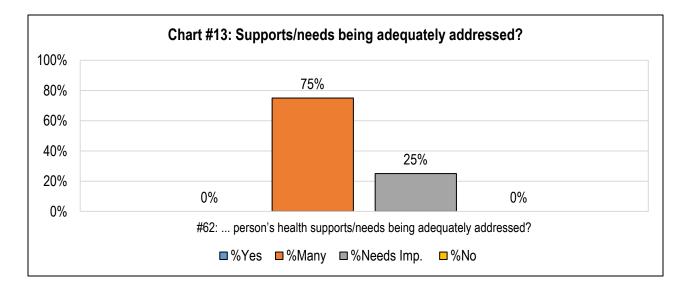
In addition to the issues and questions noted above, the individual's nurse is responsible, with the assistance of the rest of the Team, to assure that the documents presented and created for planning, such as the ISP, are accurate and thorough and contain the needed plans and information required. The 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 8 people scored in the Northwest review, no individual had their health supports/needs adequately addressed. There were six people who had many of their needs addressed (75%), and two are receiving supports that need improvement (25%).



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):						
Area	Dungarvin (4)	Mi Via (1)	Ramah Care (1)	Tungland (3)	Total	
PT Evaluation Needed		1			1	
PT Evaluation does not identify baseline/progress	2				2	
PT services not consistent			1		1	
PT Report (Annual/Semi) inaccurate/inadequate				1	1	
OT Evaluation Needed		1			1	
OT Evaluation does not identify baseline/progress	4			3	7	
OT services not consistent			1		1	
OT recommendations not addressed			1		1	
OT did not provide staff with ROM instructions			1		1	
OT WDSI not specific				1	1	
SLP Report (Annual/Semi) inaccurate/inadequate				1	1	
SLP Evaluation does not identify baseline/progress	1			2	3	

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

Residential Agency (# in sample):						
Area	Dungarvin (4)	Mi Via (1)	Ramah Care (1)	Tungland (3)	Total	
SLP services not consistent			1		1	
Behavior Eval does not identify baseline/progress	1				1	
Behavior Report inaccurate/inadequate	1				1	
Total # of Issues	9	2	5	8	24	

# 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 supposed to be developed by an Interdisciplinary Team that includes the Individual and those who know and provide supports to that person. This includes the Case Manager, Guardian, the Direct Support Staff, Therapists, Nurse, and any additional persons who are needed to ensure the implementation of the Plan. The 2018 IQR protocol specifically probes many of the aspects of the planning process, including detail of who participates in plan creation. The chart below details the answers to related questions in the 2018 review.

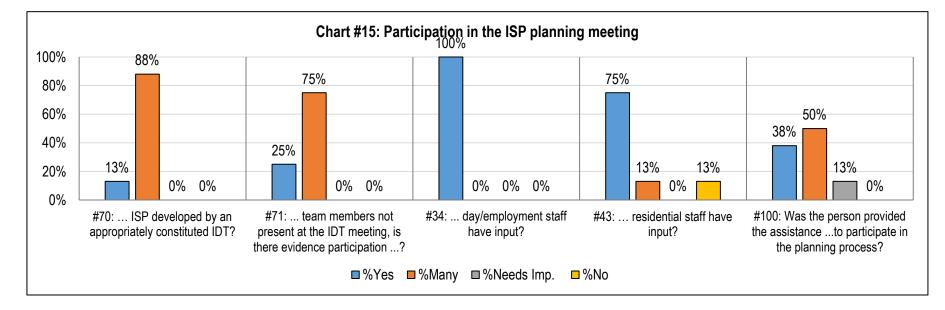
Question #70: Was the ISP developed by an appropriately constituted IDT?

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

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

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

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



	Residential Agency (# in sample):					
Question	Dungarvin (4)	Ramah Care (1)	Tungland (3)			
Q# 70	0% Yes	100% Yes (1)	0% Yes			
	100% Many (4)		100% Many (3)			
Q# 71	25% Yes (1)	100% Yes (1)	0% Yes			
	75% Many (3)		100% Many (3)			
Q# 34	100% Yes (4)	100% Yes (1)	100% Yes (3)			
Q# 43	75% Yes (3)	100% Yes (1)	67% Yes (2)			
	25% Many (1)		33% No (1)			
Q# 100	25% Yes (1)	0% Yes	67% Yes (2)			
	50% Many (2)	100% Many (1)	33% Many (1)			
	25% Needs Imp (1)					

#### Chart #16: ISP Development Participation, by Provider

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

	Case Management Agency (# in sample):				
Question	A Step Above (1)	Excel (5)	Peak (1)	Rio Puerco (1)	
Q# 70	100% Yes (1)	0% Yes	0% Yes	0% Yes	
		100% Many (5)	100% Many (1)	100% Many (1)	
Q# 71	100% Yes (1)	0% Yes	100% Yes (1)	0% Yes	
		100% Many (5)		100% Many (1)	
Q# 34	100% Yes (1)	100% Yes (5)	100% Yes (1)	100% Yes (1)	
Q# 43	100% Yes (1)	60% Yes (3)	100% Yes (1)	100% Yes (1)	
		20% Many (1)			
		20% No (1)			
Q# 100	0% Yes	40% Yes (2)	100% Yes (1)	0% Yes	
	100% Many (1)	60% Many (3)		100% Needs Imp (1)	

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

Question #73: Overall, does the long term vision show expectations for growth and skill building?

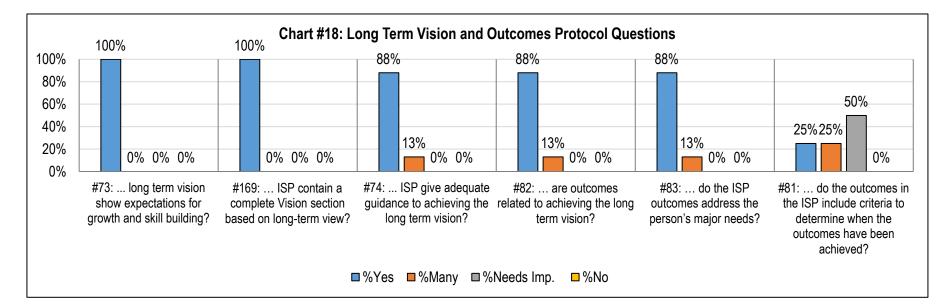
Question #169: Does the person have an ISP that contains a complete Vision Section that is based on a long term view?

Question #74: Overall, does the ISP give adequate guidance to achieving the person's long term vision?

Question #82: Overall, are the ISP outcomes related to achieving the person's long term vision?

Question #83: Overall, do the ISP outcomes address the person's major needs?

Question #81: Overall, do the outcomes in the ISP include criteria by which the team can determine when the outcomes have been achieved?



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

	Residential Agency (# in sample):			
Question	Dungarvin (4)	Ramah Care (1)	Tungland (3)	
Q# 73	100% Yes (4)	100% Yes (1)	100% Yes (3)	
Q# 169	100% Yes (4)	100% Yes (1)	100% Yes (3)	
Q# 74	75% Yes (3)	100% Yes (1)	100% Yes (3)	
	25% Many (1)			
Q# 82	100% Yes (4)	0% Yes	100% Yes (3)	
		100% Many (1)		
Q# 83	100% Yes (4)	0% Yes	100% Yes (3)	
		100% Many (1)		
Q# 81	25% Yes (1)	0% Yes	33% Yes (1)	
	50% Many (2)	100% Needs Imp (1)	67% Needs Imp (2)	

	Residential Agency (# in sample):			
Question	Dungarvin (4) Ramah Care (1) Tungland (3)			
	25% Needs Imp (1)			

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

	Case Management Agency (# in sample):				
Question	A Step Above (1)	Excel (5)	Peak (1)	Rio Puerco (1)	
Q# 73	100% Yes (1)	100% Yes (5)	100% Yes (1)	100% Yes (1)	
Q# 169	100% Yes (1)	100% Yes (5)	100% Yes (1)	100% Yes (1)	
Q# 74	100% Yes (1)	100% Yes (5)	100% Yes (1)	0% Yes 100% Many (1)	
Q# 82	0% Yes 100% Many (1)	100% Yes (5)	100% Yes (1)	100% Yes (1)	
Q# 83	0% Yes 100% Many (1)	100% Yes (5)	100% Yes (1)	100% Yes (1)	
Q# 81	0% Yes 100% Needs Imp (1)	20% Yes (1) 40% Many (2) 40% Needs Imp (2)	0% Yes 100% Needs Imp (1)	100% Yes (1)	

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

Question #75: Is measureable data kept which verifies the consistent implementation of each of the action steps?

Question #76: Does the data kept identify what the person does so a determination can be made regarding the progress/lack of progress?

Question #77: Is each action step in the ISP implemented at a frequency that enables the person to learn new skills?

Question #78: If the person is not successful in achieving action steps, has the team tried to determine why, and change their approach as needed?

Question #79: If the person achieves action steps, does the team move to the next in a progress of steps or develops a new one?

Question #80: Has the person made measureable progress on action steps during the past year?

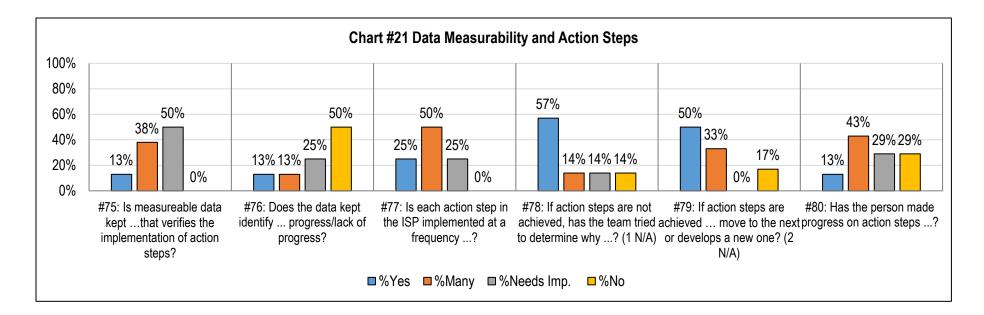


Chart #22: Data and Related ISP Action Step Scores by Residential Agency

	Residential Agency (# in sample):			
Question	Dungarvin (4)	Ramah Care (1)	Tungland (3)	
Q# 75	25% Yes (1)	0% Yes	0% Yes	
	75% Needs Imp (3)	100% Needs Imp (1)	100% Many (3)	
Q# 76	0% Yes	0% Yes	33% Yes (1)	
	25% Needs Imp (1)	100% Many (1)	33% Needs Imp (1)	
	75% No (3)		33% No (1)	
Q# 77	25% Yes (1)	0% Yes	33% Yes (1)	
	50% Many (2)	100% Many (1)	33% Many (1)	
	25% Needs Imp (1)		33% Needs Imp (1)	
Q# 78	67% Yes (2)	0% Yes	67% Yes (2)	
	33% Many (1)	100% No (1)	33% Needs Imp (1)	
	(1 N/A)			
Q# 79	50% Yes (3)	100% Yes (1)	0% Yes	
	50% Many (2)		100% No (1)	
			(2 N/A)	
Q# 80	25% Yes (1)	0% Yes	0% Yes	

	Residential Agency (# in sample):			
Question	Dungarvin (4)	Ramah Care (1)	Tungland (3)	
	25% Many (1)	100% Many (1)	33% Many (1)	
	25% Needs Imp (1)		33% Needs Imp (1)	
	25% No (1)		33% No (1)	

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

	Case Management Agency (# in sample):				
Question	A Step Above (1)	Excel (5)	Peak (1)	Rio Puerco (1)	
Q# 75	0% Yes 100% Needs Imp (1)	0% Yes 60% Many (3) 40% Needs Imp (2)	100% Yes (1)	0% Yes 100% Needs Imp (1)	
Q# 76	0% Yes 100% Many (1)	20% Yes (1) 20% Needs Imp (1) 60% No (3)	0% Yes 100% Needs Imp (1)	0% Yes 100% No (1)	
Q# 77	0% Yes 100% Many (1)	20% Yes (1) 40% Many (2) 40% Needs Imp (2)	100% Yes (1)	0% Yes 100% Many (1)	
Q# 78	0% Yes 100% No (1)	75% Yes (3) 25% Needs Imp (1) (1 N/A)	100% Yes (1)	0% Yes 100% Many (1)	
Q# 79	100% Yes (1)	33% Yes (1) 33% Many (1) 33% No (1) (2 N/A)	100% Yes (1)	0% Yes 100% Many (1)	
Q# 80	0% Yes 100% Many (1)	20% Yes (1) 20% Many (1) 20% No (1) 40% No (2)	0% Yes 100% Needs Imp (1)	0% Yes 100% Many (1)	

In addition to the components listed above, the Teaching and Support Strategies (T&SS) are also an integral part of the ISP. T&SS should be developed by the residential and/or day provider responsible for implementing the T&SS. Input from others such as therapists should be included as needed. WDSIs are developed by therapists as a complement to the T&SS. All T&SS and WDSIs should provide guidance for those direct support professionals who support the person in achieving his/her Vision/Outcomes. The following protocol questions in the 2018 IQR relate to the T&SS and implementation of the ISP.

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

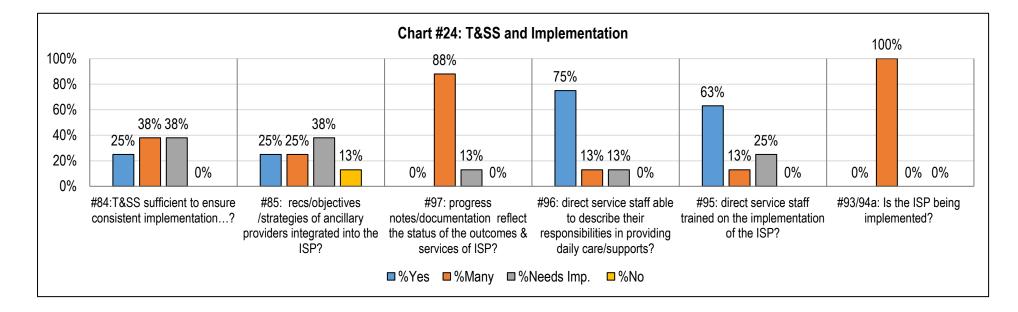
Question #85: Overall, are the recommendations and/or objectives/strategies of ancillary provider integrated into the ISP?

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

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

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

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



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

	Residential Agency (# in sample):			
Question	Dungarvin (4)	Ramah Care (1)	Tungland (3)	
#84	25% Yes (1)	0% Yes	33% Yes (1)	
	25% Many (1)	100% Many (1)	33% Many (1)	
	50% Needs Imp (2)		33% Needs Imp (1)	
#85	25% Yes (1)	0% Yes	33% Yes (1)	
	25% Many (1)	100% Many (1)	67% Needs Imp (2)	
	25% Needs Imp (1)			

	Residential Agency (# in sample):			
Question	Dungarvin (4)	Ramah Care (1)	Tungland (3)	
	25% No (1)			
#97	0% Yes	0% Yes	0% Yes	
	75% Many (4)	100% Many (1)	100% Many (3)	
	25% Needs Imp (1)			
#96	100% Yes (4)	100% Yes (1)	33% Yes (1)	
			33% Many (1)	
			33% Needs Imp (1)	
#95	75% Yes (3)	100% Yes (1)	33% Yes (1)	
	25% Many (1)		67% Needs Imp (2)	
#94a	0% Yes	0% Yes	0% Yes	
	100% Many (4)	100% Many (1)	100% Many (3)	

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

	Case Management Agency (# in sample):				
Question	A Step Above (1)	Excel (5)	Peak (1)	Rio Puerco (1)	
#84	0% Yes	20% Yes (1)	0% Yes	100% Yes (1)	
	100% Many (1)	40% Many (2)	100% Needs Imp (1)		
		40% Needs Imp (2)			
#85	0% Yes	20% Yes (1)	0% Yes	100% Yes (1)	
	100% Many (1)	20% Many (1)	100% No (1)		
		60% Needs Imp (3)			
#97	0% Yes	0% Yes	0% Yes	0% Yes	
	100% Many (1)	80% Many (4)	100% Many (1)	100% Many (1)	
		20% Needs Imp (1)			
#96	100% Yes (1)	60% Yes (3)	100% Yes (1)	100% Yes (1)	
		20% Many (1)			
		20% Needs Imp (1)			
#95	100% Yes (1)	40% Yes (2)	100% Yes (1)	100% Yes (1)	
		20% Many (1)			
		40% Needs Imp (2)			
#94a	0% Yes	0% Yes	0% Yes	0% Yes	
	100% Many (1)	100% Many (5)	100% Many (1)	100% Many (1)	

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

Question #72: Does my ISP contain current and accurate information?

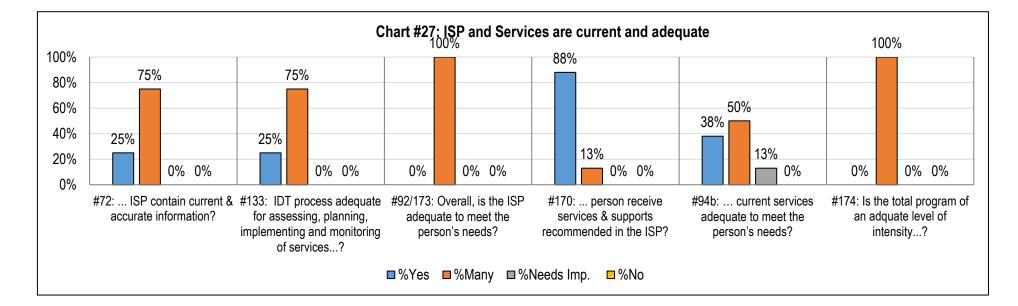
Question #133: Has the IDT process been adequate for assessing, planning, implementing and monitoring of services for this person?

Question #92/173: Overall, is the ISP adequate to meet the person's needs?

Question #170: Does the person receive services and supports recommended in the ISP?

Question #94b: Are current services adequate to meet the person's needs?

Question #174: Is the total program of the level of intensity adequate to meet this person's needs?



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

	Residential Agency (# in sample):			
Question	Dungarvin (4)	Ramah Care (1)	Tungland (3)	
#72	25% Yes (1)	0% Yes	33% Yes (1)	
	75% Many (3)	100% Many (1)	67% Many (2)	

	Residential Agency (# in sample):			
Question	Dungarvin (4)	Ramah Care (1)	Tungland (3)	
#133	25% Yes (1)	0% Yes	33% Yes (1)	
	75% Many (3)	100% Many (1)	67% Many (2)	
#92/173	0% Yes	0% Yes	0% Yes	
	100% Many (4)	100% Many (1)	100% Many (3)	
#170	100% Yes (4)	0% Yes	100% Yes	
		100% Many (1)		
#94b	50% Yes (2)	0% Yes	33% Yes (1)	
	50% Many (2)	100% Many (1)	33% Many (1)	
			33% Needs Imp (1)	
#174	0% Yes	0% Yes	0% Yes	
	100% Many (4)	100% Many (1)	100% Many (3)	

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

	Case Management Agency (# in sample):				
Question	A Step Above (1)	Excel (5)	Peak (1)	Rio Puerco (1)	
#72	0% Yes	20% Yes (1)	0% Yes	100% Yes (1)	
	100% Many (1)	80% Many (4)	100% Many (1)		
#133	0% Yes	20% Yes (1)	100% Yes (1)	0% Yes	
	100% Many (1)	80% Many (4)		100% Many (1)	
#92/173	0% Yes	0% Yes	0% Yes	0% Yes	
	100% Many (1)	100% Many (5)	100% Many (1)	100% Many (1)	
#170	0% Yes	100% Yes (5)	100% Yes (1)	100% Yes (1)	
	100% Many (1)				
#94b	0% Yes	40% Yes (2)	100% Yes (1)	0% Yes	
	100% Many (1)	40% Many (2)		100% Many (1)	
		20% Needs Imp (1)			
#174	0% Yes	0% Yes	0% Yes	0% Yes	
	100% Many (1)	100% Many (5)	100% Many (1)	100% Many (1)	

# 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. The region, overall, scored well on some of the case management questions. The charts below detail the related findings.

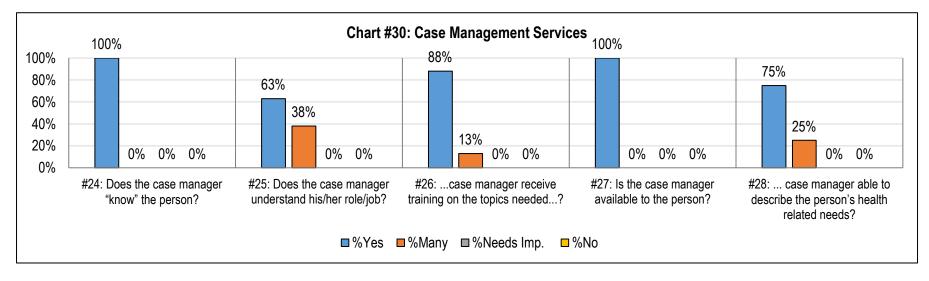
Question #24: Does the case manager "know" the person?

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

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

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

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



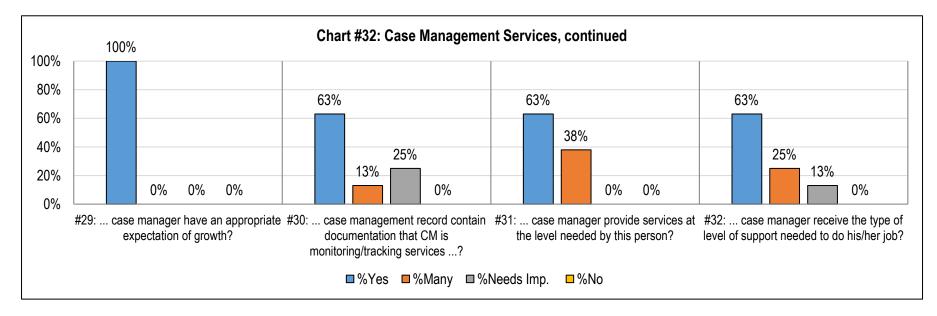
### Chart #31: Case Management Scores, by Case Management Agency

	Case Management Agency (# in sample):				
Question	A Step Above (1)	Excel (5)	Peak (1)	Rio Puerco (1)	
Q# 24	100% Yes (1)	100% Yes (5)	100% Yes (1)	100% Yes (1)	
Q# 25	100% Yes (1)	40% Yes (2) 60% Many (3)	100% Yes (1)	100% Yes (1)	
Q# 26	100% Yes (1)	80% Yes (4) 20% Many (1)	100% Yes (1)	100% Yes (1)	
Q# 27	100% Yes (1)	100% Yes (5)	100% Yes (1)	100% Yes (1)	
Q# 28	0% Yes 100% Many (1)	80% Yes (4) 20% Many (1)	100% Yes (1)	100% Yes (1)	

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

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

Question #31: Does the case manager provide case management services at the level needed by this person? Question #32: Does the case manager receive the type of level of support needed to do his/her job?



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

	Case Management Agency (# in sample):				
Question	A Step Above (1)	Excel (5)	Peak (1)	Rio Puerco (1)	
Q# 29	100% Yes (1)	100% Yes (5)	100% Yes (1)	100% Yes (1)	
Q# 30	0% Yes	60% Yes (3)	100% Yes (1)	100% Yes (1)	
	100% Needs Imp (1)	20% Many (1)			
		20% Needs Imp (1)			
Q# 31	0% Yes	60% Yes (3)	100% Yes (1)	100% Yes (1)	
	100% Many (1)	40% Many (2)			
Q# 32	0% Yes	60% Yes (3)	100% Yes (1)	100% Yes (1)	
	100% Needs Imp (1)	40% Many (2)			

### H. Supported Employment

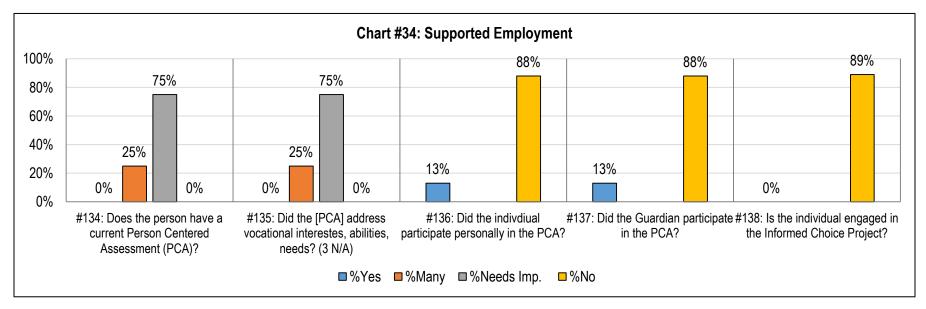
Access to competitive integrated employment enables an individual to engage in community life, increase personal resources, improve self-sufficiency and contribute back to the community. The 2018 Waiver Standards emphasize that, "employment should be the first consideration. If someone does not choose employment, the decision

should be based on informed choice". Making an informed choice about employment is an individualized process. All people have unique histories and backgrounds, which means that some people may have limited experiences and will require more information to make a decision about employment while others may have a rich and varied employment history and can make an informed choice based on that history.

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





	Res	idential Agency (# in sam	ple):
Question	Dungarvin (4)	Ramah Care (1)	Tungland (3)
#134	0% Yes	0% Yes	0% Yes
	25% Many (1)	100% Needs Imp (1)	33% Many (1)
	75% Needs Imp (3)		67% Needs Imp (2)
#135	0% Yes		0% Yes
	50% Many (1)		100% Needs Imp (2)
	50% Needs Imp (1)	(1 N/A)	(1 N/A)
	(2 N/A)		
#136	0% Yes	0% Yes	33% Yes (1)
	100% No (4)	100% No (1)	67% No (2)
#137	0% Yes	0% Yes	33% Yes (1)
	100% No (4)	100% No (1)	67% No (2)
#138	0% Yes	0% Yes	0% Yes
	100% No (4)	100% No (1)	100% No (3)

Chart #36: Supported Employment Scores by Case Management Agency

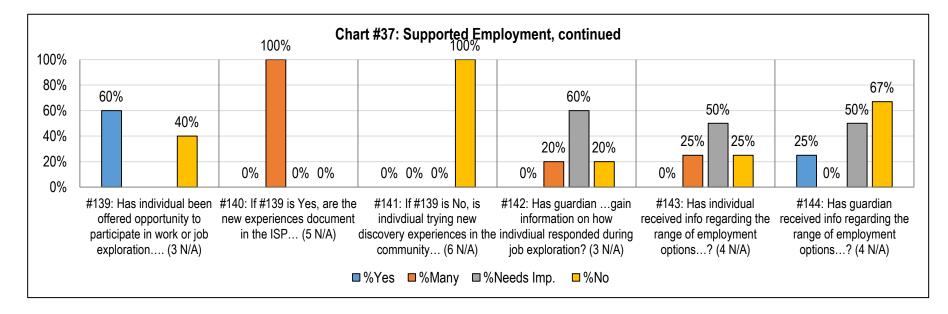
	Case Management Agency (# in sample):					
Question	A Step Above (1)	Excel (5)	Peak (1)	Rio Puerco (1)		
#134	0% Yes	0% Yes	0% Yes	0% Yes		
	100% Needs Imp (1)	40% Many (2)	100% Needs Imp (1)	100% Needs Imp (1)		
#135	(4 ) (4 )	60% Needs Imp (3) 0% Yes	0% Yes	0% Yes		
	(1 N/A)	100% Needs Imp (2) (3 N/A)	100% Needs Imp (1)	100% Many (1)		
#136	0% Yes	20% Yes (1)	0% Yes	0% Yes		
	100% No (1)	80% No (4)	100% No (1)	100% No (1)		
#137	0% Yes	20% Yes (1)	0% Yes	0% Yes		
	100% No (1)	80% No (4)	100% No (1)	100% No (1)		
#138	0% Yes	0% Yes	0% Yes	0% Yes		
	100% No (1)	100% No (4)	100% No (1)	100% No (1)		

2. **Components of Informed Choice:** <u>Information and Experience</u> Question #139. Has the individual been offered the opportunity to participate in work or job exploration including volunteer work and/or trial work opportunities? 2018 Northwest Region IQR Data Page 24 | 43

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 #38: Supported Employment Scores by Provider Agency

	Residential Agency (# in sample):				
Question	Dungarvin (4)	Ramah Care (1)	Tungland (3)		
#139	67% Yes (2)		50% Yes (1)		
	33% No (1)	(1 N/A)	50% No (1)		
	(1 N/A)		(1 N/A)		
#140	0% Yes		0% Yes		
	100% Many (2)	(1 N/A)	100% Many (1)		
	(2 N/A)		(1 N/A)		
#141	0% Yes		0% Yes		
	100% No (1)	(1 N/A)	100% No (1)		
	(3 N/A)		(2 N/A)		

	Residential Agency (# in sample):				
Question	Dungarvin (4)	Ramah Care (1)	Tungland (3)		
#142	0% Yes		0% Yes		
	33% Many (1)	(1 N/A)	50% Needs Imp (1)		
	67% Needs Imp (2)		50% No (1)		
	(1 N/A)		(1 N/A)		
#143	0% Yes		0% Yes		
	50% Many (1)	(1 N/A)	50% Needs Imp (1)		
	50% Needs Imp (1)		50% No (1)		
	(2 N/A)		(1 N/A)		
#144	0% Yes		50% Yes (1)		
	100% Needs Imp (2)	(1 N/A)	50% No (1)		
	(2 N/A)		(1 N/A)		

# Chart #39: Supported Employment Scores by Case Management Agency

	Case Management Agency (# in sample):				
Question	A Step Above (1)	Excel (5)	Peak (1)	Rio Puerco (1)	
#139	(4 ) (4)	67% Yes (2)	0% Yes	100% Yes (1)	
	(1 N/A)	33% No (1) (2 N/A)	100% No (1)		
#140		0% Yes		0% Yes	
	(1 N/A)	100% Many (2) (3 N/A)	(1 N/A)	100% Many (1)	
#141		0% Yes	0% Yes		
	(1 N/A)	100% No (1)	100% No (1)	(1 N/A)	
	, , , , , , , , , , , , , , , , , , ,	(4 N/A)			
#142		0% Yes	0% Yes	0% Yes	
	(1 N/A)	33% Many (1)	100% Needs Imp (1)	100% Needs Imp (1)	
		33% Needs Imp (1)			
		33% No (1)			
		(2 N/A)			
#143		0% Yes	0% Yes	0% Yes	
	(1 N/A)	50% Needs Imp (1)	100% Needs Imp (1)	100% Many (1)	
		50% No (1)			
		(3 N/A)			
#144		50% Yes (1)	0% Yes	0% Yes	
	(1 N/A)	50% No (1)	100% Needs Imp (1)	100% Needs Imp (1)	

		Case Management Agency (# in sample):				
Ques	stion	A Step Above (1)	A Step Above (1) Excel (5) Peak (1) Rio Puerco (1)			
			(3 N/A)			

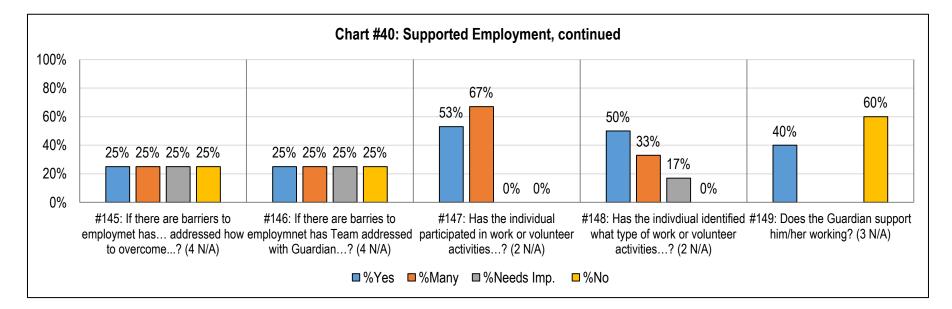
#### 3. Components of Informed Choice: Identification of Employment Barriers/Issues.

- Question #145. If there are barriers to employment, has the Team, including the individual, addressed how to overcome those barriers to employment and integrating clinical info, AT, & therapies as necessary...?
- Question #146. If there are barriers to employment, has the Team addressed with the Guardian how to overcome those barriers to employment and integrating clinical info, AT, & therapies as necessary...?

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

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

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



### Chart #41: Supported Employment Scores by Provider Agency

	Residential Agency (# in sample):				
Question	Dungarvin (4)	Ramah Care (1)	Tungland (3)		
#145	0% Yes		50% Yes (1)		
	50% Many (1)	(1 N/A)	50% No (1)		
	50% Needs Imp (1)	. ,	(1 N/A)		

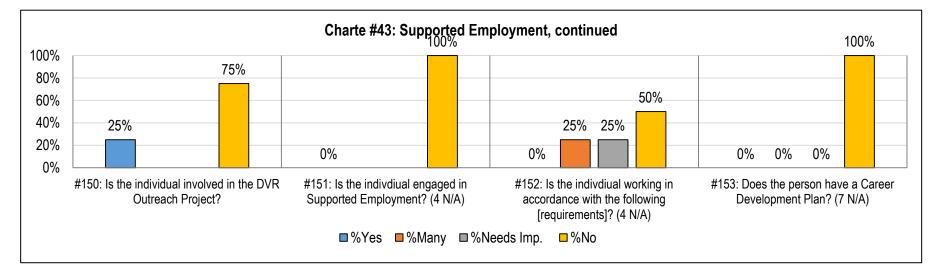
	Res	idential Agency (# in sam	ple):
Question	Dungarvin (4)	Ramah Care (1)	Tungland (3)
	(2 N/A)		
#146	0% Yes		50% Yes (1)
	50% Many (1)	(1 N/A)	50% No (1)
	50% Needs Imp (1)		(1 N/A)
	(2 N/A)		
#147	33% Yes (1)		33% Yes (1)
	67% Many (2)	(1 N/A)	67% Many (2)
	(1 N/A)		
#148	100% Yes (3)		0% Yes
	(1 N/A)	(1 N/A)	67% Many (2)
			33% Needs Imp (1)
#149	33% Yes (1)		50% Yes (1)
	67% No (2)	(1 N/A)	50% No (1)
	(1 N/A)	. ,	(1 N/A)

Chart #42: Supported Employment Scores by Case Management Agency

	Case Management Agency (# in sample):				
Question	A Step Above (1)	Excel (5)	Peak (1)	Rio Puerco (1)	
#145		50% Yes (1)	0% Yes	0% Yes	
	(1 N/A)	50% No (1)	100% Needs Imp (1)	100% Many (1)	
		(3 N/A)			
#146		50% Yes (1)	0% Yes	0% Yes	
	(1 N/A)	50% No (1)	100% Needs Imp (1)	100% Many (1)	
		(3 N/A)			
#147		50% Yes (2)	0% Yes	0% Yes	
	(1 N/A)	50% Many (2)	100% Many (1)	100% Many (1)	
		(1 N/A)			
#148		25% Yes (1)	0% Yes		
	(1 N/A)	50% Many (2)	100% No (1)		
		25% Needs Imp (1)			
		(1 N/A)			
#149		33% Yes (1)	100% Yes (1)	100% Yes (1)	
	(1 N/A)	67% No (2)	, , , , , , , , , , , , , , , , , , ,	. ,	
		(2 N/A)			

#### 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 #44: Supported Employment Scores by Provider Agency

	Res	idential Agency (# in sam	ple):
Question	Dungarvin (4)	Ramah Care (1)	Tungland (3)
#150	25% Yes (1)	0% Yes	0% Yes
	75% No (3)	100% No (1)	100% No (3)
#151	0% Yes		0% Yes
	100% No (2)	(1 N/A)	100% No (2)
	(2 N/A)		(1 N/A)
#152	0% Yes		0% Yes
	50% Needs Imp (1)	(1 N/A)	50% Many (1)
	50% No (1)		50% No (1)
	(2 N/A)		(1 N/A)

	Res	idential Agency (# in sam	iple):
Question	Dungarvin (4)	Ramah Care (1)	Tungland (3)
#153	(4 N/A)	(1 N/A)	0% Yes 100% No (1)
			(2 N/A)

# Chart #45: Supported Employment Scores by Case Management Agency

	Case Management Agency (# in sample):			
Question	A Step Above (1)	Excel (5)	Peak (1)	Rio Puerco (1)
#150	0% Yes 100% No (1)	0% Yes 100% No (5)	0% Yes 100% No (1)	100% Yes (2)
#151	(1 N/A)	0% Yes 100% No (2) (3 N/A)	0% Yes 100% No (1)	0% Yes 100% No (1)
#152	(1 N/A)	0% Yes 50% Many (1) 50% No (1) (3 N/A)	(1 N/A)	(1 N/A)
#153	(1 N/A)	0% Yes 100% No (1) (4 N/A)	(1 N/A)	(1 N/A)

# I. IQR Scored Protocol Questions

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

Question	2018 (sample=10)
CASE MANAGEMENT	
24. Does the case manager "know" the person? CPRQ26; '17IQR#8c	100% Yes (8)
25. Does the case manager understand his/her role/job? CPRQ27 '17IQR#16	63% Yes (5) 38% Many (3)
26. Did the case manager receive training on the topics needed to assist him/her in meeting the needs of this person? CPRQ28	88% Yes (7) 13% Many (1)
27. Is the case manager available to the person? CPRQ29; '17IQR#16a	100% Yes (8)
28. Was the case manager able to describe the person's health related needs? CPRQ30	75% Yes (6) 25% Many (2)
29. Does the case manager have an appropriate expectation of growth for this person? CPRQ31	100% Yes (8)
30. Does the case management record contain documentation that the case manager is monitoring and tracking the delivery of services as outlined in the ISP? CPRQ32; '17IQR#16b	63% Yes (5) 13% Many (1) 25% Needs Imp (2)
31. Does the case manager provide case management services at the level needed by this person? CPRQ33; '17IQR#16c	63% Yes (5) 38% Many (3)
32. Does the case manager receive the type and level of support needed to do his/her job? CPRQ34	63% Yes (5) 25% Many (2) 13% Needs Imp (1)
EMPLOYMENT AND DAY	
33. Does the direct services staff "know" the person? CPRQ35; '17IQR#8a	100% Yes (8)
34. Does the direct service staff have input into the person's ISP? CPRQ36	100% Yes (8)

Question	2018 (sample=10)
35. Did the direct service staff receive training on implementing this person's ISP? CPRQ37	75% Yes (6) 13% Many (1) 13% Needs Imp (1
36. Was the direct service staff able to describe this person's health-related needs? CPRQ38	50% Yes (4) 50% Many (4)
37. Was the direct service staff able to describe his/her responsibilities in providing daily care/supports to the person? CPRQ39	75% Yes (6) 13% Many (1) 13% Needs Imp (1
37a. Was the direct service staff able to provide specific information regarding the person's daily activities? CPRQ39a	75% Yes (6) 25% 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	75% Yes (6) 25% Needs Imp (2
38. Did the direct service staff have training in the ISP process? CPRQ40	50% Yes (4) 13% Many (1) 25% Needs Imp (2 13% No (1)
39. Did the direct service staff have training on the provider's complaint process and how to report abuse, neglect and exploitation? CPRQ41	100% Yes (8)
40. Does the direct service staff have an appropriate expectation of growth for this person? CPRQ42	100% Yes (8)
41. Does the person's day/work environment generally clean, free of safety hazards and conducive to the work/activity intended? CPRQ43	100% Yes (8)
RESIDENTIAL	
42. Does the residential direct services staff "know" the person? CPRQ44; '17IQR#8b	100% Yes (8)
43. Does the direct service staff have input into the person's ISP? CPRQ45	75% Yes (6) 13% Many (1) 13% No (1)
44. Did the direct service staff receive training on implementing this person's ISP? CPRQ46	63% Yes (5) 25% Many (2) 13% Needs Imp (
45. Is the residence safe for individuals (void of hazards)? CPRQ47	88% Yes (7) 13% Many (1)
46. Was the residential direct service staff able to describe this person's health-related needs? CPRQ48	50% Yes (4)

Question	2018 (sample=10)
	50% Many (4)
47. Was the direct service staff able to describe his/her responsibilities in providing daily care/supports to the person? CPRQ49	75% Yes (6) 25% Many (2)
47a. Was the direct service staff able to provide specific information regarding the person's daily activities? CPRQ49a	100% Yes (8)
47b. Can the direct service staff describe his/her responsibilities in implementing this person's ISP, including outcomes, action plans, and WDSIs? CPRQ49b	75% Yes (6) 25% Many (2)
48. Did the residential direct service staff have training in the ISP process? CPRQ50	50% Yes (4) 25% Many (2) 25% Needs Imp (2)
49. Did the direct service staff have training on the provider's complaint process and how to report abuse, neglect and exploitation? CPRQ51	88% Yes (7) 13% No (1)
50. Does the residential direct service staff have an appropriate expectation of growth for this person? CPRQ52	75% Yes (6) 13% Many (1) 13% No (1)
51. Does the person's residential environment offer a minimal level of quality of life? CPRQ53	88% Yes (7) 13% Many (1)
HEALTH	
52. Overall, were the team members interviewed able to describe the person's health-related needs? CPRQ54; '17IQR#21b	13% Yes (1) 88% Many (7)
53. Is there evidence that the IDT discussed the person's health related issues? CPRQ55; '17IQR#21	50% Yes (4) 38% Many (3) 13% Needs Imp (1)
54. Was the eChat updated timely? '17IQR#18g	25% Yes (2) 50% Many (4) 13% Needs Imp (1) 13% No (1)
55. Are all of the individual's needed medical treatments timely received? 17IQR#19	25% Yes (2) 75% Many (6)
56. Does the individual receive routine/scheduled medical treatment? 17IQR#19a	75% Yes (6) 25% Many (2)
57. Does the individual receive medication as prescribed? 17IQR#19e	63% Yes (5) 38% Many (3)

Question	2018 (sample=10)
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	25% Yes (2) 50% Many (4) 25% Needs Imp (2)
59. Are nursing services provided as needed by the individual? 17IQR#20	38% Yes (3) 50% Many (4) 13% Needs Imp (1)
60. Is the CARMP is accurate? '17IQR#21f	63% Yes (5) 38% Many (3)
61. Is the CARMP consistently implemented as intended?	75% Yes (6) 25% Many (2)
62. Are the person's health supports/needs being adequately addressed? CPRQ56; '17IQR#19	0% Yes 75% Many (6) 25% Needs Imp (2)
ASSESSMENTS	
63. Did the team consider what assessments the person needs and would be relevant to the team's planning efforts? CPRQ57	50% Yes (4) 50% Many (4)
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	25% Yes (2) 63% Many (5) 13% Needs Imp (1)
65. Did the team arrange for and obtain the needed, relevant assessments? CPRQ58; '17IQR#18	25% Yes (2) 75% Many (6)
66. Are the assessments adequate for planning? CPRQ59; '17IQR#4f	13% Yes (1) 63% Many (5) 25% Needs Imp (2)
67. Were the recommendations from assessments used in planning? CPRQ60; '17IQR#5	25% Yes (2) 63% Many (5) 13% Needs Imp (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	60% Yes (3) 20% Many (1) 20% No (1) (3 N/A)
ADEQUACY OF PLANNING AND ADEQUACY OF SERVICES	
69. Is there a document called an Individual Service Plan (ISP) that was developed within the past year? CPRQ61; '17IQR#9	100% Yes (8)

Question	2018 (sample=10)
70. Was the ISP developed by an appropriately constituted IDT? CPRQ62; '17IQR#3	13% Yes (1) 88% Maybe (7)
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 (2) 75% Maybe (6)
72. Does my ISP contain current and accurate information? '17IQR#6	25% Yes (2) 75% Maybe (6)
73. Overall, does the long term vision show expectations for growth and skill building? CPRQ64; '17IQR#7b	100% Yes (8)
74. Overall, does the ISP give adequate guidance to achieving the person's long-term vision? CPRQ65; '17IQR#7c	88% Yes (7) 13% Many (1)
75. Is measurable data kept which verifies the consistent implementation of each of the action steps? '17IQR#12a	13% Yes (1) 38% Many (3) 50% Needs Imp (4)
76. Does the data kept identify what the person does so a determination regarding progress/lack of progress? '17IQR#12b	13% Yes (1) 13% Many (1) 25% Needs Imp (2) 50% No (4)
77. Is each action step in the ISP implemented at a frequency that enables the person to learn new skills? '17IQR#12c	25% Yes (2) 50% Many (4) 25% Needs Imp (2)
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	57% Yes (4) 14% Many (1) 14% Needs Imp (1) 14% No (1) (1 N/A)
79. If the person achieves action steps, does the team move to the next in the progression of steps or develops a new one? '17IQR#12e	50% Yes (3) 33% Many (2) 17% No (1) (2 N/A)
80. Has the person made measurable progress on actions steps during this past year?'17IQR#13b	13% Yes (1) 38% Many (3) 25% Needs Imp (2) 25% No (2)
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	25% Yes (2) 25% Many (2) 50% Needs Imp (4)

Question	2018 (sample=10)
82. Overall, are the ISP outcomes related to achieving the person's long-term vision? CPRQ68; '17IQR#7d	88% Yes (7) 13% Many (1)
83. Overall, do the ISP outcomes address the person's major needs? CPRQ69; '17IQR#7g	88% Yes (7) 13% Many (1)
84. Overall, are the Teaching and Support Strategies sufficient to ensure consistent implementation of the services planned? CPRQ71; '17IQR#7i	25% Yes (2) 38% Many (3) 38% Needs Imp (3)
85. Overall, are the recommendations and/or objectives/strategies of ancillary providers integrated into the ISP? CPRQ72; '17IQR#7m	25% Yes (2) 25% Many (2) 38% Needs Imp (3) 13% No (1)
86. Has the person made measurable progress in therapy this year? '17IQR#13a	25% Yes (2) 25% Many (2) 38% Needs Imp (3) 13% No (1)
87. If needed, does the ISP contain a specific Medical Emergency Response Plan (MERP)? CPRQ73b '17IQR#20c	50% Yes (4) 38% Many (3) 13% Needs Imp (1)
88. Does the ISP contain information regarding primary health (medical) care? CPRQ74	88% Yes (7) 13% Many (1)
88a. Does the ISP face sheet contain contact information for the PCP? CPRQ74a	100% Yes (8)
88b. Is the Healthcare coordinator's name and contact information listed in the ISP? CPRQ74b	100% Yes (8)
89. Does the ISP reflect how the person will obtain prescribed medications? CPRQ76	100% Yes (8)
90. Does the ISP reflect how the person will get to work/day activities, shopping, and social activities? CPRQ75	75% Yes (6) 13% Many (1) 13% No (1)
91. Does the ISP contain a list of adaptive equipment needed and who will provide it? CPRQ77; '17IQR#25a	25% Yes (2) 38% Many (3) 38% Needs Imp (3)
92. Overall, is the ISP adequate to meet the person's needs? CPRQ78; '17IQR#7	0% Yes 100% Many (8)
93. Is the ISP being implemented? (If 92 is "3") CPRQ79 '17IQR#12	(8 N/A)

Question	2018 (sample=10)
94a. Is the ISP being implemented? (If 92 is "0", "1", or "2") CPRQ80a '17IQR#12	0% Yes 100% Many (8)
94b. Are current services adequate to meet the person's needs? CPRQ80b '17IQR#11	38% Yes (3) 50% Many (4) 13% Needs Imp (1)
95. Overall, was the direct service staff trained on the implementation of this person's ISP? CPRQ81	63% Yes (5) 13% Many (1) 25% Needs Imp (2)
96. Overall, were the direct service staff able to describe their responsibilities in providing daily care/supports to the person? CPRQ82;	75% Yes (6) 13% Many (1) 13% Needs Imp (1)
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	0% Yes 88% Many (7) 13% Needs Imp (1)
EXPECTATION OF GROWTH AND QUALITY OF LIFE, SATISFACTION	
98. Based on all of the evidence, has the person achieved progress in the past year? CPRQ84; '17IQR#13	13% Yes (1) 63% Many (5) 25% Needs Imp (2)
99. Overall, does the IDT have an appropriate expectation of growth for this person? CPRQ85; '17IQR#8d	75% Yes (6) 25% Many (2)
100. Was the person provided the assistance and support needed to participate meaningfully in the planning process? CPRQ86; '17IQR#1b	38% Yes (3) 50% Many (4) 13% Needs Imp (1)
101. Is the person offered a range of opportunities for participation in each life area? CPRQ87	88% Yes (7) 13% Many (1)
102. Does the person have the opportunity to make informed choices? CPRQ88; '17IQR#30	60% Yes (3) 40% Many (2) (3 CND)
102a. About where and with whom to live? CPRQ89; '17IQR#23c	100% Yes (1) (7 CND)
	60% Yes (3)
102b. About where and with whom to work/spend his/her day? CPRQ90; '17IQR#23d	40% Many (2) (3 CND)

Question	2018 (sample=10)
	40% Many (2) (3 CND)
103. Does the evidence support that providers do not prevent the person from pursuing relationships and are respecting the rights of this person? CPRQ92; '17IQR#31f	88% Yes (7) 13% Many (1)
104. Overall, were the direct service staff interviewed trained on the provider's complaint process? CPRQ93*	50% Yes (4) 50% Many (4)
105. Overall, were all team members interviewed trained or knowledgeable on how to report abuse, neglect and exploitation? CPR 93*; '17IQR#35a	100% Yes (8)
106. Does this person and/or guardian have access to the complaint processes/procedures? CPRQ94	88% Yes (7) 13% No (1)
107. Does the individual have restrictions that should be reviewed by a Human Rights Committee? '17IQR#34h	60% Yes (3) 40% Many (2) (3 CND)
108. If there are restrictions that should be reviewed by HRC, have the restrictions been reviewed (quarterly) and approved (annually) by the HRC? If no, describe why. '17IQR#34i	57% Yes (4) 14% Many (1) 14% Needs Imp (1 14% No (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	57% Yes (4) 14% Many (1) 29% No (2) (1 N/A)
110. Is the person protected from abuse, neglect and exploitation? '17IQR#35	75% Yes (6) 25% Many (2)
111. Have all incidents of suspected abuse, neglect and exploitation been reported and investigated? '17IQR#35b	67% Yes (4) 33% Many (2) (2 N/A)
112. Is the individual safe? '17IQR#24	88% Yes (7) 13% Many (1)
113. What is the level of participation of the legal guardian in this person's life and service planning? CPRQ 97; '17IQR#15a	25% Yes (2) 13% Many (1) 63% Needs Imp (5
114. If the person is retired, does he/she have opportunities to engage in activities of interest during the day? CPRQ 100; '17IQR#29b	100% Yes (4) (4 N/A)
115. Does the person have daily choices/appropriate autonomy over his/her life? CPRQ101 '17IQR#30	88% Yes (7)

Question	2018 (sample=10)
	13% Many (1)
116. Have the person's cultural preferences been accommodated? CPRQ102; '17IQR#31e	100% Yes (8)
117. Is the person treated with dignity and respect? CPRQ103; '17IQR#34c	25% Yes (2) 63% Many (5) 13% Needs Imp (1)
118. Does the person have food and drink available according to their specific nutritional needs and recommendations? CPRQ108; '17IQR#23e	88% Yes (7) 13% Many (1)
119. Does the person have sufficient personal money? CPRQ110 '17IQR#34f	75% Yes (6) 25% Many (2)
120. Does the person get along with their day program/employment provider staff? CPRQ111	100% Yes (8)
121. Does the person get along with their residential provider staff? CPRQ112	100% Yes (8)
TEAM PROCESS 122. Are the individual members of the IDT following up on their responsibilities? CPRQ 114; '17IQR#10	25% Yes (2) 63% Many (5) 13% Needs Imp (1)
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	100% Yes (1) (7 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	63% Yes (5) 38% Many (3)
125. Is there adequate communication among team members between meetings to ensure the person's program can be/is being implemented? CPRQ117	63% Yes (5) 38% Many (3)
126. Do you recommend Dispute Resolution for this IDT? CPRQ118	0% Yes 100% No (8)
127. Is there evidence or documentation of physical regression in the last year? CPRQ119 '17IQR#14a	50% Yes (4) 50% No (4)
128. Is there evidence or documentation of behavioral or functional regression in the last year? CPRQ120; '17IQR14c	13% Yes (1) 88% No (7)
129. If #127 OR #128 is scored "Yes", is the IDT adequately addressing the regression? CPRQ121;	100% Yes (4) (4 N/A)

Question	2018 (sample=10)
130. Has the person changed residential/day services in the last year? CPRQ122	25% Yes (2) 75% No (6)
131. If #130 is Yes, was the change Planned by the IDT? CPRQ122a	100% Yes (2) (6 N/A)
132. If #130 is Yes, did the change meet the person's needs and/or preferences? CPRQ122b	75% Yes (3) 25% No (1) (4 N/A)
133. Has the IDT process been adequate for assessing, planning, implementing and monitoring of services for this person? CPRQ123; '17IQR#7n	25% Yes (2) 75% Many (6)
SUPPORTED EMPLOYMENT	
134. Does (Name) have a current Person Centered Assessment?	0% Yes 25% Many (2) 75% Needs Imp (6)
135. Did this assessment address vocational interests, abilities and needs? CPRQ126; '17IQR#26a	0% Yes 25% Many (1) 75% Needs Imp (3) (4 N/A)
136. Did the individual participate personally in the Person Centered Assessment?	13% Yes (1) 88% No (7)
137. Did the Guardian participate in the Person Centered Assessment?	13% Yes (1) 88% No (7)
138. Is the individual engaged in the Informed Choice Project?	0% Yes 100% No (8)
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	60% Yes (3) 40% No (2) (3 N/A)
140. If #139 is Yes, are these new experiences clearly documented in the ISP Work, Education and/or Volunteer History section?	100% Yes (3) (5 N/A)
141. If #139 is No, is the individual trying new discovery experiences in the community to determine interests, abilities, skills and needs?	0% Yes 100% No (2) (6 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 20% Many (1) 60% Needs Imp (3)

Question	2018 (sample=10)
	20% No (1) (3 CND)
143. Has the individual received information regarding the range of employment options available to him/her? '17IQR#26c	0% Yes 25% Many (1) 50% Needs Imp (2) 25% No (1) (4 N/A)
144. Has the Guardian received information regarding the range of employment options available for the individual?	25% Yes (1) 50% Needs Imp (2) 25% No (1) (4 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	25% Yes (1) 25% Many (1) 25% Needs Imp (1) 25% No (1) (4 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?	25% Yes (1) 25% Many (1) 25% Needs Imp (1) 25% No (1) (4 N/A)
147. Has the individual participated in work or volunteer activities during the past year?	33% Yes (2) 67% Many (4) (2 N/A)
148. Has the individual identified what type of work or volunteer activities he/she would like to do?	50% Yes (3) 33% Many (2) 17% Needs Imp (1) (2 N/A)
149. Does the Guardian support him/her working?	40% Yes (2) 60% No (3) (3 N/A)
150. Is (Name) is involved in the DVR Outreach Project?	25% Yes (2) 75% No (6)
151. Is the individual engaged in Supported Employment? CPRQ129	0% Yes 100% No (4)
152. Is the individual Working in accordance with the following: CPRQ 130 '17IQR#28	0% Yes 25% Many (1)

Question	2018 (sample=10)
	25% Needs Imp (1) 50% No (2) (4 N/A)
153. Does the person have a Career Development Plan? CPRQ128	0% Yes 100% No (1) (7 N/A)
BEHAVIOR	
154. Is the person considered by the IDT to need behavior services now? CPRQ131; '17IQR#5d	50% Yes (4) 50% No (4)
155. Does the person need behavior services now? CPRQ132 '17IQR#11e	50% Yes (4) 50% No (4)
156. Have behavioral assessments been completed? CPRQ133	75% Yes (3) 25% Many (1) (4 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	100% Yes (4) (4 N/A)
158. Has the staff been trained on the Positive Behavior Support Plan? CPRQ135; '17IQR#10d	100% Yes (4) (4 N/A)
159. If needed, does the person have a Behavior Crisis Intervention Plan that meets the person's needs? CPRQ 73a; '17IQR#5h	100% Yes (1) (7 N/A)
160. Does the person receive behavioral services consistent with his/her needs? CPRQ 136 '17IQR#5i	75% Yes (3) 25% Many (1) (4 N/A)
161. Are behavior support services integrated into the ISP? CPRQ 137; '17IQR#11d	75% Yes (3) 25% No (1) (4 N/A)
ADAPTIVE EQUIPMENT / AUGMENTATIVE COMMUNICATION	
162. Has the person received all adaptive equipment needed? CPRQ138; '17IQR#25b	63% Yes (5) 25% Many (2) 13% Needs Imp (1)
163. Has the person received all assistive technology needed? CPRQ139; '17IQR#25c	63% Yes (5) 38% Many (3)

Question	2018 (sample=10)
164. Do direct care staff know how to appropriately help the person use his/her equipment? '17IQR#25f	100% Yes (8)
165. Is the person's equipment and technology in good repair?'17IQR#25d	75% Yes (6) 25% Many (2)
166. Is the person's equipment/technology available in all appropriate environments? '17IQR#25e	63% Yes (5) 38% Many (3)
167. Has the person received all communication assessments and services? CPRQ140 ; '17IQR#10b	57% Yes (4) 43% Many (3) (1 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	100% Yes (8)
169. Does the person have an ISP that contains a complete Vision Section that is based on a long-term view? CPRQ142 '17IQR#7a	100% Yes (8)
170. Does the person receive services and supports recommended in the ISP? CPRQ143; '17IQR#11a	88% Yes (7) 13% Many (1)
171. Does the person have adequate access to and use of generic services and natural supports? CPRQ144; '17IQR#33f	75% Yes (6) 25% Many (2)
172. Is the person integrated into the community? CPRQ145; '17IQR#29g	63% Yes (5) 38% Many (3)
173. Overall is the ISP adequate to meet the person's needs? CPRQ146; '17IQR#7	0% Yes 100% Many (8)
174. Is the total program of the level of intensity adequate to meet this person's needs? CPRQ147; '17IQR#36	0% Yes 100% Many (8)