



A. Jackson Class Member Demographics – Metro1 Region

At the time the sample was selected for the Metro1 Review, there were 156 Active Jackson Class Members in Region. Since that time, seven of the class members in that region have passed away, and are not included in the tables below. Fourteen individuals were chosen to be part of the review sample.

**Chart #1: Active Class Member Demographics in Metro Region
(149 as of 7/10/2018)**

Gender	
Male	91
Female	59

Age	
30-39	3
40-49	29
50-59	57
60-69	46
70-79	13
80+	2
Average Age:	58

Ethnicity	
Hispanic	69
Caucasian	57
Native American	16
Black	8
Asian	0

Day Service Type	
Adult Habilitation (AH)	116
Adult Hab/Supp Empl (SE)	16
Adult Hab/Community Access (CA)	7
Community Access	2
Supported Employment	3
Mi Via	3
Private Pay	1
NONE	2

Residential Service Type	
Supported Living	114
Family Living	31
Mi Via	3
Independent Living	1
Private Pay	1

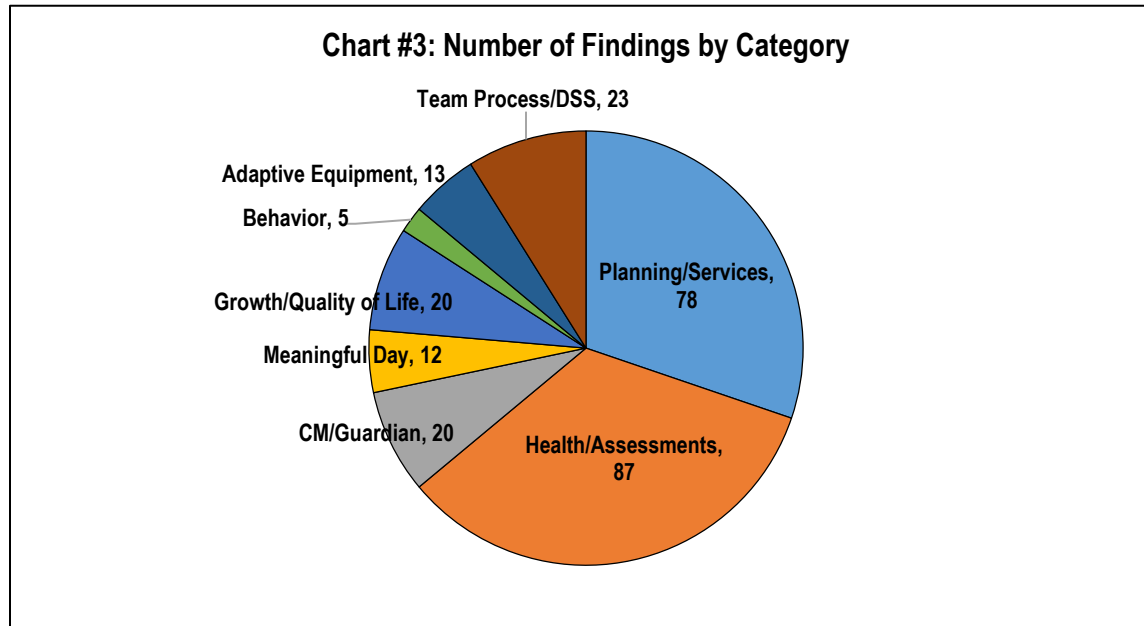
Chart #2: Agencies Serving Class Members in the Metro Region:

Case Management	A New Vision (12)	A Step Above (21)	Amigo (11)	Carino (24)	NMQCM (15)	Mi Via (3)	Peak (15)	Private Pay (1)	Unidas (40)	Unique Opportunities (7)
Residential	A Better Way (1)	Abilities First (1)	Active Solutions (1)	Adelante (34)	Advantage Communications (1)	Alegria (1)	Alianza (1)	Alta Mira (1)	Arca (15)	At Home Advocacy (4)

	Bright Horizons (5)	Cornucopia (2)	Dungarvin (10)	Expressions of Life (7)	Expressions Unlimited (1)	La Vida Felicidad (1)	Life Missions (2)	LLCP (31)	MaxCare (1)	Mi Via (3)
	New Pathways (1)	Onyx (3)	OptiHealth (5)	Private Pay (1)	Su Vida (3)	The New Beginnings (11)	TLC (2)			
Day (some JCMs have more than one day provider)	A Better Way (4)	Ability First (1)	Active Solutions (3)	Adelante (52)	Advantage Communications (1)	Alianza (2)	Arca (3)	Bright Horizons (3)	CFC (9)	Community Options (1)
	Cornucopia (3)	Dungarvin (6)	Expressions Unlimited (2)	La Vida (2)	LifeRoots (4)	LLCP (31)	Mandy's (2)	MaxCare (1)	MiVia (3)	New Pathways (1)
	None (2)	Onyx (2)	Optihealth (2)	Private Pay (1)	Share Your Care (7)	SuVida (4)	The New Beginnings (6)			

B. Most Frequently Identified Findings by Category

The first round of Metro Region had a total of 262 Findings and Recommendations. The table below shows what categories they fall into.



C. Most Frequently Identified Findings by Category

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 DDS 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 262 Findings and Recommendations in the Metro1 Region Review, there were 51 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 and Case Management/Guardianship.

Area	Ability First (1)	Adelante (9)	ARCA (3)	Alegria (1)	Total
Adaptive Equipment / Augmentative Communication	0	1	0	1	2
Behavior	0	1	0	0	1
Case Manager/ Guardian	1	3	3	1	8
Expectations of Growth/Quality of Life	0	4	1	0	5
Health/Assessments	2	7	3	1	13
Meaningful Day	0	4	1	1	6
Planning and Services	2	7	4	0	13
Team Process/DSS	1	0	2	0	3
TOTAL	6	27	14	4	51

Area	A New Vision (1)	A Step Above (4)	Amigo (2)	Peak (2)	Unidas (4)	Unique Opportunities (1)	Total
Adaptive Equipment / Augmentative Communication	0	1	0	0	1	0	2
Behavior	0	0	1	0	0	0	1
Case Manager/ Guardian	2	2	1	2	1	0	8
Expectations of Growth/Quality of Life	1	1	1	0	2	0	5
Health/Assessments	3	1	0	3	6	0	13
Meaningful Day	0	4	1	0	1	0	6
Planning and Services	1	3	5	2	2	0	13
Team Process/DSS	1	0	0	1	1	0	3
TOTAL	8	12	9	8	10	0	51

D. Immediate and Special Findings

There were fourteen (14) Class Members reviewed in the Metro Region as part of the 2018 IQR. Four of those fourteen (29% of the sample) were found to have Immediate Needs. Three of those four had issues that triggered Incident Reports, and two of the four also had Special Findings. Three additional individuals (21% of the sample) were found to have Special Needs (there were a total of five individuals with Special Needs). There were a total of five Immediate findings and eight Special findings. Details of the issues of these findings are available in the table below.

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

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

Chart #6: Immediate/Special Identified Individual Issues – 2018 IQR Metro1

Reg	CM	Res	Day	Immd	Spec	IR	Issue
Medication/Side Effects							
Metro1	Peak	Adelante	Adelante		X		Medication Allergy not Identified The eChat states has no known drug allergies. An Incident Report states “Consumer went to UC to evaluate breathing. On 3/9/10, she went again for swollen lips and an itchy tongue. Diagnosed with pneumonia and prescribed antibiotics. She had an allergic reaction to the antibiotics. PCP did further test, R/O pneumonia and discontinued the antibiotics.
Not following orders/recommendations							
Metro1	Peak	Adelante	Adelante		X		SAFE Recommendations Not Implemented A SAFE Clinic evaluation was completed ... in May, 2017. The evaluation resulted in a number of recommendations. The team met in June, 2017 and determined which preliminary recommendations would be incorporated into the CARMP. There is no evidence that they met following the receipt of the final report. No Decision Consultation Form was completed ...
Metro1	Peak	Abilities First	Adelante		x		Follow-up appointments and/or lab work were not completed ... PCP ordered repeat labs in 3-4 months following 8.15.2017 appointment. No evidence that this occurred. Results are not in the record and not listed in the quarterly nursing report for that period.
Symptoms/Issues not being followed up							
Metro1	A New Vision	Arca	Adelante		X		Ongoing GERD Issues; No GI consult All team members interviewed were aware that GERD is a major issue ... <ul style="list-style-type: none"> • The severity of her reflux is likely under reported. Her DH nurse reported that her GERD was no longer an issue right before she refluxed food from lunch into her mouth, not once but twice during an hour long period. Both times she made a grimace and one could see her left cheek bulge slightly. Then food appeared on her lips. Regurgitation of food into the mouth is extremely dangerous and has several potentially severe impacts on health including but not limited to Aspiration and Barret’s Esophagus. • Her reflux medication, a proton pump inhibitor (PPI), is prescribed on the MAR as “Take 1 capsule daily for GERD.” This medication is designed to be given 30 minutes before a meal, often the first meal of the day, for best effectiveness. • Constipation has been identified as an issue by nursing with HCP and MERP created due to the issue.

Reg	CM	Res	Day	Immd	Spec	IR	Issue
							<ul style="list-style-type: none"> Documentation of team discussion of constipation issues-need for more fluid, how to reconcile fluid for constipation with GERD, etc. was not found. She was observed to have a low fluid intake during the on-site visit of 2/19/18. BM tracking documentation provided for this review was poor so it is challenging to accurately determine the level of the problem. <p>No GI consultation was mentioned or documented despite GERD, Constipation and hiatal hernia.</p>
Aspiration/CARMP Issues							
Metro1	Unidas	Arca	Adelante		X		<p><u>Nursing not monitoring as required</u> Has High Acuity and High Risk for Aspiration. He should receive monthly nursing assessments. There is no evidence of monthly assessments after 9/7/17. These were requested but not provided.</p>
Metro1	Peak	Adelante	Adelante		X		<p><u>CARMP is not followed/Inconsistent</u> In addition to the areas of the SAFE Evaluation not addressed by the CARMP, there are other problems with the CARMP:</p> <ul style="list-style-type: none"> The CARMP was revised 06/07/17, following hospitalization for aspiration. It still says that there have been no incidents of aspiration or aspiration associated illness. Showering instructions include showering in the shower bay in a supine position with 30° wedge, but do not have specific instructions on how to prevent water from causing aspiration or protecting her airway. Staff indicate that she never showers lying down. Swimming instructions continue to be included, ...Staff indicates that she no longer swims. SAFE Clinic advised for watching for gradual weight loss over time; the CARMP states that the nurse will notify MD if 10% within a six month period. Indv weighs 100 lbs., plus or minus a couple of pounds each month. Current records indicate that in February 2017, she weighed 104 lbs. In February 2018, she weighed 95 lbs. <p>The CARMP indicates that she can be fed in the recliner, ... "PT has been very clear however, that Indv should only consume food and fluids while seated in her wheelchair, seated upright, and at a table."</p>
Metro1	Unidas	Alegria	A Better Way	X		X	<p><u>Issues were observed with implementation</u> of AM's CARMP:</p> <ul style="list-style-type: none"> Day/Community Staff (A Better Way) took his lunch (whole flour tortilla) out of container and cut the tortilla in half. ... He grabbed a big piece of the tortilla and stuffed it into his mouth. His food is to be cut into ¼ inch pieces for him to eat consistent with CARMP instructions. After being reminded that the CARMP calls for small pieces Staff did cut the food into small pieces... <p>Day ... did not use the sipamug recommended in the CARMP.</p>
Falls/Fractures/Safety							
Metro1	A Step Above	Adelante	Adelante	X			<p><u>ROM being done incorrectly – should not be done by staff</u> ...a HCP for spasticity/contractures dated 1/3/17 and updated 1/9/18 that directs staff to do daily ROM/stretching to hands, arms and legs. Her HCP for Paralysis also instructs staff to “aid L in performing range of motion per therapy plans” Her OT assessment and WDSI specifically states that staff are not to do ROM activities due to risk of fracture. The PT, during interview, agreed that staff should not be doing ROM due to her fragile status. Through Nurse reports, during interview of 2/12/18 that she had just become aware of this discrepancy and that it is being corrected, Day staff reported, during interview 2/20/18 that staff do range of motion activities on ... hands, arms and legs as part of her regular activities in the day program.</p>
Equipment Issues							
Metro1	Unidas	Adelante	Adelante	X		X	<p><u>Wheelchair is inadequate</u> 2.27.17: The first physician's order for a new manual wheelchair was written.</p>

Reg	CM	Res	Day	Immd	Spec	IR	Issue
							<p>3.12.17: Concerns for wheelchair were expressed to the CM in the initial PT evaluation.</p> <p>6.22.17: PT/OT were listed in the IDT meeting notes as needing to write letter for new wheelchair. Neither were at the meeting according to the sign in sheet, and there is no correspondence that indicates case manager asked for this needs statement.</p> <p>12.2.17: PT wrote a needs statement, but she has not been to the PCP for the order. She was scheduled for 2/12/18 for annual health but was hospitalized before this.</p> <p>2.15.18: The PT indicated that wheelchair has been inadequate for her needs for quite some time; she couldn't reach the foot rests, and the back had no support for her.</p>
Metro1	Peak	Adelante	Adelante	X			<p>Wheelchair not timely obtained</p> <p>June 2017: The SAFE clinic (May 2017) recommended either a tilt in space wheelchair or modifications to a standard wheel chair due to increasing postural difficulties, which can exacerbate her aspiration issues. A script for a wc evaluation was provided from the SAFE clinic physician.</p> <p>August 2017: She went to her own PCP and the PCP wrote another script for the evaluation at the seating clinic.</p> <p>October 2017: The actual assessment of her wc did take place, where it was determined that a tilt-in-space chair would best meet her needs. The wheelchair has still not been obtained. Per PT interview, she checked very recently and the clinic said it was sending some more paperwork to the PCP, so it has not yet even been ordered.</p>
Metro1	Unidas	Alegria	A Better Way		X		<p>Dining Equipment was not available</p> <p>The sipamug and weighted spoon listed on the AT Inventory were not observed at the Day/Community Access (A Better Way) program.</p>
Missing/Gap in Therapy							
Metro1	Unidas	Adelante	Adelante	X		X	<p>PT Services missing/delayed</p> <p>...without PT services for a year prior to this current ISP year, but it is unclear why. The former case manager was unavailable to explain. CM Progress notes indicate contact with PT 2/7/17, 3/15/17, 6/26/17, and 7/16/17.</p> <p>March 2016: FOC for PT Signed.</p> <p>May 2, 2016: Another FOC for PT was signed.</p> <p>2016/2017 ISP: PT is listed</p> <p>March 2017: The PT assessed IC and identified that she needed PT.</p> <p>July 2017: 4 months later, PT was given budget authorization by the former case manager to begin PT Services. The PT indicated that communication with the former case manager was very poor.</p> <p>The PT has requested a consultation (podiatrist or orthopedic) to evaluate the bones in feet, ankles and legs due to the wheelchair not properly supporting her feet. (Her tendons have tightened)</p>
Metro1	Unidas	Alegria	A Better Way		X		<p>Gap in OT Services</p> <p>OT services were discharged 10/4/17 as the OT stated that he was not benefitting from hippo therapy. A new OT was found 12/5/17 (FOC) but as of this review, an OT had still not seen him. The initial report should be completed within 44 days of the FOC.</p>

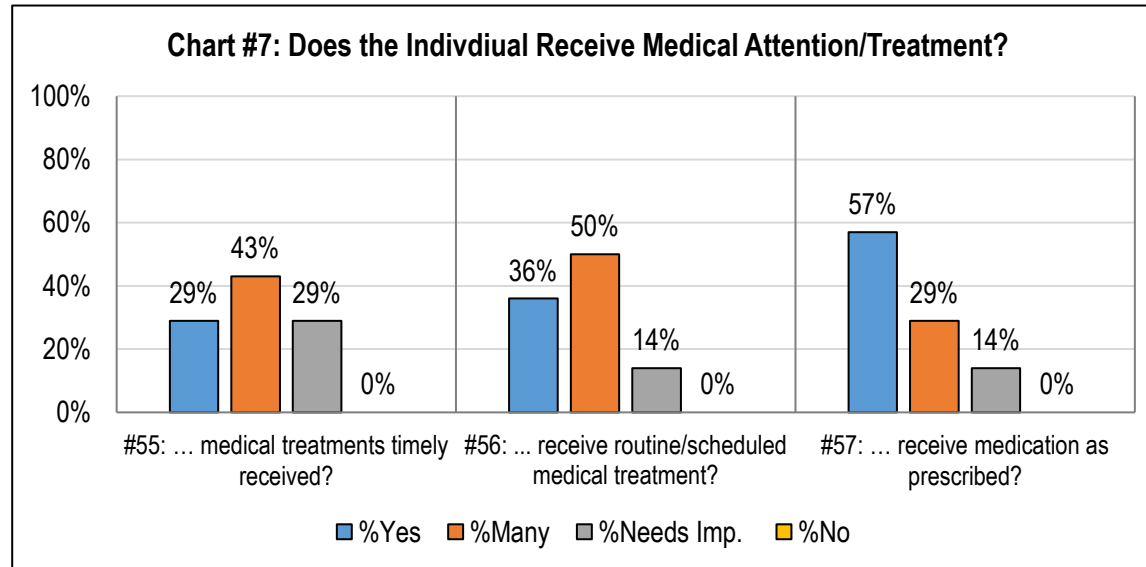
E. Health, Assessments and Overall Wellness

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.

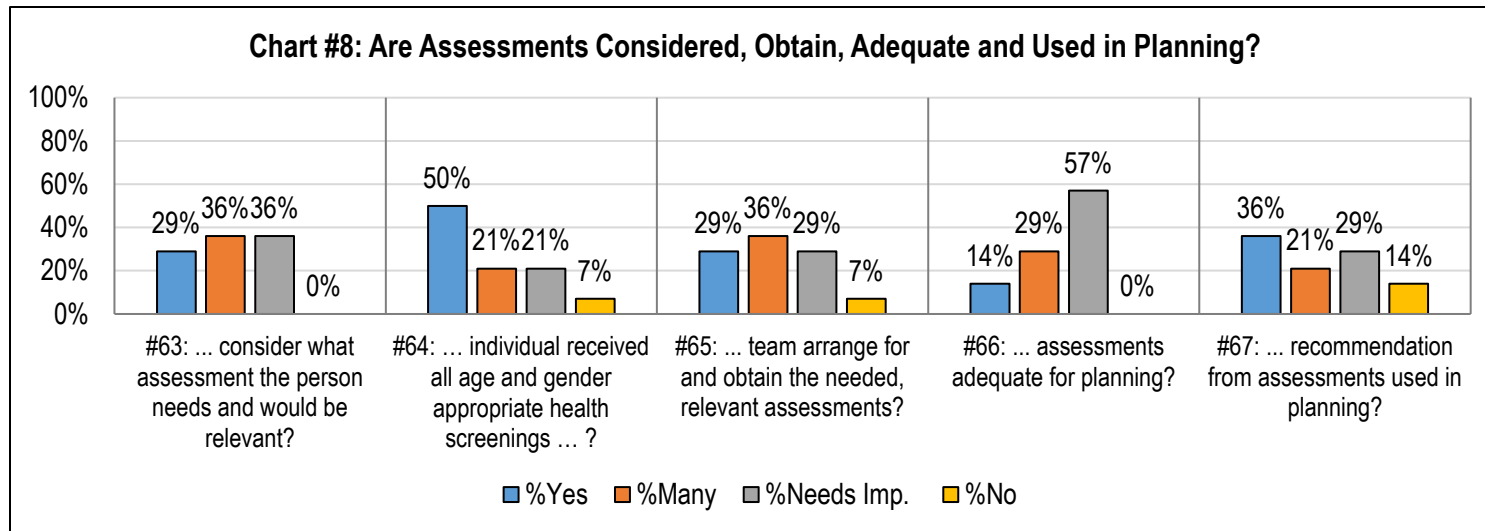
Question #63: Did the team consider what assessment the person needs and would be relevant to the Team's planning efforts?

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 number of issues found; not the number of findings. For example, if one individual was found to have a Medication Administration Record (MAR) which called for the administration of a medication for which a doctors order was not found AND was also found to have been given a medication twice a day when the doctor's order called for one time a day, that might be ONE finding regarding medication but TWO different issues.

Chart #9: Type of Issues identified by Residential Agency.

Issue	Residential Agency (# in sample):				Total
	Ability First (1)	Adelante (9)	ARCA (3)	Alegria (1)	
AIMS: Not Current/Missing/Inaccurate			1	1	2
Specialty Consult not completed		1	2		3
Audiology/ABR: Not Current/Missing/Inaccurate		2	1		3
Vision: Not Current/Missing/Inaccurate		1			1
Nutrition: Not Current/Missing/Inaccurate		2	3		5
Bone Density: Not Current/Missing/Inaccurate		1			1
Annual Physical not accurate/complete		1			1
MERPs/HCPs Not found/not specific/incorrect	3	8	6		17

Residential Agency (# in sample):					
Issue	Ability First (1)	Adelante (9)	ARCA (3)	Alegria (1)	Total
Pap/Pelvic/Well Woman not completed		3			3
Mammogram/Breast Exam not completed		1			1
MAR/Medication/Dr. Order do not match		2			2
eChat incorrect/incomplete	9	11	4		24
HepC vaccine not done (healthfinder.gov)				1	1
Colon cancer screen not done (healthfinder.gov)		2			2
Flu vaccine not done (healthfinder.gov)				1	1
CARMP inaccurate/incomplete/not current	1	10	2		13
Labs missing (PSA, pre-Physical, pre-Neuro appt.)	3				3
Totals	16	45	19	3	83

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?

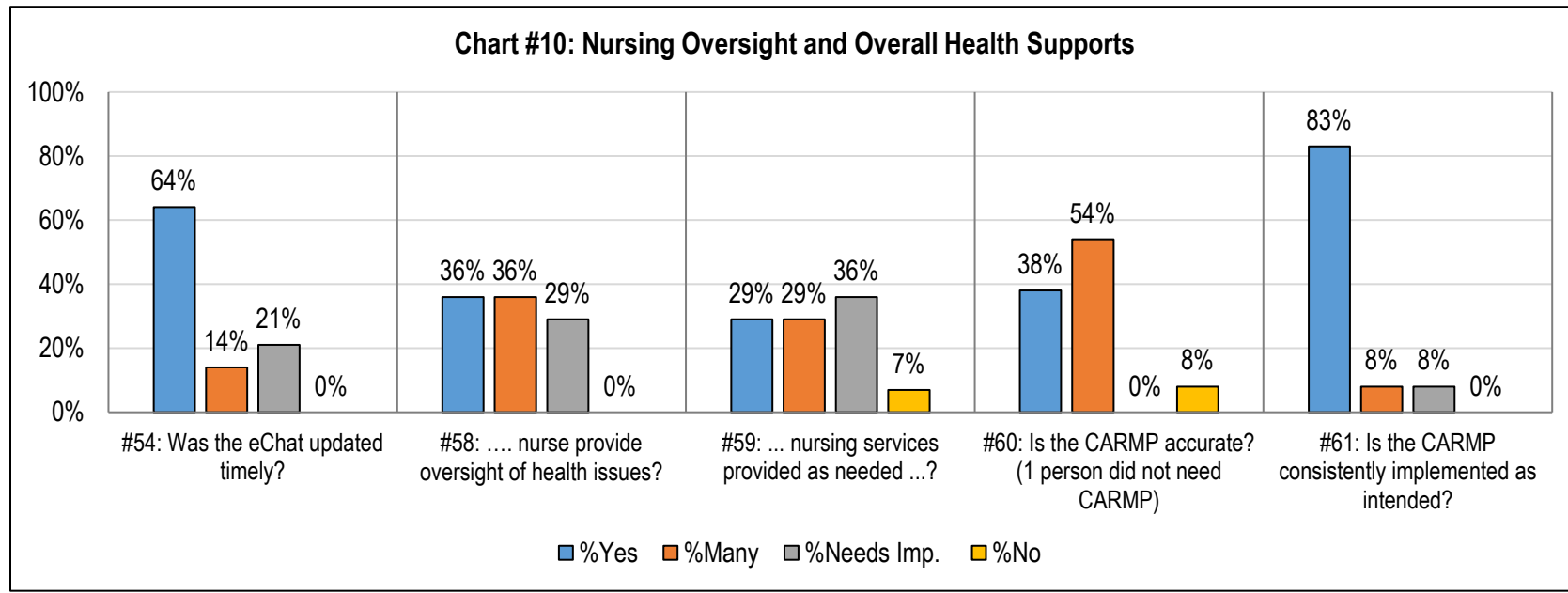
Question #58: Does my nurse provide oversight of health issues (i.e. weight records, vitals, lab reports, PRN medication use, seizure records) in order to ensure accuracy, identify and respond to new issues?

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?



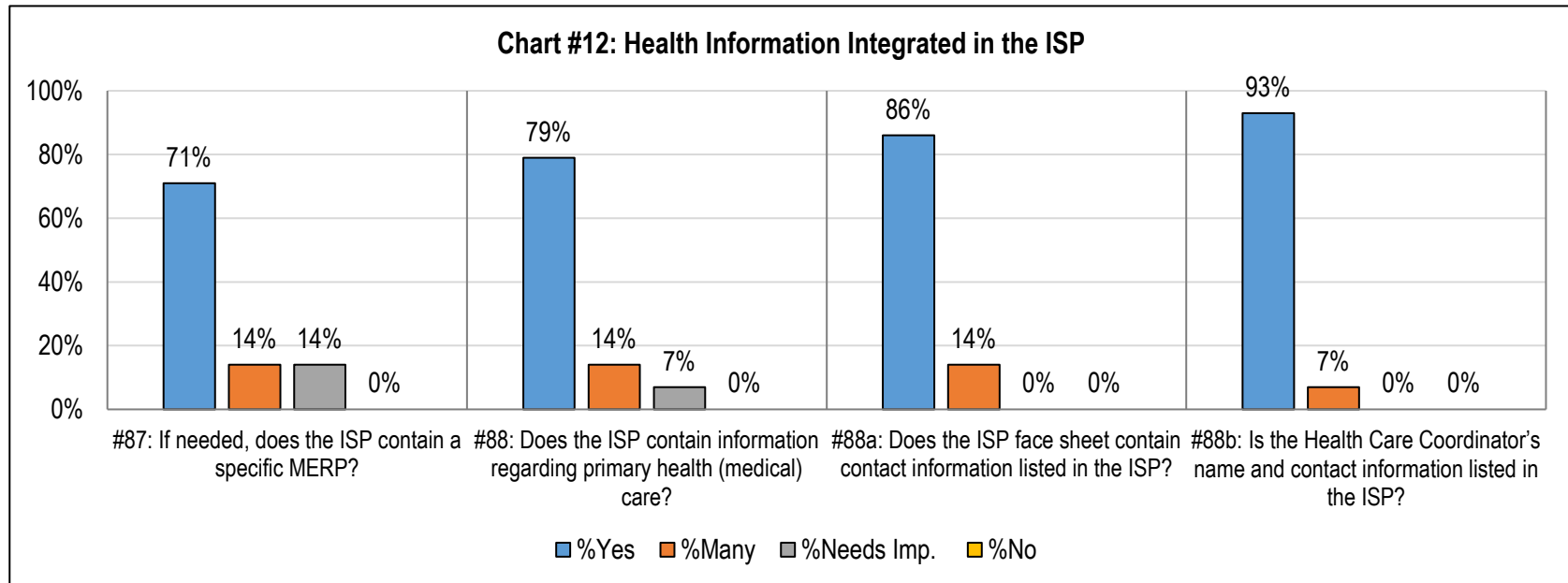
Oversight provided by nurses is a critical safeguard for Jackson Class Members, direct support professionals and their supervisors. The table below provides specific details, by Residential provider, of nursing related issues identified during the 2018 IQR. Again, this represents the number of issues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

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

Issue	Residential Agency (# in sample):				Total
	Ability First (1)	Adelante (9)	ARCA (3)	Alegria (1)	
Nursing Quarterly report not timely completed	3	2	2	1	8
Nursing Annual not timely		5			5
Nurse report not accurate/missing information	1	2	5		8
Nurse Assessment not provided for review		1	1		2
Nurse not Monitoring as required	4		2		6
Nurse needs to increase communication	1				1
Totals	9	10	10	1	30

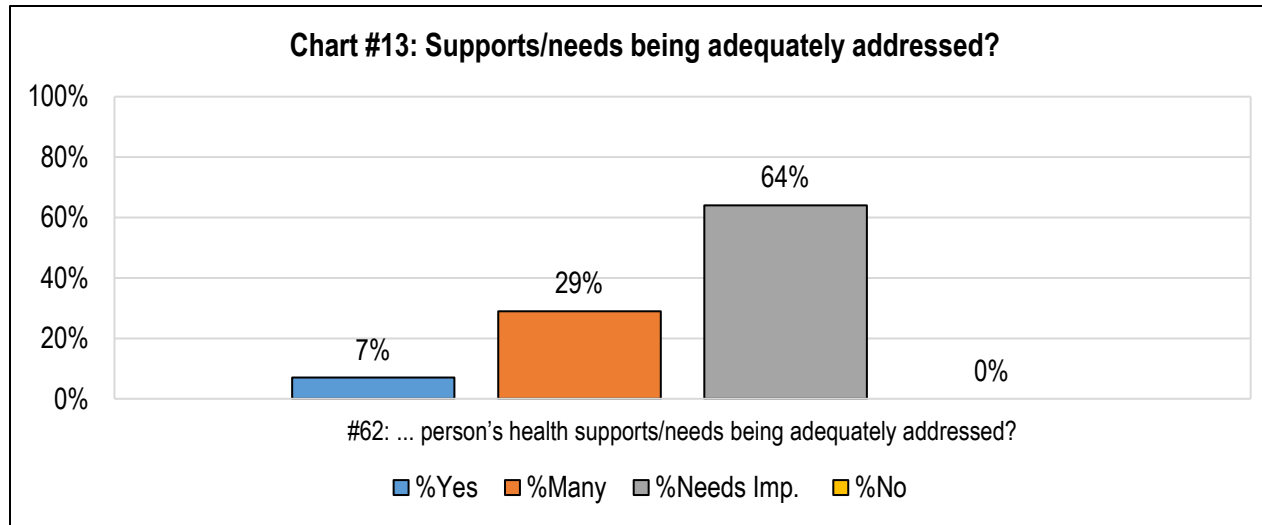
In addition to the issues and questions noted above, the individual's nurse is responsible, with the assistance of the rest of the Team, to assure that the documents presented and created for planning, such as the ISP, are accurate and thorough and contain the needed plans and information required. The 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 14 people in the Metro1 review, 1 person did have their health supports/needs adequately addressed (7%). There were four people who had many of their needs addressed (29%), and nine are receiving supports that need improvement (64%).



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 number of issues found; not the number of findings in the Findings letters. For example, if one individual had a finding that noted four different inconsistencies in that person's MERP, that would be counted as a "4", for the number of issues, not just a "1" for the individual to whom the findings apply.

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

Issue	Residential Agency (# in sample):				Total
	Ability First (1)	Adelante (9)	ARCA (3)	Alegria (1)	
CARMP inaccurate/incomplete	5	2	2		9
MERP not created, but needed			1		1
HCP inaccurate/incomplete		4	4		8
eChat has errors/inconsistent/needs review	8	11	7		26
ARST not accurate	5				5
Weight not tracked/inconsistent	1	1			2
Bowel/bladder/fluid tracking not consistent	3	11	3		17
PT Report (Annual/Semi) inaccurate/inadequate			3		3
OT Eval does not identify baseline/measure progress	1	2		1	4
SLP Report (Annual/Semi) inaccurate/inadequate		2	1	1	4
SLP Eval not provided for review/missing			1		1
Behavior Eval does not identify baseline/measure progress			6	2	8

Issue	Residential Agency (# in sample):				Total
	Ability First (1)	Adelante (9)	ARCA (3)	Alegria (1)	
Behavior Report (Annual/Semi) inaccurate/inadequate				1	1
Behavior Eval not provided for review/missing			4	1	5
Behavior tracking incomplete		1			1
BSC services/evaluation not provided; is needed	1				1
Total # of Issues	24	34	32	6	96

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 everyone that supports 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. 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?

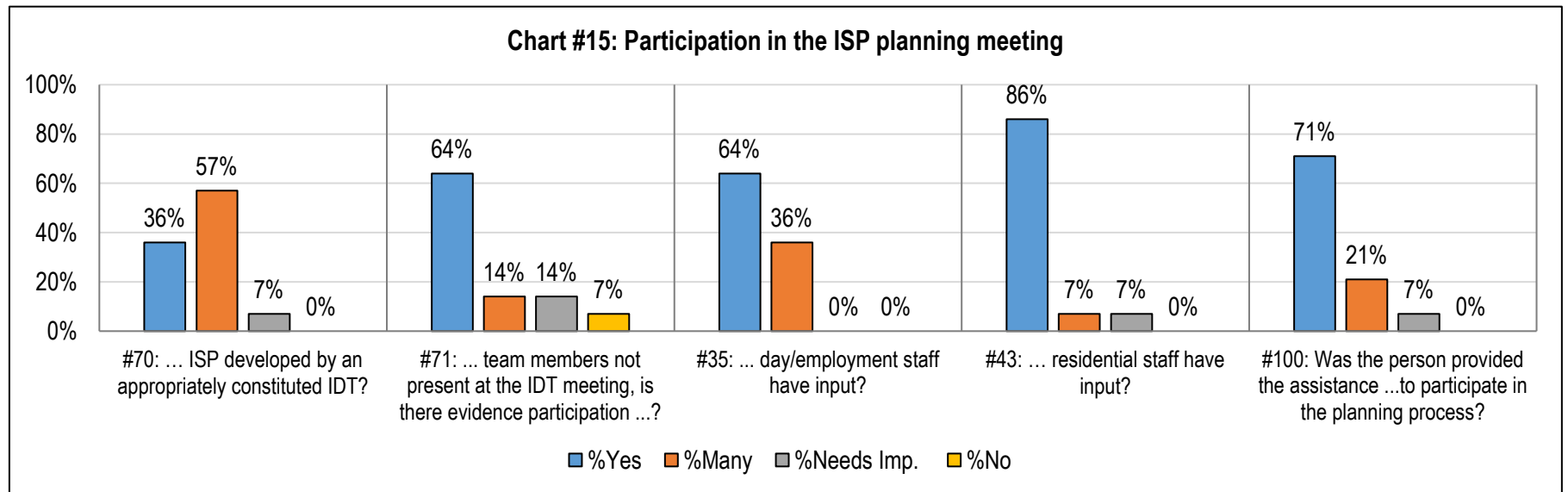


Chart #16: ISP Development Participation, by Provider

Question	Residential Agency (# in sample):			
	Ability First (1)	Adelante (9)	ARCA (3)	Alegria (1)
Q# 70	0% Yes 100% Needs Imp	44% Yes 56% Many	33% Yes 67% Many	0% Yes 100% Many
Q# 71	100% Yes	56% Yes 11% Many 22% Needs Impv 11% No	67% Yes 33% Many	100% Yes
Q# 35	0% Yes 100% Many	78% Yes 22% Many	33% Yes 67% Many	100% Yes
Q# 43	100% Yes	78% Yes 11% Many 11% Needs Impv	100% Yes	100% Yes
Q# 100	0% Yes 100% No	78% Yes 22% Many	67% Yes 33% Many	100% Yes

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

Question	Case Management Agency (# in sample):					
	A New Vision (1)	A Step Above (4)	Amigo (2)	Peak (2)	Unidas (4)	Unique Opportunities (1)
Q# 70	100% Yes	75% Yes 25% Many	50% Yes 50% Many	0% Yes 50% Many 50% Needs Impv	0% Yes 100% Many	0% Yes 100% Many
Q# 71	100% Yes	100% Yes	100% Yes	50% Yes 50% No	25% Yes 25% Many 50% Needs Impv	0% Yes 100% Many
Q# 35	0% Yes 100% Many	75% Yes 25% Many	100% Yes	50% Yes 50% Many	50% Yes 50% Many	100% Yes
Q# 43	100% Yes	100% Yes	100% Yes	100% Yes	50% Yes 25% Many 25% Needs Impv	100% Yes
Q# 100	100% Yes	100% Yes	50% Yes 50% Many	50% Yes 50% No	50% Yes 50% Many	100% Yes

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?

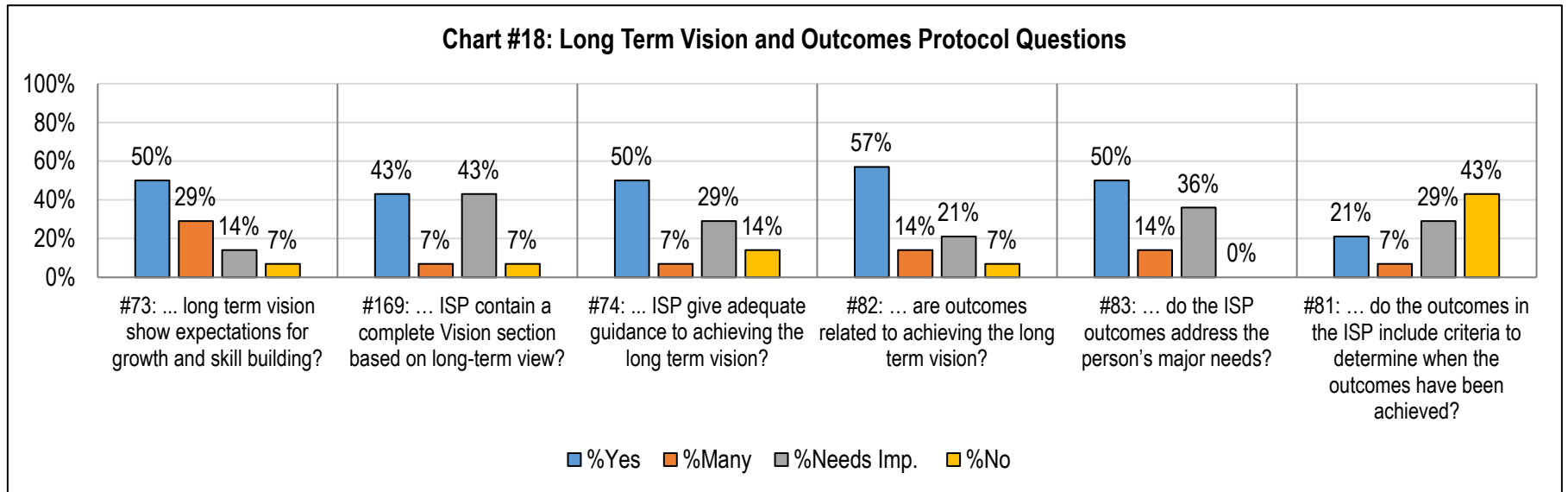


Chart #19: Vision and Outcome Scores, by Residential Agency

Question	Residential Agency (# in sample):			
	Ability First (1)	Adelante (9)	ARCA (3)	Alegria (1)
Q# 73	100% Yes	33% Yes 44% Many 11% Needs Impv 11% No	67% Yes 33% Needs Impv	100% Yes
Q# 169	100% Yes	33% 11% Many 44% Needs Impv 11% No	33% Yes 67% Needs Impv	100% Yes
Q# 74	100% Yes	44% Yes 33% Needs Impv 22% No	33% Yes 33% Maybe 33% Needs Impv	100% Yes
Q# 82	100% Yes	56% Yes 11% Many 22% Needs Impv 11% No	33% Yes 33% Maybe 33% Needs Impv	100% Yes
Q# 83	100% Yes	33% Yes 11% Many 56% Needs Impv	67% Yes 33% Maybe	100% Yes
Q# 81	100% Yes	22% Yes 11% Many 44% Needs Impv 22% No	0% Yes 100% No	0% Yes 100% No

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

Question	Case Management Agency (# in sample):					
	A New Vision (1)	A Step Above (4)	Amigo (2)	Peak (2)	Unidas (4)	Unique Opportunities (1)
Q# 73	0% Yes 100% Needs Impv	50% Yes 50% Many	50% Yes 50% Many	50% Yes 50% Needs Impv	50% Yes 25% Many 25% No	100% Yes
Q# 169	0% Yes 100% Needs Impv	50% Yes 50% Needs Impv	0% Yes 100% Needs Impv	50% Yes 50% Needs Impv	50% Yes 25% Many 25% No	100% Yes

Question	Case Management Agency (# in sample):					
	A New Vision (1)	A Step Above (4)	Amigo (2)	Peak (2)	Unidas (4)	Unique Opportunities (1)
Q# 74	0% Yes 100% Many	50% Yes 50% Needs Impv	0% Yes 100% Needs Impv	50% Yes 50% No	75% Yes 25% No	100% Yes
Q# 82	0% Yes 100% Many	50% Yes 50% Needs Impv	50% Yes 50% Needs Impv	100% Yes	50% Yes 25% Many 25% No	100% Yes
Q# 83	0% Yes 100% Many	50% Yes 50% Needs Impv	50% Yes 50% Needs Impv	50% Yes 50% Needs Impv	75% Yes 25% Many	0% Yes 100% Needs Impv
Q# 81	0% Yes 100% No	50% Yes 50% Needs Impv	0% Yes 100% No	50% Yes 50% Needs Impv	0% Yes 25% Many 75% No	0% Yes 100% Needs Impv

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 Measurability and Action Steps

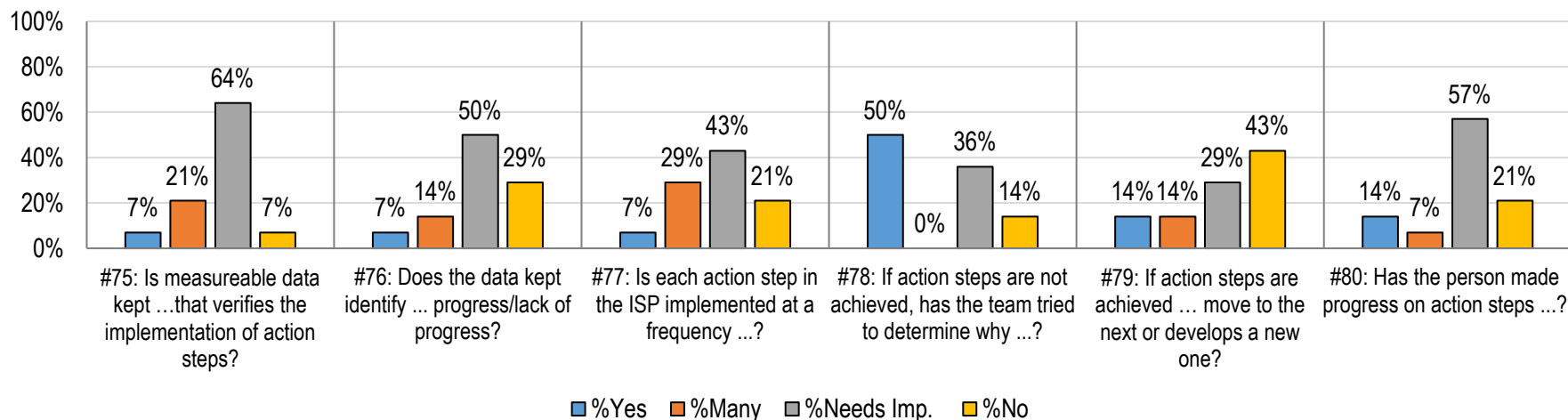


Chart #22: Data and Related ISP Action Step Scores by Residential Agency

Question	Residential Agency (# in sample):			
	Ability First (1)	Adelante (9)	ARCA (3)	Alegria (1)
Q# 75	0% Yes 100% Needs Impv	11% Yes 11% Many 67% Needs Impv 11% No	0% Yes 33% Many 67% Needs Impv	0% Yes 100% Many
Q# 76	0% Yes 100% Needs Impv	11% Yes 44% Needs Impv 44% No	0% Yes 33% Many 67% Needs Impv	0% Yes 100% Many
Q# 77	0% Yes 100% Needs Impv	11% Yes 22% Many 33% Needs Impv 33% No	0% Yes 33% Many 67% Needs Impv	0% Yes 100% Many
Q# 78	100% Yes	44% Yes 44% Needs Impv 11% No	33% Yes 33% Needs Impv 33% No	100% Yes
Q# 79	0% Yes	11% Yes	33% Yes	0% Yes

	Residential Agency (# in sample):			
Question	Ability First (1)	Adelante (9)	ARCA (3)	Alegria (1)
	100% No	22% Many 33% Needs Impv 33% Needs Impv	33% Needs Impv 33% No	100% No
Q# 80	100% Yes	11% Yes 56% Needs Impv 33% No	0% Yes 100% Needs Impv 33% No	0% Yes 100% Many

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

	Case Management Agency (# in sample):					
Question	A New Vision (1)	A Step Above (4)	Amigo (2)	Peak (2)	Unidas (4)	Unique Opportunities (1)
Q# 75	0% Yes 100% Needs Impv	25% Yes 75% Needs Impv	0% Yes 50% Many 50% No	0% Yes 100% Needs Impv	0% Yes 50% Many 50% Needs Impv	0% Yes 100% Needs Impv
Q# 76	0% Yes 100% Many	25% Yes 50% Needs Impv 25% No	0% Yes 50% Needs Impv 50% No	0% Yes 100% Needs Impv	0% Yes 25% Many 25% Needs Impv 50% No	0% Yes 100% Needs Impv
Q# 77	0% Yes 100% Needs Impv	25% Yes 50% Needs Impv 25% No	0% Yes 50% Many 50% No	0% Yes 100% Needs Impv	0% Yes 75% Many 25% Needs Impv	0% Yes 100% No
Q# 78	0% Yes 100% Needs Impv	50% Yes 50% Needs Impv	50% Yes 50% No	50% Yes 50% Needs Impv	50% Yes 50% Needs Impv 50% No	100% Yes
Q# 79	0% Yes 100% Needs Impv	0% Yes 50% Many 50% No	50% Yes 50% No	0% Yes 50% Needs Impv 50% No	0% Yes 50% Needs Impv 50% No	100% Yes
Q# 80	0% Yes 100% Needs Impv	25% Yes 75% Needs Impv	50% Yes 50% Needs Impv	50% Yes 50% Needs Impv	50% Yes 50% Needs Impv	0% Yes 100% Needs Impv

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?

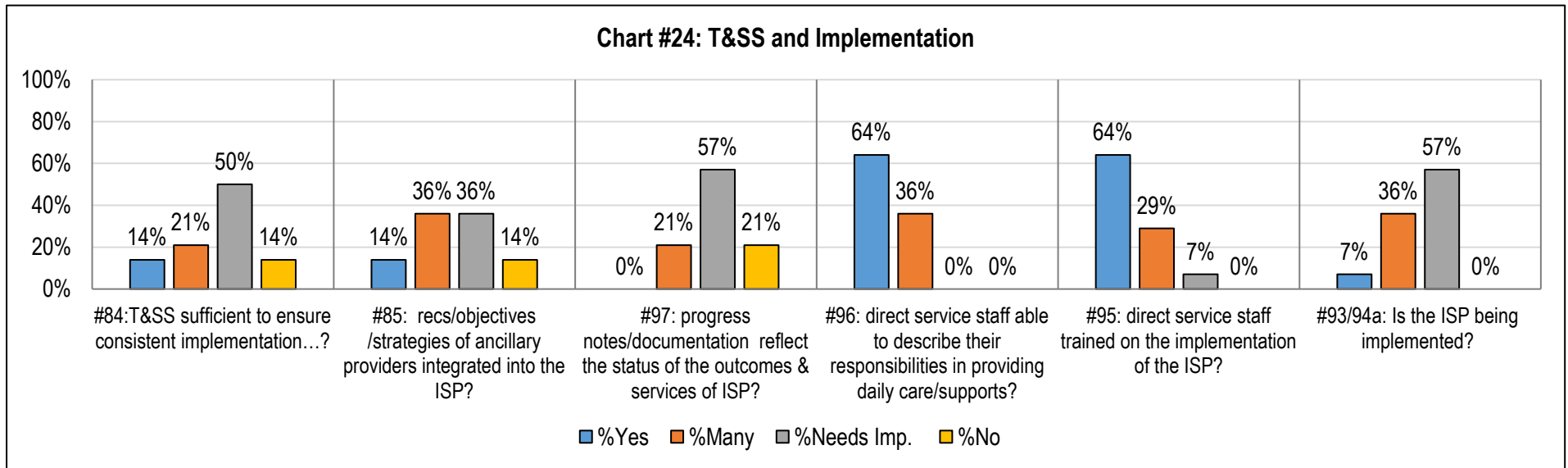


Chart #25: TSS and ISP Implementation Scores by Residential Agency

Question	Residential Agency (# in sample):			
	Ability First (1)	Adelante (9)	ARCA (3)	Alegria (1)
#84	100% Yes	11% Yes 22% Many 56% Needs Impv 11% No	0% Yes 33% Many 67% Needs Impv	0% Yes 100% No
#85	0% Yes 100% Many	11% Yes 33% Many	33% Yes 33% Many	0% Yes 100% No

	Residential Agency (# in sample):			
Question	Ability First (1)	Adelante (9)	ARCA (3)	Alegria (1)
		44% Needs Impv 11% No	33% Needs Impv	
#97	0% Yes 100% Needs Impv	33% Many 44% Needs Impv 22% No	0% Yes 67% Needs Impv 33% No	0% Yes 100% Needs Impv
#96	100% Yes	78% Yes 22% Many	33% Yes 67% Many	0% Yes 100% Many
#95	0% Yes 100% Many	78% Yes 22% Many	33% Yes 33% Many 33% Needs Impv	100% Yes
#94a	0% Yes 100% Many	11% Yes 11% Many 78% Needs Impv	0% Yes 67% Many 33% Needs Impv	0% Yes 100% Many

Chart #26: TSS and ISP Implementation Scores by Case Management Agency

	Case Management Agency (# in sample):					
Question	A New Vision (1)	A Step Above (4)	Amigo (2)	Peak (2)	Unidas (4)	Unique Opportunities (1)
#84	0% Yes 100% Needs Impv	25% Yes 75% Needs Impv	0% Yes 50% Many 50% Needs Imp	50% Yes 50% Needs Impv	0% Yes 50% Many 50% No	0% Yes 100% Needs Impv
#85	0% Yes 100% Many	25% Yes 50% Needs Impv 25% No	0% Yes 50% Many 50% Needs Imp	0% Yes 100% Many	25% Yes 25% Many 25% Needs Impv 25% No	0% Yes 100% Needs Impv
#97	0% Yes 100% Needs Impv	0% Yes 25% Many 75% Needs Impv	0% Yes 50% Many 50% Needs Imp	0% Yes 50% Many 50% Needs Imp	0% Yes 25% Needs Impv 75% No	0% Yes 100% Needs Impv
#96	0% Yes 100% Many	75% Yes 25% Many	50% Yes 50% Many	100% Yes	50% Yes 50% Many	100% Yes
#95	0% Yes 100% Needs Impv	75% Yes 25% Many	100% Yes	50% Yes 50% Many	50% Yes 50% Many	100% Yes
#94a	0% Yes 100% Needs Impv	25% Yes 75% Needs Impv	0% Yes 50% Many 50% Needs Imp	0% Yes 50% Many 50% Needs Imp	0% Yes 75% Many 25% Needs Impv	0% Yes 100% Needs Impv

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?

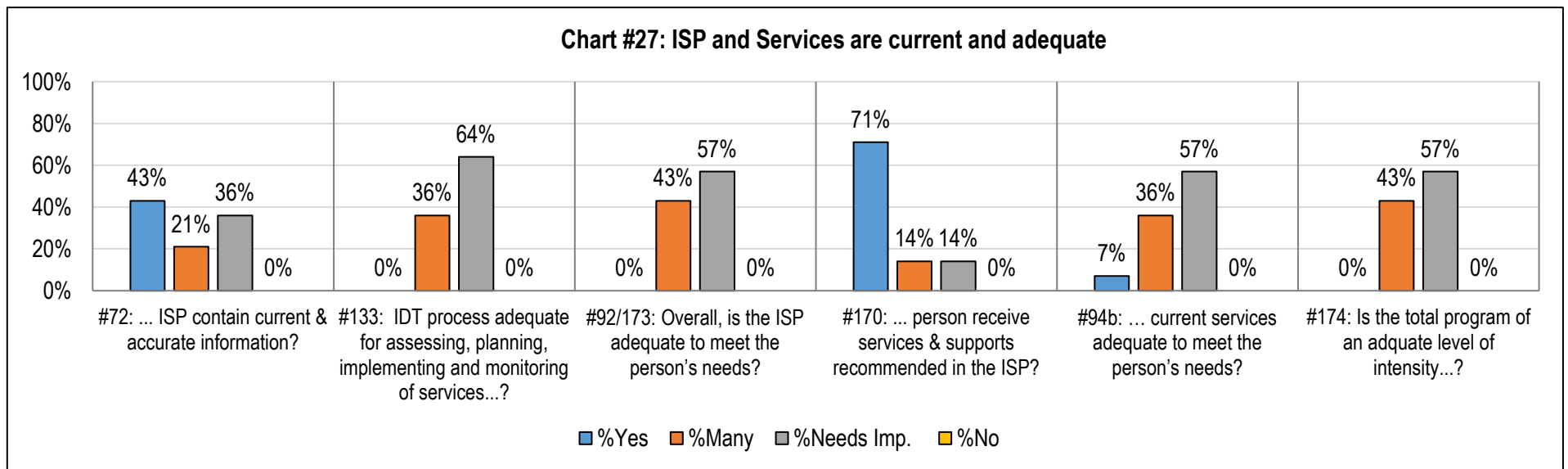


Chart #28: ISP Content and Adequacy Scores, by Residential Agency

Question	Residential Agency (# in sample):			
	Ability First (1)	Adelante (9)	ARCA (3)	Alegria (1)
#72	0% Yes 100% Needs Impv	33% Yes 22% Many 44% Needs Impv	67% Yes 33% Many	100% Yes
#133	0% Yes	0% Yes	0% Yes	0% Yes

	Residential Agency (# in sample):			
Question	Ability First (1)	Adelante (9)	ARCA (3)	Alegria (1)
	100% Many	22% Many 78% Needs Impv	33% Many 67% Needs Impv	100% Many
#92/173	0% Yes 100% Many	0% Yes 22% Many 78% Needs Impv	0% Yes 67% Many 33% Needs Impv	0% Yes 100% Many
#170	0% Yes 100% Needs Impv	78% Yes 11% Many 11% Needs Impv	100% Yes	0% Yes 100% Many
#94b	0% Yes 100% Needs Impv	0% Yes 33% Many 67% Needs Impv	33% Yes 67% Many	0% Yes 100% Needs Impv
#174	0% Yes 100% Many	0% Yes 44% Many 56% Needs Impv	0% Yes 67% Many 33% Needs Impv	0% Yes 100% Many

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

	Case Management Agency (# in sample):					
Question	A New Vision (1)	A Step Above (4)	Amigo (2)	Peak (2)	Unidas (4)	Unique Opportunities (1)
#72	0% Yes 100% Many	75% Yes 25% Needs Impv	50% Yes 50% Needs Impv	0% Yes 50% Many 50% Needs Impv	50% Yes 25% Many 25% Needs Impv	0% Yes 100% Needs Impv
#133	0% Yes 100% Needs Impv	0% Yes 25% Many 75% Needs Impv	0% Yes 50% Many 50% Needs Impv	0% Yes 50% Many 50% Needs Impv	0% Yes 50% Many 50% Needs Impv	0% Yes 100% Needs Impv
#92/173	0% Yes 100% Many	0% Yes 25% Many 75% Needs Impv	0% Yes 100% Needs Impv	0% Yes 50% Many 50% Needs Impv	0% Yes 75% Many 25% Needs Impv	0% Yes 100% Needs Impv
#170	100% Yes	75% Yes 25% Needs Impv	100% Yes	50% Yes 50% Needs Impv	75% Yes 25% Many	0% Yes 100% Many
#94b	0% Yes 100% Many	0% Yes 25% Many 75% Needs Impv	0% Yes 50% Many 50% Needs Impv	0% Yes 100% Needs Impv	25% Yes 25% Many 50% Needs Impv	0% Yes 100% Many
#174	0% Yes 100% Many	0% Yes 50% Many 50% Needs Impv	0% Yes 100% Needs Impv	0% Yes 100% Many	0% Yes 75% Many 25% Needs Impv	0% Yes 100% Needs Impv

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 Metro1 Region IQR in the Case Management area are the fourth 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?

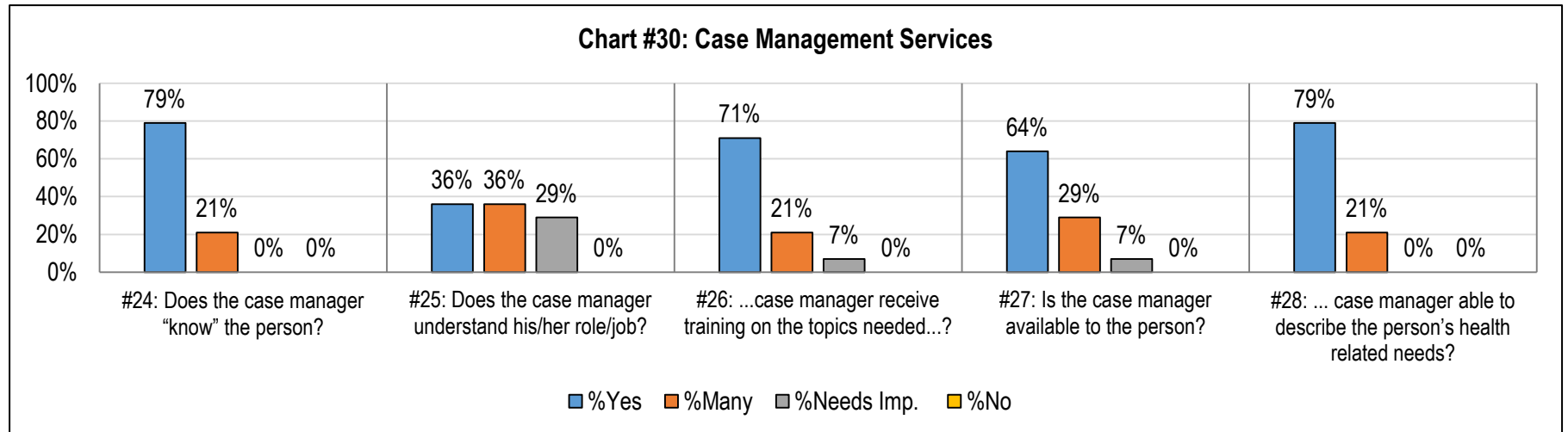


Chart #31: Case Management Scores, by Case Management Agency

Question	Case Management Agency (# in sample):					
	A New Vision (1)	A Step Above (4)	Amigo (2)	Peak (2)	Unidas (4)	Unique Opportunities (1)
Q# 24	100% Many	75% Yes 25% Many	50% Yes 50% Many	100% Yes	75% Yes 25% Many	100% Yes
Q# 25	0% Yes 100% Needs Impv	50% Yes 50% Needs Impv	100% Yes	0% Yes 50% Many	0% Yes 100% Many	100% Yes

Question	Case Management Agency (# in sample):					
	A New Vision (1)	A Step Above (4)	Amigo (2)	Peak (2)	Unidas (4)	Unique Opportunities (1)
				50% Needs Impv		
Q# 26	0% Yes 100% Needs Impv	75% Yes 25% Many	100% Yes	100% Yes	50% Yes 50% Many	100% Yes
Q# 27	100% Yes	100% Yes	50% Yes 50% Many	0% Yes 50% Many 50% Needs Impv	50% Yes 50% Many	100% Yes
Q# 28	100% Yes	50% Yes 50% Many	100% Yes	100% Yes	75% Yes 25% Many	100% Yes

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

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

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

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

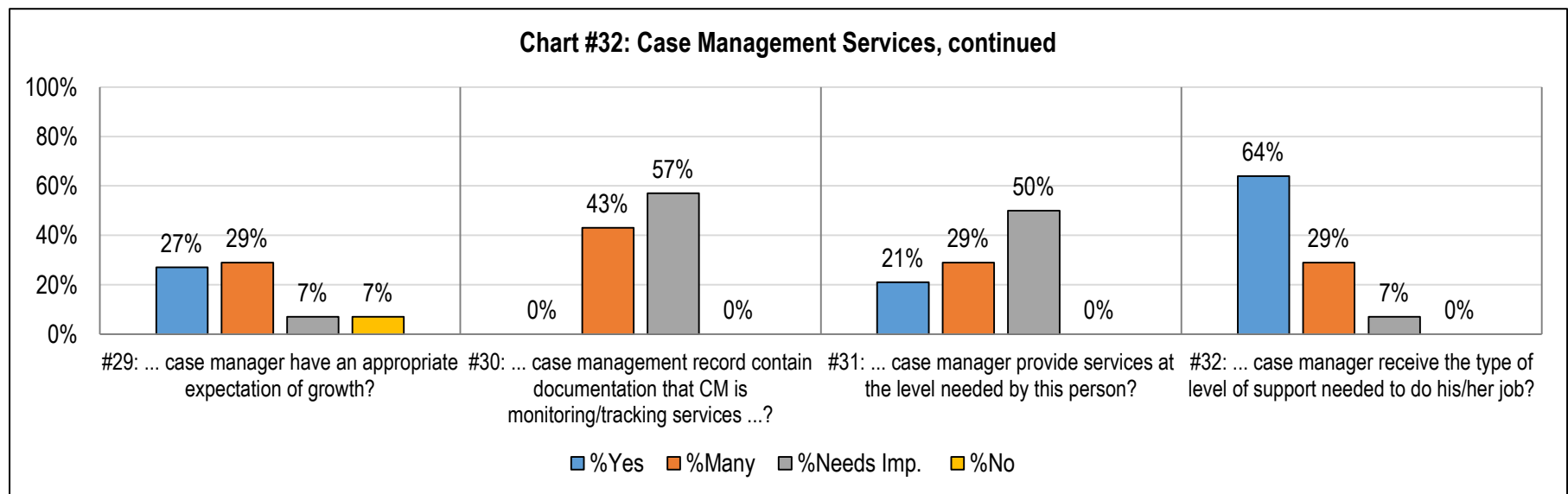


Chart #33: Case Management Scores, by Case Management Agency

Question	Case Management Agency (# in sample):					
	A New Vision (1)	A Step Above (4)	Amigo (2)	Peak (2)	Unidas (4)	Unique Opportunities (1)
Q# 29	0% Yes 100% No	50% Yes 50% Many	100% Yes	50% Yes 50% Many	75% Yes 25% Needs Impv	0% Yes 100% Many
Q# 30	0% Yes 100% Needs Impv	0% Yes 25% Many 75% Needs Impv	0% Yes 50% Many 50% Needs Impv	0% Yes 50% Many 50% Needs Impv	0% Yes 50% Many 50% Needs Impv	0% Yes 100% Many
Q# 31	0% Yes 100% Many	25% Yes 75% Needs Impv	0% Yes 100% Needs Impv	0% Yes 100% Many	25% Yes 25% Many 50% Needs Impv	100% Yes
Q# 32	0% Yes 100% Many	50% Yes 50% Many	100% Yes	100% Yes	50% Yes 25% Many 25% Needs Impv	100% Yes

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 Metro1 2018 IQR in Supported Employment related areas.

1. Components of Informed Choice: Assessment

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

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

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

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

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

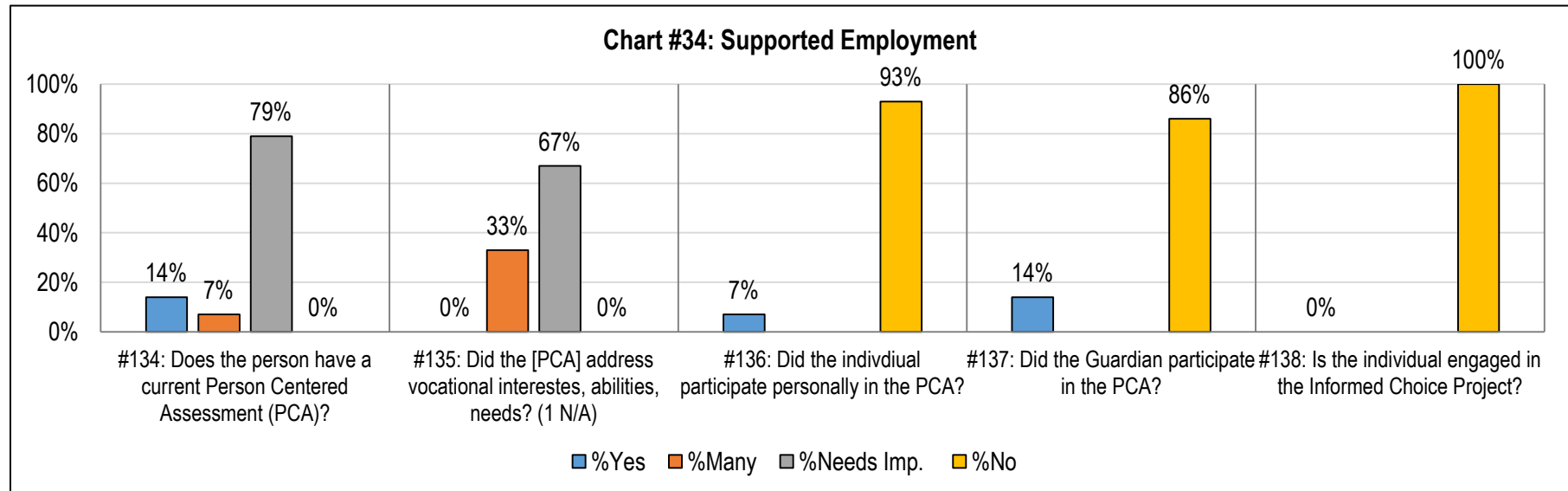


Chart #35: Supported Employment Scores by Provider Agency

Residential Agency (# in sample):				
Question	Ability First (1)	Adelante (9)	ARCA (3)	Alegria (1)
#134	100% Yes	0% Yes 11% Many 89% Needs Impv	33% Yes 67% Needs Impv	0% Yes 100% Needs Impv
#135	0% Yes 100% No	0% Yes 25% Needs Impv 75% No (1 N/A)	0% Yes 33% Needs Impv 67% No	0% Yes 100% Needs Impv
#136	0% Yes 100% No	0% Yes 100% No	0% Yes 100% No	100% Yes
#137	0% Yes 100% No	11% Yes 89% No	0% Yes 100% No	100% Yes
#138	0% Yes 100% No	0% Yes 100% No	0% Yes 100% No	0% Yes 100% No

Chart #36: Supported Employment Scores by Case Management Agency

Case Management Agency (# in sample):						
Question	A New Vision (1)	A Step Above (4)	Amigo (2)	Peak (2)	Unidas (4)	Unique Opportunities (1)
#134	100% Yes	0% Yes 100% Needs Impv	0% Yes 100% Needs Impv	50% Yes 50% Needs Impv	0% Yes 25% Many 75% Needs Impv	0% Yes 100% Needs Impv
#135	0% Yes 100% No	0% Yes 25% Needs Impv 75% No	0% Yes 100% No	0% Yes 100% No (1 N/A)	0% Yes 75% Needs Impv 25% No	0% Yes 100% No
#136	0% Yes 100% No	0% Yes 75% No	0% Yes 100% No	0% Yes 100% No	25% Yes 75% No	0% Yes 100% No
#137	0% Yes 100% No	25% Yes 100% No	0% Yes 100% No	0% Yes 100% No	25% Yes 75% No	0% Yes 100% No
#138	0% Yes 100% No	0% Yes 100% No	0% Yes 100% No	0% Yes 100% No	0% Yes 100% No	0% Yes 100% 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?

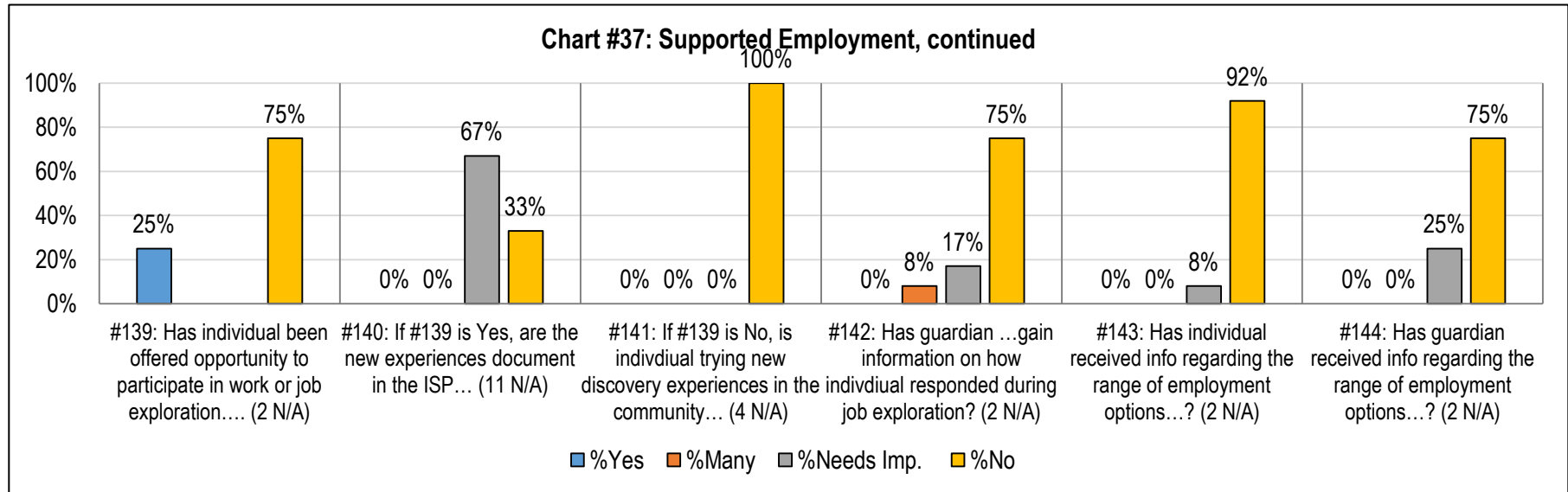


Chart #38: Supported Employment Scores by Provider Agency

Question	Residential Agency (# in sample):			
	Ability First (1)	Adelante (9)	ARCA (3)	Alegria (1)
#139	(1 N/A)	38% Yes 63% No (1 N/A)	0% Yes 100% No	0% Yes 100% No
#140	(1 N/A)	0% Yes 67% Needs Imp 33% No (6 N/A)	(3 N/A)	(1 N/A)
#141	(1 N/A)	0% Yes 100% No	0% Yes 100% No	0% Yes 100% No

Residential Agency (# in sample):				
Question	Ability First (1)	Adelante (9)	ARCA (3)	Alegria (1)
		(3 N/A)		
#142	(1 N/A)	0% Yes 38% Needs Impv 63% No (1 N/A)	0% Yes 100% No	0% Yes 100% Many
#143	(1 N/A)	0% Yes 100% No (1 N/A)	0% Yes 100% No	0% Yes 100% Needs Impv
#144	(1 N/A)	0% Yes 25% Needs Impv 75% No (1 N/A)	0% Yes 100% No	0% Yes 100% Needs Impv

Chart #39: Supported Employment Scores by Case Management Agency

Case Management Agency (# in sample):						
Question	A New Vision (1)	A Step Above (4)	Amigo (2)	Peak (2)	Unidas (4)	Unique Opportunities (1)
#139	0% Yes 100% No	50% Yes 50% No	0% Yes 100% No	(2 N/A)	0% Yes 100% No	100% Yes
#140	(1 N/A)	0% Yes 50% Needs Imp 50% No (2 N/A)	(2 N/A)	(2 N/A)	(4 N/A)	0% Yes 100% Needs Impv
#141	0% Yes 100% No	0% Yes 100% No (2 N/A)	0% Yes 100% No	(2 N/A)	0% Yes 100% No	0% Yes 100% No
#142	0% Yes 100% No	0% Yes 25% Needs Impv 75% No	0% Yes 100% No	(2 N/A)	0% Yes 25% Many 75% No	0% Yes 100% Needs Impv
#143	0% Yes 100% No	0% Yes 100% No	0% Yes 100% No	(2 N/A)	0% Yes 25% Needs Impv 75% No	0% Yes 100% No
#144	0% Yes 100% No	0% Yes 25% Needs Impv 75% No	0% Yes 50% Needs Impv 50% No	(2 N/A)	0% Yes 25% Needs Impv 75% No	0% Yes 100% No

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?

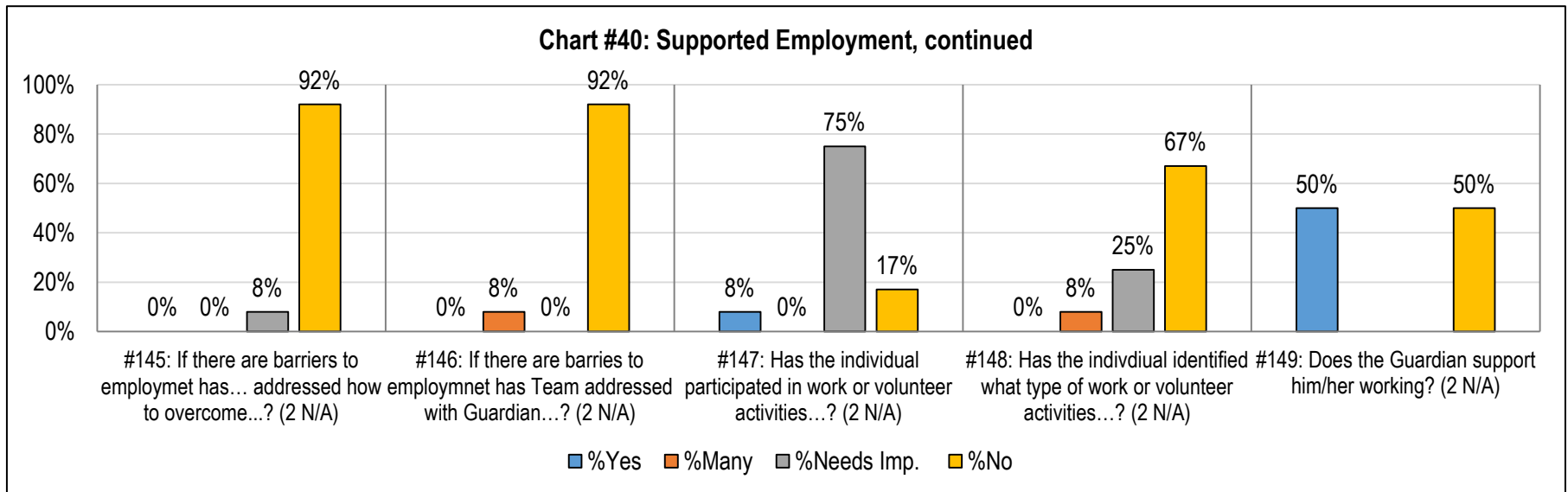


Chart #41: Supported Employment Scores by Provider Agency

Question	Residential Agency (# in sample):			
	Ability First (1)	Adelante (9)	ARCA (3)	Alegria (1)
#145	(1 N/A)	0% Yes 100% No (1 N/A)	0% Yes 100% No	0% Yes 100% Needs Impv
#146	(1 N/A)	0% Yes 100% No (1 N/A)	0% Yes 100% No	0% Yes 100% Many

Residential Agency (# in sample):				
Question	Ability First (1)	Adelante (9)	ARCA (3)	Alegria (1)
#147	(1 N/A)	13% Yes 75% Needs Impv 13% No (1 N/A)	0% Yes 67% Needs Impv 33% No	0% Yes 100% Needs Impv
#148	(1 N/A)	0% Yes 13% Many 13% Needs Impv 75% No (1 N/A)	0% Yes 33% Needs Impv 67% No	0% Yes 100% Needs Impv
#149	(1 N/A)	50% Yes 50% No (1 N/A)	33% Yes 67% No	100% Yes

Chart #42: Supported Employment Scores by Case Management Agency

Case Management Agency (# in sample):						
Question	A New Vision (1)	A Step Above (4)	Amigo (2)	Peak (2)	Unidas (4)	Unique Opportunities (1)
#145	0% Yes 100% No	0% Yes 100% No	0% Yes 100% No	(2 N/A)	0% Yes 25% Needs Impv 75% No	0% Yes 100% No
#146	0% Yes 100% No	0% Yes 100% No	0% Yes 100% No	(2 N/A)	0% Yes 25% Many 75% No	0% Yes 100% No
#147	0% Yes 100% Needs Impv	25% Yes 50% Needs Impv 25% No	0% Yes 100% Needs Impv	(2 N/A)	0% Yes 75% Needs Impv 25% No	0% Yes 100% Needs Impv
#148	0% Yes 100% Needs Impv	0% Yes 25% Many 25% Needs Impv 50% No	0% Yes 100% No	(2 N/A)	0% Yes 25% Needs Impv 75% No	0% Yes 100% No
#149	0% Yes 100% No	50% Yes 50% No	100% Yes	(2 N/A)	50% Yes 50% No	0% Yes 100% No

4. JCMs Involved in Supported Employment

- Question #150. Is (Name) involved in the DVR Outreach Project?
- Question #151. Is the individual engaged in Supported Employment?
- Question #152. Is the individual working in accordance with the following?
- Question #153. Does the person have a Career Development Plan?

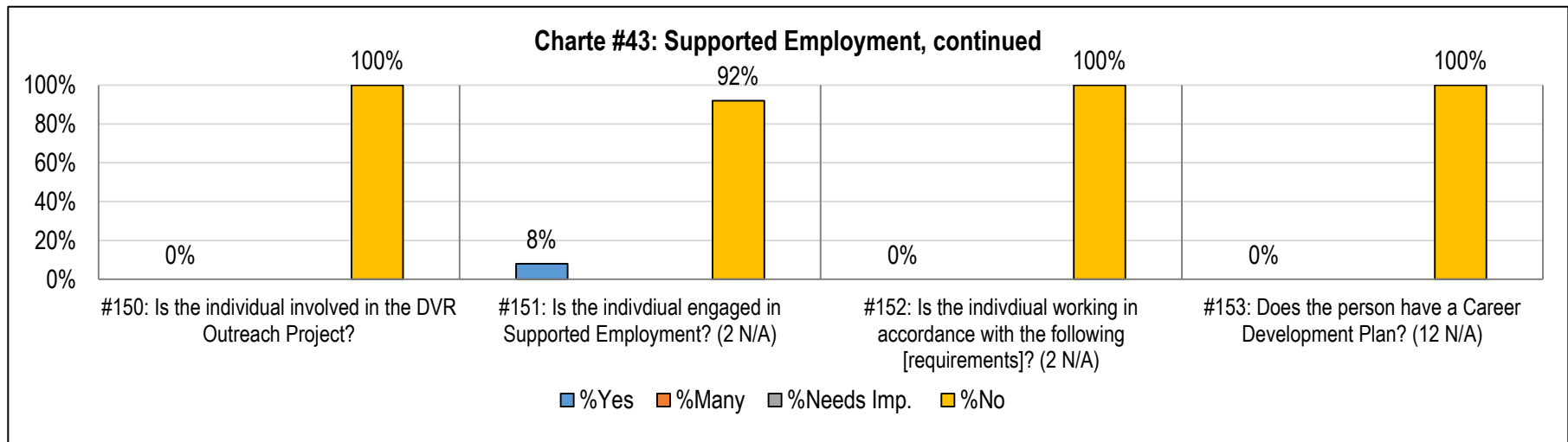


Chart #44: Supported Employment Scores by Provider Agency

Question	Residential Agency (# in sample):			
	Ability First (1)	Adelante (9)	ARCA (3)	Alegria (1)
#150	0% Yes 100% No	0% Yes 100% No	0% Yes 100% No	0% Yes 100% No
#151	(1 N/A)	0% Yes 100% No (1 N/A)	100% Yes	0% Yes 100% No
#152	(1 N/A)	0% Yes 100% No (1 N/A)	0% Yes 100% No	0% Yes 100% No
#153	(1 N/A)	0% Yes 100% No (8 N/A)	0% Yes 100% No	(3 N/A)

Chart #45: Supported Employment Scores by Case Management Agency

Case Management Agency (# in sample):						
Question	A New Vision (1)	A Step Above (4)	Amigo (2)	Peak (2)	Unidas (4)	Unique Opportunities (1)
#150	0% Yes 100% No	0% Yes 100% No	0% Yes 100% No	0% Yes 100% No	0% Yes 100% No	0% Yes 100% No
#151	0% Yes 100% No	0% Yes 100% No	0% Yes 100% No	(2 N/A)	25% Yes 75% No	0% Yes 100% No
#152	0% Yes 100% No	0% Yes 100% No	0% Yes 100% No	(2 N/A)	0% Yes 100% No	0% Yes 100% No
#153	(1 N/A)	(4 N/A)	(2 N/A)	(2 N/A)	0% Yes 100% No (2 N/A)	(1 N/A)

I. IQR Scored Protocol Questions

Below are all of the questions in the protocol and the scores of the Metro1 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	79% Yes (11) 21% Many (3)
25. Does the case manager understand his/her role/job? CPRQ27 ‘17IQR#16	36% Yes (5) 36% Many (5) 29% Need Impv (4)
26. Did the case manager receive training on the topics needed to assist him/her in meeting the needs of this person? CPRQ28	71% Yes (10) 21% Many (3) 7% Need Impv (1)
27. Is the case manager available to the person? CPRQ29; ‘17IQR#16a	64% Yes (9) 29% Many (4) 7% Need Impv (1)
28. Was the case manager able to describe the person’s health related needs? CPRQ30	79% Yes (11) 21% Many (3)
29. Does the case manager have an appropriate expectation of growth for this person? CPRQ31	57% Yes (8) 29% Many (4) 7% Need Impv (1) 7% No (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	0% Yes (0) 43% Many (6) 57% Need Impv (8)
31. Does the case manager provide case management services at the level needed by this person? CPRQ33; ‘17IQR#16c	21% Yes (3) 29% Many (4) 50% Need Impv (7)
32. Does the case manager receive the type and level of support needed to do his/her job? CPRQ34	64% Yes (9) 29% Many (4) 7% Need Impv (1)
EMPLOYMENT AND DAY	

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)
38. Did the direct service staff have training in the ISP process? CPRQ40	71% Yes (10) 7% Many (1) 14% Need Impv (2) 7% 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	64% Yes (9) 36% Many (5)
39a. Did the direct service staff have training on the provider’s complaint process? CPRQ41a	71% Yes (10) 7% Many (1) 21% Need Impv (3)
39b. Did the direct service staff have training on how and to whom to report abuse, neglect and exploitation? CPRQ41b	93% Yes (13) 7% Need Impv (1)
40. Does the direct service staff have an appropriate expectation of growth for this person? CPRQ42	36% Yes (5) 50% Many (7) 14% Need Impv (2)
41. Does the person’s day/work environment generally clean, free of safety hazards and conducive to the work/activity intended? CPRQ43	100% Yes (14)

Question	2018 (sample=10)
RESIDENTIAL	
42. Does the residential direct services staff “know” the person? CPRQ44; ‘17IQR#8b	86% Yes (12) 14% Many (2)
43. Does the direct service staff have input into the person’s ISP? CPRQ45	86% Yes (12) 7% Many (1) 7% Need Impv (1)
44. Did the direct service staff receive training on implementing this person’s ISP? CPRQ46	79% Yes (11) 14% Many (2) 7% Need Impv (1)
45. Is the residence safe for individuals (void of hazards)? CPRQ47	86% Yes (12) 14% Many (2)
46. Was the residential direct service staff able to describe this person’s health-related needs? CPRQ48	57% Yes (8) 29% Many (4) 14% Need Impv (2)
47. Was the direct service staff able to describe his/her responsibilities in providing daily care/supports to the person? CPRQ49	71% Yes (10) 29% Many (4)
47a. Was the direct service staff able to provide specific information regarding the person’s daily activities? CPRQ49a	86% Yes (12) 14% Many (2)
47b. Can the direct service staff describe his/her responsibilities in implementing this person’s ISP, including outcomes, action plans, and WDSIs? CPRQ49b	64% Yes (9) 36% Many (5)
48. Did the residential direct service staff have training in the ISP process? CPRQ50	64% Yes (9) 14% Many (2) 14% Need Impv (2) 7% No (1)
49. Did the direct service staff have training on the provider’s complaint process and how to report abuse, neglect and exploitation? CPRQ51	93% Yes (13) 7% Need Impv (1)
49a. Did the direct service staff have training on the provider’s complaint process? CPRQ51a	93% Yes (13) 7% No (1)
49b. Did the direct service staff have training on how and to whom to report abuse, neglect and exploitation? CPRQ51b	93% Yes (13) 7% Many (1)
50. Does the residential direct service staff have an appropriate expectation of growth for this person? CPRQ52	57% Yes (8) 43% Many (6)
51. Does the person’s residential environment offer a minimal level of quality of life? CPRQ53	86% Yes (12) 7% Many (1)

Question	2018 (sample=10)
	7% Need Impv (1)
HEALTH	
52. Overall, were the team members interviewed able to describe the person's health-related needs? CPRQ54; '17IQR#21b	29% Yes (4) 57% Many (8) 14% Need Impv (2)
53. Is there evidence that the IDT discussed the person's health related issues? CPRQ55; '17IQR#21	36% Yes (5) 36% Many (5) 29% Need Impv (4)
54. Was the eChat updated timely? '17IQR#18g	64% Yes (9) 14% Many (2) 21% Need Impv (3)
55. Are all of the individual's needed medical treatments timely received? 17IQR#19	29% Yes (4) 43% Many (6) 29% Need Impv (4)
56. Does the individual receive routine/scheduled medical treatment? 17IQR#19a	36% Yes (5) 50% Many (7) 14% Need Impv (2)
57. Does the individual receive medication as prescribed? 17IQR#19e	57% Yes (8) 29% Many (4) 14% Need Impv (2)
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	36% Yes (5) 36% Many (5) 29% Need Impv (4)
59. Are nursing services provided as needed by the individual? 17IQR#20	29% Yes (4) 29% Many (4) 36% Need Impv (5) 7% No (1)
60. Is the CARMP is accurate? '17IQR#21f	38% Yes (5) 54% Many (7) 8% No (1) (1 N/A)
61. Is the CARMP consistently implemented as intended?	83% Yes (10) 8% Many (1) 8% Need Impv (1) (2 N/A)

Question	2018 (sample=10)
62. Are the person's health supports/needs being adequately addressed? CPRQ56; '17IQR#19	7% Yes (1) 29% Many (4) 64% Need Impv (9)
ASSESSMENTS	
63. Did the team consider what assessments the person needs and would be relevant to the team's planning efforts? CPRQ57	29% Yes (4) 36% Many (5) 36% Need Impv (5)
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	50% Yes (7) 21% Many (3) 21% Need Impv (3) 7% No (1)
65. Did the team arrange for and obtain the needed, relevant assessments? CPRQ58; '17IQR#18	29% Yes (4) 36% Many (5) 29% Need Impv (4) 7% No Comp (1)
66. Are the assessments adequate for planning? CPRQ59; '17IQR#4f	14% Yes (2) 29% Many (4) 57% Need Impv (8)
67. Were the recommendations from assessments used in planning? CPRQ60; '17IQR#5	36% Yes (5) 21% Many (3) 29% Need Impv (4) 14% No (2)
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	11% Yes (1) 22% Many (2) 67% No (6) (5 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 (14)
70. Was the ISP developed by an appropriately constituted IDT? CPRQ62; '17IQR#3	36% Yes (5) 57% Many (8) 7% Need Impv (1)
71. For any team members not physically present at the IDT meeting, is there evidence of their participation in the development of the ISP? CPRQ63; '17IQR#3d	64% Yes (9) 14% Many (2) 14% Need Impv (2)

Question	2018 (sample=10)
	7% No (1)
72. Does my ISP contain current and accurate information? '17IQR#6	43% Yes (6) 21% Many (3) 36% Need Impv (5)
73. Overall, does the long term vision show expectations for growth and skill building? CPRQ64; '17IQR#7b	50% Yes (7) 29% Many (4) 14% Need Impv (2) 7% No (1)
74. Overall, does the ISP give adequate guidance to achieving the person's long-term vision? CPRQ65; '17IQR#7c	50% Yes (7) 7% Many (1) 29% Need Impv (4) 14% No (2)
75. Is measurable data kept which verifies the consistent implementation of each of the action steps? '17IQR#12a	7% Yes (1) 21% Many (3) 64% Need Impv (9) 7% No (1)
76. Does the data kept identify what the person does so a determination regarding progress/lack of progress? '17IQR#12b	7% Yes (1) 14% Many (2) 50% Need Impv (7) 29% No (4)
77. Is each action step in the ISP implemented at a frequency that enables the person to learn new skills? '17IQR#12c	7% Yes (1) 29% Many (4) 43% Need Impv (6) 21% 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	50% Yes (7) 36% Need Impv (5) 14% No (2)
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 (2) 14% Many (2) 29% Need Impv (4) 43% No (6)
80. Has the person made measurable progress on actions steps during this past year?'17IQR#13b	14% Yes (2) 7% Many (1) 57% Need Impv (8) 21% No (3)
81. Overall, do the outcomes in the ISP include criteria by which the team can determine when the outcome(s) have been achieved? CPRQ67; '17IQR#7e	21% Yes (3) 7% Many (1)

Question	2018 (sample=10)
	29% Need Impv (4) 43% No (6)
82. Overall, are the ISP outcomes related to achieving the person's long-term vision? CPRQ68; '17IQR#7d	57% Yes (8) 14% Many (2) 21% Need Impv (3) 7% No (1)
83. Overall, do the ISP outcomes address the person's major needs? CPRQ69; '17IQR#7g	50% Yes (7) 14% Many (2) 36% Need Impv (5)
84. Overall, are the Teaching and Support Strategies sufficient to ensure consistent implementation of the services planned? CPRQ71; '17IQR#7i	14% Yes (2) 21% Many (3) 50% Need Impv (7) 14% No (2)
85. Overall, are the recommendations and/or objectives/strategies of ancillary providers integrated into the ISP? CPRQ72; '17IQR#7m	14% Yes (2) 36% Many (5) 36% Need Impv (5) 14% No (2)
86. Has the person made measurable progress in therapy this year? '17IQR#13a	14% Yes (2) 36% Many (5) 43% Need Impv (6) 7% No (1)
87. If needed, does the ISP contain a specific Medical Emergency Response Plan (MERP)? CPRQ73b '17IQR#20c	71% Yes (10) 14% Many (2) 14% Need Impv (2)
88. Does the ISP contain information regarding primary health (medical) care? CPRQ74	79% Yes (11) 14% Many (2) 7% Need Impv (1)
88a. Does the ISP face sheet contain contact information for the PCP? CPRQ74a	86% Yes (12) 14% Many (2)
88b. Is the Healthcare coordinator's name and contact information listed in the ISP? CPRQ74b	93% Yes (13) 7% Many (1)
89. Does the ISP reflect how the person will obtain prescribed medications? CPRQ76	100% Yes (14)
90. Does the ISP reflect how the person will get to work/day activities, shopping, and social activities? CPRQ75	36% Yes (5) 43% Many (6) 14% Need Impv (2) 7% No (1)

Question	2018 (sample=10)
91. Does the ISP contain a list of adaptive equipment needed and who will provide it? CPRQ77; '17IQR#25a	36% Yes (5) 57% Many (8) 7% Need Impv (1)
92. Overall, is the ISP adequate to meet the person's needs? CPRQ78; '17IQR#7	0% Yes 43% Many (6) 57% Need Impv (8)
93. Is the ISP being implemented? (If 92 is "3") CPRQ79 '17IQR#12	(14 N/A)
94a. Is the ISP being implemented? (If 92 is "0", "1", or "2") CPRQ80a '17IQR#12	7% Yes (1) 36% Many (5) 57% Need Impv (8)
94b. Are current services adequate to meet the person's needs? CPRQ80b '17IQR#11	7% Yes (1) 36% Many (5) 57% Need Impv (8)
95. Overall, was the direct service staff trained on the implementation of this person's ISP? CPRQ81	64% Yes (9) 29% Many (4) 7% Need Impv (1)
96. Overall, were the direct service staff able to describe their responsibilities in providing daily care/supports to the person? CPRQ82;	64% Yes (9) 36% Many (5)
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 21% Many (3) 57% Need Impv (8) 21% No (3)
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	14% Yes (2) 43% Many (6) 36% Need Impv (5) 7% No (1)
99. Overall, does the IDT have an appropriate expectation of growth for this person? CPRQ85; '17IQR#8d	14% Yes (2) 79% Many (11) 7% Need Impv (1)
100. Was the person provided the assistance and support needed to participate meaningfully in the planning process? CPRQ86; '17IQR#1b	71% Yes (10) 21% Many (3) 7% No (1)

Question	2018 (sample=10)
101. Is the person offered a range of opportunities for participation in each life area? CPRQ87	50% Yes (7) 21% Many (3) 21% Need Impv (3) 7% No (1)
102. Does the person have the opportunity to make informed choices? CPRQ88; '17IQR#30	50% Yes (1) 50% Many (1) (12 CND)
102a. About where and with whom to live? CPRQ89; '17IQR#23c	(14 CND)
102b. About where and with whom to work/spend his/her day? CPRQ90; '17IQR#23d	33% Yes (1) 33% Many (1) 33% Need Impv (1) (11 CND)
102c. About where and with whom to socialize/spend leisure time? CPRQ91	100% Yes (2) (12 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	93% Yes (13) 7% Need Impv (1)
104. Overall, were the direct service staff interviewed trained on the provider's complaint process? CPRQ93*	71% Yes (10) 21% Many (3) 7% Need Impv (1)
105. Overall, were all team members interviewed trained or knowledgeable on how to report abuse, neglect and exploitation? CPR 93*; '17IQR#35a	71% Yes (10) 29% Many (4)
106. Does this person and/or guardian have access to the complaint processes/procedures? CPRQ94	71% Yes (10) 14% Many (2) 14% No (2)
107. Does the individual have restrictions that should be reviewed by a Human Rights Committee? '17IQR#34h	57% Yes (8) 43% No (6)
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	38% Yes (3) 50% Need Impv (4) 13% No (1) (6 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 100% No (8) (6 N/A)
110. Is the person protected from abuse, neglect and exploitation? '17IQR#35	64% Yes (9) 29% Many (4)

Question	2018 (sample=10)
	7% No (1)
111. Have all incidents of suspected abuse, neglect and exploitation been reported and investigated? '17IQR#35b	50% Yes (4) 13% Many (1) 38% Need Impv (3) 13% No (1) (6 N/A)
112. Is the individual safe? '17IQR#24	86% Yes (12) 14% Need Impv (2)
113. What is the level of participation of the legal guardian in this person's life and service planning? CPRQ 97; '17IQR#15a	14% Active (2) 50% Moderate (7) 36% Limited (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	50% Yes (1) 50% Need Impv (1) (12 N/A)
115. Does the person have daily choices/appropriate autonomy over his/her life? CPRQ101 '17IQR#30	93% Yes (13) 7% Many (1)
116. Have the person's cultural preferences been accommodated? CPRQ102; '17IQR#31e	93% Yes (13) 7% Many (1)
117. Is the person treated with dignity and respect? CPRQ103; '17IQR#34c	43% Yes (6) 43% Many (6) 14% Need Impv (2)
118. Does the person have food and drink available according to their specific nutritional needs and recommendations? CPRQ108; '17IQR#23e	100% Yes (14)
119. Does the person have sufficient personal money? CPRQ110 '17IQR#34f	93% Yes (13) 7% Many (1)
120. Does the person get along with their day program/employment provider staff? CPRQ111	100% Yes (9) (5 CND)
121. Does the person get along with their residential provider staff? CPRQ112	100% Yes (11) (3 CND)
TEAM PROCESS	
122. Are the individual members of the IDT following up on their responsibilities? CPRQ 114; '17IQR#10	21% Yes (3) 36% Many (5) 43% Need Impv (6)

Question	2018 (sample=10)
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 (4) (10 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	57% Yes (8) 21% Many (3) 14% Need Impv (2) 7% No (1)
125. Is there adequate communication among team members between meetings to ensure the person's program can be/is being implemented? CPRQ117	86% Yes (12) 7% Many (1) 7% Need Impv (1)
126. Do you recommend Dispute Resolution for this IDT? CPRQ118	0% Yes 100% No (14)
127. Is there evidence or documentation of physical regression in the last year? CPRQ119 '17IQR#14a	29% Yes (4) 71% No (10)
128. Is there evidence or documentation of behavioral or functional regression in the last year? CPRQ120; '17IQR14c	21% Yes (3) 79% No (11)
129. If #127 OR #128 is scored "Yes", is the IDT adequately addressing the regression? CPRQ121;	50% Yes (3) 50% No (3) (8 N/A)
130. Has the person changed residential/day services in the last year? CPRQ122	21% Yes (3) 79% No (11)
131. If #130 is Yes, was the change Planned by the IDT? CPRQ122a	100% Yes (3) (11 N/A)
132. If #130 is Yes, did the change meet the person's needs and/or preferences? CPRQ122b	100% Yes (3) (11 N/A)
133. Has the IDT process been adequate for assessing, planning, implementing and monitoring of services for this person? CPRQ123; '17IQR#7n	0% Yes 36% Many (5) 64% Need Impv (9)
SUPPORTED EMPLOYMENT	
134. Does (Name) have a current Person Centered Assessment?	14% Yes (2) 7% Many (1) 79% Need Impv (11)
135. Did this assessment address vocational interests, abilities and needs? CPRQ126; '17IQR#26a	0% Yes 33% Need Impv (4) 67% No (9)

Question	2018 (sample=10)
	(1 N/A)
136. Did the individual participate personally in the Person Centered Assessment?	7% Yes (1) 93% No (13)
137. Did the Guardian participate in the Person Centered Assessment?	14% Yes (2) 86% No (12)
138. Is the individual engaged in the Informed Choice Project?	0% Yes 100% No (14)
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	25% Yes (3) 75% No (9) (2 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 67% Need Impv (2) 33% No (1) (11 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 (10) (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 8% Many (1) 17% Need Impv (2) 75% No (9) (2 N/A)
143. Has the individual received information regarding the range of employment options available to him/her? '17IQR#26c	0% Yes 8% Need Impv (1) 92% No (11) (2 N/A)
144. Has the Guardian received information regarding the range of employment options available for the individual?	0% Yes 25% Need Impv (3) 75% No (9) (2 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 8% Need Impv (1) 92% No (11) (2 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 8% Many(1)

Question	2018 (sample=10)
	92% No (11) (2 N/A)
147. Has the individual participated in work or volunteer activities during the past year?	8% Yes (1) 75% Need Imp (9) 17% No (2) (2 N/A)
148. Has the individual identified what type of work or volunteer activities he/she would like to do?	0% Yes 8% Many (1) 25% Need Impv (3) 67% No (8) (2 N/A)
149. Does the Guardian support him/her working?	50% Yes (6) 50% No (6) (2 N/A)
150. Is (Name) is involved in the DVR Outreach Project?	0% Yes 100% No (14)
151. Is the individual engaged in Supported Employment? CPRQ129	8% Yes (1) 92% No (11) (2 N/A)
152. Is the individual Working in accordance with the following: CPRQ 130 '17IQR#28	0% Yes 100% No (12) (2 N/A)
153. Does the person have a Career Development Plan? CPRQ128	0% Yes 100% No (2) (12 N/A)
BEHAVIOR	
154. Is the person considered by the IDT to need behavior services now? CPRQ131; '17IQR#5d	43% Yes (6) 57% No (8)
155. Does the person need behavior services now? CPRQ132 '17IQR#11e	50% Yes (7) 50% No (7)
156. Have behavioral assessments been completed? CPRQ133	29% Yes (2) 29% Many (2) 14% Need Impv (1) 29% No (2) (7 N/A)

Question	2018 (sample=10)
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	67% Yes (4) 33% No (2) (8 N/A)
158. Has the staff been trained on the Positive Behavior Support Plan? CPRQ135; '17IQR#10d	60% Yes (3) 20% Many (1) 20% Need Impv (1) (9 N/A)
159. If needed, does the person have a Behavior Crisis Intervention Plan that meets the person's needs? CPRQ 73a; '17IQR#5h	75% Yes (3) 25% No (1) (10 N/A)
160. Does the person receive behavioral services consistent with his/her needs? CPRQ 136 '17IQR#5i	29% Yes (2) 29% Many (2) 43% No (3) (7 N/A)
161. Are behavior support services integrated into the ISP? CPRQ 137; '17IQR#11d	29% Yes (2) 14% Need Impv (1) 57% No (4) (7 N/A)
ADAPTIVE EQUIPMENT / AUGMENTATIVE COMMUNICATION	
162. Has the person received all adaptive equipment needed? CPRQ138; '17IQR#25b	57% Yes (8) 29% Many (4) 14% Need Impv (2)
163. Has the person received all assistive technology needed? CPRQ139; '17IQR#25c	75% Yes (9) 8% Many (1) 17% Need Impv (2) (2 N/A)
164. Do direct care staff know how to appropriately help the person use his/her equipment? '17IQR#25f	93% Yes (13) 7% Many (1)
165. Is the person's equipment and technology in good repair?'17IQR#25d	64% Yes (9) 21% Many (3) 14% Need Impv (2)
166. Is the person's equipment/technology available in all appropriate environments? '17IQR#25e	64% Yes (9) 36% Many (5)
167. Has the person received all communication assessments and services? CPRQ140 ; '17IQR#10b	64% Yes (9) 36% Many (5)

Question	2018 (sample=10)
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#7o	100% Yes (14)
169. Does the person have an ISP that contains a complete Vision Section that is based on a long-term view? CPRQ142 '17IQR#7a	43% Yes (6) 7% Many (1) 43% Need Impv (6) 7% No (1)
170. Does the person receive services and supports recommended in the ISP? CPRQ143; '17IQR#11a	71% Yes (10) 14% Many (2) 14% Need Impv (2)
171. Does the person have adequate access to and use of generic services and natural supports? CPRQ144; '17IQR#33f	50% Yes (7) 50% Need Impv (7)
172. Is the person integrated into the community? CPRQ145; '17IQR#29g	21% Yes (3) 7% Many (1) 71% Need Impv (10)
173. Overall is the ISP adequate to meet the person's needs? CPRQ146; '17IQR#7	14% Yes (2) 29% Many (4) 50% Need Impv (7) 7% No (1)
174. Is the total program of the level of intensity adequate to meet this person's needs? CPRQ147; '17IQR#36	0% Yes 43% Many (6) 57% Need Impv (8)