A. Jackson Class Member Demographics – Southwest Region

As of October 1, 2019, there were 31 Active Jackson Class Members in the Southwest Region. There were 10 class members reviewed in the Southwest region as part of the 2019 IQR. Details regarding all the class members in the region are provided below.
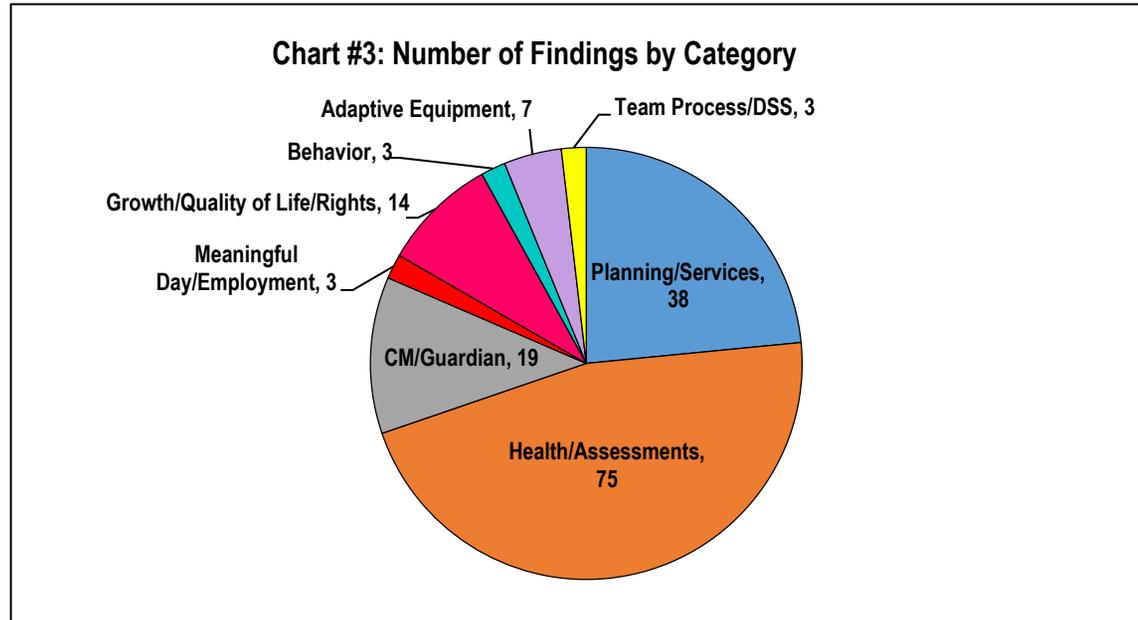
Chart #1: Demographics of JCMs in the Southwest Region							
Age			**Ethnicity**			**Day Service Type**	
30-39	0		Hispanic	20		Adult Habilitation (AH)	17
40-49	1		Caucasian	10		Adult Hab/Supp Empl (SE)	7
50-59	14		Native American	1		Supported Employment	1
60-69	11		Black	0		Community Access	4
70-79	5					Supported Employment/Community Acc.	2
80+	0		**Gender**			None	0
Average Age:	61		Male	20		Mi Via	0
			Female	11			

Residential Service Type	
Supported Living	29
Family Living	1
Independent Living	1
Mi Via	0

Chart #2: Agencies and the Number of Jackson Class Members They Serve in the Southwest Region

Case Management	Peak (6)	SCCM (22)	Unidas (3)			
Residential	Community Options (3)	Lessons of Life (9)	Nezzy Care (2)	PRS (4)	Tresco (13)	
Day	Community Options (3)	Lessons of Life (8)	Nezzy Care (2)	PRS (4)	Tresco (13)	Zia Therapy (1)

B. Most Frequently Identified Findings by Category

For the ten people in the review, there were a total of 162 Findings. The table below shows into what categories those findings fall.

Chart #3: Number of Findings by Category

- Adaptive Equipment, 7
- Team Process/DSS, 3
- Behavior, 3
- Growth/Quality of Life/Rights, 14
- Meaningful Day/Employment, 3
- Planning/Services, 38
- CM/Guardian, 19
- Health/Assessments, 75

C. Most Frequently Repeated Findings by Category

IQR Findings include the identification of good and exemplary as well as deficient practice. Findings are developed by the Surveyor, reviewed by a Case Judge, the Community Monitor, DDSD Regional Office, State DDSD and DHI Staff, and the individual and his/her Team to ensure accuracy before they become final[1]. The expectation is that the identified issue will be resolved not only for the individual but, if applicable, for everyone in that agency to whom the finding is relevant, and resolved in a way that is sustainable so that the identified issue remains "fixed".

Of the 162 Findings in the Southwest Review, there were 44 (27%) identified as "repeat findings". Repeat findings are those which have been identified by the IQR during previous reviews (within the last ten years). The category where 'repeat findings' are most frequently identified is in the area of Planning and Services, followed by Health/Assessments. The charts below summarize, by agency, the number of repeat findings which were identified by topic area.

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[1] As the transition of the IQR from the Community Monitor to DOH/DHI is in process, the Community Monitor sat in on 5 instead of all 10 Team Meetings this year. DDSD Regional Leads for each Class Member also attended and facilitated these meetings.

Chart #4: Repeat Findings by Area and Residential Provider									
Area ---------------------------------- Provider	AE/AC	Behavior	Case Manager/ Guardian	Growth/ Quality of Life / Rights	Health/ Assessments	Meaningful Day / Supp. Empl	Planning and Services	Team Process/ DSS	Total
Community Options (1)			1		5		1		7
Lessons of Life (3)			1	1	3		3		8
Nezzy Care (1)	1				2		3		6
PRS (1)			1		3		1		5
Tresco (4)			3	2	5		7	1	18
TOTAL	1		6	3	18		15	1	44

Chart #5: Repeat Findings by Area and Case Management Agency									
Area ---------------------------------- Agency	AE/AC	Behavior	Case Manager/ Guardian	Growth/ Quality of Life / Rights	Health/ Assessments	Meaningful Day / Supp. Empl	Planning and Services	Team Process/ DSS	Total
Heart of NM (1)	1				2		3		6
Peak (2)			1		4		2		7
SCCM (5)			3	1	6		8		18
Unidas (2)			2	2	6		2	1	13
TOTAL	1		6	3	18		15	1	44

D. Immediate and Special Findings

There were 10 Class Members reviewed in Southwest Region as part of the 2019 IQR. Five (5) individuals (50%) were found to have immediate and/or special findings. Three (3) individuals (30%) were found to have Immediate Needs. These three also had Special Findings. Two (2) additional individuals were found to have Special Needs. A total of five (5) individuals were identified with Special Need (50%). There were three (3) Immediate findings and eleven (11) Special findings. Details of the issues of these findings are identified 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.

As the following summary highlights, the number of Immediate and/or Special Findings cluster in the following topic areas:

6 findings identified related to Health Oversight	4 aspiration/CARMP findings
1 finding related to Medication/Side Effects	1 equipment finding
1 finding regarding rights restrictions/HRC	1 dignity/respect finding

Agencies with Immediate and/or Special Findings clustered in the following way.

Chart #6a: Immediate/Special Findings in the Southwest Region by Agency/Provider

Residential Provider	# JCM in Sample	# Immediate Findings	# Special Findings	Total both Categories
Tresco	4	3	6	9
Nezzy Care	1	0	3	3
Lessons of Life	3	0	2	2
CM Agency				
SCCM	5	2	5	7
Unidas	2	1	3	4
Heart of NM	1	0	3	3

The following summarizes the details of the specific findings.

Chart #6b: Immediate/Special Identified Findings – 2019 IQR Southwest Region

Immediate/Special Identified Findings – 2019 Southwest IQR							
Reg	CM	Res	Day	Immd	Spec	IR	Issue
Health Oversight Issues							
SW	Unidas	Tresco	Tresco		X		Nursing oversight: Staffing is not Awake and should be; elevated blood pressure not addressed; regular BP checks are not being done per PCP order.
SW	SCCM	Tresco	Tresco		X		Hx of breast cancer in family (sister died); screen done for JCM in January 2019, no results found, no appointment reschedule.
SW	SCCM	Tresco	Tresco		X		Dx of constipation with 3 different medications; BM tracking is inconsistent and HCP is not being followed re: when to call nursing.
SW	SCCM	Tresco	Tresco		X		JCM is high acuity/high aspiration risk and should receive monthly nursing monitoring; 3 months in 2019 missing nursing information.
SW	Heart of NM	Nezzy Care	Nezzy Care		X		PCP has rescheduled appointments six times in the past year (PCP's request) and a PCP referral for audiology was delayed for months.
SW	Heart of NM	Nezzy Care	Nezzy Care		X		Pathology from the polyp removed in 2016 was still not found (repeat from 2016 CPR)
Aspiration/CARMP Issues							

|						Immediate/Special Identified Findings – 2019 Southwest IQR	
Reg	**CM**	**Res**	**Day**	**Immd**	**Spec**	**IR**	**Issue**
SW	Unidas	Tresco	Tresco		X		CARMP not being implemented as written (observed during on-site residentia)
SW	SCCM	Lessons of Life	Lessons of Life		X		CARMP does not address oral care; JCM is moderate risk of Aspiration
SW	SCCM	Tresco	Tresco		X		CARMPs (previous and current) were missing information re: nutrition, level of supervision; self-feeding and sensory support, and more.
SW	Heart of NM	Nezzy Care	Nezzy Care		X		CARMP not implemented correctly per observation; staff was not in correct position; ratio of bites/sips not followed
Medication/Side Effects							
SW	SCCM	Lessons of Life	Lessons of Life		X		Clomipramine was not available in home on day of observation; dosage missed; DSP filed IR
Equipment Issues							
SW	SCCM	Tresco	Tresco	X			JCM fell off bed 8/2019; rails ordered; not yet installed as of 12/2019; no alternative precautions in place to prevent further falls in meantime.
Restrictions/HRC issues							
SW	Unidas	Tresco	Tresco	X			Many restrictions are not reviewed or approved by HRC, and some that are approved are not in place.
Other							
SW	Unidas	Tresco	Tresco		X		Dignity and respect issues. DSP was extremely rude and condescending of JCM during entire on-site observation in the home.

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 the specific questions asked, those questions are listed prior to each chart.

Question #51. Are all of the individual's needed medical treatments, including routine, scheduled and chronic needs, timely received?
Question #52. Has the individual received … appropriate health screening/immunizations in accordance with national best practice and/or as recommended

Question #53: Does the individual receive medication as prescribed?

Chart #7: Does the Indivdiual Receive Needed Medical Attention/Treatment?
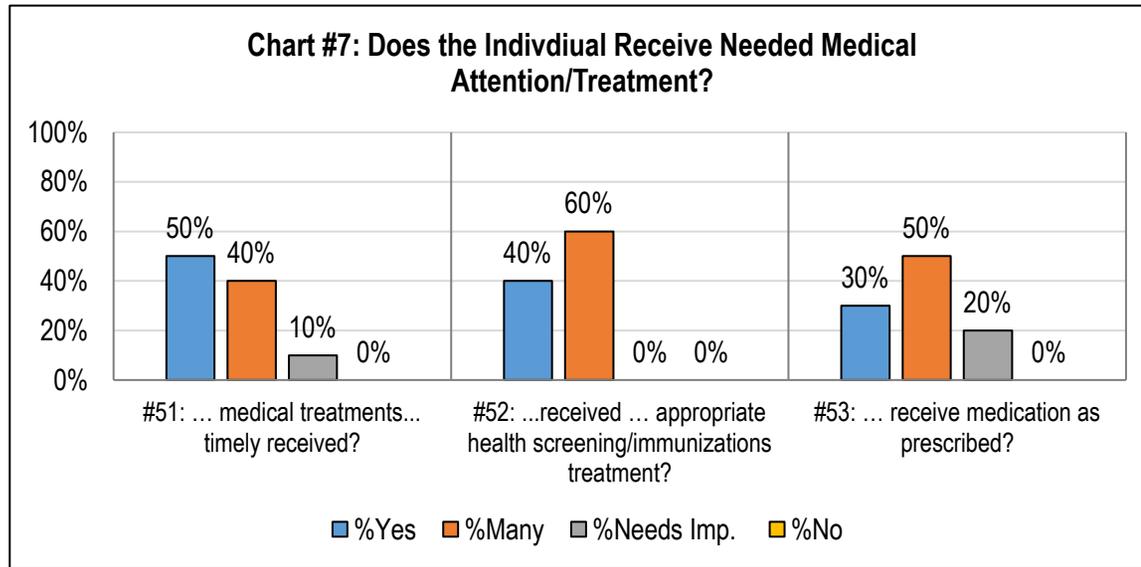
Ensuring individuals have the medical treatment they require includes scheduling and obtaining needed assessments, and using information from those assessments to influence treatment and inform future planning. The IQR also evaluates the assessments needed by the individual and whether or not those assessments are obtained by the teams as summarized below.

Question #58: Did the team arrange for and obtain the needed, relevant assessments?
Question #59: Are the assessments adequate for planning?
Question #60: Were the recommendation from assessments used in planning?

Chart #8: Are Assessments Considered, Obtain, Adequate and Used in Planning?

Legend: ■ %Yes ■ %Many ☐ %Needs Imp. ☐ %No

Categories:
- #58: ... team arrange for and obtain the needed, relevant assessments? — %Yes 70%, %Many 30%, %Needs Imp. 0%, %No 0%
- #59: ... assessments adequate for planning? — %Yes 20%, %Many 80%, %Needs Imp. 0%, %No 0%
- #60: ... recommendation from assessments used in planning? — %Yes 40%, %Many 60%, %Needs Imp. 0%, %No 0%
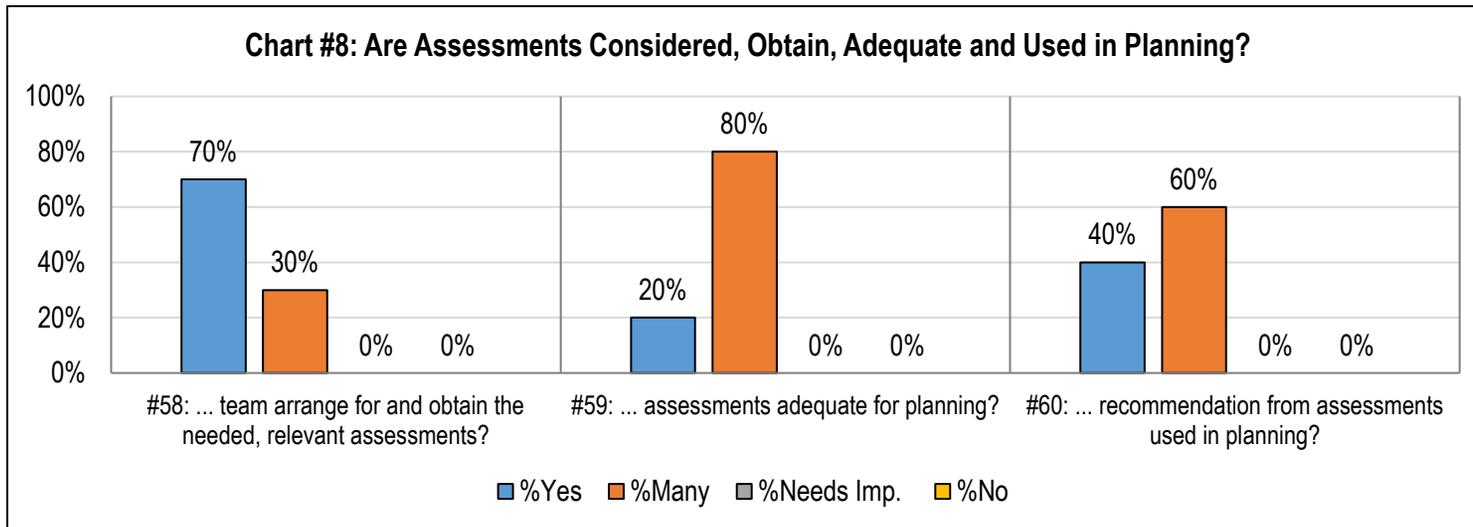
Beyond the protocol questions, a letter of Findings is issued for each class member. This letter is developed by the Surveyor, reviewed by the Case Judge, Community Monitor, Regional and State DDSD and DHI staff, the individual and his/her team prior to becoming final[2]. The table below summarizes some of the issues which were identified. It is important to note that the information below identifies the 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.

As the numbers in the following chart show, the following issues were identified most frequently:

1. The Medication Administration Record (MAR), the Medication label and the Doctor's orders do not match;
2. Per Federal recommendations, individuals have not received or consulted with their PCPs to determine the need for the Hepatitis B or C vaccine.

This information also helps identify agencies which may need the most support in this area. For example, Community Options had 10 issues in this area for the one person they serve in this review; Lessons of Life and Tresco each had an average of just over 7 issues per person hey had in this review.

Chart #9: Type of Issues identified by Residential Agency

Area	Community Options (1)	Lessons of Life (3)	Nezzy Care (1)	PRS (1)	Tresco (4)	Total
Audiology/ABR: Not current/missing/ inaccurate	1					**1**
Dental Evaluation needed		1				**1**

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[2] In the future, the Findings will become final after the Regional Office Status Summary.

Area	Community Options (1)	Lessons of Life (3)	Nezzy Care (1)	PRS (1)	Tresco (4)	Total
Dexa/Bone Density not done	1					1
Genetic testing recommended					1	1
HepB and/or HepC vaccine not done	1	2	1			4
HIV screen not done	1	1				2
Biopsy/Labs missing			1			1
BP needs monitored for 2 weeks, not done					1	1
Pap/Cervical screen needed				1		1
Shingles vaccine not done		1				1
Specialty consult not done		2				2
TDap not completed as recommended		1				1
Vision: Not current/Missing/inaccurate	1					1
MAR not updated/incorrect			1		1	2
MAR/Medication/Dr. Order do not match	4	13	3		18	38
Med delivery instructions unclear/conflicting	1					1
Med found on MAR but not in home/vice versa		1			4	5
Meds not administered/given as required		1				1
Discontinued Med was administered					1	1
Meds not stored in a locked box					1	1
Expired Medication in Med Box					4	4
Totals	**10**	**23**	**6**	**1**	**31**	**71**

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:
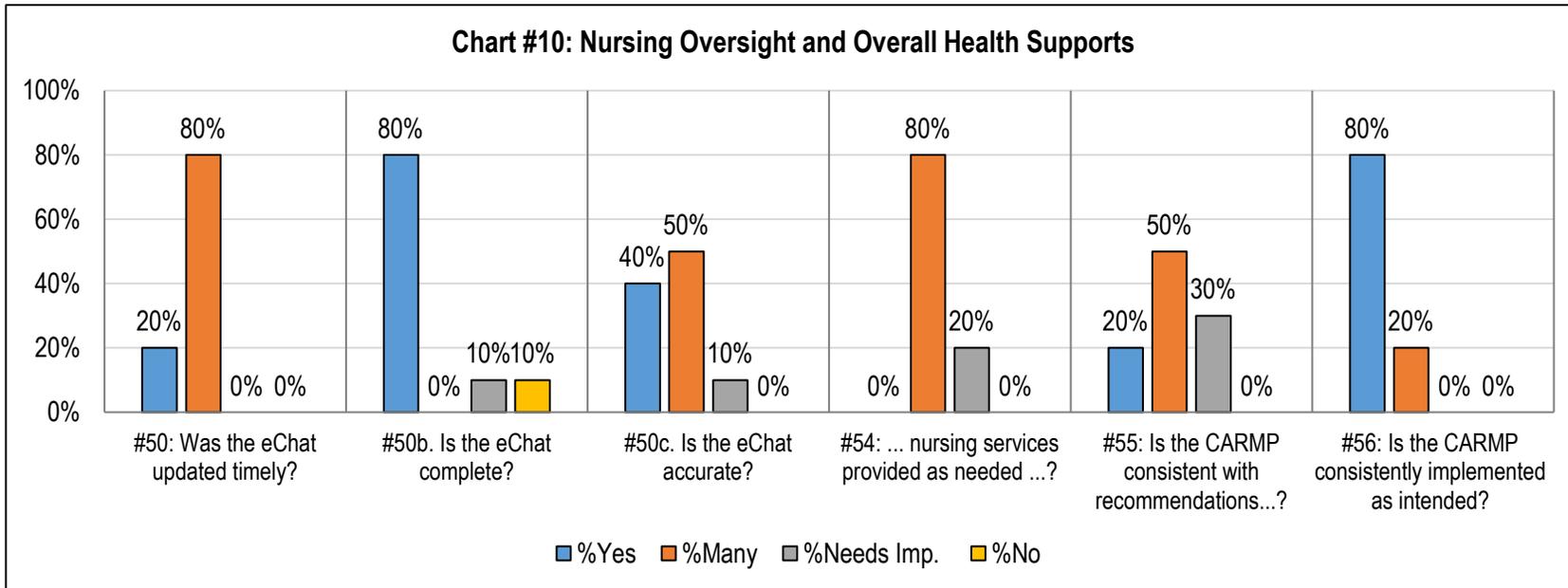
Question #50: Was the eChat updated timely?
Question #50b: Is the eChat complete?
Question #50c: Is the eChat accurate?
Question #54: Are nursing services provided as needed by the individual?
Question #55: Is the CARMP consistent with recommendations in other healthcare documents?
Question #56: Is the CARMP consistently implemented as intended?

Chart #10: Nursing Oversight and Overall Health Supports

Chart #10: Nursing Oversight and Overall Health Supports. Grouped bar chart showing percentages for %Yes (blue), %Many (orange), %Needs Imp. (gray), %No (yellow).

- #50: Was the eChat updated timely? — %Yes 20%, %Many 80%, %Needs Imp. 0%, %No 0%
- #50b. Is the eChat complete? — %Yes 80%, %Many 0%, %Needs Imp. 10%, %No 10%
- #50c. Is the eChat accurate? — %Yes 40%, %Many 50%, %Needs Imp. 10%, %No 0%
- #54: ... nursing services provided as needed ...? — %Yes 0%, %Many 80%, %Needs Imp. 20%, %No 0%
- #55: Is the CARMP consistent with recommendations...? — %Yes 20%, %Many 50%, %Needs Imp. 30%, %No 0%
- #56: Is the CARMP consistently implemented as intended? — %Yes 80%, %Many 20%, %Needs Imp. 0%, %No 0%

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 2019 Southwest Region IQR. Again, this represents the <u>number of issues found</u>; not the number of findings.

As the numbers in the following chart show, the following issues were identified most frequently. It is important to note that Tresco serves 40% of the individuals in this sample and 62% of the findings in this area.

1. The Nursing Reports from Tresco are not accurate and are missing many pieces of information.
2. The individual's Comprehensive Aspiration Risk Management Plan (CARMP) was found to contain inaccurate information, incomplete information and/or the CARMP available to staff was not current.
3. There are a number of instances where inaccuracies between related documents (HCPs, CARMPs, MERP, eChat) were found.

This information also helps identify agencies which may need the most support in this area. For example, Nezzy Care had 3 issues in this area for the one person they serve in this review; Lessons of Life has 27 issues identified in this area for the 3 people they serve in this review (average of 9 per person); and Tresco had 78 issues for the 4 people they serve in this review (average of 19.5 per person).

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

Area	Community Options (1)	Lessons of Life (3)	Nezzy Care (1)	PRS (1)	Tresco (4)	Total
eChat incorrect/inconsistent/not updated timely		2	1	1	9	13
CARMP/MTP inaccurate/incomplete/not current	3	11		1	9	24
MTP/CARMP not implemented correctly			1		1	2
Inconsistency between HCP/CARMP/MERP/eChat/MAR/Plans	2			12	10	24
MERPs/HCPs Not found/not specific/incorrect	1	1		1	2	5
Nurse not monitoring tracking records / Appts	1	1			5	7
Nurse report details not accurate/missing information		3			33	36
Nursing Annual/Quarterly/ Monthly report not timely completed/missing		4	1	1	7	13
Nursing reports signed by LPN, no RN oversight	4	3				7
Nursing not providing/discussing info with team/PCP as needed	1	1				2
Nurse interviewed not familiar with dx/rec's		1			1	2
Nurse not visiting JCM as required					1	1
Totals	**12**	**27**	**3**	**16**	**78**	**126**

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 #80: If needed, does the ISP contain a specific Medical Emergency Response Plan (MERP)?
Question #81: Does the ISP contain information regarding primary health (medical) care?
Question #81a: Does the ISP face sheet contain contact information listed in the ISP?
Question #81b: Is the Health Care Coordinator's name and contact information listed in the ISP?

Chart #12: Health Information Integrated in the ISP
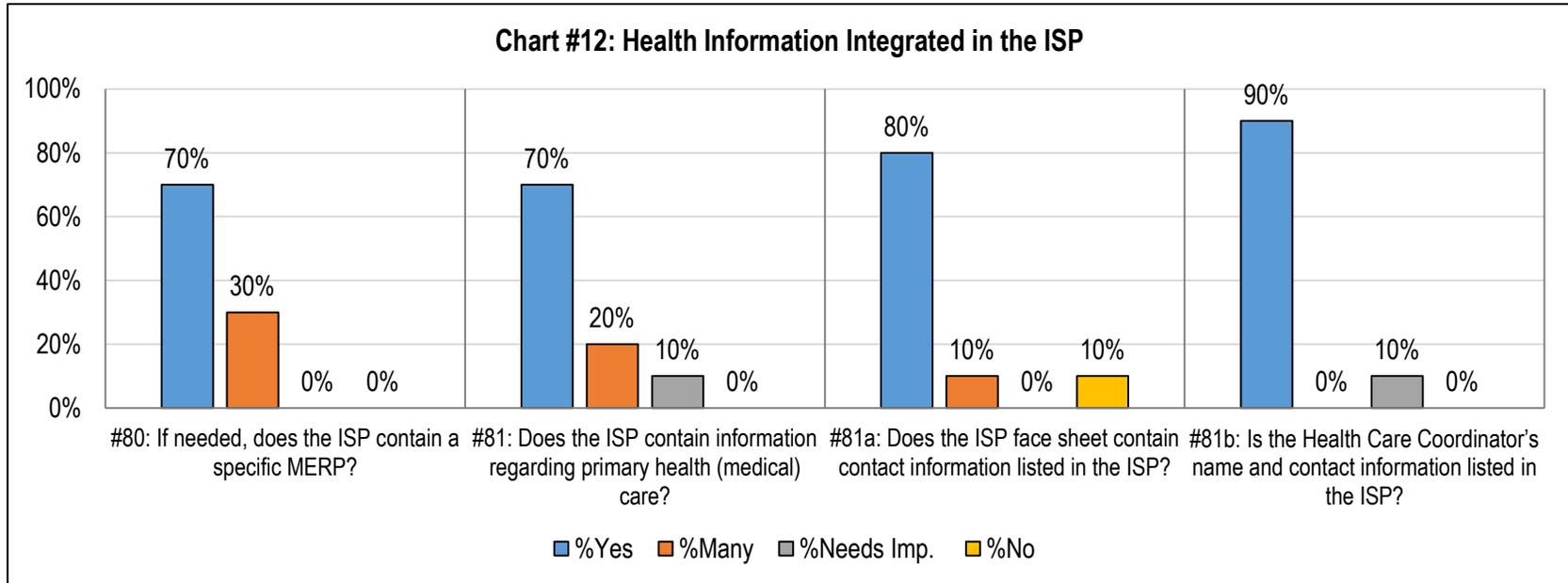
There are many components to ensuring the health and safety of individuals with I/DD. These components vary and are unique to each individual. While the scored protocol questions cannot encompass each and every issue, it does allow for a general score that measures the adequacy of response to the individual's overall health needs. That question is:

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

As noted in the chart below, for the 10 people reviewed in the Southwest Region, overall, one individual had their health supports/needs adequately addressed (10% Yes). There were 9 people who had many of their needs addressed (90%)

Chart #13: Supports/needs being adequately addressed?
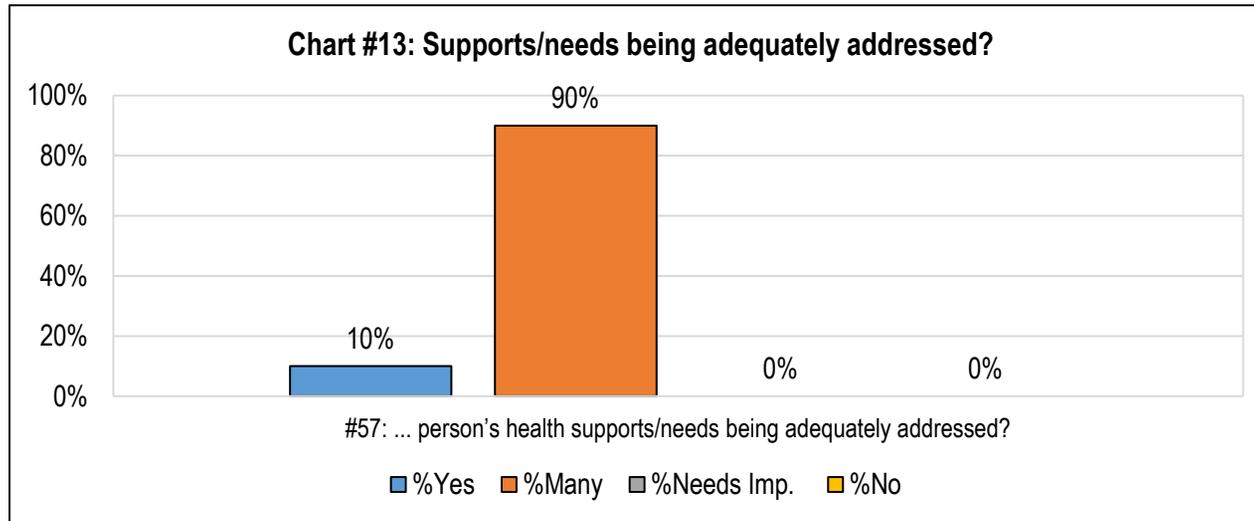
As noted earlier, beyond the scored protocol questions, the Findings Letters issued for each class member in a review provides person-specific detail about the issues which impact the answer to protocol question #57. This includes the adequacy and incorporation of needed (health related) tracking, ancillary support services (therapy), 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 seizure tracking, that would be counted as a "4", for the number of issues, not just a "1" for the individual to whom the findings apply.

The largest number of issues found for Residential providers clustered in the following areas:

- Nutrition Reports are not timely for planning/use (7)
- SLP Reports not timely for planning/use (6)
- Behavior Reports inaccurate/inadequate (5)

Adequacy of therapy assessments and reports had the highest number of issues identified. 17 (37%) of the issues identified were for individuals receiving services from Tresco; 14 (30%) of the issues identified were for individuals receiving services from Lessons of Life, followed by 7 (15%) identified at Nezzy Care.

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

Area	Community Options (1)	Lessons of Life (3)	Nezzy Care (1)	PRS (1)	Tresco (4)	Total
Behavior Eval does not identify baseline/progress	1				1	2
PBSP not adequate/not identify skills/recommendations		1				1
Behavior Report inaccurate/inadequate	1	2		1	1	5
BSC Report/Eval not available/timely for planning/use			1	1	2	4
Nutrition not available/timely for planning/use		2	1	1	3	7
Nutrition: Not Current/Missing/inaccurate		1	1			2
Desentization Plan needed			3			3
OT Report inaccurate/inadequate					2	2
OT Report/Eval not available/timely for planning/use		1			1	2
PT Report/Eval not available/timely for planning/use		1				1
SLP Eval/Report does not identify baseline/progress	2	1				3
SLP Report/Eval not available/timely for planning/use		3	1		2	6
Weight tracking issues					2	2
Vital Signs Tracking issues		1			1	2
Bowel Tracking issues	1	1			2	4
Totals	**5**	**14**	**7**	**3**	**17**	**46**

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 Guardian, Case Manager, the Direct Support Staff, Therapists, Nurse, any additional people invited by the class member and persons who are needed to ensure the implementation of the Plan. The 2019 IQR protocol specifically probes many of the aspects of the planning process, including detail of who participates in plan creation. The chart below lists answers to related questions in the 2019 Southwest Region review.

Question #63: Was the ISP developed by an appropriately constituted IDT?
Question #64: For any team members not physically present at the IDT meeting, is there evidence of their participation in the development of the ISP?
Question #32: Did the [day/employment] direct service staff have input into the person's ISP?
Question #40: Did the [residential] staff have input into the person's ISP?
Question #92: Was the person provided the assistance and support needed to participate meaningfully in the planning process?

As the following chart confirms, the majority of the provider agencies have done a good job of ensuring that those who know and support each individual have input into the development of the ISP. ,
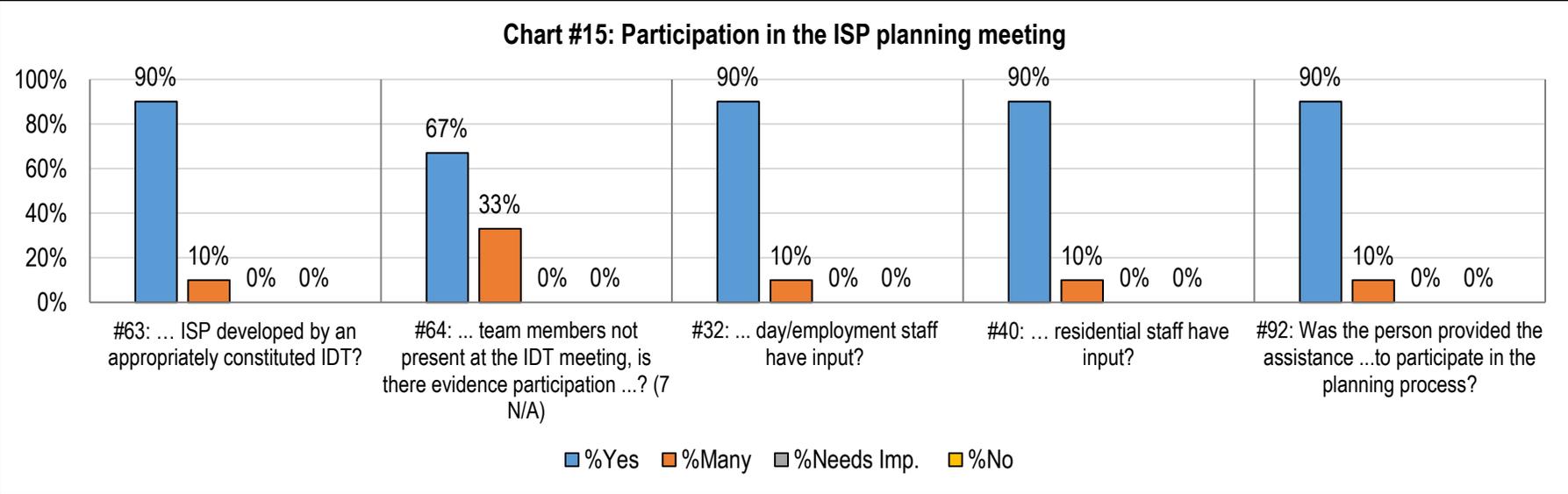
Chart #15: Participation in the ISP planning meeting

Legend: ■ %Yes ■ %Many ■ %Needs Imp. ■ %No

Categories:
- #63: … ISP developed by an appropriately constituted IDT? — 90% Yes, 10% Many, 0% Needs Imp., 0% No
- #64: ... team members not present at the IDT meeting, is there evidence participation ...? (7 N/A) — 67% Yes, 33% Many, 0% Needs Imp., 0% No
- #32: ... day/employment staff have input? — 90% Yes, 10% Many, 0% Needs Imp., 0% No
- #40: … residential staff have input? — 90% Yes, 10% Many, 0% Needs Imp., 0% No
- #92: Was the person provided the assistance ...to participate in the planning process? — 90% Yes, 10% Many, 0% Needs Imp., 0% No

Chart #16: ISP Development Participation, by Residential Provider

Res. Agency (# in sample)	Question				
	#63	#64	#32	#40	#92
Community Options (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)
Lessons of Life (3)	67% Yes (2) 33% Many (1)	50% Yes (1) 50% Many (1) (1 N/A)	67% Yes (2) 33% Many (1)	100% Yes (3)	100% Yes (3)
Nezzy Care (1)	100% Yes (1)	(1 N/A)	100% Yes (1)	100% Yes (1)	100% Yes (1)
PRS (1)	100% Yes (1)	(1 N/A)	100% Yes (1)	100% Yes (1)	100% Yes (1)
Tresco (4)	100% Yes (4)	(4 N/A)	100% Yes (4)	75% Yes (3) 25% Many (1)	75% Yes (3) 25% Many (1)

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

CM Agency (# in sample)	Question				
	#63	**#64**	**#32**	**#40**	**#92**
Heart of NM (1)	100% Yes (1)	(1 N/A)	100% Yes (1)	100% Yes (1)	100% Yes (1)
Peak (2)	100% Yes (2)	100% Yes (1) (1 N/A)	100% Yes (2)	100% Yes (2)	100% Yes (2)
SCCM (5)	80% Yes (4) 20% Many (1)	0% Yes 100% Many (1) (4 N/A)	80% Yes (4) 20% Many (1)	80% Yes (4) 20% Many (1)	100% Yes (5)
Unidas (2)	100% Yes (2)	100% Yes (1) (1 N/A)	100% Yes (2)	100% Yes (2)	50% Yes (1) 50% Many (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 2019 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 the following identified questions related to class members ISP in the 2019 Southwest Region review.

      Question #66: Overall, does the long-term vision show expectations for growth and skill building?
      Question #160: Does the person have an ISP that contains a complete Vision Section that is based on a long term view?
      Question #67: Overall, does the ISP give adequate guidance to achieving the person's long-term vision?
      Question #75: Overall, are the ISP outcomes related to achieving the person's long-term vision?
      Question #76: Overall, do the ISP outcomes, action plans and T&SS address the person's major needs?
      Question #74: Overall, do the outcomes in the ISP include criteria by which the team can determine when the outcomes have been achieved?

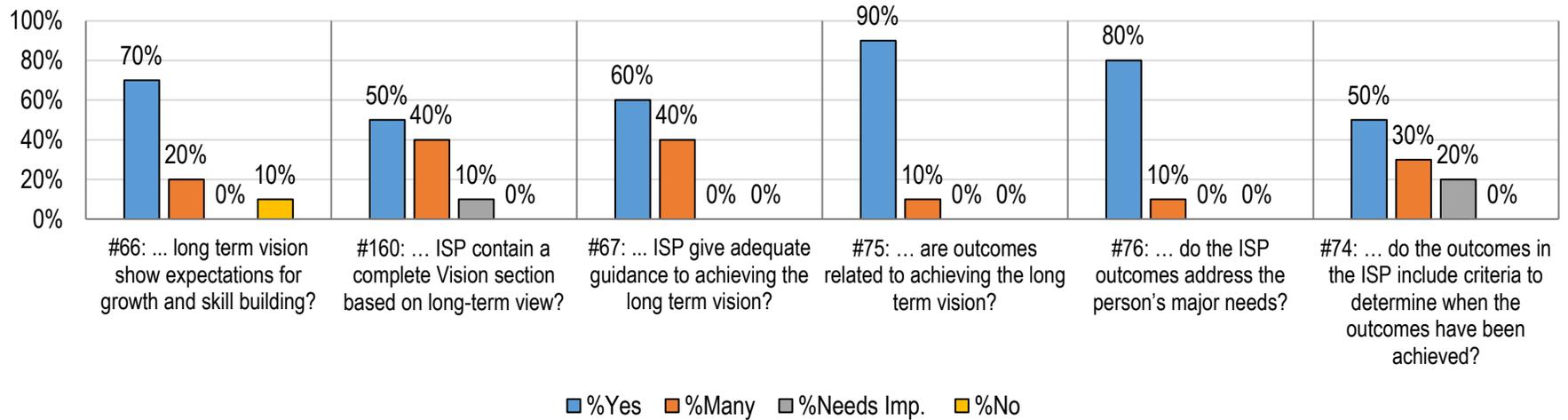**Chart #18: Long Term Vision and Outcomes Protocol Questions**

Legend: ■ %Yes ■ %Many ▢ %Needs Imp. ▢ %No

- #66: ... long term vision show expectations for growth and skill building? — Yes 70%, Many 20%, Needs Imp. 0%, No 10%
- #160: ... ISP contain a complete Vision section based on long-term view? — Yes 50%, Many 40%, Needs Imp. 10%, No 0%
- #67: ... ISP give adequate guidance to achieving the long term vision? — Yes 60%, Many 40%, Needs Imp. 0%, No 0%
- #75: ... are outcomes related to achieving the long term vision? — Yes 90%, Many 10%, Needs Imp. 0%, No 0%
- #76: ... do the ISP outcomes address the person's major needs? — Yes 80%, Many 10%, Needs Imp. 0%, No 0%
- #74: ... do the outcomes in the ISP include criteria to determine when the outcomes have been achieved? — Yes 50%, Many 30%, Needs Imp. 20%, No 0%

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

Res Agency (# in sample)	Question					
	#66	#160	#67	#75	#76	#74
Community Options (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)
Lessons of Life (3)	100% Yes (3)	33% Yes (1) 67% Many (2)	33% Yes (1) 67% Many (2)	100% Yes (3)	100% Yes (3)	67% Yes (2) 33% Many (1)
Nezzy Care (1)	0% Yes 100% No (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Needs Impv (1)
PRS (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)	0% Yes 100% Needs Impv (1)
Tresco (4)	75% Yes (3) 25% Many (1)	75% Yes (3) 25% Many (1)	75% Yes (3) 25% Many (1)	75% Yes (3) 25% No (1)	75% Yes (3) 25% No (1)	50% Yes (2) 50% Many (2)

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

CM Agency (# in sample)	Question					
	#66	**#160**	**#67**	**#75**	**#76**	**#74**
Heart of NM (1)	0% Yes 100% No (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Needs Impv (1)
Peak (2)	50% Yes (1) 50% Many (1)	0% Yes 100% Many (2)	50% Yes (1) 50% Many (1)	100% Yes (2)	100% Yes (2)	50% Yes (1) 50% Needs Impv (1)
SCCM (5)	100% Yes (5)	80% Yes (3) 20% Many (2)	80% Yes (3) 20% Many (2)	100% Yes (5)	100% Yes (5)	60% Yes (3) 40% Many (2)
Unidas (2)	50% Yes (1) 50% Many (1)	50% Yes (1) 50% Many (1)	50% Yes (1) 50% Many (1)	100% Yes (2)	50% Yes (1) 50% No (1)	50% Yes (1) 50% Many (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 intended to verify progress and opportunity for class members.

Question #68: Is measurable data kept which verifies the consistent implementation of each of the action steps?
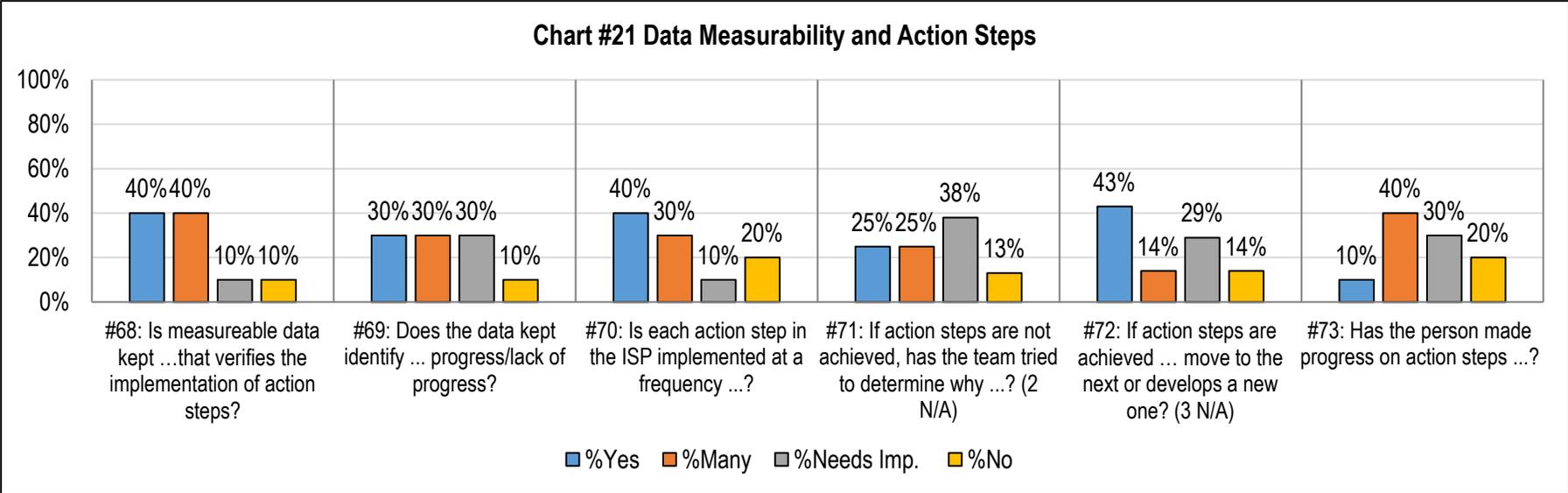Question #69: Does the data kept identify what the person does so a determination can be made regarding the progress/lack of progress?
Question #70: Is each action step in the ISP implemented at a frequency that enables the person to learn new skills?
Question #71: If the person is not successful in achieving action steps, has the team tried to determine why, and change their approach as needed?
Question #72: If the person achieves action steps, does the team move to the next in a progress of steps or develops a new one?
Question #73: Has the person made measurable progress on action steps during the past year?

Chart #21 Data Measurability and Action Steps

Legend: ■ %Yes ■ %Many ■ %Needs Imp. ■ %No

Question	%Yes	%Many	%Needs Imp.	%No
#68: Is measureable data kept …that verifies the implementation of action steps?	40%	40%	10%	10%
#69: Does the data kept identify ... progress/lack of progress?	30%	30%	30%	10%
#70: Is each action step in the ISP implemented at a frequency ...?	40%	30%	10%	20%
#71: If action steps are not achieved, has the team tried to determine why ...? (2 N/A)	25%	25%	38%	13%
#72: If action steps are achieved … move to the next or develops a new one? (3 N/A)	43%	14%	29%	14%
#73: Has the person made progress on action steps ...?	10%	40%	30%	20%

As these charts show, data collection needed to verify progress being made and/or the frequency with which the person has the opportunity to engage in his/her ISP Action Steps continues to be a significant issue for the majority of class members and the agencies which support them.

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

Res Agency (# in sample)	Question					
	#68	#69	#70	#71	#72	#73
Community Options (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)	(1 N/A)	0% Yes 100% No (1)	0% Yes 100% Needs Impv (1)
Lessons of Life (3)	67% Yes (2) 33% Many (1)	33% Yes (1) 67% Many (2)	67% Yes (2) 33% Many (1)	33% Yes (1) 33% Many (1) 33% Needs Impv (1)	33% Yes (1) 33% Many (1) 33% Needs Impv (1)	33% Yes (1) 67% Many (2)
Nezzy Care (1)	0% Yes 100% Many (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Needs Impv (1)	100% Yes (1)	(1 N/A)	0% Yes 100% No (1)
PRS (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	(1 N/A)	0% Yes 100% Needs Impv (1)
Tresco (4)	25% Yes (1) 50% Many (2) 25% No (1)	25% Yes (1) 25% Many (1) 25% Needs Impv (1) 25% No (1)	25% Yes (1) 25% Needs Impv (1) 50% No (2)	0% Yes 67% Needs Impv (2) 33% No (1) (1 N/A)	67% Yes (2) 33% Needs Impv (1) (1 N/A)	0% Yes 50% Many (2) 25% Needs Impv (1) 25% No (1)

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

CM Agency (# in sample)	Question					
	#68	#69	#70	#71	#72	#73
Heart of NM (1)	0% Yes 100% Many (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Needs Impv (1)	10% Yes (1)	(1 N/A)	0% Yes 100% No (1)
Peak (2)	50% Yes (1) 50% Needs Impv (1)	50% Yes (1) 50% Needs Impv (1)	0% Yes 100% Many (2)	0% Yes 50% Many (1) 50% Needs Impv (1)	0% Yes 100% Needs Impv (1) (1 N/A)	0% Yes 50% Many (1) 50% Needs Impv (1)
SCCM (5)	40% Yes (2) 40% Many (2) 20% No (1)	20% Yes (1) 40% Many (2) 20% Needs Impv (1) 20% No (1)	60% Yes (3) 20% Many (1) 20% No (1)	25% Yes (1) 25% Many (1) 25% Needs Impv (1) 25% No (1) (1 N/A)	75% Yes (3) 25% Many (1) (1 N/A)	20% Yes (1) 40% Many (2) 20% Needs Impv (1) 20% No (1)
Unidas (2)	50% Yes (1) 50% Many (1)	50% Yes (1) 50% Many (1)	50% Yes (1) 50% No (1)	0% Yes 100% Needs Impv (1) (1 N/A)	0% Yes 50% Needs Impv (1) 50% No (1)	0% Yes 50% Many (1) 50% Needs Impv (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 2019 IQR relate to the T&SS and implementation of the ISP.

Question #77: Are the T&SS sufficient to ensure consistent implementation of the services planned?
Question #78: Are the recommendations and/or objectives/strategies of ancillary provider integrated into the ISP?
Question #89: Were the direct service staff able to describe their responsibilities in providing daily care/supports to the person?
Question #88: Was the direct service staff trained on the implementation of this person's ISP?
Question #86/87a: Is the ISP being implemented?
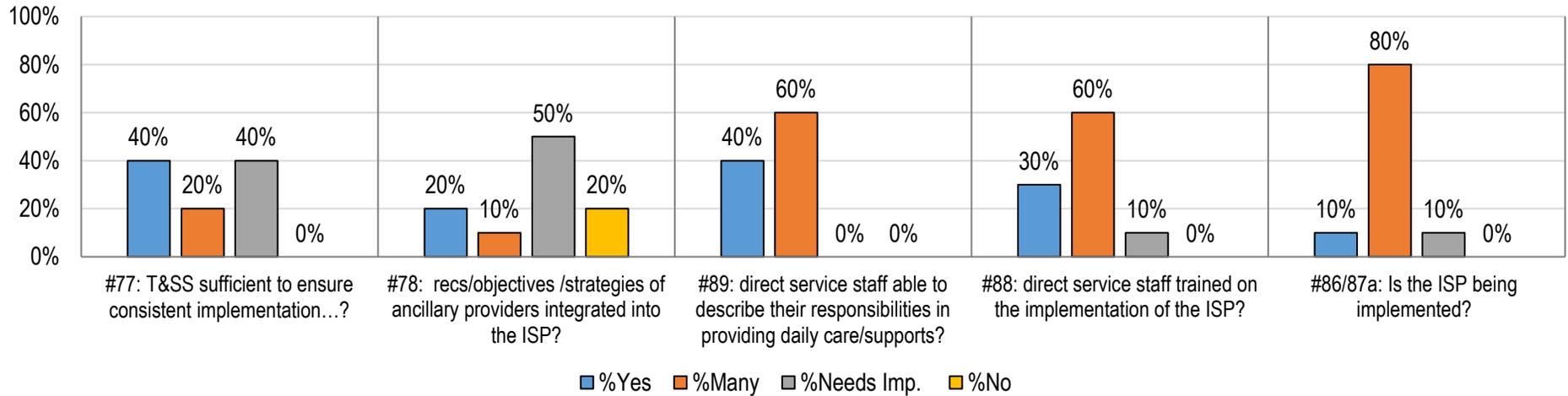
Chart #24: T&SS and Implementation

Legend: ■ %Yes ■ %Many ■ %Needs Imp. ■ %No

Question	%Yes	%Many	%Needs Imp.	%No
#77: T&SS sufficient to ensure consistent implementation…?	40%	20%	40%	0%
#78: recs/objectives /strategies of ancillary providers integrated into the ISP?	20%	10%	50%	20%
#89: direct service staff able to describe their responsibilities in providing daily care/supports?	40%	60%	0%	0%
#88: direct service staff trained on the implementation of the ISP?	30%	60%	10%	0%
#86/87a: Is the ISP being implemented?	10%	80%	10%	0%

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

Res. Agency (# in sample)	Question				
	#77	#78	#89	#88	#87a
Community Options (1)	100% Yes (1)	100% Yes (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)
Lessons of Life (3)	67% Yes (2) 33% Need Impv (1)	33% Yes (1) 33% Needs Impv (1) 33% No (1)	100% Yes (3)	67% Yes (2) 33% Many (1)	33% Yes (1) 67% Many (2)
Nezzy Care (1)	0% Yes 100% Many (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)
PRS (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% No (1)	0% Yes 100% Many (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Many (1)
Tresco (4)	25% Yes (1) 25% Many (1) 50% Needs Impv (2)	0% Yes 25% Many (1) 75% Needs Impv (1)	25% Yes (1) 75% Many (3)	25% Yes (1) 75% Many (3)	0% Yes 75% Many (3) 25% Needs Impv (1)

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

CM Agency (# in sample)	Question				
	#77	**#78**	**#89**	**#88**	**#87a**
Heart of NM (1)	0% Yes 100% Many (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)
Peak (2)	50% Yes (1) 50% Needs Impv (1)	50% Yes (1) 50% No (1)	50% Yes (1) 50% Many (1)	50% Yes (1) 50% Needs Impv (1)	50% Yes (1) 50% Many (1)
SCCM (5)	40% Yes (2) 20% Many (1) 40% Needs Impv (2)	0% Yes 20% Many (1) 60% Needs Impv (3) 20% No (1)	60% Yes (3) 40% Many (2)	40% Yes (2) 60% Many (3)	0% Yes 80% Many (4) 20% Needs Impv (1)
Unidas (2)	50% Yes (1) 50% Needs Impv (1)	50% Yes (1) 50% Needs Impv (1)	0% Yes 100% Many (2)	0% Yes 100% Many (2)	0% Yes 100% Many (2)

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 2019 IQR protocol that probe these items, and the level of intensity of services that individuals in the review receive.

Question #65: Does my ISP contain current and accurate information?
Question #124: Overall, has the IDT process been adequate for assessing, planning, implementing and monitoring of services for this person?
Question #85: Overall, is the ISP adequate to meet the person's needs?
Question #161: Does the person receive services and supports recommended in the ISP?
Question #87b: Are current services adequate to meet the person's needs?
Question #164: Is the total program of the level of intensity adequate to meet this person's needs?
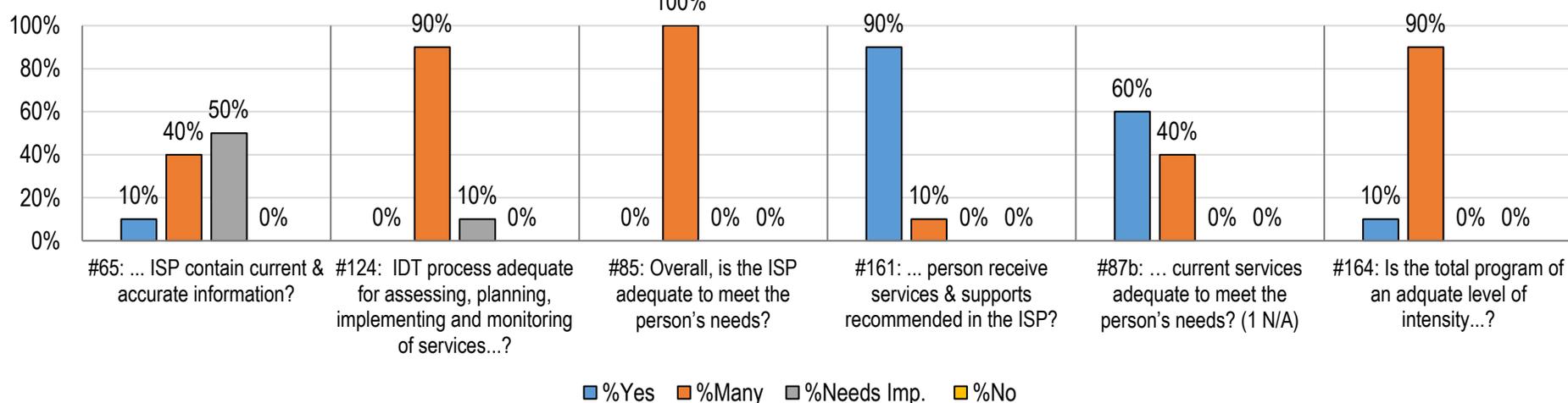
Chart #27: ISP and Services are current and adequate

Legend: ■ %Yes ■ %Many ■ %Needs Imp. ■ %No

- #65: ... ISP contain current & accurate information?
- #124: IDT process adequate for assessing, planning, implementing and monitoring of services...?
- #85: Overall, is the ISP adequate to meet the person's needs?
- #161: ... person receive services & supports recommended in the ISP?
- #87b: ... current services adequate to meet the person's needs? (1 N/A)
- #164: Is the total program of an adquate level of intensity...?

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

Res. Agency (# in sample)	Question					
	#65	#124	#85	#161	#87b	#164
Community Options (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Many (1)	100% Yes (1)	100% Yes (1)	0% Yes 100% Many (1)
Lessons of Life (3)	33% Yes (1) 33% Many (1) 33% Needs Impv (1)	0% Yes 100% Many (3)	0% Yes 100% Many (3)	100% Yes (3)	67% Yes (2) 33% Many (1)	33% Yes (1) 67% Many (2)
Nezzy Care (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	100% Yes (1)	100% Yes (1)	0% Yes 100% Many (1)
PRS (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	100% Yes (1)	100% Yes (1)	0% Yes 100% Many (1)
Tresco (4)	0% Yes 50% Many (2) 50% Needs Impv (2)	0% Yes 100% Many (4)	0% Yes 100% Many (4)	75% Yes (3) 25% Many (1)	25% Yes (1) 75% Many (3)	0% Yes 100% Many (4)

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

CM Agency (# in sample)	Question					
	#65	#124	#85	#161	#87b	#164
Heart of NM (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	100% Yes (1)	100% Yes (1)	0% Yes 100% Many (1)
Peak (2)	0% Yes 50% Many (1) 50% Needs Impv (1)	0% Yes 100% Many (2)	0% Yes 100% Many (2)	100% Yes (2)	100% Yes (2)	50% Yes (1) 50% Many (1)
SCCM (5)	20% Yes (1) 40% Many (2) 40% Needs Impv (2)	0% Yes 100% Many (5)	0% Yes 100% Many (5)	100% Yes (5)	40% Yes (2) 60% Many (3)	0% Yes 100% Many (5)
Unidas (2)	0% Yes 50% Many (1) 50% Needs Impv (1)	0% Yes 50% Many (1) 50% Needs Impv (1)	0% Yes 100% Many (2)	50% Yes (1) 50% Many (1)	50% Yes (1) 50% Many (1)	0% Yes 100% Many (2)

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 greater independence and access to needed services and supports. While the number of findings in the 2019 Southwest Region IQR in the Case Management area are the third highest of the findings area, the case managers supporting individuals in this sample scored well on, "does the case manager know the person" and "Is the case manager available to the person as pictured below. 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: Is the case manager available to the person?

Question #27: Was the case manager able to describe the person's health related needs?
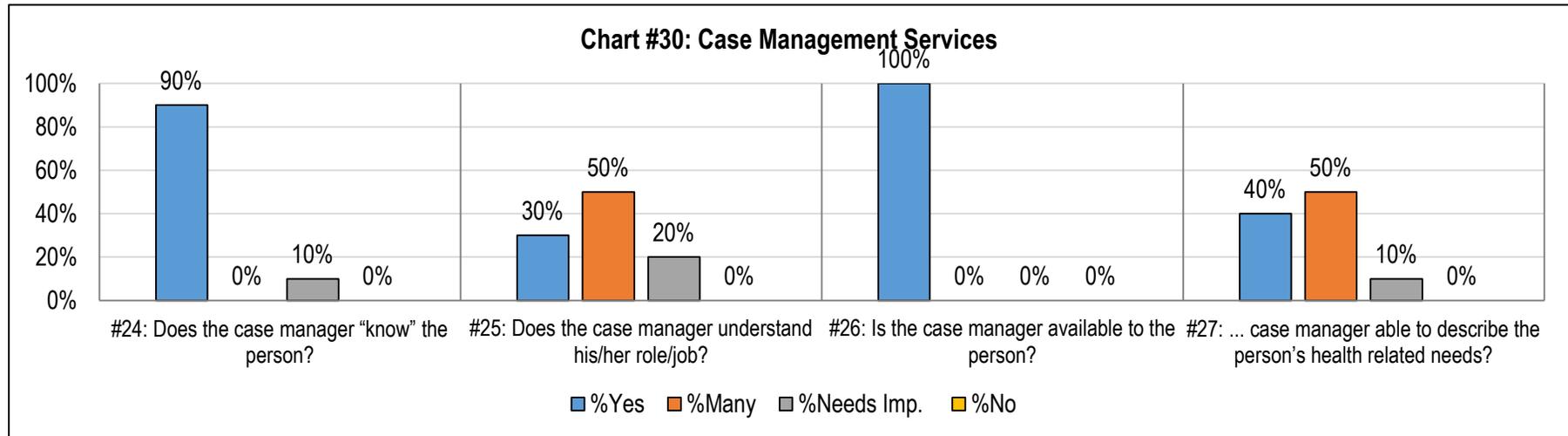
Chart #30: Case Management Services

Legend: ■ %Yes ■ %Many ■ %Needs Imp. ■ %No

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

CM Agency (# in sample)	Question			
	#24	**#25**	**#26**	**#27**
Heart of NM (1)	100% Yes (1)	0% Yes 100% Many (1)	100% Yes (1)	100% Yes (1)
Peak (2)	100% Yes (2)	50% Yes (1) 50% Needs Impv (1)	100% Yes (2)	0% Yes 50% Many (1) 50% Needs Impv (1)
SCCM (5)	80% Yes (4) 20% Needs Impv (1)	40% Yes (2) 60% Many (3)	100% Yes (5)	60% Yes (3) 40% Many (2)
Unidas (2)	100% Yes (2)	0% Yes 50% Many (1) 50% Needs Impv (1)	100% Yes (2)	0% Yes 100% Many (2)

Again, case managers across the board expressed appropriate expectations of growth for those whom they support. This is a key and important component of any individual's success.

Question #28: Does the case manager have an appropriate expectation of growth for this person?
Question #29: 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 #30: Does the case manager provide case management services at the level needed by this person?
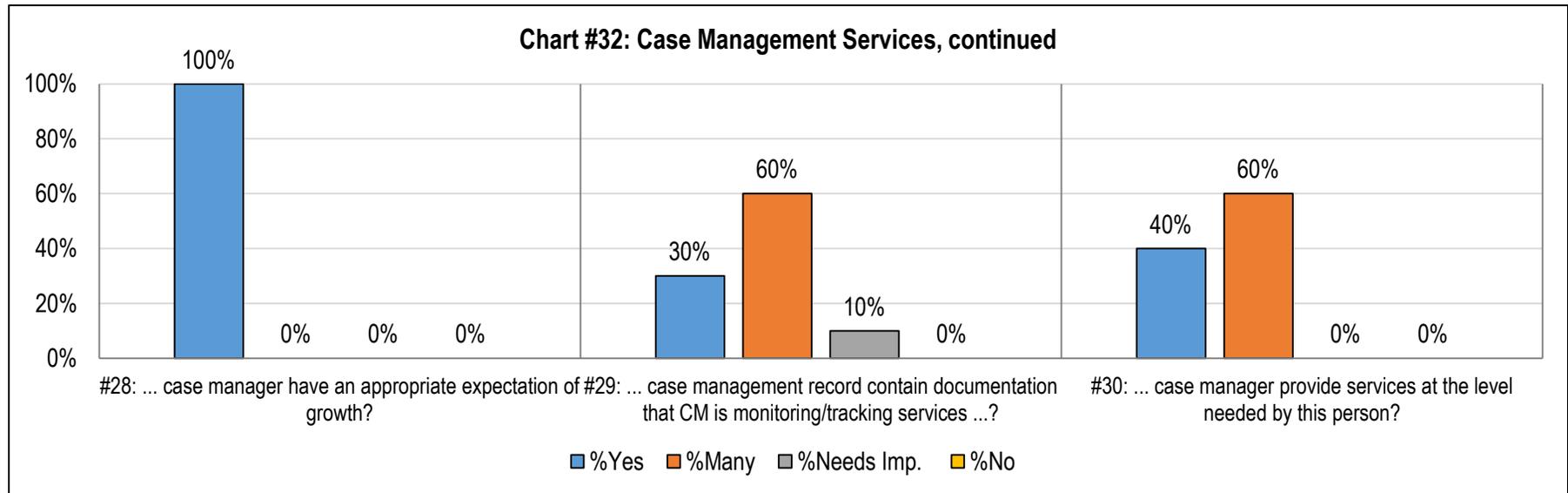

Chart #32: Case Management Services, continued

Legend: ■ %Yes ■ %Many ■ %Needs Imp. ■ %No

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

CM Agency (# in sample)	Question		
	#28	#29	#30
Heart of NM (1)	100% Yes (1)	100% Yes (1)	0% Yes 100% Many (1)
Peak (2)	100% Yes (2)	0% Yes 100% Many (2)	50% Yes (1) 50% Many (1)
SCCM (5)	100% Yes (5)	40% Yes (2) 60% Many (3)	40% Yes (2) 60% Many (3)
Unidas (2)	100% Yes (2)	0% Yes 50% Many (1) 50% Needs Impv (1)	50% Yes (1) 50% Many (1)

H. Supported Employment

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

There are multiple components that make up the process of ensuring Informed Choice. These are probed as part of the Individual Quality Review, and detailed in the tables below. As the 2018 DD Waiver Standards emphasize,

> 2018 DD Waiver Standards Chapter 4.5… "Person-centered practice must include informed choice. Informed choice is when a person makes a decision based on a solid understanding of all available options and consequences of how that choice will impact his/her life. Options are developed through a partnership with the person and knowledgeable supports, including team members and nonpaid supports who empower the person to make informed choices. Informed choice is critical in PCP and can move the lives of people with I/DD forward.

> Informed choice generally includes the following:
> Also, the following contains information from 2018 DD Waiver Standards Chapter 4.5 and 6.6.3.4
> 1. *Assessment:* The first step in making an informed choice about employment starts with the assessment process.
> 2. *Information:* discussing with the person/guardian what was learned through the assessment (4.5) is also expected and helpful. In addition, providing information about different work options and resources available to the person in a way that is understandable by the person is important.
> 3. *Experience:* If a person has no volunteer or work history, then the individual and guardian should consider trying new discovery experiences in the community to determine interests, skills, abilities, and needs. Opportunity for Trial Work or Volunteering: … providing the individual with access to job exploration activities including volunteer work and/or trial work opportunities, if the individual and guardian are interested, is key.
> 4. *Identification of barriers:* considering potential impact on the person's life, health and safety and creating strategies to address any related issues that may arise.

The IQR Questions related to these four Informed Choice areas and the results follow.

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

   Question #125. Does (Name) have a current Person Centered Assessment?
   Question #126. Did this assessment address vocational interests, abilities and needs?
   Question #127. Did the individual participate personally in the Person Centered Assessment?
   Question #128. Did the Guardian participate in the Person Centered Assessment?
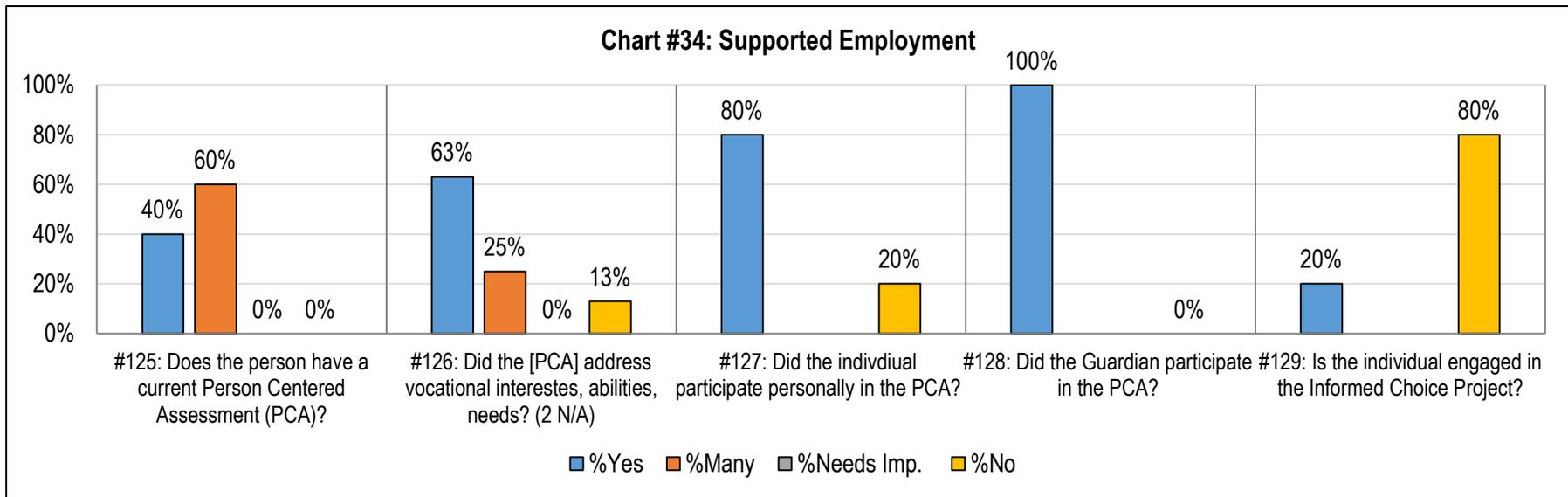   Question #129. Is the individual engaged in the Informed Choice Project?

Chart #34: Supported Employment

Chart #34: Supported Employment

- #125: Does the person have a current Person Centered Assessment (PCA)? — %Yes 40%, %Many 60%, %Needs Imp. 0%, %No 0%
- #126: Did the [PCA] address vocational interestes, abilities, needs? (2 N/A) — %Yes 63%, %Many 25%, %Needs Imp. 0%, %No 13%
- #127: Did the indivdiual participate personally in the PCA? — %Yes 80%, %No 20%
- #128: Did the Guardian participate in the PCA? — %Yes 100%, %No 0%
- #129: Is the individual engaged in the Informed Choice Project? — %Yes 20%, %No 80%

Legend: %Yes, %Many, %Needs Imp., %No

Chart #35: Supported Employment Scores by Provider Agency

Res. Agency (# in sample)	Question				
	#125	#126	#127	#128	#129
Community Options (1)	0% Yes 100% Many (1)	(1 N/A)	100% Yes (1)	100% Yes (1)	0% Yes 100% No (1)
Lessons of Life (3)	33% Yes (1) 67% Many (2)	67% Yes (2) 33% No (1)	100% Yes (3)	100% Yes (3)	33% Yes (1) 67% No (2)
Nezzy Care (1)	100% Yes (1)	(1 N/A)	0% Yes 100% No (1)	100% Yes (1)	0% Yes 100% No (1)
PRS (1)	0% Yes 100% Many (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)	0% Yes 100% No (1)
Tresco (4)	50% Yes (2) 50% Many (2)	50% Yes (2) 50% Many (2)	75% Yes (3) 25% No (1)	100% Yes (4)	25% Yes (1) 75% No (3)

Chart #36: Supported Employment Scores by Case Management Agency

CM Agency (# in sample)	Question				
	#125	**#126**	**#127**	**#128**	**#129**
Heart of NM (1)	100% Yes (1)	(1 N/A)	0% Yes 100% No (1)	100% Yes (1)	0% Yes 100% No (1)
Peak (2)	50% Yes (1) 50% Many (1)	100% Yes (2)	100% Yes (2)	100% Yes (2)	50% Yes (1) 50% No (1)
SCCM (5)	20% Yes (1) 80% Many (4)	60% Yes (3) 20% Many (1) 20% No (1)	80% Yes (4) 20% No (1)	100% Yes (5)	0% Yes 100% No (5)
Unidas (2)	50% Yes (1) 50% Many (1)	0% Yes 100% Many (1) (1 N/A)	100% Yes (2)	100% Yes (2)	50% Yes (1) 50% No (1)

2. **Components of Informed Choice: Information and Experience**

Question #130. Has the individual been offered the opportunity to participate in work or job exploration including volunteer work and/or trial work opportunities?
Question #131. If #130 is Yes, are these new experiences clearly documented in the ISP Work, Education and/or Volunteer History section?
Question #132. If #130 is No, is the individual trying new discovery experiences in the community to determine interests, abilities, skills and needs?
Question #133. 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 #134. Has the individual received information regarding the range of employment options available to him/her?
Question #135. Has the Guardian received information regarding the range of employment options available for the individual?

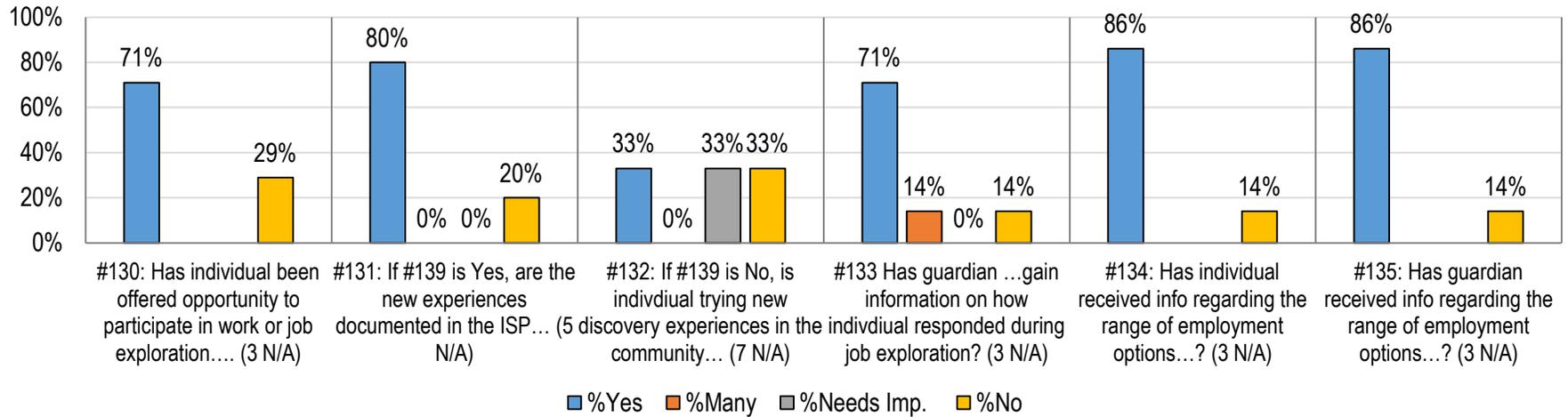**Chart #37: Supported Employment, continued**

Chart showing percentages for questions #130-#135 with categories %Yes, %Many, %Needs Imp., %No:
- #130: Has individual been offered opportunity to participate in work or job exploration…. (3 N/A): 71% Yes, 29% No
- #131: If #139 is Yes, are the new experiences documented in the ISP… (5 N/A): 80% Yes, 0% Many, 0% Needs Imp., 20% No
- #132: If #139 is No, is individual trying new discovery experiences in the community… (7 N/A): 33% Yes, 0%, 33% Needs Imp., 33% No
- #133 Has guardian …gain information on how the individual responded during job exploration? (3 N/A): 71% Yes, 14% Many, 0%, 14% No
- #134: Has individual received info regarding the range of employment options…? (3 N/A): 86% Yes, 14% No
- #135: Has guardian received info regarding the range of employment options…? (3 N/A): 86% Yes, 14% No

Legend: ■ %Yes ■ %Many ■ %Needs Imp. ■ %No

Chart #38: Supported Employment Scores by Provider Agency

Res. Agency (# in sample)	Question					
	#130	#131	#132	#133	#134	#135
Community Options (1)	(1 N/A)	(1 N/A)	(1 N/A)	(1 N/A)	(1 N/A)	(1 N/A)
Lessons of Life (3)	67% Yes (2) 33% No (1)	50% Yes (1) 50% No (1) (1 N/A)	0% Yes 50% Needs Impv (1) 50% No (1) (1 N/A)	33% Yes (1) 33% Many (1) 33% No (1)	67% Yes (2) 33% No (1)	67% Yes (2) 33% No (1)
Nezzy Care (1)	(1 N/A)	(1 N/A)	(1 N/A)	(1 N/A)	(1 N/A)	(1 N/A)
PRS (1)	0% Yes 100% No (1)	(1 N/A)	100% Yes (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)
Tresco (4)	100% Yes (3) (1 N/A)	100% Yes (3) (1 N/A)	(4 N/A)	100% Yes (3) (1 N/A)	100% Yes (3) (1 N/A)	100% Yes (3) (1 N/A)

Chart #39: Supported Employment Scores by Case Management Agency

CM Agency (# in sample)	Question					
	#130	**#131**	**#132**	**#133**	**#134**	**#135**
Heart of NM (1)	(1 N/A)	(1 N/A)	(1 N/A)	(1 N/A)	(1 N/A)	(1 N/A)
Peak (2)	50% Yes (1) 50% No (1)	100% Yes (1) (1 N/A)	100% Yes (1) (1 N/A)	100% Yes (2)	100% Yes (2)	100% Yes (2)
SCCM (5)	75% Yes (3) 25% No (1) (1 N/A)	67% Yes (2) 33% No (1) (2 N/A)	0% Yes 50% Needs Impv (1) 50% No (1) (3 N/A)	50% Yes 25% Many (1) 25% No (1) (1 N/A)	75% Yes (3) 25% No (1) (1 N/A)	75% Yes (3) 25% No (1) (1 N/A)
Unidas (2)	100% Yes (1) (1 N/A)	100% Yes (1) (1 N/A)	(2 N/A)	100% Yes (1) (1 N/A)	100% Yes (1) (1 N/A)	100% Yes (1) (1 N/A)

3.   **Components of Informed Choice**: <u>Identification of Employment Barriers/Issues.</u>

Question #136. 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 #137. 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 #138. Has the individual participated in work or volunteer activities during the past year?

Question #139. Has the individual identified what type of work or volunteer activities he/she would like to do?

Chart #40: Supported Employment, continued

Legend: ■ %Yes ■ %Many ■ %Needs Imp. ■ %No

- #136: If there are barriers to employmet has... addressed how to overcome...? (4 N/A): 83% Yes, 0%, 0%, 17% No
- #137: If there are barries to employmnet has Team addressed with Guardian...? (4 N/A): 67% Yes, 0%, 0%, 33% No
- #138: Has the individual participated in work or volunteer activities...? (3 N/A): 43% Yes, 0%, 0%, 57% No
- #139: Has the indivdiual identified what type of work or volunteer activities...? (3 N/A): 43% Yes, 14% Many, 0%, 43% No

Chart #41: Supported Employment Scores by Provider Agency

Res. Agency (# in sample)	Question			
	#136	#137	#138	#139
Community Options (1)	(1 N/A)	(1 N/A)	(1 N/A)	(1 N/A)
Lessons of Life (3)	67% Yes (2) 33% No (1)	67% Yes (2) 33% No (1)	67% Yes (2) 33% No (1)	67% Yes (2) 33% No (1)
Nezzy Care (1)	(1 N/A)	(1 N/A)	(1 N/A)	(1 N/A)
PRS (1)	100% Yes (2)	100% Yes (2)	0% Yes 100% No (1)	0% Yes 100% No (1)
Tresco (4)	100% Yes (2) (2 N/A)	50% Yes (1) 50% No (1) (2 N/A)	33% Yes (1) 67% No (2) (1 N/A)	33% Yes (1) 33% Many (1) 33% No (1) (1 N/A)

Chart #42: Supported Employment Scores by Case Management Agency

CM Agency (# in sample)	Question			
	#136	**#137**	**#138**	**#139**
Heart of NM (1)	(1 N/A)	(1 N/A)	(1 N/A)	(1 N/A)
Peak (2)	100% Yes (2)	100% Yes (2)	50% Yes (1) 50% No (1)	50% Yes (1) 50% No (1)
SCCM (5)	67% Yes (2) 33% No (1) (2 N/A)	67% Yes (2) 33% No (1) (2 N/A)	50% Yes (2) 50% No (2) (1 N/A)	50% Yes (2) 50% No (2) (1 N/A)
Unidas (2)	100% Yes (1) (1 N/A)	0% Yes 100% No (1) (1 N/A)	0% Yes 100% No (1) (1 N/A)	0% Yes 100% Many (1) (1 N/A)

4. **JCMs Involved in Supported Employment**
   Question #140. Does the Guardian support him/her working?
   Question #142. Is the individual engaged in Supported Employment?
   Question #144. Does the person have a Career Development Plan?

Charte #43: Supported Employment, continued

	#140: Does the Guardian support him/her working? (2 N/A)	#142: Is the indivdiual engaged in Supported Employment? (3 N/A)	#144: Does the person have a Career Development Plan? (9 N/A)
%Yes	25%	14%	100%
%No	75%	86%	0%

■%Yes ■%Many ■%Needs Imp. ■%No
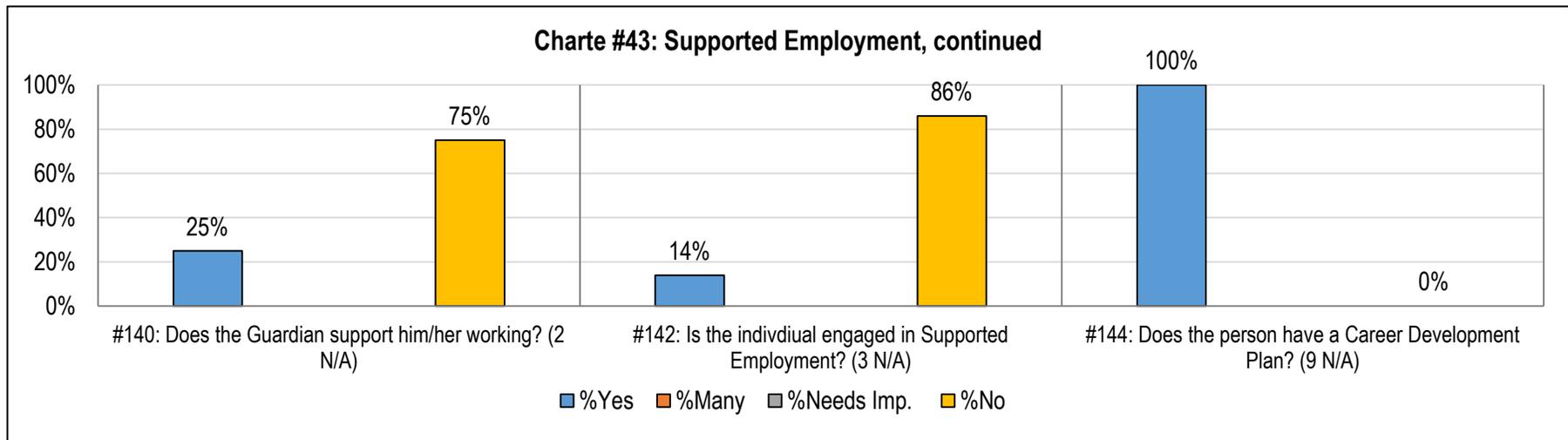
Chart #44: Supported Employment Scores by Provider Agency

Res. Agency (# in sample)	Question		
	#140	**#142**	**#144**
Community Options (1)	0% Yes 100% No (1)	(1 N/A)	(1 N/A)
Lessons of Life (3)	33% Yes (1) 67% No (2)	0% Yes 100% No (3)	(3 N/A)
Nezzy Care (1)	(1 N/A)	(1 N/A)	(1 N/A)
PRS (1)	0% Yes 100% No (1)	0% Yes 100% No (1)	(1 N/A)
Tresco (4)	33% Yes (1) 67% No (2) (1 N/A)	33% Yes (1) 67% No (2) (1 N/A)	100% Yes (1) (3 N/A)

Chart #45: Supported Employment Scores by Case Management Agency

CM Agency (# in sample)	Question		
	#140	**#142**	**#144**
Heart of NM (1)	(1 N/A)	(1 N/A)	(1 N/A)
Peak (2)	0% Yes 100% No (2)	0% Yes 100% No (2)	(2 N/A)
SCCM (5)	50% Yes (2) 50% No (2) (1 N/A)	25% Yes (1) 75% No (3) (1 N/A)	100% Yes (1) (4 N/A)
Unidas (2)	0% Yes 100% No (2)	0% Yes 100% No (1) (1 N/A)	(2 N/A)

I. IQR Scored Protocol Questions

Below are all of the questions in the protocol and the scores of the Southwest Region Review. The questions highlighted are included in the data tables above.

Question	2019 (sample=33)
CASE MANAGEMENT	
24. Does the case manager "know" the person? CPRQ26; '17IQR#8c, '18IQR24	90% Yes (9) 10% Needs Impv (1)
25. Does the case manager understand his/her role/job? CPRQ27 '17IQR#16, '18IQR25	30% Yes (3) 50% Many (5) 20% Needs Impv (2)
26. Is the case manager available to the person? CPRQ29; '17IQR#16a, '18IQR27	100% Yes (10)
27. Was the case manager able to describe the person's health related needs? CPRQ30, '18IQR28	40% Yes (4) 50% Many (5) 10% Needs Impv (1)
28. Does the case manager have an appropriate expectation of growth for this person? CPRQ31, '18IQR29	100% Yes (10)
29. 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, '18IQR30	30% Yes (3) 60% Many (6) 10% Needs Impv (1)
30. Does the case manager provide case management services at the level needed by this person? CPRQ33; '17IQR#16c, '18IQR31	40% Yes (4) 60% Many (6)
EMPLOYMENT AND DAY	
31. Does the direct services staff "know" the person? CPRQ35; '17IQR#8a, '18IQR33	90% Yes (9) 10% Many (1)
32. Does the direct service staff have input into the person's ISP? CPRQ36, '18IQR34	90% Yes (9) 10% Many (1)
33. Did the direct service staff receive training on implementing this person's ISP? CPRQ37, '18IQR35	40% Yes (4) 40% Many (4)

Question	2019 (sample=33)
	20% Needs Impv (2)
34. Was the direct service staff able to describe this person's health-related needs? CPRQ38, '18IQR36	30% Yes (3) 60% Many (6) 10% Needs Impv (1)
35. Was the direct service staff able to describe his/her responsibilities in providing daily care/supports to the person? CPRQ39, '18IQR37	40% Yes (4) 50% Many (5) 10% Needs Impv (1)
35a. Was the direct service staff able to provide specific information regarding the person's daily activities? CPRQ39a, '18IQR37a	80% Yes (8) 10% Many (1) 10% Needs Impv (1)
35b. Can the direct service staff describe his/her responsibilities in implementing this person's ISP, including outcomes, action plans, and WDSIs? CPRQ39b, '18IQR37b	40% Yes (4) 50% Many (5) 10% Needs Impv (1)
36. Did the direct service staff have training on the provider's complaint process and how to report abuse, neglect and exploitation? CPRQ41, '18IQR39	100% Yes (10)
37. Does the direct service staff have an appropriate expectation of growth for this person? CPRQ42, '18IQR40	100% Yes (9) (1 CND)
38. Does the person's day/work environment generally clean, free of safety hazards and conducive to the work/activity intended? CPRQ43, '18IQR41	90% Yes (9) 10% Many (1)
RESIDENTIAL	
39. Does the residential direct services staff "know" the person? CPRQ44; '17IQR#8b, '18IQR42	100% Yes (10)
40. Does the direct service staff have input into the person's ISP? CPRQ45, '18IQR43	90% Yes (9) 10% Many (1)
41. Did the direct service staff receive training on implementing this person's ISP? CPRQ46, '18IQR44	70% Yes (7) 30% Many (3)
42. Is the residence safe for individuals (void of hazards)? CPRQ45, '18IQR45	80% Yes (8) 20% Many (2)

Question	2019 (sample=33)
43. Was the residential direct service staff able to describe this person's health-related needs? CPRQ48, '18IQR46	50% Yes (5) 40% Many (4) 10% Needs Impv (1)
44. Was the direct service staff able to describe his/her responsibilities in providing daily care/supports to the person? CPRQ49, '18IQR47	70% Yes (7) 30% Many (3)
44a. Was the direct service staff able to provide specific information regarding the person's daily activities? CPRQ49a, '18IQR47a	90% Yes (9) 10% Many (1)
44b. Can the direct service staff describe his/her responsibilities in implementing this person's ISP, including outcomes, action plans, and WDSIs? CPRQ49b, '18IQR47b	70% Yes (7) 30% Many (3)
45. Did the direct service staff have training on the provider's complaint process and how to report abuse, neglect and exploitation? CPRQ51, '18IQR49	100% Yes (10)
46. Does the residential direct service staff have an appropriate expectation of growth for this person? CPRQ52, '18IQR50	80% Yes (8) 10% Many (1) 10% Needs Impv (1)
47. Does the person's residential environment offer a minimal level of quality of life? CPRQ53, '18IQR51	70% Yes (7) 30% Many (3)
HEALTH	
48. Overall, were the team members interviewed able to describe the person's health-related needs? CPRQ54; '17IQR#21b, '18IQR52	20% Yes (2) 60% Many (6) 20% Needs Impv (2)
49. Is there evidence that the IDT discussed the person's health related issues? CPRQ55; '17IQR#21, '18IQR53	20% Yes (2) 70% Many (7) 10% Needs Impv (1)
50. Was the eChat updated timely? '17IQR#18g, '18IQR54	20% Yes (2) 80% Many (8)
50a. Is the eChat updated timely with the ISP and after changes in condition?	80% Yes (8) 10% Needs Impv (1) 10% No (1)
50b. Is the eChat complete?	40% Yes (4) 60% Many (6)

Question	2019 (sample=33)
50c. Is the eChat accurate?	40% Yes (4) 50% Many (5) 10% Needs Impv (1)
51. Are all of the individual's needed medical treatments, including routine, scheduled and chronic needs, timely received? 17IQR#19, '18IQR55	50% Yes (5) 40% Many (4) 10% No (1)
52. Has the individual received all age and gender appropriate health screening/immunizations in accordance with national best practice and/or as recommended …(*Does the individual receive routine/scheduled medical treatment? 17IQR#19a, '18IQR56)*	40% Yes (4) 60% Many (6)
53. Does the individual receive medication as prescribed? 17IQR#19e, '18IQR57	30% Yes (3) 50% Many (5) 20% Needs Impv (2)
54. Are nursing services provided as needed by the individual? 17IQR#20, '18IQR59	0% Yes 80% Many (8) 20% Needs Impv (2)
55. Is the CARMP consistent with recommendation in other healthcare documents? *(Is the CARMP is accurate? '17IQR#21f, '18IQR60)*	20% Yes (2) 50% Many (5) 30% Needs Impv (3)
56. Is the CARMP consistently implemented as intended? , '18IQR61	80% Yes (8) 20% Many (2)
57. Are the person's health supports/needs being adequately addressed? CPRQ56; '17IQR#19, '18IQR62	10% Yes (1) 90% Many (9)
57a. Are assessment recommendations followed up on in a timely way?	30% Yes (3) 60% Many (6) 10% Needs Impv (1)
57b. Were needed equipment/communication devices delivered timely?	56% Yes (5) 44% Many (4) (1 N/A)
57c. Were medical specialist appointments attended timely?	70% Yes (7) 30% Many (3)
57d. Were changes in personal condition, if any, responded to timely?	70% Yes (7)

Question	2019 (sample=33)
	30% Many (3)
57e. Were Health Care Plans available, accurate and consistently implemented?	20% Yes (2) 70% Many (7) 10% Needs Impv (1)
ASSESSMENTS	
58. Did the team arrange for and obtain the needed, relevant assessments? CPRQ58; '17IQR#18, '18IQR65	70% Yes (7) 30% Many (3)
59. Are the assessments adequate for planning? CPRQ59; '17IQR#4f, '18IQR66	20% Yes (2) 80% Many (8)
59a. Were assessments provided timely?	10% Yes (1) 90% Many (9)
59b. Did assessments contain accurate information?	20% Yes (2) 80% Many (8)
59c. Did assessments contain information accurate to guide planning?	10% Yes (1) 80% Many (8) 10% Needs Impv (1)
59d. Did assessments contain recommendations?	80% Yes (8) 20% Many (2)
60. Were the recommendations from assessments used in planning? CPRQ60; '17IQR#5, '18IQR67	40% Yes (4) 60% Many (6)
61. 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, '18IQR68	40% Yes (2) 20% Many (1) 20% Needs Impv (1) 20% No (1) (5 N/A)
ADEQUACY OF PLANNING AND ADEQUACY OF SERVICES	
62. Is there a document called an Individual Service Plan (ISP) that was developed within the past year? CPRQ61; '17IQR#9, '18IQR69	100% Yes (10)

Question	2019 (sample=33)
63. Was the ISP developed by an appropriately constituted IDT? CPRQ62; '17IQR#3, '18IQR70	90% Yes (9) 10% Many (1)
64. 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, '18IQR71	67% Yes (2) 33% Many (1) (7 N/A)
65. Does my ISP contain current and accurate information? '17IQR#6, '18IQR72	10% Yes (1) 40% Many (4) 50% Needs Impv (5)
66. Does the long term vision show expectations for growth and skill building? CPRQ64; '17IQR#7b, '18IQR73	70% Yes (7) 20% Many (2) 10% No (1)
67. Does the ISP give adequate guidance to achieving the person's long-term vision? CPRQ65; '17IQR#7c, '18IQR74	60% Yes (6) 40% Many (4)
68. Is measurable data kept which verifies the consistent implementation of each of the action steps? '17IQR#12a, '18IQR75	40% Yes (4) 40% Many (4) 10% Needs Impv (1) 10% No (1)
69. Does the data kept identify what the person does so a determination regarding progress/lack of progress can be made? '17IQR#12b, '18IQR76	30% Yes (3) 30% Maybe (3) 30% Needs Impv (3) 10% No (1)
70. Is each action step in the ISP implemented at a frequency that enables the person to learn new skills? '17IQR#12c, '18IQR77	40% Yes (4) 30% Many (3) 10% Needs Impv (1) 20% No (2)
71. If the person is not successful in achieving actions steps, has the team tried to determine why, and change their approach if needed? '18IQR78	25% Yes (2) 25% Many (2) 38% Needs Impv (3) 13% No (1) (2 N/A)
72. If the person achieves action steps, does the team move to the next in the progression of steps or develops a new one? '17IQR#12c, '18IQR79	43% Yes (3) 14% Many (1)

Question	2019 (sample=33)
	29% Needs Impv (2) 14% No (1) (3 N/A)
73. Has the person made measurable progress on actions steps during this past year?'17IQR#13b, '18IQR80	10% Yes (1) 40% Many (4) 30% Needs Impv (3) 20% No (2)
74. Do the outcomes in the ISP include criteria by which the team can determine when the outcome(s) have been achieved? CPRQ67; '17IQR#7e, '18IQR81	50% Yes (5) 30% Many (3) 20% Needs Impv (2)
75. Are the ISP outcomes related to achieving the person's long-term vision? CPRQ68; '17IQR#7d, '18IQR82	90% Yes (9) 10% Many (1)
76. Do the ISP outcomes and related action plans and teaching strategies address the person's major needs as identified in the Personal Challenges and Obstacles That Need to be Addressed In Order to Achieve the Desired Outcomes section of the ISP/Action plans?" CPRQ69; '17IQR#7g, '18IQR83	80% Yes (8) 10% Many (1) 10% No (1)
77. Are the Teaching and Support Strategies sufficient to ensure consistent implementation of the services planned? CPRQ71; '17IQR#7i, '18IQR84	40% Yes (4) 20% Many (2) 40% Needs Impv (4)
78. Are the recommendations and/or objectives/strategies of ancillary providers integrated into the ISP? CPRQ72; '17IQR#7m, '18IQR85	20% Yes (2) 10% Many (1) 50% Needs Impv (5) 20% No (2)
79. Has the person made measurable progress in therapy this year? '17IQR#13a, '18IQR86	0% Yes 80% Many (8) 20% Needs Impv (2)
80. If needed, does the ISP contain a specific Medical Emergency Response Plan (MERP)? CPRQ73b '17IQR#20c, '18IQR87	70% Yes (7) 30% Many (3)
81. Does the ISP contain information regarding primary health (medical) care? CPRQ74, '18IQR88	70% Yes (7) 20% Many (2) 10% Needs Impv (1)

Question	2019 (sample=33)
81a. Does the ISP face sheet contain contact information for the PCP? CPRQ74a, '18IQR88a	80% Yes (8) 10% Many (1) 10% No (1)
81b. Is the Healthcare coordinator's name and contact information listed in the ISP? CPRQ74b, '18IQR88b	90% Yes (9) 10% Needs Impv (1)
82. Does the ISP reflect how the person will obtain prescribed medications? CPRQ76, '18IQR89	70% Yes (7) 30% Needs Impv (3)
83. Based on the evidence, is adequate transportation available for the person? *(Does the ISP reflect how the person will get to work/day activities, shopping, and social activities? CPRQ75, '18IQR90)*	100% Yes (10)
84. Does the ISP contain a list of adaptive equipment needed and who will provide it? CPRQ77; '17IQR#25a, '18IQR91	44% Yes (4) 56% Many (5) (1 N/A)
85. Overall, is the ISP adequate to meet the person's needs? CPRQ78; '17IQR#7, '18IQR92	0% Yes 100% Many (10)
86. Is the ISP being implemented? (If 85 is "3") CPRQ79 '17IQR#12, '18IQR93	(10 N/A)
87a. Is the ISP being implemented? (If 85 is "0", "1", or "2") CPRQ80a '17IQR#12, '18IQR94a	10% Yes (1) 80% Many (8) 10% Needs Impv (1)
87b. Are current services adequate to meet the person's needs? CPRQ80b '17IQR#11, '18IQR94b	60% Yes (6) 40% Many (4)
88. Was the direct service staff trained on the implementation of this person's ISP? CPRQ81, '18IQR95	30% Yes (3) 60% Many (6) 10% Needs Impv (1)
89. Were the direct service staff able to describe their responsibilities in providing daily care/supports to the person? CPRQ82, '18IQR96	40% Yes (4) 60% Many (6)
EXPECTATIONS FOR GROWTH, QUALITY OF LIFE, SATISFACTION	
90. Based on all of the evidence, has the person achieved progress in the past year? CPRQ84; '17IQR#13, '18IQR98	0% Yes 50% Many (5) 50% Needs Impv (5)

Question	2019 (sample=33)
91. Overall, does the IDT have an appropriate expectation of growth for this person? CPRQ85; '17IQR#8d, '18IQR99	80% Yes (8) 10% Many (1) 10% Needs Impv (1)
92. Was the person provided the assistance and support needed to participate meaningfully in the planning process? CPRQ86; '17IQR#1b, '18IQR100	90% Yes (9) 10% Many (1)
93. Is the person offered a range of opportunities for participation in each life area? CPRQ87, '18IQR101	90% Yes (9) 10% Many (1)
94. Does the person have the opportunity to make informed choices? CPRQ88; '17IQR#30, '18IQR102	100% Yes (7) (3 CND)
94a. About where and with whom to live? CPRQ89; '17IQR#23c, '18IQR102a	100% Yes (6) (4 CND)
94b. About where and with whom to work/spend his/her day? CPRQ90; '17IQR#23d, '18IQR102b	100% Yes (8) (2 CND)
94c. About where and with whom to socialize/spend leisure time? CPRQ91, '18IQR102c	100% Yes (8) (2 CND)
95. Does the evidence support that providers do not prevent the person from pursuing relationships? CPRQ92; '17IQR#31f, '18IQR103 *(and are respecting the rights of this person)*	80% Yes (8) 20% Many (2)
96. Overall, were all team members interviewed trained or knowledgeable on how to report abuse, neglect and exploitation? CPR 93*; '17IQR#35a, '18IQR105	100% Yes (10)
97. Does this person and/or guardian have access to the complaint processes/procedures? CPRQ94, '18IQR106	80% Yes (8) 10% Many (1) 10% Needs Impv (1)
98. Does the individual have restrictions that should be reviewed by a Human Rights Committee? '17IQR#34h, '18IQR107	60% Yes (6) 40% No (4)
99. 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, '18IQR108	33% Yes (2) 33% Many (2) 17% Needs Impv (1) 17% No (1) (4 NA)
100. 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, '18IQR109	33% Yes (2) 33% Many (2)

Question	2019 (sample=33)
	17% Needs Impv (1) 17% No (1) (4 NA)
101. Is the person protected from abuse, neglect and exploitation? '17IQR#35, '18IQR110	80% Yes (8) 20% Many (2)
102. Have all incidents of suspected abuse, neglect and exploitation been reported and investigated? '17IQR#35b, '18IQR111	100% Yes (7) (3 N/A)
103. Is the individual safe? '17IQR#24, '18IQR112	90% Yes (9) 10% Many (1)
104. What is the level of participation of the legal guardian in this person's life and service planning? CPRQ 97; '17IQR#15a, '18IQR113	40% Active (4) 50% Moderate (5) 10% Limited (1)
105. If the person is retired, does he/she have opportunities to engage in activities of interest during the day? CPRQ 100; '17IQR#29b, '18IQR114	100% Yes (3) (7 N/A)
106. Does the person have daily choices/appropriate autonomy over his/her life? CPRQ101 '17IQR#30, '18IQR115	100% Yes (10)
107. Have the person's cultural preferences been accommodated? CPRQ102; '17IQR#31e, '18IQR116	100% Yes (10)
108. Is the person treated with dignity and respect? CPRQ103; '17IQR#34c, '18IQR117	30% Yes (3) 50% Many (5) 20% Needs Impv (2)
109. Does the person have food and drink available according to their specific nutritional needs and recommendations? CPRQ108; '17IQR#23e, '18IQR118	100% Yes (10)
110. Does the person have sufficient personal money? CPRQ110 '17IQR#34f, '18IQR119	90% Yes (9) 10% Many (1)
111. Does the person get along with their day program/employment provider staff? CPRQ111, '18IQR120	88% Yes (7) 12% No (1) (2 CND)
112. Does the person get along with their residential provider staff? CPRQ112, '18IQR121	100% Yes (10)

Question	2019 (sample=33)
TEAM PROCESS	
113. Are the individual members of the IDT following up on their responsibilities? CPRQ 114; '17IQR#10, '18IQR122	10% Yes (1) 70% Many (7) 20% Need Impv (2)
114. 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, '18IQR123	100% Yes (2) (8 N/A)
115. 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, '18IQR124	50% Yes (5) 50% Many (5)
116. Is there adequate communication among team members between meetings to ensure the person's program can be/is being implemented? CPRQ117, '18IQR125	70% Yes (7) 20% Many (2) 10% Needs Impv (1)
117. Do you recommend Dispute Resolution for this IDT? CPRQ118, '18IQR126	0% Yes 100% No (10)
118. Is there evidence or documentation of physical regression in the last year? CPRQ119 '17IQR#17d, '18IQR127	20% Yes (2) 80% No (8)
119. Is there evidence or documentation of behavioral or functional regression in the last year? CPRQ120; '17IQR14c, '18IQR128	10% Yes (1) 90% No (9)
120. If #118 OR #119 is scored "Yes", is the IDT adequately addressing the regression? CPRQ121; '18IQR129	50% Yes (1) 50% No (1) (8 N/A)
121. Has the person changed residential/day services in the last year? CPRQ122, '18IQR130	0% Yes 100% No (10)
122. If #121 is Yes, was the change Planned by the IDT? CPRQ122a, '18IQR131	(10 N/A)
123. If #121 is Yes, did the change meet the person's needs and/or preferences? CPRQ122b, '18IQR132	(10 N/A)
124. Overall, has the IDT process been adequate for assessing, planning, implementing and monitoring of services for this person? CPRQ123; '17IQR#7n, '18IQR133	0% Yes 90% Many (9) 10% Needs Impv (1)

Question	2019 (sample=33)
SUPPORTED EMPLOYMENT	
125. Does (Name) have a current Person-Centered Assessment? '18IQR134	40% Yes (4) 60% Many (6)
126. Did this assessment address vocational interests, abilities and needs? CPRQ126; '17IQR#26a, '18IQR135	63% Yes (5) 25% Many (2) 13% No (1) (2 N/A)
127. Did the individual participate personally in the Person Centered Assessment? '18IQR136	80% Yes (8) 20% No (2)
128. Did the Guardian participate in the Person Centered Assessment? '18IQR137	100% Yes (10)
129. Is the individual engaged in the Informed Choice Project? '18IQR138	20% Yes (2) 80% No (8)
130. Has the individual been offered the opportunity to participate in work or job exploration including volunteer work and/or trial work opportunities? '17IQR#26e, '18IQR139	71% Yes (5) 29% No (2) (3 N/A)
131. If #130 is Yes, are these new experiences clearly documented in the ISP Work, Education and/or Volunteer History section? '18IQR140	80% Yes (4) 20% No (1) (5 N/A)
132. If #131 is No, is the individual trying new discovery experiences in the community to determine interests, abilities, skills and needs? '18IQR141	33% Yes (1) 33% Needs Impv (1) 33% No (1) (7 N/A)
133. 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? '18IQR142	71% Yes (5) 14% Many (1) 14% No (1) (3 N/A)
134. Has the individual received information regarding the range of employment options available to him/her? '17IQR#26c, '18IQR143	86% Yes (6) 14% No (1) (3 N/A)

Question	2019 (sample=33)
135. Has the Guardian received information regarding the range of employment options available for the individual? '18IQR144	86% Yes (6) 14% No (1) (3 N/A)
136. 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, '18IQR145	83% Yes (5) 17% No (1) (4 N/A)
137. 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...? '18IQR146	67% Yes (4) 33% No (2) (4 N/A)
138. Has the individual participated in work or volunteer activities during the past year? '18IQR147	43% Yes (3) 57% No (4) (3 N/A)
139. Has the individual identified what type of work or volunteer activities he/she would like to do? '18IQR148	43% Yes (3) 14% Many (1) 43% No (3) (3 N/A)
140. Does the Guardian support him/her working? '18IQR149	25% Yes (2) 75% No (6) (2 N/A)
142. Is the individual engaged in Supported Employment? CPRQ129, '18IQR151	14% Yes (1) 86% No (6) (3 N/A)
144. Does the person have a Career Development Plan? CPRQ128 17IQR#26e, '18IQR153	100% Yes (1) (9 N/A)
BEHAVIOR	
145. Is the person considered by the IDT to need behavior services now? CPRQ131; '17IQR#5d, '18IQR154	80% Yes (8) 20% No (2)
146. Does the person need behavior services now? CPRQ132 '17IQR#11e, '18IQR155	80% Yes (8) 20% No (2)
147. Have behavioral assessments been completed? CPRQ133, '18IQR156	50% Yes (4)

Question	2019 (sample=33)
	50% Many (4) (2 N/A)
148. Does the person have a positive behavior support plan developed out of the behavior assessments that meets the person's needs? CPRQ134 '17IQR#5g, '18IQR157	88% Yes (7) 13% Needs Impv (1) (2 N/A)
149. Has the staff been trained on the Positive Behavior Support Plan? CPRQ135; '17IQR#10d, '18IQR158	88% Yes (7) 13% Needs Impv (1) (2 N/A)
150. If needed, does the person have a Behavior Crisis Intervention Plan that meets the person's needs? CPRQ 73a; '17IQR#5h, '18IQR159	60% Yes (3) 20% Needs Impv (1) 20% No (1) (5 N/A)
151. Does the person receive behavioral services consistent with his/her needs? CPRQ 136 '17IQR#5i, '18IQR160	75% Yes (6) 25% Many (2) (2 N/A)
152. Are behavior support services integrated into the ISP? CPRQ 137; '17IQR#11d, '18IQR161	50% Yes (4) 38% Many (3) 13% Needs Impv (1) (2 N/A)
ADAPTIVE EQUIPMENT / AUGMENTATIVE COMMUNICATION	
153. Has the person received all adaptive equipment needed? CPRQ138; '17IQR#25b, '18IQR162	89% Yes (8) 11% Many (1) (1 N/A)
154. Has the person received all assistive technology needed? CPRQ139; '17IQR#25c, '18IQR163	63% Yes (5) 28% Many (3) (2 N/A)
155. Do direct care staff know how to appropriately help the person use his/her equipment? '17IQR#25f, '18IQR164	78% Yes (7) 22% Many (2) (1 N/A)

Question	2019 (sample=33)
156. Is the person's equipment and technology in good repair?'17IQR#25d, '18IQR165	89% Yes (8) 11% Many (1) (1 N/A)
157. Is the person's equipment/technology available in all appropriate environments? '17IQR#25e, '18IQR166	67% Yes (6) 33% Many (3) (1 N/A)
158. Has the person received all communication assessments and services? CPRQ140 ; '17IQR#10b, '18IQR167	56% Yes (5) 44% Many (4) (1 N/A)
INDIVIDUAL SERVICE PLANNING	
159. 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, '18IQR168	100% Yes (10)
160. Does the person have an ISP that contains a complete Vision Section that is based on a long-term view? CPRQ142 '17IQR#7a, '18IQR169	50% Yes (5) 40% Many (4) 10% Needs Impv (1)
161. Does the person receive services and supports recommended in the ISP? CPRQ143; '17IQR#11a, '18IQR170	90% Yes (9) 10% Many (1)
162. Does the person have adequate access to and use of generic services and natural supports? CPRQ144; '17IQR#33f, '18IQR171	80% Yes (8) 20% Many (2)
163. Is the person integrated into the community? CPRQ145; '17IQR#29g, '18IQR172	50% Yes (5) 50% Many (5)
164. Is the total program of the level of intensity adequate to meet this person's needs? CPRQ147; '17IQR#36, '18IQR174	10% Yes (1) 90% Many (9)