



Jackson Class Member Demographics – Metro Region

As of June 3, 2021, when the FY22 Metro samples were pulled, there were 133 Active Jackson Class Members in the Metro Region. Details regarding individuals are provided in the tables below. There were 10 class members reviewed in the Metro region for the first review of the FY2022 IQR.

AGE	
30-39	3
40-49	12
50-59	47
60-69	48
70-79	21
80+	2
AVERAGE AGE	61

ETHNICITY	
Black/African American	8
Caucasian	51
Hispanic	60
Native American	14
Other	0

GENDER	
Female	55
Male	78
Other	0

COMMUNITY INCLUSION SERVICE*	
CCS (I or G)	126
CIE	15
ICF/IDD	0
Mi Via	3
N/A	2

LIVING CARE ARRANGEMENT SERVICE	
Family Living	23
Supported Living	106
CIHS	0
ICF/IDD	0
Mi Via	3
N/A	1

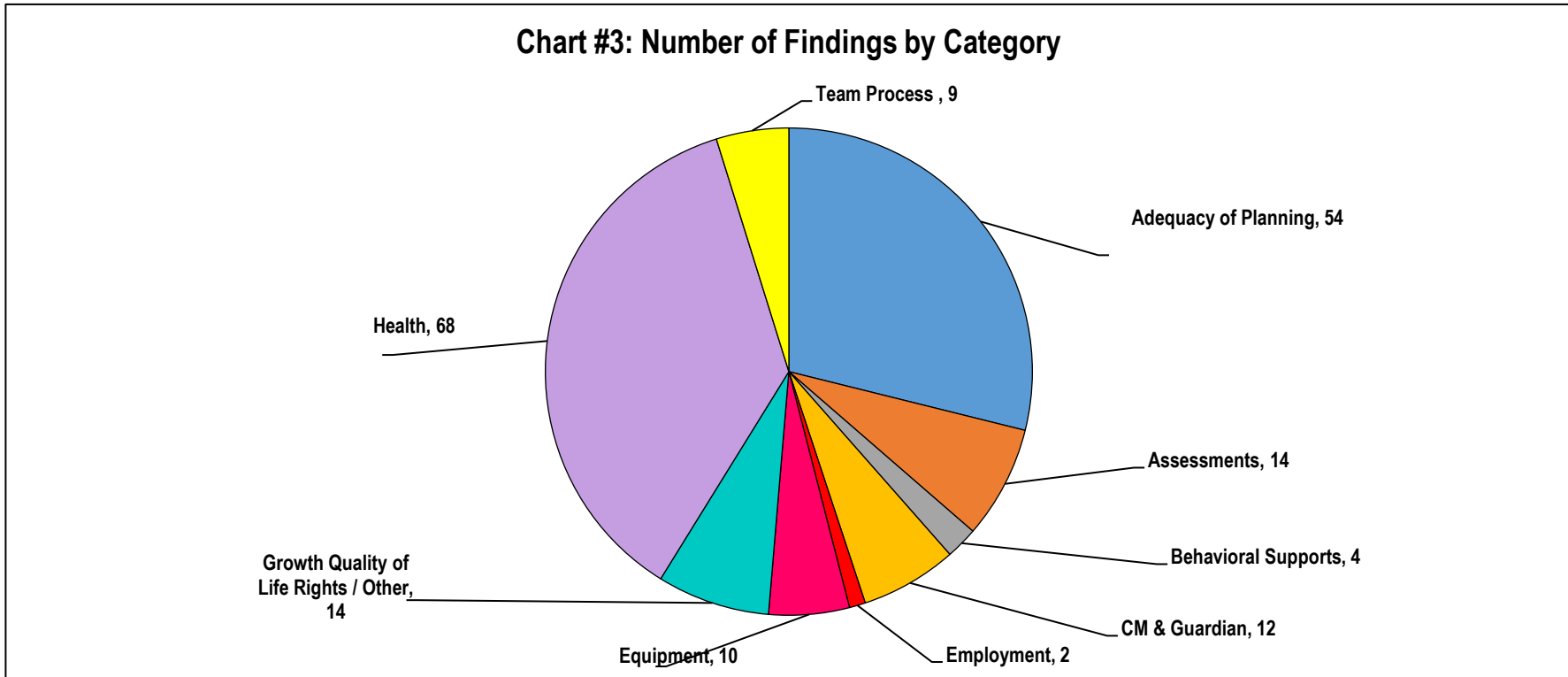
*13 people have more than one service

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

Case Management	A New Vision (14)	A Step Above (24)	Amigo (8)	Cariño (15)	NMQCM (12)	Peak (13)	Unidas (38)
	Unique Opportunities (5)	PCCS (1)					Mi Via (3)
Residential	A Better Way (1)	Adelante (30)	ADID Care (1)	Advantage Communications (1)	Alegria (2)	Alianza (1)	Alta Mira (1)
	ARCA (12)	At Home Advocacy (3)	Bright Horizons (8)	Community Options (1)	Cornucopia (2)	Dungarvin (9)	Expressions of Life (5)
	Expressions Unlimited (1)	La Vida Felicidad (1)	LeL (1)	Life Mission (1)	LLCP (27)	Mandy's Farm (1)	Maxcare (2)
	Onyx (5)	Optihealth (3)	Su Vida (1)	The New Beginnings (8)	TLC (1)	N/A (1)	Mi Via (3)
Community Inclusion <i>*Note some JCMs have more than one CI provider</i>	A Better Way (4)	Active Solutions (2)	Adelante (39)	ADID Care (1)	Advantage Communications (2)	Advocacy Partners (1)	Alianza (1)
	Alta Mira (1)	ARCA (3)	Bright Horizons (6)	CFC (9)	Community Options (1)	Cornucopia (3)	Dungarvin (6)
	Expressions Unlimited (2)	La Vida Felicidad (1)	LifeRoots (4)	LLCP (30)	Mandy's Farm (2)	Maxcare (2)	Mi Via (3)
	NONE (3)	Onyx (4)	OptiHealth (3)	Share Your Care (3)	Su Vida (1)	The New Beginnings (5)	Intentionally blank

B. Most Frequently Identified Findings by Category

Metro Region Round 1 had a total of 188 Findings. The table below shows into what categories those findings fall.



C. Most Frequently Repeated Findings by Category

IQR Findings include the identification of good and exemplary as well as areas in need of improvement. Findings are developed by the Surveyor, reviewed by a Case Judge, the IQR Supervisor, Regional Office and State DDS and DHI Staff to ensure accuracy 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 to whom the finding is relevant.

Of the 188 Findings in the Metro 1 Regional Review, there were 80 (43%) identified as “repeat findings”. Repeat findings are those which have been identified by the IQR within the last ten years. The categories where ‘repeat findings’ are most frequently identified are in the areas of Adequacy of Planning and Health. The charts below summarize, by agency, the number of repeat findings which were identified by topic area.

Chart #4: Repeat Findings by Area and Residential Provider										
AREA	ADEQUACY OF PLANNING	ASSESSMENTS	BEHAVIORAL SUPPORTS	CM & GUARDIAN	EMPLOYMENT	EQUIPMENT	GROWTH QUALITY OF LIFE RIGHTS/OTHER	HEALTH	TEAM PROCESS	TOTAL
PROVIDER										
Adelante (4)	10	1	0	3	1	3	0	6	0	24
Bright Horizons (2)	5	2	0	1	1	1	1	4	1	16
Dungarvin (1)	3	2	1	1	0	1	0	4	1	13
LLCP (1)	3	1	0	1	0	0	0	2	0	7
Maxcare (1)	4	1	0	0	0	2	1	0	1	9
Onyx (1)	4	1	0	0	0	1	0	5	0	11
TOTAL	29	8	1	6	2	8	2	21	3	80

Chart #5: Repeat Findings by Area and Case Management Agency										
AREA	ADEQUACY OF PLANNING	ASSESSMENTS	BEHAVIORAL SUPPORTS	CM & GUARDIAN	EMPLOYMENT	EQUIPMENT	GROWTH QUALITY OF LIFE RIGHTS/OTHER	HEALTH	TEAM PROCESS	TOTAL
PROVIDER										
A New Vision	1	0	0	0	0	1	0	0	0	2
A Step Above	9	2	0	1	0	2	0	7	1	22
Amigo	4	0	0	1	0	0	0	2	0	7
NMQCM	0	1	0	0	1	0	1	2	0	5
PCCS	3	2	1	1	0	1	0	4	1	13
Peak	1	0	0	1	0	1	0	1	0	4
Unidas	11	3	0	2	1	3	1	5	1	27
TOTAL	29	8	1	6	2	8	2	21	3	80

D. Immediate and Special Findings

There were 10 Class Members reviewed in the FY21 Metro 1 Region Review. 3 individuals (30% of the sample) were found to have Findings needing Immediate attention. 4 individuals (40% of the sample) were found to have Findings needing Special attention. 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.

Chart #6: Immediate/Special Identified Individual Issues – FY2022 IQR Metro Region Round 1

Immediate/Special Identified Individual Issues – FY2022 Metro #1 IQR							
Reg	CM	Res	Day	Immd	Spec	ANE	Issue
Health							
Metro 1	A Step Above	Bright Horizons	Bright Horizons	X			Based on record review, the following discrepancies were noted: a) Per CARMP 8/25/20: 1500-1600 cal per day. Protein: 30-38 g/day, 1081 mls fluid EDWR: 69-85# b) Nutrition 6/14/21: 1600-1700 kcals/day. Protein 33-44 g/day Fluid 1700 ml 55-57 oz c) Echat 8/20/20 (rev.1/14/21): stated 35-40 oz (1035 – 1183 ml) fluid, 1600-1700 cal per day d) Low BMI HCP: recommended 1600-1700 cal w/ 40 g protein Plans not being consistent was a repeat finding from IQR 2017 Immediate Findings #1 and #2.
Metro 1	A Step Above	Bright Horizons	Bright Horizons	X			Based on record review: • Low BMI HCP stated track weights weekly and notify RD of 3# weight loss or gain. • Nutrition 6/14/21 stated track weights weekly and notify RD of gains/losses >5%. The following was noted: a. JCM's weight has been tracked weekly except for the following months: i. January 2021 ii. December 2020 iii. November 2020 iv. October 2020 b. Per weight tracking documentation, DR had a greater than 3# change in weight on the following days. There was no indication that the RD was contacted: i. 4/6/21 ii. 3/2/21 iii. 2/19/21 iv. 1/29/21 v. 10/8/20 vi. 9/14/20
Metro 1	A Step Above	Onyx	Onyx	X			Based on record review and interviews, there is confusion about JCM's DNR status: a. There is a “My Choices” document dated 7/31/2019 indicating he wants DNR status b. Guardian indicated that it may need to be revisited c. CM indicated that there might be something in place, but she's not sure it's needed. d. 21-22 ISP IST page indicates JCM does not have a DNR. e. All MERP's states JCM is “FULL CODE”

Immediate/Special Identified Individual Issues – FY2022 Metro #1 IQR							
Reg	CM	Res	Day	Immd	Spec	ANE	Issue
							f. Health Passport that indicates CH does not have Advanced Directives. g. E-Chat indicates "FULL CODE"
Metro 1	Peak	Adelante	Adelante	X			Based on interviews and document review, there is confusion about end-of-life decision making for JCM: a) There is a document in the file titled "My Advance Directive" signed and dated 5/16/2018 that was found under Advanced Directives in Therap. b) Per Corporate Guardian during interview and in writing, there is a "My 5 Wishes" document in place, but the guardian agency does not share the end-of-life planning documents with the DD Waiver team. c) The Guardian also reported that JCM's team was aware of the end-of-life planning documents, however Adelante staff (RN, Res. DSP, CCS DSP) reported that JCM has no advanced directives or any end-of-life directions.
Metro 1	NMQCM	Bright Horizons	Bright Horizons		X		Based on record review, the following is noted about the 4/29/21 CARMP and/or documents with conflicting information than the CARMP: a. Indicates diet texture as pureed such as applesauce or pudding consistency. 6/28/21 EDF indicates meat is ground with lubricant, rest is mechanically soft chopped into dime sized b. 7/20/21 seating clinic for pressure mapping of current w/c seating clinic determined 30 degree or more of tilt was best pressure and head/neck position but CARMP not yet updated c. 7/15/21 dental appt and recommendations about oral care but CARMP not updated yet d. 2/2/21 Monthly Nurse visit and wound care indicates: New diet order to eat q2hr and then leave head of bed elevated 45 degrees for 45 minutes to prevent aspiration not incorporated into CARMP and new order was not found during record review e. CARMP 4/29/21 Nutrition: caloric intake contradicts itself within the CARMP. i. Diet order: 2200-2500 calories per day with 3 meals, 1 snack, and 2 Boost PLUS supplements. Meal Plan @ 2450 calories. 3 meals per day each with 2 main = 2 sides 2 BOOST Plus per day, and 1 snack per day. 3 servings of lactose free lactaid milk per day if tolerating it. Increase fiber. ii. Caloric needs: 1700-2000 calories per day CARMP inaccuracies is a repeat Special Finding from the 2017 IQR.
Metro 1	NMQCM	Bright Horizons	Bright Horizons		X		Based on observation of DSP assisting with intake during observation at the home, the following actions conflict with the 4/29/21 CARMP: a. JCM was not offered her cup to hold herself until the meal was nearly finished. The DSP did provide complete assistance to give her drinks during the meal, but CARMP says to have JCM use her right hand and assist her as needed. b. The DSP stated JCM must remain in upright position following meal for 45 minutes. CARMP indicates at least one hour after a meal, snack or meds. c. JCM's body position during the meal was not per the CARMP. She was facing forward with both legs and body in center of bed. CARMP says to have her seated in her bed to one side and off sacral wound. CARMP implementation inconsistencies is a repeat Special Finding from the 2017 IQR. JCM not using her adaptive mealtime equipment is a repeat Finding from the 2014 CPR.
Metro 1	Unidas	LLCP	LLCP		X		Based on document review and interviews, there is unclear and conflicting information regarding the Nayzilam 5mg nasal spray for PRN use due to seizures. a. MERP Seizures 6/10/21 does not have clear step-by-step instructions; it is unclear when staff are to call nurse, call 911, or use PRN Nayzilam. b. Neither SL or CCS DSP could clearly explain the use of Nayzilam 5mg PRN spray for seizure use. c. During Nurse interview, nurse stated regarding use of Nayzilam 5mg PRN as per MERP 6/10/21 "...I'm looking at that now and they wouldn't call 911 for 3min or more, it's after the spray and then if it continues, basically they wouldn't wait, they would wait so usually more than one staff is there and one

Immediate/Special Identified Individual Issues – FY2022 Metro #1 IQR							
Reg	CM	Res	Day	Immd	Spec	ANE	Issue
							would call and get the meds and one would keep him safe and time him and if he does not respond to the med, then call 911".
Metro 1	Unidas	Maxcare	Maxcare		X		Based on review of the Constipation Health Care Plan 1/5/2021 and response from the ADRF seen in the SComm of 8/17/2021, no tracking of bowel movements is occurring for JCM who has a diagnosis of Constipation. (e-CHAT 3/9/2021) The HCP states: "Recommended Tracking: Bowel Movements via health tracking in therap." "Bristol Stool Chart to be used for tracking purposes." "If no BM after 3 days notify nurse and follow BM protocol..."
Adequacy of Planning							
Metro 1	A Step Above	Onyx	Onyx		X		Based on document review, the SLP Discharge Report (due to business closure) 4/6/21: "It is recommended that JCM continue to receive SLP services in the areas of aspiration risk management, communication support language stimulation." JCM did not receive SLP support from April 2021 until July 2021. <ul style="list-style-type: none"> • SLP is listed on the Face Sheet of the 21/22 ISP as Juntos Therapy Services, Carlos Bustamante, however this is not indicated on the budget reviewed. • Current SLP evaluations were not provided for review.

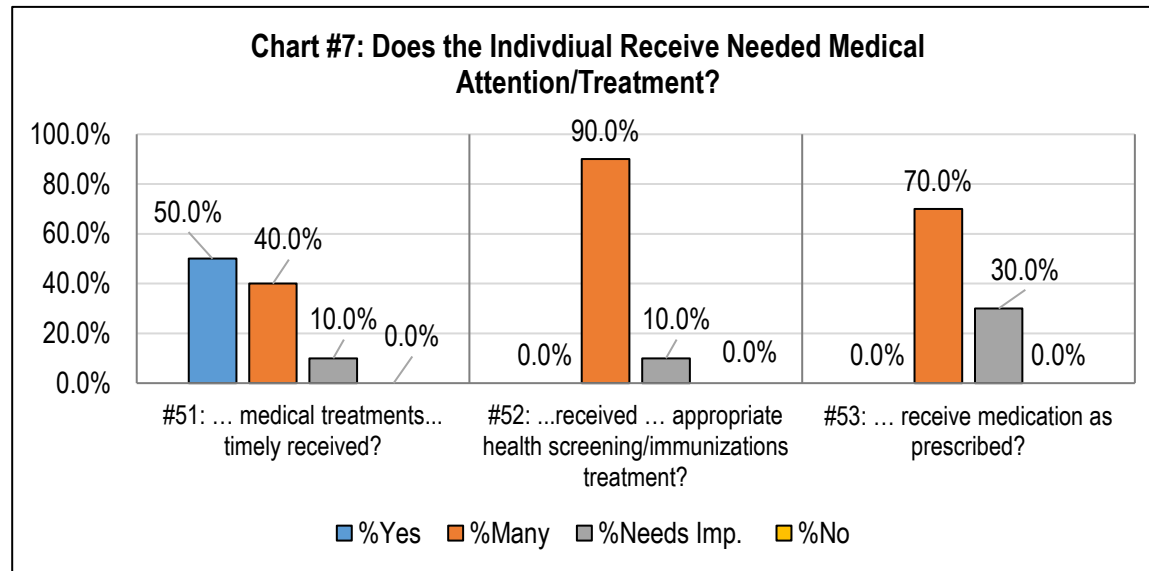
E. Health, Assessments and Overall Wellness

There is a series of scored questions in the IQR protocol that specifically relate to the medical attention received by 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?

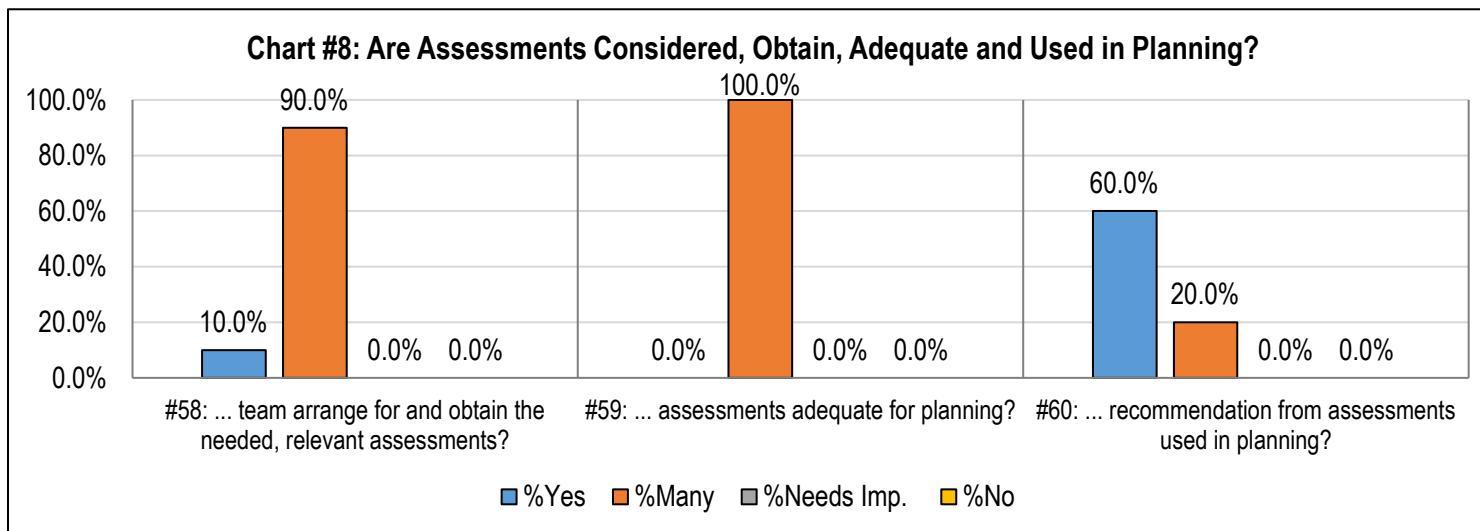


Ensuring individuals have the medical treatment they require includes scheduling and obtaining needed assessments and using information from those assessments to influence treatment and inform future planning. The IQR also evaluates the assessments needed by the individual and whether or not those assessments 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?



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, IQR Supervisor Regional and State DDSD and DHI staff prior to becoming final. 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:

1. The Medication Administration Record (MAR), the Medication label and the Doctor's orders do not match (75 issues);
2. Recommended screenings/vaccination not completed or discussed (36 issues).

Dungarvin and Onyx had the most issues on average.

Chart #9: Type of Issues identified by Residential Agency

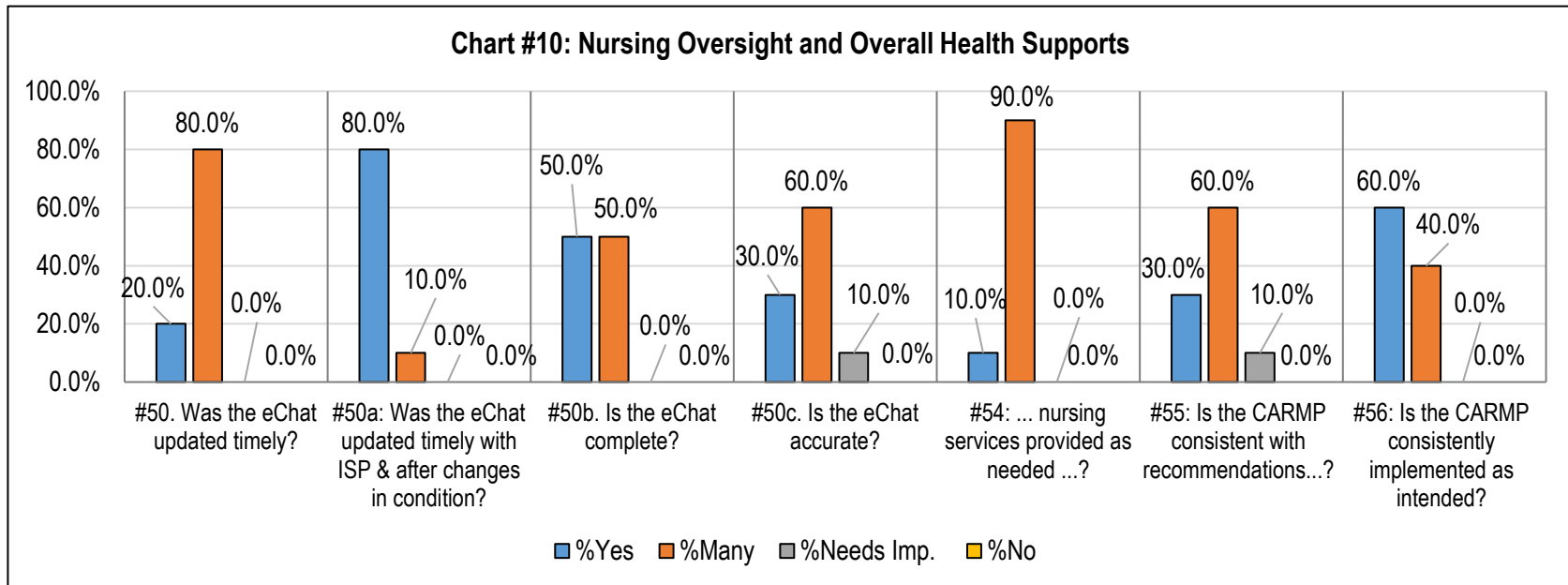
PROVIDER (# IN SAMPLE)	Adelante (4)	Bright Horizons (2)	Dungarvin (1)	LLCP (1)	Maxcare (1)	Onyx (1)	TOTAL
ISSUE							
APPOINTMENTS							
Audiology: not completed	1	0	0	0	0	0	1
Dental: follow up not completed / not timely	2	1	1	0	1	0	5
Neurology: follow up not completed / not timely	0	0	1	0	0	1	2
Psych: follow up not completed/not timely	0	0	0	0	0	1	1
Specialists: follow up not completed / not timely	1	3	2	0	0	3	9
Vision: not completed / not current	1	1	0	0	0	1	3
MAR/MEDICATIONS							
MAR/Medication/Dr. Orders do not match (med strength, delivery method, purpose of med)	21	19	19	2	4	10	75
MAR needs updating	0	0	0	0	0	1	1
Meds not stored properly	1	0	0	0	0	0	1
Screenings							
No evidence of Hep B/HepC screening or team discussion thereof	2	2	1	1	0	1	7

Chart #9: Type of Issues identified by Residential Agency

PROVIDER (# IN SAMPLE)	Adelante (4)	Bright Horizons (2)	Dungarvin (1)	LLCP (1)	Maxcare (1)	Onyx (1)	TOTAL
No evidence of shingles vaccine or team discussion thereof	2	1	1	0	0	1	5
No evidence of HIV screening or team discussion thereof	2	1	0	1	0	1	5
No evidence of TD/Tdap immunizations or team discussion thereof	1	0	1	0	0	0	2
No evidence of colorectal screening or team discussion thereof	1	1	1	0	0	0	3
No evidence of flu or pneumonia vaccine or team discussion thereof	0	3	2	0	0	0	5
No evidence of mammogram or team discussion thereof	0	1	0	0	0	0	1
No evidence of cervical cancer screening or team discussion thereof	0	1	0	0	0	0	1
No evidence of AIMS or other TD screening	0	0	0	0	0	1	1
No evidence of test / lab screening or alt. option discussed.	0	0	1	1	0	3	5
No evidence of recommended bone density scan	1	0	0	0	0	0	1
Other							
DNR: confusion about status	1	0	0	0	0	1	2
Totals	37	34	30	5	5	25	136
Average	9.25	17	30	5	5	25	13.6

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 #50a: 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?



Oversight provided by nurses is a critical safeguard for Jackson Class Members, direct support personnel and their supervisors. The table below provides specific details, by Residential provider, of nursing related issues identified during the FY2022 Metro 1 IQR. Again, this represents the number of issues found; not the number of findings.

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

1. Inconsistencies around diagnoses/conditions (30 issues)
2. Nursing reports not adequate (15 issues)
3. CARMP inaccurate / incomplete / not current (14 issues)

Bright Horizons and Onyx had the most issues on average.

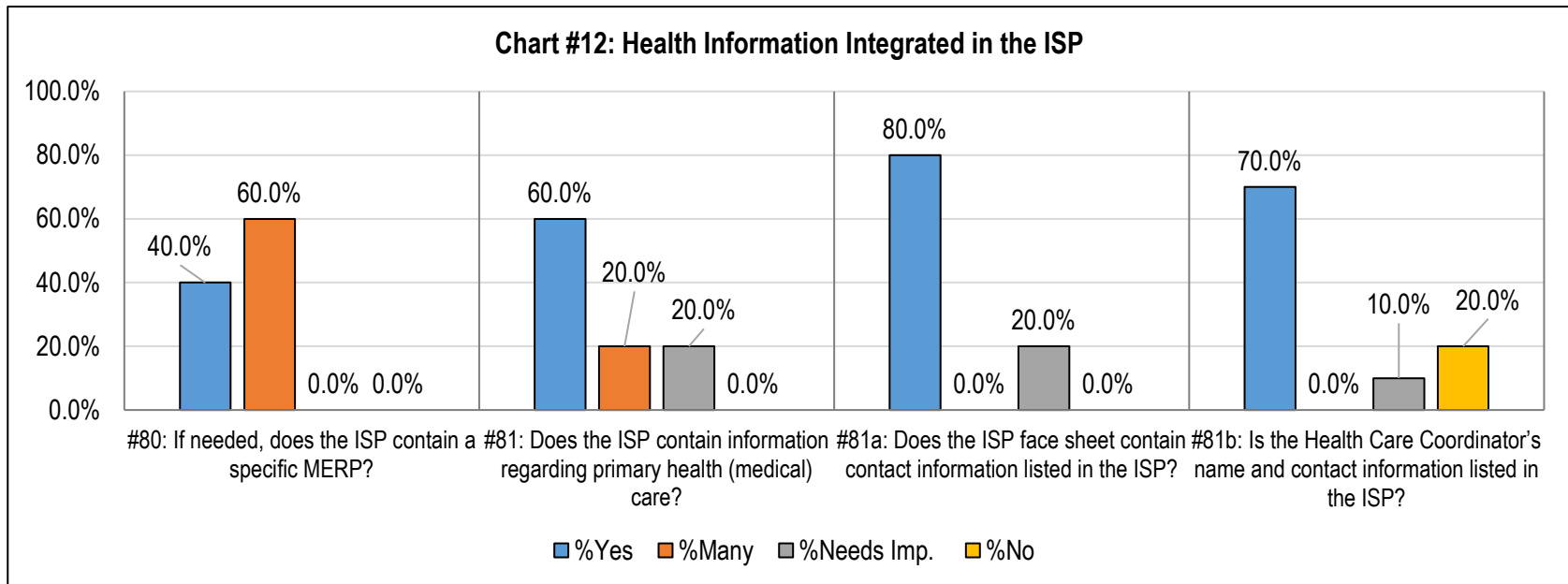
Chart #11: Type of Nursing Related Issues Identified by Residential Provider							
PROVIDER (# IN SAMPLE)	Adelante (4)	Bright Horizons (2)	Dungarvin (1)	LLCP (1)	Maxcare (1)	Onyx (1)	TOTAL
ISSUE							
Nursing Assessments							
CARMP inaccurate/incomplete/not current	2	6	0	1	0	5	14
CARMP not timely	1	0	0	0	0	0	1
CARMP not implemented properly	0	1	0	0	0	0	1
CARMP conflicts with dental recommendations	1	0	0	0	0	0	1
e-CHAT incorrect/inconsistent /not updated timely	2	0	0	0	1	4	7
e-CHAT inconsistencies with diagnoses/conditions in other documents	3	23	0	3	0	1	30
HCPs inaccurate/incomplete	3	1	0	1	0	0	5
HCPs need review/updating/more detail	1	0	0	0	0	0	1
MAAT: incorrect/inconsistent information	1	0	0	0	0	0	1
MERPs inaccurate/incomplete	4	1	0	1	0	0	6
MERPs need review, updating, more detail	0	0	0	1	0	0	1
Inconsistency between HCP/ CARMP/MERP/e-CHAT/MARS/Plans	1	4	5	0	0	3	13
Nursing Documentation							
Nursing reports not timely completed	2	0	0	1	0	0	3
Nursing reports not provided for review	0	1	0	1	0	0	2

Chart #11: Type of Nursing Related Issues Identified by Residential Provider							
PROVIDER (# IN SAMPLE)	Adelante (4)	Bright Horizons (2)	Dungarvin (1)	LLCP (1)	Maxcare (1)	Onyx (1)	TOTAL
Nursing reports not accurate/missing information/inadequate	8	0	3	0	0	4	15
No evidence of nursing face-to-face visits as required	1	1	2	0	0	0	4
Nurse not familiar with health-related needs/recommendations	1	0	0	0	0	0	1
Staff needs more training on health-related needs	1	0	0	0	0	0	1
Nurse not monitoring as required, e.g., tracking, plans, meds, appointments, etc.	0	1	0	0	0	0	1
Totals	32	39	10	9	1	17	108
Average	8	19.5	10	9	1	17	10.8

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:

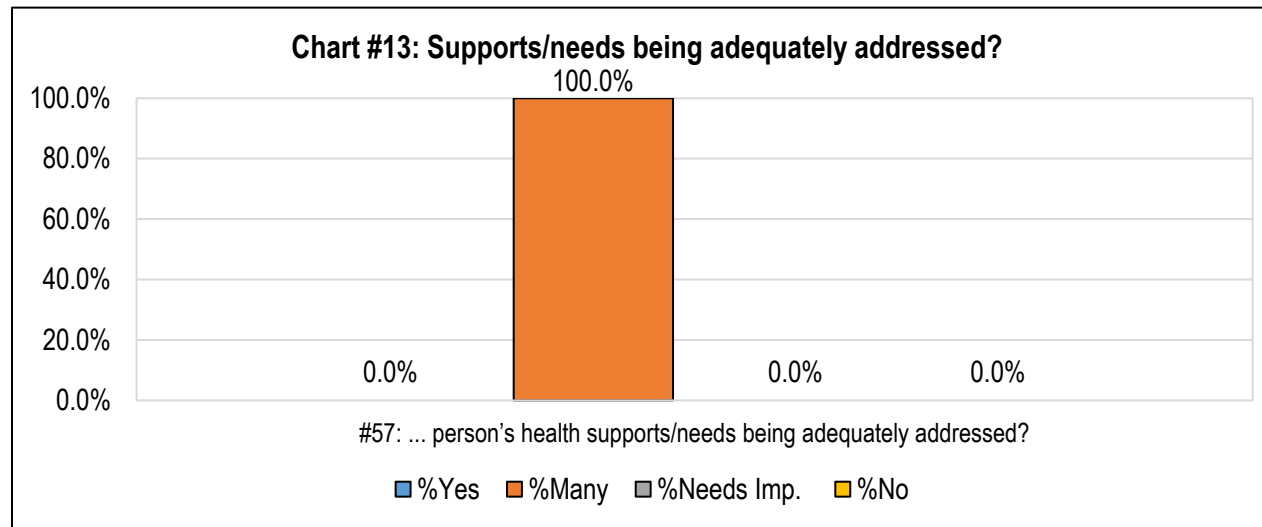
- Question #80: If needed, does the ISP contain a specific MERP?
- Question #81: Does the ISP contain information regarding primary health (medical) care?
- Question #81a: Does the ISP face sheet contain contact information listed in the ISP?
- Question #81b: Is the Health Care Coordinator's name and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

Overall, 80% of the ISP's in the sample did contain correct contact information on the face sheet, 60% of the ISP's in the sample contained information regarding primary health care and 70% had the individuals Health Care Coordinator's name and contact information listed in the ISP.



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 scored in Metro Round 1 Review, overall, zero individuals had their health supports/needs adequately addressed (0% Yes). There were 10 people who had many of their needs addressed (100%).



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 tracking, ancillary support services, 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.

Dungarvin and Bright Horizons had the most issues on average.

Chart #14: Issues Found Which Affect the Adequacy of Health Care Provision, by Residential Provider							
PROVIDER (# IN SAMPLE)	Adelante (4)	Bright Horizons (2)	Dungarvin (1)	LLCP (1)	Maxcare (1)	Onyx (1)	TOTAL
ISSUE							
Healthcare Tracking							
Fluid Input/Urine Output/Bowel Movement Tracking issues	0	1	2	0	1	1	5
Seizure Tracking issues	0	0	0	1	0	0	1
Weight Tracking issues	0	4	0	1	0	0	5
Nutrition							
Nutrition: Inadequate/inconsistent	0	4	0	0	0	0	4
Nutrition: Not timely	0	2	0	0	0	0	2
Physical Therapy							
PT Report/Eval not available/timely for planning/use	0	1	1	0	1	0	3
PT Report/Eval not adequate	0	2	2	0	1	0	5
PT WDSI not updated	0	0	2	0	0	0	2
PT Report/Eval/WDSI not provided for review	0	0	1	0	0	0	1
Occupational Therapy							
OT Report/Eval not adequate	3	2	2	2	0	0	9
OT WDSI not timely	0	3	1	0	0	0	4
OT Report/Eval/WDSI not provided for review	0	0	2	0	0	0	2
Speech Language Pathology							
SLP Report/Eval not adequate	2	2	1	0	0	0	5
SLP Report/Eval inaccurate	2	0	0	0	1	0	3
SLP WDSI not specific/timely	0	2	0	0	1	0	3
Behavior Support Consultation							
Behavior Report/Eval not adequate	0	0	0	3	0	0	3
Behavior Report inaccurate/inadequate	0	0	5	0	0	3	8
Totals	7	23	19	7	5	4	65
Average	1.75	11.5	19	7	5	4	6.5

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

The ISP provides details regarding the individuals' visions and outcomes and are developed by an Interdisciplinary Team that includes the Individual and those who know and provide supports to that person. This includes the Class Member, Case Manager, Guardian, the Direct Support Staff, Therapists, Nurse, any additional person invited by the class member and persons who are needed to ensure the implementation of the Plan. The FY2021 IQR protocol specifically asks questions regarding 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 FY2021 Metro1 & 2 reviews.

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?

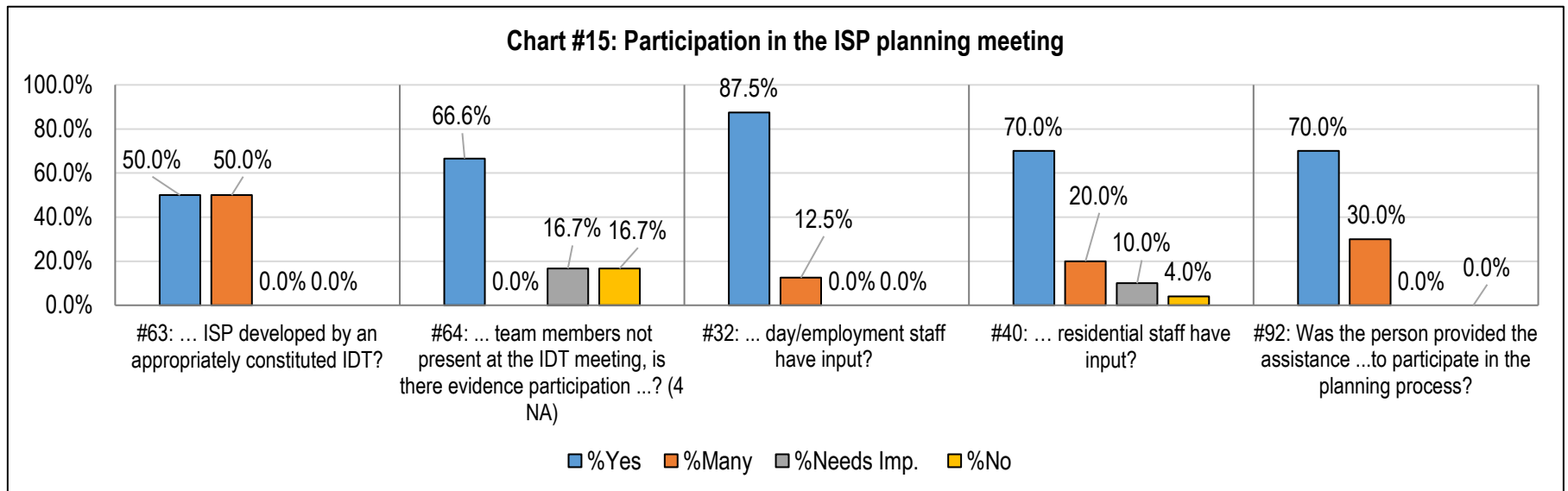


Chart #16: ISP Development Participation, by Residential Provider

The number in the parenthesis next to the agencies name represents the number of individuals that agency had in this review.

Res. Agency (# in sample)	Question				
	#63	#64	#32	#40	#92
Adelante (4)	25% Yes(1) 75% Many (3)	33.4% Yes (1) 33.3% Needs Impv (1) 33.3% No (1) 1 NA	75% Yes (3) 25% Many (1)	75% Yes (3) 250% Needs Impv (1)	50% Yes (2) 50% Many (2)
Bright Horizons (2)	50% Yes (1) 50% Many (1)	100% Yes (1) 1 NA	2 NA	50% Yes (1) 50% Many (1)	100% Yes (2)
Dungarvin (1)	0% Yes 100% Many (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)
LLCP (1)	100% Yes (1)	1 NA	100% Yes (1)	0% Yes 100% Many (1)	100% Yes (1)
Maxcare (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)
Onyx (1)	100% Yes (1)	1 NA	100% Yes (1)	100% Yes (1)	100% Yes (1)

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

CM Agency (# in sample)	Question				
	#63	#64	#32	#40	#92
A New Vision (1)	0% Yes 100% Many (1)	0% Yes 100% No (1)	100% Yes (1)	100% Yes (1)	0% Yes 100% Many (1)
A Step Above (2)	50% Yes (1) 50% Many (1)	100% Yes (1)	100% Yes (1)	50% Yes (1) 50% Many (1)	50% Yes (1) 50% Many (1)
Amigo (1)	0% Yes 100% Many (1)	100% Yes (1)	0% Yes 100% Many (1)	100% Yes (1)	100% Yes (1)
NMQCM (1)	100% Yes (1)	1 NA	1 NA	100% Yes (1)	100% Yes (1)
PCCS (1)	0% Yes 100% Many (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)
Peak (1)	0% Yes 100% Many (1)	0% Yes 100% Needs Impv (1)	100% Yes (1)	0% Yes 100% Needs Impv (1)	100% Yes (1)
Unidas (3)	100% Yes (3)	100% Yes (1) 2 NA	100% Yes (3)	66.7% Yes (2) 33.3% Many (1)	66.7% Yes (2) 33.3% Many (1)

The individual's ISP must contain the Long-Term Vision, which summarizes what the individual wants to accomplish in the near future (3 to 5 years) in each life area. Then outcomes are to be developed by the Team to create a path to accomplish their vision. The FY2022 IQR protocol specifically asks 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 FY2022 Metro 1 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?

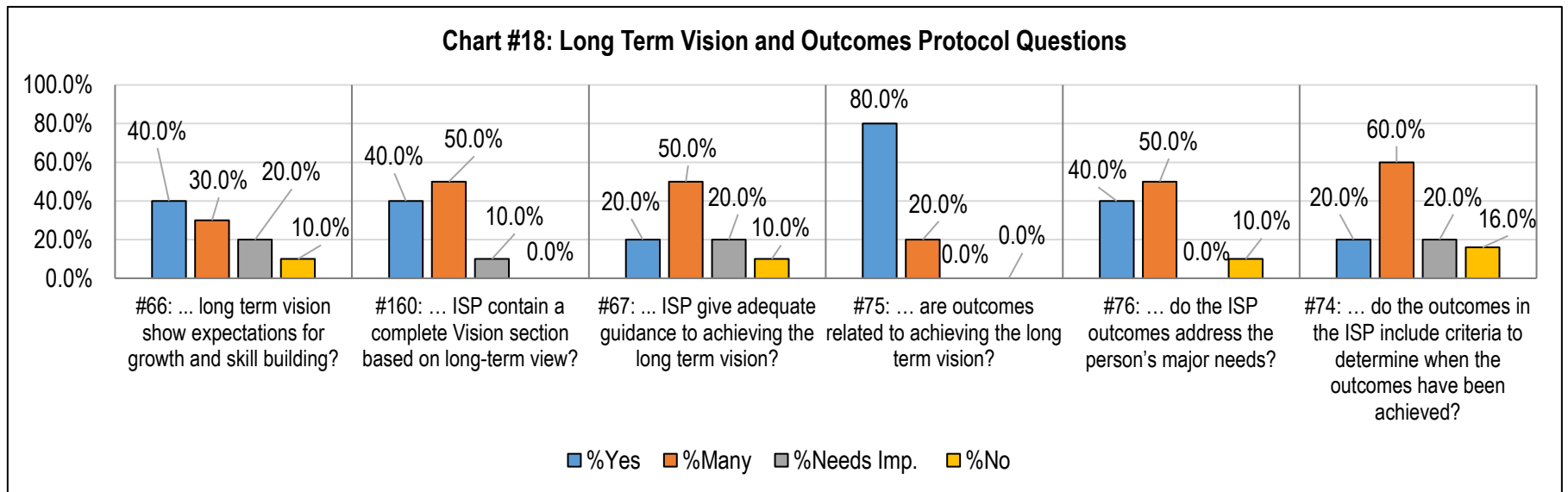


Chart #19: Vision and Outcome Scores, by Residential Agency

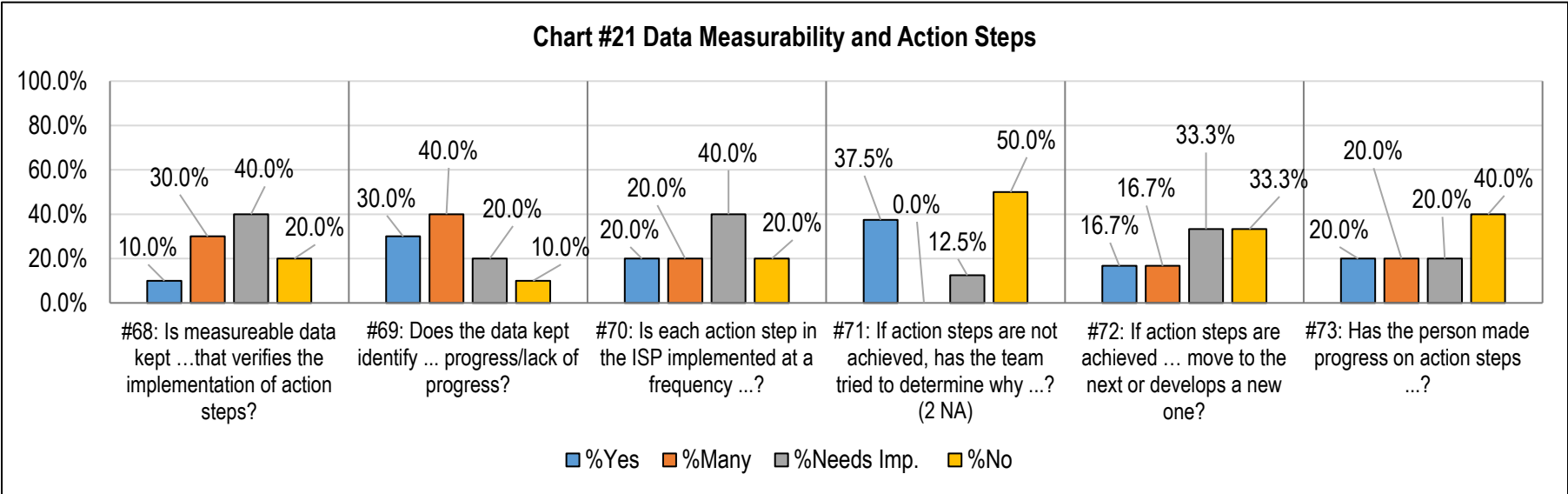
Res Agency (# in sample)	Question					
	#66	#160	#67	#75	#76	#74
Adelante (4)	25% Yes (1) 50% Needs Impv (2) 25% No (1)	25% Yes (1) 50% Many (2) 25% No (1)	0% Yes 75% Many (3) 25% No (1)	50% Yes (2) 50% Many (2)	25% Yes (1) 50% Many (2) 25 % No (1)	50% Yes (2) 50% Many (2)
Bright Horizons (2)	50% Yes (1) 50% Many (1)	50% Yes (1) 50% Many (1)	50% Yes (1) 50% Need Impv (1)	100% Yes (2)	50% Yes (1) 50% Many (1)	0%Yes 100% Many (2)
Dungarvin (1)	100% Yes (1)	100% Yes (1)	0%Yes 100% Many (1)	100% Yes (1)	100% Yes (1)	0% Yes 100% Needs Impv (1)
LLCP (1)	0%Yes 100% Many (1)	0%Yes 100% Many (1)	0% Yes 100% Needs Impv (1)	100% Yes (1)	0%Yes 100% Many (1)	0%Yes 100% Many (1)
Maxcare (1)	0%Yes 100% Many (1)	0%Yes 100% Many (1)	0%Yes 100% Many (1)	100% Yes (1)	0%Yes 100% Many (1)	0% Yes 100% Needs Impv (1)
Onyx (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)	0%Yes 100% Many (1)

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

CM Agency (# in sample)	Question					
	#66	#160	#67	#75	#76	#74
A New Vision (1)	0% Yes 100% No (1)	100% Yes (1)	0% Yes 100% Many (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)
A Step Above (2)	100% Yes (2)	100% Yes (2)	100% Yes (2)	100% Yes (2)	100% Yes (2)	0% Yes 100% Many (2)
Amigo (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	100% Yes (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)
NMQCM (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Needs Impv (1)	100% Yes (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)
PCCS (1)	100% Yes (1)	100% Yes (1)	0% Yes 100% Many (1)	100% Yes (1)	100% Yes (1)	0% Yes 100% Needs Impv (1)
Peak (1)	100% Yes (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)
Unidas (3)	0% Yes 66.7% Many (2) 33.3% Needs Impv (1)	0% Yes 66.7% Many (2) 33.3% Needs Impv (1)	0% Yes 33.4% Many (1) 33.3% Needs Impv (1) 33.3% No (1)	66.7% Yes (2) 33.3% Many (1)	0% Yes 66.7% Many (2) 33.3% No (1)	33.3% Yes (1) 33.4% Many (1) 33.3% Needs Impv (1)

The individual's ISP also contains Action Steps, which should be written in measurable terms, and in a way which 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 asks about 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?



The charts below identify scores related to the data tracking of the ISP outcomes and action steps (See specific questions above):

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

Res Agency (# in sample)	Question					
	#68	#69	#70	#71	#72	#73
Adelante (4)	25% Yes (1) 25% Many (2) 25% Needs Impv (1) 25% No (1)	25% Yes (1) 75% Many (3)	0% Yes 25% Many (1) 50% Needs Impv (2) 25% No (1)	66.7% Yes (2) 33.3% No (1) 1 NA	0% Yes 100% Needs Impv (1) 3 NA	50% Yes (2) 25% Needs Impv (1) 25% No (1)
Bright Horizons (2)	0% Yes 50% Needs Impv (1) 50% No (1)	50% Yes (1) 50% Needs Impv (1)	50% Yes (1) 50% Needs Impv (1)	0% Yes 100% No (2)	0% Yes 50% Many (1) 50% No (1)	0% Yes 100% No (2)
Dungarvin (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Needs Impv (1)	100% Yes (1)	0% Yes 100% Many (1)
LLCP (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% No (1)	0% Yes 100% No (1)	0% Yes 100% No (1)
Maxcare (1)	0% Yes 100% Many (1)	100% Yes (1)	0% Yes 100% No (1)	100% Yes (1)	1 NA	0% Yes 100% Many (1)
Onyx (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% No (1)	100% Yes (1)	1 NA	0% Yes 100% Needs Impv (1)	0% Yes 100% Needs Impv (1)

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

CM Agency (# in sample)	Question					
	#68	#69	#70	#71	#72	#73
A New Vision (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% No (1)	100% Yes (1)	1 NA	100% Yes (1)
A Step Above (2)	0% Yes 50% Needs Impv (1) 50% No (1)	50% Yes (1) 50% No (1)	100% Yes (2)	0% Yes 100% No (1)	0% Yes 50% Many (1) 50% Needs Impv (1)	0% Yes 50% Needs Impv (1) 50% No (1)
Amigo (1)	0% Yes 100% No (1)	0% Yes 100% Many (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% No (1)	1 NA	0% Yes 100% No (1)
NMQCM (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% No (1)	0% Yes 100% No (1)	0% Yes 100% No (1)
PCCS (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Needs Impv (1)	100% Yes (1)	0% Yes 100% Many (1)
Peak (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Yes (1)	0% Yes 100% Needs Impv (1)	100% Yes (1)	1 NA	0% Yes 100% Needs Impv (1)
Unidas (3)	33.4% Yes (1) 33.3% Many (1) 33.3% Needs Impv (1)	33.3% Yes (1) 33.4% Many (1) 33.3% Needs Impv (1)	33.3% Many (1) 33.3% Needs Impv (1) 33.4% No (1)	50% Yes (1) 50% No (1) 1 NA	0% Yes 50% Needs Impv (1) 50% No (1)	33.4% Yes (1) 33.3% Many (1) 33.3% No (1)

Another component of the ISP is Teaching and Support Strategies (T&SS). While not always required, the T&SS is additional guidance developed by the residential and/or day provider responsible for implementing the outcome. WDSIs are developed by therapists as a complement to the T&SS. The following protocol questions in the FY2022 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?

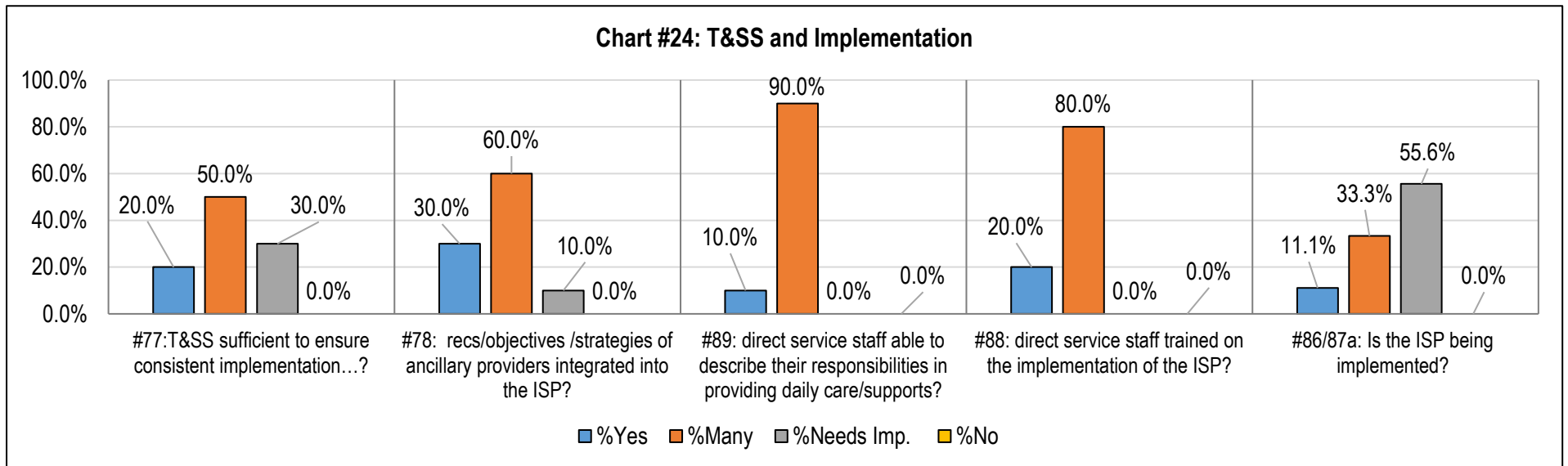


Chart #25: T&SS and ISP Implementation Scores by Residential Agency

Res. Agency (# in sample)	Question				
	#77	#78	#89	#88	#87a
Adelante (4)	25% Yes (1) 50% Many (2) 25% Needs Impv (1)	50% Yes (2) 50% Many (2)	0% Yes 100% Many (4)	25% Yes (1) 75% Many (3)	0% Yes 33.3% Many (1) 66.7% Needs Impv (2) 1 NA
Bright Horizons (2)	0% Yes 50% Many (1) 50% Needs Impv (1)	0% Yes 100% Many (2)	0% Yes 100% Many (2)	0% Yes 100% Many (2)	0% Yes 100% Impv (2)
Dungarvin (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Needs Impv (1)	0%Yes 100% Many (1)	0%Yes 100% Many (1)	0%Yes 100% Many (1)
LLCP (1)	0%Yes 100% Many (1)	0%Yes 100% Many (1)	0%Yes 100% Many (1)	0%Yes 100% Many (1)	0% Yes 100% Needs Impv (1)
Maxcare (1)	0%Yes 100% Many (1)	100% Yes (1)	0%Yes 100% Many (1)	0%Yes 100% Many (1)	100% Yes (1)
Onyx (1)	100% Yes (1)	0%Yes 100% Many (1)	100% Yes (1)	100% Yes (1)	0%Yes 100% Many (1)

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

CM Agency (# in sample)	Question				
	#77	#78	#89	#88	#87a
A New Vision (1)	100% Yes (1)	100% Yes (1)	0% Yes 100% Many (1)	100% Yes (1)	1 NA
A Step Above (2)	50% Yes (1) 50% Needs Impv (1)	0% Yes 100% Many (2)	50% Yes (1) 50% Many (1)	50% Yes (1) 50% Many (1)	0% Yes 50% Many (1) 50% Needs Impv (1)
Amigo (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Needs Impv (1)
NMQCM (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Needs Impv (1)
PCCS (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)
Peak (1)	0% Yes 100% Many (1)	100% Yes (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Needs Impv (1)
Unidas (3)	0% Yes 66.7% Many (2) 33.3% Needs Impv (1)	33.3% Yes (1) 66.7% Many (2)	0% Yes 100% Many (3)	0% Yes 100% Many (3)	33.4% Yes (1) 33.3% Many (1) 33.3% Needs Impv (1)

An overview of the adequacy of ISP content as well as implementation and effectiveness of the ISP is evaluated by the IQR. There are multiple areas in the FY2022 IQR protocol that ask these questions, 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?

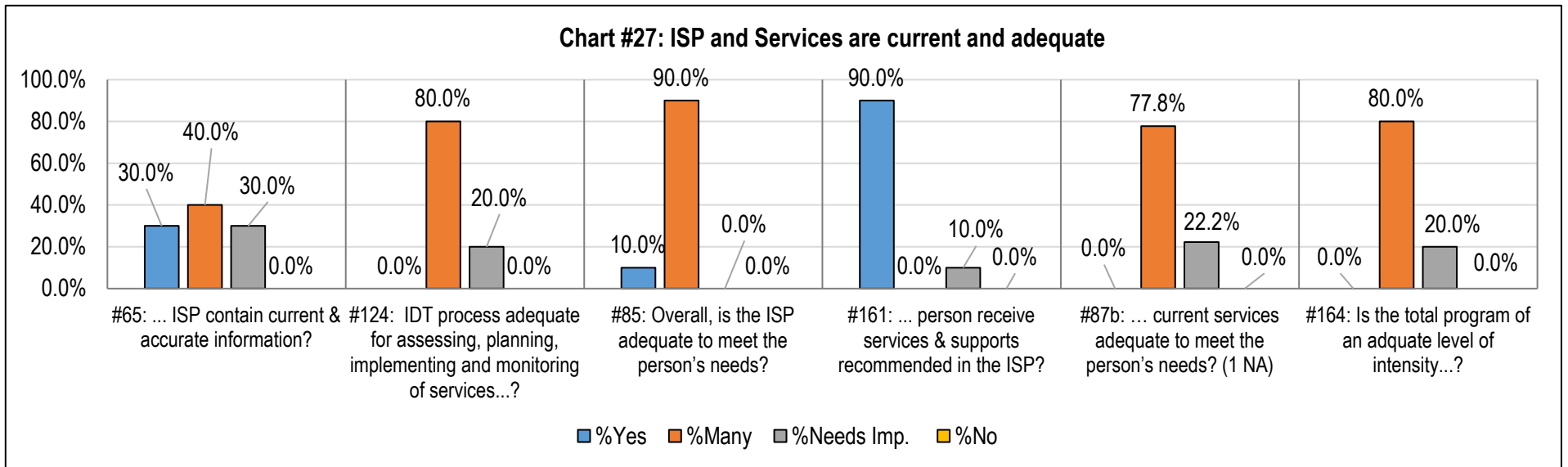


Chart #28: ISP Content and Adequacy Scores, by Residential Agency

Res. Agency (# in sample)	Question					
	#65	#124	#85	#161	#87b	#164
Adelante (4)	25% Yes (1) 25% Many (1) 50% Needs Impv (2)	0% Yes 75% Many (3) 25% Needs Impv (1)	25% Yes (1) 75% Many (3)	100% Yes (4)	0% Yes 66.7% Many (2) 33.3% Needs Impv (1) 1 NA	0% Yes 100% Many (4)
Bright Horizons (2)	50% Yes (1) 50% Many (1)	0% Yes 50% Many (1) 50% Needs Impv (1)	0% Yes 100% Many (2)	100% Yes (2)	0% Yes 50% Many (1) 50% Needs Impv (1)	0% Yes 50% Many (1) 50% Needs Impv (1)
Dungarvin (1)	0%Yes 100% Many (1)	0%Yes 100% Many (1)	0%Yes 100% Many (1)	100% Yes (1)	0%Yes 100% Many (1)	0%Yes 100% Many (1)
LLCP (1)	100% Yes (1)	0%Yes 100% Many (1)	0%Yes 100% Many (1)	100% Yes (1)	0%Yes 100% Many (1)	0% Yes 100% Needs Impv (1)
Maxcare (1)	0% Yes 100% Needs Impv (1)	0%Yes 100% Many (1)	0%Yes 100% Many (1)	100% Yes (1)	0%Yes 100% Many (1)	0%Yes 100% Many (1)
Onyx (1)	0%Yes 100% Many (1)	0%Yes 100% Many (1)	0%Yes 100% Many (1)	0% Yes 100% Needs Impv (1)	0%Yes 100% Many (1)	0%Yes 100% Many (1)

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

CM Agency (# in sample)	Question					
	#65	#124	#85	#161	#87b	#164
A New Vision (1)	100% Yes (1)	0% Yes 100% Many (1)	100% Yes (1)	100% Yes (1)	1 NA	0% Yes 100% Many (1)
A Step Above (2)	0% Yes 100% Many (2)	0% Yes 50% Many (1) 50% Needs Impv (1)	0% Yes 100% Many (2)	50% Yes (1) 50% Needs Impv (1)	0% Yes 50% Many (1) 50% Needs Impv (1)	0% Yes 100% Many (2)
Amigo (1)	0% Yes 100% Many (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Many (1)	100% Yes (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Many (1)
NMQCM (1)	100% Yes (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	100% Yes (1)	0% Yes 100% Many (1)	0% Yes 100% Needs Impv (1)
PCCS (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	100% Yes (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)
Peak (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	100% Yes (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)
Unidas (3)	33.3% Yes (1) 66.7% Needs Impv (2)	0% Yes 100% Many (3)	0% Yes 100% Many (3)	100% Yes (3)	0% Yes 100% Many (3)	0% Yes 66.7% Many (2) 33.3% Needs Impv (1)

G. Case Management

Case Management services are intended to be person-centered and enable the individual to pursue their desired life outcomes while gaining greater independence and access to needed services and supports. While the number of findings in the FY2022 Metro 1 Review in the Case Management area are the third highest of the findings categories, the region scored better 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?

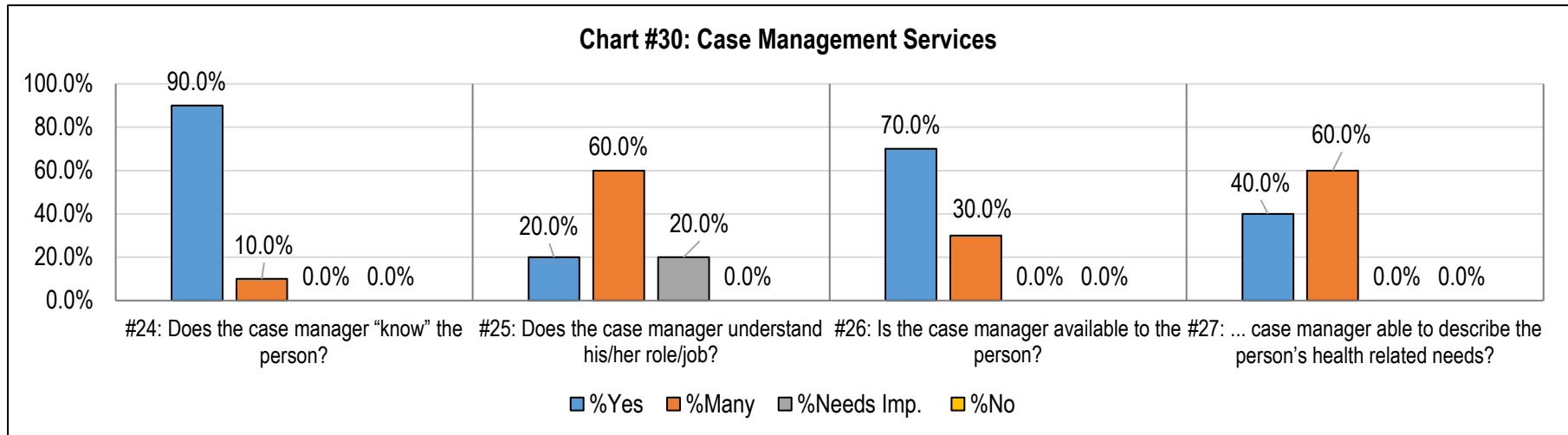


Chart #31: Case Management Scores, by Case Management Agency

CM Agency (# in sample)	Question			
	#24	#25	#26	#27
A New Vision (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)
A Step Above (2)	100% Yes (2)	0% Yes 50% Many (1) 50% Needs Impv (1)	100% Yes (2)	50% Yes (1) 50% Many (1)
Amigo (1)	100% Yes (1)	0% Yes 100% Many (1)	100% Yes (1)	0% Yes 100% Many (1)
NMQCM (1)	100% Yes (1)	100% Yes (1)	0% Yes 100% Many (1)	100% Yes (1)
PCCS (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)
Peak (1)	100% Yes (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	100% Yes (1)
Unidas (3)	100% Yes (3)	0% Yes 66.7% Many (2) 33.3% Needs Impv (1)	100% Yes (3)	0% Yes 100% Many (3)

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?

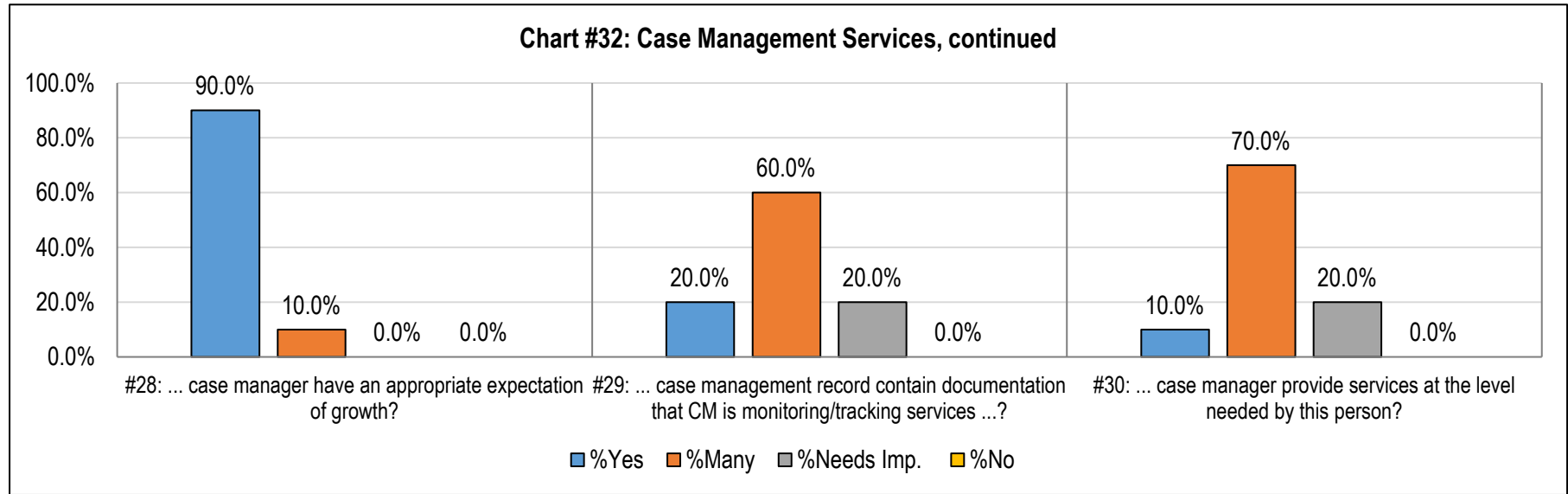


Chart #33: Case Management Scores, by Case Management Agency

CM Agency (# in sample)	Question		
	#28	#29	#30
A New Vision (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)
A Step Above (2)	100% Yes (2)	0% Yes 50% Many (1) 50% Needs Impv (1)	0% Yes 50% Many (1) 50% Needs Impv (1)
Amigo (1)	100% Yes (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)
NMQCM (1)	100% Yes (1)	100% Yes (1)	0% Yes 100% Many (1)
PCCS (1)	100% Yes (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)
Peak (1)	100% Yes (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)
Unidas (3)	66.7% Yes (2) 33.3% Many (1)	0% Yes 66.7% Many (2) 33.3% Needs Impv (1)	0% Yes 66.7% Many (2) 33.3% Needs Impv (1)

H. Supported Employment

The DDSD adopted an Employment First Policy in 2016 to establish procedures for supporting working age adults to have access to valued employment opportunities as the preferred service in New Mexico. Access to competitive integrated employment enables the person to engage in community life, control personal resources, increase self-sufficiency and receive services in the community. When engaging in person-centered planning, team members must first look to community and natural supports to assist people to attain their employment goals and Desired Outcomes. As such, supported employment activities are a planning priority for all working age adults.

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 an informed decision about employment while others may have a rich and varied employment history and can make an informed choice based on that history.

A. Components of Informed Choice: Assessment

The expectation is that the Team will work together to determine and provide opportunities for activities that support making an informed choice about employment and clearly document the person's decision-making process in the ISP.

Per the 2018 DD Wavier Standards, The Person-Centered Assessment (PCA) is the process teams are expected to use. Provider Agencies must adhere to the following requirements related to a PCA and Career Development Plan:

- a. A person-centered assessment should contain, at a minimum: information about the person's background and status;
- b. the person's strengths and interests;
- c. Conditions for success to integrate into the community, including conditions for job success (for those who are working or wish to work); and
- d. Support needs for the individual.

Considering vocational interests, abilities and skills is optional for those who are not working and have not expressed a wish to work. If you are working or wish to work then conditions for job success can and should be explored. As we consider the aging status of the class members and note many IQR questions scored as not applicable (NA) there may be further analysis needed regarding employment services for class members.

The IQR asks the following questions regarding the support class members receive in assessing and determining their interests in work:

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? This Project has been discontinued and the question is no longer asked.~~

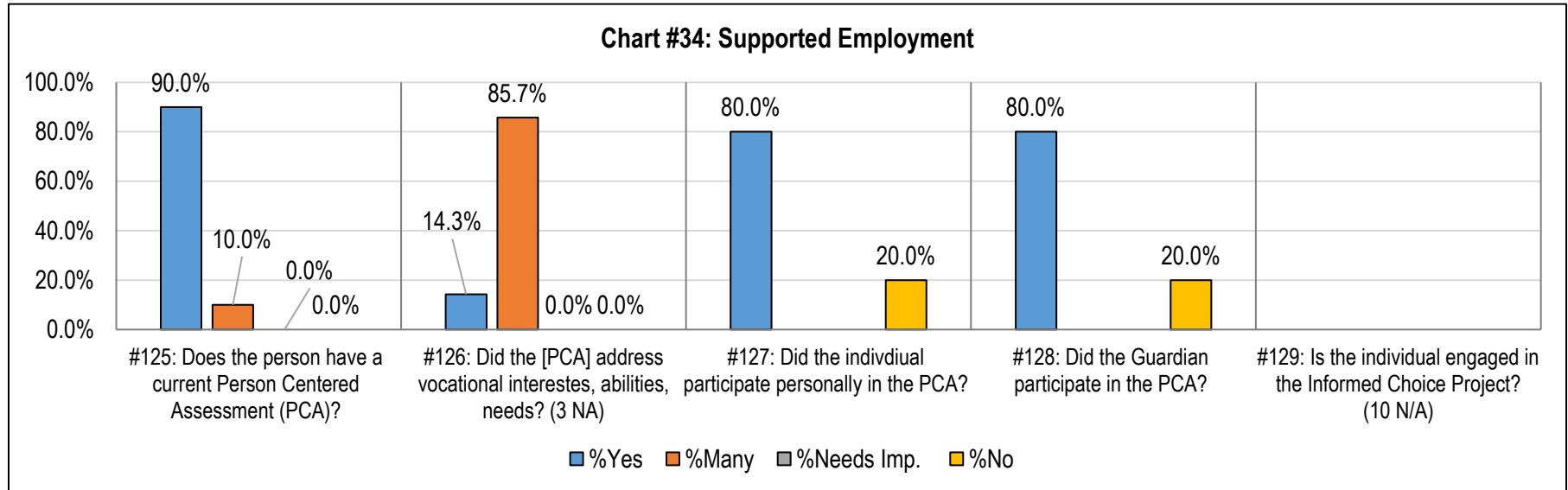


Chart #35: Supported Employment Scores by Provider Agency

Res. Agency (# in sample)	Question				
	#125	#126	#127	#128	#129
Adelante (4)	100% Yes (4)	0% Yes 100% Many (3) 1 NA	75% Yes (3) 25 % No (1)	100% Yes (4)	
Bright Horizons (2)	100% Yes (2)	50% Yes (1) 50% Many (1)	100% Yes (2)	50% Yes (1) 50% No (1)	
Dungarvin (1)	100% Yes (1)	1 NA	100% Yes (1)	100% Yes (1)	
LLCP (1)	100% Yes (1)	0%Yes 100% Many (1)	100% Yes (1)	100% Yes (1)	
Maxcare (1)	100% Yes (1)	1 NA	100% Yes (1)	0% Yes 100% No (1)	
Onyx (1)	0%Yes 100% Many (1)	0%Yes 100% Many (1)	0% Yes 100% No (1)	100% Yes (1)	

Chart #36: Supported Employment Scores by Case Management Agency

CM Agency (# in sample)	Question				
	#125	#126	#127	#128	#129
A New Vision (1)	100% Yes (1)	0% Yes 100% Many (1)	100% Yes (1)	100% Yes (1)	
A Step Above (2)	50% Yes (1) 50% Many (1)	50% Yes (1) 50% Many (1)	50% Yes (1) 50% No (1)	50% Yes (1) 50% No (1)	
Amigo (1)	100% Yes (1)	1 NA	100% No (1)	100% Yes (1)	
NMQCM (1)	100% Yes (1)	0% Yes 100% Many (1)	100% Yes (1)	100% Yes (1)	
PCCS (1)	100% Yes (1)	1 NA	100% Yes (1)	100% Yes (1)	
Peak (1)	100% Yes (1)	0% Yes 100% Many (1)	100% Yes (1)	100% Yes (1)	
Unidas (3)	100% Yes (3)	0% Yes 100% Many (2) 1 NA	100% Yes (3)	66.7% Yes (2) 33.3% No (1)	

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?

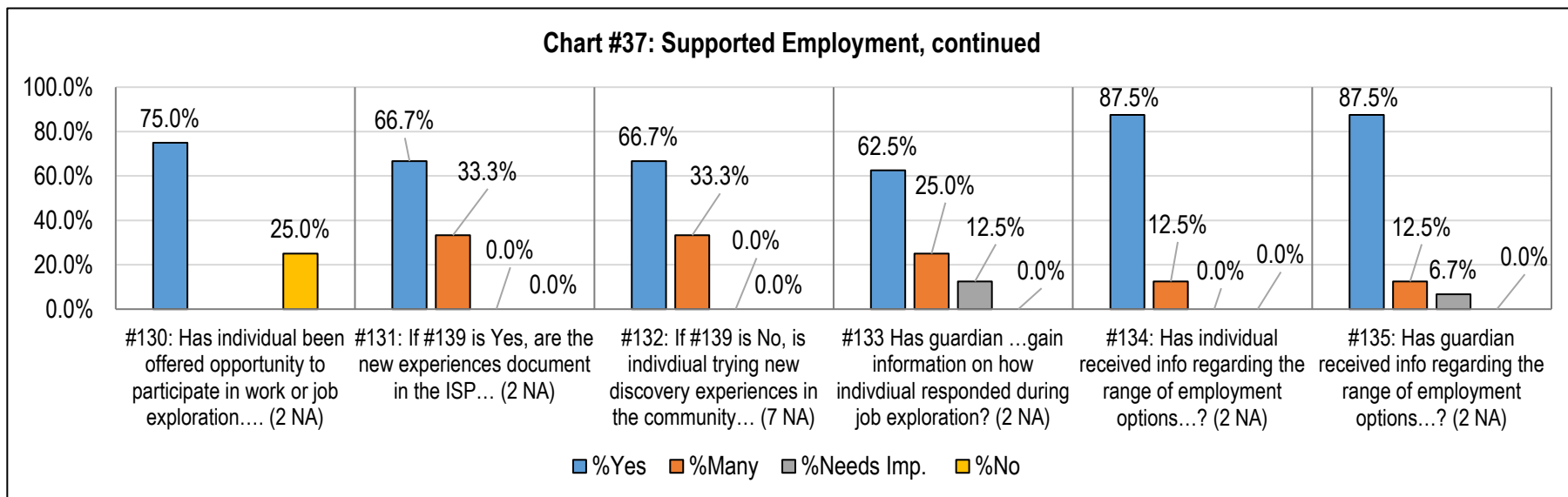


Chart #38: Supported Employment Scores by Provider Agency

Res. Agency (# in sample)	Question					
	#130	#131	#132	#133	#134	#135
Adelante (4)	75% Yes (3) 25% No (1)	100% Yes (3) 1 NA	0% Yes 100% Many (1) 3 NA	50% Yes (2) 25% Many (1) 25% Needs Impv (1)	75% Yes (3) 25% Many (1)	75% Yes (3) 25% Needs Impv (1)
Bright Horizons (2)	100% Yes (2)	50% Yes (1) 50% Many (1)	100% Yes (1) 1 NA	50% Yes (1) 50% Many (1)	100% Yes (2)	100% Yes (2)
Dungarvin (1)	1 NA	1 NA	1 NA	1 NA	1 NA	1 NA
LLCP (1)	100% Yes (1)	0% Yes 100% Many (1)	1 NA	100% Yes (1)	100% Yes (1)	100% Yes (1)
Maxcare (1)	1 NA	1 NA	1 NA	1 NA	1 NA	1 NA
Onyx (1)	0% Yes 100% No (1)	1 NA	100% Yes (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)

Chart #39: Supported Employment Scores by Case Management Agency

CM Agency (# in sample)	Question					
	#130	#131	#132	#133	#134	#135
A New Vision (1)	100% Yes (1)	100% Yes (1)	1 NA	0%Yes 100% Many (1)	100% Yes (1)	100% Yes (1)
A Step Above (2)	50% Yes (1) 50% No (1)	100% Yes (1) 1 NA	100% Yes (2)	100% Yes (2)	100% Yes (2)	100% Yes (2)
Amigo (1)	100% Yes (1)	100% Yes (1)	1 NA	100% Yes (1)	100% Yes (1)	100% Yes (1)
NMQCM (1)	100% Yes (1)	0% Yes 100% Many (1)	1 NA	100% Yes (1)	100% Yes (1)	100% Yes (1)
PCCS (1)	1 NA	1 NA	1 NA	1 NA	1 NA	1 NA
Peak (1)	100% Yes (1)	100% Yes (1)	1 NA	100% Yes (1)	100% Yes (1)	100% Yes (1)
Unidas (3)	50% Yes (1) 50% No (1) 1 NA	100% Many (1) 2 NA	0%Yes 100% Many (1) 2 NA	50% Yes (1) 50% Needs Impv (1) 1 NA	50% Yes (1) 50% Many (1) 1 NA	50% Yes (1) 50% Needs Impv (1) 1 NA

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

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?

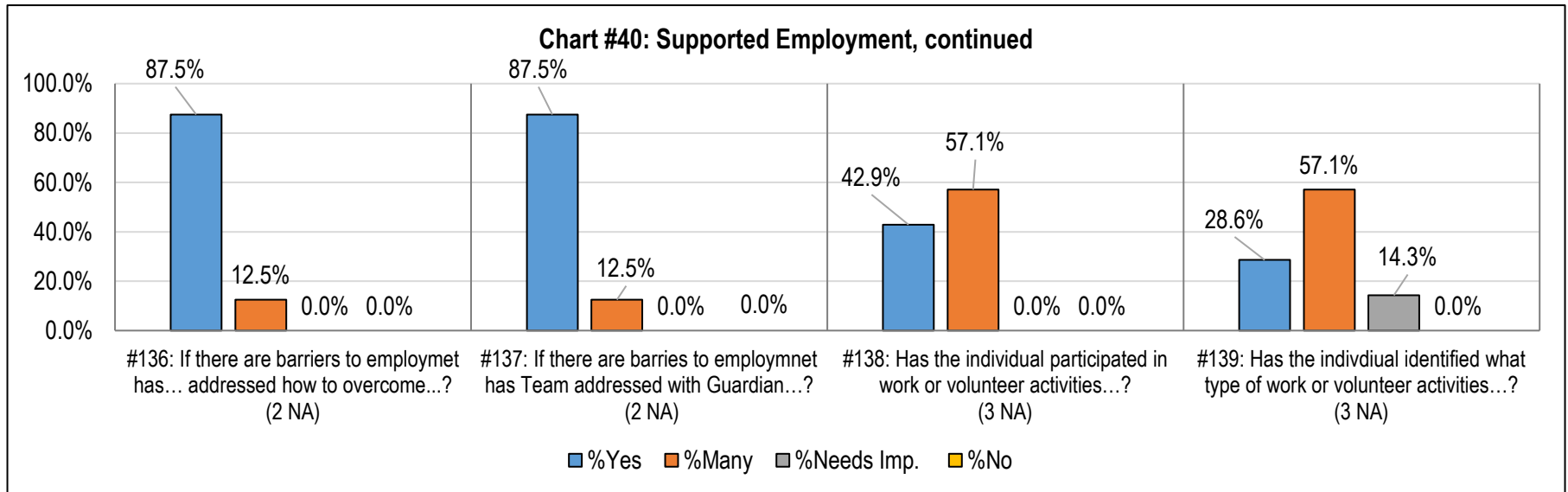


Chart #41: Supported Employment Scores by Provider Agency

Res. Agency (# in sample)	Question			
	#136	#137	#138	#139
Adelante (4)	75% Yes (3) 25% Many (1)	75% Yes (3) 25% Many (1)	66.7% Yes (2) 33.3% Many(1) 1 NA	33.4% Yes(1) 33.3% Many (1) 33.3% Needs Impv (1) 1 NA
Bright Horizons (2)	100% Yes (2)	100% Yes (2)	50% Yes (1) 50% Many (1)	50% Yes (1) 50% Many (1)
Dungarvin (1)	1 NA	1 NA	1 NA	1 NA
LLCP (1)	100% Yes (1)	100% Yes (1)	0%Yes 100% Many (1)	0%Yes 100% Many (1)
Maxcare (1)	1 NA	1 NA	1 NA	1 NA
Onyx (1)	100% Yes (1)	100% Yes (1)	0%Yes 100% Many (1)	0%Yes 100% Many (1)

Chart #42: Supported Employment Scores by Case Management Agency

CM Agency (# in sample)	Question			
	#136	#137	#138	#139
A New Vision (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)
A Step Above (2)	100% Yes (2)	100% Yes (2)	50% Yes (1) 50% Many (1)	50% Yes (1) 50% Many (1)
Amigo (1)	100% Yes (1)	100% Yes (1)	1 NA	1 NA
NMQCM (1)	100% Yes (1)	100% Yes (1)	0%Yes 100% Many (1)	0%Yes 100% Many (1)
PCCS (1)	1 NA	1 NA	1 NA	1 NA
Peak (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)	0%Yes 100% Needs Impv (1)
Unidas (3)	50% Yes (1) 50% Many (1) 1 NA	50% Yes (1) 50% Many (1) 1 NA	0%Yes 100% Many (2) 1 NA	0%Yes 100% Many (2) 1 NA

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?

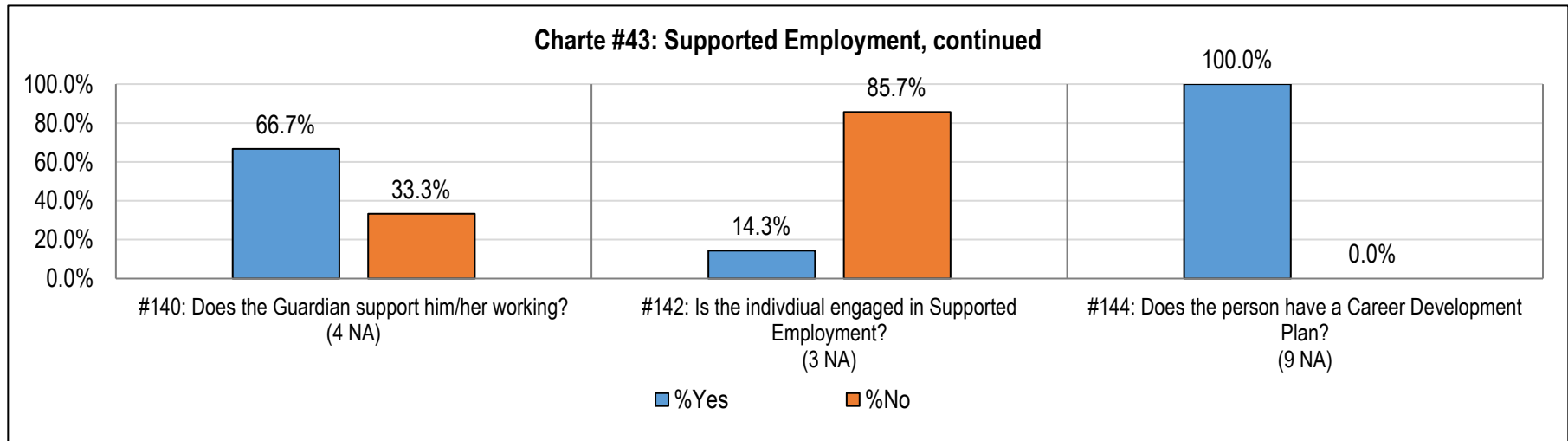


Chart #44: Supported Employment Scores by Provider Agency

Res. Agency (# in sample)	Question		
	#140	#142	#144
Adelante (4)	66.7% Yes (2) 33.3% Needs Impv (1) 1 NA	0% Yes 100 % No (3) 1 NA	4 NA
Bright Horizons (2)	100% Yes (1) 1 NA	50% Yes (1) 50% No (1)	100% Yes (1) 1 NA
Dungarvin (1)	1 NA	1 NA	1 NA
LLCP (1)	0% Yes 100% No (1)	0% Yes 100% No (1)	1 NA
Maxcare (1)	1 NA	1 NA	1 NA
Onyx (1)	100% Yes (1)	0% Yes 100% No (1)	1 NA

Chart #45: Supported Employment Scores by Case Management Agency

CM Agency (# in sample)	Question		
	#140	#142	#144
A New Vision (1)	0%Yes 100% No (1)	0%Yes 100% No (1)	1 NA
A Step Above (2)	100% Yes (2)	50% Yes (1) 50% No (1)	100% Yes (1)
Amigo (1)	1 NA	1 NA	1 NA
NMQCM (1)	1 NA	100% No (1)	1 NA
PCCS (1)	1 NA	1 NA	1 NA
Peak (1)	100% Yes (1)	100% No (1)	1 NA
Unidas (3)	50% Yes (1) 50% No (1) 1 NA	100% No (2) 1 NA	3 NA

I. IQR Scored Protocol Questions

Below are all of the questions in the protocol and the scores of the Metro Region Round 1 & 2 Reviews. The questions **highlighted** are included in the data tables above.

Question	FY2022 Metro 1 (sample=10)
CASE MANAGEMENT	
24. Does the case manager “know” the person? CPRQ26; ‘17IQR#8c, ‘18IQR24	90% Yes (9) 10% Many (1)
25. Does the case manager understand his/her role/job? CPRQ27 ‘17IQR#16, ‘18IQR25	20% Yes (2) 60% Many (6) 20% Needs Impv (2)
26. Is the case manager available to the person? CPRQ29; ‘17IQR#16a, ‘18IQR27	70% Yes (7) 30% Many (3)
27. Was the case manager able to describe the person’s health related needs? CPRQ30, ‘18IQR28	40% Yes (4) 60% Many (6)
28. Does the case manager have an appropriate expectation of growth for this person? CPRQ31, ‘18IQR29	90% Yes (9) 10% Many (1)
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	20% Yes (2) 60% Many (6) 20% Needs Impv (2)
30. Does the case manager provide case management services at the level needed by this person? CPRQ33; ‘17IQR#16c, ‘18IQR31	10% Yes (1) 70% Many (7) 20% Needs Impv (2)
31. Does the direct services staff “know” the person? CPRQ35; ‘17IQR#8a, ‘18IQR33	87.5% Yes (7) 12.5% Many (1) (2 CND)
32. Does the direct service staff have input into the person’s ISP? CPRQ36, ‘18IQR34	87.5% Yes (7) 12.5% Many (1) (2 CND)

Question	FY2022 Metro 1 (sample=10)
33. Did the direct service staff receive training on implementing this person's ISP? CPRQ37, '18IQR35	62.5% Yes (5) 25% Many (2) 12.5% Needs Impv (1) (2 CND)
34. Was the direct service staff able to describe this person's health-related needs? CPRQ38, '18IQR36	12.5% Yes (1) 62.5% Many (5) 25% Needs Impv (2) (2 CND)
35. Was the direct service staff able to describe his/her responsibilities in providing daily care/supports to the person? CPRQ39, '18IQR37	50% Yes (4) 50% Many (4) (2 CND)
35a. Was the direct service staff able to provide specific information regarding the person's daily activities? CPRQ39a, '18IQR37a	75% Yes (6) 25% Many (2) (2 CND)
35b. Can the direct service staff describe his/her responsibilities in implementing this person's ISP, including outcomes, action plans, and WDSIs? CPRQ39b, '18IQR37b	62.5% Yes (5) 25% Many (2) 12.5% Needs Impv (1) (2 CND)
36. Did the direct service staff have training on the provider's complaint process and how to report abuse, neglect and exploitation? CPRQ41, '18IQR39	75% Yes (6) 12.5% Needs Impv (1) 12.5% No (1) (2 CND)
37. Does the direct service staff have an appropriate expectation of growth for this person? CPRQ42, '18IQR40	87.5% Yes (7) 12.5% Many (1) (2 CND)
38. Does the person's day/work environment generally clean, free of safety hazards and conducive to the work/activity intended? CPRQ43, '18IQR41	(10 CND)
39. Does the residential direct services staff "know" the person? CPRQ44; '17IQR#8b, '18IQR42	90% Yes (9) 10% Many (1)
40. Does the direct service staff have input into the person's ISP? CPRQ45, '18IQR43	70% Yes (7) 20% Many (2) 10% Needs Impv (1)

Question	FY2022 Metro 1 (sample=10)
41. Did the direct service staff receive training on implementing this person's ISP? CPRQ46, '18IQR44	50% Yes (5) 50% Many (5)
42. Is the residence safe for individuals (void of hazards)? CPRQ45, '18IQR45	70% Yes (7) 30% Many (3)
43. Was the residential direct service staff able to describe this person's health-related needs? CPRQ48, '18IQR46	20% Yes (2) 60% Many (6) 20% Needs Impv (2)
44. Was the direct service staff able to describe his/her responsibilities in providing daily care/supports to the person? CPRQ49, '18IQR47	50% Yes (5) 50% Many (5)
44a. Was the direct service staff able to provide specific information regarding the person's daily activities? CPRQ49a, '18IQR47a	80% Yes (8) 20% Many (2)
44b. Can the direct service staff describe his/her responsibilities in implementing this person's ISP, including outcomes, action plans, and WDSIs? CPRQ49b, '18IQR47b	50% Yes (5) 50% Many (5)
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% No (1)
47. Does the person's residential environment offer a minimal level of quality of life? CPRQ53, '18IQR51	80% Yes (8) 20% Many (2)
48. Overall, were the team members interviewed able to describe the person's health-related needs? CPRQ54; '17IQR#21b, '18IQR52	10% Yes (1) 80% Many (8) 10% Needs Impv (1)
49. Is there evidence that the IDT discussed the person's health related issues? CPRQ55; '17IQR#21, '18IQR53	10% Yes (1) 90% Many (9)
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% Many (1) 10% No (1)

Question	FY2022 Metro 1 (sample=10)
50b. Is the eCHAT complete?	50% Yes (5) 50% Many (5)
50c. Is the eCHAT accurate?	30% Yes (3) 60% Many (6) 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% Needs Impv (1)
52. Has the individual received all age and gender appropriate health screening/immunizations in accordance with national best practice and/or as recommended ... <i>(Does the individual receive routine/scheduled medical treatment? 17IQR#19a, '18IQR56)</i>	0% Yes 90% Many (9) 10% Needs Impv (1)
53. Does the individual receive medication as prescribed? 17IQR#19e, '18IQR57	0% Yes 70% Many (7) 30% Needs Impv (3)
54. Are nursing services provided as needed by the individual? 17IQR#20, '18IQR59	10% Yes (1) 90% Many (9)
55. Is the CARMP consistent with recommendation in other healthcare documents? <i>(Is the CARMP is accurate? '17IQR#21f, '18IQR60)</i>	30% Yes (3) 60% Many (6) 10% Needs Impv (1)
56. Is the CARMP consistently implemented as intended? , '18IQR61	60% Yes (6) 40% Many (4)
57. Are the person's health supports/needs being adequately addressed? CPRQ56; '17IQR#19, '18IQR62	0% Yes 100% Many (10)
57a. Are assessment recommendations followed up on in a timely way?	10% Yes (1) 70% Many (7) 20% Needs Impv (2)
57b. Were needed equipment/communication devices delivered timely?	14.3% Yes (1) 57.1% Many (4) 28.6% Needs Impv (2) (3 N/A)
57c. Were medical specialist appointments attended timely?	40% Yes (4) 40% Many (4) 20% Needs Impv (2)

Question	FY2022 Metro 1 (sample=10)
57d. Were changes in personal condition, if any, responded to timely?	90% Yes (9) 10% Many (1)
57e. Were Health Care Plans available, accurate and consistently implemented?	10% Yes (1) 80% Many (8) 10% Needs Impv (1)
58. Did the team arrange for and obtain the needed, relevant assessments? CPRQ58; '17IQR#18, '18IQR65	10% Yes (1) 90% Many (9)
59. Are the assessments adequate for planning? CPRQ59; '17IQR#4f, '18IQR66	0% Yes 100% Many (10)
59a. Were assessments provided timely?	20% Yes (2) 80% Many (8)
59b. Did assessments contain accurate information?	30% Yes (3) 60% Many (6) 10% Needs Impv (1)
59c. Did assessments contain information accurate to guide planning?	0% Yes 90% Many (9) 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	60% Yes (6) 40% Many (4)
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	60% Yes (3) 20% Many (1) 20% No (1) (5 N/A)
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)
63. Was the ISP developed by an appropriately constituted IDT? CPRQ62; '17IQR#3, '18IQR70	50% Yes (5) 50% Many (5)

Question	FY2022 Metro 1 (sample=10)
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	66.6% Yes (4) 16.7% Needs Impv (1) 16.7% No (1) (4 N/A)
65. Does my ISP contain current and accurate information? '17IQR#6, '18IQR72	30% Yes (3) 40% Many (4) 30% Needs Impv (3)
66. Does the long term vision show expectations for growth and skill building? CPRQ64; '17IQR#7b, '18IQR73	40% Yes (4) 30% Many (3) 20% Needs Impv (2) 10% No (1)
67. Does the ISP give adequate guidance to achieving the person's long-term vision? CPRQ65; '17IQR#7c, '18IQR74	20% Yes (2) 50% Many (5) 20% Needs Impv (2) 10% No (1)
68. Is measurable data kept which verifies the consistent implementation of each of the action steps? '17IQR#12a, '18IQR75	10% Yes (1) 30% Many (3) 40% Needs Impv (4) 20% No (2)
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) 40% Many (4) 20% Needs Impv (2) 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	20% Yes (2) 20% Many (2) 40% Needs Impv (4) 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	37.5% Yes (3) 12.5% Needs Impv (1) 50% No (4) (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	16.7% Yes (1) 16.7% Many (1) 33.3% Needs Impv (2) 33.3% No (2) (4 N/A)

Question	FY2022 Metro 1 (sample=10)
73. Has the person made measurable progress on actions steps during this past year? '17IQR#13b, '18IQR80	20% Yes (2) 20% Many (2) 20% Needs Impv (2) 40% No (4)
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	20% Yes (2) 60% Many (6) 20% Needs Impv (2)
75. Are the ISP outcomes related to achieving the person's long-term vision? CPRQ68; '17IQR#7d, '18IQR82	80% Yes (8) 20% Many (2)
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	40% Yes (4) 50% Many (5) 10% No (1)
77. Are the Teaching and Support Strategies sufficient to ensure consistent implementation of the services planned? CPRQ71; '17IQR#7i, '18IQR84	20% Yes (2) 50% Many (5) 30% Needs Impv (3)
78. Are the recommendations and/or objectives/strategies of ancillary providers integrated into the ISP? CPRQ72; '17IQR#7m, '18IQR85	30% Yes (3) 60% Many (6) 10% Needs Impv (1)
79. Has the person made measurable progress in therapy this year? '17IQR#13a, '18IQR86	10% Yes (1) 60% Many (6) 20% Needs Impv (2) 10% No (1)
80. If needed, does the ISP contain a specific Medical Emergency Response Plan (MERP)? CPRQ73b '17IQR#20c, '18IQR87	40% Yes (4) 60% Many (6)
81. Does the ISP contain information regarding primary health (medical) care? CPRQ74, '18IQR88	60% Yes (6) 20% Many (2) 20% Needs Impv (2)
81a. Does the ISP face sheet contain contact information for the PCP? CPRQ74a, '18IQR88a	80% Yes (8) 20% Needs Impv (2)
81b. Is the Healthcare coordinator's name and contact information listed in the ISP? CPRQ74b, '18IQR88b	70% Yes (7) 10% Needs Impv (1) 20% No (2)
82. Does the ISP reflect how the person will obtain prescribed medications? CPRQ76, '18IQR89	50% Yes (5) 30% Many (3)

Question	FY2022 Metro 1 (sample=10)
	10% Needs Impv (1) 10% No (1)
83. Based on the evidence, is adequate transportation available for the person? <i>(Does the ISP reflect how the person will get to work/day activities, shopping, and social activities? CPRQ75, '18IQR90)</i>	90% Yes (9) 10% Needs Impv (1)
84. Does the ISP contain a list of adaptive equipment needed and who will provide it? CPRQ77; '17IQR#25a, '18IQR91	30% Yes (3) 40% Many (4) 30% Needs Impv (3)
85. Overall, is the ISP adequate to meet the person's needs? CPRQ78; '17IQR#7, '18IQR92	10% Yes (1) 90% Many (9)
86. Is the ISP being implemented? (If 85 is "3") CPRQ79 '17IQR#12, '18IQR93	0% Yes 100% Many (1) (9 N/A)
87a. Is the ISP being implemented? (If 85 is "0", "1", or "2") CPRQ80a '17IQR#12, '18IQR94a	11.1% Yes (1) 33.3% Many (3) 55.6% Needs Impv (5) (1 N/A)
87b. Are current services adequate to meet the person's needs? CPRQ80b '17IQR#11, '18IQR94b	0% Yes 77.8% Many (7) 22.2% Needs Impv (2) (1 N/A)
88. Was the direct service staff trained on the implementation of this person's ISP? CPRQ81, '18IQR95	20% Yes (2) 80% Many (8)
89. Were the direct service staff able to describe their responsibilities in providing daily care/supports to the person? CPRQ82, '18IQR96	10% Yes (1) 90% Many (9)
90. Based on all of the evidence, has the person achieved progress in the past year? CPRQ84; '17IQR#13, '18IQR98	10% Yes (1) 50% Many (5) 40% Needs Impv (4)
91. Overall, does the IDT have an appropriate expectation of growth for this person? CPRQ85; '17IQR#8d, '18IQR99	60% Yes (6) 40% Many (4)
92. Was the person provided the assistance and support needed to participate meaningfully in the planning process? CPRQ86; '17IQR#1b, '18IQR100	70% Yes (7) 30% Many (3)

Question	FY2022 Metro 1 (sample=10)
93. Is the person offered a range of opportunities for participation in each life area? CPRQ87, '18IQR101	100% Yes (10)
94. Does the person have the opportunity to make informed choices? CPRQ88; '17IQR#30, '18IQR102	66.7% Yes (6) 33.3% Many (3) (1 CND)
94a. About where and with whom to live? CPRQ89; '17IQR#23c, '18IQR102a	66.7% Yes (6) 33.3% Many (3) (1 CND)
94b. About where and with whom to work/spend his/her day? CPRQ90; '17IQR#23d, '18IQR102b	88.9% Yes (8) 11.1% Many (1) (1 CND)
94c. About where and with whom to socialize/spend leisure time? CPRQ91, '18IQR102c	88.9% Yes (8) 11.1% Many (1) (1 CND)
95. Does the evidence support that providers do not prevent the person from pursuing relationships? CPRQ92; '17IQR#31f, '18IQR103 <i>(and are respecting the rights of this person)</i>	100% Yes (10)
96. Overall, were all team members interviewed trained or knowledgeable on how to report abuse, neglect and exploitation? CPR 93*; '17IQR#35a, '18IQR105	40% Yes (4) 60% Many (6)
97. Does this person and/or guardian have access to the complaint processes/procedures? CPRQ94, '18IQR106	90% Yes (9) 10% Many (1)
98. Does the individual have restrictions that should be reviewed by a Human Rights Committee? '17IQR#34h, '18IQR107	100% Yes (10)
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	55.6% Yes (5) 44.4% Many (4) (1 N/A)
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	42.9% Yes (3) 42.9% Many (3) 14.2% No (1) (3 N/A)
101. Is the person protected from abuse, neglect and exploitation? '17IQR#35, '18IQR110	60% Yes (6) 40% Many (4)
102. Have all incidents of suspected abuse, neglect and exploitation been reported and investigated? '17IQR#35b, '18IQR111	85.7% Yes (6) 14.3% Many (1) (3 N/A)

Question	FY2022 Metro 1 (sample=10)
103. Is the individual safe? '17IQR#24, '18IQR112	50% Yes (5) 40% Many (4) 10% Needs Impv (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	30% Active (3) 70% Moderate (7)
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 (4) (6 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	40% Yes (4) 60% Many (6)
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	100% Yes (10)
111. Does the person get along with their day program/employment provider staff? CPRQ111, '18IQR120	100% Yes (9) (1 CND)
112. Does the person get along with their residential provider staff? CPRQ112, '18IQR121	100% Yes (10)
113. Are the individual members of the IDT following up on their responsibilities? CPRQ 114; '17IQR#10, '18IQR122	0% Yes 70% Many (7) 30% Needs Impv (3)
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	(10 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	40% Yes (4) 40% Many (4) 20% Needs Impv (2)

Question	FY2022 Metro 1 (sample=10)
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	50% Yes (5) 50% No (5)
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	100% Yes (5) (5 N/A)
121. Has the person changed residential/day services in the last year? CPRQ122, '18IQR130	30% Yes (3) 70% No (7)
122. If #121 is Yes, was the change Planned by the IDT? CPRQ122a, '18IQR131	100% Yes (3) (7 N/A)
123. If #121 is Yes, did the change meet the person's needs and/or preferences? CPRQ122b, '18IQR132	100% Yes (3) (7 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 80% Many (8) 20% Needs Impv (2)
125. Does (Name) have a current Person-Centered Assessment? '18IQR134	90% Yes (9) 10% Many (1)
126. Did this assessment address vocational interests, abilities and needs? CPRQ126; '17IQR#26a, '18IQR135	14.3% Yes (1) 85.7% Many (6) (3 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	80% Yes (8) 20% No (2)
129. Is the individual engaged in the Informed Choice Project? '18IQR138	(10 N/A)
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	75% Yes (6) 25% No (2) (2 N/A)

Question	FY2022 Metro 1 (sample=10)
131. If #130 is Yes, are these new experiences clearly documented in the ISP Work, Education and/or Volunteer History section? '18IQR140	66.7% Yes (4) 33.3% Many (2) (4 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	66.7% Yes (2) 33.3% Many (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	62.5% Yes (5) 25% Many (2) 12.5% Needs Impv (1) (2 N/A)
134. Has the individual received information regarding the range of employment options available to him/her? '17IQR#26c, '18IQR143	87.5% Yes (7) 12.5% Many (1) (2 N/A)
135. Has the Guardian received information regarding the range of employment options available for the individual? '18IQR144	87.5% Yes (7) 12.5% Needs Impv (1) (2 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	87.5% Yes (7) 12.5% Many (1) (2 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	87.5% Yes (7) 12.5% Many (1) (2 N/A)
138. Has the individual participated in work or volunteer activities during the past year? '18IQR147	42.9% Yes (3) 57.1% Many (4) (3 N/A)
139. Has the individual identified what type of work or volunteer activities he/she would like to do? '18IQR148	28.6% Yes (2) 57.1% Many (4) 14.3% Needs Impv (1) (3 N/A)
140. Does the Guardian support him/her working? '18IQR149	66.7% Yes (4) 33.3% No (2) (4 N/A)
142. Is the individual engaged in Supported Employment? CPRQ129, '18IQR151	14.3% Yes (1) 85.7% No (6) (3 N/A)

Question	FY2022 Metro 1 (sample=10)
144. Does the person have a Career Development Plan? CPRQ128 17IQR#26e, '18IQR153	100% Yes (1) (9 N/A)
145. Is the person considered by the IDT to need behavior services now? CPRQ131; '17IQR#5d, '18IQR154	50% Yes (5) 50% No (5)
146. Does the person need behavior services now? CPRQ132 '17IQR#11e, '18IQR155	50% Yes (5) 50% No (5)
147. Have behavioral assessments been completed? CPRQ133, '18IQR156	80% Yes (4) 20% Needs Impv (1) (5 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	80% Yes (4) 20% Many (1) (5 N/A)
149. Has the staff been trained on the Positive Behavior Support Plan? CPRQ135; '17IQR#10d, '18IQR158	80% Yes (4) 20% Many (1) (5 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	50% Yes (1) 50% Many (1) (8 N/A)
151. Does the person receive behavioral services consistent with his/her needs? CPRQ 136 '17IQR#5i, '18IQR160	40% Yes (2) 60% Many (3) (5 N/A)
152. Are behavior support services integrated into the ISP? CPRQ 137; '17IQR#11d, '18IQR161	20% Yes (1) 80% Many (4) (5 N/A)
153. Has the person received all adaptive equipment needed? CPRQ138; '17IQR#25b, '18IQR162	44.4% Yes (4) 55.6% Many (5) (1 N/A)
154. Has the person received all assistive technology needed? CPRQ139; '17IQR#25c, '18IQR163	70% Yes (7) 30% Many (3)

Question	FY2022 Metro 1 (sample=10)
155. Do direct care staff know how to appropriately help the person use his/her equipment? '17IQR#25f, '18IQR164	90% Yes (9) 10% Many (1)
156. Is the person's equipment and technology in good repair?'17IQR#25d, '18IQR165	80% Yes (8) 20% Many (2)
157. Is the person's equipment/technology available in all appropriate environments? '17IQR#25e, '18IQR166	50% Yes (5) 50% Many (5)
158. Has the person received all communication assessments and services? CPRQ140 ; '17IQR#10b, '18IQR167	40% Yes (4) 50% Many (5) 10% No (1)
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	80% Yes (8) 20% Many (2)
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	40% Yes (4) 50% Many (5) 10% Needs Impv (1)
161. Does the person receive services and supports recommended in the ISP? CPRQ143; '17IQR#11a, '18IQR170	90% Yes (9) 10% Needs Impv (1)
162. Does the person have adequate access to and use of generic services and natural supports? CPRQ144; '17IQR#33f, '18IQR171	100% Yes (10)
163. Is the person integrated into the community? CPRQ145; '17IQR#29g, '18IQR172	70% Yes (7) 30% Many (3)
164. Is the total program of the level of intensity adequate to meet this person's needs? CPRQ147; '17IQR#36, '18IQR174	0% Yes 80% Many (8) 20% Needs Impv (2)