A. Jackson Class Member Demographics – Northwest Region

When the NW sample was selected in January 2021, there were 15 Active Jackson Class Members in the Northwest Region, since that time, two individuals have passed away. There were 7 class members reviewed in the Northwest Region as part of the 2020 IQR. Details regarding all 15 class members currently active in the region are provided below.
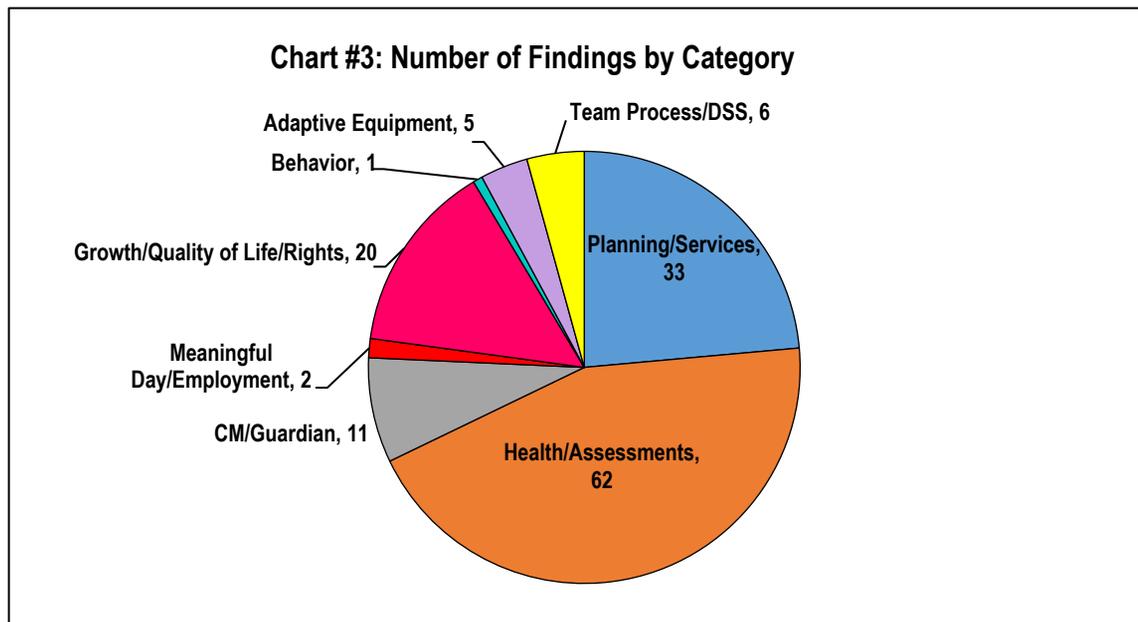
Chart #1: Demographics of JCMs in the Northwest Region							
Age		**Ethnicity**		**Day Service Type**			
30-39	0	Hispanic	1 (7%)	CCS	13 (87%)		
40-49	0	Caucasian	4 (27%)	CIE	1 (7%)		
50-59	6 (40%)	Native American	10 (67%)	Mi Via – Community Direct Support/Navigation	1 (7%)		
60-69	7 (46%)	Black/African American	0 (0%)				
70-79	2 (13%)	Asian	0 (0%)				
80+	0	**Gender**					
Average Age:	61	Male	8 (53.3%)	**Residential Service Type**			
		Female	7 (46.7%)	Supported Living	13 (87%)		
				Family Living	1 (7%)		
				Customized In-Home Supports	0 (0%)		
				Mi Via – In-Home Living Supports	1 (7%)		

Chart #2: Agencies and the Number of Jackson Class Members They Serve in the Northwest Region
(one JCM in the sample passed away shortly after the review)

Case Management	A Step Above (1)	Consumer Direct (Mi Via 1)	Excel (8)	Peak (3)	Rio Puerco (2)	
Residential	At Home Advocacy (Mi Via 1)	Dungarvin (6)	Ramah Care (4)	Tungland (4)		
Day	At Home Advocacy (Mi Via 1)	Dungarvin (6)	Empowerment (1)	PMS Shield (1)	Ramah Care (2)	Tungland (5)

B. Most Frequently Identified Findings by Category

For the 7 people in the review, there were a total of 140 Findings. The table below shows into what categories those findings fall.

Chart #3: Number of Findings by Category

- Adaptive Equipment, 5
- Behavior, 1
- Team Process/DSS, 6
- Growth/Quality of Life/Rights, 20
- Planning/Services, 33
- Meaningful Day/Employment, 2
- CM/Guardian, 11
- Health/Assessments, 62

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 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, and resolved in a way that is sustainable so that the identified issue remains "fixed".

Of the 140 Findings in the Northwest Review, there were 55 (39%) 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 Health/Assessments (24 repeat findings 44%), followed by Adequacy/Planning (14 repeat findings 25%). 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 -------------------------- Provider	AE/AC	Behavior	CM/ Guardian	Growth/ Quality of Life / Rights	Health/ Assmnts.	Meaningful Day / Supp. Empl	ISP and Services	Team/ DSS	Total
Dungarvin (4)	4	0	7	0	16	1	14	0	42
Tungland (3)	0	0	0	5	8	0	0	0	13
TOTAL	**4**	**0**	**7**	**5**	**24**	**1**	**14**	**0**	**55**

Chart #5: Repeat Findings by Area and Case Management Agency									
Area ---------------------------- Agency	AE/AC	Behavior	CM/ Guardian	Growth/ Quality of Life / Rights	Health/ Assmnts.	Meaningful Day / Supp. Empl	ISP and Services	Team/ DSS	Total
Excel (4)	3	0	4	2	18	1	7	0	35
PCCS (1)	0	0	1	3	3	0	1	0	8
Peak (1)	0	0	1	0	1	0	4	0	6
Rio Puerco (1)	1	0	1	0	2	0	2	0	6
TOTAL	**4**	**0**	**7**	**5**	**24**	**1**	**14**	**0**	**55**

D. Immediate and Special Findings

There were 7 Class Members reviewed in Northwest Region as part of the 2020 IQR. One (1) individual (14.3%) was found to have immediate and/or special findings. One (1) individual (14%) were found to have Immediate Needs and four (4) individuals (57%) were found to have special findings. There was one (1) Immediate finding and six (6) 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 are in the following topic areas:

4 aspiration/CARMP findings	3 finding identified related to Health Oversight/Tracking
1 finding regarding DNR	1 finding regarding guardian involvement
1 finding regarding document production	1 finding regarding equipment

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

Residential Provider	# JCM in Sample	# Immediate Findings	# Special Findings	Total both Categories
Dungarvin	4	1	3	4
Tungland	3	0	3	3
CM Agency				
Excel	4	1	4	5
Peak	1	0	1	1
PCCS	1	0	1	1
Rio Puerco	1	0	0	0

The following summarizes the details of the specific findings.

Chart #6b: Immediate/Special Identified Findings – 2020 IQR Northwest Region

Reg	CM	Res	Day	Immd	Spec	IR	Issue
**Immediate/Special Identified Findings – 2020 Northwest IQR**							
**Health Oversight Issues**							
NW	Excel	Dungarvin	Dungarvin	X			Based on document review and interviews, BK has experienced a concerning 11-pound weight loss since 8/21/2020. Per CARMP 2/24/2021, 10 lbs. weight loss/gain to be reported to PCP. No evidence PCP notified of 11-pound weight loss from 8/2020-2/2021. Nutrition report 3/29/21 indicates weight decrease from 105# to 94.8 since Nov Indicates significant weight loss 10.2# (10.7%) Nutrition report 3/29/21 indicates to add high calorie food items and high calorie nutrition shake daily. Per nursing interview 5/11/2021, BK does not have a shake/supplement daily and only had it when she was recovering from COVID (Jan. 2021). Per Residential on-site 5/17/2021, Ensure bottles were observed and Residential DSP explained BK began receiving ½ bottle of Ensure daily the week prior. When asked why BK is only receiving half a bottle a day, Residential DSP reported an order for the Ensure had yet to be received.
NW	Excel	Dungarvin	Dungarvin		X		Based on document review and interviews, no evidence Abnormal Involuntary Movements screenings have occurred during the review period. Assistance with Medication Delivery form signed form 3/9/2021 by PCP indicates AIMS is required every 3 months. Per Dungarvin RN interview 5/11/2021, AIMs has not been completed since COVID-19 restrictions went into place "due to no in-person visits". BK takes Trazodone.
NW	Excel	Dungarvin	Dungarvin		X		Based on document review and virtual on-site observation 5/17/2021, the most recently revised CARMP is not in the home. CARMP in home reflects annual date 7/1/2020. CARMP provided for review was revised 2/24/2021.
**Aspiration/CARMP Issues**							
NW	Excel	Tungland	Tungland		X		CARMP 07/23/2020 page 3, indicates that food should be bite size and should be between dime and quarter size. This is not consistent with Page 2 which indicates that NJ's food is to be pureed. Both CCS and Residential Staff reported food should be cut into bite size pieces. Observations showed that food was presented pureed on the day of review.
NW	PEAK	Dungarvin	Dungarvin		X		RB has experienced multiple hospitalizations for aspiration pneumonia since placement of G tube. Despite subsequently being placed on NPO status and transitioning to G/J tube, RB has continued to experience aspiration and was hospitalized at the time of this review. This continued recurrence of aspiration pneumonia indicates that the team has not yet identified adequate resources and strategies to successfully address this serious health this issue.
NW	PCCS	Tungland	Tungland		X		Based on document review the following concerns are related to the 3/05/2021 CARMP: a. CARMP 3/05/2021 does not describe positioning during oral medication delivery. b. CARMP 3/05/2021 does not describe positioning during oral hygiene or positioning of person assisting with oral care. c. CARMP 3/05/2021 does not report repositioning needed every 30 minutes while in wheelchair and repositioning every 2 hours to alternate between w/c and other furniture per HCP Skin and Wound 1/29/2021. d. CARMP has not been updated to include the RD's nutrient requirements recommendation from 1/20/2021 assessment. CARMP 3/05/2021 states "1295-1400 kcal, 48-57 grams of protein and 1500-1680 mL fluids". 1/20/2021 Annual Nutrition Evaluation recommends 1145 calories per day, 47 grams of protein daily, and 1505 ml fluid per day.
**Medication Issues**							
NW	Excel	Tungland	Tungland		X		Based on record review, virtual observations and interviews: Medications have inconsistencies. Please see the attached Medication Table with highlighted concerns.

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?

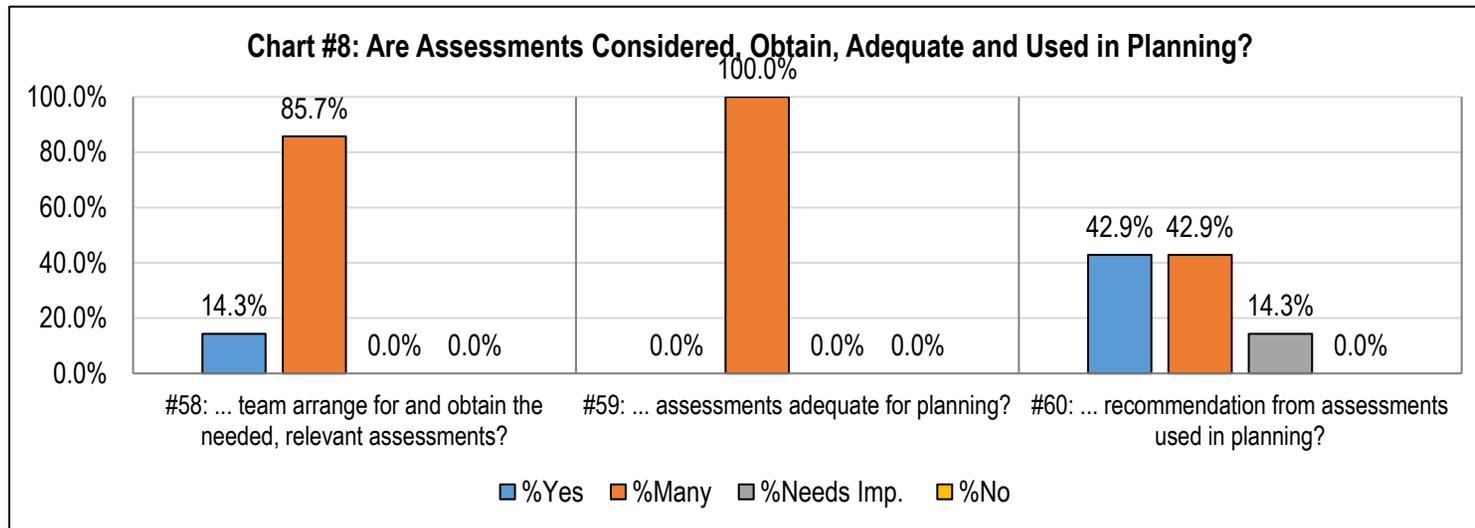| Category	%Yes	%Many	%Needs Imp.	%No
#51: … medical treatments... timely received?	14.3%	71.4%	14.3%	0.0%
#52: ...received … appropriate health screening/immunizations treatment?	0.0%	71.4%	28.6%	0.0%
#53: … receive medication as prescribed?	0.0%	42.9%	57.1%	0.0%
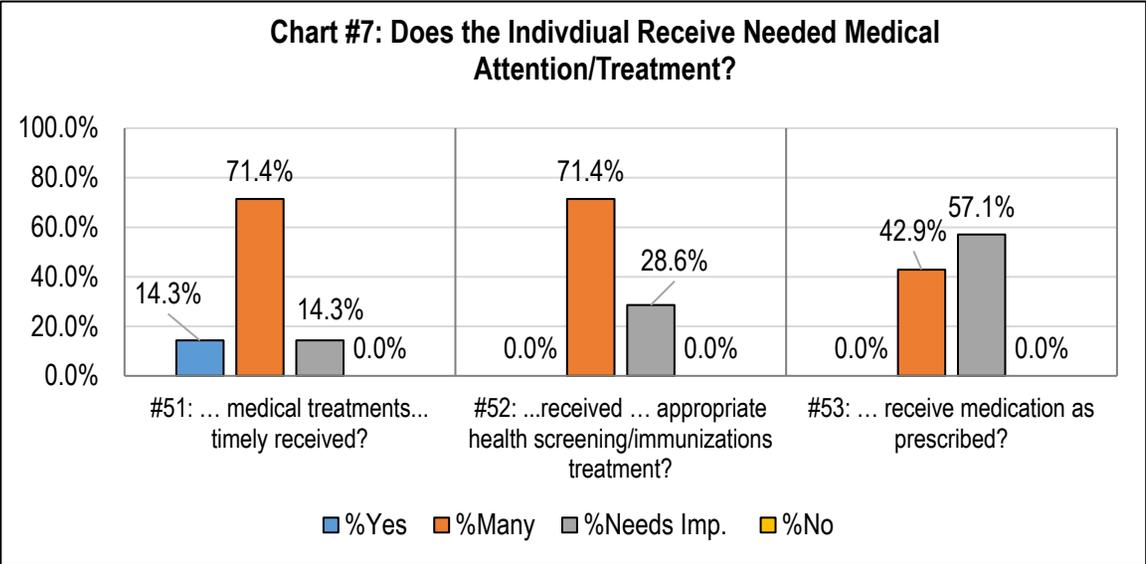
Ensuring individuals have the medical treatment they require includes scheduling and obtaining needed assessments and using information from those assessments to influence treatment and inform future planning. The IQR also evaluates the assessments needed by the individual and whether or not those assessments 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

Data values:
- #58: ... team arrange for and obtain the needed, relevant assessments? — %Yes: 14.3%, %Many: 85.7%, %Needs Imp.: 0.0%, %No: 0.0%
- #59: ... assessments adequate for planning? — %Yes: 0.0%, %Many: 100.0%, %Needs Imp.: 0.0%, %No: 0.0%
- #60: ... recommendation from assessments used in planning? — %Yes: 42.9%, %Many: 42.9%, %Needs Imp.: 14.3%, %No: 0.0%

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, Regional and State DDSD and DHI staff, the individual and his/her team prior to becoming final[1]. The table below summarizes some of the issues which were identified. It is important to note that the information below identifies the underlined 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. Nationally recommended immunizations/screenings not discussed or completed (17 issues)
2. Medication, MAR, Dr. orders inconsistencies (58 issues)

It is worth noting that Tungland had 37.5% of the total issues with three (3) people (43%) in the sample. Dungarvin had 62.5% of the total issues with four (4) people (57%) in the sample.

Chart #9: Type of Issues identified by Residential Agency

Chart #9: Type of Issues identified by Residential Agency			
PROVIDER (# IN SAMPLE)	**Dungarvin (4)**	**Tungland (3)**	**TOTAL**
ISSUE			
APPOINTMENTS			
Audiology: not completed	2	0	**2**
Dental: follow up not completed / not timely	1	0	**1**
PCP: follow up not completed / not timely	0	5	**5**
Specialists: follow up not completed / not timely	5	1	**6**
MAR/MEDICATIONS			

Chart #9: Type of Issues identified by Residential Agency			
MAR/Medication/Dr. Orders do not match (med strength, delivery method, purpose of med)	39	19	**58**
MAR not received or in Therap	0	1	**1**
Screenings			
a. No evidence of Hep B/HepC screening or team discussion thereof	3	1	**4**
b. No evidence of shingles vaccine or team discussion thereof	1	2	**3**
c. No evidence of HIV screening or team discussion thereof	2	1	**3**
d. No evidence of TD/Tdap immunizations or team discussion thereof	0	1	**1**
e. No evidence of colorectal screening or team discussion thereof	0	1	**1**
f. No evidence of flu or pneumonia vaccine or team discussion thereof	3	0	**3**
g. No evidence of mammogram or team discussion thereof	0	1	**1**
h. No evidence of cervical cancer screening or team discussion thereof	0	1	**1**
AIMS or other TD screening	2	0	**2**
No evidence of test / lab screening or alt. option discussed.	0	1	**1**
No evidence of recommended bone density scan	2	1	**3**

Chart #9: Type of Issues identified by Residential Agency			
Totals	60	36	96
Average	15	12	13.7

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
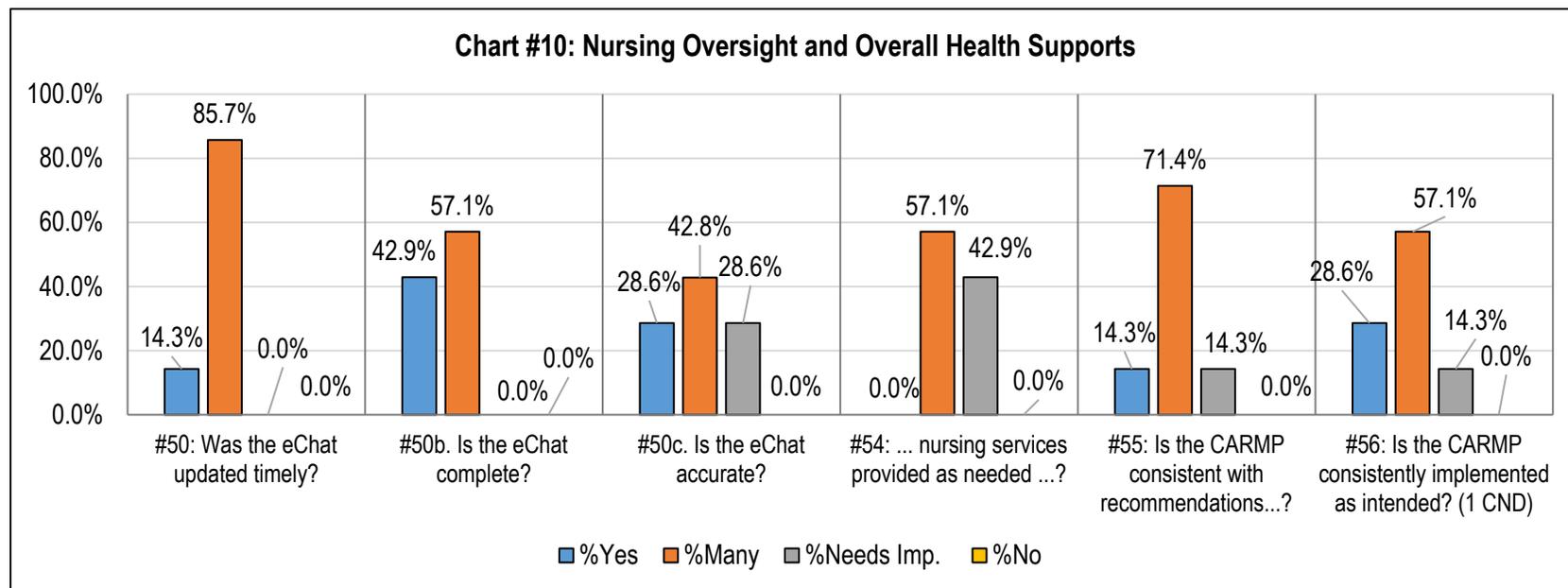
Oversight provided by nurses is a critical safeguard for Jackson Class Members, direct support professionals and their supervisors. This includes the adequacy and incorporation of needed (health related) tracking. The table below provides specific details, by Residential provider, of nursing related issues identified during the 2020 Northwest 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 nursing activities were identified most frequently as having issues.

1. HCPs (18)
2. Inconsistencies across plans (11)
3. e-CHAT (11)

It is worth noting that Tungland had 39.5% of the total issues with three (3) people (43%) in the sample. Dungarvin had 60.5% of the total issues with four (4) people (57%) in the sample.

Chart #11: Type of Nursing Related Issues Identified by Residential Provider			
PROVIDER (# IN SAMPLE)	**Dungarvin (4)**	**Tungland (3)**	**TOTAL**
ISSUE			
Nursing Assessments			
Aspiration: documents conflict on risk level	1	1	**2**
CARMP inaccurate/ incomplete/not current	5	0	**5**
e-CHAT incorrect/inconsistent /not updated timely	2	1	**3**
e-CHAT inconsistencies with diagnoses/conditions in other documents	1	10	**11**
HCPs inaccurate/incomplete	12	6	**18**
HCPs need review/updating/more detail	0	1	**1**
HCPs not found	1	0	**1**
HCP for Aspiration and CARMP	0	1	**1**

Chart #11: Type of Nursing Related Issues Identified by Residential Provider			
MERPs inaccurate/incomplete	4	0	**4**
MERPs need review, updating, more detail	0	2	**2**
Inconsistency between HCP/ CARMP/MERP/e-CHAT/MARS/Plans	7	4	**11**
Nursing Documentation			
Nursing reports not timely completed	4	0	**4**
Nursing reports not provided for review	1	2	**3**
Nursing reports not accurate/missing information/inadequate	7	2	**9**
No evidence of nursing face-to-face visits as required	3	0	**3**
Nurse not attending ISP meeting	1	2	**3**
Totals	**49**	**32**	**81**
Average	**12.25**	**10.7**	**11.6**

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
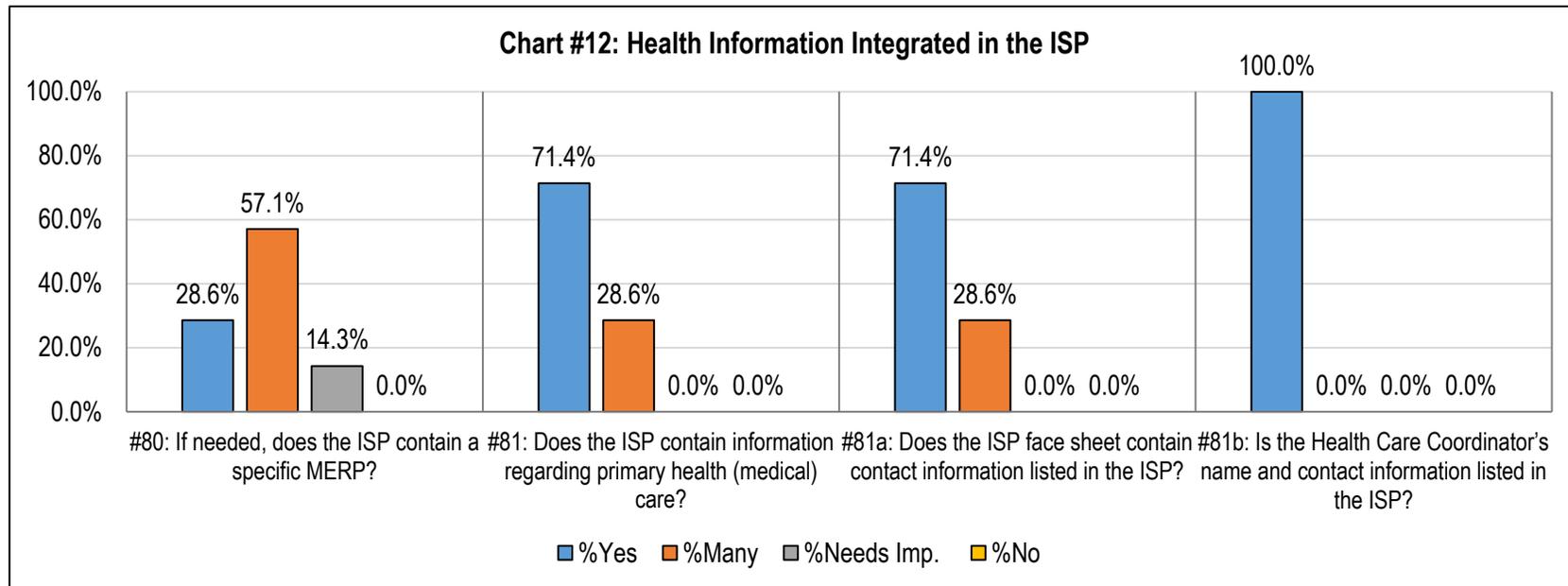
There are many components to ensuring the health and safety of individuals with I/DD. These components vary and are unique to each individual. While the scored protocol questions cannot encompass each and every issue, it does allow for a general score that measures the adequacy of response to the individual's 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 7 people reviewed in the Northwest Region, overall, 85.7% of individuals had many of their health supports/needs adequately addressed. There was one (1) individual whose health supports need improvement. (14.3%).

Chart #13: Supports/needs being adequately addressed?

- 0.0% — %Yes
- 85.7% — %Many
- 14.3% — %Needs Imp.
- 0.0% — %No

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

■%Yes   ■%Many   ■%Needs Imp.   ■%No
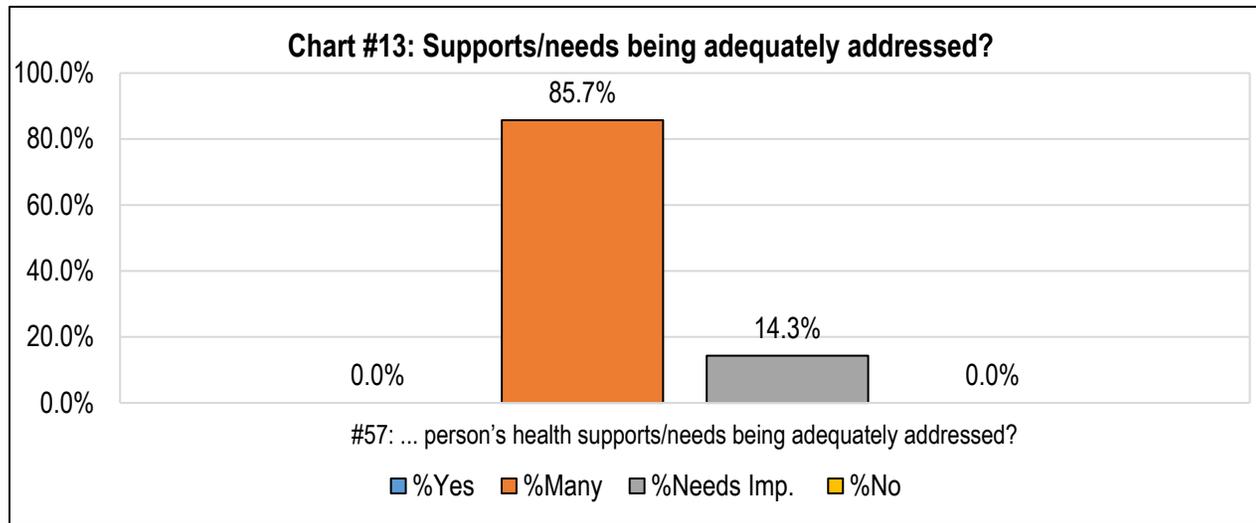
As noted earlier, beyond the scored protocol questions, the Findings Letters issued for each class member in a review provides person-specific detail about the issues which impact the answer to protocol question #57. Again, it is important to note that the indications are number of issues found; not 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:

- Inconsistent healthcare tracking, especially intake and output and weight

It is worth noting that Tungland had 35.8% of the total issues, with three (3) people (43%) in the sample. Dungarvin had 64.2% of the total issues with four (4) people (57%) in the sample.

Chart #14: Issues Found Which Affect the Adequacy of Health Care Provision, by Residential Provider			
PROVIDER (# IN SAMPLE)	Dungarvin (4)	Tungland (3)	TOTAL
ISSUE			
Healthcare Tracking			
Fluid Input/Urine Output/Bowel Movement Tracking issues	30	20	50
Weight Tracking issues	14	7	21
Nutrition			
Nutrition: Inadequate/inconsistent	3	0	3
Nutrition: not provided for review	0	1	1
Nutrition: Not timely	0	2	2
Physical Therapy			
PT Report/Eval does not adequate	2	0	2
PT Report/Eval/WDSI not provided for review	1	0	1
Occupational Therapy			
OT Report/Eval not available/timely for planning/use	1	0	1
OT Report/Eval does not adequate	2	0	2
OT Report/Eval/WDSI not provided for review	1	0	1
Speech Language Pathology			

Chart #14: Issues Found Which Affect the Adequacy of Health Care Provision, by Residential Provider			
SLP Report/Eval not available/timely for planning/use	1	3	4
SLP Report/Eval not identifyadequate	2	0	2
SLP Report/Eval not provided for review	1	0	1
Behavior Support Consultation			
Behavior Report/Eval not adequate	3	0	3
BSC Report/Eval not provided for review	0	1	1
Totals **Average**	**61** **15.25**	**34** **11.3**	**95** **13.6**

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 2020 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 2020 Northwest 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?
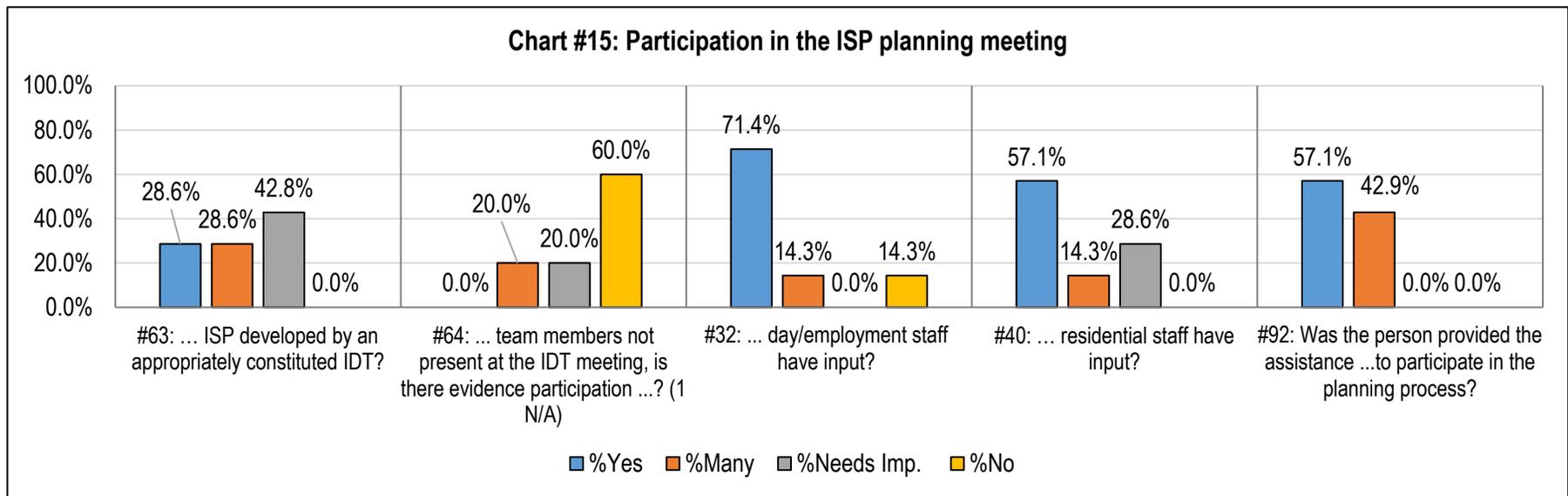
Chart #15: Participation in the ISP planning meeting

	#63: … ISP developed by an appropriately constituted IDT?	#64: ... team members not present at the IDT meeting, is there evidence participation ...? (1 N/A)	#32: ... day/employment staff have input?	#40: … residential staff have input?	#92: Was the person provided the assistance ...to participate in the planning process?
%Yes	28.6%	0.0%	71.4%	57.1%	57.1%
%Many	28.6%	20.0%	14.3%	14.3%	42.9%
%Needs Imp.	42.8%	20.0%	0.0%	28.6%	0.0%
%No	0.0%	60.0%	14.3%	0.0%	0.0%

Chart #16: ISP Development Participation, by Residential Provider

Res. Agency (# in sample)	Question				
	#63	**#64**	**#32**	**#40**	**#92**
Dungarvin (4)	25% Yes (1) 50% Many (2) 25% Needs Impv (1)	0% Yes 33.3% Needs Impv (1) 66.7% No (2) (1 N/A)	75% Yes (3) 25% Many (1)	50% Yes (2) 50% Needs Impv (2)	50% Yes (2) 50% Many (2)
Tungland (3)	33.3% Yes (1) 66.7% Needs Impv (2)	0% Yes 50% Many (1) 50% No (1) (1 N/A)	66.7% Yes (2) 33.3% No (1)	66.7% Yes (2) 33.3% Many (1)	66.7% Yes (2) 33.3% Many (1)

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

CM Agency (# in sample)	Question				
	#63	**#64**	**#32**	**#40**	**#92**
Excel (4)	25% Yes (1) 25% Many (1) 50% Needs Impv (2)	0% Yes 33.3% Needs Impv (1) 66.7% No (2)	75% Yes (3) 25% Many (1)	25% Yes (1) 25% Many (1) 50% Needs Impv (2)	50% Yes (2) 50% Many (2)
Peak (1)	100% Yes (1)	(1 N/A)	100% Yes (1)	100% Yes (1)	100% Yes (1)
PCCS (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Many (1)	0% Yes 100% No (1)	100% Yes (1)	100% Yes (1)
Rio Puerco (1)	0% Yes 100% Many (1)	0% Yes 100% No (1)	100% Yes (1)	100% Yes (1)	0% Yes 100% 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 2020 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 2020 Northwest 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?

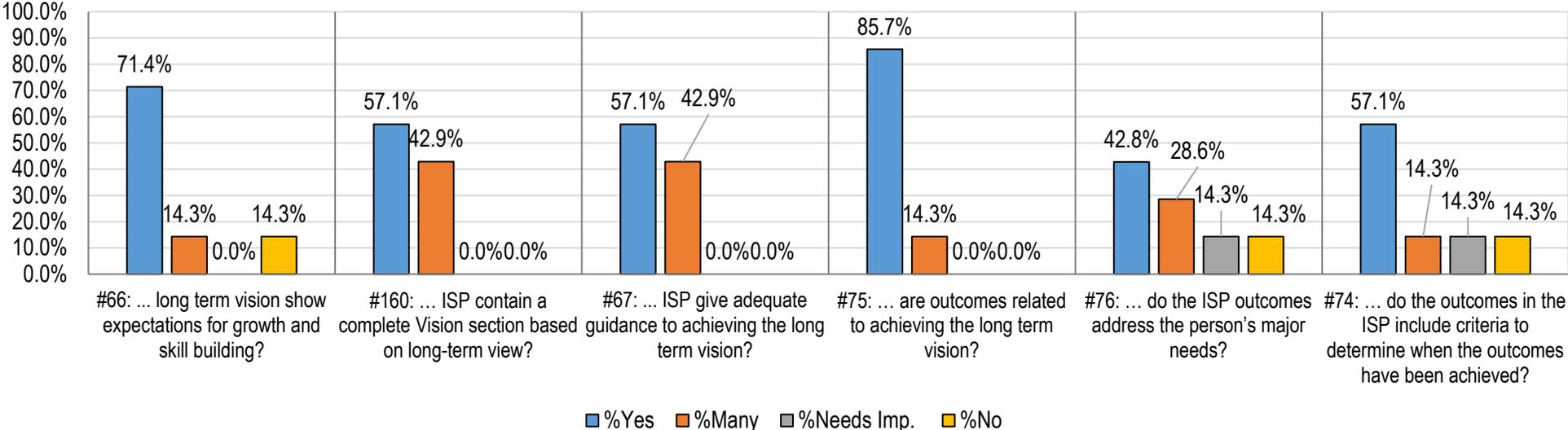Chart #18: Long Term Vision and Outcomes Protocol Questions

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

Res Agency (# in sample)	Question					
	#66	#160	#67	#75	#76	#74
Dungarvin (4)	50% Yes (2) 25% Many (1) 25% No (1)	25% Yes (1) 75% Many (3)	50% Yes (2) 50% Many (2)	75% Yes (3) 25% Many (1)	50% Yes (2) 25% Many (1) 25% Needs Impv (1)	50% Yes (2) 25% Many (1) 25% No (1)
Tungland (3)	100% Yes (3)	100% Yes (3)	66.7% Yes (2) 33.3% Many (1)	100% Yes (3)	33.3% Yes (1) 33.3% Many (1) 33.3% No (1)	66.7% Yes (2) 33.3% Needs Impv(1)

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

CM Agency (# in sample)	Question					
	#66	#160	#67	#75	#76	#74
Excel (4)	75% Yes (3) 25% Many (1)	75% Yes (3) 25% Many (1)	75% Yes (3) 25% Many (1)	100% Yes (4)	50% Yes (2) 25% Many (1) 25% No (1)	100% Yes (4)
Peak (1)	0% Yes 100% No (1)	0% Yes 100% Many (1)	100% Yes (1)	100% Yes (1)	0% Yes 100% Many (1)	0% Yes 100% No (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)
Rio Puerco (2)	100% Yes (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Need Impv (1)	0% Yes 100% 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?
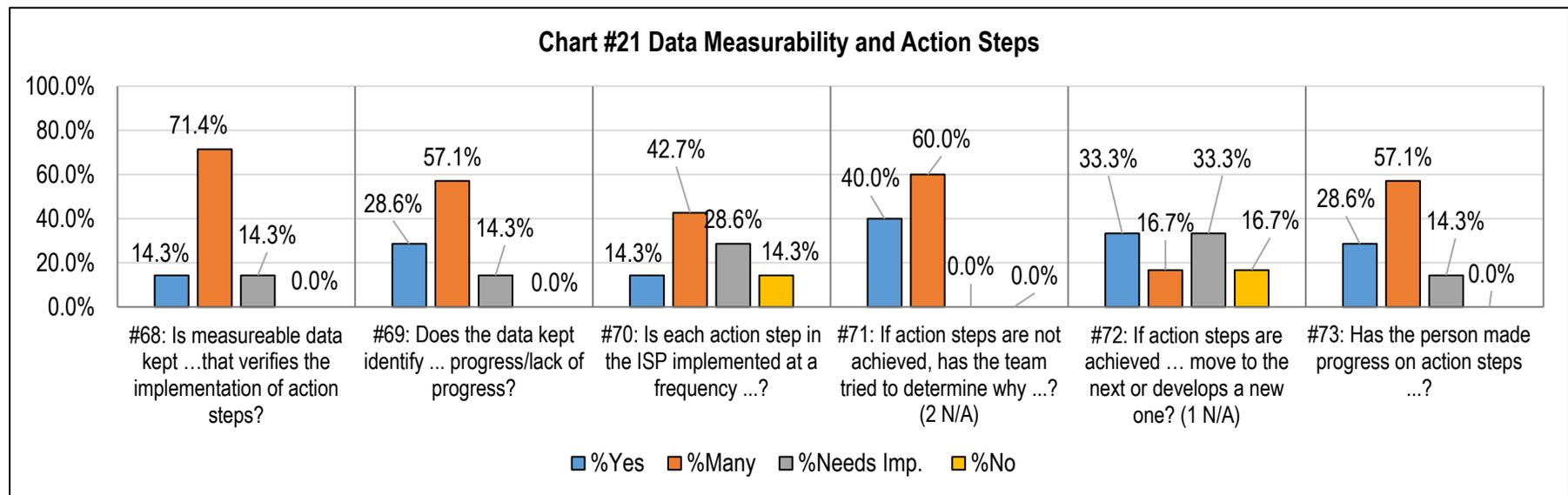Question #73: Has the person made measurable progress on action steps during the past year?

Chart #21 Data Measurability and Action Steps

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

Res Agency (# in sample)	#68	#69	#70	#71	#72	#73
Dungarvin (4)	0% Yes 100% Many (4)	0% Yes 75% Many (3) 25% Needs Impv (1)	0% Yes 50% Many (2) 50% Needs Impv (2)	33.3% Yes (1) 66.7% Many (2) (1 N/A)	25% Yes (1) 25% Many (1) 50% Needs Impv (2)	0% Yes 75% Many (3) 25% Needs Impv (1)
Tungland (3)	33.3% Yes (1) 33.3% Many (1) 33.3% Needs Impv (1)	66.7% Yes (2) 33.3% Many (1)	33.3% Yes (1) 33.3% Many (1) 33.3% No (1)	50% Yes (1) 50% Many (1) (1 N/A)	50% Yes (1) 50% No (1) (1 N/A)	66.7% Yes (2) 33.3% Many (1)

The header "Question" spans columns #68–#73.

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

CM Agency (# in sample)	#68	#69	#70	#71	#72	#73
Excel (3)	25% Yes (1) 75% Many (3)	25% Yes (1) 50% Many (2) 25% Needs Impv (1)	25% Yes (1) 50% Needs Impv (2) 25% No (1)	50% Yes (1) 50% Many (1) (2 N/A)	50% Yes (2) 25% Many (1) 25% No (1)	25% Yes (1) 50% Many (2) 25% Needs Impv (1)
Peak (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	100% Yes (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Many (1)
PCCS (1)	0% Yes 100% Needs Impv (1)	100% Yes (1)	0% Yes 100% Many (1)	0% Yes 100% Many(1)	1 (N/A)	100% Yes (1)
Rio Puerco (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)	0% Yes 100% Many (1)

The header "Question" spans columns #68–#73.

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 2020 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?
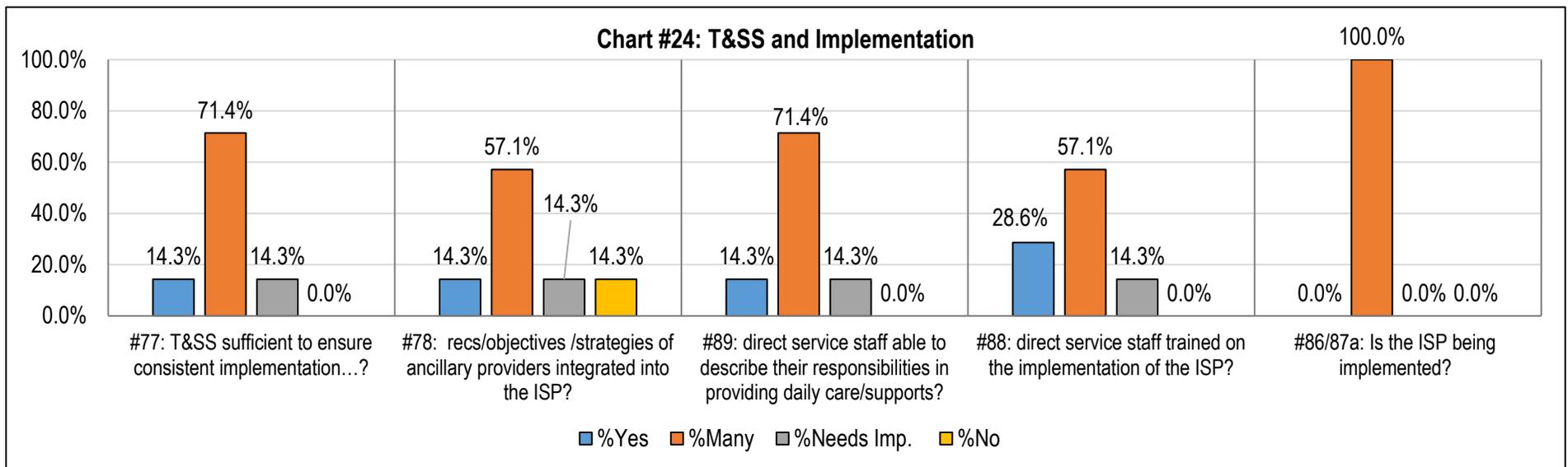> Question #86/87a: Is the ISP being implemented?

Chart #24: T&SS and Implementation

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

Res. Agency (# in sample)	Question				
	#77	**#78**	**#89**	**#88**	**#87a**
Dungarvin (4)	0% Yes 75% Many (3) 25% No (1)	0% Yes 50% Many (2) 25% Needs Impv (1) 25% No (1)	25% Yes (1) 50% Many (2) 25% Needs Impv (1)	25% Yes (1) 50% Many (2) 25% Needs Impv (1)	0% Yes 100% Many (4)
Tungland (3)	33.3% Yes (1) 66.7% Many (2)	33.3% Yes (1) 66.7% Many (2)	0% Yes 100% Many (3)	33.3% Yes (1) 66.7% Many (2)	0% Yes 100% Many (3)

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

CM Agency (# in sample)	Question				
	#77	**#78**	**#89**	**#88**	**#87a**
Excel (3)	0% Yes 100% Many (4)	0% Yes 100% Many (4)	0% Yes 75% Many (3) 25% Needs Impv (1)	25% Yes (1) 50% Many (2) 50% Needs Impv (1)	0% Yes 100% Many (4)
Peak (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)
PCCS (1)	100% Yes (1)	100% Yes (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)
Rio Puerco (1)	0% Yes 100% No(1)	0% Yes 100% No (1)	100% Yes (1)	100% Yes (1)	0% Yes 100% Many (1)

As evidenced above, the different components of each person's ISP are evaluated. Based on that analysis, an overview of the adequacy of ISP content as well as implementation and effectiveness of the ISP can be determined. There are multiple questions in the 2020 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?
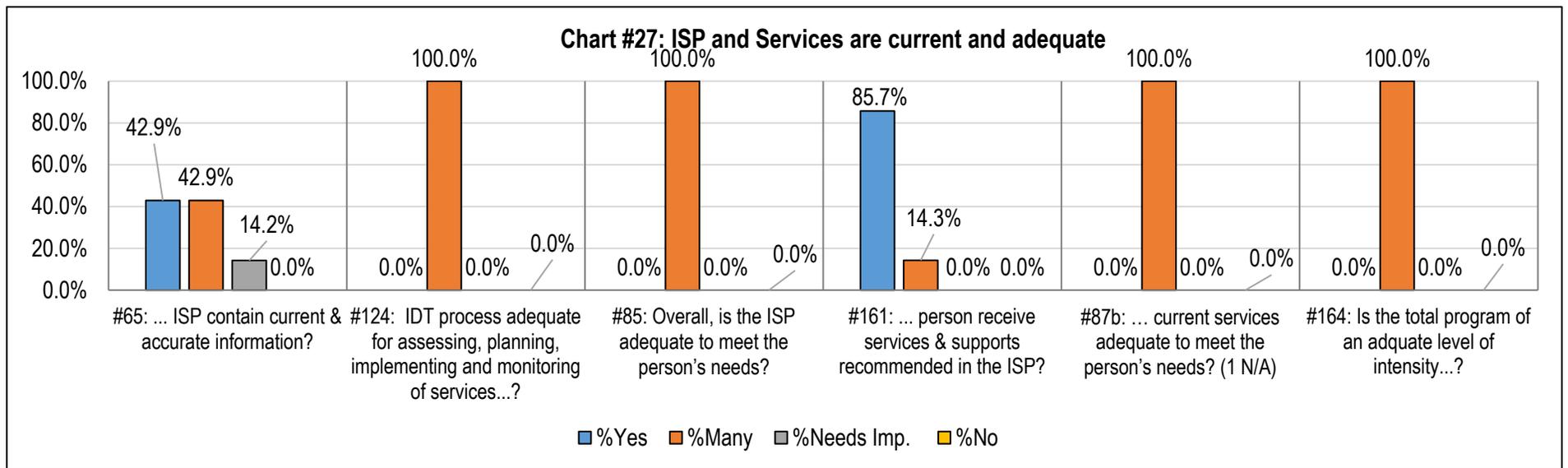Question #164: Is the total program of the level of intensity adequate to meet this person's needs?

Chart #27: ISP and Services are current and adequate

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

Res. Agency (# in sample)	Question					
	#65	**#124**	**#85**	**#161**	**#87b**	**#164**
Dungarvin (4)	50% Yes (2) 50% Many (2)	0% Yes 100% Many (4)	0% Yes 100% Many (4)	100% Yes (4)	0% Yes 100% Many (4)	0% Yes 100% Many (4)
Tungland (3)	33.3% Yes (1) 33.3% Many (1) 33.3% Needs Impv (1)	0% Yes 100% Many (3)	0% Yes 100% Many (3)	66.7% Yes (2) 33.3% Many (1)	0% Yes 100% Many (3)	0% Yes 100% Many (3)

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

CM Agency (# in sample)	Question					
	#65	**#124**	**#85**	**#161**	**#87b**	**#164**
Excel (3)	50% Yes (2) 50% Many (2)	0% Yes 100% Many (4)	0% Yes 100% Many (4)	75% Yes (3) 25% Many (1)	0% Yes 100% Many (4)	0% Yes 100% Many (4)
Peak (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)
PCCS (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)
Rio Puerco (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% Many (1)

G. Case Management

Case Management services are intended to be person-centered and are key to enabling people to pursue their desired life outcomes while gaining greater independence and access to needed services and supports. While the number of findings in the 2020 Northwest Region IQR in the Case Management area are the fourth 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

Question	%Yes	%Many	%Needs Imp.	%No
#24: Does the case manager "know" the person?	85.7%	14.3%	0.0%	0.0%
#25: Does the case manager understand his/her role/job?	14.3%	71.4%	14.3%	0.0%
#26: Is the case manager available to the person?	85.7%	14.3%	0.0%	0.0%
#27: ... case manager able to describe the person's health related needs?	28.6%	71.4%	0.0%	0.0%
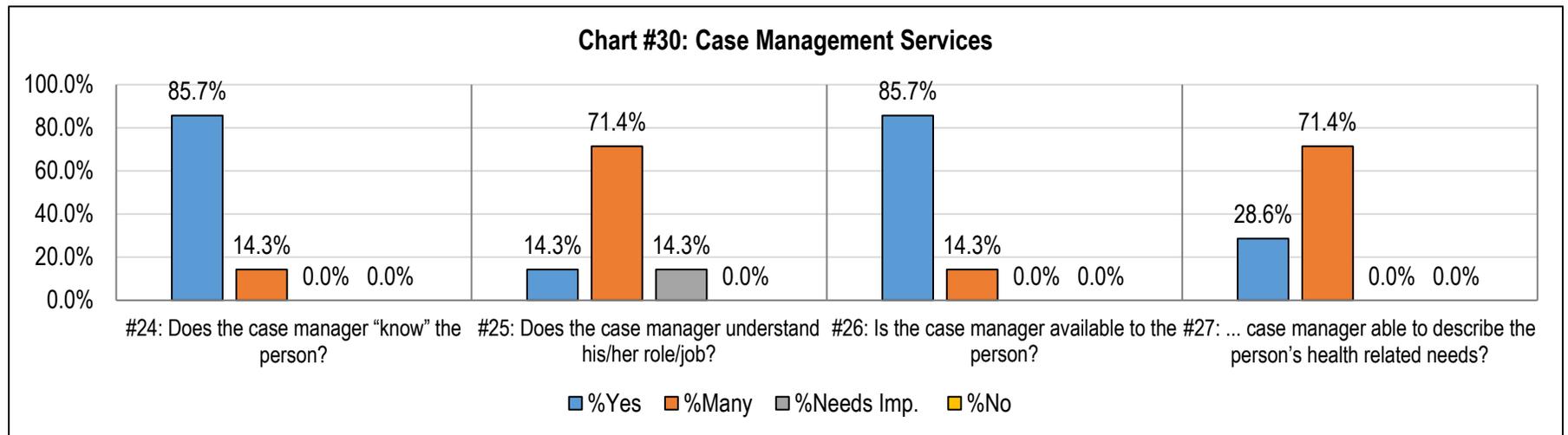
Chart #31: Case Management Scores, by Case Management Agency

CM Agency (# in sample)	Question			
	#24	**#25**	**#26**	**#27**
Excel (4)	75% Yes (3) 25% Many (1)	25% Yes (1) 75% Many (3)	75% Yes (3) 25% Many (1)	50% Yes (2) 50% Many (2)
Peak (1)	100% Yes (1)	0% Yes 100% Many (1)	100% Yes (1)	0% Yes 100% Many (1)
PCCS (1)	100% Yes (1)	0% Yes 100% Needs Impv (1)	100% Yes (1)	0% Yes 100% Many (1)
Rio Puerco (1)	100% Yes (1)	0% Yes 100% Many (1)	100% Yes (1)	0% Yes 100% Many (1)

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?

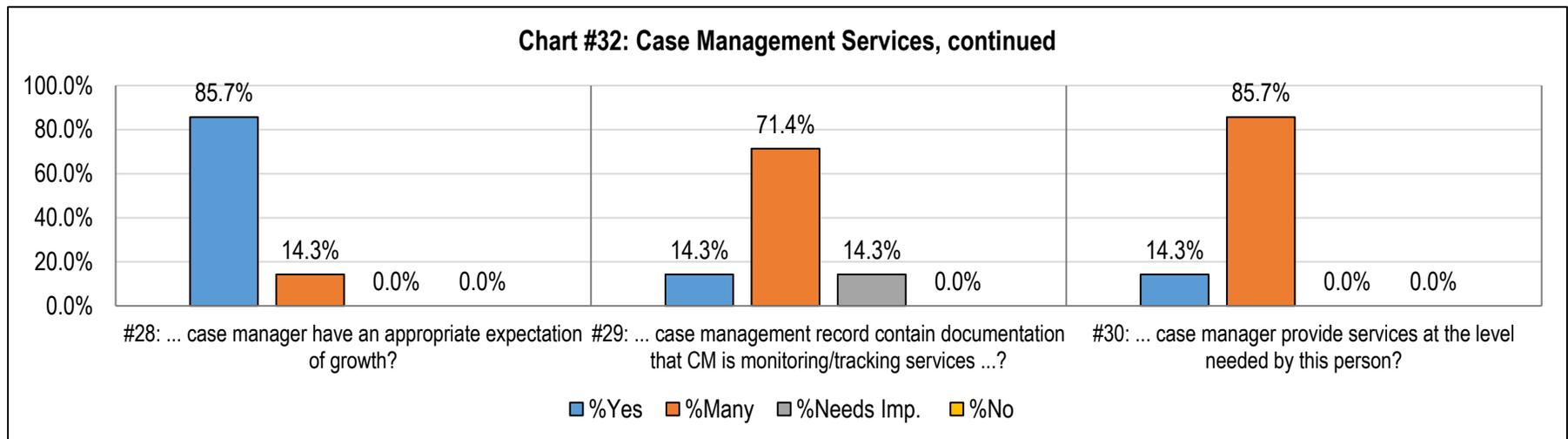Question #30: Does the case manager provide case management services at the level needed by this person?

Chart #32: Case Management Services, continued

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

CM Agency (# in sample)	Question		
	#28	**#29**	**#30**
Excel (4)	75% Yes (3) 25% Many (1)	25% Yes (1) 75% Many (3)	25% Yes (1) 75% Many (3)
Peak (1)	100% Yes (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)
PCCS (1)	100% Yes (1)	0% Yes 100% Needs Impv (1)	0% Yes 100% Many (1)
Rio Puerco (1)	100% Yes (1)	0% Yes 100% Many (1)	0% Yes 100% 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?-Question is no longer asked as project no longer exists.
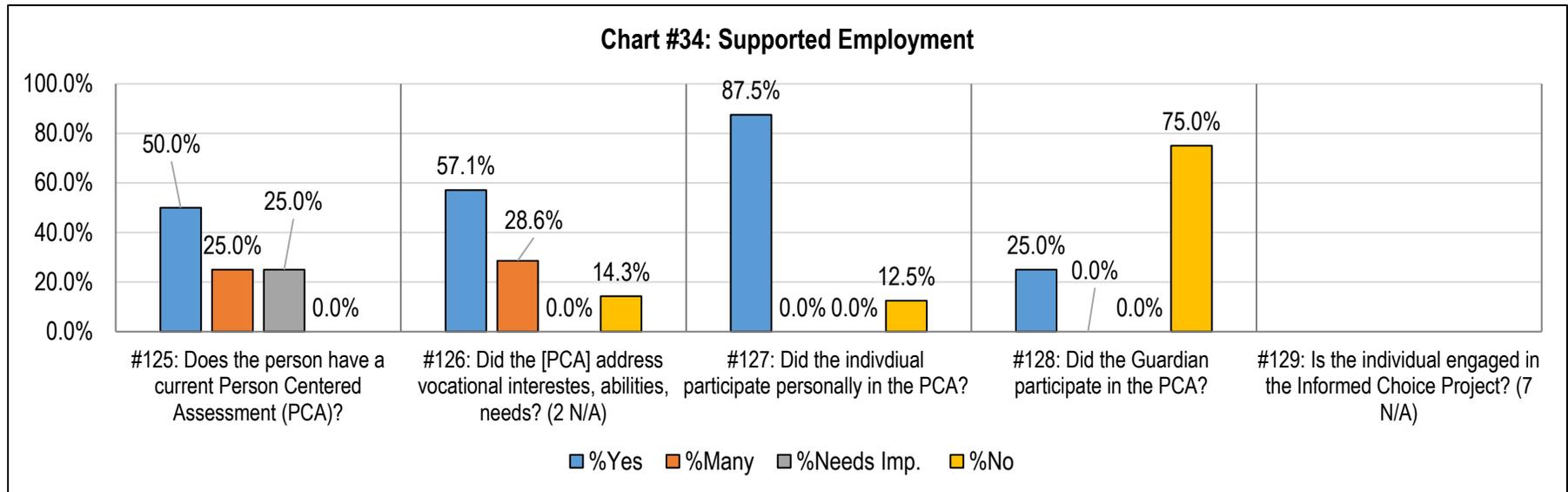
Chart #34: Supported Employment

Chart #35: Supported Employment Scores by Provider Agency

Res. Agency (# in sample)	Question				
	#125	**#126**	**#127**	**#128**	**#129**
Dungarvin (4)	50% Yes (2) 50% Many (2)	66.7% Yes (2) 33.3% Many (1) (1 N/A)	75% Yes (3) 25% No (1)	75% Yes (3) 25% No (1)	(4 N/A)
Tungland (3)	50% Yes (1) 50% Many (1) (1 N/A)	50% Yes (1) 50% No (1) (1 N/A)	100% Yes (3)	33.3% Yes (1) 66.7% No (2)	(3 N/A)

Chart #36: Supported Employment Scores by Case Management Agency

CM Agency (# in sample)	Question				
	#125	**#126**	**#127**	**#128**	**#129**
Excel (4)	66.7% Yes (2) 33.3% Many (1) (1 N/A)	66.7% Yes (2) 33.3% No (1) (1 N/A)	100% Yes (4)	50% Yes (2) 50% No (2)	(4 N/A)
Peak (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)	100% Yes (1)	100% Yes (1)	(1 N/A)
PCCS (1)	100% Yes (1)	(1 N/A)	100% Yes (1)	0% Yes 100% No (1)	(1 N/A)
Rio Puerco (1)	0% Yes 100% Many (1)	100% Yes (1)	0% Yes 100% No (1)	100% Yes (1)	(1 N/A)

2. **Components of Informed Choice: <u>Information and Experience</u>**

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?
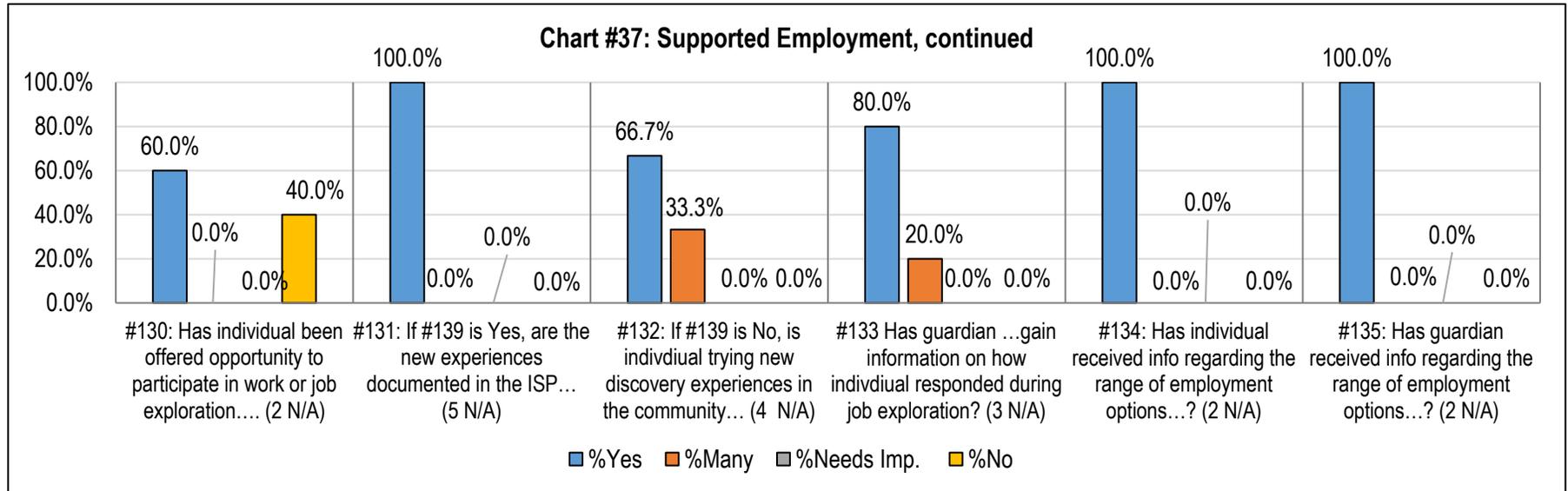
Chart #37: Supported Employment, continued

■%Yes ■%Many □%Needs Imp. □%No

Chart #38: Supported Employment Scores by Provider Agency

Res. Agency (# in sample)	Question					
	#130	**#131**	**#132**	**#133**	**#134**	**#135**
Dungarvin (4)	66.7% Yes (2) 33.3% No (1) (1 N/A)	100% Yes (1) (3 N/A)	50% Yes (1) 50% Many (1) (2 N/A)	100% Yes (3) (1 N/A)	100% Yes (3) (1 N/A)	100% Yes (3) (1 N/A)
Tungland (3)	50% Yes (1) 50% No (1) (1 N/A)	100% Yes (1) (2 N/A)	100% Yes (1) (2 N/A)	50% Yes (1) 50% Many (1) (1 N/A)	100% Yes (2) (1 N/A)	100% Yes (2) (1 N/A)

Chart #39: Supported Employment Scores by Case Management Agency

CM Agency (# in sample)	Question					
	#130	**#131**	**#132**	**#133**	**#134**	**#135**
Excel (4)	33.3% Yes (1) 66.7% No (2) (1 N/A)	100% Yes (1) (3 N/A)	50% Yes (1) 50% Many (1) 2 (N/A)	66.7% Yes (2) 33.3% Many (1) (1 N/A)	100% Yes (3) (1 N/A)	100% Yes (3) (1 N/A)
Peak (1)	100% Yes (1)	100% Yes (1)	(1 N/A)	100% Yes (1)	100% Yes (1)	100% Yes (1)
PCCS (1)	(1 N/A)	(1 N/A)	(1 N/A)	(1 N/A)	(1 N/A)	(1 N/A)
Rio Puerco (1)	100% Yes (1)	(1 N/A)	100% Yes (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)

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

	%Yes	%Many	%Needs Imp.	%No
#136: If there are barriers to employmet has… addressed how to overcome...? (2 N/A)	60.0%	20.0%	0.0%	20.0%
#137: If there are barries to employmnet has Team addressed with Guardian…? (2 N/A)	60.0%	0.0%	0.0%	40.0%
#138: Has the individual participated in work or volunteer activities…? (2 N/A)	40.0%	20.0%	0.0%	40.0%
#139: Has the indivdiual identified what type of work or volunteer activities…? (2 N/A)	40.0%	40.0%	0.0%	20.0%
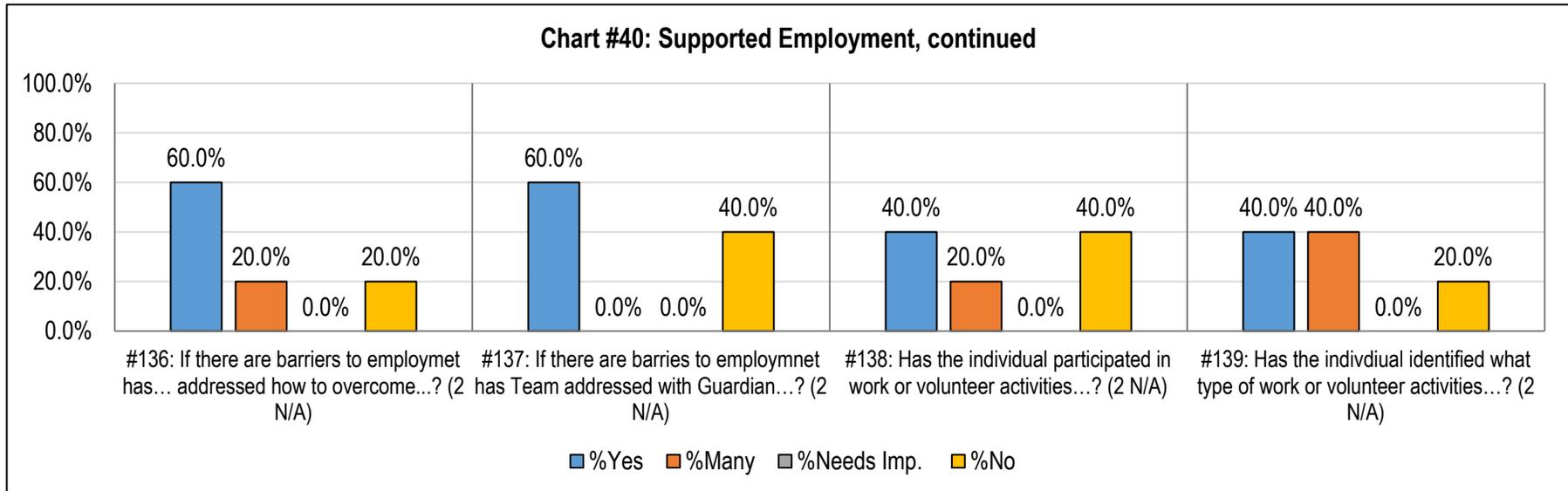
Chart #41: Supported Employment Scores by Provider Agency

Res. Agency (# in sample)	Question			
	#136	**#137**	**#138**	**#139**
Dungarvin (4)	66.7% Yes (2) 33.3% No (1) (1 N/A)	66.7% Yes (2) 33.3% No (1) (1 N/A)	33.3% Yes (1) 33.3% Many (1) 33.3% No (1) (1 N/A)	33.3% Yes (1) 66.7% Many (2) (1 N/A)
Tungland (3)	50% Yes (1) 50% Many (1) (1 N/A)	50% Yes (1) 50% No (1) (1 N/A)	50% Yes (1) 50% No (1) (1 N/A)	50% Yes (1) 50% No (1) (1 N/A)

Chart #42: Supported Employment Scores by Case Management Agency

CM Agency (# in sample)	Question			
	#136	**#137**	**#138**	**#139**
Excel (4)	33.3% Yes (1) 33.3% Many(1) 33.3% No (1) (1 N/A)	33.3% Yes (1) 66.7% No (2) (1 N/A)	33.3% Yes (1) 66.7% No (2) (1 N/A)	33.3% Yes (1) 33.3% Many(1) 33.3% No (1) (1 N/A)
Peak (1)	100% Yes (1)	100% Yes (1)	0% Yes 100% Many (1)	0% Yes 100% Many (1)
PCCS (1)	(1 N/A)	(1 N/A)	(1 N/A)	(1 N/A)
Rio Puerco (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)	100% Yes (1)

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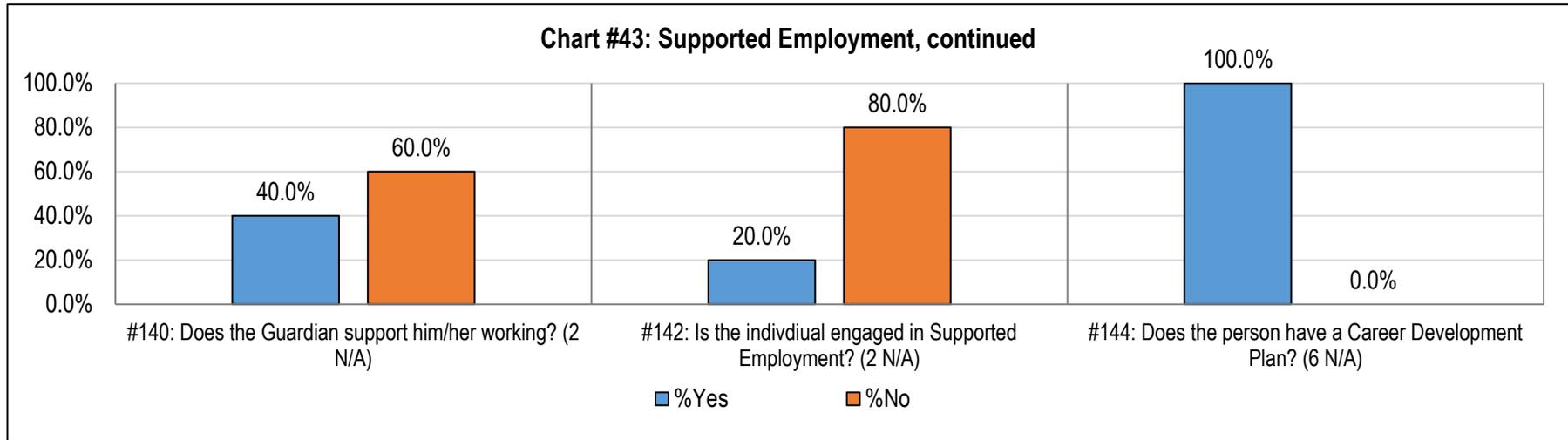   Question #144. Does the person have a Career Development Plan?

Chart #43: Supported Employment, continued

Chart #44: Supported Employment Scores by Provider Agency

Res. Agency (# in sample)	Question		
	#140	**#142**	**#144**
Dungarvin (4)	33.3% Yes (1) 66.7% No (2) (1 N/A)	0% Yes 100% No (3) (1 N/A)	(4 N/A)
Tungland (3)	50% Yes (1) 50% No (1) (1 N/A)	50% Yes (1) 50% No (1) (1 N/A)	0% Yes 100% Many (1) (2 N/A)

Chart #45: Supported Employment Scores by Case Management Agency

CM Agency (# in sample)	Question		
	#140	**#142**	**#144**
Excel (4)	33.3% Yes (1) 66.7% No (2) (1 N/A)	33.3% Yes (1) 66.7% No (2) (1 N/A)	0% Yes 100% Many (1) (3 N/A)
Peak (1)	100% Yes (1)	0% Yes 100% No (1)	(1 N/A)
PCCS (1)	(1 N/A)	(1 N/A)	(1 N/A)
Rio Puerco (1)	0% Yes 100% No (1)	0% Yes 100% No (1)	(1 N/A)

I. IQR Scored Protocol Questions

Below are all of the questions in the protocol and the scores of the Northwest Region Review. The questions <mark>highlighted</mark> are included in the data tables above.

Question	2020 (FY21) (sample=7)
CASE MANAGEMENT	
24. Does the case manager "know" the person? CPRQ26; '17IQR#8c, '18IQR24	85.7% Yes (6) 14.3% Many (1)
25. Does the case manager understand his/her role/job? CPRQ27 '17IQR#16, '18IQR25	14.3% Yes (1) 71.4% Many (5) 14.3% Needs Impv (1)
26. Is the case manager available to the person? CPRQ29; '17IQR#16a, '18IQR27	85.7% Yes (6) 14.3% Many (1)
27. Was the case manager able to describe the person's health related needs? CPRQ30, '18IQR28	28.6% Yes (2) 71.4% Many (5)
28. Does the case manager have an appropriate expectation of growth for this person? CPRQ31, '18IQR29	85.7% Yes (6) 14.3% 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	14.3% Yes (1) 71.4% Many (5) 14.3% Needs Impv (1)
30. Does the case manager provide case management services at the level needed by this person? CPRQ33; '17IQR#16c, '18IQR31	14.3% Yes (1) 85.7% Many (6)
EMPLOYMENT AND DAY	
31. Does the direct services staff "know" the person? CPRQ35; '17IQR#8a, '18IQR33	85.7% Yes (6) 14.3% Many (1)
32. Does the direct service staff have input into the person's ISP? CPRQ36, '18IQR34	71.4% Yes (5) 14.3% Many (1) 14.3% No (1)

Question	2020 (FY21) (sample=7)
33. Did the direct service staff receive training on implementing this person's ISP? CPRQ37, '18IQR35	28.6% Yes (2) 57.1% Many (4) 14.3% Needs Impv (1)
34. Was the direct service staff able to describe this person's health-related needs? CPRQ38, '18IQR36	42.9% Yes (3) 57.1% Many (4)
35. Was the direct service staff able to describe his/her responsibilities in providing daily care/supports to the person? CPRQ39, '18IQR37	14.3% Yes (1) 57.1% Many (4) 14.3% Needs Impv (1) 14.3% No (1)
35a. Was the direct service staff able to provide specific information regarding the person's daily activities? CPRQ39a, '18IQR37a	71.4% Yes (5) 14.3% Many (1) 14.3% 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	14.3% Yes (1) 57.1% Many (4) 14.3% Needs Impv (1) 14.3% No (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 (7)
37. Does the direct service staff have an appropriate expectation of growth for this person? CPRQ42, '18IQR40	85.7% Yes (6) 14.3% Many (1)
38. Does the person's day/work environment generally clean, free of safety hazards and conducive to the work/activity intended? CPRQ43, '18IQR41	(7 CND)
RESIDENTIAL	
39. Does the residential direct services staff "know" the person? CPRQ44; '17IQR#8b, '18IQR42	85.7% Yes (6) 14.3% Many (1)
40. Does the direct service staff have input into the person's ISP? CPRQ45, '18IQR43	57.1% Yes (4) 14.3% Many (1) 28.6% Needs Impv (2)
41. Did the direct service staff receive training on implementing this person's ISP? CPRQ46, '18IQR44	42.9% Yes (3) 57.1% Many (4)

Question	2020 (FY21) (sample=7)
42. Is the residence safe for individuals (void of hazards)? CPRQ45, '18IQR45	100% Yes (6) (1 CND)
43. Was the residential direct service staff able to describe this person's health-related needs? CPRQ48, '18IQR46	28.6% Yes (2) 71.4% Many (5)
44. Was the direct service staff able to describe his/her responsibilities in providing daily care/supports to the person? CPRQ49, '18IQR47	28.6% Yes (2) 71.4% Many (5)
44a. Was the direct service staff able to provide specific information regarding the person's daily activities? CPRQ49a, '18IQR47a	100% Yes (7)
44b. Can the direct service staff describe his/her responsibilities in implementing this person's ISP, including outcomes, action plans, and WDSIs? CPRQ49b, '18IQR47b	28.6% Yes (2) 71.4% 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 (7)
46. Does the residential direct service staff have an appropriate expectation of growth for this person? CPRQ52, '18IQR50	85.7% Yes (6) 14.3% Many (1)
47. Does the person's residential environment offer a minimal level of quality of life? CPRQ53, '18IQR51	100% Yes (6) (1 CND)
HEALTH	
48. Overall, were the team members interviewed able to describe the person's health-related needs? CPRQ54; '17IQR#21b, '18IQR52	28.6% Yes (2) 71.4% Many (5)
49. Is there evidence that the IDT discussed the person's health related issues? CPRQ55; '17IQR#21, '18IQR53	42.9% Yes (3) 57.1% Many (4)
50. Was the eChat updated timely? '17IQR#18g, '18IQR54	14.3% Yes (1) 85.7% Many (6)
50a. Is the eChat updated timely with the ISP and after changes in condition?	57.1% Yes (4) 14.3% Many (1) 14.3% Needs Impv (1) 14.3% No (1)

Question	2020 (FY21) (sample=7)
50b. Is the eChat complete?	14.3% Yes (1) 71.4% Many (5) 14.3% Needs Impv (1)
50c. Is the eChat accurate?	0% Yes 71.4% Many (5) 28.6% Needs Impv (2)
51. Are all of the individual's needed medical treatments, including routine, scheduled and chronic needs, timely received? 17IQR#19, '18IQR55	0% Yes 42.9% Many (3) 57.1% Needs Impv (4)
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*)	0% Yes 57.1% Many (4) 42.9% Needs Impv (3)
53. Does the individual receive medication as prescribed? 17IQR#19e, '18IQR57	14.3% Yes (1) 71.4% Many (5) 14.3% Needs Impv (1)
54. Are nursing services provided as needed by the individual? 17IQR#20, '18IQR59	28.6% Yes (2) 57.1% Many (4) 14.3% Needs Impv (1)
55. Is the CARMP consistent with recommendation in other healthcare documents? *(Is the CARMP is accurate? '17IQR#21f, '18IQR60)*	14.3% Yes (1) 71.4% Many (5) 14.3% Needs Impv (1)
56. Is the CARMP consistently implemented as intended? , '18IQR61	0% Yes 71.4% Many (5) 28.6% Needs Impv (2)
57. Are the person's health supports/needs being adequately addressed? CPRQ56; '17IQR#19, '18IQR62	0% Yes 100% Many (7)
57a. Are assessment recommendations followed up on in a timely way?	0% Yes 85.7% Many (6) 14.3% Needs Impv (1)
57b. Were needed equipment/communication devices delivered timely?	100% Yes (6) (1 N/A)

Question	2020 (FY21) (sample=7)
57c. Were medical specialist appointments attended timely?	28.6% Yes (2) 71.4% Many (5)
57d. Were changes in personal condition, if any, responded to timely?	85.7% Yes (6) 14.3% Many (1)
57e. Were Health Care Plans available, accurate and consistently implemented?	0% Yes 100% Many (7)
ASSESSMENTS	
58. Did the team arrange for and obtain the needed, relevant assessments? CPRQ58; '17IQR#18, '18IQR65	14.3% Yes (1) 85.7% Many (6)
59. Are the assessments adequate for planning? CPRQ59; '17IQR#4f, '18IQR66	0% Yes 100% Many (7)
59a. Were assessments provided timely?	0% Yes 100% Many (7)
59b. Did assessments contain accurate information?	14.3% Yes (1) 85.7% Many (6)
59c. Did assessments contain information accurate to guide planning?	14.3% Yes (1) 85.7% Many (6)
59d. Did assessments contain recommendations?	42.9% Yes (3) 57.1% Many (4)
60. Were the recommendations from assessments used in planning? CPRQ60; '17IQR#5, '18IQR67	42.9% Yes (3) 42.9% Many (3) 14.3% Needs Impv (1)
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	50% Yes (3) 16.7% Many (1) 16.7% Needs Impv (1) 16.7% No (1) (1 N/A)

Question	2020 (FY21) (sample=7)
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 (7)
63. Was the ISP developed by an appropriately constituted IDT? CPRQ62; '17IQR#3, '18IQR70	28.6% Yes (2) 28.6% Many (2) 42.9% Needs Impv (3)
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	0% Yes 20% Many (1) 20% Needs Impv (1) 60% No (3) (2 N/A)
65. Does my ISP contain current and accurate information? '17IQR#6, '18IQR72	42.9% Yes (3) 42.9% Many (3) 14.3% Needs Impv (1)
66. Does the long term vision show expectations for growth and skill building? CPRQ64; '17IQR#7b, '18IQR73	71.4% Yes (5) 14.3% Many (1) 14.3% No (1)
67. Does the ISP give adequate guidance to achieving the person's long-term vision? CPRQ65; '17IQR#7c, '18IQR74	57.1% Yes (4) 42.9% Many (3)
68. Is measurable data kept which verifies the consistent implementation of each of the action steps? '17IQR#12a, '18IQR75	14.3% Yes (1) 71.4% Many (5) 14.3% Needs Impv (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	28.6% Yes (2) 57.1% Many (4) 14.3% Needs Impv (1)
70. Is each action step in the ISP implemented at a frequency that enables the person to learn new skills? '17IQR#12c, '18IQR77	14.3% Yes (1) 42.9% Many (3) 28.6% Needs Impv (2) 14.3% No (1)
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	40% Yes (2) 60% Many (3) (2 N/A)

Question	2020 (FY21) (sample=7)
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	33.3% Yes (2) 16.7% Many (1) 33.3% Needs Impv (2) 16.7% No (1) (1 N/A)
73. Has the person made measurable progress on actions steps during this past year?'17IQR#13b, '18IQR80	28.6% Yes (2) 57.1% Many (4) 14.3% Needs Impv (1)
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	57.1% Yes (4) 14.3% Many (1) 14.3% Needs Impv (1) 14.3% No (1)
75. Are the ISP outcomes related to achieving the person's long-term vision? CPRQ68; '17IQR#7d, '18IQR82	85.7% Yes (6) 14.3% 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	42.9% Yes (3) 28.6% Many (2) 14.3% Needs Impv (1) 14.3% No (1)
77. Are the Teaching and Support Strategies sufficient to ensure consistent implementation of the services planned? CPRQ71; '17IQR#7i, '18IQR84	14.3% Yes (1) 71.4% Many (5) 14.3% No (1)
78. Are the recommendations and/or objectives/strategies of ancillary providers integrated into the ISP? CPRQ72; '17IQR#7m, '18IQR85	14.3% Yes (1) 57.1% Many (4) 14.3% Needs Impv (1) 14.3% No (1)
79. Has the person made measurable progress in therapy this year? '17IQR#13a, '18IQR86	0% Yes 100% Many (7)
80. If needed, does the ISP contain a specific Medical Emergency Response Plan (MERP)? CPRQ73b '17IQR#20c, '18IQR87	28.6% Yes (2) 57.1% Many (4) 14.3% Needs Impv (1)
81. Does the ISP contain information regarding primary health (medical) care? CPRQ74, '18IQR88	71.4% Yes (5) 28.6% Many (2)

Question	2020 (FY21) (sample=7)
81a. Does the ISP face sheet contain contact information for the PCP? CPRQ74a, '18IQR88a	71.4% Yes (5) 28.6% Many (2)
81b. Is the Healthcare coordinator's name and contact information listed in the ISP? CPRQ74b, '18IQR88b	100% Yes (7)
82. Does the ISP reflect how the person will obtain prescribed medications? CPRQ76, '18IQR89	71.4% Yes (5) 14.3% Many (1) 14.3% No (1)
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 (7)
84. Does the ISP contain a list of adaptive equipment needed and who will provide it? CPRQ77; '17IQR#25a, '18IQR91	28.6% Yes (2) 42.9% Many (3) 28.6% Needs Impv (2)
85. Overall, is the ISP adequate to meet the person's needs? CPRQ78; '17IQR#7, '18IQR92	0% Yes 100% Many (7)
86. Is the ISP being implemented? (If 85 is "3") CPRQ79 '17IQR#12, '18IQR93	0% Yes 100% Many (1) (6 N/A)
87a. Is the ISP being implemented? (If 85 is "0", "1", or "2") CPRQ80a '17IQR#12, '18IQR94a	0% Yes 100% Many (7)
87b. Are current services adequate to meet the person's needs? CPRQ80b '17IQR#11, '18IQR94b	0% Yes 100% Many (7)
88. Was the direct service staff trained on the implementation of this person's ISP? CPRQ81, '18IQR95	28.6% Yes (2) 57.1% Many (4) 14.3% Needs Impv (1)
89. Were the direct service staff able to describe their responsibilities in providing daily care/supports to the person? CPRQ82, '18IQR96	14.3% Yes (1) 71.4% Many (5) 14.3% Needs Impv (1)
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	14.3% Yes (1) 85.7% Many (6)

Question	2020 (FY21) (sample=7)
91. Overall, does the IDT have an appropriate expectation of growth for this person? CPRQ85; '17IQR#8d, '18IQR99	85.7% Yes (6) 14.3% Many (1)
92. Was the person provided the assistance and support needed to participate meaningfully in the planning process? CPRQ86; '17IQR#1b, '18IQR100	57.1% Yes (4) 42.9% Many (3)
93. Is the person offered a range of opportunities for participation in each life area? CPRQ87, '18IQR101	71.4% Yes (5) 28.6% Many (2)
94. Does the person have the opportunity to make informed choices? CPRQ88; '17IQR#30, '18IQR102	83.3% Yes (5) 16.7% Many (1) (1 CND)
94a. About where and with whom to live? CPRQ89; '17IQR#23c, '18IQR102a	83.3% Yes (5) 16.7% Many (1) (1 CND)
94b. About where and with whom to work/spend his/her day? CPRQ90; '17IQR#23d, '18IQR102b	60% Yes (3) 40% Many (2) (2 CND)
94c. About where and with whom to socialize/spend leisure time? CPRQ91, '18IQR102c	80% Yes (4) 20% Many (1) (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)*	100% Yes (7)
96. Overall, were all team members interviewed trained or knowledgeable on how to report abuse, neglect and exploitation? CPR 93*; '17IQR#35a, '18IQR105	71.4% Yes (5) 28.6% Many (2)
97. Does this person and/or guardian have access to the complaint processes/procedures? CPRQ94, '18IQR106	57.1% Yes (4) 28.6% Many (2) 14.3% No (1)
98. Does the individual have restrictions that should be reviewed by a Human Rights Committee? '17IQR#34h, '18IQR107	100% Yes (7)
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	85.7% Yes (6) 14.3% Many (1)

Question	2020 (FY21) (sample=7)
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	85.7% Yes (6) 14.3% Many (1)
101. Is the person protected from abuse, neglect and exploitation? '17IQR#35, '18IQR110	71.4% Yes (5) 28.6% Many (2)
102. Have all incidents of suspected abuse, neglect and exploitation been reported and investigated? '17IQR#35b, '18IQR111	83.3% Yes (5) 16.7% Many (1) (1 N/A)
103. Is the individual safe? '17IQR#24, '18IQR112	85.7% Yes (6) 14.3% 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	0% Active 57.1% Moderate (4) 42.9% Limited (3)
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) (4 N/A)
106. Does the person have daily choices/appropriate autonomy over his/her life? CPRQ101 '17IQR#30, '18IQR115	100% Yes (7)
107. Have the person's cultural preferences been accommodated? CPRQ102; '17IQR#31e, '18IQR116	100% Yes (7)
108. Is the person treated with dignity and respect? CPRQ103; '17IQR#34c, '18IQR117	42.9% Yes (3) 42.9% Many (3) 14.3% Needs Impv (1)
109. Does the person have food and drink available according to their specific nutritional needs and recommendations? CPRQ108; '17IQR#23e, '18IQR118	85.7% Yes (6) 14.3% Needs Impv (1)
110. Does the person have sufficient personal money? CPRQ110 '17IQR#34f, '18IQR119	100% Yes (7)
111. Does the person get along with their day program/employment provider staff? CPRQ111, '18IQR120	100% Yes (5) (2 CND)
112. Does the person get along with their residential provider staff? CPRQ112, '18IQR121	100% Yes (5) (2 CND)
TEAM PROCESS	

Question	2020 (FY21) (sample=7)
113. Are the individual members of the IDT following up on their responsibilities? CPRQ 114; '17IQR#10, '18IQR122	0% Yes 100% Many (7)
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	66.7% Yes (2) 33.3% Needs Impv (1) (4 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	42.9% Yes (3) 57.1% Many (4)
116. Is there adequate communication among team members between meetings to ensure the person's program can be/is being implemented? CPRQ117, '18IQR125	57.1% Yes (4) 42.9% Many (3)
117. Do you recommend Dispute Resolution for this IDT? CPRQ118, '18IQR126	14.3% Yes (1) 85.7% No (6)
118. Is there evidence or documentation of physical regression in the last year? CPRQ119 '17IQR#17d, '18IQR127	71.4% Yes (5) 28.6% No (2)
119. Is there evidence or documentation of behavioral or functional regression in the last year? CPRQ120; '17IQR14c, '18IQR128	14.3% Yes (1) 85.7% No (6)
120. If #118 OR #119 is scored "Yes", is the IDT adequately addressing the regression? CPRQ121; '18IQR129	60% Yes (3) 40% No (2) (2 N/A)
121. Has the person changed residential/day services in the last year? CPRQ122, '18IQR130	28.6% Yes (2) 71.4% No (5)
122. If #121 is Yes, was the change Planned by the IDT? CPRQ122a, '18IQR131	50% Yes (1) 50% No (1) (5 N/A)
123. If #121 is Yes, did the change meet the person's needs and/or preferences? CPRQ122b, '18IQR132	50% Yes (1) 50% No (1) (5 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 100% Many (7)
SUPPORTED EMPLOYMENT	

Question	2020 (FY21) (sample=7)
125. Does (Name) have a current Person-Centered Assessment? '18IQR134	50% Yes (3) 50% Many (4)
126. Did this assessment address vocational interests, abilities and needs? CPRQ126; '17IQR#26a, '18IQR135	60% Yes (3) 20% Many (1) 20% No (1) (2 N/A)
127. Did the individual participate personally in the Person Centered Assessment? '18IQR136	85.7% Yes (6) 14.3% No (1)
128. Did the Guardian participate in the Person Centered Assessment? '18IQR137	57.1% Yes (4) 42.9% No (3)
129. Is the individual engaged in the Informed Choice Project? '18IQR138	(7 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	60% Yes (3) 40% No (2) (2 N/A)
131. If #130 is Yes, are these new experiences clearly documented in the ISP Work, Education and/or Volunteer History section? '18IQR140	100% Yes (2) (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	66.7% Yes (2) 33.3% Many (1) (4 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	80% Yes (4) 20% Many (1) (2 N/A)
134. Has the individual received information regarding the range of employment options available to him/her? '17IQR#26c, '18IQR143	100% Yes (5) (2 N/A)
135. Has the Guardian received information regarding the range of employment options available for the individual? '18IQR144	100% Yes (5) (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	60% Yes (3) 20% Many (1) 20% No (1) (2 N/A)

Question	2020 (FY21) (sample=7)
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	60% Yes (3) 40% No (2) (2 N/A)
138. Has the individual participated in work or volunteer activities during the past year? '18IQR147	40% Yes (2) 20% Many (1) 40% No (2) (2 N/A)
139. Has the individual identified what type of work or volunteer activities he/she would like to do? '18IQR148	40% Yes (2) 40% Many (2) 20% No (1) (2 N/A)
140. Does the Guardian support him/her working? '18IQR149	40% Yes (2) 60% No (3) (2 N/A)
142. Is the individual engaged in Supported Employment? CPRQ129, '18IQR151	20% Yes (1) 80% No (4) (2 N/A)
144. Does the person have a Career Development Plan? CPRQ128 17IQR#26e, '18IQR153	0% Yes 100% Many (1) (6 N/A)
BEHAVIOR	
145. Is the person considered by the IDT to need behavior services now? CPRQ131; '17IQR#5d, '18IQR154	28.6% Yes (2) 71.4% No (5)
146. Does the person need behavior services now? CPRQ132 '17IQR#11e, '18IQR155	28.6% Yes (2) 71.4% No (5)
147. Have behavioral assessments been completed? CPRQ133, '18IQR156	0% Yes 100% Many (2) (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	100% Yes (2) (5 N/A)

Question	2020 (FY21) (sample=7)
149. Has the staff been trained on the Positive Behavior Support Plan? CPRQ135; '17IQR#10d, '18IQR158	50% Yes (1) 50% 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	(7 N/A)
151. Does the person receive behavioral services consistent with his/her needs? CPRQ 136 '17IQR#5i, '18IQR160	50% Yes (1) 50% Many (1) (5 N/A)
152. Are behavior support services integrated into the ISP? CPRQ 137; '17IQR#11d, '18IQR161	0% Yes 100% Many (2) (5 N/A)
ADAPTIVE EQUIPMENT / AUGMENTATIVE COMMUNICATION	
153. Has the person received all adaptive equipment needed? CPRQ138; '17IQR#25b, '18IQR162	85.7% Yes (6) 14.3% Many (1)
154. Has the person received all assistive technology needed? CPRQ139; '17IQR#25c, '18IQR163	100% Yes (7)
155. Do direct care staff know how to appropriately help the person use his/her equipment? '17IQR#25f, '18IQR164	100% Yes (7)
156. Is the person's equipment and technology in good repair?'17IQR#25d, '18IQR165	85.7% Yes (6) 14.3% Many (1)
157. Is the person's equipment/technology available in all appropriate environments? '17IQR#25e, '18IQR166	100% Yes (7)
158. Has the person received all communication assessments and services? CPRQ140 ; '17IQR#10b, '18IQR167	66.7% Yes (4) 33.3% Many (2) (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 (7)

Question	2020 (FY21) (sample=7)
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	57.1% Yes (4) 42.9% Many (3)
161. Does the person receive services and supports recommended in the ISP? CPRQ143; '17IQR#11a, '18IQR170	85.7% Yes (6) 14.3% Many (1)
162. Does the person have adequate access to and use of generic services and natural supports? CPRQ144; '17IQR#33f, '18IQR171	100% Yes (7)
163. Is the person integrated into the community? CPRQ145; '17IQR#29g, '18IQR172	57.1% Yes (4) 42.9% 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 100% Many (7)