

INTEGRATED STANDARDS AND QUALITY OF LIFE INDICATORS

For quality assurance reviews of programs providing services for:

**Mental Health
Developmental Disabilities
Early Intervention/Infant Learning**

Implementation Date October 15, 1998

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SECTION 1

INTRODUCTION

Overview of the Quality Assurance System:

In March 1997, the Alaska Division of Mental Health and Developmental Disabilities convened the Quality Assurance Steering Committee. The steering committee was charged with developing a plan for an integrated quality assurance system that focuses on ensuring positive outcomes for people using state funded mental health, developmental disability and infant learning services.

The Committee's task was to design a quality assurance system at the individual and program levels. The committee recommended that the quality assurance system:

- ?? be applicable to mental health, developmental disability and early intervention/infant learning programs
- ?? be consumer and community based
- ?? measure consumer satisfaction and monitor consumer outcomes
- ?? include an external review process for programs
- ?? be comprehensive and gather information from diverse sources
- ?? have defined quality and performance standards
- ?? include a clear, efficient and effective grievance process
- ?? must foster excellence, continuous quality improvement and an openness to change with every provider of services
- ?? provide feedback about the quality of services to all stakeholders

The Quality Assurance Steering Committee focused much of their effort during the past year on overseeing the development of quality of life indicators and program measures. The Committee will monitor implementation of the quality assurance measures and the integrated review process, and will continue to work toward development of a comprehensive quality assurance system. The committee includes representatives from state agencies, non-profit service providers and individuals and family members who use services. Committee members are:

Gina Bastian	P.A.R.E.N.T.S.	Anchorage
Kelly Behan	Alaska Alliance for the Mentally Ill	Homer
Susan Berg	Consumer	Anchorage
Brenda Eustad	Provider (Northern Community Resources)	Ketchikan
Kathy Fitzgerald	Governor's Council on Disabilities and Special Education	Anchorage
Sheila Gaddis	Alaska Mental Health Board	Anchorage
Deann Heide	Consumer	Anchorage
Jeff Jessee	Alaska Mental Health Trust Authority	Anchorage
Kris Johnston	Consumer	Cordova
Fred Kopacz	Provider (Southcentral Counseling Center)	Anchorage
Pam Muth	Division of Public Health, Maternal, Child & Family Health	Anchorage

Quality Assurance Committee Members (cont.):

Helen O'Brien	Consumer	Bethel
Terry Osback	API (API Quality Assurance Committee)	Anchorage
Clark Stanton	Division of Mental Health and Developmental Disabilities	Anchorage
Ronda Stuebner	Provider (FOCUS)	Chugiak
Diana Strzok	Provider (ASSETS)	Anchorage
Laurie Walter	Consumer	Fairbanks
Karen Ward	University Affiliated Programs	Anchorage
Dan Weigman	Division of Mental Health and Developmental Disabilities	Anchorage

Much of the work of developing the integrated program standards was done by the Standards Sub-Committee, which included members of the Steering Committee and additional mental health, developmental disability and infant learning service provider and consumer representatives. The Standards Sub-Committee was charged with providing technical assistance to the standards writing team, reviewing standards drafts, and assisting with community forums. Twenty-five (25) forums, in 12 Alaskan communities, introduced the integrated standards and review process to providers, consumers and advocates. Members of the Standards Sub-Committee were:

Carol Barrier	Provider (PIC)	Anchorage
Kelly Behen	AK Mental Health Board	Homer
Susan Berg	Consumer	Anchorage
Kathy Craft	Provider (Family Centered Services)	Fairbanks
Brenda Eustad	Northern Community Resources	Ketchikan
Carl Evertsbusch	Standards Writing Team	Anchorage
Kathy Fitzgerald	Governor's Council on Disabilities and Special Education	Anchorage
Sheila Gaddis	AK Mental health Board	Anchorage
Ellen Ganley	Standards Writing Team	Fairbanks
John Guthrie	Consumer	Juneau
DeAnne Heide	Consumer	Cordova
Robyn Henry	Standards Writing Team	Anchorage
Patricia Johnson	Division of Mental Health and Developmental Disabilities	Anchorage
Wayne McCollum	Provider (Tok Mental Health Center)	Tok
Mary Jane Michael	Provider (ARC of Anchorage)	Anchorage
Sherry Modrow	Standards Writing Team	Fairbanks
Mary Elizabeth Rider	AK Mental Health Trust Authority	Anchorage
Lizette Stiehr	Division of Public Health, Maternal, Child & Family Health	Anchorage
Berth Shimoe-Strong	Consumer	Anchorage

A Focus on Outcomes:

The Quality of Life section is an intentional departure from a more traditional approach of measuring programs using narrowly defined practice standards. In this document, quality of life values and indicators examine the strengths and weaknesses of programs and the status of people who use services from the perspective of outcomes and performance.

Why look at outcomes? Simply because outcomes are the central issue. When we measure program effectiveness, we tend to look only at program processes and practices rather than at the results of services. The real question is "How has the person's quality of life changed as a result of the service?" Quality of life outcomes focus on the *results* of services.

A quality of life focus emphasizes the individual rather than the program. The individual defines quality of life; therefore, the individual will define quality of life outcomes. If a program is using quality of life outcome indicators to measure program success, the program must focus its services and supports on individual needs rather than categorical services. Outcome measures can be a guide to person-centered planning.

A focus on outcomes puts the emphasis on service impact on the *whole person*. By contrast, a service focus puts the person into service categories, and may look at just one aspect of the person at a time. To have positive influence on outcomes, a service provider must take a holistic, person-centered approach.

Outcomes challenge programs to look beyond program practices. Outcomes, in and of themselves, stand alone. Outcomes can occur with or without program services. Quality of life outcomes may fall outside the boundaries of program practices. The challenge to a program is to work toward influencing outcomes by providing the highest quality of services. While programs may not have a direct influence on particular outcomes, they should continually monitor them, because services can indirectly impact the outcome. In this way, outcomes give programs a focal point for growth and development.

While program approaches and practices change over time, quality of life outcomes remain constant. Quality of life outcomes look at basic human needs as they relate to the individual. These outcomes are universal and timeless.

On the practical side, outcomes measure accountability. With budgets continually shrinking and managed care being an increasing reality, accountability is critical. Funding sources want to know how their money is being spent. Outcomes focus on results.

Definitions:

Consumer – individual who receives services

Consumer Outcomes - quality of life indicators which may relate to parts of the person or family's life that extend beyond the focus of the services being provided by the program. Program review teams will be instructed to apply only those indicators over which the program has some influence

Family - the people (parents, extended family, guardian) responsible for the welfare of a minor who receives services; decision-making involves the minor to a degree determined by each family

Indicators – descriptions of varying degrees of outcomes or performance

Natural supports—extended family, neighbors, friends and other members of the community in a network of assistance and safety that reduces or minimizes the need for paid supports

People who know the person best – family, friends or providers who are able to speak reliably on behalf of an individual

Performance measures – items that are used to determine the organization and staff's capacity to impact change in an individual or family's life

Person – an individual who receives services or his/her guardian

Quality of Life – those features of life that an individual or family use collectively to define what is essential and valuable

Quality Assurance – a system for determining that publicly-funded community-based services for people with developmental disabilities and/or mental illness enhance quality of life for people they serve and are fiscally responsible

Satisfaction - perception by a person or family of acceptability of a particular service or of quality of life

Values Statement – a statement describing one of the five Quality of Life categories used in this document

Overview of the Site Review Process:

Unless an interim review is recommended by a review team or by the state funding agency, state funded mental health and developmental disability programs will be reviewed every two years. Early Intervention/ Infant Learning Program reviews will take place every four years. If an agency provides more than one type of program (for example developmental disability and mental health services), an integrated review will be conducted. The program review process is outlined below.

Program: State funded mental health, developmental disability and/or infant learning service provider

State: State funding agency (Division of Mental Health and Developmental Disabilities, Division of Public Health)

Contractor: Independent outside contractor responsible for organizing and conducting program reviews

A. Program Review Preparation

1. The **Contractor** contacts the **Program** to find out which peer reviewer they would like on their team, if there is a conference room or other space in which the team can meet, and whether there are any other arrangements needed for the review.
2. The **Contractor** contacts the **State** and requests a random list of consumers for file reviews and interviews during the review.
3. The file review/interview list is generated by the **State** and forwarded to the **Program**. The **Program** sets up interview times and locations with consumers, staff, board, etc. Consumer interviews will be scheduled at times and locations convenient and comfortable for consumers.
4. The **Contractor** organizes and recruits the review team, consisting of a facilitator, peer reviewer(s), consumer(s), and community member(s). **State** Technical Assistants will be team members for ILP reviews. Consumer and community representatives will be recruited through consumer, parent support and advocacy organizations. Peer service provider representatives will be recruited with the assistance of the **State** funding agency and service providers. Team size will depend on the size and complexity of the **Program** being reviewed.
5. The **Contractor** assists team members with arrangements for travel and accommodation. Local team members (consumer and community members) will be contacted to see if they need

assistance (child care, respite, transportation, etc.) in order to participate in the review. They will also receive a stipend for their participation on the team.

B. Program Review

1. On the first day of the review, the **Contractor** (facilitator) trains the review team. Training includes an introduction to the review process, an overview of the reviewer's guide, and a discussion of quality of life/search for excellence philosophy. The facilitator and team will also develop a review schedule, organize interview teams and assign interviews. At the end of training session, the team and the agency staff meet informally to talk about the review process and answer questions.
2. The review team begins the information-gathering phase of the review. This includes the following activities:
 - ?? File review - The file for each person on the random list generated by the **State** will be reviewed. A file review checklist will be completed for each person. The purpose of the file review is to document whether the files include information required by funding sources (the **State** funding agency and/or Medicaid), and the services and supports the person is receiving.
 - ?? Interviews with individuals and families receiving services - Interviews are conducted to determine what services people are receiving, how the services are impacting their lives, and whether they are satisfied with the services.
 - ?? Interviews with staff, board members and other community agencies - Interviews with staff focus on how services are provided, the organization's administrative policies, and coordination of services and supports in the community.
 - ?? Public comment - The team will provide opportunities for consumers who were not selected for interviews, and other interested individuals, to provide comment.
 - ?? Administrative review - The team will conduct a review of the administrative and personnel policies and procedures of the agency using the Administrative Review Checklist.
3. When information gathering is complete, the team meets to de-brief and develop the draft review report. The report will include the **Program's** areas of strength, specific services or procedures that need to be improved, and a list of the "best practices" observed by the team. The team facilitator writes the draft report on the last night of the review.
4. On the last day of the review, an exit interview will be conducted. The exit interview is an opportunity for the review team and **Program** to discuss the draft report and make corrections and revisions as needed. The **Program** director may invite anyone they wish to the meeting. DD and MH **State** representatives can also participate.

C. Program Review Follow-up

1. The site review final report is completed and distributed within 30 days to the **Program**, Regional Program Specialists (DD), Quality Assurance Section (MH), early intervention technical assistants (ILP), Alaska Mental Health Board (MH), and the Governor's Council on Disabilities and Special Education (DD and ILP).
2. The **Program** receives the site review report and drafts a plan of improvement.

3. The **Program** and the **State** (Regional Program Specialists, Quality Assurance Section and/or Early Intervention Technical Assistants) reviews and signs off on the draft plan of improvement.
4. The finalized **Program** review report and plan of improvement are sent to the Division of Mental Health and Developmental Disabilities Quality Assurance Unit which will maintain copies of reports, develop a database of "best practices", and track **Program** training needs.
5. If a **Program** needs training or technical assistance to make the improvements recommended in the review report, the Quality Assurance Section assists them in locating and funding appropriate training.

D. Between Full Program Reviews

1. In the year between full on-site reviews, the **Program** will conduct a self-evaluation

SECTION 2

SEARCH FOR EXCELLENCE

SEARCH FOR EXCELLENCE: Services for Children and Families

CHOICE and SELF-DETERMINATION

Value Statement: Families develop goals and make decisions in all aspects of their children's lives. Children have opportunities to develop the attitudes and abilities that result in making goals and learning to attain them.

Consumer Outcomes*: Indicators of Excellence

- ?? The family makes or participates on a team making all service-related decisions concerning their child.
- ?? The child or adolescent has positive support to learn to make decisions.
- ?? The child and family make choices to determine the child's future.
- ?? The family arranges desired and necessary supports for their child through individualized and portable services and options.
- ?? The family is actively involved in planning and policy development for the organizations from which their child receives services.
- ?? The child and family have opportunities to meet with school district or other service provider personnel before the child transitions to that provider.

Performance Measures: Indicators of Excellence

- ?? Staff listen to all expressions of preference and help the family get what they want for their child.
- ?? Staff respond quickly and appropriately when family members express dissatisfaction.
- ?? The child's plan contains goals, objectives and strategies that reflect the family's desired future, and those goals are being implemented.
- ?? The child's plan describes the teamwork involved in development of the plan.
- ?? The family chooses who works with their child.
- ?? The family participates in hiring and evaluating their provider staff.
- ?? The child or adolescent and his or her family have support from program staff for decisions they make.

Consumer Satisfaction

- ?? The family expresses satisfaction with their child's progress and transition into other services.
- ?? The family expresses satisfaction with the service provider and services the child and family use.
- ?? The child or adolescent is satisfied with the service options his/her provider offers.

* Consumer Outcomes are quality of life indicators. As such, they may relate to parts of the consumer's life that extend beyond the focus of the services being provided by the program. Review teams will be instructed to apply only those indicators over which the program has some influence.

SEARCH FOR EXCELLENCE: Services for Children and Families

DIGNITY, RESPECT and RIGHTS

Value Statement: Families exercise their rights; family members expect and are treated with respect.

Consumer Outcomes*: Indicators of Excellence

- ?? The family understands their rights as consumers of services.
- ?? The child and family are respected and valued by service providers.
- ?? The family controls the flow of personal information.
- ?? The family lives in a community where all members are included, respected and valued.

Performance Measures: Indicators of Excellence

- ?? Staff link families with local service and community organizations that can provide informal networks of support.
- ?? Training for direct service and management level personnel incorporate new paradigms and concepts such as family-centered services, self-determination, community membership, natural environments and natural supports.
- ?? The staff function with respect and high regard for the family.
- ?? The service provider assures sensitivity to the family's cultural / religious beliefs and traditions during planning and service delivery.
- ?? Staff and family work in partnership, including regularly reviewing contents of the child's records and explaining how information is used.
- ?? Service provider staff understand general rights issues as well as specific laws addressing people with disabilities such as the Americans with Disabilities Act.

Consumer Satisfaction

- ??The family feels that their rights are protected.
- ??The family expresses overall satisfaction with their life circumstances.
- ??The child and family feel respected and valued by the service provider.
- ??The family expresses satisfaction with support provided by the agency to assure protection of their rights.

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SEARCH FOR EXCELLENCE: Services for Children and Families

HEALTH, SAFETY and SECURITY

Value Statement: Children have the best possible health; they learn and play in safety, basic comfort and family continuity.

Consumer Outcomes*: Indicators of Excellence

- ?? The family makes decisions that provide a positive balance between choice and risk.
- ?? With support from family, friends, provider staff and community members, adolescents make positive decisions regarding choices that have the potential to put them at risk.
- ?? The child is in the best possible health or receives prompt treatment, regardless of ability to pay.
- ?? The child is free from abuse or neglect.
- ?? The child has family, friends and neighbors who look out for his/her welfare.
- ?? Family income and assets cover the family's basic needs.
- ?? The family understands the early warning signs of their child's illness and has a plan of how to get help when early warning signs occur. **(MH)**
- ?? The family has an Advanced Directive for treatment on file at the appropriate places. **(MH)**

Performance Measures: Indicators of Excellence

- ?? There is excellent communication between family, provider staff and health care professionals
- ?? Staff and family develop strategies to assure that the child is safe in his/her home and community.
- ?? Staff, in collaboration with the family, appraises the child's well being and identifies areas where more support may be needed.
- ?? Staff provides educational experiences and supports that will help the family make positive decisions in risky or emergency situations.
- ?? The agency assists with supports to help reduce stress in the family.
- ?? The staff develops strategies in response to family concerns about health and development of the child.
- ?? Staff assists the family to determine needs for financial assistance and locate necessary supports.
- ?? Staff fosters and helps strengthen relationships between family members and infants and children.
- ?? A mental health early intervention, crisis prevention plan is in place, which includes identifying and responding to early warning signs and a plan of how to get support **(MH)**

Consumer Satisfaction

- ?? The family expresses satisfaction with their child's health and emotional well being.
- ?? The family expresses satisfaction with the type and amount of support provided by the agency to promote their child's health, well being and safety.
- ?? The child or adolescent and family members are satisfied with the resources made available by the service provider.

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SEARCH FOR EXCELLENCE: Services for Children and Families

RELATIONSHIPS

Value Statement: Children develop social skills; families maintain current relationships and have opportunities to meet and socialize outside their homes.

Consumer Outcomes*: Indicators of Excellence

- ?? The child has an active natural support network.
- ?? The adolescent spends time in inclusive environments.
- ?? The child has opportunities to learn social skills.
- ?? The child is developing skills to interact with others.
- ?? The family has opportunities to enjoy activities with friends and acquaintances.
- ?? The family remains connected to natural support networks.
- ?? The child and family choose how they participate in the life of their community.

Performance Measures: Indicators of Excellence

- ?? Staff schedule activities that promote opportunities for expanding the family's natural support network.
- ?? Staff provides information and requested supports to assist in maintenance and development of the family's new and existing support networks.
- ?? Staff assists families to connect with each other and to establish linkages with community organizations and support networks.
- ?? Staff helps natural support networks get organized and stay active.
- ?? Staff fosters and helps strengthen relationships between family members and infants and children.

Consumer Satisfaction

- ?? The family expresses satisfaction with their life situation.
- ?? The adolescent is satisfied with her/his natural support network and what it provides.
- ?? The family feels satisfied with the agency's efforts to help their child interact with others.
- ?? The family expresses satisfaction with the type and amount of support provided by the agency to maintain their natural support network and to have opportunities to meet and socialize with people outside their home.

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SEARCH FOR EXCELLENCE: Services for Children and Families

COMMUNITY PARTICIPATION

Value Statement: Children and their families lead fulfilling lives that include opportunities to participate in roles valued by citizens in the community.

Consumer Outcomes*: Indicators of Excellence

- ?? The child and/or family members contribute to the life of their community in ways they find meaningful.
- ?? The child and family take part in culturally valued activities.
- ?? The child has the necessary adaptive devices, and uses them to participate in community activities.
- ?? The family participates in activities that provide opportunities for their child's personal growth and increased life satisfaction.
- ?? The child's transition between service providers or an adolescent's transition out of school includes significant coordination between the child, family, providers and other groups or organizations.
- ?? The child and family have access to comprehensive and integrated community-based services.
- ?? The child participates in activities that take place in an integrated, natural environment.

Performance Measures: Indicators of Excellence

- ?? Staff assist the child and family to become active members of the community.
- ?? Staff employ creative adaptations that assist the child to participate in typical activities or that help the family improve the child's participation.
- ?? Staff have a clear understanding of the child and family's strengths and needs relevant to increasing community participation.
- ?? The service provider assists the child and family with awareness of and access to integrated community activities and services.
- ?? The agency helps the family and child manage major life changes, including approach of adulthood and revision of living arrangements, with transition and aftercare coordination, support and communication with community resources.
- ?? Service plan goals and supports help the child and family identify and attain valued roles in the community.

Consumer Satisfaction

- ?? Family members express satisfaction with their child's level of activity in community life.
- ?? The family is satisfied with the type and amount of support provided by the agency for their child's participation in community activities.
- ?? The adolescent is satisfied with efforts to coordinate transitions.

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SEARCH FOR EXCELLENCE: Services for Adults

CHOICE AND SELF-DETERMINATION

Value Statement: People make meaningful choices in all aspects of their lives. People have opportunities to acquire the attitudes and abilities that result in developing personal goals and taking the initiative to attain them.

Outcomes*: Indicators of Excellence

- ?? The person makes all his/her own personal decisions about all aspects of life, such as employment, subsistence, community living, socializing, life-long learning, recreation and leisure.
- ?? The person makes choices and decisions free from undue external influence or interference.
- ?? The person has supports, skills or information necessary to make decisions.
- ?? The person can identify the steps needed to reach his or her goals and feels confidence in being able to take those steps.
- ?? The person controls his/her personal finances.
- ?? The person controls individualized and portable services.
- ?? The person is actively involved in planning and policy development in organizations from which he or she receives services.

Performance Measures: Indicators of Excellence

- ?? Strategies enhance the person's ability to make decisions in employment, subsistence, community living, socializing, life-long learning, recreation and leisure.
- ?? The person's goals and dreams are the focus of service plan goals, and those goals are being pursued.
- ?? The person's plan is based on what is important to him/her and reflects a positive balance between choice and risk.
- ?? Staff listens to all expressions of preference and, where possible and sensible, help implement what the person wants.
- ?? Staff is aware of and respond to the methods the person uses to communicate his/her likes and dislikes and to make decisions.
- ?? The organization always provides the person the opportunity to choose who works with him/her.
- ?? The organization always provides the person or guardian the opportunity to participate in hiring and evaluating those who work with him/her.
- ?? The person participates in an ongoing problem solving process used to make changes to the individual service plan.
- ?? The organization supports and encourages the person's involvement in the agency's policy development and planning.

Consumer Satisfaction

- ?? The person indicates satisfaction with her/his choices in employment, subsistence activities, community living, socializing, life-long learning and/or recreation and leisure.
- ?? The people who know the person best are satisfied with the opportunities he/she has to make choices for employment, community living, socializing, life-long learning, recreation and leisure. **DD**
- ?? The person is satisfied with the type and amount of support provided by the agency to improve his/her ability and increase his/her opportunities to make choices.

The people who know the person best are satisfied with the type and amount of support provided by the agency to improve the person's ability and increase his or her opportunities to make choices. **DD**

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SEARCH FOR EXCELLENCE: Services for Adults

DIGNITY, RESPECT and RIGHTS

Value Statement: People are treated with dignity and respect and enjoy the common rights and privileges available to all citizens.

Consumer Outcomes*: Indicators of Excellence

- ?? The person understands his/her rights as a recipient of services.
- ?? The person is respected and valued by those around him / her, including those who provide support.
- ?? The person controls the flow of personal information.
- ?? The person has access to information and experiences that assist him/her in making informed decisions.
- ?? The person exercises his/her basic rights (voting, freedom of expression, legal representation, freedom of assembly and equal protection).
- ?? The person's culture and value systems are acknowledged and accommodated.
- ?? The person has the time, space and opportunity for privacy.
- ?? The person's right to responsibly engage in sexual relationships and enter into marriage based on his/her personal beliefs and values is protected. (DD)

Performance Measures: Indicators of Excellence

- ?? Staff support the person in learning and exercising his/her rights.
- ?? Direct service and management staff receive training on new paradigms and concepts such as consumer-directed services, self-determination, community membership, and natural supports.
- ?? The person's plan addresses issues that he/she sees as sensitive (or private) in a way that respects his/her privacy while making certain that those who need to know have adequate information.
- ?? Staff demonstrate high regard and respect for the person.
- ?? Staff regularly review with the person what goes into his/her records and explain use of the information.
- ?? Staff understand general rights issues and specific laws addressing people with disabilities, such as the Americans with Disabilities Act.

Consumer Satisfaction

- ?? The person feels respected and valued by others and feels his/her rights as a citizen are protected.
- ?? The people who know the person best feel he/she is respected and valued by others and feels his/her rights as a citizen are protected.
- ?? The person is satisfied with the type and amount of support provided by the agency to assure his/her rights are protected.
- ?? The people who know the person best are satisfied with the type and amount of support provided by the agency to assure his/her rights are protected.

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SEARCH FOR EXCELLENCE: Services for Adults

HEALTH, SAFETY and SECURITY

Value Statement: People have the best possible health and live, work and play in safety and basic comfort.

Consumer Outcomes*: Indicators of Excellence

- ?? The person feels safe where he/she lives, works and learns.
- ?? The person has friends and neighbors who look out for his/her welfare.
- ?? The person makes concise, informed decisions for choices that have the potential to put him/her at risk.
- ?? The person is in the best possible physical and mental health.
- ?? The person has the financial resources to meet his/her basic needs and has a backup financial plan for emergencies.
- ?? The person understands his/her illness, symptoms, treatment options and medications. **(MH)**
- ?? The person can identify the early symptoms of his/her illness and has a plan to get help when early warning signs occur. **(MH)**
- ?? The person has an Advanced Directive for treatment on file at the appropriate places. **(MH)**

Performance Measures: Indicators of Excellence

- ?? There is excellent communication between staff and health care professionals.
- ?? Staff develops supports and strategies to enhance the person's safety in his/her home and community.
- ?? Staff, in collaboration with the person and appropriate friends and family, appraises the person's physical and emotional well being and identify areas where more support may be needed.
- ?? Specific goals and related services are in place concerning overall health and fitness.
- ?? Staff understands this person's health concerns, specifically concerning his/her mental illness. **(MH)**
- ?? Staff supports and encourages the person to learn about his/her condition, illness, treatment options, and medications, and provide written or video information that can be taken home. **(MH)**
- ?? An early intervention, crisis prevention plan is in place, which includes identifying and responding to early warning signs and a plan to get support when needed. **(MH)**
- ?? The person's Advanced Directive is included in his/her record and is followed as outlined. **(MH)**

Consumer Satisfaction

- ?? The person expresses satisfaction with her/his health and emotional well being.
- ?? The person feels safe.
- ?? The person is satisfied with the type and amount of support provided by the agency to promote her/his health, emotional well being and safety.

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SEARCH FOR EXCELLENCE: Services for Adults

RELATIONSHIPS

Value Statement: People have support to maintain current friendships, acquaintances and family relationships, and have opportunities to meet and socialize with people outside their homes.

Consumer Outcomes*: Indicators of Excellence

- ?? The person has a variety of friends and a wide natural support network.
- ?? The person spends as much time as he/she desires with friends, acquaintances and family.
- ?? The person has life-long friends and acquaintances, with and without disabilities.
- ?? The person has a positive relationship with his/her family, which is a primary part of the person's support system.
- ?? The person's communication skills include showing empathy toward others.

Performance Measures: Indicators of Excellence

- ?? Staff members are knowledgeable about the person's natural support system.
- ?? Services help to increase the chances that the person receives active support from his/her co-workers, members of associations, and/or classmates at school.
- ?? Staff establishes links with local services and community organizations that can provide informal networks of support, such as community associations and prospective employers.
- ?? Goals to increasing specific social skills and or enhance relationships are identified in the plan and implemented.
- ?? Family, friends and community members are identified as primary supports to reach goals.

Consumer Satisfaction

- ?? The person expresses satisfaction with her/his natural support network and what it provides.
- ?? The person is satisfied with opportunities to spend time with members of his/her support network.
- ?? People who know the person best express satisfaction with the person's relationship with family.
- ?? The person is satisfied with the amount of intimacy in his/her life.
- ?? The person is satisfied with the type and amount of support provided by the agency to maintain his/her natural support network and to have opportunities to meet and socialize with people outside the home.
- ?? Family members express satisfaction with the support they get concerning this person.

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SEARCH FOR EXCELLENCE: Services for Adults

COMMUNITY PARTICIPATION

Value Statement: People have fulfilling lives that include opportunities to participate in roles valued by citizens in the community.

Consumer Outcomes*: Indicators of Excellence

- ?? The person participates in inclusive work, school and subsistence activities.
- ?? The person lives in an inclusive setting.
- ?? The person contributes to his/her community in an individual and meaningful way, based on his/her preferences.
- ?? The person participates in clubs, service groups or special events in ways that positively influence others.
- ?? The person shops, banks, socializes and has recreation in places and in ways that are the same as other community members.
- ?? The person is able to get to where he/she wants to go when he/she wants to get there.

Performance Measures: Indicators of Excellence

- ?? Staff encourages and supports the person to become a contributing member of his/her community at work, play and community service.
- ?? Staff employ creative adaptations that allow the person to participate in typical community activities.
- ?? Staff has a clear understanding of the person's strengths and needs relevant to increasing community participation.
- ?? Integrated vocational and living goals are identified, and services increase the person's skills and supports needed to reach those goals.
- ?? Staff assists the person to acquire transportation when he/she wants to get somewhere.
- ?? The person is viewed by staff as having something valuable to contribute to the community.

Consumer Satisfaction

- ?? The person expresses satisfaction with where he/she lives and works.
- ?? The person is satisfied with opportunities he/she has to participate in community activities.
- ?? The people who know the person best are satisfied with opportunities he/she has to participate in preferred community activities.
- ?? The person is satisfied with the type and amount of support provided by the agency for his/her participation in community activities.
- ?? The people who know the person best are satisfied with the type and amount of support provided by the agency for his/her participation in community activities.

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SECTION 3

Program Reviewer's Guide

- Part A: Quality of Life Values and Outcomes,
and Performance Indicators**
 - 1: For Children and Families**
 - 2: For Adults**

- Part B: Administrative Procedures Checklist**

- Part C: File Review Checklists**
 - 1: Infant Learning Programs**
 - 2: Developmental Disability Program**
 - 3: Mental Health Programs**

SECTION 3

Part A1:

Quality of Life Values and Outcomes, and Performance Indicators for Programs Providing Services to Children and Families

CHOICE AND SELF-DETERMINATION

Value Statement: Families develop goals and make decisions in all aspects of their children's lives. Children have opportunities to develop the attitudes and abilities that result in making goals and learning to attain them.

A. Consumer Outcomes*: Examples

Indicators of Excellence

- ?? The family makes or participates on a team making all service-related decisions concerning their child.
- ?? The child or adolescent has positive support to learn to make decisions.
- ?? The child and family make choices to determine the child's future.
- ?? The family arranges desired and necessary supports for their child through individualized and portable services and options.
- ?? The child and family have opportunities to meet with school district or other service provider personnel before the child transitions to that provider.
- ?? The family is actively involved in planning and policy development for the organizations from which their child receives services.

Outcomes Requiring Response

- ?? People other than family or guardians make most decisions for the child.
- ?? The family has limited opportunities to change their child's services and supports.
- ?? The child or adolescent has no choice of service options or alternatives.
- ?? The adolescent's preferences are not considered or are unknown.
- ?? The family lacks information for making informed decisions.

B. Performance Measures: Examples

Indicators of Excellence

- ?? Staff listens to all expressions of preference and helps the family get what they want for their child.
- ?? Staff responds quickly and appropriately when family members express dissatisfaction.
- ?? The child's plan contains goals, objectives and strategies that reflect the family's desired future, and those goals are being implemented.
- ?? The child's plan describes the teamwork involved in development of the plan.
- ?? The family chooses who works with their child.
- ?? The family participates in hiring and evaluating their provider staff.
- ?? The child or adolescent and his or her family have support from program staff for decisions they make.

Performance Requiring Response

- ?? Program staff provides little or no support for the family's efforts to reach goals they set for their child.
- ?? Staff has no knowledge of the family's decision-making culture.
- ?? Staff has no knowledge of or ignores the family's preferences.
- ?? The family's plan is a continuation of previous plans, with no documentation supporting that decision.
- ?? All plans look the same.
- ?? Staff screens the family's choices and goals and eliminates those they deem inappropriate.
- ?? There is little or no implementation of the goals and strategies contained in the child/family's plan.

C. Consumer Satisfaction

Quality of Life

?? The family expresses satisfaction with their child's progress and transition into other services.

Performance

?? The family expresses satisfaction with the service provider and services the child and family use.

?? The child or adolescent is satisfied with the service options their provider offers.

D. Suggested Questions for Reviewers: Samples

From the child and family's point of view:

?? How did you decide who would provide the supports you are using?

?? How do service providers know what you want your child to learn?

?? Does your child's plan say what you want for your child?

?? What is your service provider's involvement in planning your child's transition to other programs?

?? Does staff ask you to help measure your child's achievement of developmental milestones?

?? Are there other services or other methods of service delivery you would prefer?

?? What has been accomplished for your child since you began receiving services?

?? Are there objectives or skills you hoped your child would achieve that have not been accomplished?

?? Did you help to choose the service provider who works with you and your child?

For staff working with the child and family:

?? How does the family receive assistance that is responsive to their needs and desires?

?? How were the family's goals for their child's services determined?

?? Does the child's plan reflect the family's desired outcomes?

?? How was the schedule for services developed?

?? How are evaluation and assessment results incorporated into the child's service plan?

?? Will the family have the opportunity to meet with school district or other service provider personnel before their child transitions to that provider?

?? What has been the impact of the services you have provided?

?? What role do parents play in any local service-delivery coalitions in which your organization participates?

E. Reviewer Observations

If possible, observe family with service provider(s). Determine if family members are comfortable and satisfied with those providing their child's supports.

F. Documentation

Look for a description of the child or family's participation in decision-making. Are the family's preferred goals contained in the child's plan?

DIGNITY, RESPECT and RIGHTS

Value Statement: Families exercise their rights; family members expect and are treated with respect.

A. Consumer Outcomes*: Examples

Indicators of Excellence

- ?? The family understands their rights as consumers of services.
- ?? The family is respected and valued by service providers.
- ?? The family controls the flow of personal information.
- ?? The family lives in a community where all members are included, respected and valued.

Outcomes Requiring Response

- ?? The child or family is subject to demeaning and disrespectful language and behavior.
- ?? The family has never been informed of their rights.
- ?? The family has never been informed of the agency's grievance procedure.
- ?? The family is demoralized or is being coerced.
- ?? Observations indicate this child's or family's rights are being violated.

B. Performance Measures

Indicators of Excellence

- ?? Staff link families with local service and community organizations that can provide informal networks of support.
- ?? Training for direct service and management level personnel incorporate new paradigms and concepts such as family-centered services, self-determination, community membership, natural environments and natural supports.
- ?? The staff function with respect and high regard for the family.
- ?? The service provider assures sensitivity to the family's cultural / religious beliefs and traditions during planning and service delivery.
- ?? Staff and family work in partnership, including regularly reviewing contents of the child's records and explaining how information is used.
- ?? Service provider staff understands general rights issues as well as specific laws addressing people with disabilities such as the Americans with Disabilities Act.

Performance Requiring Response

- ?? Staff speaks about the child or family in their presence in third person or as if they aren't present.
- ?? Staff either have no knowledge of the family's beliefs, or ignore them when making decisions that affect their child's life.
- ?? Staff release confidential information without the family's permission.
- ?? Staff use negative or offensive language when describing the child or family.
- ?? Staff lack the knowledge or do not utilize all the adaptive equipment and devices the child needs.
- ?? Staff does not encourage or provide the family with supports to help them learn about or exercise their rights.

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C. Consumer Satisfaction

Quality of Life

- ?? The family feels that their rights are protected.
- ?? The family expresses overall satisfaction with their life circumstances.

Performance

- ?? The child and family feel respected and valued by the service provider.
- ?? The family expresses satisfaction with support provided by the agency to assure protection of their rights.

D. Suggested Questions for Reviewers: Samples

From the child and family's point of view:

- ?? Are you comfortable that the information you share will be kept confidential?
- ?? Do you know who can look at your child's records?
- ?? Does the program ask you to sign a release before sharing information with others?
- ?? Are your family's cultural and value systems acknowledged and accommodated?
- ?? In what ways do provider staff demonstrate respectful behavior toward your family?
- ?? Do you understand due process and do you know what the agency's grievance process is? Do you understand your right to request mediation to resolve disputes with your EI/ILP provider agency?
- ?? What would you do if you felt your rights were violated in the program?
- ?? Does your child have the adaptive equipment and devices you need to do the things you want to do?
- ?? Do you feel comfortable asking to see your child's records? Have you asked for a copy? Were you told you would have to pay for it?

For people who know this person best:

- ?? Do those who work with the child and family treat them with respect?
- ?? Does staff keep confidential information private?
- ?? What would you do if you felt the child or family's rights were violated?
- ?? Are services and supports in place to respect the family's cultural heritage?

From the staff working with the person:

- ?? What kinds of personal information does your program ask families to provide?
- ?? Is consent required before information is shared?
- ?? What mechanisms are in place to give families access to the information in their child's records?
- ?? Does the child have the adaptive equipment and devices identified in the child's plan?
- ?? How does the organization ensure staff will treat the family with respect and sensitivity?
- ?? In what ways do provider staff empower the family to exercise their rights?
- ?? How have you provided advocacy information to assist families in exercising their rights?

E. Reviewer Observations

How do staff communicate in the presence of and away from the family? Do staff use People First, non-stigmatizing language? If there are cultural issues, are they respected? Do consumer—staff interactions reflect dignity and respect? Does the organizational environment give an unnecessary sense of separation between staff and consumers? Do families seem comfortable that information about their child will be kept confidential?

F. Documentation

Is respectful, non-stigmatizing language used in documentation? Is the person's cultural heritage documented? Are consumer participation and decisions reflected in documentation? Are the child's records kept in a secure and confidential manner (locked file or room)?

Is there easy access to a written policy about procedural safeguards and rights?

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HEALTH, SAFETY and SECURITY

Value Statement: Children have the best possible health; they learn and play in safety, basic comfort and family continuity.

A. Consumer Outcomes*: Examples

Indicators of Excellence

- ?? The family makes decisions that provide a positive balance between choice and risk.
- ?? With support from family, friends, provider staff and community members, adolescents make positive decisions regarding choices that have the potential to put them at risk.
- ?? The child is in the best possible health or receives prompt treatment, regardless of ability to pay.
- ?? The child is free from abuse or neglect.
- ?? The child has family, friends and neighbors who look out for his/her welfare.
- ?? Family income and assets cover the family's basic needs.
- ?? The family understands the early warning signs of their child's illness and has a plan of how to get help when early warning signs occur. **(MH)**
- ?? The family has an Advanced Directive for treatment on file at the appropriate places. **(MH)**

Outcomes Requiring Response

- ?? The child is subject to abuse or neglect.
- ?? There is no one who can confirm whether the adolescent is safe and secure.
- ?? The family does not have a health care provider.
- ?? The child has a health condition that needs attention or treatment.
- ?? The family has limited understanding of their child's illness, condition, symptoms, treatment options and/or medications.
- ?? The family frequently uses crisis services with little insight as to early warning signs of their child's illness or why and when the child needs treatment. **(MH)**

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B. Performance Measures: Examples

Indicators of Excellence

- ?? There is excellent communication between family, provider staff and health care professionals
- ?? Staff and family develop strategies to assure that the child is safe in his/her home and community.
- ?? Staff, in collaboration with the family, appraises the child's well being and identifies areas where more support may be needed.
- ?? Staff provides educational experiences and supports that will help the family make positive decisions in risky or emergency situations.
- ?? The agency assists with supports to help reduce stress in the family.
- ?? The staff develops strategies to meet the family's concerns about health and development of the child.
- ?? Staff assists the family to determine needs for financial assistance and locate necessary supports.
- ?? Staff fosters and helps strengthen relationships between family members and infants and children.
- ?? A mental health early intervention, crisis prevention plan is in place, which includes identifying and responding to early warning signs and a plan of how to get support (MH)

Performance Requiring Response

- ?? Medical documentation that relates to or affects the child's services is poor or non-existent.
- ?? Staff is unaware of factors that put the child at physical and emotional risk.
- ?? The family is not told when there is a change in staff.
- ?? Staff omits critical health and fitness issues from the child's plan or files. (MH, DD)
- ?? Staff lack knowledge of this child's health concerns and treatment options, specifically issues concerning the mental illness. (MH)
- ?? There is no plan for the child when he/she is in crisis. (MH,DD)
- ?? The staff limits the family's access to information about or understanding of their child's illness or treatment options.

C. Consumer Satisfaction

Quality of Life

- ?? The family expresses satisfaction with their child's health and emotional well being.

Performance

- ?? The family expresses satisfaction with the type and amount of support provided by the agency to promote their child's health, well being and safety.
- ?? Family members are satisfied with the resources made available by the service provider.

D. Suggested Questions for Reviewers: Samples

From the family's point of view:

- ?? Are there safety risks for your child that cause you concern?
- ?? Is your child safe in his/her school environment?
- ?? Is there a change you would like to see in the way your child is treated by the service provider?
- ?? Do you need information or training about emergencies or routine safety?

- ?? How would you describe your child's health?
- ?? Can you get the health care services your child needs?
- ?? What methods are you using to control the symptoms of your child's illness? **(MH)**
- ?? If your child is taking medications, what do they do for him/her?
- ?? Has the service provider offered choices about the treatment and medications your child uses? **(MH)**
- ?? What are the early symptoms your child experiences relevant to his/her illness? **(MH)**
- ?? Do you feel you have access to enough information about your child's illness and medications? Do you feel comfortable asking the staff questions about it? **(MH)**

For staff working with the family:

- ?? What have you offered the family to help them with concerns they have related to child safety?
- ?? How have you discussed issues about safety risks, abuse or neglect with the family?
- ?? Do you understand your responsibility to report suspected abuse or neglect? What does it entail?
- ?? Are you providing safety information to the family that is relevant to the age of their child?
- ?? How do you handle program-related health and safety complaints from the family?
- ?? What are the child's health and medical needs? Does the child see a health professional for regular care or check-ups?
- ?? How do you know if the family needs support to maintain family relationships?
- ?? What are the symptoms the child experiences? **(MH)**
- ?? What type of treatment does the child receive for symptoms of his/her illness? **(MH)**
- ?? What are the side effects the child experiences? **(MH)**

E. Reviewer Observations

Do members of the family or provider staff express concerns about health, safety or security for the child?

F. Documentation

Review the agency's policies for reporting abuse, neglect or accidents while in the home or community. Review medical and financial records related to the child's plan of services.

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RELATIONSHIPS

Value Statement: Children develop social skills; families maintain current relationships and have opportunities to meet and socialize outside their homes.

A. Consumer Outcomes*: Examples

Indicators of Excellence

- ?? The child has an active natural support network.
- ?? The adolescent spends time in inclusive environments.
- ?? The child has opportunities to learn social skills.
- ?? The child is developing skills to interact with others.
- ?? The family has opportunities to enjoy activities with friends and acquaintances.
- ?? The family remains connected to natural support networks.
- ?? The child and family choose how they participate in the life of their community.

Outcomes Requiring Response

- ?? The child and family are isolated or have restricted contact with others.
- ?? The child or family has few or no opportunities to develop relationships outside the home.
- ?? The adolescent has no ties with family or friends.
- ?? The child's support network consists entirely of paid staff.
- ?? No one outside of staff contributes to decision making for the child.
- ?? The family has no one with whom to share information or seek advice.

B. Performance Measures

Indicators of Excellence

- ?? Staff regularly schedules activities that promote opportunities for expanding the family's natural support network.
- ?? Staff provides information and requested supports to assist in maintenance and development of the family's new and existing support networks.
- ?? Staff assists families to connect with each other and to establish linkages with community organizations and support networks.
- ?? Staff helps natural support networks get organized and stay active.
- ?? Staff fosters and helps strengthen relationships between family members and infants and children.

Performance Requiring Response

- ?? Staff does not know the adolescent's friends, acquaintances and family.
- ?? Staff does not address how to build or improve natural support relationships with the child or family.
- ?? The provider staff excludes family, friends and community members from the planning process.

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C. Consumer Satisfaction

Quality of Life

?? The family expresses satisfaction with their life situation.

?? The adolescent is satisfied with her/his natural support network and what it provides.

Performance

?? The family feels satisfied with the agency's efforts to help their child interact with others.

?? The family expresses satisfaction with the type and amount of support provided by the agency to maintain their natural support network and to have opportunities to meet and socialize with people outside their home.

D. Suggested Questions for Reviewers: Samples

From the child and family's point of view:

?? Does your child get to play with others?

?? Does your child spend time with children who do not have disabilities?

?? Is your child developing relationships with others?

?? What work is the staff doing to help you with your child or family's natural support network?

?? Are you satisfied with the amount of contact you have with your natural support network?

?? To what degree do you feel your child is gaining social skills or improving in interactions with others?

For staff working with the family:

?? Does the family have support they want for helping to make decisions and choices?

?? How would you describe the type and amount of support provided by the agency to maintain the family's natural supports?

?? Is the child learning to interact with others?

?? How do you help the child make friends at school and in the community?

?? Do the child and family have enough support to build relationships?

?? What kinds of training have you received to help children build relationships and make community connections? What are your strategies for helping the child or family increase their support network?

?? How are you supporting this child or family if they wish to increase their natural support network?

E. Reviewer Observations

Observe interactions between the child and family members and between the family and other people. Ask about frequency of contact between the family and members of their natural support network.

F. Documentation

Note whether the family's natural support network is identified in the records and what is the level of involvement. Does the child's plan include goals and strategies for creating and/or maintaining a natural support network?

COMMUNITY PARTICIPATION

Value Statement: Children and their families lead fulfilling lives that include opportunities to participate in roles valued by citizens in the community.

A. Consumer Outcomes*: Examples

Indicators of Excellence

- ?? The child and/or family members contribute to the life of their community in ways they find meaningful.
- ?? The child and family take part in culturally valued activities.
- ?? The child has the necessary adaptive devices, and uses them to participate in community activities.
- ?? The family participates in activities that provide opportunities for their child's personal growth and increased life satisfaction.
- ?? The child's transition between service providers or an adolescent's transition out of school includes significant coordination between the child, family, providers and other groups or organizations.
- ?? The child and family have access to comprehensive and integrated community-based services.
- ?? The child participates in activities that take place in an integrated, natural environment.

Outcomes Requiring Response

- ?? The family has limited opportunities to participate in socially valued activities in the community.
- ?? The child's education, recreation and social activities occur solely in segregated settings.
- ?? The adolescent is never in the community except in a group of three or more people with disabilities.
- ?? The child uses community facilities only at times set aside for people with disabilities.
- ?? The child does not have the necessary adaptive devices, such as canes, motorized wheelchair, three-wheel bike, that will enable community access.
- ?? The child and family are isolated from people in their community.

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B. Performance Measures

Indicators of Excellence

- ?? Staff assists the child and family to become active members of the community.
- ?? Staff employ creative adaptations that assist the child to participate in typical activities or that help the family improve the child's participation.
- ?? Staff have a clear understanding of the child and family's strengths and needs relevant to increasing community participation.
- ?? The service provider assists the child and family with awareness of and access to integrated community activities and services.
- ?? The agency helps the family and child manage major life changes, including approach of adulthood and revision of living arrangements, with transition and aftercare coordination, support and communication with community resources.
- ?? Service plan goals and supports help the child and family identify and attain valued roles in the community.

Performance Requiring Response

- ?? Staff determines when and where a child will participate in the community.
- ?? Staff lacks the knowledge and expertise for supporting children and families in meaningful daily activities.
- ?? Staff sees the child as being too impaired to ever be able to work or live independently.
- ?? When talking about the child and family, staff focuses on inabilities and limitations rather than strengths and potential.
- ?? Agency strategies focus on maintaining the child in segregated settings.

C. Consumer Satisfaction

Quality of Life

- ?? Family members express satisfaction with their child's level of activity in community life.

Performance

- ?? The family is satisfied with the type and amount of support provided by the agency for their child's participation in community activities.
- ?? The adolescent is satisfied with efforts to coordinate transitions.

D. Suggested Questions for Reviewers: Samples

From the child and family's point of view:

- ?? In what ways do you keep in touch in the community? Would you like to be more involved in community activities?
- ?? What would allow you to increase your or your child's community participation?
- ?? Does your child spend time in places where there is a mixture of people who do and do not have disabilities?
- ?? What activities do you and your child enjoy?
- ?? Are there activities that you would like your child to be doing? What would it take to make it happen?
- ?? Are there things you would like to do that you don't do now because of your child's condition?
- ?? Do you participate in any support groups in the community?

?? Do you participate in subsistence activities, have a job, or volunteer in the community?

For staff working with the family:

?? What supports exist to assist the child and family members in social and community roles?

?? How do you know whether the family wants or needs assistance to help their child be more involved in the community?

?? How is the family encouraged and assisted to use a wide variety of community resources?

?? Is support provided if and when the family wishes to increase community involvement?

?? What kinds of training have you received for facilitating the building of relationships and the making of community connections?

?? What methods do you use to increase the family's awareness of the importance to their child's development of participating in integrated activities in the community?

E. Reviewer Observations

Is there evidence that the child or family is involved in community groups or attends community events? To what extent is the physical structure of the organization oriented to community participation?

F. Documentation

Do records indicate whether the family members are as involved in the life of the community as they wish to be? Does the child's plan include goals that support the child and family participating in the community?

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SECTION 3

Part A2:

Quality of Life Values and Outcomes, and Performance Indicators for Programs Providing Services to Adults

CHOICE AND SELF-DETERMINATION

Value Statement: People make meaningful choices in all aspects of their lives. People have opportunities to acquire the attitudes and abilities that result in developing personal goals and taking the initiative to attain them.

A. Consumer Outcomes*: Examples

Indicators of Excellence

- ?? The person makes all his/her own personal decisions about all aspects of life, such as employment, subsistence, community living, socializing, life-long learning, recreation and leisure.
- ?? The person makes choices and decisions free from undue external influence or interference.
- ?? The person has supports, skills or information necessary to make decisions.
- ?? The person can identify the steps needed to reach his or her goals and feels confidence in being able to take those steps.
- ?? The person controls his/her personal finances.
- ?? The person controls individualized and portable services.
- ?? The person is actively involved in planning and policy development in organizations from which he or she receives services.

Outcomes Requiring Response

- ?? Other people make decisions for the person that he/she is capable of making.
- ?? The person was placed in the current living environment and has no choice about other places to live.
- ?? The person has no opportunity to change services and supports.
- ?? The person has no options for employment, subsistence activities, community living, socializing, life-long learning, recreation or leisure from which to choose.
- ?? The person's preferences are unknown.
- ?? The person is given no information for making informed decisions.
- ?? The person must earn the right to increased control and decision making through learning new skills or becoming more independent.
- ?? The person's preferences for personal life goals are screened by others and discounted if deemed irrelevant or inappropriate.

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B. Performance Measures: Examples

Indicators of Excellence

- ?? Strategies are present to enhance the person's ability to make decisions in employment, subsistence, community living, socializing, life-long learning and recreation and leisure.
- ?? The person's future goals and dreams are the focus of the service plan goals, and those goals are being pursued.
- ?? The person's plan is based on what is important to him/her and reflects a positive balance between choice and risk.
- ?? Staff listens to all expressions of preference and, where possible and sensible, help implement what the person wants.
- ?? Staff is aware of and responds to the methods the person uses to communicate his/her likes and dislikes and to make decisions.
- ?? The organization always provides the person the opportunity to choose who works with him/her.
- ?? The organization always provides the person or guardian the opportunity to participate in hiring and evaluating those who work with him/her.
- ?? The person participates in an ongoing problem solving process used to make changes to the individual service plan.
- ?? The organization supports and encourages the person's involvement in the agency's policy development and planning.

Performance Requiring Response

- ?? Staff provides the person with little or no support for trying to reach his/her expressed goals.
- ?? Staff has little or no knowledge of ways to support self-determination.
- ?? Staff limit opportunities for the person to participate in developing basic living rules and routines.
- ?? Staff ignores or over-rides the person's preferences.
- ?? The person's plan is a continuation of previous plans without documentation supporting this decision.
- ?? Staff screens the person's choices and goals and eliminates those they consider inappropriate.
- ?? The person must resort to behavior deemed inappropriate to make his/her preferences known and to motivate staff to respond to them.
- ?? Staff are neither aware of nor respond to the methods the person uses to communicate his/her likes and dislikes. **(DD)**
- ?? Staff has limited knowledge of the person's decision-making abilities and preferences. **(DD)**

C. Consumer Satisfaction

Quality of Life

- ?? The person indicates satisfaction with her/his choices in employment, subsistence activities, community living, socializing, life-long learning and/or recreation and leisure.
- ?? The people who know the person best are satisfied with the opportunities he/she has to make choices for employment, community living, socializing, life-long learning, recreation and leisure. **(DD)**

Performance

- ?? The person is satisfied with the type and amount of support provided by the agency to improve his/her ability and increase his/her opportunities to make choices.
- ?? The people who know the person best are satisfied with the type and amount of support provided by the agency to improve the person's ability and increase his or her opportunities to make choices. **(DD)**

D. Suggested Questions for Reviewers: Samples

From the person's point of view:

- ?? What are your hopes and dreams for the future?
- ?? Describe how you decided to live here. How did you decide to live with these people?
- ?? Did you choose whether to work, what kind of job to have and where to work?
- ?? What do you do in a typical day? What do you do in your free time? Is it your choice?
- ?? Who has control over your spending money? Over your bank accounts?
- ?? How were the goals in your plan chosen?
- ?? What services are you receiving? How were they chosen?
- ?? Who works with you? How was that decided? Can you change if you're not satisfied?
- ?? Have you been asked your opinion about how the organization operates?

For people who know this person best:

- ?? Who decided where and with whom the person lives?
- ?? Who decided who would provide his/her supports? How do you know what services this person wants?
- ?? How was it decided if he/she wants to be employed and where he/she works? Who decides what he/she does during free time?
- ?? Do you know what he/she likes and dislikes? How do you know this?
- ?? Do you know how he/she makes decisions? How do you know this?
- ?? Are meetings held at times convenient to you?
- ?? Have you been asked your opinion about how the organization operates?

For the staff working with the person:

- ?? How does the organization support individual choice and identify adequate resources to support this?
- ?? Are you able to honor all the person's choices? How do you accomplish this?
- ?? Describe the person's decision-making methods.
- ?? What are you doing to enhance the person's decision-making abilities?
- ?? What are you doing to increase the person's control of his/her life?
- ?? What orientation/training have you received related to enhancing decision-making?
- ?? What are the person's likes and dislikes? How do you determine this?

E. Reviewer Observations

Observe the person's routine at home and, if possible, at work, to determine how decisions are made. Observe whether the person appears comfortable and satisfied with those providing supports and those with whom he/she lives and works.

F. Documentation

Look for a description of the person's decision-making abilities in the records. Are the person's preferred goals (lifestyle, personal growth, vocational) contained in the plan?

DIGNITY, RESPECT and RIGHTS

Value Statement: People are treated with dignity and respect and enjoy the common rights and privileges available to all citizens.

A. Consumer Outcomes*: Examples

Indicators of Excellence

- ?? The person understands his/her rights as a recipient of services.
- ?? The person is respected and valued by those around him / her, including those who provide support.
- ?? The person controls the flow of personal information.
- ?? The person has access to information and experiences that assist him/her in making informed decisions.
- ?? The person exercises his/her basic rights (voting, freedom of expression, legal representation, freedom of assembly and equal protection).
- ?? The person's culture and value systems are acknowledged and accommodated.
- ?? The person has the time, space and opportunity for privacy.
- ?? The person's right to responsibly engage in sexual relationships and enter into marriage based on his/her personal beliefs and values is protected.

(DD)

Outcomes Requiring Response

- ?? The person is subject to demeaning and disrespectful language and behavior.
- ?? The person has no time, space or opportunity for privacy.
- ?? The person has never been informed of his/her rights.
- ?? The person has never been informed of the agency's grievance procedure.
- ?? Decisions made by others threaten the person's health, safety, life or general well being.
- ?? There is evidence that the person is being demoralized or coerced against his/her will.
- ?? There are signs that this person's rights are being violated.

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B. Performance Measures: Examples

Indicators of Excellence

- ?? Staff supports this person in learning his/her rights and encourages and supports exercising those rights.
- ?? Direct service and management staff receives training on new paradigms and concepts such as consumer-directed services, self-determination, community membership, and natural supports.
- ?? The person's plan addresses issues that he/she sees as sensitive (or private) in a way that respects his/her privacy while making certain that those who need to know have adequate information.
- ?? Staff demonstrates high regard and respect for the person.
- ?? Provider staff regularly reviews with the person what is going into his/her records and explain how the information is used.
- ?? The staff has knowledge of general rights issues and specific laws addressing people with disabilities, such as the Americans with Disabilities Act.

Outcomes Requiring Response

- ?? Staff answers for the person when he/she is capable of answering for him/herself.
- ?? Staff lack knowledge of the person's cultural or religious beliefs or traditions, or fail to support those beliefs when making decisions that affect his/her life.
- ?? Staff lack respect for the person's privacy.
- ?? Staff share information about the person without permission.
- ?? Staff use negative or offensive language when describing the person.
- ?? Staff does not communicate with the person in the manner he/she typically prefers.
- ?? Staff lacks knowledge about using or doesn't choose to utilize adaptive equipment and devices the person needs.

C. Consumer Satisfaction

Quality of Life

- ?? The person feels respected and valued by others and feels his rights as a citizen are protected.
- ?? The people who know the person best feel he/she is respected and valued by others and feels his/her rights as a citizen are protected.

Performance

- ?? The person is satisfied with the type and amount of support provided by the agency to assure his/her rights are protected.
- ?? The people who know the person best are satisfied with the type and amount of support provided by the agency to assure his/her rights are protected.

D. Suggested Questions for Reviewers: Samples

From the person's point of view:

- ?? How have you been treated by the people you live with and who work with you?
- ?? Have you seen your records? Do you know what information is in your records?
- ?? Who has access to personal information about you? Do they have permission?
- ?? What would you do or where would you turn if you thought your rights were being violated? Do you understand due process or the agency's grievance process?

- ?? Do you have all the adaptive equipment and devices you need to do the things you want to do?
- ?? Do you worship at the place and time of your choice? Do you exercise your right to vote?
- ?? Are there cultural activities, customs and traditions that you are interested in? Do you take part in any of those things?
- ?? Can you have privacy when you want it?
- ?? Do people communicate with you in the way(s) you prefer?
- ?? How respectful are the treatment and services you receive from this agency?

For people who know this person best:

- ?? Do you think those who work with the person treat him/her with respect and dignity?
- ?? Is the person's privacy respected and protected?
- ?? What would you do if you felt the person's rights were violated? Do you understand due process and do you know what the agency's grievance process is?
- ?? Does the person have all the necessary adaptive equipment and devices?
- ?? Does the person vote and are supports in place to assist him/her in being an informed voter?
- ?? Are services and supports in place to respect and promote the person's cultural heritage?
- ?? Does the person have times and places for privacy?
- ?? Do staff and key people communicate with the person in his/her preferred mode(s)?
- ?? Is the person getting all the services he/she are entitled to receive?

For the staff working with the person:

- ?? How have you supported the person in exercising his/her rights?
- ?? What mechanisms are in place for the person to have access to the information in his/her records?
- ?? What is the person's preferred mode of communication?
- ?? How do you handle privacy and confidentiality issues?
- ?? Does the person have any special adaptive equipment? Do you know how to use it?
- ?? How do you support the person's cultural and religious preferences?

E. Reviewer Observations

How do staff and key people communicate in the presence of and away from the person? Do staff and other key people use People First, non-stigmatizing language? If there are cultural issues, are they respected? Do consumer-staff interactions reflect dignity and respect? Does the organizational environment give an unnecessary sense of separation between staff and consumers?

F. Documentation

Is respectful, People First language used in documentation? Is the person's cultural heritage documented? Does the person vote? Is consumer participation reflected in documentation?

HEALTH, SAFETY and SECURITY

Value Statement: People have the best possible health and live, work and play in safety and basic comfort.

A. Consumer Outcomes*: Examples

Indicators of Excellence

- ?? The person feels safe where he/she lives, works and learns.
- ?? The person has friends and neighbors who look out for his/her welfare.
- ?? The person makes concise, informed decisions involving choices that have the potential to put him/her at risk.
- ?? The person is in the best possible physical and mental health.
- ?? The person has the financial resources to meet his/her basic needs and has a backup financial plan for emergencies.
- ?? The person understands his/her illness, symptoms, treatment options and medications. **(MH)**
- ?? The person can identify the early symptoms of his/her illness and has a plan to get help when early warning signs occur. **(MH)**
- ?? The person has an Advanced Directive for treatment on file at the appropriate places. **(MH)**

Outcomes Requiring Response

- ?? The person does not have a regular physician.
- ?? The person has a health condition that is not being properly treated.
- ?? The person is not safe when in his/her home.
- ?? The person lives and/or works in a high risk, unsafe area.
- ?? The person does not have the financial resources to meet basic needs.
- ?? The person has no safeguards to assure his/her financial stability.
- ?? There is no one who can confirm whether the person is safe and secure.
- ?? The person is moved from one place to another without regard to the effects it may have on him/her.
- ?? The person is in unsafe housing or is homeless.
- ?? The person lacks knowledge about his/her illness and treatment options. **(MH)**
- ?? The person is not aware of early warning signs of his/her illness and frequently uses crisis services, with little insight as to why and when he/she needs them. **(MH)**

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B. Performance Measures: Examples

Indicators of Excellence

- ?? There is excellent communication between staff and health care professionals.
- ?? Staff develops supports and strategies that enhance the person's safety in his/her home and community.
- ?? Staff, in collaboration with the person and appropriate friends and family, appraises the person's physical and emotional well being and identify areas where more support may be needed.
- ?? Specific goals and related services are in place concerning overall health and fitness.
- ?? Staff understands this person's health concerns, specifically issues concerning his/her mental illness. **(MH)**
- ?? Staff directly supports and encourages the person to learn about his/her condition, illness, treatment options, and medications, and provides written or video information to be taken home. **(MH)**
- ?? An early intervention, crisis prevention plan is in place, which includes identifying and responding to early warning signs and a plan to get supports when needed. **(MH)**
- ?? The person's Advanced Directive is included in his/her record and this directive is followed as outlined. **(MH)**

Performance Requiring a Response

- ?? Service providers are unaware of necessary medical procedures or medication regimes.
- ?? The person is not told when there is a change in staff.
- ?? Medical documentation related to services the person receives is poor or non-existent.
- ?? Staff is unaware of factors that put the person at physical and emotional risk.
- ?? Staff is unaware of the person's financial condition.
- ?? There is no plan for dealing with the person when he/she is in crisis.
- ?? Overall health and fitness issues are not addressed.
- ?? Staff lack understanding about this person's health concerns and treatment options.
- ?? The person has not been given any information about his/her illness or treatment options.
- ?? The person has no Advanced Directive of treatment in place and/or has not been informed about that option.

C. Consumer Satisfaction

Quality of Life

- ?? The person expresses satisfaction with her/his health and emotional well being.
- ?? The person feels safe.

Performance

- ?? The person is satisfied with the type and amount of support provided by the agency to promote her/his health, emotional well being and safety.

D. Suggested Questions for Reviewers: Samples

From the person's point of view:

- ?? How safe do you feel where you live, work and/or in your school environment?
- ?? What do you do when you feel unsafe?
- ?? What would you if there were something you didn't like about the people who live or work with you?

- ?? How would you describe your health?
- ?? Where do you go for medical care?
- ?? Do you have enough money to pay for the things you want and need?
- ?? If you are taking medications, what are they and what do they do for you?
- ?? What are the symptoms you experience relevant to your illness? What methods are you using to control symptoms? What do you do when you when you have early symptoms? **(MH)**
- ?? Do you feel you have access to enough information about your illness and medications?
- ?? Have you ever been given choices about what treatment and medications to use? Do you feel comfortable asking questions about it? **(MH)**

For people who know this person best:

- ?? Has the person complained about how he was treated by people with whom he/she lives or works? How were the complaints handled?
- ?? To what extent is the person safe in the community?
- ?? What are the greatest risks for this person? How stable are this person's finances?
- ?? Does the person have untreated medical needs?
- ?? To what extent are staff knowledgeable about the person's health and medical needs?
- ?? Are all incidents, emergencies and illnesses reported to you in a timely fashion?
- ?? To what extent does this person understand the meanings of 'abuse' and 'neglect'? **(DD)**
- ?? What are the symptoms this person deals with in relation to his/her illness? **(MH)**
- ?? Do you feel the person is receiving the best possible treatment for these symptoms? **(MH)**
- ?? What are the early warning signs for this person? Does the person have support in dealing with early warning signs? **(MH)**

For staff working with the person:

- ?? How safe is the person in the community and at home?
- ?? What do you do to assure he/she is safe?
- ?? What are the greatest risks for this person? How do you determine what is reasonable risk?
- ?? What are the person's health and medical needs?
- ?? What are the symptoms this person experiences? **(MH)**
- ?? What type of treatment is the person receiving for the symptoms of his/her illness? What are the side effects he/she experiences? **(MH)**
- ?? What are the person's early warning signs of possible crisis, and what is your plan for supporting him/her at that time? **(MH)**

E. Reviewer Observations

Observe interactions between this person and people with whom he/she lives and works. Look for indicators of his/her lifestyle. Do the person's living and working environments appear to be safe?

F. Documentation

Review any documentation concerning abuse, neglect or accidents while in the home or community. Review medical and financial records relating to the person's services. Is there a safety plan in place for the person?

Is there a consumer/staff-developed plan in place for dealing with early warning signs of the person's illness? **(MH)** Is there an Advanced Directive in the file? **(MH)**

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RELATIONSHIPS

Value Statement: People have support to maintain current friendships, acquaintances and family relationships, and have opportunities to meet and socialize with people outside their homes.

A. Consumer Outcomes* Examples

Indicators of Excellence

- ?? The person has a variety of friends and a wide natural support network.
- ?? The person spends as much time as he/she desires with friends, acquaintances and family.
- ?? The person has life-long friends and acquaintances, with and without disabilities.
- ?? The person has a positive relationship with his/her family, which is a primary part of the person's support system.
- ?? The person's communication skills include showing empathy toward others.

Outcomes Requiring a Response

- ?? The person is isolated or marginalized from others.
- ?? The person has few opportunities to develop relationships outside his/her home.
- ?? The person lacks opportunities to enjoy privacy with friends.
- ?? The person has few ties with family or friends.
- ?? The person's support network consists entirely of paid staff.
- ?? The person has few people with whom to share information about her/his life.
- ?? The person has limited opportunities to enjoy activities with friends, acquaintances and family.

B. Performance Measures: Examples

Indicators of Excellence

- ?? Staff members are knowledgeable about the person's natural support system.
- ?? Services help to increase the chances that the person receives active support from his/her co-workers, members of associations, and/or classmates at school.
- ?? Staff establishes links with local services and community organizations that can provide informal networks of support, such as community associations and prospective employers.
- ?? Goals to increase specific social skills and/or enhance relationships are identified in the plan and implemented.
- ?? Family, friends and community members are identified as primary supports to reach goals.

Performance Requiring a Response

- ?? Staff does not know the person's friends, acquaintances or family.
- ?? Staff does not share nor is the person involved in the sharing of information with her/his natural support network.
- ?? Family, friends and community members are excluded from the planning process.
- ?? Staff spends a minimal amount of time with the person.
- ?? Services do not help the person build or enhance a natural support system.

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C. Consumer Satisfaction

Outcome

- ?? The person expresses satisfaction with her/his natural support network and what it provides.
- ?? The person is satisfied with opportunities to spend time with members of his/her support network.
- ?? People who know the person best express satisfaction with the person's relationship with family.
- ?? The person is satisfied with the amount of intimacy in his/her life.

Performance

- ?? The person is satisfied with the type and amount of support provided by the agency to maintain his/her natural support network and to have opportunities to meet and socialize with people outside the home.
- ?? Family members express satisfaction with the support they get concerning this person.

D. Suggested Questions for Reviewers: Samples

From the person's point of view:

- ?? Who are the people in your life that are most important to you?
- ?? Do you have friends who help you do things, get places, plan, make decisions, etc.? Do you feel you have enough friends?
- ?? How often are you in touch with these people? Are you satisfied with the amount of contact?
- ?? Who would you get in touch with if you needed help or advice?
- ?? Do you have chances to meet new people? Do you find it easy or hard to meet people?
- ?? How often do you find yourself lonely? What are your social outlets & activities?
- ?? What is your relationship with members of your family?
- ?? Do you wish you were closer to your family or do you see them enough?
- ?? To what degree do you get support in strengthening your relationships?

For people who know this person best:

- ?? Does the person have relationships with people who support and care for her/him? Do you know who they are?
- ?? How often does the person have contact with members of his/her natural support network?
- ?? Are friends and family actively involved in her/his support or in helping make plans and decisions?
- ?? Has he/she made any new friends or met any new people this year who have become part of his/her support network?
- ?? From your perspective, to what degree does this person seem isolated?
- ?? What are the ways this person socializes?
- ?? What are this person's strengths and needs relevant to socialization?

For staff working with the person:

- ?? Who are the people who are a part of the person's natural support network? How often are you in contact with them?
- ?? What are your strategies for supporting the person to increase his/her support network?
- ?? Does the person visit his/her friends whenever he/she wants?

- ?? How do you help the person make friends at work and in the community? Does the person have enough support to build relationships?
- ?? What training have you received to help people build relationships and make community connections?
- ?? How are you supporting this person to increase his/her natural support network?
- ?? What are the person's strengths and needs in the area of socialization?
- ?? How would you characterize this person's relationships with family? In what ways are you helping to strengthen his/her family relationships?

E. Reviewer Observations

Observe items (photos, letters, gifts, calendars, etc.) that would indicate the frequency of contact the person has with members of his/her natural support network. Are any of these people involved in the site review process? Does this person interact with others? Is there any evidence that this person belongs to any social organizations?

F. Documentation

Note in the records if the person's natural support network is identified. What involvement do people in natural support roles have in the person's life? Does the person's plan include goals and strategies for creating and/or maintaining a natural support network? To what degree does the person's service plan include socialization goals? Are family and friends included as supports on the plan?

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COMMUNITY PARTICIPATION

Value Statement: People have fulfilling lives that include opportunities to participate in roles valued by citizens in the community.

A. Consumer Outcomes*: Examples

Indicators of Excellence

- ?? The person participates in inclusive work, school and subsistence activities.
- ?? The person lives in an inclusive setting.
- ?? The person contributes to his/her community in an individual and meaningful way, based on his/her preferences.
- ?? The person participates in clubs, services organizations or special events in ways that positively influence others.
- ?? The person shops, banks, socializes and has recreation in places and in ways that are the same as other community members.
- ?? The person is able to get to where he/she wants to go when he/she wants to get there.

Outcomes Requiring a Response

- ?? The person works and socializes solely in segregated settings.
- ?? The person is never in the community except in a group of three or more people with disabilities.
- ?? The person uses community facilities only at times set aside for people with disabilities.
- ?? The person does not work, go to school, volunteer or have any other daytime activity, and he/she has no plans to do so in the future.
- ?? The person receives no wages for the work he/she does.
- ?? The person does not have adaptive devices, such as canes, motorized wheelchair, three-wheel bike, that will enable community access.
- ?? The person is isolated.

B. Performance Measures: Examples

Indicators of Excellence

- ?? Staff encourages and supports the person to become a contributing member of his/her community at work, play and community service.
- ?? Staff employ creative adaptations that allow the person to participate in typical community activities.
- ?? Staff has a clear understanding of the person's strengths and needs relevant to increasing community participation.
- ?? Integrated vocational and living goals are identified, and services increase the person's skills and supports needed to reach those goals.
- ?? Staff assists the person to acquire transportation when he/she wants to get somewhere.
- ?? The person is viewed by staff as having something valuable to contribute to the community.

Performance Requiring Response

- ?? Staff determines when and where a person will participate in the community.
- ?? Staff lacks the knowledge and expertise for supporting the person in jobs, subsistence activities or meaningful daily activities.
- ?? The staff assists the person at work and leisure only in segregated settings, such as sheltered work and day programs.
- ?? The person participates in the community only at times that are convenient to staff.
- ?? Services maintain the person in segregated settings.
- ?? The person can arrange transportation in the community only at times convenient to staff.

C. Consumer Satisfaction

Quality of Life

- ?? The person expresses satisfaction with where he/she lives and works.
- ?? The person is satisfied with opportunities he/she has to participate in preferred community activities.
- ?? The people who know the person best are satisfied with opportunities he/she has to participate in preferred community activities.

Performance

- ?? The person is satisfied with the type and amount of support provided by the agency for his/her participation in community activities.
- ?? The people who know the person best are satisfied with the type and amount of support provided by the agency for his/her participation in community activities.

D. Suggested Questions for Reviewers: Samples

From the person's point of view:

- ?? Do you have a job, take part in subsistence, and/or volunteer in the community?
- ?? What are your vocational/educational/subsistence goals? What supports are you receiving to help you reach your goals?
- ?? What activities do you like? Are there things you would like to do that you aren't doing? What would it take to make it happen?
- ?? To what extent do you feel supported in doing things you want to do?
- ?? Do you belong to any service organizations/ civic groups?
- ?? How and where do you spend time in the community? How do you get there?
- ?? Do you like where you live?
- ?? What supports do you have or need to live in your current home?

For people who know this person best:

- ?? Does the person have a job or daytime activity?
- ?? How do you know what community activities he/she prefers? How does he/she get to those locations?
- ?? What supports exist to assist him/her in community participation?
- ?? What contribution does he/she make to the community?
- ?? How is he/she encouraged and assisted to use community resources?
- ?? Is support provided if and when he/she needs it?
- ?? To what extent is the person meeting his/her vocational/educational goals? In what ways is the person being supported in meeting those goals?
- ?? Is the person living in the best environment possible for them?
- ?? What valued roles do you feel this person has?

For staff working with the person:

- ?? Do you feel the organization is supportive of community participation and identifies adequate resources to support this?

- ?? What are some of the ways you support the person in the community?
- ?? How do you determine where the person wishes to spend time in the community?
- ?? Are there activities or settings where the person doesn't need paid support?
- ?? What are you and the organization doing to encourage and support the person's participation in work, socializing and recreation in the community?
- ?? What contribution does the person make to his/her community?
- ?? How do you assist the person to get to different locations in the community?

E. Reviewer Observations

Observe the person in his/her social roles. What options are available to support his/her presence in the community. To what extent is the physical structure of the organization oriented to community participation?

F. Documentation

Check to see if documentation supports the person's preferences for social roles (including work). Does the plan reflect the person's stated vocational, educational and subsistence goals? Does the plan include goals that support the person's in participation in the community?

* Consumer Outcomes are quality of life indicators. As such, they may relate to parts of the consumer's life that extend beyond the focus of the services being provided by the program. Review teams will be instructed to apply only those indicators over which the program has some influence.

SECTION 3

Part B:

Administrative and Personnel Standards Checklist

Administrative and Personnel Standards Checklist

Developmental Disabilities / Mental Health / Infant Learning Programs

Administrative and Personnel Standards	Yes	No	Partial	N/A
STANDARDS FOR ALL PROGRAMS				
1. The agency has a clear, written mission or philosophy that focuses on the services it provides and how it empowers consumers and their families.				
2. Agency-wide education and orientation about mission, philosophy and values promote understanding and commitment to consumer-centered services in daily operations.				
3. The agency has a copy of a current external audit performed according to regulation.				
4. Budget controls, record keeping and staff training support good business practices and conform to state requirements.				
5. The agency has an identified governing body that establishes policies about the operation of the agency and the welfare and rights of all individuals served.				
6. The agency's governing body includes significant membership by consumers (DD, MH) or consumer family members (ILP), and embraces their meaningful participation.				
7. The governing body oversees the agency budget and ensures program quality.				
8. Governing body meetings are open to the public.				
9. The governing body oversees selection and evaluation of the agency director/chief executive officer.				
10. The agency maintains policies and procedures for preventing and correcting conflicts of interest.				
11. All facilities and programs operated by the agency provide equal access to all individuals.				
12. The agency actively solicits and carefully utilizes consumer and family input in agency policy setting and program delivery.				
13. The agency systematically involves consumers, staff and community in annual agency planning and evaluation of programs, including feedback from its current and past users about their satisfaction with the planning and delivery of services.				
14. The agency develops annual goals and objectives in response to consumer, community and self-evaluation activities.				
15. Programs provide services and information on a year-round basis.				
16. All agency publications, advertisements, brochures and articles reflect the philosophy of a consumer-driven system, support the service principles, and foster a positive and respectful portrayal of people who experience disabilities.				

Draft Combined Administrative and Personnel Standards Checklist

Administrative and Personnel Standards	Yes	No	Partial	N/A
STANDARDS FOR ALL PROGRAMS (cont.)				
17. The agency actively participates with other agencies in its community to maximize resource availability and service delivery.				
18. The agency collects required data and submits it to the appropriate state agency.				
19. Staff who are employed by, contract with, or volunteer for the provider agency have appropriate training (credentials where required), experience, and supervision to perform their job functions and meet all necessary legal, ethical, and regulatory requirements.				
20. The agency implements and maintains a system for review and revision of all job descriptions.				
21. Job descriptions specify minimum qualifications and responsibilities for all staff.				
22. The organization has and utilizes a procedure to incorporate consumer choice into the hiring and evaluation of direct service providers, and to ensure that special individualized services (e.g. foster care, shared care, respite care providers) have been approved by the family or consumer.				
23. The agency's personnel system complies with all applicable laws, statutes, regulations and equal employment opportunity mandates.				
24. The hiring process includes background and criminal checks (when appropriate) for direct care providers, personal and professional references and follow-up on required references.				
25. The agency provides new staff with a timely orientation/training according to a written plan, that includes, as a minimum, agency policies and procedures, program philosophy, confidentiality, reporting requirements (abuse, neglect, mistreatment laws), cultural diversity issues, and potential work related hazards associated with serving individuals with severe disabilities.				
26. The agency has policies and implements procedures to facilitate the development of non-paid relationships between consumers and other community members.				
27. The program obtains and documents informed consent from consumers (or ILP family members) before services are initiated and when services are changed or modified.				
28. The agency evaluation system provides performance appraisal and feedback to the employee and an opportunity for employee feedback to the agency.				
29. A staff development plan is written annually for each professional and paraprofessional staff person.				
30. The agency identifies available resources to meet the assessed training needs of staff.				

Draft Combined Administrative and Personnel Standards Checklist

Administrative and Personnel Standards	Yes	No	Partial	N/A
STANDARDS FOR ALL PROGRAMS (cont.)				
31. The performance appraisal system adheres to reasonably established timelines.				
32. The performance appraisal system establishes goals and objectives for the period of appraisal.				
33. The agency maintains written personnel policies for disciplinary action.				
34. The agency maintains a written procedure for employee grievances.				
ADDITIONAL STANDARDS FOR ILP PROGRAMS				
35. If funding is not available to meet the needs of all eligible children and their families, services will be prioritized in an identified order.				
36. If the agency director and early intervention/infant learning coordinator are not the same, the EI/ILP coordinator is involved in directing agency policy for early intervention/infant learning services.				
37. The agency networks with other agencies and individuals providing services to families and young children in the community.				
38. All professional and paraprofessional staff hired on waivers will have a training program developed by the agency and approved by the state.				
39. Staffing ratios are adequate to ensure that children and families receive the services and support agreed to in their IFSP.				
40. For center-based services, staff develop a program plan of activities and objectives for each session.				
41. Staffing patterns include adequate specialized personnel to provide the services agreed to in the IFSP.				
42. The adult-child ratio for center-based or community group activities for children under 18 months is two children per participating adult.				
43. The adult-child ratio for center-based or community group activities for children from 18 to 36 months old is three children per participating adult.				

SECTION 3
Part C:

File Review Checklists

EARLY INTERVENTION PROGRAMS

File and Individual Family Service Plan (IFSP) Review

Program: _____ **Date of Review:** _____

During a state program evaluation, at least five files will be randomly selected for in-depth review. The purpose of the file review is to determine how well the program is meeting required timelines for providing early intervention services, to evaluate the Individual and Family Service Planning process, and to review documentation of other contacts with the child and family. The files reviewed will include a random sample of 1) children who are eligible for Part H services, 2) those who are not eligible for Part H Services, 3) children currently in services, and 4) children discharged or transitioned in the past 12 months.

Child's Name: _____ Is the child eligible for Part H?: _____

Date of Birth: _____ Date of Enrollment: _____ Date of Discharge: _____

Care Coordinator/Primary Service Provider: _____

DOCUMENTATION REQUIREMENTS :	STANDARD MET?			
	Yes	No	Waiver	N/A
REQUIRED SERVICE TIMELINES :				
Initial evaluation completed in 45 days				
IFSP reviewed at six months				
Assessment performed at least annually				
Program notified school district within 6 months prior to child's third birthday				
Transition meeting held within 6 months prior to child's third birthday.				
FILE DOCUMENTATION REQUIREMENTS :				
Date of referral				
Source of referral				
Date of first contact with family				
Family Service Coordinator assigned				
Follow-up with referral source				
Parental consent for evaluation				
Family informed of rights				
Exchange of information form signed by parents				
Initial visit with family recorded				
Composition of multi-disciplinary team				
Evaluation/assessment methods/tools, 2 minimum				
Eligibility determination				

DOCUMENTATION REQUIREMENTS :	STANDARD MET?			
	Yes	No	Waiver	N/A
FILE DOCUMENTATION REQUIREMENTS (cont.):				
Evaluation/assessment includes:				
• health status and medical history				
• child's abilities, limitations and functioning				
• family's concerns, priorities, and resources				
• review of child's growth and development				
• assessment of family's strengths and needs				
Date of completion of evaluation/assessment				
Encounter forms (contact log, home visit forms, progress notes)				
IFSP DOCUMENTATION REQUIREMENTS:				
Current IFSP				
Name of Family Service Coordinator				
Signatures of evaluation/assessment and IFSP team members				
CPR identified by family				
Summary of child's level of development, including:				
• physical development (inc. vision, hearing & health)				
• cognitive status				
• communication				
• social emotional development				
• self-help/adaptive development				
• nutrition, growth and development				
Description of major outcomes and strategies, including:				
• timelines				
• statement of outcomes				
• degree of progress statements				
• revision of outcomes, as necessary				
Description of specific services, including:				
• description				
• frequency				
• intensity				
• location				
• method				
• persons responsible				
• date of initiation				
• payment source				
Statement of additional services needed, including:				
• financial obligations				
• plan for obtaining				
Documentation of natural environment or justification if services not in natural environment				

DOCUMENTATION REQUIREMENTS :	STANDARD MET?			
	Yes	No	Waiver	N/A
FAMILY RIGHTS :				
Families receive clear written information on their rights, including their right to:				
? timely access to all records relating to their child or family.				
? request correction or deletion of records which they believe are inaccurate, misleading or violate the privacy or other rights of the child or family.				
? confidentiality of information.				
? informed consent.				
? be informed of their rights in a clear and understandable way, and in their native language.				
? accept or decline any services without jeopardizing other services.				
? referral to advocacy or other legal services.				
? timely written notice before a change in the provision of services.				
? file a grievance.				
? timely administrative resolution of parents' complaints.				