

QUALITY REVIEW PANEL

INDIVIDUAL ASSESSMENT RATING TOOL

Class Member: _____

Address: _____

Phone: _____

Residential Provider Agency: _____

Address: _____

Phone: _____

ISC Agency: _____

ISC: _____

Caseload: **Class Members** _____ **Non-Class Members** _____

Address: _____

Phone: _____

Date of On-site Review: _____

Reviewer: _____

DEMOGRAPHICS

Name (last, first) _____ Nickname _____

Sex: M F

Date of Admission (to the agency) _____

Date of Birth _____

Age at Review _____

Level of Need Rating _____

ICAP Score _____

Conservator(s) Name(s) _____

Address _____ Phone _____

- Corporate (specify) _____
- Family Member (specify) _____
- Other (specify) _____
- N/A

Advocate Name(s) _____

Address _____ Phone _____

- Corporate (specify) _____
- Family Member (specify) _____
- Other (specify) _____
- N/A

Level of Intellectual Disability

- Mild**
- Moderate**
- Severe**
- Profound**

Mental Health Diagnosis (list all)

Psychiatric Medications

Daily Dosage*

Prescribed for

<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
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*** Add dosages for daily amounts.**

CLINICAL SERVICES:

Physical Therapy:

Yes No N/A

- Name/Agency of Physical Therapist _____

Occupational Therapy:

Yes No N/A

- Name/Agency of Occupational Therapist _____

Speech and Language:

Yes No N/A

- Name/Agency of Speech/Language Pathologist _____

Nutrition:

Yes No N/A

- Name/Agency of Nutritionist/Dietitian _____

Behavior Services:

Yes No N/A

- Name/Agency of Behavior Analyst _____

Nursing Services:

Yes No N/A

- Name/Agency of Nurse _____

Other Services (describe):

Name/Agency Providing Other Clinical Services _____

DOMAINS

1. Individual Support Planning
2. Home Environment and Safety
3. Personal Care and Dress
4. Staff Presence, Conduct, and Competence
5. Transportation
6. Achieving ISP Outcomes
7. Work, School, Day Activities
8. Leisure, Recreation, Social, and Relationships
9. Personal Funds Management
10. Behavioral Supports and Services
11. Mental Health Supports and Services
12. Health Care
13. Clinical Therapies/Communication Supports and Services
14. Dining/Dietary Supports and Services
15. Vision, Hearing, and Sensory Supports and Services
16. Protection from Harm
17. Conservatorship and Advocacy
18. Independent Support Coordination

INDIVIDUAL SUPPORT PLANNING					
1	Individual Support Planning	Y	N	N/A	Comments
1.A	ISP is current (developed within the past year), in the home, and accurately reflects class member.				
1.B	Agency informs the ISC whenever there are significant changes for class member and/or their services and supports,.				
1.C	Class member, his/her family, and conservator, are invited to actively participate in developing the ISP.				
1.D	At the time of class member's annual ISP meeting, all medical, clinical, and competency assessments were current (based on class member's abilities, needs, and desires for the future).				
1.E	Current assessments were used in the development of the ISP.				
1.F	Outcome statements reflect what class member wants to accomplish in the areas of relationships, work/retirement/school, participation in community life, personal decision-making, and training to become as self-sufficient as possible and are measurable, appropriate, and consistent with class member's vision of a desired life.				
1.G	Agency has completed a monthly review summarizing implementation of the services in the ISP for which they are responsible and any events that might have occurred regarding class member during the given month and has forwarded to the ISC.				
HOME ENVIRONMENT AND SAFETY					
2	Home Environment & Safety	Y	N	N/A	Comments
2.A	Home is clean, odor-free, and well maintained (floors, carpets, walls, furniture, windows, kitchens, baths, etc.).				
2.B	Kitchen and laundry appliances work.				
2.C	Home furnishings are typical of other homes.				
2.D	Class member has personal possessions, furnishings, and decorations of his/her choice, not				

	just in bedrooms, but the home reflects the individuals who live there.				
2.E	Class member can move freely throughout the home (with the exception of housemates' personal rooms); there are no designated staff areas (except in the case of live-in staff or agency leased office area, if applicable) where individuals are not allowed.				
2.F	Stairs (inside and out) have appropriate railings (based on class member's needs). No other fall hazards are present.				
2.G	No safety hazards (e.g., dangling wires, broken/exposed electrical outlets, broken windows) are present in the home.				
2.H	A fire extinguisher is located in the kitchen. A functional smoke detector is located outside bedrooms (or rooms used for sleeping), and on each level of the home. Carbon monoxide detectors are installed in homes with gas furnaces.				
2.I	Regular drills for fire and weather (e.g., tornado, earthquake) emergencies are conducted and documented on each shift (consistent with agency policy).				
2.J	Emergency contact phone numbers are readily available in easily accessible locations				
2.K	Contact names and numbers for regional DIDS investigators are posted or available to class members, families, and staff.				
2.L	Basic first aid supplies are available in the home and in all vehicles.				
2.M	Home is adequate to meet the needs of class member: (e.g., doorways widened, appropriate ramps, bathroom grab rails, walk-in/roll-in showers).				
2.N	Individualized accommodations specified in class member's ISP are present and in working order.				
2.O	Yard is safe and accessible to class member from the home (e.g., ramps, walkways, widened doorways).				
2.P	Garbage is disposed of properly and is contained.				
2.Q	The house does not stand out apart from other homes.				

PERSONAL CARE AND DRESS

3	Personal Care and Dress	Y	N	N/A	Comments
3.A	Class member is appropriately dressed and groomed. There are adequate supplies of seasonally appropriate clothing (including shoes and underwear) that is clean, well fitting, and in good condition.				
3.B	There is adequate storage space for clothing, which is consistently used based on class member's wants and needs.				
3.C	Class member has a supply of needed personal hygiene items that are appropriately stored.				
3.D	Class member is assisted, to the extent necessary, to complete regular oral hygiene activities.				
3.E	Dental recommendations are consistently implemented.				

STAFF PRESENCE, CONDUCT, COMPETENCE

4	Staff Presence, Conduct, Competence	Y	N	N/A	Comments
4.A.	A staffing plan is present and being followed as written.				
4.B	Adequate staff are present to provide the services and supports in class member's approved ISP.				
4.C	Staff treat class member, co-workers, visitors, persons calling on the telephone, etc. with respect and dignity.				
4.D	Staff demonstrate competency in person-specific training (e.g., sign language, behavior management).				
4.E	Staff respond promptly and respectfully to class member's basic needs, including personal hygiene.				
4.F	Staff interact with class member to engage him/her.				
4.G	Staff interactions foster class member's ability to make personal choices (e.g., in dress, meals, activities).				
4.H	Staff interactions promote learning of functional skills and overall independence, consistent with class member's approved ISP.				
4.I	In interviews, staff can answer basic questions				

	about class member's ISP, medical conditions and medications, and know the general reasons for therapies (e.g., speech language, physical, occupational, and/or behavior therapy) class member is receiving.				
4.J	Staff conduct promotes the premise that the home is class member's home (not the staff's home).				
TRANSPORTATION					
5	Transportation	Y	N	N/A	Comments
5.A	Agency has developed an adequate transportation system, which may include public transportation, carpooling, or agency vehicles, to ensure with reasonable planning that class member receives the services and supports consistent with his/her approved ISP.				
5.B	Vehicles are in good condition and interiors are clean, odor-free, comfortable, and safe. This is true for agency-owned vehicles as well as staffs' vehicles when used for the transportation of class member.				
5.C	All seatbelts work; special straps/locks for wheelchairs, etc. are present and operational; and ramps/lifts work.				
5.D	Vehicles are currently insured and registered by State law.				
5.E	Agency does not charge class member for vehicle maintenance or cleaning, except in situations explicitly approved by DIDS.				
ACHIEVING ISP OUTCOMES					
6	Achieving ISP Outcomes	Y	N	N/A	Comments
6.A	Agency participated (during the ISP meeting) in the development of outcomes in class member's ISP and outcomes are written in a manner that their achievement can be assessed/measured.				
6.B	Staff, as assigned, are engaged in activities designed to achieve class member's stated outcomes in his/her ISP.				
6.C	Agency monthly reviews in class member's records track progress toward ISP outcomes and				

	participation in listed outcome action steps.				
6.D	Provider(s) and ISC recognize when class member is not making progress toward ISP outcomes and take appropriate actions to address the problem(s) in a timely manner.				
WORK, SCHOOL, DAY ACTIVITY					
7	Work, School, Day Activities	Y	N	N/A	Comments
7.A.1	Documentation of day activities is complete and accurate (e.g., date/time, nature of activity, class member's responses/benefit from the activities, any adverse events).				
7.A.2	Staff are able to articulate competence in carrying out the day activities.				
7.B.	Day service provider's monthly reviews provide a summary of class member's receipt of and benefit from day services.				
7.C	Community-Based Day Services:				
7.C.1	Agency ensures that community activities are consistent with individual preferences that promote community integration, functional skill development, and/or pre-vocational activities; class member is afforded opportunities to choose among activities, schedules, and participation; activities offered are meaningful rather than random outings, and designed to determine interest in or locate opportunities for employment (if so desired).				
7.C.2	Class member is receiving community-based day services as described in his/her approved ISP, and such activities are consistent with community-based day service requirements (i.e., hours, types of activities).				
7.D	Work:				
7.D.1	ISP development considers class member's preferences/ability to work in competitive, supported, or volunteer work.				
7.D.2	ISP recommendations for vocational assessment and rehabilitative services are provided in a timely manner.				
7.D.3	ISP recommendations for paid or volunteer employment are pursued.				

7.D.4	Job coaching services are provided as needed.				
7.D.5	Staff ensure that class member is ready and transported to work on time.				
7.D.6	Agency pursues class member's desire to change jobs or increase/decrease work hours.				
7.E	Facility-Based Day Services:				
7.E.1	For class member who attends a facility-based day habilitation program or workshop, activities offered are meaningful to the person.				
7.F	Adult Education/Senior Citizens Programs:				
7.F.1	Agency supports class member in considering adult education programs if directed by the approved ISP.				
7.F.2	Agency supports class member in choosing and attending community-based senior citizen programs if directed by the approved ISP.				
7.G	School-Age Education Programs:				
7.G.1	Class member, if school-aged, has current IEP (Individual Education Plan) that includes all related services that are needed (e.g., transportation, OT, PT, speech/communication, behavior supports, nursing).				
LEISURE, RECREATION, SOCIAL, AND RELATIONSHIPS					
8	Leisure, Recreation, Social, and Relationships	Y	N	N/A	Comments
8.A	Class member has leisure activities (e.g., magazines, hobby materials, videos) available in the home aside from television, consistent with his/her approved ISP and personal funds budget.				
8.B	Agency ensures class member has opportunities to participate in a variety of experiences and in preferred activities during evenings and weekends.				
8.C	Agency assists class member in fostering relationships and support him/her in maintaining active and ongoing relationships with family, friends, co-workers, and neighbors, as directed by the approved ISP and per class member's desire.				
8.D	Agency ensures that class member has opportunities to attend religious services as often as desired, and at a church of his/her choosing (and not of staff preference).				
8.E	Agency provides information to class member				

	regarding membership to self-advocacy or other community organizations, and fosters membership attendance, if desired by the class member.				
PERSONAL FUNDS MANAGEMENT					
9	Personal Funds Management	Y	N	N/A	Comments
9.A	Class member's ISP specifies the extent to which he/she is capable of and willing to participate in their personal funds management, as well as the extent to which the agency is entrusted with assisting in the management of personal funds. Agency provides information regarding class member's capacity and willingness to participate in personal funds management during development of the ISP.				
9.B	Training has been designed and implemented to support class member in gaining necessary skills for more independent management of his/her personal funds, if directed by the approved ISP.				
9.C	Class member has access to his/her personal allowances at all times.				
9.D	Agency does not restrict class member's access or choice in spending his/her personal allowance as specified in the ISP without required approval of a human rights committee (HRC).				
9.E	Personal funds are securely stored (e.g., in a locked box) and each individual's funds are separately stored.				
9.F	Agencies who assist in management of personal funds or manage personal funds on behalf of class member have developed and implemented written policies and procedures to protect personal funds.				
9.G	Household supplies, groceries, utilities, furnishings, and rent are fairly determined and shared with housemates, live-in staff, etc.				
9.H	Class member is not charged low-balance or overdraft fees. Class member is not paying for medical care or drug coverage that is otherwise covered. Class member is not paying for expenditures properly charged to the agency or landlord, or incurred for the benefit of others (e.g.,				

	internet, routine landlord maintenance).				
9.I	Class member does not have a negative balance in his/her checking account, nor is there evidence of a negative balance in recent months.				
9.J	Class member's personal fund balance has not been allowed to exceed the limit for TennCare/Medicaid eligibility.				
9.K	Personal funds are not loaned to other individuals, staff, etc.				
BEHAVIORAL SUPPORTS AND SERVICES					
10	Behavioral Supports and Services	Y	N	N/A	Comments
10.A	Behavior evaluations meet professional standards, are based on sound determinations of behavioral necessity, and include appropriate and measurable goals, the teaching of replacement behaviors (e.g., self-monitoring, communication training, anger management, problem-solving), an assessment of how class member's mental health disorder (if any) and medical conditions contribute to the occurrence of target behaviors.				
10.B	Behavior support plan is written in plain language, describes benefits to class member, and how to implement the plan.				
10.C	Recommendations for behavior services and supports made in evaluations and plans are completed in a timely manner (except in situations where an appropriate rationale is documented in the record).				
10.D	Restraint or protective equipment pertaining to class member's behavior program is present and working properly.				
10.E	If behavior support plan includes rights restrictive interventions, BSP has been reviewed by a human rights committee (HRC) prior to implementation and at least annually thereafter.				
10.F	Staff are able to demonstrate or articulate competence in carrying out the behavior support plan.				
10.G	All behavior supports and services are properly documented at the time of service provision in the				

	agency's record for class member. Clinical services monthly reviews include a review/assessment of progress and related recommendations if data show no progress. BSP is modified if progress is not reflected.				
10.H	If class member needed crisis respite services during the past 12 months, these services were provided in class member's home whenever possible. If class member needed out-of-home crisis respite services during the past 12 months, these services were available in an appropriate crisis respite home/facility.				
MENTAL HEALTH SUPPORT AND SERVICES					
11	Mental Health Supports and Services	Y	N	N/A	Comments
11.A	Class member receiving psychotropic medications has complete psychiatric evaluations that discuss the benefits (risks) of medication regimens and include rationales for any psychotropic medications from prescribing practitioner. (Note: Class member who sees a psychiatrist regularly, <u>i.e.</u> , quarterly, monthly, etc., may have medication/therapy evaluations during those visits.)				
11.B	A current consent for all psychotropic medications is present in class member's records.				
11.C	Class member's psychotropic medication regimen has been reviewed at least annually by a human rights committee. (Note: If the medication is incorporated into a BSP, the HRC review of the plan meets this criteria.)				
11.D	Staff are able to locate information to explain the reason why class member is taking a medication and to explain the potential side effects.				
11.E	Agency has a documentation system in place for tracking targeted symptoms/behaviors and providing this information to class member's prescribing practitioner.				
11.F	Agency ensures that tardive dyskinesia screenings (<u>e.g.</u> , AIMS, DISCUS), are completed (as appropriate) at least every six months.				
11.G	Agency ensures that if class member has an order				

	for PRN psychotropic medication, the physician's order describes the circumstances under which the medication can be given, the dosage, frequency of administration, and the maximum number of doses that can be given in a specified time frame.				
11.H	Class member is offered counseling services if needed and agency ensures these services are being provided as in the approved ISP.				
11.I	If class member has a history of admissions to psychiatric facilities, agency has developed a plan or strategy to aid in preventing future psychiatric admissions.				
11.J	If class member needed crisis respite services during the past 12 months, these services were provided in class member's home whenever possible. If class member needed out-of-home crisis respite services during the past 12 months, these services were available in an appropriate crisis respite home/facility.				
HEALTH CARE					
12	Health Care	Y	N	N/A	Comments
12.A	Class member receives all medical and nursing/health care services and supports listed in his/her approved ISP.				
12.B	Class member has regular (refer to most recent physical exam for frequency) physical exams. Exam reports are appropriately completed with sufficient substantive commentary.				
12.C	Class member has exams (e.g., GYN exams, pap smears, mammograms, prostate exams) consistent with physician's recommendations, in consultation with physician.				
12.D	Class member has at least annual dental exams. These are more frequent if recommended by dentist.				
12.E	If class member has a seizure disorder that is unstable or not well-controlled, he or she has been evaluated by a neurologist and the primary care physician has considered and implemented recommendations for treatment.				

12.F	Recommendations for health care services and supports are completed in a timely manner.				
12.G	All medical and health care supports and services are properly documented by the service provider at the time of service provision in class member's record.				
12.H	Record contains copies of class member's most recent medical and nursing assessments, with prior years' assessments stored in agency files.				
12.I	Flu vaccine and other immunizations are given as recommended by the PCP.				
12.J	All direct support staff who administer medications have successfully completed the Medication Administration by Unlicensed Personnel course, as per DIDS medication administration guidelines.				
12.K	Staff are able to locate information to explain the reason why class member is taking a medication and to explain the potential side effects.				
12.L	Medications are securely stored in a locked location (double-locked for controlled substances).				
12.M	Agency has developed and implemented procedures for medication security storage and disposal. Agency routinely monitors implementation of these procedures.				
12.N	Medication administration record (MAR) accurately lists all administered physician-prescribed medications, dosages, time(s) or administration, route of administration, etc.				
12.O	Medication administration record is documented and legible, with explanations for PRN's, omitted doses, etc. There is no pencil or White-out, etc.				
12.P	Medication administration complies with basic standards of practice (i.e., only one person's medications prepared at a time; medication administration documented when given; medications administered in accordance with special instructions; etc.).				
12.Q	Medications in class member's medication box match their medication orders.				
12.R	No discontinued or expired medications or medications prescribed to other individuals are				

	stored in class member's medication box.				
12.S	Medication errors occur infrequently, and when they do occur, are properly documented, reported, reviewed, and addressed.				
12.T	Agency regularly assesses class member for side effects and reports promptly to the prescribing practitioner.				
CLINICAL THERAPIES/COMMUNICATION SUPPORTS AND SERVICES					
13	Clinical Therapies/Communication Support and Services	Y	N	N/A	Comments
13.A	Class member who receives speech, occupational, or physical therapy has evaluations in his/her record for the therapy services.				
13.B	Therapy evaluations and plans of care include appropriate and measurable goals.				
13.C	Plans of care are implemented consistently and in accordance with the approved ISP.				
13.D	Recommendations for clinical therapy (OT, PT, SLP) services and supports made in evaluations and plans are completed in a timely manner, in accordance with the approved ISP.				
13.E	All clinical therapy services and supports are properly documented by the clinical service provider at the time of service provision.				
13.F	If class member utilizes adaptive equipment for positioning, ambulation, or physical management, the equipment is available, clean, and in good repair; staff demonstrate competency in proper use and techniques of the equipment (e.g., lifts, tie-downs, wheelchairs, sidelyers).				
13.G	If augmentative communication devices or equipment have been recommended, they are tailored to class member's specific needs and abilities. Class member has access to communication devices and the devices are working properly (including having charged batteries); class member is encouraged to use the devices or equipment across all life areas and on community outings; staff demonstrate competency in proper use and techniques of the devices or				

	equipment.				
DINING/DIETARY SUPPORTS AND SERVICES					
14	Dining/Dietary Supports and Services	Y	N	N/A	Comments
14.A	Home has an adequate supply of food, including basic commodities (e.g., sugar, flour, condiments). Food is appropriately stored.				
14.B	Home has an adequate supply of dishes, utensils, pots, pans, and bake-ware, etc.				
14.C	Meals served are per class member's preferences and dietary needs.				
14.D	Home staff involve class member in meal planning to ensure that personal preferences for meals are accommodated. To the extent possible, class member is involved in food shopping and meal preparation.				
14.E	Home staff makes mealtime a pleasant experience for class member.				
14.F	Special dining plans for class member are carried out and designed so as to be used in restaurants and on other outings.				
14.G	All special dining equipment (e.g., dycem mats, special utensils, cups) listed in class member's dining plan is present.				
14.H	When class member has a specific, prescribed diet, he/she is achieving or maintaining goals of the diet.				
14.I	Class member noted to have unexplained weight loss/gain, GERD, diabetes, or swallowing issues, is promptly taken to an appropriate practitioner for evaluation.				
VISION, HEARING, AND SENSORY SUPPORTS AND SERVICES					
15	Vision, Hearing, and Sensory Supports and Services	Y	N	N/A	Comments
15.A	<i>Vision:</i>				
15.A.1	Class member who has a visual impairment has been evaluated for current needs and recommendations from evaluations have been addressed in a timely manner as indicated in the approved ISP.				

15.A.2	Class member who has prescribed eyeglasses is supported in use and care, as outlined in the approved ISP.				
15.A.3	Surgical or other intervention have been explored for class member noted to have cataracts or other treatable disease(s) of the eye, as recommended by an ophthalmologist.				
15.A.4	Class member whose visual impairment interferes with his/her orientation or mobility has been evaluated by a qualified specialist for training in orientation or mobility techniques or other training needed to support independent function (e.g., self-feed techniques, dressing, kitchen safety).				
15.A.5	If adaptive devices (e.g., cane for mobility, tactile cues on clothing) have been recommended in class member's approved ISP, they are used consistently across all life environments, and staff demonstrate competency in proper use and techniques employed.				
15.A.6	Environmental modifications have been made as in the class member's approved ISP.				
15.A.7	Consideration has been given to obtaining specialized services that aid in increasing class member's ability to access his/her environment more independently (e.g., service animals, services for the blind, street crossing safety training).				
15.B	Hearing:				
15.B.1	Class member who has a hearing impairment has been evaluated for current needs and recommendations from evaluations have been addressed in a timely manner as indicated in the approved ISP.				
15.B.2	Class member who has prescribed hearing aids is supported in their use and care, as indicated in the approved ISP.				
15.B.3	Class member with a hearing impairment has adaptive devices to support independent function (e.g., visual alerts, bed-shaker for fire alert), and staff demonstrate competency in proper use and techniques employed.				
15.B.4	Consideration has been given to obtaining				

	specialized services that aid in increasing class member's ability to access his/her environment more independently (e.g., sign language, services for the deaf).				
15.C	Sensory:				
15.C.1	Class member who demonstrates stereotypic or self-stimulatory behavior (e.g., rocking, hand-waving, hand-mouthing, etc.) has been evaluated regarding sensory deficits, and therapeutic plans or programs regarding class member's sensory deficits are implemented consistently and across all life areas.				
15.C.2	Class member is provided with intervention(s) designed to provide alternative means of sensory stimulation and reduce the stereotypic self-stimulatory behavior; staff demonstrate competency in implementing the intervention(s).				
15.C.3	Home environment provides for consistent exposure and easy access to appropriate means for stimulation and activity.				
PROTECTION FROM HARM					
16	Protection from Harm	Y	N	N/A	Comments
16.A	There is evidence class member is protected from harm, including from incidents of abuse, neglect, and exploitation.				
16.B	Staff are knowledgeable of what constitutes abuse, neglect, and exploitation as well as other types of reportable incidents.				
16.C	Staff understand how to report an incident.				
16.D	There is evidence that the agency reviews all incidents in a timely manner and responds when trends are identified.				
16.E	There is no evidence agency or its staff members have a pattern of missed or late reporting of critical incidents, including allegations of abuse, neglect, and exploitation.				
CONSERVATORSHIP AND ADVOCACY					
17	Conservatorship and Advocacy	Y	N	N/A	Comments
17.A	Agency provides information, as requested, to				

	conservator/advocate, if applicable.				
17.B	Agency ensures the conservator/advocate has access to class member, if applicable.				
17.C	A conservator actively represents class member.				
17.D	If not, the circle of support has discussed and determined if class member is in need of a conservator, or if the current conservator is not providing adequate representation, and a replacement is needed.				
17.E	An advocate actively represents class member.				
17.F	If not, the circle of support has discussed and determined if class member is in need of an advocate, or if the current advocate is not providing adequate representation, and a replacement is needed.				
17.G	Conservator/advocate has assisted class member in accessing needed and desired supports and services as well as other things that are important to class member.				
17.H	Conservator/advocate has determined class member's satisfaction with supports and services.				
17.I	Conservator/advocate has determined the effectiveness of class member's services and supports.				
INDEPENDENT SUPPORT COORDINATION					
18	Independent Support Coordination	Y	N	N/A	Comments
18.A	Independent support coordinator (ISC) has demonstrated competency in assisting class member and circle of support in development of an individual support plan (ISP) that describes the services and supports necessary to implement class member's vision of a desired life.				
18.B	Independent Support Coordinator makes a face-to-face visit with class member at least every 21 days, and notes reflect contact with the class member across all service environments.				
18.C	ISC has monitored that services are consistently provided in the type, amount, frequency, and duration as specified in class member's approved ISP.				

18.D	The ISC has amended the ISP as needed whenever there are significant changes in a class member's life and/or services and supports.				
18.E	ISC has assisted class member in understanding his/her right to appeal adverse actions and facilitated the appeal process, upon request.				
18.F	ISC has contact with family, conservator, advocate, and/or any other significant individuals in class member's life to assess satisfaction and improve coordination of services.				
18.G	ISC receives and reviews monthly review reports from all service providers.				
18.H	ISC has assisted class member in accessing non-waiver services as needed.				
18.I	ISC is knowledgeable about incidents and investigations involving class member, and take action, when necessary, to ensure protection from harm.				