OPIA Risk Management System

Risk Indicator Report - DDD Community

Report on Data Collected Between

Tuesday, January 01, 2013 And Wednesday, January 01, 2014

Tier 1 (LRC of 101 or more)

Quality Domain	Insp	ection and	d Prograi	m Revie	w		t Reporti anageme		Abuse/N	leglect In	vestigation	Financi	al Audits	
Quality Indicator	Licensed Residential Capacity (LRC)	Size of agency based on LRC	Provis Lice		Multiple Provisional Licenses	Unusual In Report Timelin	ing	Failure to Submit Invtgn Rpts	Substai Investi		Repeat Victims	Audit Submission	Deficit Fund Balance	
Threshold	N/A	N/A	N/A	10%	1	3.0	N/A	<mark>30%</mark>	N/A	N/A	1	<mark>No</mark>	Yes	
Indicator Operational Definition (These values represent data captured during the entire 12-month period and reflect the status of the agency during that timeframe only)	Maximum # of individual who can reside at an agency	TIER 1 (101 or more), TIER 2 (51 to 100), TIER 3 (1 to 50), TIER 4 (0)	Number of licenses issued*	% of licenses that were prov- isional	Number ofsites which had more than one provisional license	Average # of days between date known to staff and date reported	Avg for last 3 mnths of period	% of missing reports compared to those due	Number of incidents which SRU investi- gated	# of incidents SRU substant- iated	Number of SRs who were involved in 2 or more <u>substantiated</u> SRU invstgns	Agency submitted an audit	Agency's audit identified a deficit fund balance	
Agency												Gray fields involv	indicate no ement	Thresholds Triggered:
Tier 1 (LRC of 101 or more)														
ADVOSERV OF NEW JERSEY INC	410	Tier 1	46			1.5	1.3		13	3		Yes	No	0
ALLIES INC	206	Tier 1	61			2.0	2.4	6.4%	10	4		Yes	No	0
ALTERNATIVES INC	109	Tier 1	22			1.7	1.4		8	2		Yes	No	0
BANCROFT NEUROHEALTH	529	Tier 1	74	9.5%		2.6	2.2		33	7		Yes	No	0
CAPE MAY ARC	101	Tier 1	19			1.1	1.2		3			Yes	No	0
CARING HOUSE PROJECTS INC	207	Tier 1	43			2.0	2.2		15	4	1	Yes	No	1
COMMUNITY ACCESS UNLIMITED	285	Tier 1	55			1.4	1.2		7	2		Yes	No	0
COMMUNITY OPTIONS INC	296	Tier 1	99			3.4	3.0		21	5		Yes	No	1
DELTA COMMUNITY SUPPORTS, INC	124	Tier 1	39			3.4	3.9	31.8%	2	1		Yes	No	2
DEVEREUX FOUNDATION	229	Tier 1	52			4.0	4.2	20.0%	10	4		Yes	No	1
EASTERN CHRSTN CHLNS RETRT	124	Tier 1	9			1.4	1.3					Yes	No	0
ELWYN NEW JERSEY	263	Tier 1	48			1.9	1.9	2.4%	8			Yes	No	0
ESSEX ARC	142	Tier 1	29			1.5	1.5		2			Yes	No	0
KELSCH ASSOC INC	187	Tier 1	20			3.0	2.6	39.2%	8	3		Yes	No	1

Quality Domain	Inspe	ection and	d Prograi	n Revie	w		t Reporti anageme		Abuse/N	eglect In	vestigation	Financia	ıl Audits	
Quality Indicator	Licensed Residential Capacity (LRC)	Size of agency based on LRC	Provis Lice		Multiple Provisional Licenses	Unusual In Report Timelin	ing	Failure to Submit Invtgn Rpts	Substar Investig		Repeat Victims	Audit Submission	Deficit Fund Balance	
Threshold	N/A	N/A	N/A	10%	1	3.0	N/A	30%	N/A	N/A	1	<mark>No</mark>	Yes	
Indicator Operational Definition (These values represent data captured during the entire 12-month period and reflect the status of the agency during that timeframe only)	Maximum # of individual who can reside at an agency	TIER 1 (101 or more), TIER 2 (51 to 100), TIER 3 (1 to 50), TIER 4 (0)	Number of licenses issued*	% of licenses that were prov- isional	Number ofsites which had more than one provisional license	Average # of days between date known to staff and date reported	Avg for last 3 mnths of period	% of missing reports compared to those due	Number of incidents which SRU investi- gated	# of incidents SRU substant- iated	Number of SRs who were involved in 2 or more substantiated SRU invstgns	Agency submitted an audit	Agency's audit identified a deficit fund balance	
Agency												Gray fields involv		Thresholds Triggered:
MORRIS ARC	147	Tier 1	30			1.6	1.5		1			Yes	No	0
NATIONAL MENTOR HEALTHCARE INC	111	Tier 1	76	5.3%		1.8	1.9		18	5	1	Yes	No	1
OCEAN ARC	173	Tier 1	39			3.6	2.7	9.5%	4			Yes	No	1
PAFACOM INC	156	Tier 1	27	3.7%		2.2	1.9		4	2		No	No	1
REM-NJ INC	152	Tier 1	42	4.8%		2.8	3.1		9	2		Yes	Yes	1
SERV ACHIEVEMENT CENTER	125	Tier 1	31			3.9	2.0		7			Yes	Yes	2
SOMERSET ARC	111	Tier 1	22			1.4	1.3		1			Yes	No	0
SPECTRUM FOR LIVING	147	Tier 1	18			2.0	2.6	10.5%	5	4		Yes	No	0
SUSSEX ARC	114	Tier 1	1			1.8	2.1		3	2		Yes	No	0
TWIN OAKS COMMUNITY SERVICES, INC.	152	Tier 1	30			2.0	2.7	2.9%	5	1		Yes	No	0
UNION ARC	103	Tier 1				1.2	0.9					Yes	No	0
UNIVERSAL INSTITUTE INC	118	Tier 1	17			1.1	1.4		6	1		Yes	No	0
WILLOWGLEN ACADEMY-NJ INC	165	Tier 1	1			3.8	3.6	3.6%	7	6	1	Yes	No	2
Tier 2 (LRC of 51 to 100)			1											
21 PLUS, INC.	60	Tier 2	12			3.7	6.1					Yes	No	1
ARC - MIDDLESEX CTY INC	78	Tier 2	1			2.3	3.0	11.1%	1			Yes	No	0
ATLANTIC ARC	90	Tier 2	16			3.2	2.1		9	3		Yes	No	1
BERGEN-PASSAIC ARC	91	Tier 2	34			1.3	1.6		1			Yes	No	0
BURLINGTON ARC	56	Tier 2				1.4	1.2					Yes	No	0
CAPITOL CARE INC	76	Tier 2	19			1.9	2.0		6	1		Yes	No	0

Quality Domain	Insp	ection and	d Progra	m Revie	w		t Reporti anageme		Abuse/N	eglect In	vestigation	Financia	al Audits	
Quality Indicator	Licensed Residential Capacity (LRC)	Size of agency based on LRC	Provis Lice		Multiple Provisional Licenses	Unusual II Report Timelin	ing	Failure to Submit Invtgn Rpts	Substar Investig		Repeat Victims	Audit Submission	Deficit Fund Balance	
Threshold	N/A	N/A	N/A	10%	1	3.0	N/A	<mark>30%</mark>	N/A	N/A	1	<mark>No</mark>	Yes	
Indicator Operational Definition (These values represent data captured during the entire 12-month period and reflect the status of the agency during that timeframe only)	Maximum # of individual who can reside at an agency	TIER 1 (101 or more), TIER 2 (51 to 100), TIER 3 (1 to 50), TIER 4 (0)	Number of licenses issued*	% of licenses that were prov- isional	Number ofsites which had more than one provisional license	Average # of days between date known to staff and date	Avg for last 3 mnths of period	% of missing reports compared to those due	Number of incidents which SRU investi- gated	# of incidents SRU substant- iated	Number of SRs who were involved in 2 or more <u>substantiated</u> SRU invstgns	Agency submitted an audit	Agency's audit identified a deficit fund balance	
Agency						reported						Gray fields involv	indicate no ement	Thresholds Triggered:
CENTER FOR FAMILY SUPPORT NJ	81	Tier 2	1			1.8	1.2		7	3	2	Yes	No	1
CENTER FOR HMNSTC CHG OF NJ IN	73	Tier 2	14			3.1	5.5		1			Yes	No	1
CEREBRAL PALSY ASSOCIATION OF MIDDLESEX	91	Tier 2	21			2.4	2.4		2	1		Yes	No	0
CEREBRAL PALSY OF NO JERSEY	54	Tier 2	4			2.4	1.4					Yes	No	0
DDANJ	65	Tier 2	12			4.7	5.8					Yes	No	1
DEPT FOR PERSONS WITH DISABILI	74	Tier 2				1.2	1.2		1			Yes	No	0
EDEN AUTISM SERVICES, INC	82	Tier 2	18			2.9	0.7		3	1		Yes	No	0
ENABLE INC	57	Tier 2	14			4.6	5.2		2	1		Yes	No	1
GLOUCESTER CTY ARC	95	Tier 2	22	4.5%		1.6	1.4		3	1		Yes	No	0
HUDSON MILESTONES	55	Tier 2	10			1.4	0.9		1			Yes	No	0
HUNTERDON ARC	89	Tier 2	25			7.3	6.5	100.0%	4	3		Yes	No	2
KEYSTONE COMMUN RESIDENCE INC	68	Tier 2	1			5.5						Yes	No	1
MERCER ARC	76	Tier 2	17			4.4	1.2	14.3%	5	2		Yes	No	1
MONMOUTH ARC	92	Tier 2				2.3	2.6		1			Yes	No	0
NATL INSTITUTE F/PEOPLE W/DIS	59	Tier 2	9			1.7	1.3					Yes	Yes	1
NEW CONCEPTS FOR LIVING INC	55	Tier 2	8			1.0	1.4		2			Yes	No	0
OUR HOUSE INC	87	Tier 2	22			1.2	1.2		2	2		Yes	No	0
PLUS-NJ, INC./NEURORESTORATIVE NJ	78	Tier 2	15	6.7%		12.5	5.4	14.3%	3	1				1
RES-CARE NJ INC	68	Tier 2	15			3.1	2.6	12.5%	4	1		Yes	Yes	2

Tier 2 (LRC of 51 to 100) Quality Domain	Insp	ection and	d Progra	m Revie	w	Incident Mo	t Reporti anageme		Abuse/N	leglect In	vestigation	Financia	al Audits	
Quality Indicator	Licensed Residential Capacity (LRC)	Size of agency based on LRC	Provis Lice		Multiple Provisional Licenses	Unusual In Report Timelin	ing	Failure to Submit Invtgn Rpts	Substai Investi _į		Repeat Victims	Audit Submission	Deficit Fund Balance	
Threshold	N/A	N/A	N/A	10%	1	3.0	N/A	30%	N/A	N/A	1	No No	Yes	
Indicator Operational Definition (These values represent data captured during the entire 12-month period and reflect the status of the agency during that timeframe only)	Maximum # of individual who can reside at an agency	TIER 1 (101 or more), TIER 2 (51 to 100), TIER 3 (1 to 50), TIER 4 (0)	Number of licenses issued*	% of licenses that were prov- isional	Number ofsites which had more than one provisional license	Average # of days between date known to staff and date reported	Avg for last 3 mnths of period	% of missing reports compared to those due	Number of incidents which SRU investi- gated	# of incidents SRU substant- iated	Number of SRs who were involved in 2 or more substantiated SRU invstgns	Agency submitted an audit	Agency's audit identified a deficit fund balance	
Agency												Gray fields involv		Thresholds Triggered:
WARREN ARC	88	Tier 2	18			2.2	1.7		6	4	1	Yes	Yes	2
YOUTH CONSULTATION SERVICES	56	Tier 2	11			2.6	1.7		5	1				0
Tier 3 (LRC of 1 to 50)	1													1
1ST CP OF NEW JERSEY	18	Tier 3	3			3.4	0.0					Yes	No	1
ABC GROUP HOME INC	9	Tier 3	2			1.0						Yes	No	0
ADEPT PROGRAMS	44	Tier 3	5			3.3	1.9		1	1		Yes	No	1
ADVANCING OPPORTUNITIES, INC.	44	Tier 3	10			4.4	3.3	14.3%	2	1		Yes	No	1
ALFA DEVELOPMENT INC	20	Tier 3	4			1.6	0.0					Yes	No	0
ALLEGRO SCHOOL INC	29	Tier 3	6			7.5	6.0	33.3%				Yes	No	2
AMIB INC	50	Tier 3	10			2.7	2.9	25.0%	1			Yes	No	0
ARCHWAY PROGRAMS	21	Tier 3	4			1.0	0.9					Yes	Yes	1
BENCHMARK HUMAN SERVICES	37	Tier 3	10			1.7	2.7							0
BETHEL RIDGE	6	Tier 3	1			4.0						Yes	No	1
BETHESDA LUTHERAN COMMUNITIES, INC.	15	Tier 3	3			4.6	4.2					No	No	2
CAREER OPPORTUNITY DEVELOPMENT	5	Tier 3	1			1.6	2.3		2	2		Yes	No	0
CHILDRENS AID AND FAMILY SERVICES	11	Tier 3	3	<mark>100.0%</mark>		4.8	16.5							2
CLIFTON ADULT OPPORTUNITY CTR	13	Tier 3	2			3.0	0.3					Yes	No	1
COMMUNITY ACTION FOR IND LVG I	42	Tier 3				1.6	1.1		3	2		Yes	Yes	1
COMMUNITY QUEST	20	Tier 3	5	20.0%		2.2	1.4		1	1		Yes	No	1
CPC BEHAV HC INC	17	Tier 3	3			0.9	0.5					Yes	No	0

Quality Domain	Insp	ection and	d Progra	m Revie	w		t Reporti anageme	9	Abuse/N	eglect In	vestigation	Financia	al Audits	
Quality Indicator	Licensed Residential Capacity (LRC)	Size of agency based on LRC	Provis Lice		Multiple Provisional Licenses	Unusual II Report Timelin	ing	Failure to Submit Invtgn Rpts	Substan Investig		Repeat Victims	Audit Submission	Deficit Fund Balance	
Threshold	N/A	N/A	N/A	10%	1	3.0	N/A	30%	N/A	N/A	1	<mark>No</mark>	Yes	
Indicator Operational Definition (These values represent data captured during the entire 12-month period and reflect the status of the agency during that timeframe only)	Maximum # of individual who can reside at an agency	TIER 1 (101 or more), TIER 2 (51 to 100), TIER 3 (1 to 50), TIER 4 (0)	Number of licenses issued*	% of licenses that were prov- isional	Number ofsites which had more than one provisional license	Average # of days between date known to staff and date	Avg for last 3 mnths of period	% of missing reports compared to those due	Number of incidents which SRU investi- gated	# of incidents SRU substant- iated	Number of SRs who were involved in 2 or more substantiated SRU invstgns	Agency submitted an audit	Agency's audit identified a deficit fund balance	
Agency						reported						Gray fields involv	indicate no ement	Thresholds Triggered:
CUMBERLAND ARC	2	Tier 3	2									Yes	No	0
DUNGARVIN NJ INC	45	Tier 3	1			3.2	5.0	6.7%	1					1
DURAND ACADEMY INC	23	Tier 3				1.8	1.0		4	2		Yes	No	0
EASTER SEAL SOC OF NJ INC	21	Tier 3	5			0.8	0.5					Yes	No	0
EDEN ACRES INC	2	Tier 3	1											0
EIHAB HUMAN SERVICES	28	Tier 3	6			1.3	1.0							0
EQUAL PARTNERS INC	9	Tier 3	2			1.9	0.0					Yes	No	0
EVERAS COMMUNITY SERVICES, INC.	42	Tier 3	9			3.6	1.4	25.0%				Yes	No	1
FEDERATION OF MULTICULTURAL PR	46	Tier 3	10	10.0%		6.0	5.9		4			Yes	No	2
FRIENDS OF CYRUS INC	2	Tier 3	1			1.7	1.6							0
HEART TO HEART HOME CARE	14	Tier 3	2			0.7	1.0		2	1				0
J-ADD	46	Tier 3	10			1.3	1.4					Yes	No	0
JAWONIO INC	26	Tier 3	5			3.0	3.0		3			Yes	Yes	2
JESPY HOUSE INC	19	Tier 3	1			1.5						Yes	No	0
JEWISH SVC F/T DD OF METROWEST	39	Tier 3	10			1.2	1.3		2	1		Yes	No	0
KEYSTONE COMMUNITY LIVING INC	49	Tier 3	10			3.1	1.2					Yes	No	1
LADACIN NETWORK INC	31	Tier 3	4			1.4	2.0		3	1		Yes	No	0
LIFE OPPORTUNITIES UNLIMITED	21	Tier 3				1.9	2.0		1			Yes	No	0
LIFE SKILLS RESOURCE CENTER	17	Tier 3				7.6	1.0		1	1		Yes	No	1

Quality Domain	Insp	ection and	d Progra	m Revie	w		t Reporti anageme		Abuse/N	eglect In	vestigation	Financia	al Audits	
Quality Indicator	Licensed Residential Capacity (LRC)	Size of agency based on LRC	Provis Lice		Multiple Provisional Licenses	Unusual In Report Timelin	ing	Failure to Submit Invtgn Rpts	Substan Investig		Repeat Victims	Audit Submission	Deficit Fund Balance	
Threshold	N/A	N/A	N/A	10%	1	3.0	N/A	<mark>30%</mark>	N/A	N/A	1	<mark>No</mark>	Yes	
Indicator Operational Definition (These values represent data captured during the entire 12-month period and reflect the status of the agency during that timeframe only)	Maximum # of individual who can reside at an agency	TIER 1 (101 or more), TIER 2 (51 to 100), TIER 3 (1 to 50), TIER 4 (0)	Number of licenses issued*	% of licenses that were prov- isional	Number ofsites which had more than one provisional license	Average # of days between date known to staff and date reported	Avg for last 3 mnths of period	% of missing reports compared to those due	Number of incidents which SRU investi- gated	# of incidents SRU substant- iated	Number of SRs who were involved in 2 or more <u>substantiated</u> SRU invstgns	Agency submitted an audit	Agency's audit identified a deficit fund balance	
Agency						12						Gray fields involv	indicate no ement	Thresholds Triggered:
LIVING IN FREEDOM	4	Tier 3	1			0.0			1			No	No	1
LUTHERAN SOCIAL MINISTRIES OF	15	Tier 3	2	<mark>100.0%</mark>		2.2	0.4		1			Yes	No	1
MATHENY SCH AND HOSP INC	30	Tier 3	5			1.8	1.9		2	1		Yes	No	0
MENTOR ABI, LLC	35	Tier 3	5	40.0%		4.7	4.9		4	1				2
MIDLAND ADULT SERVICES INC.	29	Tier 3	1			1.4	1.4	50.0%				No	No	2
MILLER GROUP HOME INC	14	Tier 3	2			4.0	6.0					Yes	Yes	2
MOSS REHAB/DRUCKER BRAIN INJURY CENTER	8	Tier 3	1			2.2	1.7							0
NEIGHBOURS INC	10	Tier 3	1			6.1	2.0		1	1		Yes	No	1
NEW HORIZONS IN AUTISM INC	42	Tier 3	11			3.4	4.4	50.0%				Yes	No	2
NHS OF NEW JERSEY	38	Tier 3	2			2.8	2.0					Yes	Yes	1
NJ COMMUNITY DEV CORP	15	Tier 3	4			1.8	1.2		1	1				0
OCCUPATIONAL TRNG CTR OF BURL	5	Tier 3	1			2.0	1.9		1	1		Yes	No	0
OPPORTUNITY KNOCKS INC	37	Tier 3	8			5.1	14.0		3			Yes	No	1
P. I. L. O. T. SERVICES INC	34	Tier 3				2.5	3.9		1			Yes	Yes	1
PARTNERSHIPS FOR PEOPLE INC	24	Tier 3	7			2.6	2.6		2	1		Yes	Yes	1
PCDI	15	Tier 3	4			15.4	14.8					Yes	No	1
PENNREACH	8	Tier 3	2			2.1	1.5	33.3%				No	No	2
PRINCE ASSN F/T DEVEL DSABL IN	15	Tier 3	3			2.5	5.3					Yes	No	0
Q.M.A.N.J. INC	48	Tier 3	13			1.7	1.8		1			Yes	No	0

Quality Domain	Insp	ection and	d Progra	m Revie	w		t Reporti anageme		Abuse/N	eglect In	vestigation	Financia	al Audits	
Quality Indicator	Licensed Residential Capacity (LRC)	Size of agency based on LRC	Provis Lice		Multiple Provisional Licenses	Unusual In Report Timelin	ing	Failure to Submit Invtgn Rpts	Substar Investig		Repeat Victims	Audit Submission	Deficit Fund Balance	
Threshold	N/A	N/A	N/A	10%	1	3.0	N/A	<mark>30%</mark>	N/A	N/A	1	<mark>No</mark>	Yes	
Indicator Operational Definition (These values represent data captured during the entire 12-month period and reflect the status of the agency during that timeframe only)	Maximum # of individual who can reside at an agency	TIER 1 (101 or more), TIER 2 (51 to 100), TIER 3 (1 to 50), TIER 4 (0)	Number of licenses issued*	% of licenses that were prov- isional	Number ofsites which had more than one provisional license	Average # of days between date known to staff and date reported	Avg for last 3 mnths of period	% of missing reports compared to those due	Number of incidents which SRU investi- gated	# of incidents SRU substant- iated	Number of SRs who were involved in 2 or more substantiated SRU invstgns	Agency submitted an audit	Agency's audit identified a deficit fund balance	
Agency												Gray fields involv	indicate no ement	Thresholds Triggered:
RAPHA, INC.	5	Tier 3				8.1	1.0					No	No	2
REHABILITATION SPECIALISTS	18	Tier 3	4			3.3	1.0							1
ROSE HOUSE	12	Tier 3	3			2.8	7.8					Yes	No	0
SALEM ARC	11	Tier 3	2			1.6	2.0		1			Yes	No	0
SCHI DISABILITY SERVICES, INC.	5	Tier 3	2			1.0	1.0					Yes	Yes	1
SEARCH DAY PROG INC	7	Tier 3	1			0.3	0.0					Yes	No	0
SKYLANDS CENTER	10	Tier 3	2			1.0						Yes	No	0
SPECIAL CHILDREN'S CENTER	9	Tier 3	4			1.3	1.2					Yes	No	0
SPECIAL HOMES OF NJ INC	28	Tier 3	7			2.6	1.0		2	1		Yes	No	0
SPECTRUM FOR LIVING MIDDLESEX	23	Tier 3	3			0.0	0.0					Yes	No	0
ST JOSEPH SCHOOL F/T BLIND	11	Tier 3	1											0
THE ARC OF CAMDEN COUNTY	48	Tier 3	17			1.8	2.1		3	2		Yes	No	0
THE OPEN DOOR, LLC	9	Tier 3	3			9.3	3.0					Yes	No	1
VINE COMMUNITY	4	Tier 3	1											0
VOLUNTEERS OF AMERICA	5	Tier 3	1			3.3			1	1				1
WINDMILL ALLIANCE INC	15	Tier 3	1			1.9	1.7					Yes	No	0
WOMANSPACE INC	4	Tier 3	1			3.0	3.0							1
ZION INC	15	Tier 3	3			2.1						Yes	No	0
Tier 4 (LRC of 0)														
ABILITIES CTR OF SOUTHERN NJ		Tier 4				1.5								0

Quality Domain	Insp	ection and	d Progra	m Revie	w	Incident Mo	t Reporti anageme		Abuse/N	eglect In	vestigation	Financia	ıl Audits	
Quality Indicator	Licensed Residential Capacity (LRC)	Size of agency based on LRC	Provis Lice		Multiple Provisional Licenses	Unusual In Report Timelin	ing	Failure to Submit Invtgn Rpts	Substar Investig		Repeat Victims	Audit Submission	Deficit Fund Balance	
Threshold	N/A	N/A	N/A	10%	1	3.0	N/A	<mark>30%</mark>	N/A	N/A	1	<mark>No</mark>	Yes	
Indicator Operational Definition (These values represent data captured during the entire 12-month period and reflect the status of the agency during that timeframe only)	Maximum # of individual who can reside at an agency	TIER 1 (101 or more), TIER 2 (51 to 100), TIER 3 (1 to 50), TIER 4 (0)	Number of licenses issued*	% of licenses that were prov- isional	Number ofsites which had more than one provisional license	Average # of days between date known to staff and date reported	Avg for last 3 mnths of period	% of missing reports compared to those due	Number of incidents which SRU investi- gated	# of incidents SRU substant- iated	Number of SRs who were involved in 2 or more <u>substantiated</u> SRU invstgns	Agency submitted an audit	Agency's audit identified a deficit fund balance	
Agency												Gray fields involv		Thresholds Triggered:
ABILITIES OF NORTHWEST JERSEY		Tier 4				1.2	1.0		1	1		No	No	1
ACCREDITED HEALTH SVCS INC		Tier 4												0
ADVOSERV NJ, INC.		Tier 4				1.7	3.0							0
AHS HOSPITAL CORP		Tier 4												0
ALL HEALTH CARE SVCS		Tier 4												0
APPROPRIATE LIVING F/T AUTISTI		Tier 4												0
BAYADA NURSES INC		Tier 4												0
BENEDICTINE SCH FOR EXPTNL CHL		Tier 4												0
BENHAVEN INC		Tier 4												0
BERGEN CO SPEC SERVICES		Tier 4				2.1	0.7		1					0
BERGEN COUNTY YJCC-SHALOM		Tier 4				0.0								0
BOSTON HIGASHI SCHOOL INC		Tier 4												0
BRAIN INJURY ALLIANCE OF NJ INC.		Tier 4				1.0						Yes	No	0
BRENTWOOD HEALTH CARE, INC		Tier 4												0
BRIARWOOD-BROOKWOOD INC		Tier 4												0
BURLINGTON CTY CP ASSN		Tier 4										Yes	No	0
CAMP OAKHURST/NEW YORK SVCS F/		Tier 4				1.0			1					0
CAMPHILL VILL KIM HILLS INC		Tier 4												0
CAPE MAY SPECIAL SERVICES		Tier 4												0

Tier 4 (LRC of 0) Quality Domain	Insp	ection and	d Progra	m Revie	w		t Reporti anageme		Abuse/N	eglect In	ivestigation	Financi	al Audits	
Quality Indicator	Licensed Residential Capacity (LRC)	Size of agency based on LRC	Provis Lice		Multiple Provisional Licenses	Unusual In Report Timelin	ing	Failure to Submit Invtgn Rpts	Substar Investi <u>s</u>		Repeat Victims	Audit Submission	Deficit Fund Balance	
Threshold	N/A	N/A	N/A	10%	1	3.0	N/A	<mark>30%</mark>	N/A	N/A	1	No No	Yes	
Indicator Operational Definition (These values represent data captured during the entire 12-month period and reflect the status of the agency during that timeframe only)	Maximum # of individual who can reside at an agency	TIER 1 (101 or more), TIER 2 (51 to 100), TIER 3 (1 to 50), TIER 4 (0)	Number of licenses issued*	% of licenses that were prov- isional	Number ofsites which had more than one provisional license	Average # of days between date known to staff and date reported	Avg for last 3 mnths of period	% of missing reports compared to those due	Number of incidents which SRU investi- gated	# of incidents SRU substant- iated	Number of SRs who were involved in 2 or more <u>substantiated</u> SRU invstgns	Agency submitted an audit	Agency's audit identified a deficit fund balance	
Agency												Gray fields involv		Thresholds Triggered:
CARE FINDERS INC		Tier 4												0
CARING WITH COMPASSION		Tier 4												0
CATHOLIC CHAR-DIOC OF METUCHEN		Tier 4										Yes	No	0
CATHOLIC CHARITIES ARCH NEWARK		Tier 4				1.0	1.0							0
CATHOLIC FAMILY & COMMUNITY SV		Tier 4												0
CENTER FOR DISCOV MAG SVCS COR		Tier 4				1.0								0
CENTER FOR EDUCATIONAL ADVANCE		Tier 4												0
CEREBRAL PALSY ADULT ACTIVITY		Tier 4				11.0	1.0		1	1		Yes	No	1
CEREBRAL PALSY LEAGUE OF UNION		Tier 4				0.0						Yes	No	0
CHAPEL HAVEN INC		Tier 4												0
CHRISTOPHER HOUSE		Tier 4												0
COMMUNITY HEALTH LAW PROJECT		Tier 4										Yes	No	0
COMMUNITY MEDICAL REFERRALS IN		Tier 4												0
COMMUNITY OPTIONS ENTERPRISES		Tier 4				1.5	1.8		2	2		Yes	No	0
COMMUNITY PERSONNEL SERVICES I		Tier 4												0
COMPUTER ENABLING PROGRAM FOUN		Tier 4												0
COOPERATIVE HOUSING CORP		Tier 4												0
COSAC		Tier 4										Yes	No	0
DAUGHTERS OF MIRIAM		Tier 4				1.2	0.5					Yes	No	0

Quality Domain	Insp	ection and	d Prograi	m Revie	w	Incident Mo	t Reporti anageme		Abuse/N	leglect In	vestigation	Financi	al Audits	
Quality Indicator	Licensed Residential Capacity (LRC)	Size of agency based on LRC	Provis Lice		Multiple Provisional Licenses	Unusual In Report Timelin	ing	Failure to Submit Invtgn Rpts	Substai Investi <u>s</u>		Repeat Victims	Audit Submission	Deficit Fund Balance	
Threshold	N/A	N/A	N/A	10%	1	3.0	N/A	<mark>30%</mark>	N/A	N/A	1	<mark>No</mark>	Yes	
Indicator Operational Definition (These values represent data captured during the entire 12-month period and reflect the status of the agency during that timeframe only)	Maximum # of individual who can reside at an agency	TIER 1 (101 or more), TIER 2 (51 to 100), TIER 3 (1 to 50), TIER 4 (0)	Number of licenses issued*	% of licenses that were prov- isional	Number ofsites which had more than one provisional license	Average # of days between date known to staff and date reported	Avg for last 3 mnths of period	% of missing reports compared to those due	Number of incidents which SRU investi- gated	# of incidents SRU substant- iated	Number of SRs who were involved in 2 or more <u>substantiated</u> SRU invstgns	Agency submitted an audit	Agency's audit identified a deficit fund balance	
Agency						Геропец						Gray fields involv		Thresholds Triggered:
DEAF INDEP LVG ASSOC INC		Tier 4												0
DELTA-T GROUP INC		Tier 4												0
DELTA-T GROUP NORTH JERSEY INC		Tier 4												0
DEVELOPMENTAL DISABILITIES HEA		Tier 4										Yes	No	0
DIVINE PROVIDENCE VILLAGE		Tier 4												0
DORSON HOME CARE INC		Tier 4												0
EDISON SHELTERED WORKSHOP		Tier 4				0.0								0
EL ROI INC		Tier 4	1			2.6	2.0	50.0%				No	No	2
ELWYN		Tier 4				8.8	2.0							1
EMERALD HEALTH CARE SERVICES I		Tier 4												0
EMPLOYMENT HORIZONS		Tier 4				0.8	1.5							0
FAMILY RESOURCE NETWORK		Tier 4				2.3	3.0					Yes	No	0
FIRST OCCUPAT CTR OF NJ		Tier 4												0
FLORIDA INST F/NEURO REHAB INC		Tier 4												0
FOUR WINDS COMMUNITY		Tier 4												0
GOODWILL INDUST OF SOUTHERN NJ		Tier 4				0.0								0
HASC CENTER INC		Tier 4												0
HOLLYDELL INC		Tier 4				1.8	8.0					Yes	No	0
HUDSON ARC		Tier 4				9.4	0.0					No	No	2

Quality Domain	Insp	ection and	d Progra	m Revie	w		t Reporti anageme		Abuse/N	eglect In	vestigation	Financia	al Audits	
Quality Indicator	Licensed Residential Capacity (LRC)	Size of agency based on LRC	Provis Lice		Multiple Provisional Licenses	Unusual In Report Timelin	ing	Failure to Submit Invtgn Rpts	Substar Investig		Repeat Victims	Audit Submission	Deficit Fund Balance	
Threshold	N/A	N/A	N/A	10%	1	3.0	N/A	<mark>30%</mark>	N/A	N/A	1	<mark>No</mark>	Yes	
Indicator Operational Definition (These values represent data captured during the entire 12-month period and reflect the status of the agency during that timeframe only)	Maximum # of individual who can reside at an agency	TIER 1 (101 or more), TIER 2 (51 to 100), TIER 3 (1 to 50), TIER 4 (0)	Number of licenses issued*	% of licenses that were prov- isional	Number ofsites which had more than one provisional license	Average # of days between date known to staff and date reported	Avg for last 3 mnths of period	% of missing reports compared to those due	Number of incidents which SRU investi- gated	# of incidents SRU substant- iated	Number of SRs who were involved in 2 or more <u>substantiated</u> SRU invstgns	Agency submitted an audit	Agency's audit identified a deficit fund balance	
Agency												Gray fields involv		Thresholds Triggered:
IN HEALTH ASSOCIATES		Tier 4												0
INTERNATION MEDICAL RESOURCES		Tier 4												0
J-ADD RESPITE SERVICES		Tier 4										Yes	No	0
JERSEY CAPE DIAG TRNG OPP CTR		Tier 4												0
JEWISH FAM & CHLDNS SVC		Tier 4										Yes	No	0
JUDGE ROTENBERG ED CTR INC		Tier 4				-287.0	-287.0							0
JUSTICE RESOURCE INST INC		Tier 4												0
KEYSTONE COMMUN RESOURCES INC		Tier 4				1.1	1.1							0
KING"S DAUGHTERS" SCH OF MAU		Tier 4												0
KINGSWAY LEARNING CENTER		Tier 4												0
KOLBURNE SCHOOL INC		Tier 4												0
LAKEVIEW NEUROREHAB CTR INC		Tier 4												0
LARC SCHOOL INC		Tier 4				2.0						Yes	No	0
LEANDER HOUSE INC		Tier 4												0
LIVINGSTON TWP		Tier 4												0
LOVING CARE AGENCY, INC.		Tier 4												0
LUKAS FOUNDATION		Tier 4												0
MAGNOLIA HOUSE OF SFTY HRB LLC		Tier 4												0
MARTHA LLOYD CRF INC		Tier 4												0

Quality Domain	Insp	ection and	d Prograi	m Revie	w		t Reporti anageme		Abuse/N	eglect In	ivestigation	Financia	al Audits	
Quality Indicator	Licensed Residential Capacity (LRC)	Size of agency based on LRC	Provis Lice		Multiple Provisional Licenses	Unusual In Report Timelin	ing	Failure to Submit Invtgn Rpts	Substar Investig		Repeat Victims	Audit Submission	Deficit Fund Balance	
Threshold	N/A	N/A	N/A	10%	1	3.0	N/A	<mark>30%</mark>	N/A	N/A	1	<mark>No</mark>	Yes	
Indicator Operational Definition (These values represent data captured during the entire 12-month period and reflect the status of the agency during that timeframe only)	Maximum # of individual who can reside at an agency	TIER 1 (101 or more), TIER 2 (51 to 100), TIER 3 (1 to 50), TIER 4 (0)	Number of licenses issued*	% of licenses that were prov- isional	Number ofsites which had more than one provisional license	Average # of days between date known to staff and date reported	Avg for last 3 mnths of period	% of missing reports compared to those due	Number of incidents which SRU investi- gated	# of incidents SRU substant- iated	Number of SRs who were involved in 2 or more <u>substantiated</u> SRU invstgns	Agency submitted an audit	Agency's audit identified a deficit fund balance	
Agency						reported						Gray fields involv		Thresholds Triggered:
MARYS MANOR INC		Tier 4												0
MELMARK HOME INC		Tier 4				7.6	10.0	33.3%	1					2
METROPOLITAN HOME HEALTH CARE		Tier 4												0
MILTON DVLPMTL SVCS INC		Tier 4				14.0								1
MONMOUTH COUNTY PARK SYSTEM		Tier 4												0
NATIONAL DEAF ACADEMY LLC		Tier 4												0
NEW ENGLAND CTR FOR CHLN INC		Tier 4												0
NEW ENGLAND VILLAGE INC		Tier 4												0
NJ FOUNDATION OF DENTISTRY		Tier 4										Yes	No	0
NJARC		Tier 4				0.6	0.0					No	No	1
NURSING CARE INC		Tier 4												0
NW ESSEX COMMUN HEALTHCARE NET		Tier 4				0.5	0.0					Yes	No	0
OCCUPATIONAL CTR OF UNION		Tier 4				2.5	1.3							0
OPPORTUNITY PROJECT INC		Tier 4												0
OTSEGO CTY CHAPTER NYSARC INC		Tier 4												0
PASSAIC CTY ELKS CP CTR		Tier 4				0.9						Yes	No	0
PATHFINDER VILLAGE INC		Tier 4												0
PATHWAYS TO INDEPENDENCE INC		Tier 4				2.8	0.5					No	No	1
PEDIATRIC SERVICES OF AMERICA		Tier 4												0

Quality Domain	Inspection and Program Review						t Reporti anageme		Abuse/N	eglect In	vestigation	Financial Audits		
Quality Indicator	Licensed Residential Capacity (LRC)	Size of agency based on LRC	Provisional Licenses		Multiple Provisional Licenses	Unusual Incident Reporting Timeliness		Failure to Submit Invtgn Rpts	Substantiated Investigations		Repeat Victims	Audit Submission	Deficit Fund Balance	
Threshold	N/A	N/A	N/A	10%	1	3.0	N/A	<mark>30%</mark>	N/A	N/A	1	<mark>No</mark>	Yes	
Indicator Operational Definition (These values represent data captured during the entire 12-month period and reflect the status of the agency during that timeframe only)	Maximum # of individual who can reside at an agency	TIER 1 (101 or more), TIER 2 (51 to 100), TIER 3 (1 to 50), TIER 4 (0)	Number of licenses issued*	% of licenses that were prov- isional	Number ofsites which had more than one provisional license	Average # of days between date known to staff and date reported	Avg for last 3 mnths of period	% of missing reports compared to those due	Number of incidents which SRU investi- gated	# of incidents SRU substant- iated	Number of SRs who were involved in 2 or more substantiated SRU invstgns	Agency submitted an audit	Agency's audit identified a deficit fund balance	
Agency						1.						Gray fields involv		Thresholds Triggered:
PERSONAL-TOUCH HOME CARE OF NJ		Tier 4												0
PINE REST CHRISTIAN MH SVCS		Tier 4												0
PLAN OF NJ INC		Tier 4												0
PLOWSHARE FARM INC		Tier 4												0
PRADER-WILLI HMS OF OCONOM LLC		Tier 4				0.0								0
PRESBYTERIAN SPECIAL SVCS INC		Tier 4				4.0								1
PROGRESSIVE COMPREHENSIVE SERVICES		Tier 4												0
PROJECT FREEDOM INC		Tier 4										Yes	No	0
PUERTO RICAN ASSOC FOR HUMAN D		Tier 4										Yes	No	0
RE-MED RECOVERY CARE CENTERS		Tier 4												0
RIDGEFIELD BOARD OF EDUCATION		Tier 4												0
RIVERBROOK RESIDENCE INC		Tier 4												0
ROYER-GREAVES SCHOOL FOR BLIND		Tier 4				29.0								1
RUTGERS-DOUGLASS DDC		Tier 4				4.0								1
RUTGERS-NSTM		Tier 4												0
SCARC GUARDNSHP SVCS INC		Tier 4												0
SENIOR CARE MANAGEMENT LLC		Tier 4												0
SHIRLEY EVES DEV AND THER CTR		Tier 4										No	No	1
SHOREHAVEN OF DELAWARE INC		Tier 4												0

Quality Domain	Inspection and Program Review					Incident Reporting and Management			Abuse/N	eglect In	vestigation	Financial Audits		
Quality Indicator	Licensed Residential Capacity (LRC)	Size of agency based on LRC	Provis Lice		Multiple Provisional Licenses	Unusual In Report Timelin	ing	Failure to Submit Invtgn Rpts	Substar Investig		Repeat Victims	Audit Submission	Deficit Fund Balance	
Threshold	N/A	N/A	N/A	10%	1	3.0	N/A	<mark>30%</mark>	N/A	N/A	1	<mark>No</mark>	Yes	
Indicator Operational Definition (These values represent data captured during the entire 12-month period and reflect the status of the agency during that timeframe only)	Maximum # of individual who can reside at an agency	TIER 1 (101 or more), TIER 2 (51 to 100), TIER 3 (1 to 50), TIER 4 (0)	Number of licenses issued*	% of licenses that were prov- isional	Number ofsites which had more than one provisional license	Average # of days between date known to staff and date reported	Avg for last 3 mnths of period	% of missing reports compared to those due	Number of incidents which SRU investi- gated	# of incidents SRU substant- iated	Number of SRs who were involved in 2 or more <u>substantiated</u> SRU invstgns	Agency submitted an audit	Agency's audit identified a deficit fund balance	
Agency												Gray fields involv		Thresholds Triggered:
SMALL AND ASSOCIATES INC		Tier 4												0
SPECIAL CARE COMM SVCS		Tier 4				0.9	2.5		1			Yes	No	0
SPECIAL YOUNG ADULTS, INC		Tier 4												0
SPINA BIFIDA ASSOCIATION OF NJ		Tier 4										Yes	No	0
ST COLETTA OF WISC INC		Tier 4				0.0	0.0		1	1				0
ST JOHN OF GOD COMM SVCS		Tier 4				2.2	1.0							0
STAR COMMUNITY INC		Tier 4												0
SUNCOM INDUSTRIES INC		Tier 4												0
THE MEDICAL ACCESS GROUP INC		Tier 4												0
TOWNSHIP OF BLOOMFIELD		Tier 4												0
TOWNSHIP OF WEST CALDWELL		Tier 4												0
TRIFORM ENTERPRISES LTD		Tier 4												0
TRINITAS HOSPITAL		Tier 4												0
UCP HUDSON CTY INC		Tier 4				5.5	11.0					Yes	No	1
UMDNJ - SOM		Tier 4												0
UMDNJ-SPH		Tier 4												0
UMDNJ-UCEDD, THE BOGGS CENTER		Tier 4												0
UNIQUE HOME CARE AND COMPANIONSHIP SERVIC		Tier 4												0
UNLIMITED CARE INC		Tier 4												0

Tier 4 (LRC of 0)

Quality Domain	Insp	Incident Reporting and Management			Abuse/N	leglect In	vestigation	Financial Audits						
Quality Indicator	Licensed Residential Capacity (LRC)	esidential agency Provisional Capacity based on Licenses		Multiple Provisional Licenses	Panarting Su		Failure to Submit Invtgn Rpts	Substantiated Investigations		Repeat Victims	Audit Submission	Deficit Fund Balance		
Threshold	N/A	N/A	N/A	10%	1	3.0	N/A	<mark>30%</mark>	N/A	N/A	1	No No	Yes	
Indicator Operational Definition (These values represent data captured during the entire 12-month period and reflect the status of the agency during that timeframe only) Agency	Maximum # of individual who can reside at an agency	TIER 1 (101 or more), TIER 2 (51 to 100), TIER 3 (1 to 50), TIER 4 (0)	Number of licenses issued*	% of licenses that were prov- isional	Number ofsites which had more than one provisional license	Average # of days between date known to staff and date reported	Avg for last 3 mnths of period	% of missing reports compared to those due	Number of incidents which SRU investi- gated	# of incidents SRU substant- iated	Number of SRs who were involved in 2 or more <u>substantiated</u> SRU invstgns	Agency submitted an audit Gray fields involv	Agency's audit identified a deficit fund balance indicate no	<u>Thresho</u> <u>Trigger</u>
VALUES INTO ACTION NJ		Tier 4										Yes	Yes	1
VANTAGE HEALTH SYSTEMS		Tier 4				1.0						Yes	No	0
VENICE AVE COMMUNITY RES		Tier 4												0
VISTA VOC & LIFE SKLS CTR INC		Tier 4												0
WATERFALL CANYON ACADEMY INC		Tier 4												0
WATERS & SIMS EMPL SVCS INC		Tier 4												0
WOODS SERVICES INC		Tier 4				1.9	1.7		4					0