## **PMM Look Behind Process**

Date:	Post	Move Mo	nitoring Look Be	hind Checkl	ist
Date.					
Time:					
Participants:					
Individual bein	g reviewed:				
Date Moved fr	om Training Cei	nter:			
Documents rev	viewed:				
Dates post mo	ve monitoring v	isits complet	ed and by whom:		
Date	Time Frame (30, 60, 90)	Monitor/A	agency	Pending Esse	ential Supports and Concerns
Description of	Agreements/D	isagreement	s in findings:		
Total # of Esse	ntial Supports:				
# Discrepancie	s between DBH	DS Monitors:			
# Discrepancie	s between DBH	DS and CSB N	<u>lonitors</u> :		
Community ISF	Review:				
-		s included in	community ISP?		
			-	tod dov octiviti	ies and/or employment?
			iat promote integra	teu uay activiti	es and/or employment:
Person specific	issues identifie	<u>:d:</u>			
# Perso	on specific issue	e identified:			
# Essei	ntial Supports r	ot in place:			
Domains Impa	cted:				
Plan to resolve	(to be complet	ed by chair):			
Action			Responsible person	By Date	Outcome

7.25.202	3	
----------	---	--

PMM Look Behind Process								
	T	<u> </u>						
System specific issues identified:								
Potential solutions:								
Action	Responsible person	By Date	Outcome					

## \*Guidance for Eight Domain Determination:

- **1. Safety and freedom from harm** (e.g., neglect and abuse, injuries, use of seclusion or restraints, deaths, effectiveness of corrective actions, licensing violations)
- **2. Physical, mental, and behavioral health and wellbeing** (e.g., access to medical care (including preventative care), timeliness and adequacy of interventions (particularly in response to changes in status)).
- **3. Avoiding crises** (e.g., use of crisis services, admissions to emergency rooms or hospitals, admissions to Training Centers or other congregate settings, contact with criminal justice system)
- 4. Stability (e.g. maintenance of chosen living arrangement, change in providers, work/other day program stability
- **5. Choice and self-determination** (e.g. service plans developed through person centered planning process, choice of services and providers, individualized goals, self-direction of services)
- **6. Community inclusion** (e.g. community activities, integrated work opportunities, integrated living options, educational opportunities, and relationships with non-paid individuals).
- **7. Access to Services** (e.g. waitlists, outreach efforts, identified barriers, service gaps and delays, adaptive equipment, transportation, availability of services geographically, cultural and linguistic competency)
- **8. Provider capacity** (caseloads, training, staff turnover, provider competency)