GOVERNMENT OF THE DISTRICT OF COLUMBIA DEPARTMENT ON DISABILITY SERVICES

Provider Organization	Anna Healthcare Inc					
Contact Person(s)	Maria Rillera					
Phone Number	301-270-1180					
Email Address(s)	weekuoanna5@yahoo.com					
Provider Services	Supported Living, In-Home Supports, Respite Hourly, Respite					
Reviewed	Daily, Host Home, Day Habilitation, Supported Living Periodic,					
Location(s) Reviewed						
# Individuals	Supported Living - 2					
Reviewed by Service	In-Home Supports - 2					
	Respite Hourly - 1					
	Respite Daily - 1					
	Host Home - 3					
	Day Habilitation - 2 Supported Living Periodic - 1					
Annual PCR dates	03/26/2012 - 03/28/2012					
	03/26/2012 - 03/28/2012 06/05/2012					
Annual PCR dates F/U Review Date(s) Annual Report Date						

The overall results on initial review were:

	Centered Domains Score		Score			Score	
	# Yes/Total		# Yes/Total			# Yes/Total	
Supported Living	85/93	91%	29/43	67%	Needs Improvement	14/14	100%
All Mandatory Indicators	20/22	91%	8/13	62%			
In-Home Supports	79/85	93%	29/43	67%	Needs Improvement	20/20	100%
All Mandatory Indicators	19/20	95%	8/13	62%			
Respite Hourly	34/34	100%	29/43	67%	Needs Improvement	/	0%
All Mandatory Indicators	8/8	100%	8/13	62%			
Respite Daily	29/32	91%	29/43	67%	Needs Improvement	/	0%
All Mandatory Indicators	7/7	100%	8/13	62%			
Host Home	158/165	96%	29/43	67%	Needs Improvement	30/30	100%
All Mandatory Indicators	33/34	97%	8/13	62%			
Day Habilitation	67/78	86%	29/43	67%	Needs Improvement	16/17	94%
All Mandatory Indicators	17/20	85%	8/13	62%			
Supported Living Periodic	40/41	98%	29/43	67%	Needs Improvement	10/10	100%
All Mandatory Indicators	8/8	100%	8/13	62%	-		

The overall results on follow up review were:

Service	Person Centered Domains Score		Organization Score	%	0	Satisfaction Score	%
	# Yes/Total		# Yes/Total			# Yes/Total	
Supported Living	92/93	99%	43/43	100%	Satisfactory	14/14	100%
All Mandatory	22/22	100%	13/13	100%			

Indicators							
In-Home Supports	85/85	100%	43/43	100%	Satisfactory	20/20	100%
All Mandatory Indicators	20/20	100%	13/13	100%			
Respite Hourly	34/34	100%	43/43	100%	Satisfactory	/	0%
All Mandatory Indicators	8/8	100%	13/13	100%			
Respite Daily	32/32	100%	43/43	100%	Satisfactory	/	0%
All Mandatory Indicators	7/7	100%	13/13	100%			
Host Home	165/165	100%	43/43	100%	Satisfactory	30/30	100%
All Mandatory Indicators	34/34	100%	13/13	100%			
Day Habilitation	78/78	100%	43/43	100%	Satisfactory	16/17	94%
All Mandatory Indicators	20/20	100%	13/13	100%			
Supported Living Periodic	41/41	100%	43/43	100%	Satisfactory	10/10	100%
All Mandatory Indicators	8/8	100%	13/13	100%			

Certification issued/dates/services

Waiver Service	Certification Dates	Certification Type
Supported Living	03/26/2012 - 03/26/2013	Annual
In-Home Supports	03/26/2012 - 03/26/2013	Annual
Respite Hourly	03/26/2012 - 03/26/2013	Annual
Respite Daily	03/26/2012 - 03/26/2013	Annual
Host Home	03/26/2012 - 03/26/2013	Annual
Day Habilitation	03/26/2012 - 03/26/2013	Annual
Supported Living Periodic	03/26/2012 - 03/26/2013	Annual