



Provider Work Sheet

Date:
Provider Name
Program
Program Address
Program Telephone Number

Questions for the Provider

How many people with disabilities do you support in Connecticut?

How long have you been providing services in Connecticut?

Where in Connecticut do you provide Services?

Are you a non-profit organization or a for-profit company?

Do you only provide residential supports or do you provide day services or both?

Do you have any overall information about staff turnover in your organization?

Do you serve other people who have lived at Southbury Training School? If yes, about how many?

Questions for the Provider Management Team

How long have you worked for this organization? (This question can be asked of any staff.)

If I have a concern about services for my family member, who would I call?

Who is in charge of quality control?

Is your organization listed on the DDS Website? Is there a quality rating for your organization?

Are family members of people you serve on your Board of Directors?

How often does your Executive Director visit this home?

How often does the DDS Case Manager visit the home?

Questions About the Specific Home

How large are your homes?

Would my family member have his/her own bedroom?

Who would be my family member's Doctor? Dentist?

Do you have a relationship with the nearby hospital?

If my family member lived here, could I visit anytime? Do I have to give notice?

What will you do as my family member gets older and needs more support?

Can you give me the names and contact information of other family members of the people you serve?