



**PROVIDER REPORT
FOR**

**ADVOCATES INC
1881 Worcester Road
Framingham, MA 01701**

May 16, 2025

Version

Public Provider Report

**Prepared by the Department of Developmental Services
OFFICE OF QUALITY ENHANCEMENT**

SUMMARY OF OVERALL FINDINGS

Provider	ADVOCATES INC
Review Dates	4/11/2025 - 4/18/2025
Service Enhancement Meeting Date	5/2/2025
Survey Team	Anne Carey-Stone Meagan Caccioppoli Katherine Gregory Mark Boghoian Cheryl Hampton (TL) Janina Millet Lisa MacPhail Melanie Hutchison Melanie Cruz Michael Marchese Eric Lunden David Bullard

Citizen Volunteers

Survey scope and findings for Residential and Individual Home Supports

Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Residential and Individual Home Supports	40 location (s) 44 audit (s)	Full Review	89/91 2 Year License 05/02/2025 - 05/02/2027		Certified 05/02/2025 - 05/02/2027
Residential Services	17 location (s) 17 audit (s)			Deemed	
ABI-MFP Residential Services	3 location(s) 7 audit (s)			Deemed	
Placement Services	14 location (s) 14 audit (s)			Deemed	
ABI-MFP Placement Services	3 location(s) 3 audit (s)			Deemed	
Individual Home Supports	3 location(s) 3 audit (s)			Deemed	
Planning and Quality Management (For all service groupings)				Deemed	

Survey scope and findings for Employment and Day Supports

Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Employment and Day Supports	7 location(s) 22 audit (s)	Full Review	67/69 2 Year License 05/02/2025 - 05/02/2027		Certified 05/02/2025 - 05/02/2027
Community Based Day Services	3 location(s) 11 audit (s)			Deemed	
Employment Support Services	4 location(s) 11 audit (s)			Deemed	
Planning and Quality Management (For all service groupings)				Deemed	

EXECUTIVE SUMMARY :

Advocates Inc., established in 1975, is a multi-service human service agency based in Framingham, MA. Advocates provides an array of supports to adults with Intellectual Disabilities, Acquired Brain Injuries, Autism, Deaf supports, behavioral, mental health, family support and Day Habilitation services. Advocates embarked on a merger in July 2024 with a goal to enhance integrative services and best practices with two additional agencies; the former Horace Mann Educational Association, (HMEA); and Family Continuity, an outpatient provider of behavioral health clinics. The agency now operates services in all DDS Regions; Southeast, Northeast, Metro Boston and Central West, providing 24 -hour residential supports at 75 locations, Placement home Supports in 102 locations, Individual Home Support in 10 locations, Community Based Day Supports (CBDS) in 5 locations and Employment in 6 locations.

The Office of Quality Enhancement (OQE) conducted a full licensing review of Advocate's Residential Services grouping and its Employment and Day Services grouping. As the agency is accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), it elected to use the results of its CARF review to meet certification requirements.

The results of this review yielded many positive results. Organizationally, the agency implemented effective systems, policies and practices to ensure peoples' rights were affirmed on an ongoing basis. When subject to incidents and investigations the agency took immediate action and corrective action steps when necessary. Staff, individuals and guardians received information regarding human rights, incident, DPPC/Investigation and grievance reporting procedures and policies. The agency also employed effective methods for the screening of new hires and qualified staff and maintained an effective system for tracking staff trainings. Additionally, all restraints were reviewed by the Human Rights Committees.

Across residential services many positive outcomes were gleaned from this review. Advocates' commitment to the safety and well-being of people served was evident. As a result of the 2024 merger, the agency was able to centralize its nursing services and enhance medical monitoring and oversight. In the area of healthcare, daily medications were administered according to MAP policy by certified staff. Where medical protocols were in place, support staff were trained and knowledgeable in their implementation. All individuals had been supported to receive an annual physical exam and prompt treatment for episodic healthcare conditions. Recommended tests for follow up and preventative care were in place for the majority reviewed. Furthermore, individuals were supported to exercise and follow healthy diets and nutritional guidelines, for example, some homes had gym equipment present, other individuals were supported to participate in local sports leagues and others in Special Olympics activities.

All homes locations were current for inspections and people were supported to evacuate in a timely manner for fire drills in accordance with the guidelines in DDS Area Office approved safety plans. Emergency back-up plans were in place.

Overall, staff were familiar and knowledgeable with peoples' unique needs and informed regarding signs and symptoms of illness and how to manage a medical emergency. Staff were trained in procedures for those subject to restrictive interventions and/or restraints. The agency embraced the philosophy of positive behavior supports. Where written behavioral plans were in place, data collection on target behaviors was occurring consistently.

Relative to peoples' Individual Support Plans (ISPs), provider support strategies were submitted within the required timeframe. All individuals were assessed regarding their potential needs for assistive technology, and staff were trained on the use of the devices utilized by the individuals served.

Within Day & Employment Services, locations were found to be clean and in good repair, with all required inspections in place. Fire drills were conducted regularly in alignment with location Safety Plans. Support staff were familiar with and well trained in all individuals' unique needs, including health care protocols, positive behavioral support plans, and restraint training where necessary. All individuals were trained and knowledgeable about their human rights, and Guardians, where applicable, were informed. All written and verbal communication was found to be respectful in tone and content.

Moving forward, there are few Licensing indicators warranting further agency attention. Organizationally, the agency needs to ensure that Human Rights Committee members in mandated functions are attending the meetings on a regular basis if not all at least 75% every year and ensure that the Human Rights Committee is conducting an annual review of agency policies. In Residential services, the agency did not submit and/or finalize all incidents into HCSIS in accordance with incident reporting timelines. In Employment and Day services, there were some instances where the agency did not submit the required assessments by the due date in accordance with ISP timelines.

As a result of this licensing review, Advocates Residential service group received an overall score of 98%. The agency will receive a Two-Year License for Residential Services.

Advocate's Employment and Day Supports service group will receive a Two-Year License with an overall score of 97% of licensure indicators met.

For both service groups, Advocates will complete follow-up on licensing indicators not met during the survey and will submit their results to OQE within 60 days following the Service Enhancement Meeting.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	9/10	1/10	
Residential and Individual Home Supports	80/81	1/81	
Residential Services ABI-MFP Placement Services Individual Home Supports Placement Services ABI-MFP Residential Services			
Critical Indicators	8/8	0/8	
Total	89/91	2/91	98%
2 Year License			
# indicators for 60 Day Follow-up		2	

	Met / Rated	Not Met / Rated	% Met
Organizational	9/10	1/10	
Employment and Day Supports	58/59	1/59	
Community Based Day Services Employment Support Services			
Critical Indicators	8/8	0/8	
Total	67/69	2/69	97%
2 Year License			
# indicators for 60 Day Follow-up		2	

Organizational Areas Needing Improvement on Standards not met/Follow-up to occur:

Indicator #	Indicator	Area Needing Improvement
L48	The agency has an effective Human Rights Committee.	Two of the agency's three Human Rights Committees (HRCs) did not maintain regular attendance of required members (those in clinical, legal, and medical professional HRC membership roles). The agency needs to ensure that each HRC meets its mandate regarding required member attendance. Additionally, the agency HRCs need to review policies and curricula at least annually. Lastly, the agency needs to ensure that all HRC meeting minutes are shared with the DDS Regional Human Rights Specialist on a regular and ongoing basis.

Residential Areas Needing Improvement on Standards not met/Follow-up to occur:

Indicator #	Indicator	Area Needing Improvement
L91	Incidents are reported and reviewed as mandated by regulation.	For nine locations, incident reports were either created or finalized beyond the incident reporting timeline requirements. The agency needs to ensure all incidents are submitted within the required timelines, which includes finalization within seven business days.

Employment/Day Areas Needing Improvement on Standards not met/Follow-up to occur:

Indicator #	Indicator	Area Needing Improvement
L86	Required assessments concerning individual needs and abilities are completed in preparation for the ISP.	For five individuals the required assessments were not submitted within ISP timeline submissions. The agency needs to ensure that ISP assessments are submitted at least 15 days in advance of the ISP meeting.

MASTER SCORE SHEET LICENSURE

Organizational: ADVOCATES INC

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
Ⓡ L2	Abuse/neglect reporting	47/47	Met
L3	Immediate Action	15/15	Met
L4	Action taken	15/15	Met
L48	HRC	1/3	Not Met(33.33 %)
L65	Restraint report submit	28/33	Met(84.85 %)
L66	HRC restraint review	33/33	Met
L74	Screen employees	20/20	Met
L75	Qualified staff	4/4	Met
L76	Track trainings	20/20	Met
L83	HR training	20/20	Met

Residential and Individual Home Supports:

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L1	Abuse/neglect training	I	17/17	3/3	14/14		7/7	3/3	44/44	Met
L5	Safety Plan	L	16/16	3/3	14/14		3/3	3/3	39/39	Met
R L6	Evacuation	L	17/17	3/3	14/14		3/3	3/3	40/40	Met
L7	Fire Drills	L	16/17				3/3		19/20	Met (95.00 %)
L8	Emergency Fact Sheets	I	15/17	3/3	14/14		7/7	3/3	42/44	Met (95.45 %)
L9 (07/21)	Safe use of equipment	I	15/15	3/3			7/7		25/25	Met
L10	Reduce risk interventions	I	8/8		2/2		1/1		11/11	Met
R L11	Required inspections	L	17/17		14/14		3/3	3/3	37/37	Met
R L12	Smoke detectors	L	16/17	2/2	12/14		3/3	1/3	34/39	Met (87.18 %)
R L13	Clean location	L	17/17	2/2	14/14		3/3	3/3	39/39	Met
L14	Site in good repair	L	12/12	1/1	14/14		1/1	3/3	31/31	Met
L15	Hot water	L	15/17	2/2	12/14		3/3	3/3	35/39	Met (89.74 %)
L16	Accessibility	L	16/16	1/1	13/13		3/3	3/3	36/36	Met
L17	Egress at grade	L	17/17	2/2	12/12		3/3	3/3	37/37	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L18	Above grade egress	L	6/6	1/1	5/5				12/12	Met
L19	Bedroom location	L	14/14		6/6		3/3		23/23	Met
L20	Exit doors	L	17/17	2/2			3/3		22/22	Met
L21	Safe electrical equipment	L	17/17	2/2	13/13		3/3	3/3	38/38	Met
L22	Well-maintained appliances	L	15/17	2/2	10/10		3/3		30/32	Met (93.75 %)
L23	Egress door locks	L	10/10				2/2		12/12	Met
L24	Locked door access	L	16/17		12/12		3/3		31/32	Met (96.88 %)
L25	Dangerous substances	L	17/17	1/1			3/3		21/21	Met
L26	Walkway safety	L	17/17	2/2	14/14		3/3	3/3	39/39	Met
L27	Pools, hot tubs, etc.	L		2/2	1/1				3/3	Met
L28	Flammables	L	16/16				3/3		19/19	Met
L29	Rubbish/combustibles	L	17/17	2/2	14/14		3/3	3/3	39/39	Met
L30	Protective railings	L	15/16		13/13		3/3	3/3	34/35	Met (97.14 %)
L31	Communication method	I	17/17	3/3	14/14		7/7	3/3	44/44	Met

Ind. #	Ind.	Loc. or Indiv .	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI- MFP Res. Sup.	ABI- MFP Place.	Total Met/Rat ed	Rating
L32	Verbal & written	I	17/17	3/3	14/14		7/7	3/3	44/44	Met
L33	Physical exam	I	17/17	3/3	14/14		7/7	3/3	44/44	Met
L34	Dental exam	I	16/17	3/3	13/13		5/7	3/3	40/43	Met (93.02 %)
L35	Preventi ve screenin gs	I	15/16	3/3	10/14		7/7	3/3	38/43	Met (88.37 %)
L36	Recom mended tests	I	16/16	3/3	13/14		7/7	3/3	42/43	Met (97.67 %)
L37	Prompt treatme nt	I	17/17	3/3	14/14		7/7	3/3	44/44	Met
℞ L38	Physicia n's orders	I	15/15	2/2	12/12		6/7	2/2	37/38	Met (97.37 %)
L39	Dietary require ments	I	11/11	1/1	6/6		6/6	1/1	25/25	Met
L40	Nutrition al food	L	17/17	2/2			3/3		22/22	Met
L41	Healthy diet	L	17/17	3/3	14/14		3/3	3/3	40/40	Met
L42	Physical activity	L	17/17	3/3	14/14		3/3	3/3	40/40	Met
L43	Health Care Record	I	16/17	2/3	10/13		7/7	2/3	37/43	Met (86.05 %)
L44	MAP registrat ion	L	17/17	2/2			3/3		22/22	Met
L45	Medicati on storage	L	17/17	2/2			3/3		22/22	Met
℞ L46	Med. Adminis tration	I	15/17	2/2	12/13		7/7	3/3	39/42	Met (92.86 %)
L47	Self medicati on	I	2/2	2/2	3/3				7/7	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L49	Informed of human rights	I	17/17	3/3	13/14		7/7	3/3	43/44	Met (97.73 %)
L50 (07/21)	Respectful Comm.	I	17/17	3/3	14/14		7/7	3/3	44/44	Met
L51	Possessions	I	17/17	3/3	14/14		7/7	3/3	44/44	Met
L52	Phone calls	I	17/17	3/3	14/14		7/7	3/3	44/44	Met
L53	Visitation	I	17/17	3/3	14/14		7/7	3/3	44/44	Met
L54 (07/21)	Privacy	I	17/17	3/3	14/14		7/7	3/3	44/44	Met
L55	Informed consent	I			1/1				1/1	Met
L56	Restrictive practices	I	5/6				1/1		6/7	Met (85.71 %)
L57	Written behavior plans	I	11/11		1/1				12/12	Met
L60	Data maintenance	I	11/11		1/1				12/12	Met
L61	Health protection in ISP	I	13/15	1/1	9/9		7/7	3/3	33/35	Met (94.29 %)
L62	Health protection review	I	9/9		3/3			2/2	14/14	Met
L63	Med. treatment plan form	I	13/17		10/10		7/7	2/2	32/36	Met (88.89 %)
L64	Med. treatment plan rev.	I	17/17		7/9		7/7	2/2	33/35	Met (94.29 %)

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L67	Money mgmt. plan	I	15/17	2/2	9/11		6/7	2/2	34/39	Met (87.18 %)
L68	Funds expenditure	I	17/17	1/1	10/10		7/7	3/3	38/38	Met
L69	Expenditure tracking	I	16/17	1/1	9/10		7/7	2/3	35/38	Met (92.11 %)
L70	Charges for care calc.	I	16/16	2/2	14/14		7/7	3/3	42/42	Met
L71	Charges for care appeal	I	14/16	2/2	10/14		7/7	3/3	36/42	Met (85.71 %)
L77	Unique needs training	I	17/17	3/3	14/14		6/7	3/3	43/44	Met (97.73 %)
L78	Restrictive Int. Training	L	8/8		1/1		1/1		10/10	Met
L79	Restraint training	L	4/4						4/4	Met
L80	Symptoms of illness	L	16/17	3/3	14/14		3/3	3/3	39/40	Met (97.50 %)
L81	Medical emergency	L	17/17	3/3	14/14		3/3	3/3	40/40	Met
L82	Medication admin.	L	17/17	2/2			3/3		22/22	Met
L84	Health protect. Training	I	12/15	1/1	9/9		7/7	3/3	32/35	Met (91.43 %)
L85	Supervision	L	16/17	3/3	14/14		3/3	3/3	39/40	Met (97.50 %)
L86	Required assessments	I	8/9	2/2	7/9		4/4	2/3	23/27	Met (85.19 %)

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L87	Support strategies	I	9/10	2/2	8/9		4/4	3/3	26/28	Met (92.86 %)
L88	Strategies implemented	I	16/17	3/3	9/12		5/7	3/3	36/42	Met (85.71 %)
L89	Complaint and resolution process	L					3/3	3/3	6/6	Met
L90	Personal space/bedroom privacy	I	16/17	3/3	14/14		7/7	3/3	43/44	Met (97.73 %)
L91	Incident management	L	13/17	3/3	10/13		1/3	3/3	30/39	Not Met (76.92 %)
L93 (05/22)	Emergency back-up plans	I	17/17	3/3	14/14		7/7	3/3	44/44	Met
L94 (05/22)	Assistive technology	I	17/17	3/3	12/14		7/7	3/3	42/44	Met (95.45 %)
L96 (05/22)	Staff training in devices and applications	I	15/15	3/3	9/9		5/5	3/3	35/35	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L99 (05/22)	Medical monitoring devices	I	3/4	1/1	1/2		3/3		8/10	Met (80.0 %)
#Std. Met/# 81 Indicator									80/81	
Total Score									89/91	
									97.80%	

Employment and Day Supports:

Ind. #	Ind.	Loc. or Indiv.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L1	Abuse/neglect training	I	11/11		11/11	22/22	Met
L5	Safety Plan	L	1/1		3/3	4/4	Met
℞ L6	Evacuation	L	1/1		3/3	4/4	Met
L7	Fire Drills	L	1/1		3/3	4/4	Met
L8	Emergency Fact Sheets	I	11/11		10/11	21/22	Met (95.45 %)
L9 (07/21)	Safe use of equipment	I	11/11		11/11	22/22	Met
L10	Reduce risk interventions	I			10/10	10/10	Met
℞ L11	Required inspections	L			3/3	3/3	Met
℞ L12	Smoke detectors	L	1/1		3/3	4/4	Met
℞ L13	Clean location	L	1/1		3/3	4/4	Met
L14	Site in good repair	L	1/1		2/2	3/3	Met
L15	Hot water	L			3/3	3/3	Met
L16	Accessibility	L	1/1		3/3	4/4	Met

Ind. #	Ind.	Loc. or Indiv.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L17	Egress at grade	L	1/1		3/3	4/4	Met
L18	Above grade egress	L	1/1			1/1	Met
L20	Exit doors	L	1/1		3/3	4/4	Met
L21	Safe electrical equipment	L			3/3	3/3	Met
L22	Well-maintained appliances	L	1/1		3/3	4/4	Met
L25	Dangerous substances	L	1/1		3/3	4/4	Met
L26	Walkway safety	L	1/1		3/3	4/4	Met
L28	Flammables	L			3/3	3/3	Met
L29	Rubbish/combustibles	L	1/1		3/3	4/4	Met
L30	Protective railings	L			2/2	2/2	Met
L31	Communication method	I	11/11		11/11	22/22	Met
L32	Verbal & written	I	11/11		11/11	22/22	Met
L37	Prompt treatment	I	6/6		11/11	17/17	Met
℞ L38	Physician's orders	I	1/1		11/11	12/12	Met
L39	Dietary requirements	I			3/3	3/3	Met
L44	MAP registration	L	1/1		3/3	4/4	Met
L45	Medication storage	L			3/3	3/3	Met
℞ L46	Med. Administration	I			7/7	7/7	Met
L49	Informed of human rights	I	11/11		11/11	22/22	Met
L50 (07/21)	Respectful Comm.	I	11/11		11/11	22/22	Met
L51	Possessions	I	11/11		11/11	22/22	Met
L52	Phone calls	I	11/11		11/11	22/22	Met

Ind. #	Ind.	Loc. or Indiv.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L54 (07/21)	Privacy	I	11/11		11/11	22/22	Met
L56	Restrictive practices	I			5/5	5/5	Met
L57	Written behavior plans	I	1/1		11/11	12/12	Met
L60	Data maintenance	I	1/1		11/11	12/12	Met
L61	Health protection in ISP	I	6/6		8/8	14/14	Met
L62	Health protection review	I	2/2		4/4	6/6	Met
L63	Med. treatment plan form	I			3/3	3/3	Met
L64	Med. treatment plan rev.	I			1/1	1/1	Met
L77	Unique needs training	I	11/11		11/11	22/22	Met
L78	Restrictive Int. Training	L			2/2	2/2	Met
L79	Restraint training	L	3/3		2/2	5/5	Met
L80	Symptoms of illness	L	4/4		3/3	7/7	Met
L81	Medical emergency	L	3/3		3/3	6/6	Met
L82	Medication admin.	L	1/1		3/3	4/4	Met
L84	Health protect. Training	I	6/6		8/8	14/14	Met
L85	Supervision	L	4/4		3/3	7/7	Met
L86	Required assessments	I	5/9		7/8	12/17	Not Met (70.59 %)
L87	Support strategies	I	8/8		8/8	16/16	Met
L88	Strategies implemented	I	11/11		11/11	22/22	Met
L91	Incident management	L	3/3		2/3	5/6	Met (83.33 %)
L93 (05/22)	Emergency back-up plans	I	11/11		11/11	22/22	Met

Ind. #	Ind.	Loc. or Indiv.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L94 (05/22)	Assistive technology	I	10/11		11/11	21/22	Met (95.45 %)
L96 (05/22)	Staff training in devices and applications	I	9/9		8/8	17/17	Met
L99 (05/22)	Medical monitoring devices	I			1/1	1/1	Met
#Std. Met/# 59 Indicator						58/59	
Total Score						67/69	
						97.10%	