



**PROVIDER REPORT  
FOR**

**ALMADAN INC  
P. O. Box 518  
Amherst, MA 01004**

**September 27, 2021**

**Version**

**Public Provider Report**

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

# **SUMMARY OF OVERALL FINDINGS**

<b>Provider</b>	ALMADAN INC
<b>Review Dates</b>	8/25/2021 - 8/31/2021
<b>Service Enhancement Meeting Date</b>	9/13/2021
<b>Survey Team</b>	Andrea Comeau (TL) Denise Barci Janina Millet Hesham Almahbashi Eric Lunden
<b>Citizen Volunteers</b>	

## **Survey scope and findings for Residential and Individual Home Supports**

<b>Service Group Type</b>	<b>Sample Size</b>	<b>Licensure Scope</b>	<b>Licensure Level</b>	<b>Certification Scope</b>	<b>Certification Level</b>
<b>Residential and Individual Home Supports</b>	7 location(s) 9 audit (s)	Full Review	74/80 2 Year License 09/13/2021 - 09/13/2023		70 / 72 Certified 09/13/2021 - 09/13/2023
Residential Services	1 location(s) 3 audit (s)			Full Review	22 / 22
Placement Services	4 location(s) 4 audit (s)			Full Review	22 / 22
Individual Home Supports	2 location(s) 2 audit (s)			Full Review	21 / 22
Planning and Quality Management				Full Review	5 / 6

## **EXECUTIVE SUMMARY :**

Almadan, Inc. is a small for-profit organization that has been providing services since 1985 to individuals who reside in western Massachusetts. The agency offers supports to adults with intellectual disabilities and mental health needs through a range of service models, including twenty-four-hour residential support, placement, and individual home support.

The scope of this survey was a full licensure and certification review. Licensure and certification resumed the conduct of in-person surveys in mid-July 2021, using a hybrid model of surveying, where most tasks were conducted in-person while some were conducted through remote

technologies. For this current licensure and certification survey, the administrative review of Almadan consisted of interviews with key administrative and supervisory staff which occurred through WebEx, along with observations, review of environmental safety, and review of relevant documentation on site.

Findings of the licensing review showed Almadan was responsive in promoting healthy living across all service types. Education was provided to staff on sound nutrition through E509 training. Individuals were involved in making healthy food choices through weekly menu planning, grocery shopping and cooking healthy meals. In addition, they were supported to consistently engage in physical exercise based on individual preference. Assistance was provided to individuals in purchasing equipment such as a treadmill, recumbent bike, and a bike pedal exerciser.

Other findings of the licensing review demonstrated that Almadan implemented effective methods of ensuring a competent workforce. Based on review of training records and interviews with staff, team members found that staff were knowledgeable of individuals' preferences and support needs. Based on review of training for a sample of staff, it was found all DDS mandated trainings were completed. In addition to these required trainings, staff received training in specific topics that addressed the unique needs of the individuals they support.

Within certification domains, the survey team reviewed agency's planning and quality improvement efforts, including its methods of conducting oversight, gathering input on service satisfaction, and strategic planning. Since the last review, in July 2018, Almadan strengthened its quality assurance processes and oversight of standards in several key areas such as medication administration, funds management, environmental requirements, staff development and training, and standardization of individuals' confidential records. In addition, the Quality Assurance manager conducted quarterly program audits, providing feedback to managers. Collectively, these measures ensured the provision of quality services.

Positive practices were found in agency supports relating to personal choice, control, and growth. Individuals were supported to identify areas for personal growth and skill development such as cooking, developing a healthy lifestyle, and increasing independence with medications. For individuals who were self-medicating, support was provided to assist in maintaining independence through conducting timely assessments and implementing individual-specific teaching plans. Across all service types, individuals were supported to maximize independence through use of assistive technology. These included clothing without fasteners, pre-programmed phones with large buttons, and automatic door closers to afford privacy, among others. In addition, individuals' input on preferred activities, grocery shopping, and menus was sought during weekly house meetings, and individuals' feedback on staff was incorporated into the agency's processes for hiring and evaluating staff.

In addition to the findings highlighted above, Almadan is encouraged to improve its oversight and monitoring of areas subject to licensing. This includes ensuring hot water temperatures are within the recommended range, submitting provider support strategies within required timelines, and supporting the human rights committee to meet quarterly and to annually review agency's policies and procedures. Additionally, health-related equipment and devices must be properly authorized as well as training provided to staff on the application and use of the device. Lastly, bank accounts managed by the agency as representative payee for individuals cannot include agency ownership or survivorship interest in the accounts.

In areas subject to certification, the agency should ensure that individuals have been assessed for their interests and support needs in the areas of intimacy and companionship, and that support and education is provided accordingly. Also, service improvement goals need to be identified through the agency's internal evaluation processes.

As a result of this review, Almadan, Inc. will receive a Two-Year License for the Residential and Individual Home Supports service group, with a service group score of 92%. This service group is also Certified with an overall score of 97%. Follow-up will be conducted by the agency and reported to OQE within 60 days on all licensing indicators that received a rating of Not Met.

## **LICENSURE FINDINGS**

	<b>Met / Rated</b>	<b>Not Met / Rated</b>	<b>% Met</b>
<b>Organizational</b>	<b>7/8</b>	<b>1/8</b>	
<b>Residential and Individual Home Supports</b>	<b>67/72</b>	<b>5/72</b>	
Residential Services Placement Services Individual Home Supports			
<b>Critical Indicators</b>	<b>8/8</b>	<b>0/8</b>	
<b>Total</b>	<b>74/80</b>	<b>6/80</b>	<b>92%</b>
<b>2 Year License</b>			
<b># indicators for 60 Day Follow-up</b>		<b>6</b>	

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

<b>Indicator #</b>	<b>Indicator</b>	<b>Area Needing Improvement</b>
L48	The agency has an effective Human Rights Committee.	The agency's human rights committee did not meet quarterly. In addition, the committee was not fulfilling its responsibility of reviewing policies and procedures annually as they pertain to protecting the rights of individuals. Almadan needs to support its human rights committee to meet quarterly and to fulfill its responsibilities to review agency policies and procedures.

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

<b>Indicator #</b>	<b>Indicator</b>	<b>Area Needing Improvement</b>
L15	Hot water temperature tests between 110 and 120 degrees (as of 1/2014).	In two locations, the bathroom water temperature was registering below the required temperature range. Almadan needs to ensure water temperatures are maintained between 110 and 120 degrees.
L61	Supports and health related protections are	For one individual, use of health-related supports and protective equipment was not authorized and there were

	included in ISP assessments and the continued need is outlined.	no written instructions for its use, cleaning or care. When individuals require health-related equipment and devices, the use of these devices must be authorized by a licensed medical professional. This authorization must include instructions for applying and using the device, as well as instructions for the care and cleaning of the device, including frequency of safety checks.
L68	Expenditures of individual's funds are made only for purposes that directly benefit the individual.	For five individuals where the agency was appointed as representative payee, an agency staff person had her name on the debit card. The representative payee is prohibited from holding ownership or survivorship interest in individuals' bank accounts, including debit cards issued to the individual. The agency needs to ensure that debit cards associated with individuals' bank accounts are not issued in the name of agency personnel.
L84	Staff / care providers are trained in the correct utilization of health related protections per regulation.	For one individual who used health-related equipment, staff were not trained in the proper use, care, and cleaning of the device. The agency needs to ensure that staff are trained and knowledgeable in the use and application of health-related equipment and devices authorized for individuals. This training must include the proper care and cleaning of the device as well as the frequency of conducting safety checks.
L87	Support strategies necessary to assist an individual to meet their goals and objectives are completed and submitted as part of the ISP.	For two individuals, provider support strategies were not submitted to DDS within 15 days prior to the ISP. The agency needs to ensure that provider support strategies are submitted to DDS within 15 days prior to the ISP.

## **CERTIFICATION FINDINGS**

	Met / Rated	Not Met / Rated	% Met
<b>Certification - Planning and Quality Management</b>	<b>5/6</b>	<b>1/6</b>	
<b>Residential and Individual Home Supports</b>	<b>65/66</b>	<b>1/66</b>	
Individual Home Supports	21/22	1/22	
Placement Services	22/22	0/22	
Residential Services	22/22	0/22	
<b>Total</b>	<b>70/72</b>	<b>2/72</b>	<b>97%</b>
<b>Certified</b>			

**Planning and Quality Management Areas Needing Improvement on Standards not met:**


Indicator #	Indicator	Area Needing Improvement
C5	The provider has a process to measure progress towards achieving service improvement goals.	Almadan had not developed service improvement goals or methods of measuring progress toward service improvements. The agency needs to identify service improvement goals based on analysis of data and input gathered from internal evaluation processes, and benchmarks to measure progress toward goal achievement need to be established.

**Individual Home Supports- Areas Needing Improvement on Standards not met:**





Indicator #	Indicator	Area Needing Improvement
C12	Individuals are supported to explore, define, and express their need for intimacy and companionship.	For one individual with an expressed interest in pursuing a relationship, interest and need for support and education in the areas of intimacy or companionship had not been assessed. The agency needs to ensure that individuals have been assessed for their interests and needs for support in the areas of intimacy and companionship, and that support and education is provided based on these assessments.

**MASTER SCORE SHEET LICENSURE**

**Organizational: ALMADAN INC**


Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
 L2	Abuse/neglect reporting	11/11	Met
L3	Immediate Action	11/11	Met
L48	HRC	0/1	Not Met(0 % )
L65	Restraint report submit	1/1	Met
L74	Screen employees	2/2	Met
L75	Qualified staff	2/2	Met
L76	Track trainings	5/5	Met
L83	HR training	5/5	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	3/3	2/2	4/4				9/9	Met
L5	Safety Plan	L	1/1	2/2	4/4				7/7	Met
 L6	Evacuation	L	1/1	2/2	4/4				7/7	Met
L7	Fire Drills	L	1/1						1/1	Met
L8	Emergency Fact Sheets	I	3/3	2/2	4/4				9/9	Met
L9 (07/21)	Safe use of equipment	I	3/3	2/2					5/5	Met
L10	Reduce risk interventions	I	1/1						1/1	Met
 L11	Required inspections	L	1/1		2/3				3/4	Met
 L12	Smoke detectors	L	1/1		3/4				4/5	Met (80.0 %)
 L13	Clean location	L	1/1		4/4				5/5	Met
L14	Site in good repair	L	1/1		4/4				5/5	Met
L15	Hot water	L	0/1		3/4				3/5	Not Met (60.0 %)
L16	Accessibility	L	1/1		4/4				5/5	Met
L17	Egress at grade	L	1/1		4/4				5/5	Met
L18	Above grade egress	L			2/2				2/2	Met
L19	Bedroom location	L	1/1						1/1	Met
L20	Exit doors	L	1/1						1/1	Met
L21	Safe electrical equipment	L	1/1		4/4				5/5	Met
L22	Well-maintained appliances	L	1/1		4/4				5/5	Met
L24	Locked door access	L	1/1						1/1	Met
L25	Dangerous substances	L	1/1						1/1	Met
L26	Walkway safety	L	1/1		4/4				5/5	Met

L27	Pools, hot tubs, etc.	L			2/2				2/2	Met
L28	Flammables	L	1/1						1/1	Met
L29	Rubbish/combustibles	L	1/1		4/4				5/5	Met
L30	Protective railings	L	1/1		3/4				4/5	Met (80.0 %)
L31	Communication method	I	3/3	2/2	4/4				9/9	Met
L32	Verbal & written	I	3/3	2/2	4/4				9/9	Met
L33	Physical exam	I	3/3	2/2	4/4				9/9	Met
L34	Dental exam	I	3/3	2/2	4/4				9/9	Met
L35	Preventive screenings	I	3/3	2/2	4/4				9/9	Met
L36	Recommended tests	I	3/3	2/2	4/4				9/9	Met
L37	Prompt treatment	I	3/3	2/2	4/4				9/9	Met
Ⓟ L38	Physician's orders	I			1/1				1/1	Met
L39	Dietary requirements	I	1/1	1/1					2/2	Met
L40	Nutritional food	L	1/1	1/1					2/2	Met
L41	Healthy diet	L	1/1	2/2	4/4				7/7	Met
L42	Physical activity	L	1/1	2/2	4/4				7/7	Met
L43	Health Care Record	I	3/3	2/2	4/4				9/9	Met
L44	MAP registration	L	1/1						1/1	Met
L45	Medication storage	L	1/1						1/1	Met
Ⓟ L46	Med. Administration	I	3/3		1/2				4/5	Met (80.0 %)
L47	Self medication	I		2/2	3/3				5/5	Met
L49	Informed of human rights	I	3/3	2/2	4/4				9/9	Met
L50 (07/21)	Respectful Comm.	I	3/3	2/2	4/4				9/9	Met
L51	Possessions	I	3/3	2/2	4/4				9/9	Met
L52	Phone calls	I	3/3	2/2	4/4				9/9	Met
L53	Visitation	I	3/3	2/2	4/4				9/9	Met
L54 (07/21)	Privacy	I	3/3	2/2	4/4				9/9	Met
L56	Restrictive practices	I	3/3						3/3	Met



L57	Written behavior plans	I	1/1						1/1	Met
L60	Data maintenance	I	1/1						1/1	Met
L61	Health protection in ISP	I	1/2		1/1				2/3	Not Met (66.67 %)
L63	Med. treatment plan form	I	2/2		2/2				4/4	Met
L64	Med. treatment plan rev.	I	1/2		2/2				3/4	Met
L67	Money mgmt. plan	I	3/3	2/2	4/4				9/9	Met
L68	Funds expenditure	I	1/3	1/1	1/4				3/8	Not Met (37.50 %)
L69	Expenditure tracking	I	3/3	1/1	4/4				8/8	Met
L70	Charges for care calc.	I	3/3		4/4				7/7	Met
L71	Charges for care appeal	I	3/3		4/4				7/7	Met
L77	Unique needs training	I	3/3	2/2	4/4				9/9	Met
L78	Restrictive Int. Training	L	1/1						1/1	Met
L80	Symptoms of illness	L	1/1	2/2	4/4				7/7	Met
L81	Medical emergency	L	1/1	2/2	4/4				7/7	Met
 L82	Medication admin.	L	1/1						1/1	Met
L84	Health protect. Training	I	1/2		1/1				2/3	Not Met (66.67 %)
L85	Supervision	L	1/1	2/2	4/4				7/7	Met
L86	Required assessments	I			3/4				3/4	Met
L87	Support strategies	I	3/3		2/4				5/7	Not Met (71.43 %)
L88	Strategies implemented	I	3/3	2/2	4/4				9/9	Met
L90	Personal space/ bedroom privacy	I	3/3	2/2	4/4				9/9	Met
L91	Incident management	L	1/1	2/2	4/4				7/7	Met

<b>#Std. Met/# 72 Indicator</b>									<b>67/72</b>	
<b>Total Score</b>									<b>74/80</b>	
									<b>92.50%</b>	

## MASTER SCORE SHEET CERTIFICATION

### Certification - Planning and Quality Management

<b>Indicator #</b>	<b>Indicator</b>	<b>Met/Rated</b>	<b>Rating</b>
C1	Provider data collection	1/1	<b>Met</b>
C2	Data analysis	1/1	<b>Met</b>
C3	Service satisfaction	1/1	<b>Met</b>
C4	Utilizes input from stakeholders	1/1	<b>Met</b>
C5	Measure progress	0/1	<b>Not Met (0 %)</b>
C6	Future directions planning	1/1	<b>Met</b>

### Residential Services

<b>Indicator #</b>	<b>Indicator</b>	<b>Met/Rated</b>	<b>Rating</b>
C7	Feedback on staff / care provider performance	3/3	<b>Met</b>
C8	Family/guardian communication	3/3	<b>Met</b>
C9	Personal relationships	3/3	<b>Met</b>
C10	Social skill development	3/3	<b>Met</b>
C11	Get together w/family & friends	3/3	<b>Met</b>
C12	Intimacy	3/3	<b>Met</b>
C13	Skills to maximize independence	3/3	<b>Met</b>
C14	Choices in routines & schedules	3/3	<b>Met</b>
C15	Personalize living space	1/1	<b>Met</b>
C16	Explore interests	3/3	<b>Met</b>
C17	Community activities	3/3	<b>Met</b>
C18	Purchase personal belongings	3/3	<b>Met</b>

C19	Knowledgeable decisions	3/3	<b>Met</b>
C20 (07/21)	Emergency back-up plans	3/3	<b>Met</b>
C46	Use of generic resources	3/3	<b>Met</b>
C47	Transportation to/ from community	3/3	<b>Met</b>
C48	Neighborhood connections	3/3	<b>Met</b>
C49	Physical setting is consistent	1/1	<b>Met</b>
C51	Ongoing satisfaction with services/ supports	3/3	<b>Met</b>
C52	Leisure activities and free-time choices /control	3/3	<b>Met</b>
C53	Food/ dining choices	3/3	<b>Met</b>
C54	Assistive technology	3/3	<b>Met</b>

### **Placement Services**

<b>Indicator #</b>	<b>Indicator</b>	<b>Met/Rated</b>	<b>Rating</b>
C7	Feedback on staff / care provider performance	4/4	<b>Met</b>
C8	Family/guardian communication	4/4	<b>Met</b>
C9	Personal relationships	4/4	<b>Met</b>
C10	Social skill development	4/4	<b>Met</b>
C11	Get together w/family & friends	4/4	<b>Met</b>
C12	Intimacy	4/4	<b>Met</b>
C13	Skills to maximize independence	4/4	<b>Met</b>
C14	Choices in routines & schedules	4/4	<b>Met</b>
C15	Personalize living space	4/4	<b>Met</b>
C16	Explore interests	4/4	<b>Met</b>
C17	Community activities	4/4	<b>Met</b>
C18	Purchase personal belongings	4/4	<b>Met</b>
C19	Knowledgeable decisions	4/4	<b>Met</b>
C20 (07/21)	Emergency back-up plans	4/4	<b>Met</b>
C46	Use of generic resources	4/4	<b>Met</b>
C47	Transportation to/ from community	4/4	<b>Met</b>
C48	Neighborhood connections	4/4	<b>Met</b>
C49	Physical setting is consistent	4/4	<b>Met</b>

C51	Ongoing satisfaction with services/ supports	4/4	<b>Met</b>
C52	Leisure activities and free-time choices /control	4/4	<b>Met</b>
C53	Food/ dining choices	4/4	<b>Met</b>
C54	Assistive technology	4/4	<b>Met</b>

#### **Individual Home Supports**

<b>Indicator #</b>	<b>Indicator</b>	<b>Met/Rated</b>	<b>Rating</b>
C7	Feedback on staff / care provider performance	2/2	<b>Met</b>
C8	Family/guardian communication	2/2	<b>Met</b>
C9	Personal relationships	2/2	<b>Met</b>
C10	Social skill development	2/2	<b>Met</b>
C11	Get together w/family & friends	2/2	<b>Met</b>
C12	Intimacy	1/2	<b>Not Met (50.0 %)</b>
C13	Skills to maximize independence	2/2	<b>Met</b>
C14	Choices in routines & schedules	2/2	<b>Met</b>
C16	Explore interests	2/2	<b>Met</b>
C17	Community activities	2/2	<b>Met</b>
C18	Purchase personal belongings	2/2	<b>Met</b>
C19	Knowledgeable decisions	2/2	<b>Met</b>
C20 (07/21)	Emergency back-up plans	2/2	<b>Met</b>
C21	Coordinate outreach	2/2	<b>Met</b>
C46	Use of generic resources	2/2	<b>Met</b>
C47	Transportation to/ from community	2/2	<b>Met</b>
C48	Neighborhood connections	2/2	<b>Met</b>
C49	Physical setting is consistent	2/2	<b>Met</b>
C51	Ongoing satisfaction with services/ supports	2/2	<b>Met</b>
C52	Leisure activities and free-time choices /control	2/2	<b>Met</b>
C53	Food/ dining choices	2/2	<b>Met</b>
C54	Assistive technology	2/2	<b>Met</b>