|  |  |  |
| --- | --- | --- |
|  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  | |  | | --- | | **Provider:** | | |  | | --- | | ANODYNE CORPORATION | |  | |  | | --- | | **Provider Address:** | | |  | | --- | | 10 Granite St 2nd Fl , Quincy | |  | |  |  |  |  |  |  |  | |  | |  | | --- | | **Name of Person Completing Form:** | | |  | | --- | | Megan Gajewski | |  | |  | | --- | | **Date(s) of Review:** | | |  | | --- | | 25-JUN-19 to 26-JUN-19 | |  | |  |
|  |  |  |
| |  |  |  | | --- | --- | --- | | **Follow-up Scope and results :** |  |  | | Service Grouping | Licensure level and duration | # Indicators std. met/ std. rated | | Residential and Individual Home Supports | 2 Year License | 4/4 | |  |  |  | | |  |

|  |  |  |
| --- | --- | --- |
| |  | | --- | | **Summary of Ratings** | |  |
|  |  |
| |  |  | | --- | --- | |  |  | | |  |  | | --- | --- | | **Administrative Areas Needing Improvement on Standard not met - Identified by DDS** | | | **Indicator #** | L83 | | **Indicator** | HR training | | **Area Need Improvement** | Agency staff and providers were not trained on the mandated reporting requirements, required as of April 1, 2018. A Notice of Action was issued. The agency needs to ensure that all staff and providers have been trained in the most current mandated reporting requirements. | | **Process Utilized to correct and review indicator** | All staff were trained by 5/29/19. Noted as "corrected in QE report. | | **Status at follow-up** |  | | **Rating** | Met | | **Residential and Individual Home Supports Areas Needing Improvement on Standard not met - Identified by DDS** | | | **Indicator #** | L15 | | **Indicator** | Hot water | | **Area Need Improvement** | At two homes, hot water temperatures were outside of the required range of 110 and 120 degrees. The agency needs to ensure that hot water temperature tests between 110 and 120 degrees at all home locations. | | **Process Utilized to correct and review indicator** | Randomly tested 10 homes. All were within 110-120 degrees. | | **Status at follow-up** |  | | **Rating** | Met | | **Indicator #** | L61 | | **Indicator** | Health protection in ISP | | **Area Need Improvement** | Two individuals requiring supports and/or health related protections did not have all the required safeguards in place, including parameters for use, cleaning, and care. The agency needs to ensure that when persons utilize supports and health related protections there is a written plan for their use that includes all required components. | | **Process Utilized to correct and review indicator** | Safeguards and protocols were written and all were signed by prescribing doctors. All are signed and in their office files/corrected. | | **Status at follow-up** |  | | **Rating** | Met | | **Indicator #** | L62 | | **Indicator** | Health protection review | | **Area Need Improvement** | The agency's Human Rights Committee (HRC) had not reviewed an individual's health related support which limits movement. The agency needs to ensure that all supports and health related protections limiting a person's movement are reviewed by the HRC. | | **Process Utilized to correct and review indicator** | The gait belt was reviewed and signed off at 6/25 Human Rights meeting. | | **Status at follow-up** |  | | **Rating** | Met | |  | | |