

DEPARTMENT OF DEVELOPMENTAL SERVICES
LICENSURE AND CERTIFICATION
Mid-Cycle Review Final Report

Provider ARC OF GREATER PLYMOUTH (THE)

Provider Address 52 Armstrong Drive, Plymouth

Survey Team Marchese,Michael; Napolitan,Tina;

Date(s) of Review 16-DEC-24 to 19-DEC-24

Mid-Cycle Scope and results :					
Service Grouping	Licensure level and duration	# Indicators std. met/ std. rated at Mid-Cycle	Sanction status prior to Mid-Cycle	Combined Results post-Mid-Cycle;	Sanction status post Mid-Cycle
Residential and Individual Home Supports 7 Locations 9 Audits	Defer Licensure	10/15	<input checked="" type="checkbox"/> Eligible for new business <input type="checkbox"/> Ineligible for new business.	2 Year License with Mid-Cycle Review 80/85 (94.12%)	<input checked="" type="checkbox"/> Eligible for New Business (80% or more std. met; no critical std. not met) <input type="checkbox"/> Ineligible for New Business (<=80% std met and/or more critical std. not met)

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Summary of Ratings

Organizational Areas Needing Improvement on Standards not met:

Indicator #	L48
Indicator	HRC
Area Need Improvement	Quorum was not met for 50% of the meetings of the Human Rights Committee. The agency needs to ensure that quorum is met for at least 75% of HRC meetings.
Status at mid-cycle	The agency had five meetings, two of which were missing members with either legal or clinical expertise. The agency needs to ensure that members with expertise are present for meetings.
#met /# rated at mid-cycle	0/1
Rating	NOT MET

Residential and Individual Home Supports Areas Needing Improvement on Standards not met:

Indicator #	L15
Indicator	Hot water
Area Need Improvement	In two of six homes visited, the hot water temperatures exceeded the allowable range of testing between 110 to 120 degrees. The agency needs to ensure that water temperatures test consistently within allowable range.
Status at mid-cycle	In one of five homes visited, the hot water temperatures exceeded the allowable range of testing between 110 to 120 degrees. The agency needs to ensure that water temperatures test consistently within allowable range.
#met /# rated at mid-cycle	4/5
Rating	MET

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Indicator #	L23
Indicator	Egress door locks
Area Need Improvement	At one twenty-four hour location, there were two bedrooms that provided direct access to an egress which had locks on the doors. The agency needs to ensure that there are no locks on the doors of bedrooms that provide an external egress.
Status at mid-cycle	One location reviewed had a bedroom with egresses. The door did not have a lock.
#met /# rated at mid-cycle	1/1
Rating	MET

Indicator #	L35
Indicator	Preventive screenings
Area Need Improvement	Seven of eight individuals had not had routine preventative screening as recommended by DDS Adult screening checklist. The agency needs to ensure that individuals receive key preventative screenings as recommended.
Status at mid-cycle	One of eight individuals had not had routine preventative screening as recommended by DDS Adult screening checklist. The agency needs to ensure that individuals receive key preventative screenings as recommended.
#met /# rated at mid-cycle	7/8
Rating	MET

Indicator #	L36
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Indicator	Recommended tests
Area Need Improvement	For two of six individuals recommended follow-up tests and/or specialist appointments had not occurred as recommended. The agency needs to ensure that recommended tests and appointments with specialists are made and kept.
Status at mid-cycle	Eight individuals were reviewed and all 8 had attended recommended follow-up tests.
#met /# rated at mid-cycle	8/8
Rating	MET

Indicator #	L38
Indicator	Physician's orders
Area Need Improvement	One of three physicians' orders and treatment protocols lacked clear staff instructions and was not being followed as directed in the protocol. The agency needs to ensure that physicians' orders and treatment protocols are followed when the agreement for treatment is reached by the individual, guardian, and ISP team.
Status at mid-cycle	For one of four physicians' orders and treatment protocols, staff had not been trained. The agency needs to ensure that staff are trained and knowledgeable about treatment protocols.
#met /# rated at mid-cycle	3/4
Rating	MET

Indicator #	L43
Indicator	Health Care Record

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Area Need Improvement	For five individuals, the health care record lacked information regarding significant medical diagnoses. The agency needs to ensure that health care records are comprehensive.
Status at mid-cycle	For two of nine individuals, the health care record lacked information regarding significant medical diagnoses. The agency needs to ensure that health care records are comprehensive.
#met /# rated at mid-cycle	7/9
Rating	NOT MET

Indicator #	L47
Indicator	Self medication
Area Need Improvement	For one individual the self-medication assessment did not include physicians' signature and for another individual who was self-administered medications, a individualized support plan had not been developed. The agency needs to ensure that skills are updated with physician approval as they change and that appropriate actions can be taken if the individual is unable to remain independent as identified in the individual support plan.
Status at mid-cycle	For four individuals, the agency had assessed for self-medication management and had related support plans in place.
#met /# rated at mid-cycle	4/4
Rating	MET

Indicator #	L60
Indicator	Data maintenance

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Area Need Improvement	For one of restrictive behavioral interventions, data used to determine the efficacy of the intervention was not being collected. The agency needs to ensure that data is consistently collected and reviewed to determine the efficacy of all restrictive behavioral interventions.
Status at mid-cycle	For one of restrictive behavioral interventions, data used to determine the efficacy of the intervention was not being collected. The agency needs to ensure that data is consistently collected and reviewed to determine the efficacy of all restrictive behavioral interventions.
#met /# rated at mid-cycle	0/1
Rating	NOT MET

Indicator #	L78
Indicator	Restrictive Int. Training
Area Need Improvement	At one home staff had not been trained to consistently implement a restrictive intervention. The agency needs to ensure that all staff are trained to safely and consistently implement restrictive interventions per regulation.
Status at mid-cycle	At one home staff had not been trained to consistently implement a restrictive intervention. The agency needs to ensure that all staff are trained to safely and consistently implement restrictive interventions per regulation.
#met /# rated at mid-cycle	0/1
Rating	NOT MET

Indicator #	L84
Indicator	Health protect. Training
Area Need Improvement	Staff had not been trained on three individuals' health-related protections. The agency needs to ensure that all staff and care providers are trained on the correct utilization of health-related protections per regulation.

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Status at mid-cycle	Staff were trained on three individuals' health-related protections.
#met /# rated at mid-cycle	3/3
Rating	MET

Indicator #	L86
Indicator	Required assessments
Area Need Improvement	Six of eight ISP assessments were not submitted within the required timelines. The agency needs to ensure to submit ISP assessments within required timelines.
Status at mid-cycle	Three of nine ISP assessments were not submitted within the required timelines. The agency needs to ensure to submit ISP assessments within required timelines.
#met /# rated at mid-cycle	6/9
Rating	NOT MET

Indicator #	L87
Indicator	Support strategies
Area Need Improvement	Three of five ISP support strategies were not submitted within the required timelines. The agency needs to ensure to submit ISP support strategies within required timelines.
Status at mid-cycle	One of nine ISP support strategies were not submitted within the required timelines. The agency needs to ensure to submit ISP support strategies within required timelines.
#met /# rated at mid-cycle	8/9
Rating	MET

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Indicator #	L89
Indicator	Complaint and resolution process
Area Need Improvement	There was no complaint and resolution process in place in the home and individuals were not aware of the process. The agency needs to ensure that a complaint and resolution process is present in all homes through the ABI waiver.
Status at mid-cycle	There was a complaint and resolution process in place in the home and individuals were aware of the process.
#met /# rated at mid-cycle	1/1
Rating	MET

Indicator #	L99 (05/22)
Indicator	Medical monitoring devices
Area Need Improvement	A protocol for the use and care of one of three medical monitoring devices was not available to all staff who were responsible for its implementation, and all staff had not been trained on its use. The agency needs to ensure that all medical and monitoring devices are authorized, have protocols for use and care, data is collected appropriately, and that all staff are trained in the correct use of the device.
Status at mid-cycle	One individual had a medical monitoring device. This device was authorized by a qualified physician, there were clear procedures in place, data was collected, and staff were trained.
#met /# rated at mid-cycle	1/1
Rating	MET