

DEPARTMENT OF DEVELOPMENTAL SERVICES
LICENSURE AND CERTIFICATION
PROVIDER FOLLOW-UP REPORT

Provider: The ARC of the South Shore

Provider Address: 20 Pond Park Rd #113 , Hingham

Name of Person Lisa Weeks/Denesia Tardif
Completing Form: (Residential);

Date(s) of Review: 17-JAN-24 to 18-JAN-24

Follow-up Scope and results :		
Service Grouping	Licensure level and duration	# Indicators std. met/ std. rated
Residential and Individual Home Supports	2 Year License	5/5
Employment and Day Supports	2 Year License	4/4

Residential and Individual Home Supports Areas Needing Improvement on Standard not met - Identified by DDS

Indicator #	L54 (07/21)
Indicator	Privacy

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Area Need Improvement	At four of nine locations, individuals were not afforded privacy when taking care of personal matters. The agency needs to ensure that individuals are afforded privacy when taking care of personal needs.
Process Utilized to correct and review indicator	The Facilities Director purchased and installed privacy slider locks on all the doors that needed locks installed.
Status at follow-up	
Rating	Met

Indicator #	L61
Indicator	Health protection in ISP
Area Need Improvement	For four of seven individuals, supports and health-related protections were not outlined in a plan that included the continuing need for the device/s, tracking of use, cleaning and maintenance. The agency needs to ensure that health-related protections are fully outlined to include the continuing need for the device/s, tracking of use, cleaning and maintenance.
Process Utilized to correct and review indicator	The current adaptive checklist was reviewed and updated. The Adaptive checklist now includes cleaning, maintenance and use. Staff are required to sign off weekly and is reviewed by the program manager monthly.
Status at follow-up	
Rating	Met

Indicator #	L63
Indicator	Med. treatment plan form

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Area Need Improvement	At four of eight locations, medication treatment plans were not written in a format that contained all the required components including descriptions of observable/measurable behaviors, data collection and criteria for potentially decreasing and/or eliminating the medication(s). Medication treatment plans must be written in a format that contains all the required components including descriptions of observable/measurable behaviors, data collection and criteria for potentially decreasing and/or eliminating the medication(s).
Process Utilized to correct and review indicator	Individuals requiring a medication treatment plan were reviewed along with the daily logs to ensure that the data being collected on the logs reflect what is written on the medication treatment plans. Criteria for potentially decreasing and or eliminating the medication has been added to the Clinical data summary/Psych visit form for the HCP/ prescriber to determine and document what the criteria is. The information is transferred to the MTP.
Status at follow-up	
Rating	Met

Indicator #	L68
Indicator	Funds expenditure
Area Need Improvement	For three of eight individuals with whom the agency has shared/delegated money management responsibilities, expenditures were not made only for purposes that directly benefitted the individuals. The agency needs to ensure that individuals' funds are used only for purposes that directly benefit the individuals.
Process Utilized to correct and review indicator	A memo was drafted, and an email sent to all staff and managers that clearly states guidelines for use of individual's funds. The memo was also posted at programs for staff to review and sign. All individuals that were reviewed have been reimbursed by the agency.

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Status at follow-up	
Rating	Met

Indicator #	L84
Indicator	Health protect. Training
Area Need Improvement	At four of seven locations, staff/care providers were not trained on the correct utilization of health-related protections. The agency needs to ensure that staff/care providers are trained on the correct utilization of health-related protections and equipment.
Process Utilized to correct and review indicator	Training was provided to the staff/ care providers. There has been an additional check implemented. A member of the QA team will review the list of staff currently at the program and cross reference with the training books in each program during quarterly checks to ensure that all staff have been trained and reviewed all training provided by the agency including utilizing health related protections and equipment
Status at follow-up	
Rating	Met

Employment and Day Supports Areas Needing Improvement on Standard not met - Identified by DDS

Indicator #	L21
Indicator	Safe electrical equipment
Area Need Improvement	At the day program location, electrical equipment was not maintained in safe manner. The agency needs to ensure that electrical equipment is maintained in a safe manner.

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Process Utilized to correct and review indicator	The iPads and the power strip were moved to a different outlet. The Manager's computer and phone are plugged in the original outlet.
Status at follow-up	
Rating	Met

Indicator #	L61
Indicator	Health protection in ISP
Area Need Improvement	For one of two individuals, supports and health-related protections were not outlined in a plan that included the continuing need for the device/s, tracking of use, cleaning and maintenance. The agency needs to ensure that health-related protections are fully outlined to include the continuing need for the device/s, tracking of use, cleaning and maintenance.
Process Utilized to correct and review indicator	A tracking form has been developed for staff to inspect/monitor device(s) daily, document weekly and manager signs off on it monthly.
Status at follow-up	
Rating	Met

Indicator #	L85
Indicator	Supervision
Area Need Improvement	At one of two day-sites, ongoing supervision, oversight and staff development was not evident. The agency needs to ensure that it provides ongoing supervision, oversight and staff development.

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Process Utilized to correct and review indicator	Medication administration sheets were separated per month. PRN sheets are developed monthly and noted when or if given. Vaseline was taken out of plastic folder and put in its own bag. Director will review medication procedures at monthly supervision w/Manager.
Status at follow-up	
Rating	Met

Indicator #	L91
Indicator	Incident management
Area Need Improvement	One incident report was not submitted into HCSIS within the required timelines. The agency needs to ensure that all incidents are submitted in HCSIS within the required timelines.
Process Utilized to correct and review indicator	All staff are aware of timelines for reporting incidents in the HCSIS system. In a two year period of review, one incident report was just 1 day late of timeline.
Status at follow-up	
Rating	Met