

DEPARTMENT OF DEVELOPMENTAL SERVICES

LICENSURE AND CERTIFICATION

DDS FOLLOW-UP REPORT

Provider	BAY COVE HUMAN SERVICES	Provider Address	66 Canal St , Boston
Survey Team	Edi-Osagie, Raymond; MacPhail, Lisa;	Date(s) of Review	03-SEP-24 to 05-SEP-24

Follow-up Scope and results :

Service Grouping	Licensure level and duration	# Critical Indicators std. met/ std. rated at follow-up	# Indicators std. met/ std. rated at follow-up	Sanction status prior to Follow-up	Combined Results post-Follow-up; for Deferred, License level	Sanction status post Follow-up
Employment and Day Supports 2 Locations 16 Audits	Defer Licensure	1/1	6/8	<input type="checkbox"/> Eligible for new business (Two Year License) <input checked="" type="checkbox"/> Ineligible for new business. (Deferred Status: Two year mid-cycle review License)	2 Year License with Mid-Cycle Review	<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

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

Indicator #	L15
Indicator	Hot water
Area Need Improvement	At the day services site, hot water temperature measured higher than required. The agency must ensure that hot water temperature is maintained at the required temperature.
Status at follow-up	Hot water temperature measured as required at the day services site.
#met /# rated at followup	1/1
Rating	Met

Indicator #	L17
Indicator	Egress at grade
Area Need Improvement	The CBDS programming spaces were located on floors that were not at grade level and had no accessible egresses. ALL CBDS programming must be at grade level or floors with accessible egresses that allows all individuals to be served regardless of mobility needs. (The agency is in the process of addressing this through a DDS process).
Status at follow-up	The agency created a CBDS space adjacent to the Dayhab space on the accessible first floor of the building, thus meeting this indicator. The agency will continue to ensure that CBDS programming offered to individuals is the same across all levels of the multiple floor building.
#met /# rated at followup	1/1
Rating	Met

Indicator #	L18
Indicator	Above grade egress
Area Need Improvement	The programming space utilized for CBDS services on the second and third floors as well as the basement did not have accessible means of egress to grade. Space used for day service programming must be at grade or have accessible means of egress to grade. (The agency is in the process of addressing this through a DDS process).

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Status at follow-up	This indicator was met for individuals without mobility support needs; and agency created a CBDS space adjacent to the Dayhab space on the accessible first floor of the building, thus negating the relevance of this indicator for those individuals with mobility support needs. The agency will continue to ensure that programming offered to CBDS individuals are the same across all floors.
#met /# rated at followup	1/1
Rating	Met

Indicator #	L38
Indicator	Physician's orders
Area Need Improvement	For one of three individuals, a medical treatment protocol was not developed for a significant medical condition that requires one. The agency must ensure that all for all individuals with significant medical conditions that requires one, medical protocols are developed, and staff are fully trained on them.
Status at follow-up	For the one individual to whom this indicator applied, a physician ordered medical treatment protocol was in place, and staff was implementing it correctly.
#met /# rated at followup	1/1
Rating	Met

Indicator #	L63
Indicator	Med. treatment plan form
Area Need Improvement	For all six individuals with medication treatment plans, the plans either did not accurately reflect the medication administered at the day program, or data was not consistently collected. The agency must ensure that all medication treatment plans accurately reflect the medication/s being administered and have consistent data collection relative to the symptoms being treated.
Status at follow-up	The five medication treatment plans that were reviewed, accurately reflected the medications being administered at the day program; data was also collected consistently on the behavioral symptoms being treated. The collected data must be forwarded to residences for sharing with prescribers.
#met /# rated at followup	5/5
Rating	Met

Indicator #	L91
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Indicator	Incident management
Area Need Improvement	Incident reports at one day site was submitted and/or finalized outside the required timelines. The agency must submit and finalize incident reports within the required timelines.
Status at follow-up	One of two incidents was not submitted and finalized within the required timelines. The agency must ensure that all incidents are submitted and finalized within the required timelines in HCSIS.
#met /# rated at followup	0/1
Rating	Not Met

Administrative Areas Needing Improvement on Standard not met - Identified by DDS

Indicator #	L65
Indicator	Restraint report submit
Area Need Improvement	Five of six restraint reports were submitted and/or finalized outside the required timelines. The agency must submit and finalize restraint reports within the required timelines.
Status at follow-up	One of two restraint reports was not finalized within the required timeline in HCSIS. The agency must ensure that restraint reports are finalized within the required timeline in HCSIS.
#met /# rated at followup	1/2
Rating	Not Met

Indicator #	L76
Indicator	Track trainings
Area Need Improvement	Eight of twenty staff were not trained on, or current for DDS mandated trainings. The agency must use an effective training tracking system to ensure that staff are trained on DDS mandated trainings and other site relevant training topics.
Status at follow-up	Eighteen of nineteen staff whose records were reviewed, received training on all DDS mandated topics.
#met /# rated at followup	18/19
Rating	Met