



PROVIDER REPORT FOR

**Becket Family of Services
dba LifeConnections
107 Scott Drive
Leominster, MA 01543**

November 06, 2023

Version

Public Provider Report

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

SUMMARY OF OVERALL FINDINGS

Provider	Becket Family of Services dba LifeConnections
Review Dates	10/2/2023 - 10/6/2023
Service Enhancement Meeting Date	10/23/2023
Survey Team	Melanie Hutchison (TL) Danielle Chiaravallotti
Citizen Volunteers	

Survey scope and findings for Residential and Individual Home Supports

Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Residential and Individual Home Supports	5 location(s) 7 audit (s)	Full Review	82/86 2 Year License 10/23/2023 - 10/23/2025		Certified 10/23/2023 - 10/23/2025
Residential Services	4 location(s) 6 audit (s)			Deemed	
Placement Services	1 location(s) 1 audit (s)			Deemed	
Planning and Quality Management				Deemed	

EXECUTIVE SUMMARY :

Becket Family of Services dba LifeConnections, headquartered in New Hampshire, provides a range of services to children and adults with significant behavioral support needs in Massachusetts, Maine, Vermont, New Hampshire, South Carolina, and Florida. The current licensing and certification review focused on services provided to adults receiving residential supports in Massachusetts.

This survey represented a full licensing review of the Becket's residential supports and placement services. Becket is accredited by the Council on Accreditation (COA) and has elected to deem COA for certification for its day and residential service groups.

Findings for Becket's licensing survey indicate that the agency employed effective oversight systems for several licensing domains. In the area of environmental safety, all locations reviewed were clean

and well maintained, had current inspections, and smoke and carbon monoxide detectors present where required. In residential homes, staff used a cleaning checklist to ensure that daily cleaning and disinfecting was completed as well as other larger cleaning tasks which were completed weekly or monthly. In the area of personal safety, all locations had a current safety plan approved by the area office, and emergency back up plans were in place for individuals.

Becket employed several strategies to ensure that individuals' healthcare needs were met. The agency maintained a database to monitor medical and dental appointments which could be accessed by house managers, operations staff, and clinical and nursing staff. This strategy was largely effective to confirm that sampled individuals received annual physical and dental exams in a timely manner, received preventative screenings appropriate for gender and age, and completed medical tests and follow up appointments as recommended. The agency's oversight system for medication administration included weekly and quarterly medication audits that ensured that MAP procedures were consistently followed. The agency maintained a policy that staff received yearly and when needed training on vital signs, EO509, signs and symptoms of illness, healthcare protocols, and medical diagnoses. As a result, agency staff working in the sampled locations were competent in recognizing illness and medical emergencies, knowing how to respond to individuals' significant medical conditions, and knowledgeable about how to promote a healthy lifestyle.

Regarding oversight of clinical supports, Becket's clinical staff made regular visits to individuals in their homes and attended staff meetings monthly to discuss clinical issues, monitor the implementation of behavior plans and environmental restrictions, and train staff. Clinical staff also routinely collaborated with other Becket staff, including nursing, operations, and facility management, to ensure that recommended changes to the environment were feasible, to determine if staff may need additional support and training, and to gather medically accurate information to include in medication treatment plans to mitigate risk for individuals. The licensing audit findings confirmed Becket had developed medication treatment plans containing all required components and ensured plans were incorporated into individuals' annual ISPs. The agency used a psychiatric visit form that allowed clinical staff to provide behavioral outcome data and summarize individuals' progress towards meeting identified treatment goals. This information was used at psychiatry appointments to speak with the prescriber about decreasing, increasing, or discontinuing behavior-modifying medications. Audit findings demonstrated that staff consistently collected behavioral data for sampled individuals that was reviewed at least monthly by clinical staff.

In addition to the positive findings above, there were a few licensing areas that would benefit from the agency's attention. The agency needs to strengthen its oversight of the submission of restraint and incident reports as well as ISP assessments and provider support strategies so that all are submitted in HCSIS to DDS within required timelines.

As a result of this licensing survey, Becket's Residential service group will receive a Two-Year License with a service group score of 95%, including all critical indicators rated as Met. Follow-up will be conducted by the agency on those licensing indicators that received a rating of Not Met. This follow-up will be reported by the agency to OQE within 60 days. The Residential service grouping is Certified via the agency's current COA accreditation.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	9/10	1/10	
Residential and Individual Home Supports	73/76	3/76	
Residential Services Placement Services			
Critical Indicators	8/8	0/8	
Total	82/86	4/86	95%
2 Year License			
# indicators for 60 Day Follow-up		4	

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


Indicator #	Indicator	Area Needing Improvement
L65	Restraint reports are submitted within required timelines.	Seventy-four out of one hundred and fifty-six physical restraint reports were not submitted to DDS within required timelines. The agency needs to ensure that all reports of physical restraint are submitted within three days of occurrence and reviewed by the restraint manager within five days of occurrence of the restraint.

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





Indicator #	Indicator	Area Needing Improvement
L86	Required assessments concerning individual needs and abilities are completed in preparation for the ISP.	For two individuals, ISP assessments were not submitted to DDS within required timelines. The agency needs to ensure that ISP assessments are submitted to DDS at least 15 days prior to the ISP.
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 required timelines. The agency needs to ensure that provider support strategies are submitted to DDS at least 15 days prior to the ISP.
L91	Incidents are reported and reviewed as mandated by regulation.	At four locations, reportable incidents were not submitted within required timelines. The agency needs to ensure that incident reports are submitted to DDS and finalized within required timelines.


MASTER SCORE SHEET LICENSURE



Organizational: Becket Family of Services dba LifeConnections

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
 L2	Abuse/neglect reporting	5/5	Met
L3	Immediate Action	15/15	Met
L4	Action taken	15/15	Met
L48	HRC	1/1	Met
L65	Restraint report submit	74/156	Not Met(47.44 %)
L66	HRC restraint review	117/125	Met(93.60 %)
L74	Screen employees	7/7	Met
L75	Qualified staff	3/3	Met
L76	Track trainings	18/19	Met(94.74 %)
L83	HR training	19/19	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	6/6		1/1				7/7	Met
L5	Safety Plan	L	4/4		1/1				5/5	Met
 L6	Evacuation	L	4/4		1/1				5/5	Met
L7	Fire Drills	L	4/4						4/4	Met
L8	Emergency Fact Sheets	I	6/6		1/1				7/7	Met
L9 (07/21)	Safe use of equipment	I	6/6						6/6	Met
 L11	Required inspections	L	4/4		1/1				5/5	Met
 L12	Smoke detectors	L	4/4		1/1				5/5	Met
 L13	Clean location	L	4/4		1/1				5/5	Met
L14	Site in good repair	L	4/4		1/1				5/5	Met
L15	Hot water	L	4/4		1/1				5/5	Met
L16	Accessibility	L	4/4		1/1				5/5	Met

L17	Egress at grade	L	4/4		1/1				5/5	Met
L18	Above grade egress	L	3/3						3/3	Met
L19	Bedroom location	L	4/4						4/4	Met
L20	Exit doors	L	4/4						4/4	Met
L21	Safe electrical equipment	L	4/4		1/1				5/5	Met
L22	Well-maintained appliances	L	4/4		1/1				5/5	Met
L23	Egress door locks	L	4/4						4/4	Met
L24	Locked door access	L	4/4		1/1				5/5	Met
L25	Dangerous substances	L	4/4						4/4	Met
L26	Walkway safety	L	4/4		1/1				5/5	Met
L27	Pools, hot tubs, etc.	L			1/1				1/1	Met
L28	Flammables	L	4/4						4/4	Met
L29	Rubbish/combustibles	L	4/4		1/1				5/5	Met
L30	Protective railings	L	4/4		1/1				5/5	Met
L31	Communication method	I	6/6		1/1				7/7	Met
L32	Verbal & written	I	6/6		1/1				7/7	Met
L33	Physical exam	I	6/6		1/1				7/7	Met
L34	Dental exam	I	5/5		1/1				6/6	Met
L35	Preventive screenings	I	6/6		1/1				7/7	Met
L36	Recommended tests	I	5/6		1/1				6/7	Met (85.71 %)
L37	Prompt treatment	I	6/6		1/1				7/7	Met
 L38	Physician's orders	I	3/3		1/1				4/4	Met
L39	Dietary requirements	I	4/4						4/4	Met
L40	Nutritional food	L	4/4						4/4	Met
L41	Healthy diet	L	4/4		1/1				5/5	Met
L42	Physical activity	L	4/4		1/1				5/5	Met
L43	Health Care Record	I	5/6						5/6	Met (83.33 %)
L44	MAP registration	L	4/4						4/4	Met

L45	Medication storage	L	4/4						4/4	Met
 L46	Med. Administration	I	6/6		1/1				7/7	Met
L49	Informed of human rights	I	6/6		1/1				7/7	Met
L50 (07/21)	Respectful Comm.	I	6/6		1/1				7/7	Met
L51	Possessions	I	6/6		1/1				7/7	Met
L52	Phone calls	I	6/6		1/1				7/7	Met
L53	Visitation	I	6/6		1/1				7/7	Met
L54 (07/21)	Privacy	I	6/6		1/1				7/7	Met
L56	Restrictive practices	I	4/4		1/1				5/5	Met
L57	Written behavior plans	I	6/6		1/1				7/7	Met
L60	Data maintenance	I	6/6		1/1				7/7	Met
L61	Health protection in ISP	I	3/3						3/3	Met
L63	Med. treatment plan form	I	6/6		1/1				7/7	Met
L64	Med. treatment plan rev.	I	6/6		1/1				7/7	Met
L67	Money mgmt. plan	I	5/5						5/5	Met
L68	Funds expenditure	I	5/5						5/5	Met
L69	Expenditure tracking	I	5/5						5/5	Met
L70	Charges for care calc.	I	5/6		1/1				6/7	Met (85.71 %)
L71	Charges for care appeal	I	5/6		1/1				6/7	Met (85.71 %)
L77	Unique needs training	I	6/6		1/1				7/7	Met
L78	Restrictive Int. Training	L	4/4		1/1				5/5	Met
L79	Restraint training	L	4/4		1/1				5/5	Met
L80	Symptoms of illness	L	4/4		1/1				5/5	Met
L81	Medical emergency	L	4/4		1/1				5/5	Met
 L82	Medication admin.	L	4/4						4/4	Met
L84	Health protect. Training	I	3/3						3/3	Met
L85	Supervision	L	4/4		1/1				5/5	Met

L86	Required assessments	I	2/4						2/4	Not Met (50.0 %)
L87	Support strategies	I	2/4						2/4	Not Met (50.0 %)
L88	Strategies implemented	I	6/6		1/1				7/7	Met
L90	Personal space/ bedroom privacy	I	6/6		1/1				7/7	Met
L91	Incident management	L	0/4		1/1				1/5	Not Met (20.0 %)
L93 (05/22)	Emergency back-up plans	I	6/6		1/1				7/7	Met
L94 (05/22)	Assistive technology	I	6/6		1/1				7/7	Met
L96 (05/22)	Staff training in devices and applications	I	2/2		1/1				3/3	Met
L99 (05/22)	Medical monitoring devices	I	2/2		1/1				3/3	Met
#Std. Met/# 76 Indicator									73/76	
Total Score									82/86	
									95.35%	