

DEPARTMENT OF DEVELOPMENTAL SERVICES

LICENSURE AND CERTIFICATION

DDS FOLLOW-UP REPORT

Provider BERKSHIRE COUNTY ARC INC

Provider Address 395 South St. POB 2 , Pittsfield

Survey Team Black, Carole; Comeau, Andrea;

Date(s) of Review 03-JAN-22 to 07-JAN-22

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
Residential and Individual Home Supports 16 Locations 33 Audits	2 Year License	1/1	10/14	<input checked="" type="checkbox"/> Eligible for new business (Two Year License) <input 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

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

Indicator #	L67
Indicator	Money mgmt. plan
Area Need Improvement	Two out of seven funds management plans did not include a training plan with learning strategies to further independence. The agency will need to ensure when the ISP team agrees the person would benefit from a funds management training plan, that the plan it develops includes learning strategies to enhance the individual's independence managing their own funds.
Status at follow-up	In response to findings from the current licensing survey, BCARC made a number of changes to formats used to develop funds management plans for individuals across different service types. This process of revision is ongoing. During the follow-up review, funds management plans were reviewed for thirteen individuals across 24-hour residential, ABI/MFP, and Individual Home Support services. Most of the plans had been revised, reflecting updated formats. Eight of thirteen plans addressed requirements for funds management plan development; five plans did not met requirements, or if revised, they lacked agreement from the individual or guardian.
#met /# rated at followup	8/13
Rating	Not Met

Indicator #	L69
Indicator	Expenditure tracking
Area Need Improvement	For two out of eight individuals whose expenses were reviewed, expenditures either were not documented on the tracking sheet or balances were not accurately tracked. The agency needs to strengthen its implementation of individuals' plans as written, including the need to document expenditures when they occur and to validate reported balances as accurate.
Status at follow-up	
#met /# rated at followup	
Rating	Not Rated

Indicator #	L86
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Indicator	Required assessments
Area Need Improvement	For two of eight individuals, required ISP assessments were not submitted to DDS within required timelines. The agency will need to ensure that ISP assessments are submitted to the service coordinator at least fifteen days prior to the ISP meeting.
Status at follow-up	
#met /# rated at followup	
Rating	Not Rated

Indicator #	L87
Indicator	Support strategies
Area Need Improvement	For two of eight individuals, the provider support strategies were not submitted to DDS within required timelines. The agency will need to ensure that provider support strategies are submitted to the service coordinator at least fifteen days prior to the ISP meeting.
Status at follow-up	
#met /# rated at followup	
Rating	Not Rated

Indicator #	L91
Indicator	Incident management
Area Need Improvement	For six out of nine locations, incident reports were not submitted or reviewed within the required timelines. The agency needs to ensure incidents reports are submitted and reviewed within required timelines.
Status at follow-up	In order to ensure that timelines for reporting and reviewing incident reports are met, BCARC expanded its list of staff who have permission to finalize incident reports in HCSIS. Training in the process of reporting incidents, including timelines, was provided to supervisors and managers. To strengthen oversight, the agency's quality assurance department will run monthly reports to monitor compliance with timeline requirements. The status of incident reporting was reviewed for nine locations included in the 24-hour and ABI/MFP residential samples. Timelines for reporting and finalizing incident reports were met at eight of nine locations.

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#met /# rated at followup	8/9
Rating	Met

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

Indicator #	L65
Indicator	Restraint report submit
Area Need Improvement	Three out of nine restraints did not meet required timelines for reporting. The agency will need ensure restraints are reported and reviewed with mandated timelines.
Status at follow-up	
#met /# rated at followup	
Rating	Not Rated