

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

Provider: BERKSHIRE COUNTY ARC INC

Provider Address: 395 South St. POB 2 , Pittsfield

Name of Person Shaun Hall
Completing Form: _____

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

Follow-up Scope and results :		
Service Grouping	Licensure level and duration	# Indicators std. met/ std. rated
Employment and Day Supports		4/4

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Summary of Ratings

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

Indicator #	L61
Indicator	Health protection in ISP
Area Need Improvement	For one individual, there was no authorization from a healthcare professional for the use of a bilateral hearing aid or instructions for staff on use or care of the device. The agency needs to ensure that there is authorization by a healthcare professional for health-related supports used by individuals as well as instructions for staff on use or care of the devices.
Process Utilized to correct and review indicator	Program received authorization for the individual's S&P as well as pamphlet on use and care for devices.
Status at follow-up	Complete.
Rating	Met

Indicator #	L80
Indicator	Symptoms of illness
Area Need Improvement	In two locations, staff were not trained in signs and symptoms of illness. The agency needs to ensure that staff working in CBDS and employment programs are trained to recognize signs and symptoms of illness.
Process Utilized to correct and review indicator	Signs and Symptom of illness has been created in our e-academy learning software. All staff will take/retake the course by 12/31/21.
Status at follow-up	In process currently 80% of employment/ CBDS staff have taken the course as of 12/31/21.
Rating	Met

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Indicator #	L84
Indicator	Health protect. Training
Area Need Improvement	For one individual who used a health-related support, staff were not trained in the proper use, care, and cleaning of the device. The agency needs to ensure that staff are trained and knowledgeable in the use and application of health-related equipment and devices authorized for individuals. This training must include the proper care of the device as well as the frequency of maintenance checks.
Process Utilized to correct and review indicator	Program received authorization for the individual's S&P as well as pamphlet on use and care for devices.
Status at follow-up	All staff have been trained.
Rating	Met

Indicator #	L88
Indicator	Strategies implemented
Area Need Improvement	For eight individuals, ISP goals were not implemented and/or effectively tracked. The agency needs to ensure that ISP goals are implemented as designed and that documentation is maintained on the individual's current progress towards accomplishing the goal.
Process Utilized to correct and review indicator	Tracking system reviewed and updated. All individuals will have their monthly tracking sheets in their subfolders for staff to complete daily. Staff will submit their tracking sheets monthly to their Employment Manager for review.
Status at follow-up	All staff are now using the tracking system and have been completed for the month of December.
Rating	Met