

**DEPARTMENT OF DEVELOPMENTAL SERVICES**

**LICENSURE AND CERTIFICATION**

**PROVIDER FOLLOW-UP REPORT**

**Provider:** BERKSHIRE HILLS MUSIC  
ACADEMY

**Provider Address:** 48 Woodbridge St , South Hadley

**Name of Person  
Completing Form:**

**Date(s) of Review:** 05-MAR-25 to 16-APR-25

| Follow-up Scope and results :            |                              |                                   |
|--|------------------------------|-----------------------------------|
| Service Grouping                         | Licensure level and duration | # Indicators std. met/ std. rated |
| Employment and Day Supports              | 2 Year License               | 3/3                               |
| Residential and Individual Home Supports | 2 Year License               | 2/2                               |

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

|   |   |
|---|---|
| <b>Indicator #</b>                                      | L7  |
| <b>Indicator</b>  | Fire Drills   |
| <b>Issue Identified</b>                                 | Provider did not meet the standard of hold conducting fire drills at the frequency set forth in the indicator. Staffing changes led to missed timing and scheduling of drills.  |
| <b>Actions Planned/Occurred</b>                         | Residential staff have met with our fire safety officer and maintenance staff to review the procedure of taking the building offline to conduct the drills, creating a shared schedule, and having a report out mechanism on the results of each drill. |
| <b>Process Utilized to correct and review indicator</b> | Updated process is in place and the necessary staff have been trained. Fire drills are scheduled to comply with standard.   |
| <b>Status at follow-up</b>                              | Updated process is in place and the necessary staff have been trained. Fire drills are scheduled to comply with standard.   |
| <b>Rating</b>   | Met   |

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

|   |  |
|---|--|
| <b>Indicator #</b>                                      | L63  |
| <b>Indicator</b>  | Med. treatment plan form   |
| <b>Area Need Improvement</b>                            | Two of three individual's medication treatment plans were missing a required component/s. The agency must develop medication treatment plans to include all required components.     |
| <b>Process Utilized to correct and review indicator</b> | Trained our staff who upload the documents for the ISP to include the MTP as part of the packet for everyone who has one. MTPs will be uploaded when the ISP is open for us in HCSIS |
| <b>Status at follow-up</b>                              | Revisions in place. MTPs will be part of the individual's ISP documents.   |
| <b>Rating</b>   | Met  |

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|   |   |
|---|---|
| <b>Indicator #</b>                                      | L15   |
| <b>Indicator</b>  | Hot water   |
| <b>Issue Identified</b>                                 | Provider experiences fluctuations in the hot water temp that, at times, has it out of compliance at times.  |
| <b>Actions Planned/Occurred</b>                         | Our maintenance person and plumbing company have been working on multiple components of our system to address this issue. We are awaiting quotes for a new pressure regulator, mixing valve, and water softener. The water has created calcium and limestone build up on some of the valves causing them not to work properly to adjust the water temp as needed. |
| <b>Process Utilized to correct and review indicator</b> | Maintenance has a system-wide upgrade scheduled for May 19th to replace the mixing valves, regulators, etc.   |
| <b>Status at follow-up</b>                              | Temperature is met most of the time   |
| <b>Rating</b>   | Met   |

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|   |   |
|---|---|
| <b>Indicator #</b>                                      | L63   |
| <b>Indicator</b>  | Med. treatment plan form  |
| <b>Area Need Improvement</b>                            | All three individual's medication treatment plans were missing a required component/s. The agency must develop medication treatment plans to include all required components. |
| <b>Process Utilized to correct and review indicator</b> | Review of the OQE guidance on MTP. Incorporated missing section and/or revised language based on the service enhancement meeting feedback.                                    |
| <b>Status at follow-up</b>                              | Revisions in place. MTPs will be part of the individual's ISP documents.  |
| <b>Rating</b>   | Met   |

|   |   |
|---|---|
| <b>Indicator #</b>                                      | L64   |
| <b>Indicator</b>  | Med. treatment plan rev.  |
| <b>Area Need Improvement</b>                            | One of three individual's medication treatment plans were not submitted for ISP team review. The agency must ensure that all medication treatment plans are submitted to the ISP team for review. |
| <b>Process Utilized to correct and review indicator</b> | Trained our staff who upload the documents for the ISP to include the MTP as part of the packet for everyone who has one. MTPs will be uploaded when the ISP is open for us in HCSIS              |
| <b>Status at follow-up</b>                              | Plan in place.  |
| <b>Rating</b>   | Met   |