

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

Provider: BOSTON COLLEGE _____

Provider Address: Campion Hall Room 197 , Chestnut Hill _____

Name of Person Judy Coleman _____
Completing Form: _____

Date(s) of Review: 20-FEB-25 to 21-FEB-25 _____

Follow-up Scope and results :		
Service Grouping	Licensure level and duration	# Indicators std. met/ std. rated
Employment and Day Supports	2 Year License	0/0

Summary of Ratings

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

Indicator #	L48
Indicator	HRC
Area Need Improvement	The Human Rights Committee did not meet its mandate regarding required member attendance. The agency needs to ensure regular attendance of all required members when meeting in-person or virtually on a quarterly basis.
Process Utilized to correct and review indicator	Adding professionals as back up during the quarterly meetings. 2 parent professionals from SEP program committed to the meetings.
Status at follow-up	Not met.
Rating	Not Met