



**PROVIDER REPORT
FOR**

**CENTER FOR HUMAN
DEVELOPMENT
332 Birnie Ave
Springfield, MA 01107**

Version

Provider Web Report

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

SUMMARY OF OVERALL FINDINGS

Provider	CENTER FOR HUMAN DEVELOPMENT
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Review Dates	3/12/2015 - 3/19/2015
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Service Enhancement Meeting Date	4/2/2015
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Survey Team	Janina Millet Ken Jones Jill Walulak (TL)
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Citizen Volunteers	
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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	10 location (s) 10 audit (s)	Full Review	76 / 85 2 Year License 04/02/2015 - 04/02/2017		
Residential Services	6 location(s) 6 audit (s)			Full Review	13 / 14 Certified
Placement Services	1 location(s) 1 audit (s)			Full Review	14 / 14 Certified
Individual Home Supports	3 location(s) 3 audit (s)			Full Review	15 / 15 Certified

Survey scope and findings for Planning and Quality Management

Service Group Type	Sample Size	Scope	Licensure Level	Certification Scope	Certification Level
Planning and Quality Management	N/A	N/A	N/A	Full Review	6/6 Certified

EXECUTIVE SUMMARY :

EXECUTIVE SUMMARY

The Center for Human Development (CHD) is a large, multifaceted, nonprofit organization that was established in 1972. The agency provides comprehensive array of social services and mental health supports to adults and children in western Massachusetts and Connecticut, employing over fourteen hundred staff. The current licensing and certification review focused on services offered to adults through contractual agreements with the Department of Developmental Services (DDS). CHD provides residential supports to approximately one hundred adults with developmental disabilities. The CHD Outreach Team provides independent living support, skill training, and case management to twenty-eight individuals. The Meadows Homes division provides primarily 24 hour residential supports to seventy seven individuals. Survey findings were based on a total of ten audits in these service models.

A major strength of the organization was in the area of healthcare and the promotion of healthy lifestyles. Attention was focused on routine and preventative health care practices. The agency's quality assurance group met weekly to review health care issues for individuals in all residential settings. Within the Meadows Homes division, oversight of individuals' health care needs was provided by nursing staff as well as program managers and supervisors. Staff from the CHD outreach program routinely accompanied individuals on medical and psychiatric appointments and worked closely with other service providers to ensure consistent, quality healthcare was occurring. Across all residential programs, survey findings revealed a strong commitment to supporting individuals to lead healthy lifestyles. Many individuals in the survey engaged in physical exercise on a regular basis. A review of menus in twenty-four hour locations affirmed the promotion of healthy food choices was occurring regularly. Several individuals in the survey had lost a significant amount of weight and had an overall improvement in their health as a result of these efforts.

Consistent with findings from past reviews, the agency demonstrated a commitment to supporting individuals to maximize their independence in everyday activities and routines. Regular assessment of each person's skills and abilities helped to identify both formal and informal goals to increase independence and self-reliance. Survey findings showed that individuals were achieving greater independence in the areas of money management, self-medication, meal preparation and home and community safety skills.

In the areas subject to certification, CHD demonstrated a commitment to promoting community involvement. Individuals were supported to participate in a wide range of activities based on personal interests and needs. Opportunities to attend and participate in religious services, concerts, sporting events and vacations were occurring for people on a regular basis. The CHD outreach team offered community group activities each month and provided an event calendar outlining these opportunities. Examples of these activities included shopping trips, holiday events, self-advocacy groups and dining out. The agency also demonstrated a concerted effort to support individuals to develop and maintain relationships with others. Through interview and a review of documentation, it was noted that staff routinely supported individuals to get together with family members and friends.

In addition to the strengths identified in the report, findings also indicated areas in which CHD should focus its attention. The agency needs to support the human rights committee to fulfill its roles and responsibilities. Restraint reports need to be created and reviewed within the required timelines. Behavior plans need to contain all required components and have the necessary reviews. Medication treatment plans need to include all required components. Additionally, the use of support and health related protections need to be included in the ISP and articulated in a written plan for implementation.

As a result of the current review, CHD will receive a Two-Year License. Follow-up will be completed by the Office of Quality Enhancement within sixty days on any licensing indicator not met during the course of the survey.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	7/10	3/10	
Residential and Individual Home Supports	69/75	6/75	
Residential Services Placement Services Individual Home Supports			
Critical Indicators	8/8	0/8	
Total	76/85	9/85	89%
2 Year License			
# indicators for 60 Day Follow-up		9	

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

Indicator #	Indicator	Area Needing Improvement
L48	The agency has an effective Human Rights Committee.	The agency needs to support its human rights committee to fulfill its roles and responsibilities. The members of the committee with legal and medical expertise had attended only fifty percent of the meetings over the last two years. Two other members had only attended one meeting during that same timeframe. A review of meeting minutes revealed that many items requiring review and approval by the committee had not occurred. Additionally, the committee needs to review agency policies and procedures annually to ensure compliance with DDS regulations.
L65	Restraint reports are submitted within required timelines.	The agency needs to ensure that restraint reports are submitted into HCSIS within three days of occurrence. The restraint manager needs to review the restraint within five days of the occurrence of the event.
L66	All restraints are reviewed by the Human Rights Committee.	Restraint reports need to be reviewed by the agency's Human Rights Committee within the required timeline of one hundred and twenty days.

Residential Commendations on Standards Met:

Indicator #	Indicator	Commendations
L41	Individuals are supported to follow a healthy diet.	Across all residential programs, survey findings revealed a strong commitment to support individuals to make healthy food choices. A review of menus in twenty-four hour locations affirmed that the promotion of healthy food choices was occurring regularly. Through interview, staff demonstrated knowledge of what constitutes a nutritionally sound diet. Several individuals in the survey had lost a significant amount of weight and had an overall improvement in their health status. The agency is commended for its efforts in this area.

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

Indicator #	Indicator	Area Needing Improvement
L58	All behavior plans contain the required components.	The agency needs to ensure that behavior plans contain all required components. A behavior plan which contains restrictive components needs to identify the Level of the interventions, targeted behaviors to decrease, and desired positive replacement behaviors. Additionally, the plan needs to include rationale based on the functional analysis of targeted behaviors and antecedents and must identify the person providing clinical oversight of the plan.
L59	Behavior plans have received all the required reviews.	The agency needs to ensure that behavior plans have all the required reviews. Level 1 behavior plans with restrictive interventions must be reviewed and approved by the individual and/or guardian, the ISP team and the agency's human rights committee
L61	Supports and health related protections are included in ISP assessments and the continued need is outlined.	The agency needs to ensure that the use of support and health related protections is documented in the ISP and articulated in a written plan for implementation.
L62	Supports and health related protections are reviewed by the required groups.	The agency needs to ensure that the use of support and health related protections are reviewed by the ISP team and the agency's human rights committee.

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

Indicator #	Indicator	Area Needing Improvement
L63	Medication treatment plans are in written format with required components.	Medication treatment plans need to contain specific information of procedures to minimize risk and clinical indications for terminating the drug. A review of medication treatment plans for this survey revealed that information on procedures to minimize risk and clinical indications for terminating the drug was generic and not specific to the behavior modifying medications that each person was prescribed.
L84	Staff are trained in the correct utilization of health related protections per regulation.	The agency needs to ensure that staff are trained in the correct utilization of support and health related protections.

CERTIFICATION FINDINGS

	Met / Rated	Not Met / Rated
Certification - Planning and Quality Management	6/6	0/6
Residential and Individual Home Supports		
Residential Services	13/14	1/14
Individual Home Supports	15/15	0/15
Placement Services	14/14	0/14

Residential Services Commendations on Standards Met:

Indicator #	Indicator	Commendations
C7	Individuals have opportunities to provide feedback on the performance of staff that supports them.	<p>The agency is commended for its efforts support individuals to give feedback on the performance of the staff who support them. The agency conducted annual satisfaction surveys to get input from individuals on the supports they received. Several questions on the survey focused on how individuals felt about the staff who were working with them. Additionally, within the Meadows Homes division, Residential Staff Performance evaluations included a feedback section in which comments from individuals were reflected.</p>
C9	Staff (Home Providers) provide opportunities to develop and/or increase personal relationships and social contacts.	<p>The agency is commended for its efforts to provide opportunities for individuals to develop and/or increase personal relationships with others. Individuals were routinely supported to maintain contact with family members and friends through visits, phone calls and other social media. Concerted efforts were made by agency staff to assist individuals to invite family and friends to dinner, parties and other events throughout the year.</p>

Residential Services- Areas Needing Improvement on Standards not met:

Indicator #	Indicator	Area Needing Improvement
C12	Individuals are supported to explore, define, and express their need for intimacy.	The agency needs to take more proactive measures to educate and support all individuals in the areas of human sexuality and intimate relationships.

Individual Home Supports Commendations on Standards Met:

Indicator #	Indicator	Commendations
C7	Individuals have opportunities to provide feedback on the performance of staff that supports them.	The agency is commended for its efforts support individuals to give feedback on the performance of the staff who support them. The agency conducted annual satisfaction surveys to get input from individuals on the supports they received. Several questions on the survey focused on how individuals felt about the staff who were working with them. Additionally, within the Meadows Homes division, Residential Staff Performance evaluations included a feedback section in which comments from individuals were reflected.
C9	Staff (Home Providers) provide opportunities to develop and/or increase personal relationships and social contacts.	The agency is commended for its efforts to provide opportunities for individuals to develop and/or increase personal relationships with others. Individuals were routinely supported to maintain contact with family members and friends through visits, phone calls and other social media. Concerted efforts were made by agency staff to assist individuals to invite family and friends to dinner, parties and other events throughout the year.

MASTER SCORE SHEET LICENSURE

Organizational: CENTER FOR HUMAN DEVELOPMENT

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
℞ L2	Abuse/neglect reporting	25/25	Met
L3	Immediate Action	15/15	Met
L4	Action taken	15/15	Met
L48	HRC	0/1	Not Met(0 %)
L65	Restraint report submit	0/3	Not Met(0 %)
L66	HRC restraint review	0/1	Not Met(0 %)
L74	Screen employees	5/5	Met
L75	Qualified staff	2/2	Met
L76	Track trainings	1/1	Met
L83	HR training	20/20	Met

Residential and Individual Home Supports:

Ind. #	Ind.	Loc. or Individ.	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	3/3	1/1				10/10	Met
L4	Action taken	L	2/2						2/2	Met
L5	Safety Plan	L	6/6	3/3	1/1				10/10	Met
R L6	Evacuation	L	6/6	3/3	1/1				10/10	Met
L7	Fire Drills	L	5/6						5/6	Met (83.33 %)
L8	Emergency Fact Sheets	I	5/6	3/3	1/1				9/10	Met (90.0 %)
L9	Safe use of equipment	L	6/6	3/3	1/1				10/10	Met
L10	Reduce risk interventions	I	2/2						2/2	Met
R L11	Required inspections	L	6/6		1/1				7/7	Met
R L12	Smoke detectors	L	5/6		1/1				6/7	Met (85.71 %)
R L13	Clean location	L	6/6		1/1				7/7	Met
L14	Site in good repair	L	6/6		1/1				7/7	Met
L15	Hot water	L	6/6		1/1				7/7	Met
L16	Accessibility	L	5/5						5/5	Met
L17	Egress at grade	L	6/6		1/1				7/7	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI- MFP Res. Sup.	ABI- MFP Place.	Total Met/Rat ed	Rating
L18	Above grade egress	L	2/2						2/2	Met
L19	Bedroo m location	L	5/5						5/5	Met
L20	Exit doors	L	6/6						6/6	Met
L21	Safe electrica l equipm ent	L	6/6		1/1				7/7	Met
L22	Clean applianc es	L	6/6		1/1				7/7	Met
L23	Egress door locks	L	5/5						5/5	Met
L24	Locked door access	L	4/4						4/4	Met
L25	Danger ous substan ces	L	3/3		1/1				4/4	Met
L26	Walkwa y safety	L	5/6		1/1				6/7	Met (85.71 %)
L27	Pools, hot tubs, etc.	L	1/1						1/1	Met
L28	Flamma bles	L	1/1		1/1				2/2	Met
L29	Rubbish /combu stibles	L	5/6		1/1				6/7	Met (85.71 %)
L30	Protecti ve railings	L	5/5						5/5	Met
L31	Commu nication method	I	6/6	3/3	1/1				10/10	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L32	Verbal & written	I	6/6	3/3	1/1				10/10	Met
L33	Physical exam	I	6/6	3/3	1/1				10/10	Met
L34	Dental exam	I	6/6	3/3	1/1				10/10	Met
L35	Preventive screenings	I	6/6	3/3	1/1				10/10	Met
L36	Recommended tests	I	6/6	3/3	1/1				10/10	Met
L37	Prompt treatment	I	6/6	3/3	1/1				10/10	Met
R L38	Physician's orders	I	4/5						4/5	Met (80.0 %)
L39	Dietary requirements	I	4/4		1/1				5/5	Met
L40	Nutritional food	L	6/6	1/1	1/1				8/8	Met
L41	Healthy diet	L	6/6	3/3	1/1				10/10	Met
L42	Physical activity	L	6/6	3/3	1/1				10/10	Met
L43	Health Care Record	I	6/6	3/3	1/1				10/10	Met
L44	MAP registration	L	6/6						6/6	Met
L45	Medication storage	L	6/6						6/6	Met
R L46	Med. Administration	I	5/6		1/1				6/7	Met (85.71 %)
L47	Self medication	I	4/4	3/3					7/7	Met

Ind. #	Ind.	Loc. or Individ.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L49	Informed of human rights	I	6/6	3/3	1/1				10/10	Met
L50	Respectful Comm.	L	6/6	3/3	1/1				10/10	Met
L51	Possessions	I	6/6	3/3	1/1				10/10	Met
L52	Phone calls	I	6/6	3/3	1/1				10/10	Met
L53	Visitation	I	6/6	3/3	1/1				10/10	Met
L54	Privacy	L	6/6	3/3	1/1				10/10	Met
L56	Restrictive practices	I	1/1						1/1	Met
L57	Written behavior plans	I	1/1						1/1	Met
L58	Behavior plan component	I	0/1						0/1	Not Met (0 %)
L59	Behavior plan review	I	0/1						0/1	Not Met (0 %)
L60	Data maintenance	I	1/1						1/1	Met
L61	Health protection in ISP	I	1/2						1/2	Not Met (50.0 %)
L62	Health protection review	I	0/2						0/2	Not Met (0 %)
L63	Med. treatment plan form	I	0/6		1/1				1/7	Not Met (14.29 %)

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L64	Med. treatment plan rev.	I	6/6		1/1				7/7	Met
L67	Money mgmt. plan	I	4/6	3/3	1/1				8/10	Met (80.0 %)
L68	Funds expenditure	I	6/6	3/3	1/1				10/10	Met
L69	Expenditure tracking	I	5/6	3/3	1/1				9/10	Met (90.0 %)
L70	Charges for care calc.	I	6/6		1/1				7/7	Met
L71	Charges for care appeal	I	6/6		1/1				7/7	Met
L77	Unique needs training	I	6/6	3/3	1/1				10/10	Met
L78	Restrictive Int. Training	L	1/1						1/1	Met
L80	Symptoms of illness	L	6/6	3/3	1/1				10/10	Met
L81	Medical emergency	L	6/6	3/3	1/1				10/10	Met
R L82	Medication admin.	L	6/6						6/6	Met
L84	Health protect. Training	I	1/2						1/2	Not Met (50.0 %)
L85	Supervision	L	6/6	3/3	1/1				10/10	Met
L86	Required assessments	I	5/5	3/3	1/1				9/9	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L87	Support strategies	I	5/5	3/3	1/1				9/9	Met
L88	Strategies implemented	I	6/6	3/3	1/1				10/10	Met
#Std. Met/# 75 Indicator									69/75	
Total Score									76/85	
									89.41%	

MASTER SCORE SHEET CERTIFICATION

Certification - Planning and Quality Management

Indicator #	Indicator	Met/Rated	Rating
C1	Provider data collection	1/1	Met
C2	Data analysis	1/1	Met
C3	Service satisfaction	1/1	Met
C4	Utilizes input from stakeholders	1/1	Met
C5	Measure progress	1/1	Met
C6	Future directions planning	1/1	Met

Individual Home Supports Reviewed By -DDS

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff performance	3/3	Met
C8	Family/guardian communication	3/3	Met
C9	Personal relationships	3/3	Met
C10	Social skill development	3/3	Met
C11	Get together w/family & friends	3/3	Met

Individual Home Supports Reviewed By -DDS

Indicator #	Indicator	Met/Rated	Rating
C12	Intimacy	2/2	Met
C13	Skills to maximize independence	3/3	Met
C14	Choices in routines & schedules	3/3	Met
C15	Personalize living space	3/3	Met
C16	Explore interests	3/3	Met
C17	Community activities	3/3	Met
C18	Purchase personal belongings	3/3	Met
C19	Knowledgeable decisions	3/3	Met
C20	Emergency back-up plans	3/3	Met
C21	Coordinate outreach	3/3	Met

Placement Services Reviewed By -DDS

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff performance	1/1	Met
C8	Family/guardian communication	1/1	Met
C9	Personal relationships	1/1	Met
C10	Social skill development	1/1	Met
C11	Get together w/family & friends	1/1	Met
C12	Intimacy	1/1	Met
C13	Skills to maximize independence	1/1	Met
C14	Choices in routines & schedules	1/1	Met
C15	Personalize living space	1/1	Met
C16	Explore interests	1/1	Met
C17	Community activities	1/1	Met
C18	Purchase personal belongings	1/1	Met
C19	Knowledgeable decisions	1/1	Met
C20	Emergency back-up plans	1/1	Met

Residential Services Reviewed By -DDS

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff performance	6/6	Met
C8	Family/guardian communication	6/6	Met
C9	Personal relationships	6/6	Met
C10	Social skill development	6/6	Met

Residential Services Reviewed By -DDS

Indicator #	Indicator	Met/Rated	Rating
C11	Get together w/family & friends	6/6	Met
C12	Intimacy	3/6	Not Met (50.0 %)
C13	Skills to maximize independence	6/6	Met
C14	Choices in routines & schedules	6/6	Met
C15	Personalize living space	6/6	Met
C16	Explore interests	6/6	Met
C17	Community activities	6/6	Met
C18	Purchase personal belongings	6/6	Met
C19	Knowledgeable decisions	6/6	Met
C20	Emergency back-up plans	6/6	Met