



**PROVIDER REPORT
FOR**

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

November 13, 2023

Version

Public Provider Report

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

SUMMARY OF OVERALL FINDINGS

Provider	CENTER FOR HUMAN DEVELOPMENT
Review Dates	10/11/2023 - 10/17/2023
Service Enhancement Meeting Date	10/30/2023
Survey Team	Elsa Adorno Carole Black Andrea Comeau (TL) Eric Lunden
Citizen Volunteers	

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	11 location(s) 11 audit (s)	Full Review	81/87 2 Year License 10/30/2023 - 10/30/2025		Certified 10/30/2023 - 10/30/2025
Residential Services	5 location(s) 5 audit (s)			Deemed	
Placement Services	3 location(s) 3 audit (s)			Deemed	
Individual Home Supports	3 location(s) 3 audit (s)			Deemed	
Planning and Quality Management (For all service groupings)				Deemed	

Survey scope and findings for Employment and Day Supports

Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Employment and Day Supports	2 location(s) 7 audit (s)	Full Review	68/69 2 Year License 10/30/2023 - 10/30/2025		Certified 10/30/2023 - 10/30/2025
Community Based Day Services	1 location(s) 6 audit (s)			Deemed	

Employment Support Services	1 location(s) 1 audit (s)			Deemed	
Planning and Quality Management (For all service groupings)				Deemed	

EXECUTIVE SUMMARY :

The Center for Human Development (CHD), a nonprofit organization headquartered in Springfield, MA, provides a wide range of services throughout Western Massachusetts and Connecticut. The agency serves children, adolescents, adults, and families through a variety of residential services, day services, behavioral health programs, and other social services. Services subject to DDS licensure include twenty-four-hour residential supports, placement services, individual home supports, employment supports, and community-based day services for adults with intellectual disabilities. CHD is currently accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF) and is deemed for CARF accreditation in lieu of DDS Certification for all service types. The scope of this survey was a full licensure review.

Positive findings of the licensing review showed that CHD had developed effective oversight systems which were being implemented to ensure basic health and safety across all service types. A review of environmental requirements showed that all locations were clean and well maintained and safety features such as smoke/carbon monoxide detectors were operational. Survey findings for individuals who received residential services revealed that general health care needs were being addressed and medication administration oversight was effective.

Review of agency systems for maintaining workforce competency found that the agency's tracking system was effective in ensuring that all training requirements were completed. The system tracked all staff training, including new mandated training in procedures for preventing virus transmission. Additionally, survey findings demonstrated that staff in both residential and day services were knowledgeable and well-trained. In addition to all DDS required trainings, staff were current in location and individual specific training as well, which occurred at all sites. This was accomplished through a training binder, which included individual profiles and healthcare summaries that highlighted his/her unique needs, preferences and health-related diagnoses and care supports required. As evidenced during the review, staff could articulate individual needs and preferences, which promoted consistency in supports provided.

Another highlighted strength for the agency was the system in place for promoting and protecting the rights of individuals. Training in human rights and DPPC occurred annually across all service types, for individuals, and guardians received relevant information on individuals' human rights. The human rights committee met regularly and maintained consistent attendance of members with required expertise.

In addition to the positive findings outlined above, there were a few licensing indicators identified as areas needing improvement. For residential services, the agency needs to ensure that water temperatures test between 110 and 120 degrees Fahrenheit and for locations with pools, staff/homecare providers must be trained in basic water safety. Additionally, money management plans need to outline the roles and responsibilities of the agency in supporting individuals to manage and spend their personal funds, and where restrictive practices are in place, there must be a written plan with agreement from those impacted by the restriction. Lastly, the agency needs to ensure restraint reports and incidents reports are submitted to DDS within required timelines, across all service types.

As a result of the current review, the Residential and Individual Home Supports service group, operated by Center for Human Development, will receive a Two-Year License, with a service group score of 93% of licensure indicators met. Additionally, the agency's Employment and Day Supports will receive a Two-Year License, with a service group score of 99% of licensure indicators met. Both service groups have been Certified as a result of the agency's current CARF accreditation.

Follow-up will be conducted by The Center for Human Development on all licensing standards that received a rating of Not Met during the course of the review, with the results reported within sixty days to the Office of Quality Enhancement.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	9/10	1/10	
Residential and Individual Home Supports	72/77	5/77	
Residential Services Placement Services Individual Home Supports			
Critical Indicators	8/8	0/8	
Total	81/87	6/87	93%
2 Year License			
# indicators for 60 Day Follow-up		6	

	Met / Rated	Not Met / Rated	% Met
Organizational	9/10	1/10	
Employment and Day Supports	59/59	0/59	
Community Based Day Services Employment Support Services			
Critical Indicators	8/8	0/8	
Total	68/69	1/69	99%
2 Year License			
# indicators for 60 Day Follow-up		1	

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

Indicator #	Indicator	Area Needing Improvement
L65	Restraint reports are submitted within required timelines.	Of thirty-four restraint reports reviewed, twelve were not submitted within the required timelines. The agency needs to ensure restraint reports are written and submitted to DDS within the required timelines.

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

Indicator #	Indicator	Area Needing Improvement
L15	Hot water temperature tests between 110 and 120 degrees (as of 1/2014).	In one residential service location and one placement location, the bathroom water temperature when tested exceeded 120 degrees. The agency needs to ensure water temperatures test between 110 and 120 degrees Fahrenheit.
L27	If applicable, swimming pools and other bodies of water are safe and secure according to policy.	In one placement services location with a built-in pool onsite, the provider had not completed the required water safety training. The agency needs to ensure staff/homecare providers supervising individuals, are trained in water safety and CPR. Additionally, policies and procedures outlining supervision and use of the pool need to be in place and the homecare provider knowledgeable in these.
L56	Restrictive practices intended for one individual that affect all individuals served at a location need to have a written rationale that is reviewed as required and have provisions so as not to unduly restrict the rights of others.	For one individual in residential services, environmental restrictions had been imposed to protect the health and safety of another individual in the home. There was no signed acknowledgement or plan to mitigate the impact of these restrictions on other individuals. Additionally, in a second residential service location, an environmental restriction was in place for all individuals in the home. This environmental restriction did not have a written plan in place, and the practice had not been reviewed by the agency's human rights committee. The agency needs to ensure environmental restrictive practices intended for one individual that affect all individuals serviced at a location, have a written rationale that is reviewed as required and have provisions so as not to unduly restrict the rights of others.
L67	There is a written plan in place accompanied by a training plan when the agency has shared or delegated money management responsibility.	For two individuals in placement services locations, funds management plans did not address all required elements. When the agency assumes shared or delegated responsibility for managing an individual's funds, the agency needs to develop funds management plans that outline the roles and responsibilities of the agency in supporting individuals to manage and spend their personal funds to include how money is safeguarded within the home. These plans must be individualized and are subject

		to annual written agreement from the individual or his/her guardian.
L91	Incidents are reported and reviewed as mandated by regulation.	In one residential service location, one placement service location and one individual home supports location, incidents were not submitted or reviewed within required timelines. The agency needs to ensure that incident reports are submitted and reviewed within required timelines.

MASTER SCORE SHEET LICENSURE

Organizational: CENTER FOR HUMAN DEVELOPMENT

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
Ⓟ L2	Abuse/neglect reporting	12/12	Met
L3	Immediate Action	14/14	Met
L4	Action taken	11/11	Met
L48	HRC	1/1	Met
L65	Restraint report submit	22/34	Not Met(64.71 %)
L66	HRC restraint review	30/31	Met(96.77 %)
L74	Screen employees	4/4	Met
L75	Qualified staff	3/3	Met
L76	Track trainings	20/20	Met
L83	HR training	18/18	Met

Residential and Individual Home Supports:

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L1	Abuse/neglect training	I	5/5	3/3	3/3				11/11	Met
L5	Safety Plan	L	5/5	3/3	3/3				11/11	Met
Ⓟ L6	Evacuation	L	5/5	3/3	3/3				11/11	Met
L7	Fire Drills	L	5/5						5/5	Met

L8	Emergency Fact Sheets	I	4/5	3/3	3/3				10/11	Met (90.91 %)
L9 (07/21)	Safe use of equipment	I	5/5	3/3					8/8	Met
L10	Reduce risk interventions	I	2/2						2/2	Met
Ⓜ L11	Required inspections	L	5/5		2/3				7/8	Met (87.50 %)
Ⓜ L12	Smoke detectors	L	5/5		3/3				8/8	Met
Ⓜ L13	Clean location	L	5/5		3/3				8/8	Met
L14	Site in good repair	L	5/5		3/3				8/8	Met
L15	Hot water	L	4/5		2/3				6/8	Not Met (75.00 %)
L16	Accessibility	L	5/5		3/3				8/8	Met
L17	Egress at grade	L	5/5		3/3				8/8	Met
L18	Above grade egress	L	3/3		2/2				5/5	Met
L19	Bedroom location	L	4/4		1/1				5/5	Met
L20	Exit doors	L	5/5						5/5	Met
L21	Safe electrical equipment	L	5/5		3/3				8/8	Met
L22	Well-maintained appliances	L	4/5		3/3				7/8	Met (87.50 %)
L23	Egress door locks	L	4/4						4/4	Met
L24	Locked door access	L	5/5		3/3				8/8	Met
L25	Dangerous substances	L	5/5						5/5	Met
L26	Walkway safety	L	5/5		3/3				8/8	Met
L27	Pools, hot tubs, etc.	L			0/1				0/1	Not Met (0 %)
L28	Flammables	L	5/5						5/5	Met
L29	Rubbish/combustibles	L	5/5		3/3				8/8	Met
L30	Protective railings	L	5/5		3/3				8/8	Met
L31	Communication method	I	5/5	3/3	3/3				11/11	Met
L32	Verbal & written	I	5/5	3/3	3/3				11/11	Met

L33	Physical exam	I	4/4	3/3	3/3				10/10	Met
L34	Dental exam	I	5/5	2/2	3/3				10/10	Met
L35	Preventive screenings	I	5/5	3/3	3/3				11/11	Met
L36	Recommended tests	I	5/5	3/3	1/3				9/11	Met (81.82 %)
L37	Prompt treatment	I	5/5	3/3	3/3				11/11	Met
Ⓟ L38	Physician's orders	I	2/2		1/2				3/4	Met
L39	Dietary requirements	I	1/1						1/1	Met
L40	Nutritional food	L	5/5						5/5	Met
L41	Healthy diet	L	5/5	3/3	3/3				11/11	Met
L42	Physical activity	L	5/5	3/3	3/3				11/11	Met
L43	Health Care Record	I	5/5	3/3	1/3				9/11	Met (81.82 %)
L44	MAP registration	L	5/5						5/5	Met
L45	Medication storage	L	5/5						5/5	Met
Ⓟ L46	Med. Administration	I	5/5		1/1				6/6	Met
L47	Self medication	I		2/2	2/2				4/4	Met
L49	Informed of human rights	I	5/5	3/3	3/3				11/11	Met
L50 (07/21)	Respectful Comm.	I	5/5	3/3	3/3				11/11	Met
L51	Possessions	I	5/5	3/3	3/3				11/11	Met
L52	Phone calls	I	5/5	3/3	3/3				11/11	Met
L53	Visitation	I	5/5	3/3	3/3				11/11	Met
L54 (07/21)	Privacy	I	5/5	3/3	3/3				11/11	Met
L55	Informed consent	I		1/1					1/1	Met
L56	Restrictive practices	I	1/3						1/3	Not Met (33.33 %)
L61	Health protection in ISP	I	3/3						3/3	Met
L63	Med. treatment plan form	I	5/5		3/3				8/8	Met
L64	Med. treatment plan rev.	I	5/5		3/3				8/8	Met

L67	Money mgmt. plan	I	4/4	1/1	1/3				6/8	Not Met (75.00%)
L68	Funds expenditure	I	4/4	1/1	2/3				7/8	Met (87.50%)
L69	Expenditure tracking	I	4/4	1/1	3/3				8/8	Met
L70	Charges for care calc.	I	5/5		3/3				8/8	Met
L71	Charges for care appeal	I	5/5		3/3				8/8	Met
L77	Unique needs training	I	5/5	3/3	3/3				11/11	Met
L78	Restrictive Int. Training	L	1/1						1/1	Met
L79	Restraint training	L	2/2	1/1					3/3	Met
L80	Symptoms of illness	L	5/5	3/3	3/3				11/11	Met
L81	Medical emergency	L	5/5	3/3	3/3				11/11	Met
Ⓜ L82	Medication admin.	L	5/5						5/5	Met
L84	Health protect. Training	I	3/3						3/3	Met
L85	Supervision	L	5/5	3/3	3/3				11/11	Met
L86	Required assessments	I	5/5	3/3	1/3				9/11	Met (81.82%)
L87	Support strategies	I	5/5	3/3	3/3				11/11	Met
L88	Strategies implemented	I	5/5	3/3	3/3				11/11	Met
L90	Personal space/ bedroom privacy	I	5/5	3/3	2/3				10/11	Met (90.91%)
L91	Incident management	L	4/5	2/3	2/3				8/11	Not Met (72.73%)
L93 (05/22)	Emergency back-up plans	I	5/5	3/3	3/3				11/11	Met
L94 (05/22)	Assistive technology	I	5/5	3/3	3/3				11/11	Met
L96 (05/22)	Staff training in devices and applications	I	5/5	2/2	3/3				10/10	Met
L99 (05/22)	Medical monitoring devices	I	2/2		1/1				3/3	Met

#Std. Met/# 77 Indicator									72/77	
Total Score									81/87	
									93.10%	

Employment and Day Supports:

Ind. #	Ind.	Loc. or Indiv.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L1	Abuse/neglect training	I	1/1		6/6	7/7	Met
L5	Safety Plan	L			1/1	1/1	Met
Ⓟ L6	Evacuation	L			1/1	1/1	Met
L7	Fire Drills	L			1/1	1/1	Met
L8	Emergency Fact Sheets	I	1/1		6/6	7/7	Met
L9 (07/21)	Safe use of equipment	I	1/1		6/6	7/7	Met
L10	Reduce risk interventions	I			1/1	1/1	Met
Ⓟ L11	Required inspections	L			1/1	1/1	Met
Ⓟ L12	Smoke detectors	L			1/1	1/1	Met
Ⓟ L13	Clean location	L			1/1	1/1	Met
L14	Site in good repair	L			1/1	1/1	Met
L15	Hot water	L			1/1	1/1	Met
L16	Accessibility	L			1/1	1/1	Met
L17	Egress at grade	L			1/1	1/1	Met
L18	Above grade egress	L			1/1	1/1	Met
L20	Exit doors	L			1/1	1/1	Met
L21	Safe electrical equipment	L			1/1	1/1	Met
L22	Well-maintained appliances	L			1/1	1/1	Met
L25	Dangerous substances	L			1/1	1/1	Met

L26	Walkway safety	L			1/1	1/1	Met
L28	Flammables	L			1/1	1/1	Met
L29	Rubbish/combustibles	L			1/1	1/1	Met
L30	Protective railings	L			1/1	1/1	Met
L31	Communication method	I	1/1		6/6	7/7	Met
L32	Verbal & written	I	1/1		6/6	7/7	Met
L37	Prompt treatment	I	1/1		6/6	7/7	Met
Ⓜ L38	Physician's orders	I			2/2	2/2	Met
L44	MAP registration	L			1/1	1/1	Met
L45	Medication storage	L			1/1	1/1	Met
Ⓜ L46	Med. Administration	I			3/3	3/3	Met
L49	Informed of human rights	I	1/1		6/6	7/7	Met
L50 (07/21)	Respectful Comm.	I	1/1		6/6	7/7	Met
L51	Possessions	I	1/1		6/6	7/7	Met
L52	Phone calls	I	1/1		6/6	7/7	Met
L54 (07/21)	Privacy	I	1/1		6/6	7/7	Met
L56	Restrictive practices	I			4/4	4/4	Met
L61	Health protection in ISP	I			4/4	4/4	Met
L62	Health protection review	I			2/2	2/2	Met
L63	Med. treatment plan form	I			3/3	3/3	Met
L64	Med. treatment plan rev.	I			3/3	3/3	Met
L67	Money mgmt. plan	I			1/1	1/1	Met
L68	Funds expenditure	I			1/1	1/1	Met
L69	Expenditure tracking	I			1/1	1/1	Met
L72	DOL requirements	I			2/2	2/2	Met
L77	Unique needs training	I	1/1		6/6	7/7	Met
L78	Restrictive Int. Training	L			1/1	1/1	Met
L79	Restraint training	L	1/1		1/1	2/2	Met
L80	Symptoms of illness	L	1/1		1/1	2/2	Met

L81	Medical emergency	L	1/1		1/1	2/2	Met
Pa L82	Medication admin.	L			1/1	1/1	Met
L84	Health protect. Training	I			4/4	4/4	Met
L85	Supervision	L	1/1		1/1	2/2	Met
L86	Required assessments	I	1/1		4/4	5/5	Met
L87	Support strategies	I	1/1		4/4	5/5	Met
L88	Strategies implemented	I	1/1		6/6	7/7	Met
L91	Incident management	L	1/1		1/1	2/2	Met
L93 (05/22)	Emergency back-up plans	I	1/1		6/6	7/7	Met
L94 (05/22)	Assistive technology	I	1/1		6/6	7/7	Met
L96 (05/22)	Staff training in devices and applications	I			2/2	2/2	Met
#Std. Met/# 59 Indicator						59/59	
Total Score						68/69	
						98.55%	