

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

**Provider:** CENTER OF HOPE  
FOUNDATION. \_\_\_\_\_

**Provider Address:** POB 66 , Southbridge  
\_\_\_\_\_

**Name of Person** Bethany Stevens  
**Completing Form:** \_\_\_\_\_

**Date(s) of Review:** 07-SEP-22 to 08-SEP-22  
\_\_\_\_\_

Follow-up Scope and results :		
Service Grouping	Licensure level and duration	# Indicators std. met/ std. rated
Employment and Day Supports	2 Year License	3/4

**Summary of Ratings**

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

Indicator #	L8
Indicator	Emergency Fact Sheets

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<b>Area Need Improvement</b>	Emergency fact sheets for four of ten individuals did not contain relevant information that would assist in searching for an individual if they were missing. This included information relevant to the person's ability to protect him/herself without assistance, significant behavioral characteristics, likely response to search efforts, places frequented, and relevant capabilities, limitations, and preferences. The agency needs to ensure that all required information is addressed on individuals' emergency fact sheets.
<b>Process Utilized to correct and review indicator</b>	The agency will ensure that all relevant information that would assist in searching for an individual if they were missing be updated on the Emergency Fact Sheets. A system will be put in place by the QA Department to ensure that ISPs are not signed off on until information on the Emergency Fact Sheets are updated.
<b>Status at follow-up</b>	Emergency fact sheets continue to be updated for everyone in the Employment Services Department. QA and Employment Service Department (either Management or Case Managers) have updated individuals who have had ISPs from July 2022 through September 2022. At each ISP, Emergency Fact Sheets are updated with changes by input from the ISP Team.
<b>Rating</b>	Met

<b>Indicator #</b>	L93 (05/22)
<b>Indicator</b>	Emergency back-up plans
<b>Area Need Improvement</b>	For nine individuals, emergency back-up plans had not been developed. The agency needs to ensure that there is an individually focused emergency back-up plan developed for each person. Staff and individuals must be supported to be knowledgeable of the plans.

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<b>Process Utilized to correct and review indicator</b>	For nine individuals, emergency back-up plans had not been developed. The agency needs to ensure that there is an individually focused emergency back-up plan developed for each person. Staff and individuals must be supported to be knowledgeable of the plans.
<b>Status at follow-up</b>	If an individual can use a cell phone, it has been updated on the Emergency Fact Sheet. The system that is being put in place is the information for Emergency Back-Up Plans will be added to everyone bios for staff to review.
<b>Rating</b>	Not Met

<b>Indicator #</b>	L94 (05/22)
<b>Indicator</b>	Assistive technology
<b>Area Need Improvement</b>	The benefit of assistive technology was not assessed for five individuals. The agency needs to ensure individuals have been assessed to identify assistive technology of potential benefit in fostering maximum independence in work routines and activities, and assistive technology and modifications are provided when needed.
<b>Process Utilized to correct and review indicator</b>	The agency will work on developing an assistive technology assessment for everyone.
<b>Status at follow-up</b>	Currently, we have developed and implemented an assistive technology assessment. Individuals who have had an ISP from July through September have had an assistive technology assessment completed. Information regarding if an individual uses assistive technology has also been added to the bios for staff to review.
<b>Rating</b>	Met

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

<b>Indicator #</b>	L48
<b>Indicator</b>	HRC
<b>Area Need Improvement</b>	The agency's human rights committee did not include a legal or clinical representative. Additionally, minutes of committee meetings did not routinely address status of DPPC complaints and investigations. It was also noted that minutes of HRC meetings were not routinely shared with DDS Area Directors and Regional Human Rights Specialist. The agency needs to ensure that the human rights committee includes members who possess the required expertise i.e., legal and clinical representatives. The HCR also needs review the status of DDS complaints and investigations filed on behalf of individuals who receive services. Copies of HRC minutes must be shared with DDS Area Directors and Human Rights Specialist.
<b>Process Utilized to correct and review indicator</b>	The agency will ensure that a legal and clinical representative is included as a member of the human rights committee. DPPC complaints and investigations will also be reviewed during the meeting and the minutes will be shared with DDS Area Directors and Regional Human Rights Specialist.
<b>Status at follow-up</b>	A legal and clinical representative has been added as a member of the human rights committee. DPPC complaints and investigations have been added to every meeting. Two years' worth of the human rights meeting minutes have been sent to the DDS Regional Human Rights Specialist and Area Directors.
<b>Rating</b>	Met