



**PROVIDER REPORT
FOR**

**Choice Community Supports
Inc
409 Pond St, Unit 12
Braintree, MA 02184**

September 17, 2025

Version

Public Provider Report

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

SUMMARY OF OVERALL FINDINGS

Provider Choice Community Supports Inc

Review Dates 8/25/2025 - 8/27/2025

Service Enhancement Meeting Date 9/5/2025

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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	3 location(s) 3 audit (s)	Targeted Review	DDS 6/9 Provider 53 / 53 59 / 62 Defer Licensure		DDS 0 / 0 Provider 26 / 26 26 / 26 Certified
Placement Services	3 location(s) 3 audit (s)			DDS Targeted Review	20 / 20
Planning and Quality Management				DDS Targeted Review	6 / 6

EXECUTIVE SUMMARY :

Choice Community Supports Incorporated (Choice Community Supports) is a non-profit organization founded in 2000 that provides services to people with Intellectual Disabilities through residential supports including DDS funded Placement Services (also known as Shared Living) and Agency with Choice (AWC). The agency serves individuals in the Metro-Boston, Southeast and Northeast regions of Massachusetts.

The agency was eligible for and received approval from the DDS Regional Office to conduct a self-assessment of its quality management processes for the current Licensing and Certification review of its Shared Living Services. This occurred in conjunction with a targeted Licensing review completed by the DDS Office of Quality Enhancement (OQE). The final survey results reflect a combination of ratings from the self-assessment process conducted by Choice Community Supports and the targeted review conducted by DDS, with ratings from DDS prevailing where indicators were rated by both entities.

Organizationally, the agency had a system in place for the reporting of incidents, including in the event that incident reports rose to the level of being reportable to the Disabled Persons Protection Commission (DPPC). The agency's organizational system outlined each party's role as mandated reporters and specified those conditions and situations requiring the filing of a complaint. Embedded in the agency Shared Living Provider Contracts was clear language regarding the Shared Living Provider role and responsibility in reporting incidents. Providers interviewed were knowledgeable regarding what constitutes a reportable condition, their role as mandated reporter, and practices for filing with the DPPC, and reporting to agency supervisory personnel.

Furthermore, survey findings yielded additional positive outcomes. Environmentally, all locations had current required inspections. Safety plans were consistent with people's evacuation support needs and Shared Living Providers and individuals were aware of what to do in the event of evacuation. For those subject to physician ordered medical protocols; providers were knowledgeable and well versed in what to do, necessary steps to take and documentation responsibilities. The Charges for Care letters incorporated language regarding the Right to Appeal if there was disagreement with the determined fee.

In addition to the positive findings within residential services, there are licensure areas that would benefit from further attention from the agency. The agency should strengthen its system of environmental safety oversight to provide additional attention to ensuring the presence of operational fire safety systems and their proper location in all homes. Individuals' Emergency Fact Sheets need to be inclusive of all required components, including medical diagnoses, and where individuals use health related supportive devices, documentation in the use of each should contain all required components, inclusive of the responsibilities and documentation relative to implementation of care, safety and maintenance for each device.

In summary, Choice Community Supports Inc. achieved a Licensing score of 95% and received a Not Met rating in one critical indicators L12; therefore, the agency's license will be deferred. The DDS Office of Quality Enhancement (OQE) will conduct a follow-up review within 60 days of the Service Enhancement Meeting (SEM) on all licensing indicators rated as Not Met, including the one critical indicator. To be issued a Two-Year License with a mid-cycle review, the agency must demonstrate at least 80% compliance within the critical indicators during the follow-up review. The agency is Certified with 100% of the certification indicators having received an overall rating of Met.

The following is a description of the agency's self-assessment process:

Description of Self Assessment Process:

Choice Community Supports, Inc. (here as "Choice") is currently serving thirty-four (34) individuals in self-directing program- Agency With Choice (AWC) and four (4) individuals in 24-hours residential program- Placement Services (Shared Living). In Shared Living, two of the individuals moved into the caregivers' homes, and two individuals had caregivers moved into their homes. After our last 2023 Licensing and Certification Review, Choice has been certified with Residential and Individual Home Supports Two Year License. We scored 95% on license level (57/60 standards met) and 100% on certification level (26/26 standards met), making it our best review so far!

This year, because of the previous review scoring, DDS will rate nine (9) Residential and Individual Home Supports licensure indicators and one (1) Organizational indicator in the targeted review. DDS will not rate any certification indicators in Planning and Quality Management or in Placement Services, as all indicators were Met at previous cycle. We are very proud of the scoring received two years ago, and we would like to outline some of the work we have continued to put in the last two years. Here is a summary of the most significant licensing indicators:

Personal Safety- Choice provides annual training in recognizing and reporting abuse and neglect to all individuals, caregivers, guardians and staff. There are also informational DPPC flyers at each site (in individuals' binders). All Safety and Evacuation Plans (with emergency back-up plans) are current (one was signed in November 2024 for a new site and three were renewed in January 2025). It is confirmed that all individuals continue to be able to evacuate within 2.5 minutes. All Emergency Fact Sheets are updated with current photographs and information, including allergies, diagnosis and medications, and are available on each site and in the office.

Environmental Safety- 3 out of 4 sites presented a current furnace inspection (12/2024, 5/2025 and 7/2025), one site is all electricity-powered household. None of the sites has a fireplace/ wood burning stove. Locations are rodent-free, with working smoke detectors in all individuals' bedrooms, and carbon monoxide detectors on each floor occupied and/or utilized by SL individuals. There are no visible hazards. Water temperature has been recently adjusted by a few degrees in all 4 sites and measures between 100-120 degrees, with a goal to be at 110-115 degrees at all 4 sites.

Health- Choice is very pleased with our SLCs who continue to provide amazing support and supervision around health management. Individuals independently and successfully manage their medications as health providers for all individuals have verified and signed Self-Administration of Medication certificates again this year. All Health Care Records, physical and dental exams are up-to-date, and SLCs continue to advocate for all preventive and age- recommended tests.

Human Rights- Choice continues to be members of the Walnut Street Center's Human Rights Committee. We take an active part in their quarterly meetings and submit all reviewable events. The program coordinator/ director is Choice's Human Rights Officer. Her name, picture and contact information can be found in individuals' binders. She provides annual human rights presentations to all individuals to make sure they are aware of their rights and know who to reach out to with questions and grievances. She trains the individuals in recognizing and reporting abuse and neglect and sends their guardians training materials on recognizing and reporting abuse and neglect.

Two of the individuals use Supportive & Protective equipment, as documented in their ISP and signed off by health providers. Although 2 of the individuals have rep-payees to help manage their social security benefits, all four present skills to independently handle money in their possession, and SLCs do not receive or hold individuals' funds at any point. Choice has updated their Charges for Care (CFC) appeal section to include the name and number of the contact person. CFC are calculated at the beginning of each calendar year (or when there's a significant change in income) and copies are provided to individuals, their rep-payees and/or guardians during monthly visit and/or by email, along with the information on the appeal process Choice's SLCs safeguard individuals' privacy by ensuring all individuals have private bedrooms where they can lock their door.

Competent Workforce- Choice has been successful in recruiting valuable and helpful support workers and caregivers. In every recruitment process we involve individuals and their family members (if they wish to) and listen to their feedback. Choice follows state and federal policies and screens the potential employees/caregivers against CORI, National Background Unit fingerprints and DPPC Abuser Registry. Our New SL Caregiver Orientation includes CPR, First Aid (including Universal Precautions), Fire Safety, Human Rights, Signs and Symptoms of Illness, PBS Universal Supports, Incident Reporting, DPPC Mandated Reporting, Transmission Prevention for Specific Diseases, Safety and Evacuation Plans, Handling Medical Emergencies, Healthy Diets and other, individual specific training. Choice uses Providers' Council's e-Academy portal to access most of the online courses. This platform allows for quick and easy remote access. Choice chooses American Heart Association/ ACLS Academy and American Red Cross blended courses for all CPR/ AED/ First Aid training needs. All SLCs completed Formal Fire Safety training. Choice tracks training in the e-Academy portal along with an internal spreadsheet to predict upcoming renewals.

As mentioned, Choice will not be rated in the targeted review for any certification indicators. Below, we have assessed the most noteworthy certification indicators:

Planning & Quality Improvement and Communication- Choice focuses on maintaining constant communication with individuals, direct care workers/caregivers, families, healthcare providers and DDS service coordinators to stay on top of their goals, needs and accomplishments. Our CEO is very involved in day-to-day operations, is always available to take calls and stays on top of all matters. Choice's Program Director and AWC Navigator keep the communication going, inquire and receive feedback, and are the liaison between all branches of service. Choice provides on-going oversight for all placement services. Shared Living Coordinator/Director performs site visits typically once a month and stays in touch via calls, texts, and emails on needs-base. There is a list of items that the coordinator checks and discusses during each site visit to ensure health and safety of all served individuals.

The list includes verifying medications, measuring water temperature, discussing ISP goal progress, documenting all health appointments/ tests, collecting health appointments summaries, getting feedback from both- caregiver and the individual, and more. This method allows Choice to collect all kinds of essential information, make immediate corrections, if needed and have a good understanding and overview of households' performance. This also gives us opportunity to verify if individuals have any unmet needs and plan how to meet them. As of this spring, SL coordinator organizes/ hosts a get-together for all SLCs to provide an opportunity to share ideas, resources for community activities, volunteering opportunities, ask questions and brainstorm on common matters.

In addition to monthly visits, Choice collects data annually: getting feedback from individuals (SL Evaluation Form), performing Home Safety Checklist (including verifying that fire extinguishers and smoke and carbon monoxide detectors are operational), reviewing expectations, policies and procedures (SL Agreement) or collecting Gas Furnace Inspections performed by licensed technicians. SL coordinator reports findings directly to the CEO on weekly basis and keeps DDS service coordinators informed of any significant updates or changes in service or lives of the individuals. SL coordinator documents site visits, assessments and feedback on Monthly Visit form, stored in agency's electronic internal file system. Copies of individuals' appointment summaries, discharge paperwork, treatment plans, ISP meeting, Emergency Fact Sheet, Health Record Form and other important documentation is kept in individuals' binders at the agency's office and in the individuals' homes.

Choice is in touch with individuals' family members and guardians, when needed and provides information on abuse/neglect recognizing and reporting, changes in CFC, changes in service or looking for feedback. During the month of February 2023, Choice delivered a Quality Assurance Survey to individuals served (33), family members (14) and support partners (4). Through the survey, Choice solicited feedback from survey participants in three key areas: satisfaction with the Support Workers who have been hired or with whom Choice has contracted on their behalf, their own life and living conditions, and services they received from Choice. Overall, based on the results of the Survey, survey participants were very satisfied with the Support Workers hired/contracted by Choice, satisfied that the quality of life of individuals served was favorable, and happy with Choice as a provider. The leadership at Choice uses the result of this survey to continue to expand on the favorable feedback provided and

seek out opportunities to address areas for improvement. Next Quality Assurance Survey is planned for Spring of 2026.

Supporting and Enhancing Relationships- All individuals are encouraged and assisted to stay in touch with their families and friends. SLCs often facilitate get-togethers at home or in the community, coordinate or provide transportation or remind individuals to send holiday/ birthday cards, etc.

Choice, Control and Growth- Having choices and control over own decisions are key aspects for the individuals we serve. It allows them to grow and maintain their independence and happiness. They decorate their bedrooms, buy their clothing, but also take an active part in hiring their own caregivers/staff. They choose which activities they will attend and who they will invite to their birthday party. And although it's not always the healthiest choice, they do pick foods they want to eat or the meals they want to cook.

Access and Integration- We constantly challenge our SLCs and push them to use numerous resources to be able to offer fun, individual-approved recreational activities where the individuals have more opportunities to find new peers and develop new personal relationships. Currently, our individuals are members of WinnArc, Special Olympics, Revere League for Special Needs, Spaulding Rehabilitation (adaptive sports section), churches, libraries and local food pantries, as volunteers. As an agency, we try to organize group activities to celebrate major holidays (for example 4th of July cookout, Thanksgiving Luncheon) and offer a chance to enhance those connections.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	5/5	0/5	
Residential and Individual Home Supports	54/57	3/57	
Placement Services			
Critical Indicators	5/6	1/6	
Total	59/62	3/62	95%
Defer Licensure			
# indicators for 60 Day Follow-up		3	

**Residential Areas Needing Improvement on Standards not met/Follow-up to occur:
From DDS review:**

Indicator #	Indicator	Area Needing Improvement
L8	Emergency fact sheets are current and accurate and available on site.	Two of three individuals' Emergency Fact Sheets were missing required information, including some medical diagnoses. The agency needs to ensure that all Emergency Fact Sheets contain all required information.
^P L12	Smoke detectors and carbon monoxide detectors, and other essential elements of the fire alarm system required for evacuation are located where required and are operational.	At one of three locations, the home did not have a carbon monoxide detector outside of the individual's bedroom, within ten feet. The agency needs to ensure that all essential elements of fire alarm systems are operational and located where required, inclusive of carbon monoxide alarms outside of each separate sleeping area within ten feet of the bedrooms.
L61	Supports and health related protections are included in ISP assessments and the continued need is outlined.	For one individual who utilized several health-related supports, the associated documentation did not include all required components. The agency needs to ensure that all required information is included in information relating to medical health related supports, inclusive of defining instructions and responsibility for care, cleaning and maintenance, and defining the frequency of safety checks.

CERTIFICATION FINDINGS

	Reviewed By	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	DDS 0/0 Provider 6/6	6/6	0/6	
Residential and Individual Home Supports	DDS 0/0 Provider 20/20	20/20	0/20	
Placement Services	DDS 0/0 Provider 20/20	20/20	0/20	
Total		26/26	0/26	100%
Certified				

MASTER SCORE SHEET LICENSURE

Organizational: Choice Community Supports Inc

Indicator #	Indicator	Reviewed by	Met/Rated	Rating(Met,Not Met,NotRated)
Ⓡ L2	Abuse/neglect reporting	DDS	3/3	Met
L48	HRC	Provider	-	Met
L74	Screen employees	Provider	-	Met
L76	Track trainings	Provider	-	Met
L83	HR training	Provider	-	Met

Residential and Individual Home Supports:

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L1	Abuse/neglect training	I	Provider			-				-	Met
L5	Safety Plan	L	Provider			-				-	Met
Ⓡ L6	Evacuation	L	DDS			3/3				3/3	Met
L8	Emergency Fact Sheets	I	DDS			1/3				1/3	Not Met (33.33%)
Ⓡ L11	Required inspections	L	DDS			2/2				2/2	Met
Ⓡ L12	Smoke detectors	L	DDS			2/3				2/3	Not Met (66.67%)
Ⓡ L13	Clean location	L	DDS			3/3				3/3	Met
L14	Site in good repair	L	Provider			-				-	Met
L15	Hot water	L	Provider			-				-	Met
L16	Accessibility	L	Provider			-				-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L17	Egress at grade	L	Provider			-				-	Met
L18	Above grade egress	L	Provider			-				-	Met
L19	Bedroom location	L	Provider			-				-	Met
L21	Safe electrical equipment	L	Provider			-				-	Met
L22	Well-maintained appliances	L	Provider			-				-	Met
L24	Locked door access	L	Provider			-				-	Met
L26	Walkway safety	L	Provider			-				-	Met
L27	Pools, hot tubs, etc.	L	Provider			-				-	Met
L29	Rubbish/combustibles	L	Provider			-				-	Met
L30	Protective railings	L	Provider			-				-	Met
L31	Communication method	I	Provider			-				-	Met
L32	Verbal & written	I	Provider			-				-	Met
L33	Physical exam	I	Provider			-				-	Met
L34	Dental exam	I	Provider			-				-	Met
L35	Preventive screenings	I	Provider			-				-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L36	Recommended tests	I	Provider			-				-	Met
L37	Prompt treatment	I	Provider			-				-	Met
L38	Physician's orders	I	DDS			2/2				2/2	Met
L39	Dietary requirements	I	Provider			-				-	Met
L41	Healthy diet	L	Provider			-				-	Met
L42	Physical activity	L	Provider			-				-	Met
L43	Health Care Record	I	Provider			-				-	Met
L47	Self medication	I	Provider			-				-	Met
L49	Informed of human rights	I	Provider			-				-	Met
L50 (07/21)	Respectful Comm.	I	Provider			-				-	Met
L51	Possessions	I	Provider			-				-	Met
L52	Phone calls	I	Provider			-				-	Met
L53	Visitation	I	Provider			-				-	Met
L54 (07/21)	Privacy	I	Provider			-				-	Met
L55	Informed consent	I	Provider			-				-	Met
L61	Health protection in ISP	I	DDS			0/1				0/1	Not Met (0 %)

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L62	Health protection review	I	Provider			-				-	Met
L70	Charges for care calc.	I	Provider			-				-	Met
L71	Charges for care appeal	I	DDS			3/3				3/3	Met
L77	Unique needs training	I	Provider			-				-	Met
L80	Symptoms of illness	L	Provider			-				-	Met
L81	Medical emergency	L	Provider			-				-	Met
L84	Health protect. Training	I	Provider			-				-	Met
L85	Supervision	L	Provider			-				-	Met
L86	Required assessments	I	Provider			-				-	Met
L87	Support strategies	I	Provider			-				-	Met
L88	Strategies implemented	I	Provider			-				-	Met
L90	Personal space/bedroom privacy	I	Provider			-				-	Met
L91	Incident management	L	Provider			-				-	Met
L93 (05/22)	Emergency back-up plans	I	Provider			-				-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L94 (05/22)	Assistive technology	I	Provider			-				-	Met
L96 (05/22)	Staff training in devices and applications	I	Provider			-				-	Met
#Std. Met/# 57 Indicator										54/57	
Total Score										59/62	
										95.16%	

MASTER SCORE SHEET CERTIFICATION

Certification - Planning and Quality Management

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

Placement Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C7	Feedback on staff / care provider performance	Provider	-	Met

Placement Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C8	Family/guardian communication	Provider	-	Met
C9	Personal relationships	Provider	-	Met
C10	Social skill development	Provider	-	Met
C11	Get together w/family & friends	Provider	-	Met
C12	Intimacy	Provider	-	Met
C13	Skills to maximize independence	Provider	-	Met
C14	Choices in routines & schedules	Provider	-	Met
C15	Personalize living space	Provider	-	Met
C16	Explore interests	Provider	-	Met
C17	Community activities	Provider	-	Met
C18	Purchase personal belongings	Provider	-	Met
C19	Knowledgeable decisions	Provider	-	Met
C46	Use of generic resources	Provider	-	Met
C47	Transportation to/ from community	Provider	-	Met
C48	Neighborhood connections	Provider	-	Met
C49	Physical setting is consistent	Provider	-	Met
C51	Ongoing satisfaction with services/ supports	Provider	-	Met
C52	Leisure activities and free-time choices /control	Provider	-	Met
C53	Food/ dining choices	Provider	-	Met