



**PROVIDER REPORT
FOR
COMPREHENSIVE MENTAL
HEALTH
331R State Road
North Dartmouth, MA 02747**

Version

Public Provider Report

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

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) 8 audit (s)	Full Review	82/86 2 Year License 04/22/2024 - 04/22/2026		46 / 46 Certified 04/22/2024 - 04/22/2026
Residential Services	2 location(s) 6 audit (s)			Full Review	20 / 20
ABI-MFP Residential Services	1 location(s) 2 audit (s)			Full Review	20 / 20
Planning and Quality Management				Full Review	6 / 6

EXECUTIVE SUMMARY :

Comprehensive Mental Health Systems, Inc. (CMHS) was founded in 1978 and provides community-based rehabilitative services for individuals with Intellectual/Developmental Disabilities (I/DD) and Acquired Brain Injury (ABI). The agency also provides ABI services to individuals who are served by the Massachusetts Rehabilitation Commission (MRC). The scope of this licensing and certification survey conducted by the Department of Developmental Disabilities (DDS) Office of Quality Enhancement (OQE) included a full review of all licensure and certification indicators for 24/7 Residential and ABI/MFP Residential supports, as well as a review of organizational systems.

The agency demonstrated several strengths at the organization level. In the domain of Competent and Skilled Workforce, the agency had an effective system to ensure that staff are appropriately trained in mandated trainings. In the area of personal safety, the agency ensured that staff were aware how to identify and report suspected abuse and mistreatment. Investigations from DPPC cases of abuse and/or neglect were consistently reviewed, and the agency ensured that immediate actions were taken and that longer-term action steps were implemented to maintain the safety of individuals. Satisfaction surveys were regularly conducted with individuals, their guardians, and agency employees. Organizationally, the agency's system to collect data to identify trends and make mid-course corrections to improve service delivery was strong. For example, after identifying an increase in medication occurrences, the agency took additional actions in making adjustments to medication storage areas to ensure increased privacy and decreased distractions, as well as provision of additional MAP training by their nursing team. All program staff have access to upload Clinical Consultation forms to report any medical and behavioral issues, which are then reviewed in real time by the clinical management team for subsequent intervention.

Within Residential Services, many strengths were identified. Within the domain of human rights, individuals and guardians were provided education/training on human rights, how to file a grievance with the agency, and how to report potential abuse/neglect. Written and oral communication about the individuals served was consistently respectful, and individuals were afforded privacy within their homes when discussing personal matters. Individuals were consistently afforded the opportunity to submit questions for hiring interviews and provide input on staff performance during monthly supervisions, house meetings, and annual performance evaluations.

In the domain of Environmental Safety, homes were well maintained, clean, and in good repair. Homes were nicely landscaped and blended in well with the surrounding neighborhood.

In the domain of Health, the agency worked collaboratively to ensure that annual physicals, dental exams, and appointments with medical specialists were attended as scheduled. Staff's knowledge of the signs and symptoms of illness and the individuals' unique needs facilitated the individuals to receive prompt medical care for acute episodic illnesses. A Personal Health Fact Sheet was maintained for individuals within residential services, which comprehensively detailed their medical conditions and the involvement of their medical specialists. MAP practices were consistently followed in terms of medication orders, documentation, and administration. Individuals were also supported to develop skills to administer their own medications when appropriate.

Another area of strength was the agency's system for financial oversight which included an effective system for tracking and monitoring funds. Shared and delegated management of funds plans were in place which detailed individuals' abilities, with training plans in place related to budgeting and submitting payment and receiving change for their purchases while at the store.

Within certification for residential services, the agency also demonstrated several positive outcomes. Individuals were consistently observed to demonstrate choice and control over their daily routine and the activities in which they participated. Individuals were supported to participate in leisure activities, making choices and exercising control over daily decisions. For example, some individuals used

Alexa/Echo to remind them of the time to take their medication or to ask the weather for selecting their clothing for the following day. Individuals were encouraged to choose and plan their weekly activities at routine house meetings. Individuals received support to purchase personal belongings and to make meal choices based on their food preferences. Bedrooms and common spaces of homes were decorated with personalized items and artwork that reflected the interests of the individuals. Individuals have been active in their communities, including outings to stores, restaurants, movies, sporting events, bowling leagues, dances, church, outdoor community concerts, and vacations. Family involvement is encouraged and supported, with consistent communication between agency staff and the family. Individuals are encouraged to maintain contact with friends and plan outings together. Picture phone books have been developed for individuals, with a picture of the person as well as their name, mailing address, email address, and phone number, so that staff can assist the individuals to identify who they want to contact and help them as needed in the process.

Within licensure, there were some items that would benefit from strengthening. Individuals' Health Care Records did not include all medical diagnoses. Maintenance checks need to be completed for medical monitoring devices, and Human Rights Committee approval is required for motion sensor devices that alert staff of an individual's movement. The agency needs to ensure the timely submission and finalization of incident reports. Lastly, legal representation is needed to meet the membership requirements for the Human Rights Committee.

Based on the findings of this review, CMHS has earned a Two-Year License for Residential and ABI-MFP services, with a score of 95% for licensure. The agency is also Certified in Residential and ABI-MFP services, with a score of 100% for certification. The agency will conduct its own follow-up for any licensure indicators rated as "Not Met" and submit the results within 60 days to the DDS Office of Quality Enhancement.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	9/10	1/10	
Residential and Individual Home Supports	73/76	3/76	
Residential Services ABI-MFP Residential Services			
Critical Indicators	7/7	0/7	
Total	82/86	4/86	95%
2 Year License			
# indicators for 60 Day Follow-up		4	

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 Human Rights Committee does not include a legal representative in their membership. The agency needs to identify and recruit a legal representative to join their Human Rights Committee.

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

Indicator #	Indicator	Area Needing Improvement
L43	The health care record is maintained and updated as required.	For two of eight individuals, the Health Care Record did not include all significant medical diagnoses. The agency needs to ensure that all medical diagnoses are included in individuals' Health Care Records.
L91	Incidents are reported and reviewed as mandated by regulation.	For one of three locations, all incident reports were not submitted and/or finalized within the required timelines. The agency needs to ensure that timelines are met for the submission and finalization of incident reports.
L99 (05/22)	Medical monitoring devices needed for health and safety are authorized, agreed to, used and data collected appropriately. (eg seizure watches; fall sensors).	For one of two individuals with a medical monitoring device, maintenance checks were not being completed on the device as outlined in the plan. The agency needs to ensure that data collection for maintenance checks of medical monitoring devices are being completed.

CERTIFICATION FINDINGS

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	6/6	0/6	
Residential and Individual Home Supports	40/40	0/40	
ABI-MFP Residential Services	20/20	0/20	
Residential Services	20/20	0/20	
Total	46/46	0/46	100%
Certified			

MASTER SCORE SHEET LICENSURE

Organizational: COMPREHENSIVE MENTAL HEALTH

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
℞ L2	Abuse/neglect reporting	3/3	Met
L3	Immediate Action	8/8	Met
L4	Action taken	3/3	Met
L48	HRC	0/1	Not Met(0 %)
L65	Restraint report submit	3/3	Met
L66	HRC restraint review	3/3	Met
L74	Screen employees	4/4	Met
L75	Qualified staff	2/2	Met
L76	Track trainings	14/14	Met
L83	HR training	14/14	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				2/2		8/8	Met
L5	Safety Plan	L	2/2				1/1		3/3	Met
℞ L6	Evacuation	L	2/2				1/1		3/3	Met
L7	Fire Drills	L	2/2				1/1		3/3	Met
L8	Emergency Fact Sheets	I	6/6				2/2		8/8	Met
L9 (07/21)	Safe use of equipment	I	6/6				2/2		8/8	Met
℞ L11	Required inspections	L	2/2				1/1		3/3	Met
℞ L12	Smoke detectors	L	2/2				1/1		3/3	Met
℞ L13	Clean location	L	2/2				1/1		3/3	Met
L14	Site in good repair	L	1/1				1/1		2/2	Met
L15	Hot water	L	2/2				1/1		3/3	Met
L16	Accessibility	L	2/2				1/1		3/3	Met
L17	Egress at grade	L	2/2				1/1		3/3	Met
L18	Above grade egress	L	1/1				1/1		2/2	Met
L19	Bedroom location	L	2/2				1/1		3/3	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L20	Exit doors	L	2/2				1/1		3/3	Met
L21	Safe electrical equipment	L	2/2				1/1		3/3	Met
L22	Well-maintained appliances	L	2/2				1/1		3/3	Met
L23	Egress door locks	L	2/2				1/1		3/3	Met
L24	Locked door access	L	2/2				1/1		3/3	Met
L25	Dangerous substances	L	2/2				1/1		3/3	Met
L26	Walkway safety	L	2/2				1/1		3/3	Met
L27	Pools, hot tubs, etc.	L	1/1						1/1	Met
L28	Flammables	L	2/2				1/1		3/3	Met
L29	Rubbish/combustibles	L	2/2				1/1		3/3	Met
L30	Protective railings	L	2/2				1/1		3/3	Met
L31	Communication method	I	6/6				2/2		8/8	Met
L32	Verbal & written	I	6/6				2/2		8/8	Met
L33	Physical exam	I	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/Rated	Rating
L34	Dental exam	I	6/6				2/2		8/8	Met
L35	Preventive screenings	I	6/6				2/2		8/8	Met
L36	Recommended tests	I	6/6				2/2		8/8	Met
L37	Prompt treatment	I	6/6				2/2		8/8	Met
Ⓡ L38	Physician's orders	I	6/6				2/2		8/8	Met
L39	Dietary requirements	I	6/6				2/2		8/8	Met
L40	Nutritional food	L	2/2				1/1		3/3	Met
L41	Healthy diet	L	2/2				1/1		3/3	Met
L42	Physical activity	L	2/2				1/1		3/3	Met
L43	Health Care Record	I	6/6				0/2		6/8	Not Met (75.00%)
L44	MAP registration	L	2/2				1/1		3/3	Met
L45	Medication storage	L	2/2				1/1		3/3	Met
Ⓡ L46	Med. Administration	I	6/6				2/2		8/8	Met
L47	Self medication	I					1/1		1/1	Met
L49	Informed of human rights	I	6/6				2/2		8/8	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L50 (07/21)	Respectful Comm.	I	6/6				2/2		8/8	Met
L51	Possessions	I	6/6				2/2		8/8	Met
L52	Phone calls	I	6/6				2/2		8/8	Met
L53	Visitation	I	6/6				2/2		8/8	Met
L54 (07/21)	Privacy	I	6/6				2/2		8/8	Met
L57	Written behavior plans	I	5/5						5/5	Met
L60	Data maintenance	I	5/5						5/5	Met
L61	Health protection in ISP	I	6/6				1/2		7/8	Met (87.50%)
L62	Health protection review	I	4/4						4/4	Met
L63	Med. treatment plan form	I	5/6				2/2		7/8	Met (87.50%)
L64	Med. treatment plan rev.	I	6/6				2/2		8/8	Met
L67	Money mgmt. plan	I	6/6						6/6	Met
L68	Funds expenditure	I	6/6						6/6	Met
L69	Expenditure tracking	I	6/6						6/6	Met
L70	Charges for care calc.	I	6/6				2/2		8/8	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L71	Charges for care appeal	I	6/6				2/2		8/8	Met
L77	Unique needs training	I	6/6				2/2		8/8	Met
L80	Symptoms of illness	L	2/2				1/1		3/3	Met
L81	Medical emergency	L	2/2				1/1		3/3	Met
L82	Medication admin.	L	2/2				1/1		3/3	Met
L84	Health protect. Training	I	6/6				2/2		8/8	Met
L85	Supervision	L	2/2				1/1		3/3	Met
L86	Required assessments	I	6/6				2/2		8/8	Met
L87	Support strategies	I	6/6				2/2		8/8	Met
L88	Strategies implemented	I	6/6				2/2		8/8	Met
L89	Complaint and resolution process	L					1/1		1/1	Met
L90	Personal space/bedroom privacy	I	6/6				2/2		8/8	Met
L91	Incident management	L	2/2				0/1		2/3	Not Met (66.67%)

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L93 (05/22)	Emergency back-up plans	1	6/6				2/2		8/8	Met
L94 (05/22)	Assistive technology	1	6/6				2/2		8/8	Met
L96 (05/22)	Staff training in devices and applications	1	5/5				2/2		7/7	Met
L99 (05/22)	Medical monitoring devices	1	1/2						1/2	Not Met (50.0%)
#Std. Met/# 76 Indicator									73/76	
Total Score									82/86	
									95.35%	

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

Residential Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	6/6	Met
C8	Family/guardian communication	6/6	Met
C9	Personal relationships	6/6	Met
C10	Social skill development	6/6	Met
C11	Get together w/family & friends	6/6	Met
C12	Intimacy	6/6	Met
C13	Skills to maximize independence	6/6	Met
C14	Choices in routines & schedules	6/6	Met
C15	Personalize living space	2/2	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
C46	Use of generic resources	6/6	Met
C47	Transportation to/ from community	6/6	Met
C48	Neighborhood connections	6/6	Met
C49	Physical setting is consistent	2/2	Met
C51	Ongoing satisfaction with services/ supports	6/6	Met
C52	Leisure activities and free-time choices /control	6/6	Met
C53	Food/ dining choices	6/6	Met

ABI-MFP Residential Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	2/2	Met
C8	Family/guardian communication	2/2	Met
C9	Personal relationships	2/2	Met
C10	Social skill development	2/2	Met
C11	Get together w/family & friends	2/2	Met
C12	Intimacy	2/2	Met

ABI-MFP Residential Services

Indicator #	Indicator	Met/Rated	Rating
C13	Skills to maximize independence	2/2	Met
C14	Choices in routines & schedules	2/2	Met
C15	Personalize living space	1/1	Met
C16	Explore interests	2/2	Met
C17	Community activities	2/2	Met
C18	Purchase personal belongings	2/2	Met
C19	Knowledgeable decisions	2/2	Met
C46	Use of generic resources	2/2	Met
C47	Transportation to/ from community	2/2	Met
C48	Neighborhood connections	2/2	Met
C49	Physical setting is consistent	1/1	Met
C51	Ongoing satisfaction with services/ supports	2/2	Met
C52	Leisure activities and free-time choices /control	2/2	Met
C53	Food/ dining choices	2/2	Met