

DEPARTMENT OF DEVELOPMENTAL SERVICES

LICENSURE AND CERTIFICATION

DDS FOLLOW-UP REPORT

Provider	<u>Crystal Springs, Inc.</u>	Provider Address	<u>38 Narrows Rd POB 372 , Assonet</u>
Survey Team	<u>Napolitan, Tina;</u>	Date(s) of Review	<u>15-JUL-19 to 18-JUL-19</u>

Follow-up Scope and results :						
Service Grouping	Licensure level and duration	# Critical Indicators std. met/ std. rated at follow-up	# Indicators std. met/ std. rated at follow-up	Sanction status prior to Follow-up	Combined Results post-Follow-up; for Deferred, License level	Sanction status post Follow-up
Residential and Individual Home Supports 2 Locations 8 Audits	2 Year License		6/10	<input checked="" type="checkbox"/> Eligible for new business (Two Year License) <input type="checkbox"/> Ineligible for new business. (Deferred Status: Two year mid-cycle review License)	2 Year License	<input checked="" type="checkbox"/> Eligible for New Business (80% or more std. met; no critical std. not met) <input type="checkbox"/> Ineligible for New Business (<=80% std met and/or more critical std. not met)

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Summary of Ratings

Residential and Individual Home Supports Areas Needing Improvement on Standard not met - Identified by DDS

Indicator #	L7
Indicator	Fire Drills
Area Need Improvement	At three of four homes, fire drills had not been conducted in accordance to the safety plan. The agency needs to conduct fire drills as required.
Status at follow-up	Fire drills were conducted in accordance to the safety plans at two locations.
#met /# rated at followup	2/2
Rating	Met

Indicator #	L16
Indicator	Accessibility
Area Need Improvement	Two of four homes did not have the necessary accessibility and/or adaptations to meet the needs of individuals supported. The agency needs to ensure that homes are free of barriers and adaptations are made to meet the needs of the individuals supported within their homes.
Status at follow-up	The individuals living at the two locations visited were adapted and accessible to the needs of the individuals that resided there.
#met /# rated at followup	2/2
Rating	Met

Indicator #	L30
Indicator	Protective railings
Area Need Improvement	In three of four homes, protective railings and stairways were not safe and secure. The agency needs to ensure that all protective railings and stairways are in good repair.
Status at follow-up	At each location visited, the decks, porches, and railings were in good repair.
#met /# rated at followup	2/2

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Rating	Met
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Indicator #	L41
Indicator	Healthy diet
Area Need Improvement	In two of four homes, the primary or alternative food options were predominantly processed or frozen food options. The agency needs to ensure that individuals are supported to follow a healthy diet.
Status at follow-up	Crystal Springs previously had two home that received meals delivered from their kitchen, they have begun cooking in one of these homes and in the other home, they have ensured that fresh fruits and vegetables are available at all times and have increased food choices offered from the kitchen. In the two homes visited this follow up, fresh fruits and vegetables were visible and the individuals were supported to eat healthy.
#met /# rated at followup	2/2
Rating	Met

Indicator #	L56
Indicator	Restrictive practices
Area Need Improvement	For three individuals, restrictive practices were in place without a written plan and/or strategies to mitigate the impact on others factors. The agency needs to ensure that when restrictive practices are implemented; a written rationale outlining the need for the restriction is in place and there are strategies developed so not to unduly restrict the rights of others.
Status at follow-up	Restrictive practices were reviewed for four individuals. In all instances, required components were not in place including, provisions to mitigate the impact of the restriction on others.
#met /# rated at followup	0/4
Rating	Not Met
Post 60 Day Area Office/HRC Follow-up (Performed 30 days later) Expected Area Office Follow Up Date: 8/14/2019	
Forwarded to	Human Rights
AO/Provider Actions	Human Rights Specialist received updated "consent for restrictive devices" for the four identified individuals and reviewed; they are still inadequate and demonstrate a lack of understanding of the

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	process. HRS will meet in the coming weeks with the provider agency to further the training provided.
Provider Status Rating by AO/HRC (Met or Not Met)	Not Met

Indicator #	L69
Indicator	Expenditure tracking
Area Need Improvement	Expenditures for four of six individuals did not include a process to sign cash out. In one instance, financial tracking records were not correctly completed by staff. The agency needs to ensure that all expenditures are properly tracked and develop a process for signing cash taken to use for expenditures.
Status at follow-up	A review of expenditures for May through the current date in July for four individuals indicated that staff was tracking, documenting and calculating all expenses accurately, however staff have not yet instituted a process in which to sign cash out. The agency has modified the financial tracking form to include signing cash out and has trained managers and supervisors. Staff training is scheduled to be completed in the month of July.
#met /# rated at followup	0/4
Rating	Not Met
Post 60 Day Area Office/HRC Follow-up (Performed 30 days later) Expected Area Office Follow Up Date: 8/14/2019	
Forwarded to	Area Director
AO/Provider Actions	
Provider Status Rating by AO/HRC (Met or Not Met)	Not Met

Indicator #	L84
Indicator	Health protect. Training
Area Need Improvement	Six individuals used health related protections. In two instances, staff were not trained on the proper use of health related protections. The agency needs to ensure that staff are trained in support and health related protections.
Status at follow-up	Supports and health related protections for four individuals were reviewed. In two instances, staff was

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	not trained in the proper implementation of supports and health related protections
#met /# rated at followup	2/4
Rating	Not Met
Post 60 Day Area Office/HRC Follow-up (Performed 30 days later) Expected Area Office Follow Up Date: 8/14/2019	
Forwarded to	Human Rights
AO/Provider Actions	Supports and health related protections for four individuals were reviewed. In two instances, staff was not trained in the proper implementation of supports and health related protections
Provider Status Rating by AO/HRC (Met or Not Met)	Not Met

Indicator #	L86
Indicator	Required assessments
Area Need Improvement	The required assessments for two of four individuals were not submitted within the required timeframes. The agency needs to ensure that timelines are met in preparation for the ISP.
Status at follow-up	The submission of required assessments were reviewed for four individuals. For two individuals assessments were not able to be rated as the agency was not provided with sufficient notice. For the remaining two individuals, one individuals' assessments were not submitted within the required timelines.
#met /# rated at followup	1/2
Rating	Not Met
Post 60 Day Area Office/HRC Follow-up (Performed 30 days later) Expected Area Office Follow Up Date: 8/14/2019	
Forwarded to	Area Director
AO/Provider Actions	
Provider Status Rating by AO/HRC (Met or Not Met)	Not Met

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Indicator #	L90
Indicator	Personal space/ bedroom privacy
Area Need Improvement	The bedrooms and/or bathrooms for two of six individual lacked locks. In one home, the bedrooms lacked blinds. The agency needs to ensure that individuals are afforded privacy in their homes.
Status at follow-up	At two locations, all bathrooms and bedrooms had locks on doors and shades on the windows. One location had one bedroom that was shared and this bedroom has a privacy screen in between the beds.
#met /# rated at followup	4/4
Rating	Met

Indicator #	L91
Indicator	Incident management
Area Need Improvement	At three of four locations, there were issues regarding the reporting of incidents. In one location, there were incidents that had not been reported. A two other locations, incidents reports had not been submitted and/or finalized within required timelines. The agency needs to ensure all staff are knowledgeable of the criteria for reportable incidents and that these are reported within required timelines.
Status at follow-up	At the two homes visited, there were no qualifying events went unreported in HCSIS. The agency revised and reviewed its policy regarding incident report management. The agency submitted incident reports within the required timelines at the two locations visited.
#met /# rated at followup	2/2
Rating	Met

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Follow-up Detail Report

For provider and area office use only. This page elaborates on all of the indicators reviewed at follow-up where the standard was not met.

Licensure Organizational :

Indicator	Source	Issue
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Residential and Individual Home Supports

Indicator	Service Type	Location	Individual	Issue
L56	Residential Services	18 Narrows Road	LM	Another individual in the home has restrictions in place. Provisions to not unduly impact others were not in place.
L56	Residential Services	18 Narrows Road	SJ	Upon entering the home, chimes went off when no one was home. There was lack of provisions to not unduly impact others were not in place.
L56	Residential Services	256 Albany Street	KK	There are restrictive practices in the home for another person, provisions to not unduly impact others were not in place.
L56	Residential Services	256 Albany Street	SD	This individual has restrictions in place, one such restriction is a motion detector. The plan does not specify the times when the motion detector is in use. Additionally, the agency has not identified or implemented strategies to ensure others are not unduly restricted.
L69	Residential Services	18 Narrows Road	AA	While the agency is in the process of establishing a process in which to sign cash out, this process was not yet implemented for this individual.
L69	Residential Services	18 Narrows Road	AM	While the agency is in the process of establishing a process in which to sign cash out, this process was not yet implemented for this individual.

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L69	Residential Services	256 Albany Street	AM	While the agency is in the process of establishing a process in which to sign cash out, this process was not yet implemented for this individual.
L69	Residential Services	256 Albany Street	KE	While the agency is in the process of establishing a process in which to sign cash out, this process was not yet implemented for this individual.
L84	Residential Services	18 Narrows Road	LM	At the time of the review, there was no evidence of staff training.
L84	Residential Services	18 Narrows Road	SJ	At the time of the review, there was no evidence of staff training for the supportive and health related devices including: the use of an AFO and a wedge on his bed.
L86	Residential Services	18 Narrows Road	SJ	Assessments due 4/8/19 were not requested within recommended timelines (requested 4/11/19).
L86	Residential Services	256 Albany Street	BF	Assessments due 4/18/19 were requested 5/3/19. The agency was not provided sufficient notice to meet the timelines.
L86	Residential Services	256 Albany Street	SD	The agency submitted two of three assessments within required timelines. The Health and Dental assessment due 4/29/19 was submitted 5/6/19.