

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

Provider: DDS METRO REGION OFFICE

Provider Address: 465 Waverley Oak Road Suite 120,
Waltham

Name of Person Maureen Delaney
Completing Form: _____

Date(s) of Review: 26-JUN-23 to 27-JUN-23

Follow-up Scope and results :		
Service Grouping	Licensure level and duration	# Indicators std. met/ std. rated
Residential and Individual Home Supports		

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

Indicator #	L55
Indicator	Informed consent

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Area Need Improvement	Of the eight consents obtained for the use of photographic images, none provided a choice of mediums where photographs will be used. The agency needs to ensure that when obtaining photographic consents, it clearly identifies the chosen mediums where images will be used.
Process Utilized to correct and review indicator	MRS did a review of the process for obtaining consents, including consent form review and revision: The consent form was revised to include the required information.
Status at follow-up	The new consent form is being used and will be used going forward to obtain media consent.
Rating	Met

Indicator #	L56
Indicator	Restrictive practices
Area Need Improvement	At one of two locations where there was a restrictive practice for one individual that affected all individuals, the notification was not obtained in line with requirements. The agency needs to ensure that when implementing a restrictive practice, it provides written notification to guardians (and conveys to individuals) information about the restriction that includes the rational for the restriction, mitigating practices for those not requiring the restriction, and a plan to fade/remove the practice.
Process Utilized to correct and review indicator	MRS did a review and revision of the notification process.
Status at follow-up	We are currently revising the notification (previously called consent) form to meet required indicator. Anticipated completion date 8/15/2023.
Rating	Not Met

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Indicator #	L67
Indicator	Money mgmt. plan
Area Need Improvement	For two of eight individuals with whom the agency had shared or delegated money management responsibility, the agency did not develop written plans that included a training plan. The agency needs to ensure that when it has shared or delegated money management responsibility, it develops a written plan that includes a training component (unless one is determined to not be required by the ISP team).
Process Utilized to correct and review indicator	MRS reviewed all money management plans.
Status at follow-up	Residential supervisors and managers were retrained on requirements of the training plan if it determined at the ISP that one is necessary. Review by manager on all upcoming financial training plans will occur at the time of the ISP with recommendations for revision if necessary. All staff meeting will be scheduled to complete this training. Anticipated completion date: 9/1/2023.
Rating	Not Met

Indicator #	L68
Indicator	Funds expenditure
Area Need Improvement	At two of eight locations, individuals' funds were used for expenditure that did not solely benefit them (to pay for items/services that are part of the agency's contractual obligations). The agency needs to ensure that individuals funds are used solely for expenditure that benefit them.
Process Utilized to correct and review indicator	This was corrected at time of survey.
Status at follow-up	All staff have received information on appropriate use of individual funds.

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Rating	Met
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Indicator #	L71
Indicator	Charges for care appeal
Area Need Improvement	Eight individuals and/or their guardians whose charges for care were reviewed were not given adequate notification relative to their rights to appeal those charges (the department name and address listed on the header of the document were not current). The agency needs to ensure that charges for care notifications contains current information.
Process Utilized to correct and review indicator	This question will be raised to UMASS and Central Office for correction of required information.
Status at follow-up	Correction is on-going.
Rating	Not Met

Indicator #	L88
Indicator	Strategies implemented
Area Need Improvement	For three of eight individuals, support strategies were not being implemented as agreed upon to support them to meet their identified ISP goals. The agency needs to ensure that support strategies designed to assist people in meeting their identified goals are well supported.
Process Utilized to correct and review indicator	MRS did data audits by Director of Residential Supports to ensure compliance.
Status at follow-up	The correction process involves on-going training and support for staff on the requirements.
Rating	Not Met

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Indicator #	L94 (05/22)
Indicator	Assistive technology
Area Need Improvement	For three of eight individuals, support to identify and/or acquire assistive technology to aid in increasing their independence was not evident. The agency needs to ensure that individuals are assessed relative to their need for assistive technology, and support is offered to use those technologies.
Process Utilized to correct and review indicator	MRS did a review of assistive technology assessments and staff retraining on its use and value including necessary/suggested follow up.
Status at follow-up	All staff meetings are being used to schedule and provide retraining, and support in this area is progressing. Anticipated completion date 9/1/2023.
Rating	Not Met

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

Indicator #	L48
Indicator	HRC
Area Need Improvement	The agency's two Human Rights Committees, that serve individuals *in different geographical locations lacked the required membership composition over the past two years. The agency needs to ensure that both of its Human Rights Committees recruit and maintain the required members in accordance with DDS requirements.
Process Utilized to correct and review indicator	MRS reviewed its Human Rights Committee for continuing compliance post survey.
Status at follow-up	Recruitment efforts are underway and on-going to ensure required membership composition is met.
Rating	Not Met

Indicator #	L66
Indicator	HRC restraint review
Area Need Improvement	One restraint report was not reviewed by the Human Rights Committee within the required timeframe. The agency needs to ensure that restraint reports are reviewed by the human rights committee within 120 days.
Process Utilized to correct and review indicator	MRS reviewed restraint submission requirements compliance.
Status at follow-up	This has been corrected with timely reviews and discussed at staff meetings.
Rating	Met