

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

**Provider:** DELTA PROJECTS

**Provider Address:** 118 Allied Drive , Dedham

**Name of Person** Jean Reynolds  
**Completing Form:**

**Date(s) of Review:** 26-OCT-15 to 27-OCT-15

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

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**Summary of Ratings**

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

<b>Indicator #</b>	L56
<b>Indicator</b>	Restrictive practices
<b>Area Need Improvement</b>	<p>For five of the individuals surveyed, the restrictive practices form the agency utilizes did not list the specific restriction, and did not provide the individual's name for whom the restriction is for. The forms also do not contain the rationale for the restriction. The same form was used for informing other individuals of the restriction, and/or seeking their consent without the inclusion of a plan to mitigate the impact of the restriction upon them. Additionally, the same form was used to inform the Human Rights Committee and ISP team of the restriction and seeking their approval. Therefore, the teams are not getting all the information they need to make informed decisions.</p> <p>The agency needs to revise its restrictive practices forms to specify who restrictions are for, and the rationale for the restrictions. They also need to include ways to minimize the impact of the restriction on the other residents of a home, and submit this information when seeking Human Rights and ISP team review. Additionally, the agency needs to ensure that the form it uses to inform other residents that are impacted by the restriction, includes information on minimizing the impact of the restriction.</p>
<b>Process Utilized to correct and review indicator</b>	A review of current Restrictive Practice forms was conducted, including consultation with our OQE Survey team to ensure acceptable corrections.
<b>Status at follow-up</b>	Our Restrictive Practice forms have been revised to include rationale and steps to minimize impact on other individuals.
<b>Rating</b>	Met

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<b>Indicator #</b>	L67
<b>Indicator</b>	Money mgmt. plan
<b>Area Need Improvement</b>	<p>For seven of the individuals surveyed, the agency provided varying degrees of money management assistance; but, in most cases a teaching plan for money management had not been developed specifying how the individual would be trained in the process of money management.</p> <p>The agency needs to assess the level of support they give each individual in the management of their funds, and develop corresponding money management teaching plans that specifies each individual's involvement in the process.</p>
<b>Process Utilized to correct and review indicator</b>	A review of our current Funds Management Plan was conducted, including consultation with our OQE Survey Team to ensure acceptable corrections.
<b>Status at follow-up</b>	Money Management Teaching Plans will be modified to include a one page synopsis of each individual's financial abilities, including their involvement in developing the plan.
<b>Rating</b>	Met

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<b>Indicator #</b>	L88
<b>Indicator</b>	Strategies implemented
<b>Area Need Improvement</b>	For three of the individuals surveyed, support strategies identified by the ISP team were not being consistently implemented or there was no documentation of the implementation that was occurring. The agency needs to ensure that individuals are supported to engage in their ISP objectives. Additionally, where ISP objectives are being worked on by individuals, staff needs to track and document the effectiveness of support strategies on meeting the objective being implemented.
<b>Process Utilized to correct and review indicator</b>	Our current system of Support Strategy Review was conducted and changes were made to include additional reviews for effectiveness.
<b>Status at follow-up</b>	Support Strategies and data will be reviewed monthly by Coordinators and quarterly by DRS for effectiveness and to ensure individuals are engaging in their objectives. Our Balanced Score Card process will include a review of all Support Strategies, which will be rated.
<b>Rating</b>	Met