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| |  |  |  | | --- | --- | --- | | **Follow-up Scope and results :** |  |  | | Service Grouping | Licensure level and duration | # Indicators std. met/ std. rated | | Residential and Individual Home Supports | 2 Year License | 5/5 | |  |  |  | | |  |

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| |  | | --- | | **Summary of Ratings** | |  |
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| |  |  | | --- | --- | |  |  | | |  |  | | --- | --- | | **Residential and Individual Home Supports Areas Needing Improvement on Standard not met - Identified by DDS** | | | **Indicator #** | L24 | | **Indicator** | Locked door access | | **Area Need Improvement** | At the two sites, staff could not immediately locate keys to unlock the bedroom doors.  Keys must be readily available for staff to unlock bedroom doors in the event of an emergency. | | **Process Utilized to correct and review indicator** | All staff members have been trained on this indicator and keys are readily available for each locking door in case of emergency. Please see attached staff trainings. | | **Status at follow-up** | Completed | | **Rating** | Met | | **Indicator #** | L49 | | **Indicator** | Informed of human rights | | **Area Need Improvement** | The agency had not distributed or received signed and returned residency agreements for the five individuals (and guardians where applicable) protecting them from arbitrary eviction.  The agency needs to have signed residency agreements, or other forms of written agreement in place for each of the individuals served in provider owned or operated settings, and then complete an attestation to this effect, with the roster of names attached. | | **Process Utilized to correct and review indicator** | Revised Room and Board Agreements which state that each individual has the same responsibilities and protections from eviction that tenants have under the landlord tenant law of the state of Massachusetts have been sent to all individuals and/or guardians. Please see attached signed agreements from all individuals and guardians of 22-24 Colberg Avenue. See also the attached Provider Statement of Compliance and a current and complete list of Individuals receiving residential services through the Dimock Center. Not all Room and Board Agreements for all residents in all programs have been signed and returned by all guardians as of the date of this letter, but we will follow up with all guardians to seek to ensure 100% compliance. | | **Status at follow-up** | Completed, although not all Room and Board agreements for all residents in all programs have been signed and returned as of the date of this report. | | **Rating** | Met | | **Indicator #** | L67 | | **Indicator** | Money mgmt. plan | | **Area Need Improvement** | None of five individual's funds management plans contained specific details regarding safe keeping, management, and training around individual finances. Financial plans should be detailed and clear. | | **Process Utilized to correct and review indicator** | Revised Shared Management of Money Assessments, which include training plans, have been completed for all residents of 22-24 Colberg Avenue. Please see attached. | | **Status at follow-up** | Completed | | **Rating** | Met | | **Indicator #** | L80 | | **Indicator** | Symptoms of illness | | **Area Need Improvement** | At both homes, staff was trained on a part of the DDS Observable Signs and Symptoms of Illness training. The agency must incorporate all aspects of this training including ''observable signs and symptoms'' and ''just not right''. | | **Process Utilized to correct and review indicator** | All staff have been training using the complete Signs and Symptoms Illness Curriculum, including "Observable signs and symptoms" and "Just not right." Please see attached. | | **Status at follow-up** | Completed | | **Rating** | Met | | **Indicator #** | L88 | | **Indicator** | Strategies implemented | | **Area Need Improvement** | For two of five individuals, ISP objectives were not being implemented as written in the provider support strategies.  The agency must adhere to ISP support strategies and effectively monitor progress or lack thereof toward meeting goals. | | **Process Utilized to correct and review indicator** | ISP data collection records have been revised to reflect accurately the ISP goals and support strategies for JM, DT and JG. Please see attached. | | **Status at follow-up** | Completed | | **Rating** | Met | |  | | |