LICENSURE AND CERTIFICATION

DDS FOLLOW-UP REPORT

Provider	ENABLE INC	Provider Address	605 Neponset Street , Canton
Survey Team	Muguro, William; Nolan, Scott;	Date(s) of Review	30-MAY-23 to 31-MAY-23

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		Sanction status post Follow-up
Residential and Individual Home Supports	2 Year License		7/9	E Eligible for new business (Two Year License)	2 Year License	☑ Eligible for New Business (80% or more std. met no critical std. not met)
2 Locations 2 Audits				□ Ineligible for new business. (Deferred Status: Two year midcycle review License)		□ 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 Provider

Indicator #	L34
Indicator	Dental exam
Issue Identified	For 2021,2/3 consumers did not have evidence of a dental exam.
Actions Planned/Occurred	3/3 consumers have evidence of a dental exam in 2022. Dental exams for 2023 will be scheduled.
Status at follow-up	Individuals received annual dental exams.
Rating	Met

Indicator #	L44
Indicator	MAP registration
Issue Identified	2/2 houses did not have current registration.
	Registrations were renewed and have been received; the Director became aware that MSCRs are no longer renewed by mail and sites are not notified when they are expiring. New expiration dates will be noted on agency internal calendars.
Status at follow-up	Two locations where staff were administering medications had current registrations by DPH.
Rating	Met

Indicator #	L49
Indicator	Informed of human rights
Issue Identified	Consumers and gaurdains were not trained on Human Rights consistently.
Actions Planned/Occurred	The responsibility for tracking training is with the Executive Assistant. This position was vacated in the begining of 2023. The new Executive Assistant will be trained on ensuring this indicator is met.
Status at follow-up	Individuals and guardians were informed of their human rights and knew how to file a grievance when they had a concern.
Rating	Met

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Indicator #	L63
Indicator	Med. treatment plan form
Issue Identified	2/2 consumers with psychotropic do not have medication treatment forms in 2021.
Actions Planned/Occurred	There are medication treatment plans in 2022 and the new agency Supervisor will work on medication treatment plans for 2023.
Status at follow-up	The medication treatment plans for two individual were in written format with the required components.
Rating	Met

Indicator #	L64
Indicator	Med. treatment plan rev.
Issue Identified	Because there were no treatment plans written, they were not reviewed.
Actions Planned/Occurred	Medication treatment plans will be uploaded to the ISP for review once written.
Status at follow-up	The medication treatment plans were reviewed by the required groups.
Rating	Met

Indicator #	L67
Indicator	Money mgmt. plan
Issue Identified	There was no money management plan filed in FY21 for all consumers.
Actions Planned/Occurred	There are money management plans in FY22; moving forward the Supervisor and Executive Assistant will ensure that money management plans are completed each year.
Status at follow-up	Individuals had written plans when the agency had shared and delegated management responsbility. These were implemented as written.
Rating	Met

Indicator #	L69
Indicator	Expenditure tracking

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Issue Identified	Enable only tracks funds expenditures for one client. This was not completed after 11/2021.
	The Operations Manager was tracking funds expenditures in the absence of a Supervisor. It did not get fully turned over to the Supervisor upon hire and was missed. The new agency Supervisor will be trained on receipt collection and funds tracking.
Status at follow-up	Individual expenditures were documented and tracked for one individual whom the agency had responsbility as noted in the financial plan.
Rating	Met

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

Indicator #	L94 (05/22)
Indicator	Assistive technology
Area Need Improvement	For two individuals, assessments were not completed either formally or informally to determine if assistive technology would be a benefit to maximizing independence. The agency needs to assess and support individuals to have assistive technology to maximize their independence.
	For one out of two individuals, the agency had not completed a formal or informal assessment of his skills to identify areas where he may be able to use AT devices/tools that can maximize his independence at home or in the community.
#met /# rated at followup	1/2
Rating	Not Met

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

Indicator #	L48
Indicator	HRC
Issue Identified	The HRC did not meet between December 2021 -December 2022
Actions Planned/Occurred	The HRC has resumed meeting and has met twice, once in December 2022 and once in March 2023.
	The HRC held it first meeting in December 16, 2022 since 2021 and in March 10, 2023. The committee met compositon requirements and quorum. It was noted in the last meeting, the lawyer and an individual member were not allowed to vote on the acceptance of the December meeting minutes because they were not in attendance. HRC members are allowed to vote on the acceptance of meeting minutes when absent from a scheduled meeting.
Rating	Not Met