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| **Provider:** |

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| GROWTHWAYS INC |

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| **Provider Address:** |

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| 41 North Pearl St. , Brockton |

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| **Name of PersonCompleting Form:** |

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| Marty Berliner |

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| **Date(s) of Review:** |

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| 19-FEB-20 to 19-FEB-20 |

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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 with Mid-Cycle Review | 2/2 |
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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 #** | L15 |
| **Indicator** | Hot water |
| **Area Need Improvement** | In three of eight locations the hot water tested above 120 degrees. The agency needs to ensure that hot water temperature tests within the allowable limits. |
| **Process Utilized to correct and review indicator** | Temps were correct same day, the process was revised for checking the temperature. |
| **Status at follow-up** | Temps were checked and found to be within allowable parameters.Met |
| **Rating** | Met |
| **Indicator #** | L87 |
| **Indicator** | Support strategies |
| **Area Need Improvement** | For three of twelve individuals, the agency did not submit the support strategies at least fifteen days prior to the ISP. The agency needs to ensure that all support strategies are submitted within the required timelines.  |
| **Process Utilized to correct and review indicator** | The internal task list was updated to emphasize the importance of this requirement. |
| **Status at follow-up** | Strategies are being submitted timelyMet |
| **Rating** | Met |

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