

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

Provider: GUIDEWIRE, Inc. _____

Provider Address: 551 E. Columbus Ave. , Springfield _____

Name of Person Adriana Brooks-Baymon
Completing Form: _____

Date(s) of Review: 26-AUG-25 to 27-AUG-25 _____

Follow-up Scope and results :		
Service Grouping	Licensure level and duration	# Indicators std. met/ std. rated
Residential and Individual Home Supports	2 Year License	3/4
Employment and Day Supports		2/2

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

Summary of Ratings

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

Indicator #	L30
Indicator	Protective railings
Area Need Improvement	At three of ten locations, protective railings were in disrepair and required repair or replacement. The agency must ensure that protective railings at all homes are in proper repair and replaced when necessary.
Process Utilized to correct and review indicator	The agency maintenance team utilizes a ticketing system for reporting any maintenance issues. Once a ticket is submitted, the team reviews and triages requests based on health and safety priorities. If a major need is identified, it will be communicated to the maintenance team and rectified as soon as possible. On a quarterly basis, the program directors conduct regular site reviews, to collect information for each program.
Status at follow-up	The agency maintenance team utilizes a ticketing system for reporting any maintenance issues. Once a ticket is submitted, the team reviews and triages requests based on health and safety priorities. If a major need is identified, it will be communicated to the maintenance team and rectified as soon as possible. On a quarterly basis, the program directors conduct regular site reviews, to collect information for each program.
Rating	Met

Indicator #	L89
Indicator	Complaint and resolution process
Area Need Improvement	At one ABI location, there was no complaint resolution process and log in place. The agency must ensure that all ABI locations have the complaint and resolution process and log in place, and that individuals are trained in the process.

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

Process Utilized to correct and review indicator	On July 24th, 2025, the Human Rights Coordinator met with the Vice Presidents of Operations (Springfield/Westfield, Holyoke/Chicopee) to create an updated grievance log for the 3 ABI residences. Training will occur within the next few months for the program managers, Human Rights Officers, direct care staff who oversee and work in the ABI programs, as well as the individuals served.
Status at follow-up	Training was completed at the location of the audit, Lawton Street. Similar training and follow up will occur at two other ABI locations by September 2025 as an added safeguard. Completed
Rating	Met

Indicator #	L91
Indicator	Incident management
Area Need Improvement	At three locations incident reports were either not submitted or finalized within the required timelines. The agency must ensure that all incident reports are submitted and finalized within the required timelines in HCSIS.
Process Utilized to correct and review indicator	An administrative assistant will go into HCSIS weekly to check alerts and send them to respective Program Directors. A report was pulled in HCSIS for June 12th, 2025, through August 8th, 2025 to determine if incidents were entered within the allotted timelines for the programs that were out of compliance.
Status at follow-up	An administrative assistant will go into HCSIS weekly to check alerts and send them to respective Program Directors. A report was pulled in HCSIS for June 12th, 2025, through August 8th, 2025 to determine if incidents were entered within the allotted timelines for the programs that were out of compliance.
Rating	Not Met
Post 60 Day Area Office/HRC Follow-up (Performed 30 days later) Expected Area Office Follow Up Date:	
Forwarded to	Area Director
AO/Provider Actions	

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

Provider Status Rating by AO/HRC (Met or Not Met)	
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Employment and Day Supports Areas Needing Improvement on Standard not met - Identified by DDS

Indicator #	L91
Indicator	Incident management
Area Need Improvement	At the Community-based day services location, incident reports were either not submitted or finalized as within the required timelines. The agency must ensure that all incident reports are submitted and finalized within the required timelines in HCSIS.
Process Utilized to correct and review indicator	To further ensure compliance, the day services program is required to send out an end of day report detailing any incidents that took place and the HCSIS ID#'s for those incidents. The report will be sent daily with or without reported incidents to ensure accurate monitoring. The email (s) are sent to Clinical, Program Directors, and the VP of Operations. If a report requires additional approval that is noted in the email, i.e. restraint manager review, it will be completed by the clinical department. The VP of Operations reviews HCSIS for compliance minimally twice a week and follows up with the appropriate manager/director if submissions are not completed or timely.
Status at follow-up	The Solutions program filed two HCSIS reports between 6/12/25-7/31/25. Both reports were entered into HCSIS and approved within the required time frame.
Rating	Met

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

Indicator #	L48
Indicator	HRC
Area Need Improvement	The agency had two human rights committees (HRC) to oversee the Springfield and Pittsfield areas. The Springfield HRC did not meet the attendance requirement due to the legal representative and the three individuals on the committee having 50% or

DEPARTMENT OF DEVELOPMENTAL SERVICES

LICENSURE AND CERTIFICATION

PROVIDER FOLLOW-UP REPORT

	less meeting attendance. The agency must ensure that all human rights committee members, especially the requisite ones, attend HRC meetings on a consistent basis.
Process Utilized to correct and review indicator	The Human Rights Coordinator continues to actively recruit individuals who receive services to join the HRC. The Human Rights Coordinator also ensures that HRC members can access meeting documentation, including restraints, DPPC information, and Support and Health Related protections to be reviewed. The committee members are given the opportunity to submit feedback, questions or concerns to be reviewed during the meeting should they be absent.
Status at follow-up	At the June 16th Human Rights Committee meeting, quorum was met.
Rating	Met