

**DEPARTMENT OF DEVELOPMENTAL SERVICES**

**LICENSURE AND CERTIFICATION**

**DDS FOLLOW-UP REPORT**

Provider	<u>Hopewell Inc.</u>	Provider Address	<u>3 Allied Drive 308, Dedham</u>
Survey Team	<u>Larrieux, Margareth; MacPhail, Lisa; W. Weru , Joseph; Edi-Osagie, Raymond;</u>	Date(s) of Review	<u>16-APR-19 to 18-APR-19</u>

<b>Follow-up Scope and results :</b>						
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	Combined Results post-Follow-up; for Deferred, License level	Sanction status post Follow-up
Residential and Individual Home Supports 7 Locations 14 Audits	2 Year License with Mid-Cycle Review		18/20	<input type="checkbox"/> Eligible for new business (Two Year License)  <input checked="" type="checkbox"/> Ineligible for new business. (Deferred Status: Two year mid-cycle review License)	2 Year License with Mid-Cycle Review	<input checked="" type="checkbox"/> Eligible for New Business (80% or more std. met; no critical std. not met)  <input type="checkbox"/> 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 DDS**

<b>Indicator #</b>	L5
<b>Indicator</b>	Safety Plan
<b>Area Need Improvement</b>	Six of the eight locations, did not have an approved safety plan in place. The agency needs to ensure there is an approved safety plan in place at each location.
<b>Status at follow-up</b>	There were approved safety plans in place at four of five locations that were reviewed.
<b>#met /# rated at followup</b>	4/5
<b>Rating</b>	Met

<b>Indicator #</b>	L7
<b>Indicator</b>	Fire Drills
<b>Area Need Improvement</b>	The two locations did not conduct the required minimum of four drills; two awake and two asleep. The agency needs to ensure that fire drills are conducted as required.
<b>Status at follow-up</b>	Fire drills were being conducted at two locations that were visited.
<b>#met /# rated at followup</b>	2/2
<b>Rating</b>	Met

<b>Indicator #</b>	L15
<b>Indicator</b>	Hot water
<b>Area Need Improvement</b>	At two out of eight locations, water temperature measured outside of the 110 to 120 degree range. The agency needs to ensure that water temperature at all locations is maintained to be within the required range.
<b>Status at follow-up</b>	Hot water temperature was within the required range at three of five locations.
<b>#met /# rated at followup</b>	3/5
<b>Rating</b>	Not Met

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<b>Indicator #</b>	L49
<b>Indicator</b>	Informed of human rights
<b>Area Need Improvement</b>	Five out of twelve individuals did not have residency agreements in place. The agency needs to ensure that individuals / guardians have been informed of their right to be free from arbitrary eviction, through an attestation that indicates the presence of a signed residential agreement.
<b>Status at follow-up</b>	All six Individuals that were reviewed had signed residency agreements in place.
<b>#met /# rated at followup</b>	6/6
<b>Rating</b>	Met

<b>Indicator #</b>	L56
<b>Indicator</b>	Restrictive practices
<b>Area Need Improvement</b>	Restrictive practices for five people did not have the required written protocol that included all required components, including rationale. There was also no evidence of reviews and approvals for the restrictions. The agency needs to ensure that restrictive practices have written rationale and that they undergo the necessary reviews.
<b>Status at follow-up</b>	For three of five individuals, restrictive practices were in a written format and included rationale; they were also being implemented as required and underwent the required reviews.
<b>#met /# rated at followup</b>	3/4
<b>Rating</b>	Met

<b>Indicator #</b>	L59
<b>Indicator</b>	Behavior plan review
<b>Area Need Improvement</b>	For one individual, the behavior plan had a restrictive component which had not received the required reviews. The agency needs to ensure that behavior plans with restrictive components receive the required reviews.
<b>Status at follow-up</b>	There were no new behavior plan eligible for review within the follow-up time-frame.
<b>#met /# rated at followup</b>	

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<b>Rating</b>	Not Rated
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<b>Indicator #</b>	L60
<b>Indicator</b>	Data maintenance
<b>Area Need Improvement</b>	Data on target behaviors identified in one behavior plans had not been maintained. The agency needs to ensure that data on target behaviors and interventions are kept and utilized to make changes.
<b>Status at follow-up</b>	For three behavior plans that were reviewed, data collection was occurring.
<b>#met /# rated at followup</b>	3/3
<b>Rating</b>	Met

<b>Indicator #</b>	L61
<b>Indicator</b>	Health protection in ISP
<b>Area Need Improvement</b>	For one of the two supportive and health related protections reviewed, written protocols were not in place. The agency needs to ensure that health related protection protocols are in place to ensure proper utilization of such supports, and that they are included in the ISP and the continued need is outlined.
<b>Status at follow-up</b>	All four health related protections had written protocols in place with the need clearly outlined, and were included in the ISP.
<b>#met /# rated at followup</b>	4/4
<b>Rating</b>	Met

<b>Indicator #</b>	L62
<b>Indicator</b>	Health protection review
<b>Area Need Improvement</b>	Supports and health related protections for one of the two individuals was not reviewed by the required group. The agency needs to ensure that supports and health protections are reviewed by the required group.
<b>Status at follow-up</b>	All four health related protections received the required reviews.

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<b>#met /# rated at followup</b>	4/4
<b>Rating</b>	Met

<b>Indicator #</b>	L63
<b>Indicator</b>	Med. treatment plan form
<b>Area Need Improvement</b>	The use of behavior modifying medication was reviewed for five individuals. For four individuals, the plans either had not been developed for the administration of an anti-psychotic medication and / or the medication treatment plans did not contain all required components including data regarding the observation of target behaviors. Therefore, the effectiveness of the treatment plan could be evaluated. The agency needs to ensure that medication treatment plans are developed when necessary and include all required components.
<b>Status at follow-up</b>	Four of five medication treatment plans were developed in written format and contained all the required components including data collection.
<b>#met /# rated at followup</b>	4/5
<b>Rating</b>	Met

<b>Indicator #</b>	L64
<b>Indicator</b>	Med. treatment plan rev.
<b>Area Need Improvement</b>	Four of five medication treatment plans did not receive reviews by the required groups. The agency needs to ensure that medication treatment plans are reviewed by the required groups.
<b>Status at follow-up</b>	All five medication treatment plans that were reviewed were submitted to the ISP team.
<b>#met /# rated at followup</b>	5/5
<b>Rating</b>	Met

<b>Indicator #</b>	L67
<b>Indicator</b>	Money mgmt. plan
<b>Area Need Improvement</b>	Eight individuals either did not have a money management plan in place and / or there was no written agreement The agency needs to ensure that in cases where it has shared or delegated money

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	management responsibility that training plans are in place that contain all the required components, for fostering increased independence on the part of the individuals, in the management of their money.
<b>Status at follow-up</b>	Six of eight money management plans had been developed to contain the required components, they also had training plans in place and showed the agency and individual's roles in money management.
<b>#met /# rated at followup</b>	6/8
<b>Rating</b>	Not Met

<b>Indicator #</b>	L69
<b>Indicator</b>	Expenditure tracking
<b>Area Need Improvement</b>	For seven of eight individuals, expenditure was either not being tracked, or was being tracked incorrectly, or receipts for expenses were missing. The agency needs to ensure that money is tracked accurately with receipts, and that the cash in / cash out method is accurate and timely.
<b>Status at follow-up</b>	For all Eight people whose funds handling was reviewed, the agency was documenting and tracking expenditure accurately and as required.
<b>#met /# rated at followup</b>	8/8
<b>Rating</b>	Met

<b>Indicator #</b>	L78
<b>Indicator</b>	Restrictive Int. Training
<b>Area Need Improvement</b>	Restrictive interventions were in place at two locations. At both locations, staff had not been trained on the restrictive interventions. The agency needs to ensure that where restrictive interventions exist, staff is trained to safely and consistently implement restrictive interventions.
<b>Status at follow-up</b>	At two locations where restrictive practices were in place, staff had been trained on how to consistently implement the restrictions.
<b>#met /# rated at followup</b>	2/2
<b>Rating</b>	Met

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<b>Indicator #</b>	L80
<b>Indicator</b>	Symptoms of illness
<b>Area Need Improvement</b>	At four out of eight locations staff had not been trained to recognize signs and symptoms of illness. The agency needs to ensure that staff and home providers are trained to recognize signs and symptoms of illness.
<b>Status at follow-up</b>	At all seven locations where this indicator was reviewed, staff had been trained on the signs and symptoms of illness.
<b>#met /# rated at followup</b>	7/7
<b>Rating</b>	Met

<b>Indicator #</b>	L85
<b>Indicator</b>	Supervision
<b>Area Need Improvement</b>	Supervision, oversight and monitoring was not provided at three of eight locations on a consistent basis. The agency needs to provide ongoing supervision, oversight and staff development on a regular and consistent basis.
<b>Status at follow-up</b>	At all seven locations where this indicator was reviewed, ongoing supervision, oversight and staff development was deemed to be occurring.
<b>#met /# rated at followup</b>	7/7
<b>Rating</b>	Met

<b>Indicator #</b>	L86
<b>Indicator</b>	Required assessments
<b>Area Need Improvement</b>	Required assessments were not submitted at least 15 days before the ISP for five of the nine individuals. The agency needs to ensure that required assessments are submitted to the DDS at least 15 days prior to the scheduled ISP meeting.
<b>Status at follow-up</b>	For all eight people reviewed, required assessments were submitted as required in preparation for the

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	ISP meeting.
<b>#met /# rated at followup</b>	8/8
<b>Rating</b>	Met

<b>Indicator #</b>	L87
<b>Indicator</b>	Support strategies
<b>Area Need Improvement</b>	Support Strategies for the ISP were not submitted at least 15 days before the ISP for three of nine individuals. The agency needs to ensure that Support Strategies are submitted to the DDS at least 15 days prior to the scheduled ISP meeting.
<b>Status at follow-up</b>	Support strategies for the ISP were submitted as required for all eight people that were reviewed.
<b>#met /# rated at followup</b>	8/8
<b>Rating</b>	Met

<b>Indicator #</b>	L88
<b>Indicator</b>	Strategies implemented
<b>Area Need Improvement</b>	For six out of twelve individuals, agreed upon ISP goals were not being implemented as agreed upon. The agency needs to ensure that services and supports for meeting goals are provided as agreed upon in the ISP.
<b>Status at follow-up</b>	Surveyors found that staff was supporting all eleven people that were reviewed to work towards meeting their agreed upon ISP goals, and that documentation was occurring as required.
<b>#met /# rated at followup</b>	11/11
<b>Rating</b>	Met

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

<b>Indicator #</b>	L48
<b>Indicator</b>	HRC



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<b>Area Need Improvement</b>	While the agency had a fully constituted Human Rights Committee, there had been only one meeting held in the past two years (11/18).The agency needs to ensure that its Human Rights Committee holds the required number of meetings per regulation and their bylaws, and that it continues to address the required topics.
<b>Status at follow-up</b>	The Human Rights Committee held a meeting during the follow-up time-frame; the committee met all the requirements including full membership, attendance and required reviews.
<b>#met /# rated at followup</b>	1/1
<b>Rating</b>	Met

<b>Indicator #</b>	L76
<b>Indicator</b>	Track trainings
<b>Area Need Improvement</b>	The agency did not ensure that two of four staff received all mandated trainings as required. The agency needs to ensure that it uses an effective tracking system to ensure that mandated trainings are completed by all staff within identified timelines.
<b>Status at follow-up</b>	All the staff whose training records were reviewed received mandated training; and, the agency exhibited a good system for tracking required trainings
<b>#met /# rated at followup</b>	5/5
<b>Rating</b>	Met

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