



**PROVIDER REPORT
FOR**

**Hopewell Inc.
3 Allied Drive
308 Dedham, MA 02026**

May 05, 2026

Version

Public Provider Report

**Prepared by the Department of Developmental Services
OFFICE OF QUALITY ENHANCEMENT**

SUMMARY OF OVERALL FINDINGS

Provider	Hopewell Inc.
Review Dates	4/6/2026 - 4/10/2026
Service Enhancement Meeting Date	4/23/2026
Survey Team	David Bullard Cristina Calderon (TL) Marie Fabiola Louis-Disla
Citizen Volunteers	

Survey scope and findings for Residential and Individual Home Supports

Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Residential and Individual Home Supports	11 location (s) 11 audit (s)	Full Review	62/68 2 Year License 04/23/2026 - 04/23/2028		26 / 26 Certified 04/23/2026 - 04/23/2028
Placement Services	11 location (s) 11 audit (s)			Full Review	20 / 20
Planning and Quality Management				Full Review	6 / 6

EXECUTIVE SUMMARY :

HopeWell Inc. is a non-profit human service agency located in Dedham Massachusetts; the agency has been in operation since 1964, providing Placement services (Shared Living) to individuals with Developmental and Intellectual Disabilities in Massachusetts. Other community services that HopeWell provides include Comprehensive Foster Care, Family Together Program, RISE (Education Support), My First Place, Adult Services "Independent Living Supports".

For this 2026 survey, the Massachusetts Department of Developmental Services (DDS) Metro Office of Quality Enhancement conducted a full licensing and certification review of HopeWell's Residential Services, inclusive of organizational systems and supports provided to individuals in the agency's Placement Homes.

The survey identified many areas of strength, where the agency demonstrated effective systems which resulted in positive outcomes. At the organizational level, the agency has an effective tracking system to ensure all employees and caregivers remain current in their DDS mandatory trainings. In relation to investigations, immediate actions were implemented to protect the individual and actions outlined in the plan/resolution report occurred within the specified time frame.

Relative to Licensing, the agency had developed a system to inform both individuals and guardians of their human rights and how to file a grievance or to whom they should talk to if they have a concern. Individuals were trained, and guardians, if applicable, were provided with information on how to report alleged abuse/neglect. In the domain of safety, all homes had current safety plans, all required annual inspections were conducted, and the locations were clean, environmentally safe and free of rodent and/or insect infestation. The agency has developed a monitoring mechanism that afforded the caregivers the opportunity to maintain the required documentation. Staff and caregivers were found to be trained and knowledgeable regarding each person's unique needs.

Relative to Certification, the agency had developed positive practices in the areas of providing choices, being knowledgeable about the satisfaction with services, and exploring interests. For example, the individuals all had the ability to choose whom they live with, their daily routines and schedules, how they decorated their rooms and other areas of the home, and how they liked to spend their leisure time. The individuals had opportunity to share their satisfaction with services with services during their monthly in-person meetings or on as needed basis. In the area of supporting community access and integration, the agency had developed a robust activity interest survey to engage the individuals in exploring a variety of options that one may not consider otherwise, for example engaging in different crafting activities or social activities with others.

In addition to these positive findings, there were some areas identified for the agency to develop and further strengthen systems. In the domain of Licensure, the agency HRC needs to be comprised of all required members and review all matters under its purview. Emergency fact sheets and Health Care Records need to be maintained as required and contain all required components and ISP documentation timelines should be adhered to. The agency needs to ensure that it completes and submits ISP assessments at least 15 days prior to each ISP meeting.

As a result of this licensing and certification survey, HopeWell, Inc. received an overall score of 91% of licensure indicators met. The agency will receive a Two-Year License for its Residential service grouping. The agency met 100% of all Certification indicators and therefore is Certified.

HopeWell, Inc. will conduct its own follow-up on licensing indicators that were not met during the survey and will submit the results to The DDS Metro Office of Quality Enhancement within 60 days of the Service Enhancement Meeting.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	7/8	1/8	
Residential and Individual Home Supports	55/60	5/60	
Placement Services			
Critical Indicators	7/7	0/7	
Total	62/68	6/68	91%
2 Year License			
# indicators for 60 Day Follow-up		6	

Organizational Areas Needing Improvement on Standards not met/Follow-up to occur:

Indicator #	Indicator	Area Needing Improvement
L48	The agency has an effective Human Rights Committee.	The agency's Human Rights Committee did not have adequate representation from an advocate/family/community member. The committee did not routinely review DPPC investigations. The agency needs to ensure that the committee is comprised of all the required members and that it reviews all matters under its purview.

Residential Areas Needing Improvement on Standards not met/Follow-up to occur:

Indicator #	Indicator	Area Needing Improvement
L8	Emergency fact sheets are current and accurate and available on site.	Four of eleven individuals' emergency fact sheets were missing required information. The agency needs to ensure that emergency fact sheets contain all required components.
L27	If applicable, swimming pools and other bodies of water are safe and secure according to policy.	At one location where the swimming pool was present, the agency did not ensure that the pool was secure. The agency needs to ensure that where swimming pools and bodies of water are present, DDS Water Safety guidelines are adhered to, inclusive of physical environmental safety measures, water safety training for support staff, and water safety assessment for each individual.

Residential Areas Needing Improvement on Standards not met/Follow-up to occur:

Indicator #	Indicator	Area Needing Improvement
L35	Individuals receive routine preventive screenings.	Four of ten individuals had not been supported to receive routine preventative screenings. The agency needs to ensure that all individuals are supported to receive routine preventative screenings based on their age and gender, and inclusive of recommended immunizations.
L43	The health care record is maintained and updated as required.	Eight of eleven individuals' Health Care Records were not updated and maintained as required. The agency needs to ensure Health Care Records are maintained and updated as required; annually at the time of an individual's ISP, and within thirty days of significant changes or events.
L86	Required assessments concerning individual needs and abilities are completed in preparation for the ISP.	Two of five individuals' ISP assessments were not completed and submitted within the established timeline. The agency needs to ensure that it completes and submits ISP assessments at least 15 days prior to each ISP meeting.

CERTIFICATION FINDINGS

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	6/6	0/6	
Residential and Individual Home Supports	20/20	0/20	
Placement Services	20/20	0/20	
Total	26/26	0/26	100%
Certified			

MASTER SCORE SHEET LICENSURE

Organizational: Hopewell Inc.

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
R L2	Abuse/neglect reporting	11/11	Met
L3	Immediate Action	5/5	Met
L4	Action taken	4/4	Met
L48	HRC	0/1	Not Met(0 %)
L74	Screen employees	1/1	Met
L75	Qualified staff	1/1	Met
L76	Track trainings	5/5	Met
L83	HR training	5/5	Met

Residential and Individual Home Supports:

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L1	Abuse/neglect training	I			11/11				11/11	Met
L5	Safety Plan	L			11/11				11/11	Met
R L6	Evacuation	L			11/11				11/11	Met
L8	Emergency Fact Sheets	I			7/11				7/11	Not Met (63.64 %)
R L11	Required inspections	L			11/11				11/11	Met
R L12	Smoke detectors	L			9/11				9/11	Met (81.82 %)
R L13	Clean location	L			11/11				11/11	Met
L14	Site in good repair	L			11/11				11/11	Met
L15	Hot water	L			10/11				10/11	Met (90.91 %)
L16	Accessibility	L			11/11				11/11	Met
L17	Egress at grade	L			11/11				11/11	Met
L19	Bedroom location	L			3/3				3/3	Met
L21	Safe electrical equipment	L			11/11				11/11	Met
L24	Locked door access	L			11/11				11/11	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L26	Walkway safety	L			11/11				11/11	Met
L27	Pools, hot tubs, etc.	L			0/1				0/1	Not Met (0 %)
L29	Rubbish /combustibles	L			11/11				11/11	Met
L30	Protective railings	L			11/11				11/11	Met
L31	Communication method	I			11/11				11/11	Met
L32	Verbal & written	I			11/11				11/11	Met
L33	Physical exam	I			11/11				11/11	Met
L34	Dental exam	I			11/11				11/11	Met
L35	Preventive screenings	I			6/10				6/10	Not Met (60.0 %)
L36	Recommended tests	I			11/11				11/11	Met
L37	Prompt treatment	I			11/11				11/11	Met
℞ L38	Physician's orders	I			3/3				3/3	Met
L39	Dietary requirements	I			2/2				2/2	Met
L41	Healthy diet	L			11/11				11/11	Met
L42	Physical activity	L			11/11				11/11	Met
L43	Health Care Record	I			3/11				3/11	Not Met (27.27 %)

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L46	Med. Administration	I			9/10				9/10	Met (90.0 %)
L47	Self medication	I			4/4				4/4	Met
L49	Informed of human rights	I			11/11				11/11	Met
L50 (07/21)	Respectful Comm.	I			11/11				11/11	Met
L51	Possessions	I			11/11				11/11	Met
L52	Phone calls	I			11/11				11/11	Met
L53	Visitation	I			11/11				11/11	Met
L54 (07/21)	Privacy	I			11/11				11/11	Met
L61	Health protection in ISP	I			3/3				3/3	Met
L63	Med. treatment plan form	I			5/5				5/5	Met
L64	Med. treatment plan rev.	I			4/5				4/5	Met (80.0 %)
L67	Money mgmt. plan	I			4/5				4/5	Met (80.0 %)
L68	Funds expenditure	I			5/5				5/5	Met
L69	Expenditure tracking	I			5/5				5/5	Met
L70	Charges for care calc.	I			8/8				8/8	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L71	Charges for care appeal	I			8/8				8/8	Met
L77	Unique needs training	I			11/11				11/11	Met
L80	Symptoms of illness	L			11/11				11/11	Met
L81	Medical emergency	L			11/11				11/11	Met
L84	Health protect. Training	I			3/3				3/3	Met
L85	Supervision	L			11/11				11/11	Met
L86	Required assessments	I			3/5				3/5	Not Met (60.0 %)
L87	Support strategies	I			4/5				4/5	Met (80.0 %)
L88	Strategies implemented	I			9/11				9/11	Met (81.82 %)
L90	Personal space/ bedroom privacy	I			11/11				11/11	Met
L91	Incident management	L			10/11				10/11	Met (90.91 %)
L93 (05/22)	Emergency back-up plans	I			11/11				11/11	Met
L94 (05/22)	Assistive technology	I			11/11				11/11	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L96 (05/22)	Staff training in devices and applications	I			11/11				11/11	Met
L99 (05/22)	Medical monitoring devices	I			1/1				1/1	Met
#Std. Met/# 60 Indicator									55/60	
Total Score									62/68	
									91.18%	

MASTER SCORE SHEET CERTIFICATION

Certification - Planning and Quality Management

Indicator #	Indicator	Met/Rated	Rating
C1	Provider data collection	1/1	Met
C2	Data analysis	1/1	Met
C3	Service satisfaction	1/1	Met
C4	Utilizes input from stakeholders	1/1	Met
C5	Measure progress	1/1	Met
C6	Future directions planning	1/1	Met

Placement Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	11/11	Met

Placement Services

Indicator #	Indicator	Met/Rated	Rating
C8	Family/guardian communication	11/11	Met
C9	Personal relationships	11/11	Met
C10	Social skill development	11/11	Met
C11	Get together w/family & friends	11/11	Met
C12	Intimacy	10/11	Met (90.91 %)
C13	Skills to maximize independence	11/11	Met
C14	Choices in routines & schedules	11/11	Met
C15	Personalize living space	11/11	Met
C16	Explore interests	11/11	Met
C17	Community activities	11/11	Met
C18	Purchase personal belongings	11/11	Met
C19	Knowledgeable decisions	11/11	Met
C46	Use of generic resources	11/11	Met
C47	Transportation to/ from community	11/11	Met
C48	Neighborhood connections	11/11	Met
C49	Physical setting is consistent	11/11	Met
C51	Ongoing satisfaction with services/ supports	11/11	Met
C52	Leisure activities and free-time choices /control	11/11	Met
C53	Food/ dining choices	11/11	Met