

DEPARTMENT OF DEVELOPMENTAL SERVICES

LICENSURE AND CERTIFICATION

DDS FOLLOW-UP REPORT

Provider Incompass Human Services, Inc Provider Address 4 Omni Way , Chelmsford
 Survey Team Browning, Chloe; Downing, John; Date(s) of Review 05-NOV-24 to 08-NOV-24

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	Combined Results post-Follow-up; for Deferred, License level	Sanction status post Follow-up
Residential and Individual Home Supports 11 Locations 17 Audits			7/9	<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	<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