



**PROVIDER REPORT
FOR**

**LEDGES, INC (THE)
PO Box 38
Hopedale, MA 01747**

March 03, 2025

Version

Public Provider Report

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

SUMMARY OF OVERALL FINDINGS

Provider	LEDGES, INC (THE)
Review Dates	1/29/2025 - 2/4/2025
Service Enhancement Meeting Date	2/18/2025
Survey Team	Ken Jones Janina Millet (TL)
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	1 location(s) 3 audit (s)	Full Review	76/78 2 Year License 02/18/2025 - 02/18/2027		26 / 26 Certified 02/18/2025 - 02/18/2027
Residential Services	1 location(s) 3 audit (s)			Full Review	20 / 20
Planning and Quality Management (For all service groupings)				Full Review	6 / 6

Survey scope and findings for Employment and Day Supports

Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Employment and Day Supports	1 location(s) 5 audit (s)	Full Review	58/59 2 Year License 02/18/2025 - 02/18/2027		18 / 18 Certified 02/18/2025 - 02/18/2027
Community Based Day Services	1 location(s) 5 audit (s)			Full Review	12 / 12
Planning and Quality Management (For all service groupings)				Full Review	6 / 6

EXECUTIVE SUMMARY :

The Ledges, Inc. is a human service organization that operates in Hopedale, Massachusetts. The agency provides residential, and day supports to adults with Intellectual and Developmental Disabilities, Head Injury, medical and varying mental health challenges in the Central and Western region of Massachusetts.

For this 2025 survey, The Department of Developmental Services (DDS) Central West Office of Quality Enhancement conducted a full licensing and certification review of supports offered to individuals in the agency's residential and community-based day programs.

Survey results showed that overall, The Ledges had effective systems for supporting the safety, health, well-being, and growth of individuals. At the organizational level, the human rights committee met all mandates and was effective in completing its duties. Agency staff was trained and knowledgeable on abuse and neglect reporting; they also received training on all relevant topics to ensure a competent workforce. The Ledges utilized an electronic training system with learning modules which included all DDS mandated trainings to provide and track trainings. Additional trainings in relation to people with more individualized support needs were provided at the sites by agency nursing staff using a customized Registered Nurse training curriculum.

In residential services, many positive findings were made in areas subject to licensing. Individuals' healthcare and clinical needs were addressed in a timely and effectively manner. Healthcare protocols and special diets were in place when needed; and staff were trained to ensure the correct implementation of protocols and plans. The agency utilized a digital system to track all medical appointments, document physicians' notes, and follow-up appointments; this enabled staff and the agency nurse to support people's medical visits within the required timeframe. Medication administration was another area of strength for the agency; staff were compliant with MAP requirements in administering medication and were knowledgeable about individuals' medical histories and overall care needs. In the area of human rights and abuse and neglect reporting, people were made aware of their rights and reporting procedures. Relative to safety, the sites were clean and in good repair, and people were supported to evacuate within the required timeframe during emergency drills. Staff were respectful of individuals in communication both written and verbal, and individual's preferences and taste were determined to be honored.

In the realm of certification in residential services, The Ledges' demonstrated effectiveness in supporting and enhancing relationships for individuals. People were supported to have ongoing contact with family and friends through a variety of means, which included in-person visits, use of iPads and iPhones for video calls, and telephone calls. With the assistance of staff, individuals were able to select from choices of leisure activity offerings they wanted to engage in. People were also fully supported to participate in household tasks in accordance with their abilities.

In community-based day services, the CBDS program area was clean and in good repair. Staff were respectful of individuals and were determined to be mindful of people's preferences and taste in service provision. Individuals were supported to provide regular input into the choice of activities offered, and which they wanted to participate. They were offered and supported to attend local and volunteer activities of their choice. Some of the opportunities included: the local Library, Museums, Bowling, Plays, Pottery classes and other local community events.

The survey identified a couple of licensing areas in residential services where further attention is required to meet compliance. The agency must ensure that individual's emergency fact sheets include a current list of medication being administered. Healthcare records must also be updated for ISP meetings, and within 30 days of a significant medical development or change. In CBDS, individual's emergency fact sheet must be updated to include a current list of medication being administered.

As a result of the successful survey, The Ledges will receive a Two-year License for Residential/IHS service grouping with a score of 97% of licensing indicators met. The residential service grouping is Certified with a score of 100% of certification indicators met.

The Ledges will also receive a Two-Year License for Employment/Day service grouping with a score of 98% of licensing indicators met. This employment/day service grouping is Certified with a score of 100% of certification indicators met.

The agency will conduct its own follow-up on licensing indicators that were not met in residential and day services; and submit the results to the DDS Central West Office of Quality Enhancement within 60-days of the service enhancement meeting.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	6/6	0/6	
Residential and Individual Home Supports	70/72	2/72	
Residential Services			
Critical Indicators	8/8	0/8	
Total	76/78	2/78	97%
2 Year License			
# indicators for 60 Day Follow-up		2	

	Met / Rated	Not Met / Rated	% Met
Organizational	6/6	0/6	
Employment and Day Supports	52/53	1/53	
Community Based Day Services			
Critical Indicators	8/8	0/8	
Total	58/59	1/59	98%
2 Year License			
# indicators for 60 Day Follow-up		1	

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.	For all three individuals, emergency fact sheets did not include a required component. Individuals' emergency fact sheets must be developed to include all required components, including a current medication.
L43	The health care record is maintained and updated as required.	For one of three individuals, the health care record was not updated when a significant medical event occurred. Individuals' health care records must be updated annually and within 30-days of a significant medical event occurring, including hospitalization, vaccinations, and new diagnoses.

Employment/Day 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.	For all five individuals, the emergency fact sheets did not include a required component. Individuals' emergency fact sheets must be developed to include all required components, including a current medication list.

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	
Residential Services	20/20	0/20	
Total	26/26	0/26	100%
Certified			

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	6/6	0/6	
Employment and Day Supports	12/12	0/12	
Community Based Day Services	12/12	0/12	
Total	18/18	0/18	100%
Certified			

MASTER SCORE SHEET LICENSURE

Organizational: LEDGES, INC (THE)

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
Ⓟ L2	Abuse/neglect reporting	2/2	Met
L48	HRC	1/1	Met
L74	Screen employees	1/1	Met
L75	Qualified staff	1/1	Met
L76	Track trainings	2/2	Met
L83	HR training	2/2	Met

Residential and Individual Home Supports:

Ind. #	Ind.	Loc. or Individ.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L1	Abuse/neglect training	I	3/3						3/3	Met
L5	Safety Plan	L	1/1						1/1	Met
Ⓟ L6	Evacuation	L	1/1						1/1	Met
L7	Fire Drills	L	1/1						1/1	Met
L8	Emergency Fact Sheets	I	0/3						0/3	Not Met (0 %)
L9 (07/21)	Safe use of equipment	I	2/2						2/2	Met
Ⓟ L11	Required inspections	L	1/1						1/1	Met
Ⓟ L12	Smoke detectors	L	1/1						1/1	Met
Ⓟ L13	Clean location	L	1/1						1/1	Met
L14	Site in good repair	L	1/1						1/1	Met
L15	Hot water	L	1/1						1/1	Met
L16	Accessibility	L	1/1						1/1	Met
L17	Egress at grade	L	1/1						1/1	Met
L18	Above grade egress	L	1/1						1/1	Met
L20	Exit doors	L	1/1						1/1	Met

L21	Safe electrical equipment	L	1/1							1/1	Met
L22	Well-maintained appliances	L	1/1							1/1	Met
L23	Egress door locks	L	1/1							1/1	Met
L24	Locked door access	L	1/1							1/1	Met
L25	Dangerous substances	L	1/1							1/1	Met
L26	Walkway safety	L	1/1							1/1	Met
L28	Flammables	L	1/1							1/1	Met
L29	Rubbish/combustibles	L	1/1							1/1	Met
L30	Protective railings	L	1/1							1/1	Met
L31	Communication method	I	3/3							3/3	Met
L32	Verbal & written	I	3/3							3/3	Met
L33	Physical exam	I	3/3							3/3	Met
L34	Dental exam	I	3/3							3/3	Met
L35	Preventive screenings	I	3/3							3/3	Met
L36	Recommended tests	I	3/3							3/3	Met
L37	Prompt treatment	I	3/3							3/3	Met
Pa L38	Physician's orders	I	2/2							2/2	Met
L39	Dietary requirements	I	1/1							1/1	Met
L40	Nutritional food	L	1/1							1/1	Met
L41	Healthy diet	L	1/1							1/1	Met
L42	Physical activity	L	1/1							1/1	Met
L43	Health Care Record	I	2/3							2/3	Not Met (66.67%)
L44	MAP registration	L	1/1							1/1	Met
L45	Medication storage	L	1/1							1/1	Met
Pa L46	Med. Administration	I	3/3							3/3	Met
L47	Self medication	I	3/3							3/3	Met
L49	Informed of human rights	I	3/3							3/3	Met
L50 (07/21)	Respectful Comm.	I	3/3							3/3	Met

L51	Possessions	I	3/3							3/3	Met
L52	Phone calls	I	3/3							3/3	Met
L53	Visitation	I	3/3							3/3	Met
L54 (07/21)	Privacy	I	3/3							3/3	Met
L55	Informed consent	I	1/1							1/1	Met
L60	Data maintenance	I	1/1							1/1	Met
L61	Health protection in ISP	I	2/2							2/2	Met
L62	Health protection review	I	2/2							2/2	Met
L63	Med. treatment plan form	I	1/1							1/1	Met
L67	Money mgmt. plan	I	3/3							3/3	Met
L68	Funds expenditure	I	3/3							3/3	Met
L69	Expenditure tracking	I	3/3							3/3	Met
L70	Charges for care calc.	I	3/3							3/3	Met
L71	Charges for care appeal	I	3/3							3/3	Met
L77	Unique needs training	I	3/3							3/3	Met
L80	Symptoms of illness	L	1/1							1/1	Met
L81	Medical emergency	L	1/1							1/1	Met
L82	Medication admin.	L	1/1							1/1	Met
L84	Health protect. Training	I	3/3							3/3	Met
L85	Supervision	L	1/1							1/1	Met
L86	Required assessments	I	3/3							3/3	Met
L87	Support strategies	I	2/2							2/2	Met
L88	Strategies implemented	I	2/2							2/2	Met
L90	Personal space/ bedroom privacy	I	3/3							3/3	Met
L91	Incident management	L	1/1							1/1	Met
L93 (05/22)	Emergency back-up plans	I	3/3							3/3	Met
L94 (05/22)	Assistive technology	I	3/3							3/3	Met

L96 (05/22)	Staff training in devices and applications	I	2/2							2/2	Met
L99 (05/22)	Medical monitoring devices	I	1/1							1/1	Met
#Std. Met/# 72 Indicator										70/72	
Total Score										76/78	
										97.44%	

Employment and Day Supports:

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L1	Abuse/neglect training	I			5/5	5/5	Met
L5	Safety Plan	L			1/1	1/1	Met
Ⓟ L6	Evacuation	L			1/1	1/1	Met
L7	Fire Drills	L			1/1	1/1	Met
L8	Emergency Fact Sheets	I			0/5	0/5	Not Met (0 %)
Ⓟ L11	Required inspections	L			1/1	1/1	Met
Ⓟ L12	Smoke detectors	L			1/1	1/1	Met
Ⓟ L13	Clean location	L			1/1	1/1	Met
L14	Site in good repair	L			1/1	1/1	Met
L15	Hot water	L			1/1	1/1	Met
L16	Accessibility	L			1/1	1/1	Met
L17	Egress at grade	L			1/1	1/1	Met
L18	Above grade egress	L			1/1	1/1	Met
L20	Exit doors	L			1/1	1/1	Met
L21	Safe electrical equipment	L			1/1	1/1	Met
L22	Well-maintained appliances	L			1/1	1/1	Met
L25	Dangerous substances	L			1/1	1/1	Met

L26	Walkway safety	L			1/1	1/1	Met
L28	Flammables	L			1/1	1/1	Met
L29	Rubbish/combustibles	L			1/1	1/1	Met
L31	Communication method	I			5/5	5/5	Met
L32	Verbal & written	I			5/5	5/5	Met
L37	Prompt treatment	I			5/5	5/5	Met
Ⓟ L38	Physician's orders	I			5/5	5/5	Met
L39	Dietary requirements	I			4/4	4/4	Met
L44	MAP registration	L			1/1	1/1	Met
L45	Medication storage	L			1/1	1/1	Met
Ⓟ L46	Med. Administration	I			4/4	4/4	Met
L49	Informed of human rights	I			5/5	5/5	Met
L50 (07/21)	Respectful Comm.	I			5/5	5/5	Met
L51	Possessions	I			5/5	5/5	Met
L52	Phone calls	I			5/5	5/5	Met
L54 (07/21)	Privacy	I			5/5	5/5	Met
L55	Informed consent	I			3/3	3/3	Met
L61	Health protection in ISP	I			5/5	5/5	Met
L62	Health protection review	I			2/2	2/2	Met
L63	Med. treatment plan form	I			3/3	3/3	Met
L64	Med. treatment plan rev.	I			1/1	1/1	Met
L67	Money mgmt. plan	I			3/3	3/3	Met
L77	Unique needs training	I			5/5	5/5	Met
L80	Symptoms of illness	L			1/1	1/1	Met
L81	Medical emergency	L			1/1	1/1	Met
Ⓟ L82	Medication admin.	L			1/1	1/1	Met
L84	Health protect. Training	I			5/5	5/5	Met
L85	Supervision	L			1/1	1/1	Met

L86	Required assessments	I			5/5	5/5	Met
L87	Support strategies	I			5/5	5/5	Met
L88	Strategies implemented	I			5/5	5/5	Met
L91	Incident management	L			1/1	1/1	Met
L93 (05/22)	Emergency back-up plans	I			5/5	5/5	Met
L94 (05/22)	Assistive technology	I			5/5	5/5	Met
L96 (05/22)	Staff training in devices and applications	I			5/5	5/5	Met
L99 (05/22)	Medical monitoring devices	I			1/1	1/1	Met
#Std. Met/# 53 Indicator						52/53	
Total Score						58/59	
						98.31%	

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

Residential Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	3/3	Met
C8	Family/guardian communication	3/3	Met

C9	Personal relationships	3/3	Met
C10	Social skill development	3/3	Met
C11	Get together w/family & friends	3/3	Met
C12	Intimacy	3/3	Met
C13	Skills to maximize independence	3/3	Met
C14	Choices in routines & schedules	3/3	Met
C15	Personalize living space	1/1	Met
C16	Explore interests	3/3	Met
C17	Community activities	2/2	Met
C18	Purchase personal belongings	3/3	Met
C19	Knowledgeable decisions	3/3	Met
C46	Use of generic resources	3/3	Met
C47	Transportation to/ from community	3/3	Met
C48	Neighborhood connections	3/3	Met
C49	Physical setting is consistent	1/1	Met
C51	Ongoing satisfaction with services/ supports	3/3	Met
C52	Leisure activities and free-time choices /control	3/3	Met
C53	Food/ dining choices	3/3	Met

Community Based Day Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	5/5	Met
C8	Family/guardian communication	5/5	Met
C13	Skills to maximize independence	5/5	Met
C37	Interpersonal skills for work	1/1	Met
C40	Community involvement interest	5/5	Met
C41	Activities participation	5/5	Met
C42	Connection to others	5/5	Met
C43	Maintain & enhance relationship	5/5	Met
C45	Revisit decisions	5/5	Met
C46	Use of generic resources	5/5	Met

C47	Transportation to/ from community	5/5	Met
C51	Ongoing satisfaction with services/ supports	5/5	Met