

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

Provider: LEDGES, INC (THE) _____

Provider Address: PO Box 38 , Hopedale _____

Name of Person Completing Form: Jonathan Arone. _____

Date(s) of Review: 17-APR-25 to 18-APR-25 _____

Follow-up Scope and results :		
Service Grouping	Licensure level and duration	# Indicators std. met/ std. rated
Employment and Day Supports	2 Year License	1/1
Residential and Individual Home Supports	2 Year License	2/2

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

Indicator #	L8
Indicator	Emergency Fact Sheets
Area Need Improvement	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.
Process Utilized to correct and review indicator	The current medication list for each individual was printed and attached to the Emergency Fact Sheet that is kept in the individual's folder.
Status at follow-up	Completed.
Rating	Met

Indicator #	L43
Indicator	Health Care Record
Area Need Improvement	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.
Process Utilized to correct and review indicator	The HCSIS healthcare record for the individual was updated to include the required vaccination.
Status at follow-up	Completed.
Rating	Met

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Employment and Day Supports Areas Needing Improvement on Standard not met - Identified by DDS

Indicator #	L8
Indicator	Emergency Fact Sheets
Area Need Improvement	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.
Process Utilized to correct and review indicator	The current medication list for each individual was printed and attached to the Emergency Fact Sheet that is kept in the individual's folder.
Status at follow-up	Completed.
Rating	Met