

DEPARTMENT OF DEVELOPMENTAL SERVICES

LICENSURE AND CERTIFICATION

Mid-Cycle Review Final Report

Provider Life Needs Co-op Inc.

Provider Address 205 North Plain Rd., Great Barrington

Survey Team Baldwin,Stephanie; Comeau,Andrea;

Date(s) of Review 23-SEP-24 to 26-SEP-24

Mid-Cycle Scope and results :					
Service Grouping	Licensure level and duration	# Indicators std. met/ std. rated at Mid-Cycle	Sanction status prior to Mid-Cycle	Combined Results post-Mid-Cycle;	Sanction status post Mid-Cycle
Residential and Individual Home Supports 4 Locations 5 Audits	Defer Licensure	4/8	<input checked="" type="checkbox"/> Eligible for new business <input type="checkbox"/> Ineligible for new business.	2 Year License with Mid-Cycle Review 66/71 (92.96%)	<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

Organizational Areas Needing Improvement on Standards not met:

Indicator #	L48
Indicator	HRC
Area Need Improvement	The agency's human right committee did not meet quorum requirements at all meetings and multiple members missed two or more meetings. In addition, there was no meeting held for the last quarter of 2022. The agency needs to ensure that HRC meetings occur at least quarterly and that members with required expertise maintain regular attendance. The human rights committee also needs to review restrictive practices.
Status at mid-cycle	The agency's Human Rights Committee did not meet membership requirements as it did not include at least three individuals receiving supports, and/or parents/guardians/advocates. Additionally, two of the current members did not meet the attendance requirements. missing two or more meetings over the past year.
#met /# rated at mid-cycle	0/1
Rating	NOT MET

Residential and Individual Home Supports Areas Needing Improvement on Standards not met:

Indicator #	L12
Indicator	Smoke detectors
Area Need Improvement	At two homes, the interconnected smoke and CO detection system was not operating properly when tested. The agency needs to ensure that all smoke detectors and CO detectors are fully operational.
Status at mid-cycle	At three homes, smoke detectors and carbon monoxide detectors were present in all required locations and fully operational. At one home, a carbon monoxide detector was not located within 10ft of an individual's bedroom.
#met /# rated at mid-cycle	3/4

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Rating	MET
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Indicator #	L43
Indicator	Health Care Record
Area Need Improvement	For two individuals, the health care records did not contain all the required information or were not updated within the required timelines. The agency needs to ensure that health care records are maintained and updated as required.
Status at mid-cycle	For 3 of 4 individuals, Health Care Records included all required information. For one individual, the Health Care Record did not contain all the required information nor updated within the required timelines.
#met /# rated at mid-cycle	3/4
Rating	MET

Indicator #	L51
Indicator	Possessions
Area Need Improvement	Two individuals do not have access to some of their possessions. When restriction on access to personal possessions is necessary, the intervention must be outlined in a written plan includes individualized educational and/or training strategies that will reduce the need for the intervention over time as well as behavioral criteria for reducing or eliminating the restriction. In addition, the human rights committee must review these restrictive intervention plans.
Status at mid-cycle	For 4 of 5 individuals, personal possessions were not being restricted without a written plan. One individual had a restriction in place related to the storage of a personal possession which had not been reviewed by the agency Human Rights Committee.
#met /# rated at mid-cycle	4/5
Rating	MET

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Indicator #	L56
Indicator	Restrictive practices
Area Need Improvement	For one individual there was a restrictive practice in place based on the need to lock a linen closet and basement door where the laundry was located. When a restrictive practice is necessary for health and safety reasons, the agency must develop a written plan that outlines the rationale for the restriction. Criteria for fading and/or eliminating the individual's restriction must be included.
Status at mid-cycle	At the time of mid-cycle review, there were no restrictive practices in place that impacted others living in the home.
#met /# rated at mid-cycle	
Rating	NOT RATED

Indicator #	L61
Indicator	Health protection in ISP
Area Need Improvement	For two individuals who required health-related supportive equipment, these supports lacked authorization from a qualified health care practitioner. The agency needs to ensure that when supportive equipment and devices are needed by an individual, these supports are authorized by a qualified practitioner. In addition, instructions outlining their proper use and application as well as for their care and maintenance must be developed to ensure consistency of practice.
Status at mid-cycle	For one individual who required health-related supportive equipment, the supports and protections in place did not have written authorization from a medical professional, and the accompanying documentation did not include cleaning and care of the device, the documentation of use, and safety checks.
#met /# rated at mid-cycle	2/3
Rating	NOT MET

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Indicator #	L64
Indicator	Med. treatment plan rev.
Area Need Improvement	Three of four medication plans reviewed were not included in the ISP or included in the completed ISP packet or uploaded into HCSIS. In addition, two individuals were administered antipsychotic medication and no Rogers orders were in place, nor had the agency notified the DDS Area Office of the need for this legal protection. Medication treatment plans need to be included in the ISP in one of the approved methods. Additionally, the agency needs to notify the DDS Area Office when individuals who have guardians and are not legally competent are prescribed antipsychotic medication.
Status at mid-cycle	For four individuals reviewed, medication treatment plans had been incorporated into the ISPs for review by the ISP team.
#met /# rated at mid-cycle	4/4
Rating	MET

Indicator #	L68
Indicator	Funds expenditure
Area Need Improvement	For four of the five individuals who required support to manage and spend their funds, adequate documentation was lacking in order to verify that the items purchased were of direct benefit to the individual. The agency needs to have a system of financial monitoring and protection to demonstrate that purchases made were for the individual's benefit.
Status at mid-cycle	For two individuals who required support to manage their funds, errors made in financial transfers had not been rectified. For one of the individuals, personal funds were being utilized to make household purchases.
#met /# rated at mid-cycle	3/5
Rating	NOT MET

Indicator #	L69
Indicator	Expenditure tracking

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Area Need Improvement	For four of the five individuals who required support to manage and spend their funds, individual expenditures were not consistently tracked and documented. Purchases were made, and neither receipts nor invoices were available to verify how the money was spent. In addition, the agency was not following its own financial policies and procedures regarding documentation and tracking. The agency needs to ensure that individual expenditures are documented and tracked in accordance with DDS regulatory requirements as well as agency financial policies and procedures.
Status at mid-cycle	For three individuals who required support to manage their finances, individual expenditures were not consistently tracked and documented. Purchases were made, and neither receipts nor invoices were available to verify how the money was spent. Agency financial policies and procedures regarding the documentation and tracking of finances were not being adhered to.
#met /# rated at mid-cycle	2/5
Rating	NOT MET