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| Provider | Living Hope Services Inc. |  | Provider Address | 85 Crescent Avenue , Chelsea |
| Survey Team | Hazelton, John;  |  | Date(s) of Review | 24-MAY-22 to 31-MAY-22 |

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| **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 |
| Employment and Day Supports | 2 Year License |  | 3/5 | x | Eligible for new business(Two Year License) | 2 Year License | x | Eligible for New Business(80% or more std. met; no critical std. not met) |
| 1 Locations 5 Audits  |  |  |  | o | Ineligible for new business. (Deferred Status: Two year mid-cycle review License) |  | o | Ineligible for New Business(<=80% std met and/or more critical std. not met) |

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| **Summary of Ratings** |

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| **Employment and Day Supports Areas Needing Improvement on Standard not met - Identified by DDS** |
| **Indicator #** | L15 |
| **Indicator** | Hot water |
| **Area Need Improvement** | Hot water temperature at the Day service location measured outside the required temperature range. The agency needs to ensure that water temperature is maintained to be within the required range at all its locations. |
| **Status at follow-up** | One of the three sinks within the program does not supply hot water at the required temperature; the men's bathroom sink measured at 83.6 degrees. A Notice of Action Required was issued, and the temperature was adjusted to be within the acceptable range. |
| **#met /# rated at followup** | 0/1 |
| **Rating** | Not Met |
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| **Indicator #** | L87 |
| **Indicator** | Support strategies |
| **Area Need Improvement** | For four of nine individuals, support strategies for the ISP were not submitted within required timeframes. The agency needs to ensure that support strategies are submitted to the DDS Area Office at least 15 days prior to scheduled ISP meetings. |
| **Status at follow-up** |  |
| **#met /# rated at followup** |  |
| **Rating** | Not Rated |
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| **Employment and Day Supports Areas Needing Improvement on Standard not met - Identified by Provider** |
| **Indicator #** | L86 |
| **Indicator** | Required assessments |
| **Issue Identified** | Not all Assessments have not been submitted into HCSIS within the required timeline. |
| **Actions Planned/Occurred** | While some programs (managers) have good systems in place to submit these on time, others struggle in this area. We have identified the programs where these are chronically submitted past the deadline and are starting to provide more intensive training and oversight. |
| **Status at follow-up** |  |
| **Rating** | Not Rated |
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| **Indicator #** | L88 |
| **Indicator** | Strategies implemented |
| **Issue Identified** | While programs are actively working with individuals on their goals, they are not always properly documenting progress. |
| **Actions Planned/Occurred** | Much like with L85, once we have our electronic program record, we will have access to be able to track the frequency and quality of progress notes for individuals. We will continue to provide training to managers and staff on the importance of tracking these instances along with how to create simple tracking tools for staff to use. |
| **Status at follow-up** |  |
| **Rating** | Not Rated |
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