

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

Provider: MAB COMMUNITY SERVICES _____

Provider Address: 200 Ivy St , Brookline _____

Name of Person Anastasia Kanistras
Completing Form: _____

Date(s) of Review: 25-OCT-23 to 26-OCT-23 _____

Follow-up Scope and results :		
Service Grouping	Licensure level and duration	# Indicators std. met/ std. rated
Residential and Individual Home Supports	Defer Licensure	1/3
Employment and Day Supports		3/3

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

Indicator #	L47
Indicator	Self medication

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Area Need Improvement	One of two individuals was not re-assessed relative to self-medication after requiring external support in this area over a period of time. The agency needs to ensure that all individuals are assessed relative to self-medication.
Process Utilized to correct and review indicator	Participant was evaluated by the PCP and referred for assistive tech medication management system, Med Minder. The participant and supporting staff were trained on utilizing and managing the system with great success.
Status at follow-up	Complete. Participant has been successful in utilizing Med Minder assistive technical supports.
Rating	Not Met

Indicator #	L56
Indicator	Restrictive practices
Area Need Improvement	At two of four locations where restrictive practices were in place there was no outline developed with provisions so as not to unduly restrict the rights of others. The agency needs to ensure that when restrictive practices are required, a written outline is developed to include all DDS requirements.
Process Utilized to correct and review indicator	Documentation and consent forms were updated to reflect proper permissions. Residential program teams worked with clinicians to evaluate participants' safety needs and necessary restrictions.
Status at follow-up	Completed for all applicable individuals and sites.
Rating	Met

Indicator #	L91
Indicator	Incident management

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Area Need Improvement	At three of ten locations, incidents were not reported and/or finalized within the required timelines. The agency needs to ensure that incidents are reported and finalized within the required timelines.
Process Utilized to correct and review indicator	Internal quality management systems supporting report submissions were developed. Trainings were developed and executed communicating proper submission timelines for incident reports and medication occurrences.
Status at follow-up	In Progress - In an internal audit of recent incident report submission 4 out of 10 incident reports were not finalized within the required timelines.
Rating	Not Met

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

Indicator #	L84
Indicator	Health protect. Training
Area Need Improvement	For two of three individuals who use of health-related equipment, staff were not trained relative to the cleaning and safety checks of the supports. The agency needs to ensure that staff are trained on the correct utilization of people's health-related supports including cleaning, care and safety checks.
Process Utilized to correct and review indicator	Nursing and program audits were conducted leading to the development of data tracking and related trainings for all health-related equipment.
Status at follow-up	Completed for all individuals.
Rating	Met

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Indicator #	L88
Indicator	Strategies implemented
Area Need Improvement	For four of eleven individuals, the agency was not supporting the implementation of goals using strategies identified and agreed upon in people's ISP's. The agency needs to provide support for the actualization of goals using strategies identified and agreed upon in people's ISP's.
Process Utilized to correct and review indicator	Program schedules were adjusted to offer targeting programming directly related to participant's ISP goals.
Status at follow-up	Completed for all individuals.
Rating	Met

Indicator #	L91
Indicator	Incident management
Area Need Improvement	One incident report at the location was not submitted within the required timelines. The agency needs to ensure that all incident reports are submitted and finalized within the required timelines.
Process Utilized to correct and review indicator	Internal quality management systems supporting report submissions were developed. Trainings were developed and executed communicating proper submission timelines for incident reports and medication occurrences.
Status at follow-up	In Progress - In an internal audit of recent incident report submission 4 out of 10 incident reports were not finalized within the required timelines.
Rating	Met