DEPARTMENT OF DEVELOPMENTAL SERVICES LICENSURE AND CERTIFICATION

DDS FOLLOW-UP REPORT

Provider	M.O. Life, Inc.	Provider Address	43 Daniel Street , Fairhaven
Survey Team	Napolitan, Tina; Condon, Kayla;	Date(s) of Review	25-APR-19 to 26-APR-19

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
Residential and Individual Home Supports	2 Year License		7/11	☑ Eligible for new business (Two Year License)	2 Year License	⊠ Eligible for New Business (80% or more std. met; no critical std. not met)
3 Locations 4 Audits				☐ Ineligible for new business. (Deferred Status: Two year midcycle review License)		☐ Ineligible for New Business (<=80% std met and/or more critical std. not met)
Employment and Day Supports	2 Year License		4/9	⊠ Eligible for new business (Two Year License)	2 Year License	⊠ Eligible for New Business (80% or more std. met; no critical std. not met)
2 Locations 6 Audits				☐ Ineligible for new business. (Deferred Status: Two year midcycle review License)		☐ Ineligible for New Business (<=80% std met and/or more critical std. not met)

Summary of Ratings

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

Indicator #	L39
Indicator	Dietary requirements
	One individual was prescribed a specialized diet. As the individual's support needs change, the agency needs to develop a mechanism to track information that can be shared with all staff for consistency with her specialized diet.
	One individual was reviewed, in this instance the agency had developed a method to monitor the physician's recommendations regarding her specialized diet and had trained staff.
#met /# rated at followup	1/1
Rating	Met

Indicator #	L47
Indicator	Self medication
	Two of the six individuals, who participated in the survey had not been evaluated for their self-medicating skills. This is essential to ensure that individuals identify any potential changes in skills and to identify any supports that many be needed to maintain independence. The agency needs regularly reevaluate individuals self-medicating skills.
Status at follow-up	Two of two individuals reviewed had been evaluated for the ability to self-medicate within the past year ensuring the agency was providing the appropriate supports to support and enhance independence.
#met /# rated at followup	2/2
Rating	Met

Indicator #	L55
Indicator	Informed consent
	In four instances, the agency obtained consent for photo use without identifying the image that would be used, the purpose or to whom the information would be released. The agency needs to ensure that

	when obtaining consent all required information is included.
	The agency has amended the photo/video release consent form to include the identification of the image, the purpose of use and to whom the information will be released to. The agency had not publicized photos for those people supported through residential or IHS services.
#met /# rated at followup	
Rating	Not Rated

Indicator #	L61
Indicator	Health protection in ISP
	For one of the two individuals supported with the use of supports and health related protections, all required information including a procedure for and frequency to ensure equipment is properly functioning was not in place. The agency needs to ensure that all required information is in place for proper utilization of supports.
·	One individual was reviewed to determine if the agency was ensuring supportive and health related equipment is properly functioning. The agency has developed and implemented a form in which staff who come into contact with an individual complete daily to note the condition of the equipment.
#met /# rated at followup	1/1
Rating	Met

Indicator #	L62
Indicator	Health protection review
	For one of two individuals, the information regarding the use of supportive and health related protections was not reviewed by all the required groups. The agency needs to ensure all supportive and health related protections are reviewed by all of the required groups.
	For one individual reviewed, the agency had not yet presented the individual's support and health related protection to the Human Rights Committee. The agency has this on the proposed schedule for the upcoming next meeting in May/June.
#met /# rated at followup	0/1
Rating	Not Met

Post 60 Day Area Office/HRC Follow-up (Performed 30 days later) Expected Area Office Follow Up Date: 5/25/2019	
Forwarded to	Human Rights
AO/Provider Actions	
Provider Status Rating by AO/HRC (Met or Not Met)	Not Met

Indicator #	L63
Indicator	Med. treatment plan form
Area Need Improvement	Two medication treatment plans (MTP) did not include a description of the symptoms the medication is prescribed to address, all behavior modifying medication prescribed or method to track and convey information to prescribing clinicians in order to evaluate the effectiveness of the medication.
Status at follow-up	The agency management staff has undergone training regarding the components of the medication treatment plan (MTP). The agency has also changed it's process for developing an MTP to include an additional level of review from a management staff. For three individuals reviewed, the agency has included all relevant in formation and developed related data collections forms to track behaviors related to the identified medication. The agency has implemented the process in which to collect data, however it has not yet been presented to a treating psychiatrist as appointments have not yet occurred since the time of the last review.
#met /# rated at followup	3/3
Rating	Met

Indicator #	L64
Indicator	Med. treatment plan rev.
	Two medication treatment plans (MTP) did not include all of the required components such as all of the medications a person is prescribed, therefore could not be sufficiently reviewed by the required groups. The agency needs to ensure medication treatment plans with all the required components are reviewed by the required groups.
·	For three plans reviewed, the agency had not yet had the Medication Treatment Plans reviewed by all the required groups, The agency needs to ensure that Medication treatment plans receive all the required reviews.

#met /# rated at followup	0/3
Rating	Not Met
	Post 60 Day Area Office/HRC Follow-up (Performed 30 days later) Expected Area Office Follow Up Date: 5/25/2019
Forwarded to	Human Rights
AO/Provider Actions	
Provider Status Rating by AO/HRC (Met or Not Met)	Not Met

Indicator #	L86
Indicator	Required assessments
Area Need Improvement	Assessments were not submitted within the required time frames for three of the individuals. The agency needs to ensure that assessments are submitted to the DDS area office at least 15 days prior to the scheduled ISP meeting.
Status at follow-up	One ISP within the support of IHS had occurred in the past 60 days. For this individual, the agency did not meet the required timelines for the submission of ISP assessments. The agency need to ensure that required assessments are submitted at least 15 days prior to the scheduled ISP meeting.
#met /# rated at followup	0/1
Rating	Not Met
	Post 60 Day Area Office/HRC Follow-up (Performed 30 days later) Expected Area Office Follow Up Date: 5/25/2019
Forwarded to	Area Director
AO/Provider Actions	Nine ISP's took place within the post 60 day f/u. 8 out 9 did not meet required timelines for submission.
Provider Status Rating by AO/HRC (Met or Not Met)	Not Met

Indicator #	L87

Indicator	Support strategies
Area Need Improvement	Support strategies were not submitted within the required time frames for two of the individuals. The agency needs to ensure that support strategies are submitted to the DDS area office at least 15 days prior to the scheduled ISP meeting.
Status at follow-up	One ISP within the support of IHS had occurred in the past 60 days. For this individual, the agency did not meet the required timelines for the submission of support strategies. The agency need to ensure that support strategies are submitted at least 15 days prior to the scheduled ISP meeting.
#met /# rated at followup	0/1
Rating	Not Met
	Post 60 Day Area Office/HRC Follow-up (Performed 30 days later) Expected Area Office Follow Up Date: 5/25/2019
Forwarded to	Area Director
AO/Provider Actions	Nine ISP's took place within the post 60 days f/u. 7 out of 9 Support Strategies did not meet the required timelines for submission.
Provider Status Rating by AO/HRC (Met or Not Met)	Not Met

Indicator #	L91
Indicator	Incident management
·	In one location, there were two incidents that were not reported. The agency needs to ensure that all staff are knowledgeable of the criteria for reportable incidents and that they are reported within the timelines.
	The agency convened training with staff to review incident management reporting timelines. The reporting and submission of incidents was reviewed at two locations. There were no events in the past 60 days requiring that an incident report be filed. A review of documentation confirmed that no events occurred to warrant the filing of an incident report.
#met /# rated at followup	2/2
Rating	Met

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

Indicator #	L16
Indicator	Accessibility
Area Need Improvement	In one location, the kitchen area was not fully accessible or usable by all individuals who have limited mobility and use adaptive equipment. The agency needs to ensure the location is adapted and accessible to the needs of the individuals.
Status at follow-up	At one location, the kitchen area continues to not be fully accessible or usable by all individuals who have limited mobility and/or use adaptive equipment. The agency is working to expand its physical space at this location. The agency needs to ensure that the location is adapted and accessible to the needs of the individuals.
#met /# rated at followup	0/1
Rating	Not Met
	Post 60 Day Area Office/HRC Follow-up (Performed 30 days later) Expected Area Office Follow Up Date: 5/25/2019
Forwarded to	Area Director
AO/Provider Actions	Although the provider has plans to make the kitchen accessible necessary construction has not been started.
Provider Status Rating by AO/HRC (Met or Not Met)	Not Met

Indicator #	L49
Indicator	Informed of human rights
Area Need Improvement	Two of the five individuals and/ or their guardian interviewed, did not know how to file a grievance or know whom they should talk to if they have a concern. The agency needs to ensure that on an annual basis, individuals and guardians are informed of the procedures to file a grievance and to whom they should contact with concerns.
Status at follow-up	The agency has developed a grievance procedure and is in the process of reviewing the procedure on a one to one basis with individuals receiving employment and day supports. While the agency has met with twenty-six individuals, the two individuals selected for this review had not yet been informed on how to file a grievance. The agency needs to continue its efforts to ensure that individuals and/or guardian are informed of the procedures to file a grievance and to whom they should contact with concerns.

#met /# rated at followup	0/2
Rating	Not Met
	Post 60 Day Area Office/HRC Follow-up (Performed 30 days later) Expected Area Office Follow Up Date: 5/25/2019
Forwarded to	Human Rights
AO/Provider Actions	
Provider Status Rating by AO/HRC (Met or Not Met)	Not Met

Indicator #	L55
Indicator	Informed consent
	In two instances, the agency obtained consent without identifying the image that would be used, the purpose of use or to whom the information would be released. The agency needs to ensure that when obtaining media related consents that all required information is included.
	The agency has amended the photo/video release consent form to include the identification of the image, the purpose of use and to whom the information will be released to. Since the review, the agency has publicized photos for two people supported through employment and day supports and the necessary information was in place.
#met /# rated at followup	2/2
Rating	Met

Indicator #	L67
Indicator	Money mgmt. plan
	For one person, for whom the agency has shared funds management responsibility, agreement of the money management support plan had not been obtained by the guardian. The agency needs to ensure that agreement to money management supports plans is obtained.
	The agency has developed a new policy and procedure to address shared and delegated money management responsibilities. For two individuals, the agency had utilized this new process and developed money management support plans. Additionally, agreement to the plans was obtained.

#met /# rated at followup	2/2
Rating	Met

Indicator #	L86
Indicator	Required assessments
Area Need Improvement	Assessments were not submitted within the required time frames for four of the individuals. The agency needs to ensure that assessments are submitted to the DDS area office at least 15 days prior to the scheduled ISP meeting.
Status at follow-up	Two ISP's within the day supports were reviewed. For one of two individuals, the agency did not meet the required timelines for the submission of ISP assessments. The agency need to ensure that required assessments are submitted at least 15 days prior to the scheduled ISP meeting.
#met /# rated at followup	1/2
Rating	Not Met
	Post 60 Day Area Office/HRC Follow-up (Performed 30 days later) Expected Area Office Follow Up Date: 5/25/2019
Forwarded to	Area Director
AO/Provider Actions	13 ISP's took place within the post 60 day f/u. 11 out of 13 did not meet the required timelines for submission.
Provider Status Rating by AO/HRC (Met or Not Met)	Not Met

Indicator #	L87
Indicator	Support strategies
·	Support strategies were not submitted within the required time frames for four of the individuals. The agency needs to ensure that support strategies are submitted to the DDS area office at least 15 days prior to the scheduled ISP meeting.
	Two ISP's within the day supports were reviewed. For one of two individuals, the agency did not meet the required timelines for the submission of support strategies. The agency need to ensure that support strategies are submitted at least 15 days prior to the scheduled ISP meeting.

#met /# rated at followup	1/2		
Rating	Not Met		
Post 60 Day Area Office/HRC Follow-up (Performed 30 days later) Expected Area Office Follow Up Date: 5/25/2019			
Forwarded to	Area Director		
AO/Provider Actions 13 ISP's took place within the post 60 day f/u. 11 out of 13 did not meet the required timelines submission for Support Strategies			
Provider Status Rating by AO/HRC (Met or Not Met)	Not Met		

Indicator #	L91		
Indicator	Incident management		
	In one location, there were incidents that were not reported and/ or finalized within the required timelines. The agency needs to ensure that all staff are knowledgeable of the criteria for reportable incidents and that they are reported within the timelines.		
Status at follow-up	The agency convened training with staff to review incident management reporting timelines. The reporting and submission of incidents was reviewed at one location. Incidents were reported as required and in one location an incident was not finalized within the required timeframe.		
#met /# rated at followup	0/1		
Rating	Not Met		
	Post 60 Day Area Office/HRC Follow-up (Performed 30 days later) Expected Area Office Follow Up Date: 5/25/2019		
Forwarded to	Area Director		
AO/Provider Actions	No reportable incidents since 4-25-19		
Provider Status Rating by AO/HRC (Met or Not Met)	Not Met		

Administrative Areas Needing Improvement on Standard not met - Identified by DDS

Indicator #	L48

Indicator	HRC			
	The agency's Human Rights Committee met three times in the last year, which does not meet the requirement of meeting at least quarterly. The agency needs to ensure their Human Rights Committee meets the requirement of meeting at least quarterly.			
	The agency's Human Rights Committee (HRC) met once in the past 60 days. The agency should continue to focus on ensuring that the HRC meets at least on a quarterly basis within a 12 month time frame.			
#met /# rated at followup 1/1				
Rating	Met			

Indicator #	L83			
Indicator	HR training			
Area Need Improvement Agency staff were not trained in the mandated reporting requirements that were required 2018. A Notice of Action was issued. The agency needs to ensure that all staff are trained current mandated reporting training requirements.				
	The agency is tracking which staff are trained in mandated reporting utilizing the DDS training video. The agency has trained all existing staff in the topic of mandated reporting in accordance to the requirements as of April 1, 2108. The agency was able to show that nine of the eleven newly hired staff had undergone the required training.			
#met /# rated at followup	9/11			
Rating	Met			

Follow-up Detail Report

For provider and area office use only. This page elaborates on all of the indicators reviewed at follow-up where the standard was not met.

Licensure Organizational:

Indicator	Source	Issue

Employment and Day Supports

Indicator	Service Type	Location	Individual	Issue
L16	Community Based Day Services	4 Lambeth Park Dr.		The kitchen in the CBDS program is not accessible to all.
L49	Employment Support Services	105 Sconticut Neck Road	BD	The agency has begun a process in which they are informing individuals of how to file a grievance and provide individuals with a human rights booklet while obtaining a receipt for the booklet. BD had not been informed to date.
L49	Employment Support Services	105 Sconticut Neck Road	WG	The agency has begun a process in which they are informing individuals of how to file a grievance and provide individuals with a human rights booklet while obtaining a receipt for the booklet. WG had not been informed to date.
L86	Employment Support Services	105 Sconticut Neck Road	DS	The ISP assessments were requested on time on 3/19/19 and the assessment for employment are not submitted on 4/3/19.
L87	Employment Support Services	105 Sconticut Neck Road	DS	Support strategies due 3/19/19 were submitted 3/21/19.
L91	Community Based Day Services	4 Lambeth Park Dr.		There were two incidents that were created late (7 and 10 days) and one incident that was finalized late (10 days).

Residential and Individual Home Supports

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L62	Individual Home Supports	330 Main Street Apt. #202B	JM	The support and health related protections have not yet been reviewed by the Human Rights Committee.
L64	Residential Services	288 Church St.	BR	The current MTP has not yet been reviewed by all the required groups.
L64	Individual Home Supports	30 McGann Terrace	KS	This individuals court ordered treatment plan expired in January 2019. The MTP amended 4/19/19 has not yet been reviewed by all the required groups.
L64	Individual Home Supports	330 Main Street Apt. #202B	DV	The MTP modified 4/22/19 nor the original MTP had been reviewed by all the required groups.
L86	Individual Home Supports	330 Main Street Apt. #202B	EF	ISP assessments requested on time were due 3/14/19 and submitted on 3/26/19.
L87	Individual Home Supports	330 Main Street Apt. #202B	EF	Support strategies due 3/14/19 were submitted on 4/3/19.