

DEPARTMENT OF DEVELOPMENTAL SERVICES

LICENSURE AND CERTIFICATION

Mid-Cycle Review Final Report

Provider	MULTICULTURAL COMMUNITY SERVICES	Provider Address	1000 Wilbraham Road, Springfield
Survey Team	Edi-Osagie, Raymond; Chiaravallotti, Danielle; Comeau, Andrea; Baldwin, Stephanie;	Date(s) of Review	24-SEP-25 to 30-SEP-25

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 17 Locations 18 Audits	Defer Licensure	8/12	<input checked="" type="checkbox"/> Eligible for new business <input type="checkbox"/> Ineligible for new business.	2 Year License with Mid-Cycle Review 87/91 (95.60%)	<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 Human Rights Committee (HRC) meeting minutes reflected the absence of a required member (medical professional) at several meetings. The HRC did not meet quarterly and was not reviewing the status of investigations and actions required pertaining to placement services. The agency needs to ensure that HRC required membership is maintained at meetings, that the HRC meet quarterly meeting requirements, and that the HRC is able fulfill its responsibility in reviewing all agency complaints and investigations.
Status at mid-cycle	Not Met. The agency's human rights committee had not reviewed applicable policies and procedures on an annual basis and also had not reviewed the human rights training materials that all individuals and staff are trained on.
#met /# rated at mid-cycle	0/1
Rating	NOT MET

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Indicator #	L66
Indicator	HRC restraint review
Area Need Improvement	Two restraint reports had not been reviewed by the agency Human Rights Committee. The agency needs to ensure that all restraints are reviewed by the human rights committee within the required timeframes (either at the next meeting or within 120 days of the restraint).
Status at mid-cycle	Not Met. Four out of eight restraints that occurred between September 2024 and September 2025 were not reviewed by the human rights committee.
#met /# rated at mid-cycle	4/8
Rating	NOT MET

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

Indicator #	L12
Indicator	Smoke detectors
Area Need Improvement	Five locations did not have correctly placed or operational smoke and or CO detection systems. For two residential sites, one home did not have any CO detectors in the home and the other did not have a CO detector within 10 feet of the bedroom. For placement services, three homes did not have operable smoke and or CO detectors on all levels of the home. The agency needs to ensure that smoke and carbon monoxide detectors are properly located and are fully operational.
Status at mid-cycle	Met. All fourteen reviewed locations had appropriately located and operational smoke and carbon monoxide detectors.
#met /# rated at mid-cycle	14/14
Rating	MET

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Indicator #	L13
Indicator	Clean location
Area Need Improvement	Four homes required actions needed to be taken to address environmental safety and sanitation issues within the home. At three residential locations, significant disrepair and the potential presence of mold in bathroom areas had not been addressed. One placement location, the agency had not supported the home care provider around identifying or addressing repairs needed around the bathtub area. The agency needs to ensure the development and implementation of an effective mechanism for environmental safety review at all service locations in order to identify areas of necessary home maintenance and repair. Once issues are identified, the agency needs to ensure that home repairs are planned for and made in a timely manner.
Status at mid-cycle	Met. All fourteen reviewed locations were clean and environmentally safe. The agency had remodeled multiple bathrooms at residential locations and developed a priority list of future bathroom remodels.
#met /# rated at mid-cycle	14/14
Rating	MET

Indicator #	L27
Indicator	Pools, hot tubs, etc.
Area Need Improvement	Two placement locations had swimming pools that did not have adequate safeguards in place to minimize unauthorized access to the pools. The agency needs to ensure that adequate safeguards are in place for above ground and in ground pools that is consistent with the DDS Water Safety Policy.

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Status at mid-cycle	Not Met. At two placement locations with bodies of water at the home, the shared living providers had not completed the appropriate water safety training. At one placement location, the shared living provider had a hot tub in the backyard and the MCS case manager for the home was not aware that there was a hot tub. The agency needs to ensure that shared living providers are appropriately trained in water safety, and that all case managers are aware of any type of bodies of water at all shared living homes.
#met /# rated at mid-cycle	0/2
Rating	NOT MET

Indicator #	L43
Indicator	Health Care Record
Area Need Improvement	Health Care Records (HCR's) for three individuals did not contain their most recent medical diagnosis, allergy information, or updated personal information. The agency needs to ensure that health care records contain accurate and current information, including that HCR's are updated within one month when significant changes occur, for example, change in recent medical diagnosis, immunizations, hospitalization, and or change of personal information.
Status at mid-cycle	Not Met. Three individuals in shared living did not have up-to-date information on medical appointments, medical testing, hospitalizations, and/or vaccinations included in the health care records within 30 days of occurrence. The agency needs to ensure that all medical testing, medical appointments, vaccinations and hospitalizations are documented in the healthcare record within 30 days of occurrence.
#met /# rated at mid-cycle	11/14
Rating	NOT MET

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Indicator #	L47
Indicator	Self medication
Area Need Improvement	One individual who was being supported to self-administer medications, did not have a self-medication assessment in place. The agency needs to ensure that for individuals who are self-medicating, a clear assessment has been completed, documenting their skills in this area.
Status at mid-cycle	Met. All five individuals who were reviewed for self-administering of medications had the appropriate self-medicating assessments in place.
#met /# rated at mid-cycle	5/5
Rating	MET

Indicator #	L56
Indicator	Restrictive practices
Area Need Improvement	For two individuals, environmental restrictions in place without a written rationale or a plan to fade the restrictions. The agency needs to ensure that when restrictive practices are in place, they outlined in a written plan, which identifies the rationale, and outlines the practices as the least restrictive alternative. The agency needs to ensure that a plan and criteria for elimination or fading is included with the rationale as part of the document. For other individuals in the home impacted by restrictions, the agency needs to ensure that provisions are developed so as to not unduly restrict them. The agency needs to ensure that all plans detailing restrictive practices are reviewed at least annually by the Human Rights Committee.
Status at mid-cycle	Met. For all three individuals who had restrictive practices at their homes, written plans were in place that outlined the rationale for the restrictions and the process for fading the restrictions. Additionally, for the other individuals in the home, there were written mitigation plans in place to not unduly restrict their rights. All three environmental restrictions also had human rights committee approval.

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#met /# rated at mid-cycle	3/3
Rating	MET

Indicator #	L57
Indicator	Written behavior plans
Area Need Improvement	One individual within Placement Services had restrictions in place regarding internet access and phone usage which had not been incorporated into a written behavior plan. The agency needs to ensure that if restrictive practices are in place, a written behavior plan has been developed and reviewed.
Status at mid-cycle	Met. Four individuals reviewed in placement services had appropriately developed behavior plans which outlined each person's' environmental restrictions; and each behavior plan was reviewed by their respective ISP teams and the HRC.
#met /# rated at mid-cycle	4/4
Rating	MET

Indicator #	L60
Indicator	Data maintenance
Area Need Improvement	One individual had a behavior plan in place where data on current target behaviors was being tracked inconsistently. The agency needs to ensure that data collection is ongoing and accurate in order to chart the efficacy of intervention and support strategies.
Status at mid-cycle	Met. Four individuals' behavior plans that were reviewed included consistently tracked data on target behaviors.
#met /# rated at mid-cycle	4/4

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Rating	MET
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Indicator #	L63
Indicator	Med. treatment plan form
Area Need Improvement	Five individuals had Medication Treatment Plans (MTPs) that did not include all required components. The agency needs to ensure that all MTP's include a description of target behaviors for which medication is prescribed in individualized, observable and measurable terms. The agency also needs to ensure that procedures to minimize the risks of taking the medication(s) are defined; and measurable criteria for discontinuing or fading the medications are included. Data on behaviors targeted for treatment needs to be collected consistently so it may be shared with the prescriber to evaluate medication effectiveness.
Status at mid-cycle	Met. Nine individual's medication treatment plans had all the required components including descriptions of target behaviors, procedures to minimize risk, and data on behaviors targeted for treatment.
#met /# rated at mid-cycle	9/11
Rating	MET

Indicator #	L64
Indicator	Med. treatment plan rev.
Area Need Improvement	Three individuals' Medication Treatment Plans (MTPs') had not yet been submitted for review to the ISP team. The agency needs to ensure that all MTP's are submitted for ISP team review. Additionally, when individuals' are prescribed anti-psychotic medication and under legal Guardianship, the agency must take appropriate steps to communicate with the ISP team to ensure the initiation for a Rogers monitor appointment to be made.

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Status at mid-cycle	Met. The nine individual's medication treatment plans were submitted to their ISP teams for review.
#met /# rated at mid-cycle	9/11
Rating	MET