

**DEPARTMENT OF DEVELOPMENTAL SERVICES**

**LICENSURE AND CERTIFICATION**

**DDS FOLLOW-UP REPORT**

Provider My Choice Programs, Inc Provider Address 1158 Main St , Worcester  
 Survey Team Adorno, Elsa; Comeau, Andrea; Jones, Ken; Date(s) of Review 29-OCT-24 to 01-NOV-24

<b>Follow-up Scope and results :</b>						
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 7 Locations 7 Audits	Defer Licensure	2/2	12/16	<input type="checkbox"/> Eligible for new business (Two Year License) <input checked="" type="checkbox"/> Ineligible for new business. (Deferred Status: Two year mid-cycle review License)	2 Year License with Mid-Cycle Review	<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)
Employment and Day Supports 1 Locations 6 Audits	2 Year License		5/6	<input checked="" type="checkbox"/> Eligible for new business (Two Year License) <input type="checkbox"/> Ineligible for new business. (Deferred Status: Two year mid-cycle review License)	2 Year License	<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**

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

<b>Indicator #</b>	L8
<b>Indicator</b>	Emergency Fact Sheets
<b>Area Need Improvement</b>	For two individuals, the Emergency Fact Sheet did not address all relevant information, including current diagnoses and current medications, among others. The agency needs to ensure that each Emergency Fact Sheet reflects all required information.
<b>Status at follow-up</b>	My Choice Programs was in the process of reviewing emergency fact sheets for individuals across service types. For the three individuals reviewed, emergency fact sheets were current and included all relevant information.
<b>#met /# rated at followup</b>	3/3
<b>Rating</b>	Met

<b>Indicator #</b>	L12
<b>Indicator</b>	Smoke detectors
<b>Area Need Improvement</b>	At two placement service locations, smoke detectors did not sound when triggered and in one of those homes, a smoke and/or carbon monoxide detector was not present where required. The agency needs to ensure that smoke detectors and carbon monoxide detectors are located where required and are fully operational.
<b>Status at follow-up</b>	My Choice Programs had incorporated the testing of smoke/carbon monoxide detectors at all placement service locations into the monthly home visit checklist. The checklist was to be completed by the placement services director and/or case manager. In the four locations reviewed, smoke and carbon monoxide detectors were in place where required and operational.
<b>#met /# rated at followup</b>	4/4
<b>Rating</b>	Met

<b>Indicator #</b>	L36
<b>Indicator</b>	Recommended tests

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<b>Area Need Improvement</b>	For two individuals, recommended appointments did not occur, and follow-up was not conducted. The agency needs to ensure that recommended tests and appointments with individuals' healthcare providers, are scheduled and occur in a timely way.
<b>Status at follow-up</b>	My Choice Programs included review of all medical forms to the monthly home visit checklist to ensure recommended follow-up is schedule. Healthcare appointments were reviewed for four individuals. All four individuals were supported to schedule and/or attend all appointments and tests, including appointments with specialists, that were necessary within the follow-up period.
<b>#met /# rated at followup</b>	4/4
<b>Rating</b>	Met

<b>Indicator #</b>	L43
<b>Indicator</b>	Health Care Record
<b>Area Need Improvement</b>	For five individuals reviewed, Health Care Records were not updated within the HCSIS system when significant medical information changed, including hospitalizations, new diagnoses, or required vaccinations. The agency needs to ensure that Health Care Records are updated in HCSIS within 30 days of a hospitalization, a new diagnosis, administration of a vaccination and at the time of the individuals ISP.
<b>Status at follow-up</b>	My Choice Programs was in the process of reviewing and updating health care records within placement services to ensure all required information was included. Information to be updated was included on the monthly home visit checklist, to be gathered by placement services director and/or case manager. Three of the seven health care records reviewed, had not been updated at the time of the ISP or within 30 days of a change in diagnosis, hospitalization, vaccination, or other pertinent information.
<b>#met /# rated at followup</b>	4/7
<b>Rating</b>	Not Met

<b>Indicator #</b>	L46
<b>Indicator</b>	Med. Administration
<b>Area Need Improvement</b>	For one individual in placement services, there was not a current list of medications nor signed orders in the home. For a second individual, daily medication administration had not been documented for the current month, and two OTC medications being administered daily, did not match the doctor's

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	<p>order.</p> <p>The agency needs to ensure that current, signed medication orders are obtained, and that care providers are supported to administer medications consistent with physicians' orders. The agency needs to establish a system in each home where care providers can document the administration of medications on a daily basis.</p>
<b>Status at follow-up</b>	<p>My Choice Programs had incorporated the review of medications and doctor's orders at all placement service locations into the monthly home visit checklist. The checklist was to be completed by the placement services director and/or case manager. All four individuals reviewed had current medication orders in place and medications were being administered as directed.</p>
<b>#met /# rated at followup</b>	<p>4/4</p>
<b>Rating</b>	<p>Met</p>

<b>Indicator #</b>	<p>L64</p>
<b>Indicator</b>	<p>Med. treatment plan rev.</p>
<b>Area Need Improvement</b>	<p>For two individuals, medication treatment plans shared with the ISP team for review. The agency needs to ensure that each medication treatment plan is shared with the DDS Service Coordinator for review by the ISP team and for incorporation into the individual's ISP.</p>
<b>Status at follow-up</b>	<p>My Choice Programs had developed a new ISP checklist which included submission of MTPs, to aid in ensuring required documents were submitted to the ISP team for review and required timelines were met. MTPs were not submitted for review for the two individuals included in the follow-up sample.</p>
<b>#met /# rated at followup</b>	<p>0/2</p>
<b>Rating</b>	<p>Not Met</p>

<b>Indicator #</b>	<p>L67</p>
<b>Indicator</b>	<p>Money mgmt. plan</p>
<b>Area Need Improvement</b>	<p>For two individuals, funds management plans did not fully describe the supports provided to the individual in managing his/her money, including how the individual's bank account or cash was safeguarded. Additionally, one of the individuals did not have a financial training plan as was indicated in his ISP. When individuals require supports to manage their money, the agency needs to develop</p>

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	funds management plans that describe how the individual will be assisted to manage and spend their funds, how the money is secured, how the individual is supported to make purchases, responsibilities for cashing checks and paying bills, identifying the amount of money the individual can handle independently, and inclusion of training plans to promote independence. These funds management plans need to be implemented in accordance with signed agreements from individuals or their guardians.
<b>Status at follow-up</b>	My Choice Programs was in the process of updating funds management plans across placement services, to ensure all required information was addressed in funds-management assessments and training plans. All four individuals reviewed had funds management plans in place, which contained all the required components and agreement from the individual or guardian.
<b>#met /# rated at followup</b>	4/4
<b>Rating</b>	Met

<b>Indicator #</b>	L68
<b>Indicator</b>	Funds expenditure
<b>Area Need Improvement</b>	In one placement home, the individual's funds were comingled with the care provider and in a second home, a household purchase was made utilizing the individuals personal spending money. The agency needs to ensure that there is no borrowing or lending of the person's funds by the provider and that individuals' funds are used only to directly benefit the individual.
<b>Status at follow-up</b>	My Choice Programs was in the process of reviewing the agency's funds management policy and its Service Agreements with Homecare Providers as they relate to assisting individuals with banking and financial management. Review of transaction records for one of three individuals, found that the individual's funds were co-mingled with the care provider and not managed appropriately.
<b>#met /# rated at followup</b>	2/3
<b>Rating</b>	Not Met

<b>Indicator #</b>	L85
<b>Indicator</b>	Supervision
<b>Area Need Improvement</b>	For three individuals, oversight of supports was ineffective in several areas, including environmental safety, healthcare supports, funds management and human rights. The agency needs to strengthen

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	its oversight and supervision of services and ensure that supports address all requirements related to healthcare, environmental safety, funds management, and individual human rights.
<b>Status at follow-up</b>	My Choice Programs was in the process of reviewing systems within placement services. The agency had developed a more detailed monthly visit checklist form to include review of medical summaries and recommendations. In three of the four placement homes reviewed during follow-up, oversight systems were present ensuring identified supports were being provided.
<b>#met /# rated at followup</b>	3/4
<b>Rating</b>	Met

<b>Indicator #</b>	L86
<b>Indicator</b>	Required assessments
<b>Area Need Improvement</b>	For three individuals, ISP assessments were not submitted to DDS within 15 days prior to the ISP. The agency needs to ensure that ISP assessments are submitted to DDS within 15 days prior to the ISP.
<b>Status at follow-up</b>	My Choice Programs had developed a new ISP checklist to aid in ensuring required documents were submitted to the ISP team for review and required timelines were met. There were no ISP's scheduled during the time of the follow-up review, so this indicator was unable to be rated. Full resolution of this area needing improvement would be achieved over time as individuals' ISPs are scheduled and held.
<b>#met /# rated at followup</b>	
<b>Rating</b>	Not Rated

<b>Indicator #</b>	L87
<b>Indicator</b>	Support strategies
<b>Area Need Improvement</b>	For three individuals, ISP support strategies were not submitted to DDS within 15 days prior to the ISP. The agency needs to ensure that ISP support strategies are submitted to DDS within 15 days prior to the ISP.
<b>Status at follow-up</b>	My Choice Programs had developed a new ISP checklist to aid in ensuring support strategies were submitted to the ISP team for review and required timelines were met. There were no ISP's scheduled during the time of the follow up review, so this indicator was unable to be rated. Full resolution of this area needing improvement would be achieved over time as individuals' ISPs are scheduled and held.

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#met /# rated at followup	
Rating	Not Rated

Indicator #	L90
Indicator	Personal space/ bedroom privacy
Area Need Improvement	Two individuals within placement services did not have a lock on their bedroom door. The agency needs to ensure individuals have privacy in their own personal space, including the ability to lock their bedroom door.
Status at follow-up	My Choice Programs reviewed and clarified expectations for ensuring individuals within placement services had privacy and the ability to lock their bedroom door. Three of four individuals reviewed had the ability to lock their bedroom door.
#met /# rated at followup	3/4
Rating	Met

Indicator #	L91
Indicator	Incident management
Area Need Improvement	At four locations, incident reports were not submitted and reviewed within required timelines. Additionally, there were four instances within three locations where an incident had occurred, and a report had not been submitted. The agency needs to ensure that incidents are submitted and reviewed within the required timelines.
Status at follow-up	My Choice Programs will review with staff all aspects of incident management, including categories of reportable incidents and timelines for incident reporting and review. Timelines for reporting and finalizing incident reports were met in four of the five placement locations reviewed.
#met /# rated at followup	4/5
Rating	Met

Indicator #	L93 (05/22)
Indicator	Emergency back-up plans

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<b>Area Need Improvement</b>	For two individuals, emergency backup plans were not in place. The provider needs to ensure there is an emergency back-up plan in place to assist the individual to plan for emergencies and/or disasters
<b>Status at follow-up</b>	My Choice Programs was in the process of developing emergency back up plans for each of the individuals receiving services. All four of the individuals reviewed at the time of follow-up, had emergency back plans in place.
<b>#met /# rated at followup</b>	4/4
<b>Rating</b>	Met

<b>Indicator #</b>	L94 (05/22)
<b>Indicator</b>	Assistive technology
<b>Area Need Improvement</b>	For four individuals, the benefits of assistive technology and/or modifications to maximize independence had not been assessed. The agency needs ensure that the use and potential benefits of assistive technology is assessed for all individuals and that action is taken to support individuals in obtaining and using the technology and/or modifications identified.
<b>Status at follow-up</b>	My Choice Programs had begun implementation of a new Assistive Technology Assessment process across all service types with full resolution of this area needing improvement being achieved within this ISP year. All four individuals reviewed had been assessed on the potential benefits of assistive technology.
<b>#met /# rated at followup</b>	4/4
<b>Rating</b>	Met

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

<b>Indicator #</b>	L61
<b>Indicator</b>	Health protection in ISP
<b>Area Need Improvement</b>	For one individual, several prescribed supports were not authorized by a licensed medical professional. When individuals require health-related equipment or devices, the use of these devices must be authorized by a medical professional. This authorization must include instructions for applying and using the device, along with instructions for the care and cleaning of the device as well as frequency of safety checks.

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<b>Status at follow-up</b>	My Choice Programs reviewed each individual's need and use of supportive and protective equipment, obtaining required authorizations as needed. The status of health-related supports and protective equipment was reviewed for three individuals. In each instance, devices and equipment was authorized and written instructions on applying, maintaining, and conducting safety checks for the device were included.
<b>#met /# rated at followup</b>	3/3
<b>Rating</b>	Met

<b>Indicator #</b>	L84
<b>Indicator</b>	Health protect. Training
<b>Area Need Improvement</b>	For one individual requiring the use of health-related equipment, staff had not been trained on the use and care of the equipment. The agency needs to ensure staff are trained, knowledgeable and capable of safely implementing any health-related protections utilized by the individuals.
<b>Status at follow-up</b>	My Choice Programs reviewed each individual's need and use of supportive and protective equipment, obtained required authorizations as needed and ensured staff were trained on each device or piece of equipment. The status of health-related supports and protective equipment was reviewed for three individuals. In each instance, staff had been trained on the devices and equipment to include instructions on applying, maintaining, and conducting safety checks.
<b>#met /# rated at followup</b>	3/3
<b>Rating</b>	Met

<b>Indicator #</b>	L94 (05/22)
<b>Indicator</b>	Assistive technology
<b>Area Need Improvement</b>	For four individuals, the benefits of assistive technology and/or modifications to maximize independence had not been assessed. The agency needs ensure that the use and potential benefits of assistive technology is assessed for all individuals and that action is taken to support individuals in obtaining and using the technology and/or modifications identified.
<b>Status at follow-up</b>	My Choice Programs had begun implementation of a new Assistive Technology Assessment process across all service types with full resolution of this area needing improvement being achieved within this ISP year. All six individuals reviewed had been assessed on the potential benefits of assistive technology.

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#met /# rated at followup	6/6
Rating	Met

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

<b>Indicator #</b>	L48
<b>Indicator</b>	HRC
<b>Area Need Improvement</b>	The agency's human rights committee did not meet the requirements for quarterly meetings nor for achieving a quorum of voting members. The agency needs to support its human rights committee to maintain required membership and attendance, and to fulfill its regulatory responsibilities to hold quarterly meetings.
<b>Status at follow-up</b>	My Choice Programs developed and disseminated to all HRC members, a guide outlining the HRC's function and mission aligned with the DDS regulations. The HRC had held one meeting during the timeframe for follow-up review and all standards were met.
<b>#met /# rated at followup</b>	1/1
<b>Rating</b>	Met

<b>Indicator #</b>	L76
<b>Indicator</b>	Track trainings
<b>Area Need Improvement</b>	For four employees/care providers, DDS mandated training documentation was not available. The agency needs to ensure that staff and care providers are current in all mandated trainings and certifications.
<b>Status at follow-up</b>	My Choice Programs was in the process of reviewing the agency's staff training practices and working to incorporate homecare providers into their staff training practices. Three of the nine staff reviewed in the training sample did not have training in Universal Precautions nor Transmission Prevention as mandated.
<b>#met /# rated at followup</b>	6/9
<b>Rating</b>	Not Met

<b>Indicator #</b>	L83
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<b>Indicator</b>	HR training
<b>Area Need Improvement</b>	For three employees/care providers, human rights training and/or DPPC documentation was not available. Additionally, the current DDS DPPC training was not being utilized. The agency needs to ensure that staff and care providers have been trained in human rights and DPPC. The agency also needs to ensure the curricula for DDS mandated trainings is current or approval has been obtained for use of substitute curricula.
<b>Status at follow-up</b>	My Choice Programs took steps to ensure the current DPPC training was made available to staff for initial training and ongoing annual review. For the nine employees within the training sample, all had been trained on the current DPPC mandated training.
<b>#met /# rated at followup</b>	9/9
<b>Rating</b>	Met