

**DEPARTMENT OF DEVELOPMENTAL SERVICES**

**LICENSURE AND CERTIFICATION**

**DDS FOLLOW-UP REPORT**

Provider	Mentor ABI LLC, dba NeuroRestorative	Provider Address	980 Washington St. , Dedham
Survey Team	Boghoian, Mark; Hampton, Cheryl; Larrieux, Margareth;	Date(s) of Review	29-NOV-22 to 01-DEC-22

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 6 Locations 11 Audits	Defer Licensure	2/2	9/19	<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)

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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>	L1
<b>Indicator</b>	Abuse/neglect training
<b>Area Need Improvement</b>	Two of the six individuals had not been trained and their guardians had not been provided with information on how to report alleged abuse or neglect. The agency needs to ensure that individuals receive annual training in abuse/neglect reporting using their unique communication methods; and guardians receive information on the procedures for reporting alleged abuse/neglect.
<b>Status at follow-up</b>	All but one of the five individuals had been trained and their guardians had been provided information on how to report alleged abuse or neglect.
<b>#met /# rated at followup</b>	4/5
<b>Rating</b>	Met

<b>Indicator #</b>	L15
<b>Indicator</b>	Hot water
<b>Area Need Improvement</b>	At two of the six locations, hot water temperature tested outside allowable limits. The agency needs to ensure that water temperatures are within acceptable limit.
<b>Status at follow-up</b>	Water temperature at all the six locations tested within allowable limits.
<b>#met /# rated at followup</b>	6/6
<b>Rating</b>	Met

<b>Indicator #</b>	L36
<b>Indicator</b>	Recommended tests
<b>Area Need Improvement</b>	For two of the six individuals follow up to medical appointments and recommendations had not occurred. The agency needs to ensure that medical follow up and recommended specialty referrals are made and appointments are kept.
<b>Status at follow-up</b>	For two of the six individuals, follow up to medical appointments and recommendations had not occurred. The agency needs to ensure that it abides strictly by Physician recommendations and supports medical followup in a timely fashion.

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<b>#met /# rated at followup</b>	4/6
<b>Rating</b>	Not Met

<b>Indicator #</b>	L38
<b>Indicator</b>	Physician's orders
<b>Area Need Improvement</b>	For two of the six individuals, medical treatment protocols were either lacking parameters, or missing components and staff were not trained and knowledgeable. The agency needs to ensure that physician ordered medical treatment protocols when in place, are accurate and staff are trained on the protocols.
<b>Status at follow-up</b>	For all five individuals, physician ordered medical and treatment protocols were being followed
<b>#met /# rated at followup</b>	5/5
<b>Rating</b>	Met

<b>Indicator #</b>	L43
<b>Indicator</b>	Health Care Record
<b>Area Need Improvement</b>	For two of six individuals, health care records were not updated and accurate. The agency needs to ensure that health care records are maintained and updated as required.
<b>Status at follow-up</b>	The health care record was updated and accurate for four of the five individuals.
<b>#met /# rated at followup</b>	4/5
<b>Rating</b>	Met

<b>Indicator #</b>	L46
<b>Indicator</b>	Med. Administration
<b>Area Need Improvement</b>	For three of six individuals, medication was not administered according to written order of a practitioner and/or could not be determined to be properly documented. The agency needs to ensure that all prescription medications are administered according to written order of a practitioner and are properly documented.
<b>Status at follow-up</b>	Prescription medications for all the individuals were administered according to the written orders of a practitioner and were properly documented.

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<b>#met /# rated at followup</b>	5/5
<b>Rating</b>	Met

<b>Indicator #</b>	L61
<b>Indicator</b>	Health protection in ISP
<b>Area Need Improvement</b>	For three of six individuals, supports and health related equipment plans were either not in place for all equipment being used or did not include all required components. The agency needs to ensure that supports and health related plans contain all equipment being used by individuals, and all the required components.
<b>Status at follow-up</b>	For five of six individuals, supports and health related equipment plans were in place for all equipment being used and included all required components.
<b>#met /# rated at followup</b>	5/6
<b>Rating</b>	Met

<b>Indicator #</b>	L63
<b>Indicator</b>	Med. treatment plan form
<b>Area Need Improvement</b>	For six individuals, medication treatment plans did not contain all the required components including data collection. The agency needs to ensure that medication treatment plan when needed are developed to contain all required components including data that is tracked and shared with prescribing physicians.
<b>Status at follow-up</b>	For five individuals, medication treatment plans were either not in place, or did not contain all the required components including data collection. The agency needs to ensure that medication treatment plans for people who take behavior modifying medication are developed to include all required components including data collection.
<b>#met /# rated at followup</b>	1/6
<b>Rating</b>	Not Met

<b>Indicator #</b>	L67
<b>Indicator</b>	Money mgmt. plan

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<b>Area Need Improvement</b>	For two of the three individuals who receive support with managing their funds, money management plans either contained inaccurate information or were not agreed to by guardians. The agency needs to ensure that for all individuals for whom the agency has shared or delegated money management responsibilities, plans in place contains all components and are agreed to by guardians.
<b>Status at follow-up</b>	For one of the three individuals, who receives support with funds management, money management plans, did not contain a measurable training plan. The agency needs to ensure that when indicated in the ISP, people funds management plans are developed to include a training component.
<b>#met /# rated at followup</b>	2/3
<b>Rating</b>	Not Met

<b>Indicator #</b>	L69
<b>Indicator</b>	Expenditure tracking
<b>Area Need Improvement</b>	For one of two individuals, funds were not being tracked in accordance with the agency's funds management policy. The agency needs to ensure that expenditures is in accordance with the agency's funds management policy.
<b>Status at follow-up</b>	Funds were being tracked in accordance to requirements for three of the four individuals,.
<b>#met /# rated at followup</b>	3/4
<b>Rating</b>	Met

<b>Indicator #</b>	L71
<b>Indicator</b>	Charges for care appeal
<b>Area Need Improvement</b>	For six individuals, the appeal notice for charges for care did not include who and how to contact if they wanted to appeal the charges for care. The agency needs to ensure that individuals and guardian have been properly informed of their appeal rights for their charges for care.
<b>Status at follow-up</b>	For two of the six individuals, the appeal notice for charges for care did not include who and how to contact if they wanted to appeal the charges for care. The agency needs to develop its charges for care information to be consistent across settings and to include all required information.
<b>#met /# rated at followup</b>	4/6
<b>Rating</b>	Not Met

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<b>Indicator #</b>	L84
<b>Indicator</b>	Health protect. Training
<b>Area Need Improvement</b>	For five individual's, staff were not trained on the correct utilization of the health related equipment that were being used. The agency needs to ensure that all staff are trained and able to demonstrate understanding of safe use of health related equipment per regulation.
<b>Status at follow-up</b>	For three of the six individuals, staff were not trained on the correct utilization of the health-related equipment that were being used. The agency needs to ensure that staff are trained on people's supports and health related equipment.
<b>#met /# rated at followup</b>	3/6
<b>Rating</b>	Not Met

<b>Indicator #</b>	L85
<b>Indicator</b>	Supervision
<b>Area Need Improvement</b>	At all six locations, issued uncovered in different domains pointed to a lack of consistent oversight, supervision, and staff development. The agency needs to ensure that it provides consistent oversight, supervision, and staff development to ensure effective supports.
<b>Status at follow-up</b>	At two of the six locations, issued uncovered in different domains pointed to a lack of consistent oversight, supervision, and staff development. The agency needs to ensure that oversight, supervision, and staff development are occurring in line with requirements and agency policy.
<b>#met /# rated at followup</b>	4/6
<b>Rating</b>	Not Met

<b>Indicator #</b>	L86
<b>Indicator</b>	Required assessments
<b>Area Need Improvement</b>	For four of five individuals, required assessments for the ISP were not submitted within the required timeframe. The agency needs to ensure that ISP assessments are developed and submitted to the DDS Area Office at least 15 days prior to scheduled ISP meeting.
<b>Status at follow-up</b>	For the two individuals, required assessments for the ISP were not submitted within the required timeframe. The agency needs to ensure that required assessments are prepared and submitted with the required timeframe

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<b>#met /# rated at followup</b>	0/2
<b>Rating</b>	Not Met

<b>Indicator #</b>	L87
<b>Indicator</b>	Support strategies
<b>Area Need Improvement</b>	For four of five individuals, support strategies for the ISP were not developed and submitted within the required timeframes. The agency needs to ensure that support strategies for the ISP are submitted to the DDS Area Office at least 15 days prior to scheduled ISP meetings.
<b>Status at follow-up</b>	For the two individuals, support strategies for the ISP were prepared and submitted within the required timeframe.
<b>#met /# rated at followup</b>	2/2
<b>Rating</b>	Met

<b>Indicator #</b>	L88
<b>Indicator</b>	Strategies implemented
<b>Area Need Improvement</b>	For four out of six individuals, agreed upon ISP goals were not being implemented and documented. The agency needs to ensure that individuals are supported to work on their ISP goals as agreed upon in the ISP.
<b>Status at follow-up</b>	Two out of the six individuals, agreed upon ISP goals were not being implemented and documented. The agency needs to ensure that agreed upon ISP goals are implemented consistently and documented,
<b>#met /# rated at followup</b>	4/6
<b>Rating</b>	Not Met

<b>Indicator #</b>	L94 (05/22)
<b>Indicator</b>	Assistive technology
<b>Area Need Improvement</b>	Three of the six individuals had not been assessed for the use of assistive technologies that would promote independence. The agency needs to ensure that individuals are assessed for assistive technology and /or modifications that would maximize independence.

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<b>Status at follow-up</b>	Three of five individuals had not been assessed for the use of assistive technologies that would promote independence. The agency needs to assess people for their potential needs in the area of assistive technology to maximize independence.
<b>#met /# rated at followup</b>	2/5
<b>Rating</b>	Not 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 Human Rights committee did not meet its mandate for requisite member attendance and involvement in deliberations. The agency needs to ensure that requisite members are consistent in meeting attendance and involvement in deliberations.
<b>Status at follow-up</b>	Since the last review the agency conducted one Human Rights Committee meeting which did not meet its mandate for requisite member attendance and involvement in deliberations. The agency needs to ensure that its human rights committee meets all its mandates including consistent member attendance.
<b>#met /# rated at followup</b>	0/1
<b>Rating</b>	Not Met

<b>Indicator #</b>	L76
<b>Indicator</b>	Track trainings
<b>Area Need Improvement</b>	The agency did not demonstrate an efficient system for tracking staff trainings as nine of the twenty staff reviewed had not completed some DDS required trainings.
<b>Status at follow-up</b>	The agency demonstrated an efficient system for tracking staff trainings; staff training occurred in accordance with mandate.
<b>#met /# rated at followup</b>	1/1
<b>Rating</b>	Met