

**INITIAL REVIEW  
REPORT FOR**

**New Again Inc.  
160 North Main Street  
Suite 1 Carver, MA 02330**

**Date Of Report**

**August 29, 2023**

**Version**

**Prepared by the Department of Developmental Services  
OFFICE OF QUALITY ENHANCEMENT**

## **SUMMARY OF OVERALL FINDINGS**

**Provider** : New Again Inc.

**Review Dates** : 8/1/2023 - 8/1/2023

**Initial Review Exit Meeting Date:** : 8/16/2023

**Survey Team**

William Muguro

Scott Nolan (TL)

**Survey scope and findings for Employment and Day Supports**

<b>Service Group Type</b>	<b>Sample Size</b>	<b>Licensure Scope</b>
<b>Employment and Day Supports</b>	1 location(s) 3 audit (s)	Initial Review
Community Based Day Services	1 location(s) 3 audit (s)	
Planning and Quality Management		

## **EXECUTIVE SUMMARY**

New Again Inc. is a nonprofit organization started by the parents of adults with developmental disabilities in the greater Plymouth area. The agency's focus is to offer skills training and workplace-relevant skills to adults with developmental disabilities. As members of a cooperative, individuals have the opportunity to sell crafts, gift items and re-fillable products in the agency's shop in a plaza which serves the general public.

In July 2023, New Again, Inc. began providing Community Based Day Services (CBDS) to individuals served through the Department of Developmental Services (DDS). As a result of the initiation of this DDS funded service, an Initial Review was conducted to assist the agency in identifying areas requiring improvement to come into compliance with DDS licensing standards.

The scope of this Initial Review included the review of the applicable CBDS licensure indicators to three individuals receiving CBDS services at New Again, Inc. A review of the agency's administrative practices was also conducted.

A review of the environmental domain noted it was clean, well maintained, and required inspections were current. The agency had a safety plan in place for those attending the CBDS program. Within the Human Rights domain, individuals were observed to be actively involved in discussions and planning of their daily activities, it was evident that individuals are accorded a choice of what activities they wanted to participate in including informal goals to develop skills in creating their chosen crafts. Communication about and with the individuals was respectful and inclusive.

The agency plans on addressing several areas that are not yet in compliance with DDS regulatory standards. On an organizational level, the agency needs to ensure that it has an effective screening process for hiring qualified staff. It needs to ensure that all staff have received the mandatory DDS required trainings and develop an effective tracking system to ensure required training is occurring as required.

Within the medical domain, the agency needs to ensure emergency fact sheets contain all required information, and that when medical unique needs are present, written direction is provided to and staff are knowledgeable of their presence and implementation. Within the human rights domain, the agency needs to either create or join a human rights committee as well as train a human rights officer/coordinator using DDS approved curriculum. Also, the agency needs to ensure that human rights and DPPC materials provided to individuals and guardians contains required information. The agency is encouraged to reach out to its regional Human Rights Coordinator for assistance with its human rights committee, training, and other relevant human rights topics.

The team identified in area in the back of the building where tractor trailer trucks routinely exited by the side of the agency's building. The agency was working with the building manager to place signage to drive slowly as the rear exit door serves as the second means of egress for individuals in the event of an emergency

In six months from this Initial Review, the OQE will perform a full licensing and certification review of the agency's CBDS services, where the agency will receive its full license for Employment and Day Supports pending successful completion of the review.

## **LICENSURE FINDINGS**

**Organizational Areas Needing Improvement on Standards not met/Follow-up to occur:**

Indicator#	Indicator	Area Needing Improvement
Ⓡ L2	Allegations of abuse/neglect are reported as mandated by regulation.	The agency does not have a policy in place that outlines staff's role as mandated reporters and staff training in DPPC was not documented.
L48	The agency has an effective Human Rights Committee.	The agency does not have a Human Rights Committee, it plans to partner with another organization.
L74	The agency screens prospective employees per requirements.	The agency does not have a process in place to screen perspective employees. Agency needs DDS CORI review.
L76	The agency has and utilizes a system to track required trainings.	The Agency does not have a system to track required trainings and staff did not have all required trainings. Missing trainings include Fire Safety (Formal for the Fire Safety Officer, Informal for all other staff), Human Rights Officer training, and Positive Behavioral Supports (PBS), Incident Reporting and Transmission Prevention for specific diseases.
L83	Support staff are trained in human rights.	There was no documentation to show that staff have been trained in Human Rights

**Employment/Day Areas Needing Improvement on Standards not met/Follow-up to occur:**

Indicator#	Indicator	Area Needing Improvement
L1	Individuals have been trained and guardians are provided with information in how to report alleged abuse/neglect.	Individuals have not been trained in and the guardians have not received information about how to report alleged abuse/neglect. The provider needs to ensure that training/information given to both parties include specific information about what constitutes abuses/neglect, and how to make a report with the DPPC.
L8	Emergency fact sheets are current and accurate and available on site.	For three individuals, EFS were missing a list of current medication and other important information. The Agency need to ensure that the EFS contains all required components including a current list of medication, response to search, and identifying information in case of an emergency
L9 (07/21)	Individuals are able to utilize equipment and machinery safely.	For three individuals, safety assessments had not been completed. The Agency need to ensure that safety assessments are completed for all individuals for safe use of equipment and appliances while at CBDS.

L15	Hot water temperature tests between 110 and 120 degrees (as of 1/2014).	Water temperature in the kitchen sink was 121 degrees and 75 degrees in the bathroom. The agency needs to ensure that water temperature is maintained between 110-120 degrees.
☐ L38	Physicians' orders and treatment protocols are followed (when agreement for treatment has been reached by the individual/guardian/team).	For three individuals, Treatment Protocols were not in place, two individuals have a seizure disorder, and one has a diagnosis of Achalasia. In instances where an individual has a medical condition that requires monitoring or intervention from staff to prevent a more serious condition from occurring, a written medical protocol needs to be in place
L49	Individuals and guardians have been informed of their human rights and know how to file a grievance or to whom they should talk if they have a concern.	Individuals and guardians had not been provided with training and information regarding Human Rights, nor had they been informed how to file a grievance. The Agency need to ensure that individuals and guardians are informed on how to file a grievance and receive training and information on Human Rights.
L55	Informed consent is obtained from individuals or their guardians when required; Individuals or their guardians know that they have the right to withdraw consent.	The Agency photo consent form did include all the required components for informed consent. The agency need to use the DDS photo consent form to use individual photos/videos.
L77	The agency assures that staff / care providers are familiar with and trained to support the unique needs of individuals.	For three individuals, staff were not trained on unique needs of the individuals. The agency need to ensure that all staff are trained on unique needs of every individual.
L80	Support staff are trained to recognize signs and symptoms of illness.	Staff were not trained to recognize the signs and symptoms of illness including Health observations and Just Not Right. The agency needs to ensure that all staff are trained to recognize signs and symptoms of illness in including Health observations and Just Not Right. These curriculums can be found on the DDS website
L88	Services and support strategies identified and agreed upon in the ISP for which the provider has designated responsibility are being implemented.	
L94 (05/22)	Individuals have assistive technology to maximize independence.	For three individuals, no formal or informal Assistive Technology assessments were completed to access assistive technology needs to maximize independence. The agency need to ensure that assistive technology assessments are completed for all individuals.