



**PROVIDER REPORT
FOR**

**Palaemon, Inc.
3401 Main St.
Barnstable, MA 02630**

Version

Public Provider Report

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

SUMMARY OF OVERALL FINDINGS

Provider	Palaemon, Inc.
Review Dates	9/3/2019 - 9/6/2019
Service Enhancement Meeting Date	9/20/2019
Survey Team	Tina Napolitan (TL)
Citizen Volunteers	

Survey scope and findings for Residential and Individual Home Supports					
Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Residential and Individual Home Supports	1 location(s) 3 audit (s)	Full Review	51 / 62 2 Year License 09/20/2019 - 09/20/2021		26 / 29 Certified 09/20/2019 - 09/20/2021
Individual Home Supports	1 location(s) 3 audit (s)			Full Review	22 / 23
Planning and Quality Management				Full Review	4 / 6

EXECUTIVE SUMMARY :

Palaemon Incorporated, established in 2008, is a non-profit human service agency providing residential supports for individuals with intellectual disabilities. The agency provides Individualized Home Supports (IHS) to six people who live in Barnstable, Massachusetts. The scope of this survey conducted by the Department of Developmental Services (DDS) Office of Quality Enhancement (OQE) was a full review of all licensing and certification indicators.

A number of practices were developed or strengthened since the last survey. These included the development of a grievance procedure and ensuring all individuals, guardians and family members were aware of policy. The agency also improved on adhering to the DDS timelines for the submission of ISP assessments and ensuring emergency fact sheets were current and readily available. All staff had received the array of required training. These include training of staff in their mandated reporting responsibilities.

Expected outcomes were also seen within the environmental domain. The agency had secured all inspections for heating and fire equipment, individual safety assessments were completed and the home is kept clean with the decorations reflecting the preferences of the individuals.

Successful strategies were designed to assist individuals with managing their health care needs and optimizing their overall health. Staff was knowledgeable regarding health management plans and implemented these when needed. Individuals were supported to lead a healthy lifestyle being offered healthy food choices and regular exercise. A treadmill is available and individuals engage in strength training with a personal trainer. One person runs local charitable 5K runs and another person has lost significant weight. Individuals are supported to self-medicate. One individual, who began receiving services more recently, has been supported to gain skills and is near ready to self-medicate.

Within certification, several strengths were observed. A continued strength of the agency is that staff is aware of individuals' unique needs, interests, and their satisfaction of services. Communication among the staff, individuals and/or guardians is routine and drives the services and supports provided.

Valued friendships with others are encouraged and individuals are assisted to develop reciprocal relationships. A list of important dates such as birthdays and anniversaries of significant people in the individual lives is maintained. Individuals honor these dates by sending cards or placing phone calls to others that are important to them.

People are offered choice and control over all areas of their lives. Individuals are supported to be as independent as they can be in self-care, daily household routines and while in the community.

Within the domain of community access and integration staff showed respect for individual choices for finding preferred activities. When necessary, staff provided transportation to individual's selections of activities. Individuals are given autonomy to locate community activities and staff support is provided when necessary. Additionally, staff were invested in insuring events were pleasurable to the person. All individuals that participated in this survey accessed their community multiple times per week.

Valued roles in the community are also sought out and attained. For example, one individual sang the National Anthem at a farm league game. Individuals are free to walk into the nearby village and have made connections with local merchants.

The agency would benefit from strengthening its human rights committee, ensuring that the committee meets on a quarterly basis. Medication treatment plans need to be developed for individuals who are supported with the use of behavior modifying medication and accompanied with ongoing data for identified observable symptoms. When providing individuals support with managing their finances, the agency needs to develop money management support strategies and teaching plans that promote

individual's ability to become independent.

Within certification, the agency will benefit from gathering feedback from individuals for staff annual performance evaluation. Increasing the focus on potential assistive technology would potentially increase individual's level of independence in many areas of their lives. Organizationally, the agency will benefit from developing strategies to plan for the future of service delivery by developing measurable goals and monitoring the outcomes.

Palaemon Inc. received a two-year license for its IHS residential services. The agency achieved a 'Met' in 51 of 62 applicable licensing indicators resulting in a score of 82%. Within 60 days, the DDS office of Quality Enhancement will conduct a follow-up review of any licensing indicators that were rated 'Not Met'.

The agency also received a two year certification, achieving a 'Met' rating for 26 of 29 applicable indicators, resulting in a score of 90%.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	5/6	1/6	
Residential and Individual Home Supports	46/56	10/56	
Individual Home Supports			
Critical Indicators	8/8	0/8	
Total	51/62	11/62	82%
2 Year License			
# indicators for 60 Day Follow-up		11	

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

Indicator #	Indicator	Area Needing Improvement
L48	The agency has an effective Human Rights Committee.	The agency's Human Rights Committee did not meet from May 2018 through September 2019. The agency needs to ensure that the Human Rights Committee meets no less than on a quarterly basis.

Residential Commendations on Standards Met:

Indicator #	Indicator	Commendations
L42	Individuals are supported to engage in physical activity.	Individuals are offered and take advantage of numerous opportunities to engage in physical activity within the community and also within their home. Their home is equipped with a treadmill and individuals have the opportunity to train with a personal trainer. As a result, one individual in the home has run multiple 5K runs and another has lost significant amount of weight and now looks forward to working out routinely.

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

Indicator #	Indicator	Area Needing Improvement
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Residential Areas Needing Improvement on Standards not met/Follow-up to occur:

Indicator #	Indicator	Area Needing Improvement
L5	There is an approved safety plan in home and work locations.	The safety plan did not include all of the individuals who live at the location and it had expired. The agency needs to ensure that the safety plan is current and renewed every two years if there are no changes.
L22	All appliances and equipment are operational and properly maintained.	The agency had a grill located next to the home alongside two gas tanks. The agency needs to ensure that grills and gas tanks are located 10 feet from the house on non-flammable surfaces.
L34	Individuals receive an annual dental exam.	One individual had not attended a dental appointment within the last year. The agency needs to ensure that all individuals receive dental treatment on an annual basis or as recommended by the dentist.
L36	Recommended tests and appointments with specialists are made and kept.	For one individual, for whom the agency shares responsibility with medical coordination, it could not demonstrate that all recommended tests and appointments were made and kept. The agency needs to develop a system by which it can ensure that all individuals are supported to receive all recommended tests and appointments.
L63	Medication treatment plans are in written format with required components.	For one individual medication treatment plan needs to be developed and for two people data needs to be collected to assist the prescribing practitioner with evaluating the effectiveness of medications. The agency needs to ensure that a medication treatment plan is developed for those individuals who are prescribed medications for the purpose of modifying behavior.
L64	Medication treatment plans are reviewed by the required groups.	For one individual, for whom the agency shares responsibility with medical coordination, it could not demonstrate that all recommended tests and appointments were made and kept. The agency needs to develop a system by which it can ensure that all individuals are supported to receive all recommended tests and appointments.
L67	There is a written plan in place accompanied by a training plan when the agency has shared or delegated money management responsibility.	For one individual, a training plan to assist the person with enhancing his funds management skills was not in place. The agency needs to ensure that individual's money management support plan includes a training plan to enhance the person's skills. Agreement from the guardian should also be sought.
L68	Expenditures of individual's funds are made only for purposes that directly benefit the individual.	For one individual, it could not be determined if expenditure benefited him since these were not documented. The agency needs to ensure that all expenditures are for the benefit of the individual.
L69	Individual expenditures are documented and tracked.	For one individual, for whom the agency assists with the management of funds, the agency recently began maintaining financial transaction records. The agency needs to ensure the when staff hold an individual's money and provide support in the use of funds, that all expenditures are documented and tracked.

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

Indicator #	Indicator	Area Needing Improvement
L87	Support strategies necessary to assist an individual to meet their goals and objectives are completed and submitted as part of the ISP.	Support strategies were not submitted within required time frames for one individual. 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 date.

CERTIFICATION FINDINGS

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	4/6	2/6	
Residential and Individual Home Supports	22/23	1/23	
Individual Home Supports	22/23	1/23	
TOTAL	26/29	3/29	90%
Certified			

Planning and Quality Management Areas Needing Improvement on Standards not met:

Indicator #	Indicator	Area Needing Improvement
C5	The provider has a process to measure progress towards achieving service improvement goals.	The agency has not developed a plan with accompanying goals. The agency needs to ensure that it develops service improvement goals and measures progress on an ongoing basis and makes mid-course corrections to continually enhance services
C6	The provider has mechanisms to plan for future directions in service delivery and implements strategies to actualize these plans.	The agency did not have mechanisms in place to plan for its future delivery of services nor strategies to actualize the plans. The agency needs to ensure that it develops a system to plan for the future direction of the agency with plans that identifies the resources needed to accomplish identified goals.

Individual Home Supports Commendations on Standards Met:

Indicator #	Indicator	Commendations
C8	There are opportunities for communication between guardians, family members, and staff on a regular and timely basis.	The agency demonstrated great respect for the role guardians and family members have in people's lives. Staff, individual's and family confirmed that relevant concerns are discussed promptly and work towards resolution is a collaborative effort. This is achieved through routine and timely conversations.

Individual Home Supports- Areas Needing Improvement on Standards not met:

Indicator #	Indicator	Area Needing Improvement
C54	Individuals have the assistive technology and/or modifications to maximize independence.	The supports for three individuals were reviewed, and in all instances an assessment of potential assistive technology needs had not been conducted. The agency needs to assess each individual's needs and determine how assistive technology/ or modifications could help people to maximize their independence.

MASTER SCORE SHEET LICENSURE

Organizational: Palaemon, Inc.

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
L2	Abuse/neglect reporting	3/3	Met
L48	HRC	0/1	Not Met(0 %)
L74	Screen employees	2/2	Met
L75	Qualified staff	1/1	Met
L76	Track trainings	1/1	Met
L83	HR training	2/2	Met

Residential and Individual Home Supports:

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L1	Abuse/neglect training	I		3/3					3/3	Met
L5	Safety Plan	L		0/1					0/1	Not Met (0 %)
R L6	Evacuation	L		1/1					1/1	Met
L8	Emergency Fact Sheets	I		3/3					3/3	Met
L9	Safe use of equipment	L		1/1					1/1	Met
R L11	Required inspections	L		1/1					1/1	Met
R L12	Smoke detectors	L		1/1					1/1	Met
R L13	Clean location	L		1/1					1/1	Met
L14	Site in good repair	L		1/1					1/1	Met
L15	Hot water	L		1/1					1/1	Met
L16	Accessibility	L		1/1					1/1	Met
L17	Egress at grade	L		1/1					1/1	Met
L18	Above grade egress	L		1/1					1/1	Met
L20	Exit doors	L		1/1					1/1	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L21	Safe electrical equipment	L		1/1					1/1	Met
L22	Well-maintained appliances	L		0/1					0/1	Not Met (0 %)
L25	Dangerous substances	L		1/1					1/1	Met
L26	Walkway safety	L		1/1					1/1	Met
L28	Flammables	L		1/1					1/1	Met
L29	Rubbish/combustibles	L		1/1					1/1	Met
L30	Protective railings	L		1/1					1/1	Met
L31	Communication method	I		3/3					3/3	Met
L32	Verbal & written	I		3/3					3/3	Met
L33	Physical exam	I		3/3					3/3	Met
L34	Dental exam	I		2/3					2/3	Not Met (66.67 %)
L35	Preventive screenings	I		3/3					3/3	Met
L36	Recommended tests	I		1/2					1/2	Not Met (50.0 %)
R L38	Physician's orders	I		1/1					1/1	Met

Ind. #	Ind.	Loc. or Individ.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L40	Nutritional food	L		1/1					1/1	Met
L41	Healthy diet	L		1/1					1/1	Met
L42	Physical activity	L		1/1					1/1	Met
L43	Health Care Record	I		3/3					3/3	Met
L44	MAP registration	L		1/1					1/1	Met
L45	Medication storage	L		1/1					1/1	Met
L46	Med. Administration	I		1/1					1/1	Met
L47	Self medication	I		3/3					3/3	Met
L49	Informed of human rights	I		3/3					3/3	Met
L50	Respectful Comm.	L		1/1					1/1	Met
L51	Possessions	I		3/3					3/3	Met
L52	Phone calls	I		3/3					3/3	Met
L53	Visitation	I		3/3					3/3	Met
L54	Privacy	L		1/1					1/1	Met
L63	Med. treatment plan form	I		0/2					0/2	Not Met (0 %)
L64	Med. treatment plan rev.	I		0/2					0/2	Not Met (0 %)

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L67	Money mgmt. plan	I		0/1					0/1	Not Met (0 %)
L68	Funds expenditure	I		0/1					0/1	Not Met (0 %)
L69	Expenditure tracking	I		0/1					0/1	Not Met (0 %)
L77	Unique needs training	I		3/3					3/3	Met
L80	Symptoms of illness	L		1/1					1/1	Met
L81	Medical emergency	L		1/1					1/1	Met
R L82	Medication admin.	L		1/1					1/1	Met
L85	Supervision	L		1/1					1/1	Met
L86	Required assessments	I		3/3					3/3	Met
L87	Support strategies	I		2/3					2/3	Not Met (66.67 %)
L88	Strategies implemented	I		3/3					3/3	Met

Ind. #	Ind.	Loc. or Individ.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L90	Personal space/bedroom privacy	I		3/3					3/3	Met
#Std. Met/# 56 Indicator									46/56	
Total Score									51/62	
									82.26%	

MASTER SCORE SHEET CERTIFICATION

Certification - Planning and Quality Management

Indicator #	Indicator	Met/Rated	Rating
C1	Provider data collection	1/1	Met
C2	Data analysis	1/1	Met
C3	Service satisfaction	1/1	Met
C4	Utilizes input from stakeholders	1/1	Met
C5	Measure progress	0/1	Not Met (0 %)
C6	Future directions planning	0/1	Not Met (0 %)

Individual Home Supports

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	3/3	Met
C8	Family/guardian communication	3/3	Met
C9	Personal relationships	3/3	Met
C10	Social skill development	3/3	Met
C11	Get together w/family & friends	3/3	Met
C12	Intimacy	3/3	Met

Individual Home Supports

Indicator #	Indicator	Met/Rated	Rating
C13	Skills to maximize independence	3/3	Met
C14	Choices in routines & schedules	3/3	Met
C15	Personalize living space	1/1	Met
C16	Explore interests	3/3	Met
C17	Community activities	3/3	Met
C18	Purchase personal belongings	3/3	Met
C19	Knowledgeable decisions	3/3	Met
C20	Emergency back-up plans	1/1	Met
C21	Coordinate outreach	3/3	Met
C46	Use of generic resources	3/3	Met
C47	Transportation to/ from community	3/3	Met
C48	Neighborhood connections	3/3	Met
C49	Physical setting is consistent	1/1	Met
C51	Ongoing satisfaction with services/ supports	3/3	Met
C52	Leisure activities and free-time choices /control	3/3	Met
C53	Food/ dining choices	3/3	Met
C54	Assistive technology	0/3	Not Met (0 %)