



**PROVIDER REPORT
FOR**

**REACH
20 Middle Street
Plymouth, MA 02360**

Version

Public Provider Report

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

SUMMARY OF OVERALL FINDINGS

Provider	REACH
Review Dates	7/17/2026 - 7/18/2026
Service Enhancement Meeting Date	5/22/2026
Survey Team	
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	7 location(s) 11 audit (s)	Provider follow up	3/3 2 Year License 05/22/2026 - 05/22/2028		47 / 47 Certified 05/22/2026 - 05/22/2028
Residential Services	3 location(s) 7 audit (s)			No Review	20 / 20
Individual Home Supports	4 location(s) 4 audit (s)			No Review	21 / 21
Planning and Quality Management (For all service groupings)				No Review	0 / 0

Survey scope and findings for Remote Supports and Monitoring Services

Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Remote Supports and Monitoring Services	1 workstation location(s) 3 audit (s)	Provider follow up	2/2 2 Year License 05/22/2026 - 05/22/2028		7 / 7 Certified 05/22/2026 - 05/22/2028
Remote Supports and Monitoring Services	1 workstation location(s) 3 audit (s)			No Review	1 / 1
Planning and Quality Management (For all service groupings)				No Review	0 / 0

Survey scope and findings for Employment and Day Supports

Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Employment and Day Supports	N/A	N/A	N/A		
Planning and Quality Management (For all service groupings)				No Review	0 / 0

EXECUTIVE SUMMARY :

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LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	1/1	0/1	
Residential and Individual Home Supports	2/2	0/2	
Individual Home Supports Residential Services			
Critical Indicators	0/0	0/0	
Total	3/3	0/3	100%
2 Year License			
# indicators for 60 Day Follow-up		0	

	Met / Rated	Not Met / Rated	% Met
Organizational	1/1	0/1	
Remote Supports and Monitoring Services	1/1	0/1	
Remote Supports and Monitoring Services			
Critical Indicators	0/0	0/0	
Total	2/2	0/2	100%
2 Year License			
# indicators for 60 Day Follow-up		0	

	Met / Rated	Not Met / Rated	% Met
Organizational	1/1	0/1	
Employment Support Services Community Based Day Services			
# indicators for 60 Day Follow-up			

MASTER SCORE SHEET LICENSURE

Organizational: REACH

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
L4	Action taken	1/1	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
L55	Informed consent	I	8/8	4/4					12/12	Met
L91	Incident management	L	3/3	4/4					7/7	Met
#Std. Met/# 2 Indicator									2/2	
Total Score									3/3	
									100%	

Remote Supports and Monitoring Services:

Ind. #	Ind.	Loc. or Indiv.	Remote	Total Met/Rated	Rating
L55	Informed consent	I	3/3	3/3	Met
#Std. Met/# 1 Indicator				1/1	
Total Score				2/2	
				100%	