

DEPARTMENT OF DEVELOPMENTAL SERVICES
LICENSURE AND CERTIFICATION
PROVIDER FOLLOW-UP REPORT

Provider: REACH _____

Provider Address: 20 Middle Street , Plymouth _____

Name of Person Darci Fencer
Completing Form: _____

Date(s) of Review: 17-JUN-22 to 17-JUN-22 _____

Follow-up Scope and results :		
Service Grouping	Licensure level and duration	# Indicators std. met/ std. rated
Employment and Day Supports		
Residential and Individual Home Supports	Defer Licensure	

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

Indicator #	L5
Indicator	Safety Plan

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Area Need Improvement	The safety plan did have not a current approved Provider Assurance Form signed by DDS. The agency needs to ensure that safety plans have Provider Assurance forms that are reviewed and/or revised by DDS every two years or when a change in composition or individuals ' ability to evacuate has occurred.
Process Utilized to correct and review indicator	1. Onboarding/Offboarding individuals checklist created to streamline the tasks when an individual starts or stops supports at REACH, or a change in address of site occurs. 2. Safety plans will be tracked monthly to be sure they are current.
Status at follow-up	1. Checklist has been created. It was beta tested with recent onboarding of an individual and is now the practice to use when a new individual onboard/offboards in a REACH program. 2. Excel spread sheet of all safety plans is created and monitored monthly.
Rating	Met

Indicator #	L15
Indicator	Hot water
Area Need Improvement	The hot water in the kitchen sink registered above allowable temperatures. (117 degrees) The agency needs to ensure that hot water temperatures register within allowable temperatures.
Process Utilized to correct and review indicator	Review of the current process showed inconsistency due to an unmaintained computer system being used. Monthly safety checks will be moved back to paper version. Water temperatures will be submitted to QAS monthly for review. Maintenance will be contacted for any water temperature concerns.
Status at follow-up	Started in June 2022, No temperature concerns noted.
Rating	Met

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Indicator #	L55
Indicator	Informed consent
Area Need Improvement	Five out of twelve individuals and/or their guardians provided consent to use a particular photo in the agency newsletter or post on its website. A review of these consents revealed that the consents did not include identify or include a copy of the photo or specify how the material was to be used. The agency needs to ensure that consents include all required components.
Process Utilized to correct and review indicator	1. QAS will develop a training for Managers to review how, why and steps needed to fill out a photo consent. 2. "Photo attached" will be added to the internal audit checklist for Confidential file reviews.
Status at follow-up	1. Retraining of management in proper use of Photo consent completed on 6/7/22 2. Internal Audit checklist item related to photo consent was adjusted to specify that photo is attached, and expiration date is accurate. 3. Recent Audit of a Confidential File was successful in identifying the photo consent had required components.
Rating	Met

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

Indicator #	L3
Indicator	Immediate Action

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Area Need Improvement	For three out of nine investigations, immediate action was either not taken or was insufficient. The agency needs to ensure that upon discovery of allegations of potential abuse and /or neglect, an assessment is made and immediate action steps developed and implemented as quickly as possible to protect the individual from potential harm, pending the results of a fuller investigation or administrative review.
Process Utilized to correct and review indicator	1. President, Clinical Director, and HR will meet upon receiving any discovery of allegations to determine the best course of action to take immediate action steps to protect the individual. All action steps will be noted in the case file.
Status at follow-up	New system procedure in place for future concerns but untested
Rating	Met

Indicator #	L48
Indicator	HRC
Area Need Improvement	The Human Rights Committee did not meet composition requirements (no legal representative), nor did it meet on a quarterly basis. Meeting minutes did not contain details about agenda items. The agency needs to ensure the Human Rights Committee effectively fulfills mandated roles and membership meets requisite representation.
Process Utilized to correct and review indicator	1. Post Volunteer opportunities for legal specialist to join the committee 2. Reach out to local lawyers and law schools for volunteers 3. New HR Coordinator has been appointed and needs training

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Status at follow-up	1. The Agency is working to find interested representatives to join the Human Rights Committee without success. Local law school was contacted looking for potential volunteers with no response. 2. New HR Coordinator has scheduled a meeting with DDS HR specialist to review the necessary information that should be included in meeting minutes, and requirements for meetings. 3. New HR Coordinator scheduled to attend HR training on 6/21/22
Rating	Not Met