



**PROVIDER REPORT  
FOR**

**TATE BEHAVIORAL INC.  
594 Converse Street  
SUITE 365 Longmeadow, MA  
01106**

**November 07, 2024**

**Version**

**Public Provider Report**

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

# **SUMMARY OF OVERALL FINDINGS**

**Provider** TATE BEHAVIORAL INC.

**Review Dates** 10/7/2024 - 10/10/2024

**Service Enhancement Meeting Date** 10/24/2024

**Survey Team** Susan Dudley-Oxx (TL)  
Stephanie Baldwin

**Citizen Volunteers**

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

<b>Service Group Type</b>	<b>Sample Size</b>	<b>Licensure Scope</b>	<b>Licensure Level</b>	<b>Certification Scope</b>	<b>Certification Level</b>
<b>Employment and Day Supports</b>	1 location(s) 4 audit (s)	Full Review	57/61 2 Year License 10/24/2024 - 10/24/2026		18 / 21 Certified 10/24/2024 - 10/24/2026
Community Based Day Services	1 location(s) 4 audit (s)			Full Review	12 / 15
Planning and Quality Management				Full Review	6 / 6

## **EXECUTIVE SUMMARY :**

Tate Behavioral Inc., an agency located in Western MA, provides home, school, and community-based services to individuals with autism spectrum disorders, intellectual deficits and other developmental disabilities. The agency staff is comprised of Behavior Analysts and Speech Pathologists who provide supports related to children, adolescents and adults within an Applied Behavioral Analysis framework focused on promoting social and communication skills. The agency operates a special educational day school and an early child center as well as provides in home supports. In February 2024, the agency underwent Initial Review of their newly established service type: Community-Based Day Services (CBDS) to individuals funded by the Department of Developmental Services (DDS) with a focus on supporting individuals on the autism spectrum.

The scope of this survey was a full licensing and certification review of the agency's DDS CBDS located in Holyoke.

At the organizational level, positive Licensure findings were found related to human rights. The agency joined another provider's Human Rights Committee (HRC) and consequently had an effective system of oversight for human rights protections. At the organizational level relative to Certification, the organization had developed its first strategic plan resulting in a mechanism outlining the future direction of the organization focusing on adult services with benchmarks in place to monitor progress of identified goals.

Findings from the licensing review indicated the agency had effective systems in place to ensure the safety, health and well-being of individuals. The CBDS location was well-maintained and accommodated the needs of the individuals. The agency successfully adhered to various environmental and safety standards, including inspections of fire alarm and heating systems. Effective emergency evacuation practices were documented in the agency's safety plan, with completed fire drills on record. Additionally, individuals' emergency fact sheets were current and complete, and records were well organized, and contained necessary physicians' orders, health care protocols and dietary requirements.

Documentation of staff training for each individualized support need was in place ensuring that health protocols for conditions such as seizure disorders and other behavioral support plans were followed. In addition, requirements were in place to ensure medications were administered in accordance with MAP standards.

In areas related to human rights and communication, training and information on human rights and mandated reporting of abuse was provided to individuals and guardians. Staff supported individuals to use their iPad as well as to communicate using Picture Exchange Communication System (PECS), an alternative communication system, to express their choices and plan daily activities. The agency had regular and open communication with individuals' guardians and residential supports providing an individualized daily log with pertinent information for care providers to share with treating physicians and clinicians.

Additional positive findings related to service delivery were noted in the areas of individual service plan (ISP) goal development, assistive technology, and competent workforce. Both ISP assessments and support strategies were submitted to the area office within the required timelines and documentation of progress towards goal development was consistently tracked. Individuals were assessed regarding their assistive technology needs and devices such as iPads with Proloquo apps were in place to facilitate communication needs. Staff were well-trained and knowledgeable about individuals' goals, behavioral needs, and assistive technology devices.

Overall, outcomes associated with the agency's certification review were positive. Results found individuals to be engaged in community-based activities with transportation available daily. Individuals

were provided with opportunities to attend local events such as farmer's markets, visit local parks and walking trails as well as access stores to purchase their preferred snacks. An individualized approach was implemented in which staff facilitated individuals' connections with people in the community and acted as bridge builders to support individuals to develop, sustain, and enhance relationships with others by visiting the same locations and businesses on a regular basis.

Along with the number of positive findings identified through the survey, there were licensing and certification areas which will benefit from further attention. Within the areas subject to licensing, the agency needs to focus attention on ensuring individuals always have access to their possessions, supports and health related protections have the required authorization, and individuals' funds management plans accurately reflect the system in place to support the individual to manage their resources and funds are tracked to ensure the individuals have the funds to make a purchase. In regard to certification, the agency needs to ensure individuals have the opportunity to have input at the time of hire for prospective support staff, that individuals' job interests are assessed, and a plan is developed to assist individuals with employment goals.

As a result of this review, Tate Behavioral will receive a Two-Year License for its Employment and Day Support services with a service group score of 93% of licensure indicators met. This service group is Certified with an overall score of 86%. Follow-up will be conducted by the agency within 60 days on all licensing indicators that received a rating of Not Met, and the result shared with the DDS Central West Office of Quality Enhancement.

## LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
<b>Organizational</b>	<b>6/6</b>	<b>0/6</b>	
<b>Employment and Day Supports</b>	<b>51/55</b>	<b>4/55</b>	
Community Based Day Services			
<b>Critical Indicators</b>	<b>8/8</b>	<b>0/8</b>	
<b>Total</b>	<b>57/61</b>	<b>4/61</b>	<b>93%</b>
<b>2 Year License</b>			
<b># indicators for 60 Day Follow-up</b>		<b>4</b>	

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

Indicator #	Indicator	Area Needing Improvement
L51	Individuals can access and keep their own possessions.	The internal doors to program rooms automatically locked when closed. Only staff had keys to open the doors and individuals could not access their program room or possessions without staff assistance. The agency needs to ensure individuals have access the room without the use of a lock.
L61	Supports and health related protections are included in ISP assessments and the continued need is outlined.	For one individual with supports and health related protections, the individual's protective equipment did not have the required authorization for use at the program. The agency needs to ensure supports and health related protective equipment have the required authorization, a description of its use related to frequency and duration as well as checks for condition and cleanliness.
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 supported by Tate Behavioral the money management plan did not accurately reflect the agency's responsibility in supporting the individual to handle their personal spending money. The individual's funds were deposited into the agency's account and co-mingled with the agency's funds. The agency needs to ensure the individuals funds are kept separate from the agency's funds and that the moneys management plan describes how the agency supports the individual to spend their money.

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

<b>Indicator #</b>	<b>Indicator</b>	<b>Area Needing Improvement</b>
L69	Individual expenditures are documented and tracked.	For one individual supported by Tate Behavioral, the agency allowed the individual to borrow money when the individual did not have the funds to complete purchases, and the representative payee would reimburse the agency. The agency needs to ensure the individual has the funds available to complete purchases.

## CERTIFICATION FINDINGS

	Met / Rated	Not Met / Rated	% Met
<b>Certification - Planning and Quality Management</b>	<b>6/6</b>	<b>0/6</b>	
<b>Employment and Day Supports</b>	<b>12/15</b>	<b>3/15</b>	
Community Based Day Services	12/15	3/15	
<b>Total</b>	<b>18/21</b>	<b>3/21</b>	<b>86%</b>
<b>Certified</b>			

### **Community Based Day Services- Areas Needing Improvement on Standards not met:**

<b>Indicator #</b>	<b>Indicator</b>	<b>Area Needing Improvement</b>
C7	Individuals have opportunities to provide feedback at the time of hire / time of the match and on an ongoing basis on the performance/actions of staff / care providers that support them.	All four individuals reviewed did not have the opportunity to provide feedback at the time of hire for their support staff. The agency needs to ensure the individuals have the opportunity to have input at the time of hire for staff that support them.
C39 (07/21)	There is a plan developed to identify job goals and support needs that would lead to movement into supported employment.	All four individuals in the review did not have a written plan in place to address their identified goals and support needs related to employment. The agency needs to ensure that there is a plan in place to identify job goals and support needs that would lead to employment.
C44	Staff have effective methods to assist individuals to explore their job interests if appropriate.	All four individuals in the review had not been assessed related to their job interests. The agency needs to ensure individuals are assessed for their job interests and staff need to assist individuals to explore these interests.

## MASTER SCORE SHEET LICENSURE

Organizational: TATE BEHAVIORAL INC.

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

**Employment and Day Supports:**

<b>Ind. #</b>	<b>Ind.</b>	<b>Loc. or Individ.</b>	<b>Emp. Sup.</b>	<b>Cent. Based Work</b>	<b>Com. Based Day</b>	<b>Total Met / Rated</b>	<b>Rating</b>
L1	Abuse/neglect training	I			4/4	<b>4/4</b>	<b>Met</b>
L5	Safety Plan	L			1/1	<b>1/1</b>	<b>Met</b>
℞ L6	Evacuation	L			1/1	<b>1/1</b>	<b>Met</b>
L7	Fire Drills	L			1/1	<b>1/1</b>	<b>Met</b>
L8	Emergency Fact Sheets	I			4/4	<b>4/4</b>	<b>Met</b>
L9 (07/21)	Safe use of equipment	I			4/4	<b>4/4</b>	<b>Met</b>
L10	Reduce risk interventions	I			2/2	<b>2/2</b>	<b>Met</b>
℞ L11	Required inspections	L			1/1	<b>1/1</b>	<b>Met</b>
℞ L12	Smoke detectors	L			1/1	<b>1/1</b>	<b>Met</b>
℞ L13	Clean location	L			1/1	<b>1/1</b>	<b>Met</b>
L14	Site in good repair	L			1/1	<b>1/1</b>	<b>Met</b>
L15	Hot water	L			1/1	<b>1/1</b>	<b>Met</b>
L16	Accessibility	L			1/1	<b>1/1</b>	<b>Met</b>
L17	Egress at grade	L			1/1	<b>1/1</b>	<b>Met</b>
L20	Exit doors	L			1/1	<b>1/1</b>	<b>Met</b>
L21	Safe electrical equipment	L			1/1	<b>1/1</b>	<b>Met</b>
L22	Well-maintained appliances	L			1/1	<b>1/1</b>	<b>Met</b>
L25	Dangerous substances	L			1/1	<b>1/1</b>	<b>Met</b>
L26	Walkway safety	L			1/1	<b>1/1</b>	<b>Met</b>
L29	Rubbish/combustibles	L			1/1	<b>1/1</b>	<b>Met</b>

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L31	Communication method	I			4/4	4/4	Met
L32	Verbal & written	I			4/4	4/4	Met
L37	Prompt treatment	I			4/4	4/4	Met
℞ L38	Physician's orders	I			3/3	3/3	Met
L39	Dietary requirements	I			1/1	1/1	Met
L44	MAP registration	L			1/1	1/1	Met
L45	Medication storage	L			1/1	1/1	Met
℞ L46	Med. Administration	I			3/3	3/3	Met
L49	Informed of human rights	I			4/4	4/4	Met
L50 (07/21)	Respectful Comm.	I			4/4	4/4	Met
L51	Possessions	I			0/4	0/4	Not Met (0 %)
L52	Phone calls	I			4/4	4/4	Met
L54 (07/21)	Privacy	I			4/4	4/4	Met
L55	Informed consent	I			2/2	2/2	Met
L57	Written behavior plans	I			1/1	1/1	Met
L60	Data maintenance	I			1/1	1/1	Met
L61	Health protection in ISP	I			1/2	1/2	Not Met (50.0 %)
L63	Med. treatment plan form	I			2/2	2/2	Met
L64	Med. treatment plan rev.	I			2/2	2/2	Met
L67	Money mgmt. plan	I			2/3	2/3	Not Met (66.67 %)
L68	Funds expenditure	I			3/3	3/3	Met

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L69	Expenditure tracking	I			2/3	2/3	Not Met (66.67 %)
L77	Unique needs training	I			4/4	4/4	Met
L80	Symptoms of illness	L			1/1	1/1	Met
L81	Medical emergency	L			1/1	1/1	Met
Ⓜ L82	Medication admin.	L			1/1	1/1	Met
L84	Health protect. Training	I			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			3/3	3/3	Met
L88	Strategies implemented	I			4/4	4/4	Met
L91	Incident management	L			1/1	1/1	Met
L93 (05/22)	Emergency back-up plans	I			4/4	4/4	Met
L94 (05/22)	Assistive technology	I			4/4	4/4	Met
L96 (05/22)	Staff training in devices and applications	I			4/4	4/4	Met
<b>#Std. Met/# 55 Indicator</b>						51/55	
<b>Total Score</b>						57/61	
						93.44%	

## 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	<b>Met</b>
C3	Service satisfaction	1/1	<b>Met</b>
C4	Utilizes input from stakeholders	1/1	<b>Met</b>
C5	Measure progress	1/1	<b>Met</b>
C6	Future directions planning	1/1	<b>Met</b>

### Community Based Day Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	0/4	<b>Not Met (0 %)</b>
C8	Family/guardian communication	4/4	<b>Met</b>
C13	Skills to maximize independence	4/4	<b>Met</b>
C37	Interpersonal skills for work	3/3	<b>Met</b>
C38 (07/21)	Habilitative & behavioral goals	2/2	<b>Met</b>
C39 (07/21)	Support needs for employment	0/4	<b>Not Met (0 %)</b>
C40	Community involvement interest	4/4	<b>Met</b>
C41	Activities participation	4/4	<b>Met</b>
C42	Connection to others	4/4	<b>Met</b>
C43	Maintain & enhance relationship	4/4	<b>Met</b>
C44	Job exploration	0/4	<b>Not Met (0 %)</b>
C45	Revisit decisions	4/4	<b>Met</b>
C46	Use of generic resources	4/4	<b>Met</b>
C47	Transportation to/ from community	4/4	<b>Met</b>
C51	Ongoing satisfaction with services/ supports	4/4	<b>Met</b>