

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

**Provider:** Tempus Unlimited, Inc. \_\_\_\_\_

**Provider Address:** 600 Technology Center Drive ,  
 Stoughton \_\_\_\_\_

**Name of Person** Justin Sallaway  
**Completing Form:** \_\_\_\_\_

**Date(s) of Review:** 11-NOV-24 to 11-NOV-24 \_\_\_\_\_

| <b>Follow-up Scope and results :</b>     |                              |                                   |
|--|------------------------------|-----------------------------------|
| Service Grouping                         | Licensure level and duration | # Indicators std. met/ std. rated |
| Residential and Individual Home Supports | 2 Year License               | 5/5                               |

**Residential and Individual Home Supports Areas Needing Improvement on Standard not met - Identified by DDS**

|                              |   |
|------------------------------|---|
| <b>Indicator #</b>           | L5  |
| <b>Indicator</b>             | Safety Plan   |
| <b>Area Need Improvement</b> | Safety plan for one home had not been approved by the Area Office, agency needs to make sure that safety plan is approved by the Area Office. |

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|   |  |
|---|--|
| <b>Process Utilized to correct and review indicator</b> | Talked to the Area Director and found that the document had been sent by email but we had not received it. |
| <b>Status at follow-up</b>                              | The Fall River DDS Office sent the email again, and we received it.  |
| <b>Rating</b>   | Met  |

|   |   |
|---|---|
| <b>Indicator #</b>                                      | L36   |
| <b>Indicator</b>  | Recommended tests   |
| <b>Area Need Improvement</b>                            | Dental appointment for one individual did not occur as scheduled, agency needs to make sure that scheduled appointments are kept.   |
| <b>Process Utilized to correct and review indicator</b> | It was determined that the staff who took the individual to the last appointment forgot to inform the other staff of the next appointment. Going forward staff will communicate better. |
| <b>Status at follow-up</b>                              | Appointment notes are kept in the file.   |
| <b>Rating</b>   | Met   |

|   |   |
|---|---|
| <b>Indicator #</b>                                      | L43   |
| <b>Indicator</b>  | Health Care Record  |
| <b>Area Need Improvement</b>                            | Health Care Record for one individual was not updated to include current diagnosis, agency needs to make sure Health Care Record is update regularly to include up to date information.           |
| <b>Process Utilized to correct and review indicator</b> | Health Care Record for one individual was not updated to include current hay fever diagnosis. Staff needs to make sure Health Care Record is updated regularly to include up to date information. |
| <b>Status at follow-up</b>                              | Requirement that information in the file is updated after each Doctor's Appointment.  |
| <b>Rating</b>   | Met   |

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|   |   |
|---|---|
| <b>Indicator #</b>                                      | L86   |
| <b>Indicator</b>  | Required assessments  |
| <b>Area Need Improvement</b>                            | Required assessments for one individual were not submitted within required timelines, agency needs to make sure that required assessments are submitted within required timelines |
| <b>Process Utilized to correct and review indicator</b> | The DDS Service Coordinator neglected to set up the database to accept the assessment information. Once this was corrected the information was added.                             |
| <b>Status at follow-up</b>                              | Information submitted.  |
| <b>Rating</b>   | Met   |

|   |  |
|---|--|
| <b>Indicator #</b>                                      | L91  |
| <b>Indicator</b>  | Incident management  |
| <b>Area Need Improvement</b>                            | Two incident reports for one individual were not reported within required timelines, agency needs to make sure that incidents are reported and reviewed as mandated by regulation. |
| <b>Process Utilized to correct and review indicator</b> | Going forward when we see incidents attributed to Tempus when we are not involved, we will draw this to the attention of the DDS Area Office.                                      |
| <b>Status at follow-up</b>                              | Corrected the record by making sure the information in the data base was corrected.  |
| <b>Rating</b>   | Met  |