

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

Provider: THE ARC OF OPPORTUNITY IN
 NORTH CENTRAL
 MASSACHUSETTS, INC

Provider Address: 564 MAIN ST , FITCHBURG

Name of Person Susan Dudley-Oxx
Completing Form: _____

Date(s) of Review: 12-NOV-24 to 13-NOV-24

Follow-up Scope and results :		
Service Grouping	Licensure level and duration	# Indicators std. met/ std. rated
Residential and Individual Home Supports	2 Year License	6/7
Employment and Day Supports	2 Year License	0/0

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Summary of Ratings

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

Indicator #	L8
Indicator	Emergency Fact Sheets
Area Need Improvement	For six of the fifteen individuals reviewed, the emergency fact sheets had not been updated or include all the required information. The agency needs to ensure emergency fact sheets are updated to include all diagnoses, medications, and information related to likely response to search efforts, capabilities and preferences.
Process Utilized to correct and review indicator	The Arc of Opportunity evaluated current systems and procedures for updating Emergency Fact Sheets (EFS). The leadership team including Division Directors and Residential Managers have been retrained on how to retrieve information to accurately update the EFS annually and when changes occur. All HCRs are still in process of being updated. EFS were reviewed for fifteen individuals receiving residential or placement services by the Quality Assurance Department. Twelve out of the fifteen HCRs all were updated to include all diagnoses, medications, and information related to likely response to search efforts, capabilities and preferences.
Status at follow-up	12/15
Rating	Met

Indicator #	L36
Indicator	Recommended tests
Area Need Improvement	Four out of the fifteen individuals reviewed had recommended tests or follow-up appointments with specialists or primary care doctors that were either not scheduled or missed. The agency must ensure that all recommended tests, treatments (such as vaccinations), and appointments with medical professionals are scheduled and completed.

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Process Utilized to correct and review indicator	<p>The Arc of Opportunity evaluated iCentrix and its full capabilities with tracking Healthcare Management for all services. The leadership team on all levels and nurses have been retrained on the expectations with overall healthcare management based on standards and using iCentrix to manage this for all individuals served. Ongoing monitoring of this indicator through utilizing reports and audits in iCentrix by QA, Division Directors, and Division Directors occurred during the 60-day period.</p> <p>Healthcare appointments were reviewed for fifteen individuals. The Quality Assurance department randomly selected the sample and completed the review. Individuals were supported to schedule and/or attend all appointments and tests, including appointments with specialists, that were necessary within the follow-up period.</p>
Status at follow-up	15/15
Rating	Met

Indicator #	L43
Indicator	Health Care Record
Area Need Improvement	For ten of the fifteen individuals in the review, health care records were not updated to include recent vaccines and medical appointments or were missing pertinent information such as medical diagnoses, current medications and vaccinations received. The agency needs to ensure health care records are maintained and updated as required.
Process Utilized to correct and review indicator	<p>The Arc of Opportunity evaluated current systems and procedures for updating HCRs. Nurses have been retrained on how to retrieve information (HCSIS & iCentrix) to accurately update the HCR annually and when changes occur. All HCRs are still in process of being updated. HCRs were reviewed for fifteen individuals receiving residential or placement services. Eleven out of the fifteen HCRs all were updated as needed.</p> <p>During this follow up period, it became apparent this was complex and further uncovered systems and procedures The Arc of Opportunity is</p>

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	working to refine and update information into iCentrix. This includes updating iCentrix with all immunization records, obtaining updated diagnose from HCPs, and then ensuring iCentrix matches. This project is scheduled to be completed by the end of March 2025.
Status at follow-up	11/15 or 73%
Rating	Not Met

Indicator #	L85
Indicator	Supervision
Area Need Improvement	At two homes, oversight systems were not fully effective in monitoring the healthcare oversight of the individuals. For example, ensuring that medical appointment recommendations were followed in relation to follow up appointments being scheduled and kept, timely clarification of health care protocols to ensure appropriate staff training occurs, and medications being available for administration as prescribed. The agency needs to ensure that staff are receiving the necessary oversight, support and training in this area.
Process Utilized to correct and review indicator	The Arc of Opportunity reevaluated the current systems and monitoring expectations required by all levels. This includes the Vice Presidents, Division Directors, Nursing, and Quality Assurance department. Roles and expectations were clarified including revamping monitoring and follow up. There have been increased visits to the home by all management areas, including critical areas to check for to ensure that staff are receiving the necessary oversight, support and training in this area. A sample of four homes were selected for review. For the homes selected, all appointments were being scheduled and kept, timely clarification of health care protocols were in place, staff training occurred, and medications being available for administration as prescribed.
Status at follow-up	4/4
Rating	Met

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Indicator #	L88
Indicator	Strategies implemented
Area Need Improvement	For four individuals, ISP support strategies were not consistently implemented as designed. The agency needs to ensure that identified goals are implemented and data collection occurring in an ongoing manner.
Process Utilized to correct and review indicator	The Arc of Opportunity has implemented corrections in the following phases: Phase 1: Developed training and review with all levels of leadership on the use of iCentrix Phase 2: RM and DD entered identified goals for all individuals into iCentrix Phase 3: Completed retrainings for DSPs and operationalize implementing ISP goals using iCentrix to collect data. The status of ISP goal implementation was reviewed for fifteen individuals. The Quality Assurance department randomly selected the sample and completed the review. For thirteen individuals, goals were implemented according to provider support strategies, and data on goal accomplishment was regularly collected and documented.
Status at follow-up	13/15
Rating	Met

Indicator #	L89
Indicator	Complaint and resolution process
Area Need Improvement	At one ABI/MFP residential location, the complaint resolution process had not been effectively implemented. The agency needs to ensure individuals are trained in the complaint resolution process, that it is utilized, and that concerns are documented and resolved.
Process Utilized to correct and review indicator	The Arc of Opportunity has a thorough complaint resolution process in place. The leadership and the individuals were retrained in the process

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	<p>and reminded of the importance to complete and submit form to the Quality Assurance department so the Division Director of QA can further follow up on the concerns. Each home now has a Human Rights Board in place that includes information of the complaint resolution process and copies of the forms available in a word and picture version.</p> <p>A sample of four homes were selected for review. All individuals are trained in the complaint resolution process and can show where they would go to file a formal complaint or grievance in the home. There were no concerns voiced by the individuals selected for the sample as reported to our QA department.</p>
Status at follow-up	4/4
Rating	Met

Indicator #	L91
Indicator	Incident management
Area Need Improvement	At four of the locations reviewed incident reports were not reported or finalized within the required timelines. The agency needs to ensure all incidents are submitted within the required timelines.
Process Utilized to correct and review indicator	<p>The Arc of Opportunity reviewed and retrained staff on incident management, including categories of reportable incidents and timelines for incident reporting and review. In addition, The Arc is conducting ongoing oversight of incident reporting with all levels of management.</p> <p>A sample of four homes were selected for review completed by the Quality Assurance Department. There were six incidents that were entered and all of them were submitted into HCSIS in a timely manner at all locations.</p>
Status at follow-up	4/4
Rating	Met

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

Indicator #	L65
Indicator	Restraint report submit
Area Need Improvement	Review of the agency's restraint report found that two of the four reports were not submitted or reviewed within the required timelines. The agency needs to ensure restraint reports meet the timelines for submission, manager and human rights committee review.
Process Utilized to correct and review indicator	The Arc of Opportunity reviewed and retrained staff on incident management, including categories of reportable incidents and timelines for restraints, manager, and human rights committee. In addition, The Arc is conducting ongoing oversight of incident reporting with all levels of management.
Status at follow-up	No restraints occurred since the survey/SEM.
Rating	Not Rated