



**PROVIDER REPORT  
FOR**

**The Guild for Human  
Services  
521 Virginia Rd.  
Concord, MA 01742**

**October 24, 2024**

**Version**

**Public Provider Report**

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

# **SUMMARY OF OVERALL FINDINGS**

**Provider** The Guild for Human Services

**Review Dates** 9/23/2024 - 9/26/2024

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

**Survey Team** Chloe Browning (TL)  
Cheryl Dolan  
John Downing

**Citizen Volunteers**

**Survey scope and findings for Residential and Individual Home 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>Residential and Individual Home Supports</b>	4 location(s) 6 audit (s)	Full Review	83/87 2 Year License 10/10/2024 - 10/10/2026		Certified 10/10/2024 - 10/10/2026
Residential Services	4 location(s) 6 audit (s)			Deemed	
Planning and Quality Management				Deemed	

## **EXECUTIVE SUMMARY :**

The Guild for Human Services was incorporated in 1952 as the Protestant Guild for the Blind and over the years has expanded to offer a continuum of services for youth and adults with intellectual and developmental disabilities. The agency specializes in services for individuals with complex needs, including autism and behavioral challenges. In 2014, The Guild developed its residential homes for young adults turning 22 and has expanded to its current operation of 15 residential homes in communities within Eastern Massachusetts.

The scope of this survey conducted by the Office of Quality Enhancement (OQE) was a full licensing review of the agency's Residential services. The agency elected to deem CARF scores in lieu of a DDS OQE review of the certification indicators.

Many positive practices were noted organizationally. The agency continued to excel in the domain of Human Rights. The agency has an active and engaged Human Rights Committee (HRC), that met regularly, had all required members with consistent attendance, and reviewed all required materials. All individuals and guardians surveyed had received training in regard to Human Rights and Mandated Reporting. Any restrictions in place had all the required components and the agency ensured steps were taken to mitigate restrictions for others in the home for whom the restrictions were not necessary. The agency was also very responsive to any complaints and allegations; taking steps to protect the immediate health and safety of the individuals following an allegation, as well as thorough follow through with any recommendations or action plans.

Environmental safety is another area where the agency demonstrated effective systems. All the locations audited were clean and in good repair, with all required inspections completed. Water temperatures were within range, fire safety systems were functional, and safety plans were current, with drills being run in accordance with DDS regulations.

The system for training staff was found to be robust and effective. All staff in the sample had the required trainings and there was an efficient system in place to ensure timely review of trainings as required. At the programmatic level, staff were trained in the unique needs of the people they supported. Trainings included a range of modalities, including online trainings, in person competencies and recordings of trainings to ensure timely and consistent training when new staff are hired. Staff were observed to have excellent rapport with the individuals they were supporting, demonstrated a clear understanding of each person's support needs and were responsive to individuals in an effective and personalized manner.

Many positive practices were seen within the Health and Wellness domain. Individuals were supported to have annual physical and dental examinations, as well as attend specialty appointments, and receive follow-up and episodic treatment as needed. Medical protocols were developed when indicated, and staff were trained to ensure they were correctly implemented.

The agency was found to be very effective in the area of clinical supports. There was strong clinical oversight in each of the homes and a comprehensive system of supports across all locations. Each person was also supported clinically in an individualized manner and staff were observed to be very knowledgeable and competent in regard to implementing behaviors plans and proactive approaches.

The agency excelled in supporting the use of assistive technology. Comprehensive assessments were conducted to identify the specific needs of each individual. A wide range of supports were then implemented, including resources and strategies at both the home and individual levels. Assistive technology supports encompassed a variety of tools, including communication devices and tablets. Additionally visual labels, task analyses, calendars, schedules and other supports were utilized to enhance understanding and foster greater independence for the individuals in the homes.

Individuals living in residential homes were all very active and involved in their communities, and these activities were found to also promote positive healthy activities through the acquisition of nutritional food and engagement in physical exercise. There were almost daily outings in many of the homes with calendars showing a wide range of opportunities for each person. The residences excelled in ensuring nutritious food was available, for example, some homes had their own gardens for growing vegetables and others had membership to CSAs at local farms.

In addition to the many positive practices seen during the survey, there are areas that require some further attention. The agency should have a system in place to ensure that restraint reports are submitted and finalized within the required timelines. The agency should also ensure that the Medication Treatment Plans (MTP) for those prescribed behavior-modifying medications contain all the required components, specifically identifying measurable criteria for when the agency would approach the prescriber to consider a medication reduction.

As a result of this review, the Guild for Human Services has received a rating of met in 95% of the licensing indicators, with all critical indicators met. The agency will receive a Two-Year License for its Residential and Individual Home Supports service group. The agency will conduct its own follow-up in 60 days for those licensing indicators that were not met and report its findings to OQE within 60 days.

## LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
<b>Organizational</b>	9/10	1/10	
<b>Residential and Individual Home Supports</b>	74/77	3/77	
Residential Services			
<b>Critical Indicators</b>	8/8	0/8	
<b>Total</b>	83/87	4/87	95%
<b>2 Year License</b>			
<b># indicators for 60 Day Follow-up</b>		4	

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

Indicator #	Indicator	Area Needing Improvement
L65	Restraint reports are submitted within required timelines.	13 of 38 restraint reports were not submitted and/or finalized within the required timelines. The agency needs to ensure that restraint reports are submitted and finalized within the required timelines.

### **Residential Commendations on Standards Met:**

Indicator #	Indicator	Commendations
L94 (05/22)	Individuals have assistive technology to maximize independence.	Across all surveys, individuals supported had assistive technology to maximize independence. The agency thoroughly assessed each person and put in place not only high-tech devices, including tablets and communication technology, but also a wide range of low-tech items, including visual reminders, schedules, task analyses, visual cookbooks, and calendars. A wide range of options for technology were shared with individuals in the homes and encouraged exploration and expansion of how assistive technology can promote further independence. Technology assessments and implementation had a positive impact on those supported. As a result, individuals were observed to be more independent in having access to information, completing multistep processes such as laundry and completing tasks of daily living.

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

<b>Indicator #</b>	<b>Indicator</b>	<b>Area Needing Improvement</b>
L61	Supports and health related protections are included in ISP assessments and the continued need is outlined.	One individual was missing health related supports and protection information for a shower chair. The agency needs to ensure that all health related supports are utilized under the written authorization of a qualified clinician and, at minimum health related supports documentation includes reason/rationale for use, details frequency and duration of use, frequency of safety checks, maintenance and cleaning instructions and conditions for modification and discontinuance of the device.
L63	Medication treatment plans are in written format with required components.	Five individuals had medication treatment plans that did not include criteria for when to approach the provider to consider re-evaluating or adjusting the medication based on the treatment data. The agency needs to ensure all medication treatment plans contain the required components, inclusive of what measurable criteria would prompt the agency to approach the prescriber to consider a decrease in medication strength.
L84	Staff / care providers are trained in the correct utilization of health related protections per regulation.	At one location, staff had not received training on the health related supports and protections. The agency must ensure that staff are trained and knowledgeable on the safe and effective implementation of health related supports and protections.

## MASTER SCORE SHEET LICENSURE

### Organizational: The Guild for Human Services

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
L2	Abuse/neglect reporting	4/4	Met
L3	Immediate Action	12/12	Met
L4	Action taken	11/11	Met
L48	HRC	1/1	Met
L65	Restraint report submit	25/38	Not Met(65.79 % )
L66	HRC restraint review	33/37	Met(89.19 % )
L74	Screen employees	5/5	Met
L75	Qualified staff	3/3	Met
L76	Track trainings	20/20	Met
L83	HR training	20/20	Met

**Residential and Individual Home Supports:**

<b>Ind. #</b>	<b>Ind.</b>	<b>Loc. or Indiv.</b>	<b>Res. Sup.</b>	<b>Ind. Home Sup.</b>	<b>Place.</b>	<b>Resp.</b>	<b>ABI-MFP Res. Sup.</b>	<b>ABI-MFP Place.</b>	<b>Total Met/Rated</b>	<b>Rating</b>
L1	Abuse/neglect training	I	6/6						6/6	Met
L5	Safety Plan	L	4/4						4/4	Met
℞ L6	Evacuation	L	4/4						4/4	Met
L7	Fire Drills	L	4/4						4/4	Met
L8	Emergency Fact Sheets	I	6/6						6/6	Met
L9 (07/21)	Safe use of equipment	I	5/6						5/6	Met (83.33%)
L10	Reduce risk interventions	I	2/2						2/2	Met
℞ L11	Required inspections	L	4/4						4/4	Met
℞ L12	Smoke detectors	L	4/4						4/4	Met
℞ L13	Clean location	L	4/4						4/4	Met
L14	Site in good repair	L	4/4						4/4	Met
L15	Hot water	L	4/4						4/4	Met
L16	Accessibility	L	4/4						4/4	Met
L17	Egress at grade	L	4/4						4/4	Met
L18	Above grade egress	L	4/4						4/4	Met

Ind. #	Ind.	Loc. or Individ.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L20	Exit doors	L	4/4						4/4	Met
L21	Safe electrical equipment	L	4/4						4/4	Met
L22	Well-maintained appliances	L	4/4						4/4	Met
L23	Egress door locks	L	1/1						1/1	Met
L24	Locked door access	L	4/4						4/4	Met
L25	Dangerous substances	L	4/4						4/4	Met
L26	Walkway safety	L	4/4						4/4	Met
L28	Flammables	L	4/4						4/4	Met
L29	Rubbish/combustibles	L	4/4						4/4	Met
L30	Protective railings	L	4/4						4/4	Met
L31	Communication method	I	6/6						6/6	Met
L32	Verbal & written	I	6/6						6/6	Met
L33	Physical exam	I	5/5						5/5	Met
L34	Dental exam	I	6/6						6/6	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L35	Preventive screenings	I	6/6						6/6	Met
L36	Recommended tests	I	6/6						6/6	Met
L37	Prompt treatment	I	6/6						6/6	Met
℞ L38	Physician's orders	I	5/5						5/5	Met
L39	Dietary requirements	I	1/1						1/1	Met
L40	Nutritional food	L	4/4						4/4	Met
L41	Healthy diet	L	4/4						4/4	Met
L42	Physical activity	L	4/4						4/4	Met
L43	Health Care Record	I	6/6						6/6	Met
L44	MAP registration	L	4/4						4/4	Met
L45	Medication storage	L	4/4						4/4	Met
℞ L46	Med. Administration	I	6/6						6/6	Met
L49	Informed of human rights	I	6/6						6/6	Met
L50 (07/21)	Respectful Comm.	I	6/6						6/6	Met
L51	Possessions	I	6/6						6/6	Met
L52	Phone calls	I	6/6						6/6	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L53	Visitation	I	6/6						6/6	Met
L54 (07/21)	Privacy	I	6/6						6/6	Met
L55	Informed consent	I	3/3						3/3	Met
L56	Restrictive practices	I	5/5						5/5	Met
L57	Written behavior plans	I	2/2						2/2	Met
L60	Data maintenance	I	2/2						2/2	Met
L61	Health protection in ISP	I	1/2						1/2	Not Met (50.0 %)
L62	Health protection review	I	1/1						1/1	Met
L63	Med. treatment plan form	I	0/6						0/6	Not Met (0 %)
L64	Med. treatment plan rev.	I	6/6						6/6	Met
L67	Money mgmt. plan	I	4/5						4/5	Met (80.0 %)
L68	Funds expenditure	I	5/5						5/5	Met
L69	Expenditure tracking	I	5/5						5/5	Met
L70	Charges for care calc.	I	5/5						5/5	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L71	Charges for care appeal	I	6/6						6/6	Met
L77	Unique needs training	I	6/6						6/6	Met
L78	Restrictive Int. Training	L	3/3						3/3	Met
L79	Restraint training	L	4/4						4/4	Met
L80	Symptoms of illness	L	4/4						4/4	Met
L81	Medical emergency	L	4/4						4/4	Met
L82	Medication admin.	L	4/4						4/4	Met
L84	Health protect. Training	I	1/2						1/2	Not Met (50.0%)
L85	Supervision	L	4/4						4/4	Met
L86	Required assessments	I	4/4						4/4	Met
L87	Support strategies	I	3/4						3/4	Met
L88	Strategies implemented	I	6/6						6/6	Met
L90	Personal space/bedroom privacy	I	6/6						6/6	Met
L91	Incident management	L	3/4						3/4	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L93 (05/22)	Emergency back-up plans	1	6/6						6/6	Met
L94 (05/22)	Assistive technology	1	6/6						6/6	Met
L96 (05/22)	Staff training in devices and applications	1	6/6						6/6	Met
L99 (05/22)	Medical monitoring devices	1	1/1						1/1	Met
<b>#Std. Met/# 77 Indicator</b>									<b>74/77</b>	
<b>Total Score</b>									<b>83/87</b>	
									<b>95.40%</b>	