

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

Provider: The United Arc, Inc. _____

Provider Address: 294 Avenue A , Turner Falls _____

Name of Person Joel Torres
Completing Form: _____

Date(s) of Review: 31-OCT-24 to 01-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	1/3

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

Summary of Ratings

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

Indicator #	L26
Indicator	Walkway safety
Area Need Improvement	There was a large pothole in the parking lot directly in front of both apartments creating a tripping hazard/unsafe situation. The agency needs to ensure that all walkways, driveways, and ramps are in good repair.
Process Utilized to correct and review indicator	Since date of OQE review. We have had an asphalt company come out to assess the parking lot and give us a quote on several potential options on possible repairs to take place.
Status at follow-up	Working on finding funding to be able to pay for the cost of the repairs. We discussed temporary measures but were informed that would be a waste of funds as once the weather gets worse and driveway needs to be plowed it would more than likely dig up what was put in place.
Rating	Not Met

Indicator #	L57
Indicator	Written behavior plans
Area Need Improvement	For the individual for which the restrictions are needed, the restrictive intervention must be outlined in writing, identifying the rationale, and outlined as the least restrictive alternative. A plan for elimination or fading the restriction must be included with the rationale as part of the document. The restrictive intervention must be included in the ISP and agreement is needed from the legal decision maker for the individual that the restriction is being

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

	imposed. All agreements "through the ISP" are considered annual. The restriction must be reviewed by the Human Rights Committee.
Process Utilized to correct and review indicator	Discussions took place with the clinical consultant and our supervising team when it comes to this indicator. Moving forward any restrictions in place will go to the clinical consultant for review and formulation of fading of restriction for the individual. Once that is determined and written up it will be submitted to ISP team and Human Rights committee for approval.
Status at follow-up	Plan was updated then reviewed and approved in Human Rights Meeting on September 9th, 2024, by Human Rights Committee members that were in attendance.
Rating	Met

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

Indicator #	L48
Indicator	HRC
Area Need Improvement	Two members of the Human Rights Committee were absent from two out of the last four meetings. The Committee had not completed annual review of agency policies and procedures for compliance with the Department's regulations on human rights or review of human rights training material and processes. The agency needs to ensure that the HRC meets all the expectations and requirements outline in DDS regulations.
Process Utilized to correct and review indicator	Moving forward if and when committee members can't attend a meeting. They are responsible for providing feedback or questions they may have to the Human rights coordinator prior to the meeting taking place. Once they do so, it is the responsibility of the human rights coordinator to ask those questions at the meeting on the behalf of those that can't be in attendance. When it comes to the agencies policies and procedures those will now be reviewed annually per schedule to meet DDS regulations.

DEPARTMENT OF DEVELOPMENTAL SERVICES

LICENSURE AND CERTIFICATION

PROVIDER FOLLOW-UP REPORT

Status at follow-up	Meeting held on September 9th, 2024, where we spoke about the fact that we need to be in compliance with DDS regulations and how we will operate moving forward for those that can't be in attendance. At this meeting the following committee members were in attendance: Ann Dorr-Committee chair. Anne Nawotny-Advocate Seat, Pam Lamere-Advocate Seat, Brenda Denno-Medical Seat, Megan Kludt-Legal Seat. As well as the following provider staff: Jamie Law-HR Advocate, Tom Mangan-HR Advocate, Susan Shea-HR Advocate, Jodie Balaguer-HR Advocate-Lifepath, Joel Torres-Director of Adult Services. Not in attendance was our clinical seat-Scott Dunaisky. Everyone was made aware that the process would be that if and when they can't attend, they will follow the process mentioned above.
Rating	Not Met