

DEPARTMENT OF DEVELOPMENTAL SERVICES

LICENSURE AND CERTIFICATION

DDS FOLLOW-UP REPORT

Provider	T.I.L.L.	Provider Address	20 Eastbrook Rd. , Dedham
Survey Team	Boghoian, Mark; Hampton, Cheryl; Hayes, Leslie; Larrieux, Margareth; MacPhail, Lisa; W. Weru , Joseph;	Date(s) of Review	26-AUG-19 to 28-AUG-19

Follow-up Scope and results :						
Service Grouping	Licensure level and duration	# Critical Indicators std. met/ std. rated at follow-up	# Indicators std. met/ std. rated at follow-up	Sanction status prior to Follow-up	Combined Results post-Follow-up; for Deferred, License level	Sanction status post Follow-up
Residential and Individual Home Supports 15 Locations 27 Audits	2 Year License		5/10	<input checked="" type="checkbox"/> Eligible for new business (Two Year License) <input type="checkbox"/> Ineligible for new business. (Deferred Status: Two year mid-cycle review License)	2 Year License	<input checked="" type="checkbox"/> Eligible for New Business (80% or more std. met; no critical std. not met) <input type="checkbox"/> Ineligible for New Business (<=80% std met and/or more critical std. not met)
Employment and Day Supports 2 Locations 8 Audits	2 Year License		6/6	<input checked="" type="checkbox"/> Eligible for new business (Two Year License) <input type="checkbox"/> Ineligible for new business. (Deferred Status: Two year mid-cycle review License)	2 Year License	<input checked="" type="checkbox"/> Eligible for New Business (80% or more std. met; no critical std. not met) <input type="checkbox"/> Ineligible for New Business (<=80% std met and/or more critical std. not met)

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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	Six of twenty-five Emergency Fact Sheets did not contain current and/or accurate information. The agency needs to ensure that Emergency Fact Sheets contain all required information, and that the information is accurate and up to date.
Status at follow-up	Five of fourteen Emergency Fact Sheets were found to have missing or inaccurate information. The agency needs to ensure that emergency fact sheets contain all the required information.
#met /# rated at followup	9/14
Rating	Not Met

Indicator #	L15
Indicator	Hot water
Area Need Improvement	At five of sixteen locations, the water temperature tested outside the required parameters (110-120 degrees). The agency needs to ensure that it monitors and maintains water temperatures to be within the required parameters at all times.
Status at follow-up	At eleven locations, water temperature tested within the required limits; it tested outside the limits at three locations. Water temperatures should be maintained to be within the required temperature range at all locations.
#met /# rated at followup	11/14
Rating	Not Met

Indicator #	L56
Indicator	Restrictive practices
Area Need Improvement	Restrictive practices at three of ten locations did not have written rationale, clearly outlined continued

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	need for the practice, and/or criteria for the reduction/elimination of the restrictions. The agency needs to ensure that the documented use of restrictive practices meets the current needs of individual(s) they are intended for; and , that criteria for the reduction/elimination of the practices are documented.
Status at follow-up	At five of six locations, restrictive practices were found to have written rationale and had been reviewed as required.
#met /# rated at followup	5/6
Rating	Met

Indicator #	L63
Indicator	Med. treatment plan form
Area Need Improvement	Seven of seventeen medication treatment plans did not contain all of the required components. Plans were determined to be lacking such things as; well defined measurable behaviors, data collection, criteria to reduce/eliminate the need for prescribed medications, and in some instances medications requiring a plan had not been developed. The agency needs to ensure that all medication treatment plans contain all required components.
Status at follow-up	Five of eleven individual's medication treatment plans were found to have missing components; in some cases the information was unclear as conditions being treated/symptoms were not clearly defined. Medication treatment plans must be developed to contain all the required components.
#met /# rated at followup	6/11
Rating	Not Met

Indicator #	L64
Indicator	Med. treatment plan rev.
Area Need Improvement	Four of seventeen medication treatment plans had not been submitted to the ISP team prior to people's ISP meetings (or after a new medication requiring such had been prescribed) . The agency needs to ensure that all medication treatment plans are submitted to the ISP team.

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Status at follow-up	Five of eleven individual's medication treatment plans had not received the required reviews. Medication treatment plans must be submitted to the ISP team when developed.
#met /# rated at followup	6/11
Rating	Not Met

Indicator #	L67
Indicator	Money mgmt. plan
Area Need Improvement	For seventeen of twenty-one audits where the agency had shared/delegated money management responsibilities, there was either no written plan in place, or none that was agreed to in writing by the individual/guardian. The agency needs to ensure that when it has shared and/or delegated money management responsibilities, it develops written plans, and that the plans are agreed to in writing by individuals/guardians.
Status at follow-up	Money management plans were in place for the fifteen individuals whose records were reviewed.
#met /# rated at followup	15/15
Rating	Met

Indicator #	L69
Indicator	Expenditure tracking
Area Need Improvement	For six of twenty-two people for whom the agency had shared/delegated money management responsibilities, individual's expenditures were not documented and tracked in real-time. The agency needs to ensure that each financial transaction is documented and tracked in real-time (money in/out).
Status at follow-up	For nine of the eleven individuals, expenditures were being properly tracked. Individual expenditures must be tracked as agreed, using the cash out cash in method.
#met /# rated at followup	9/11
Rating	Met

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Indicator #	L86
Indicator	Required assessments
Area Need Improvement	For four of fifteen individuals, the agency did not submit the required ISP assessments within the established timeframes. The agency needs to ensure that required assessments are completed and submitted within the established timelines for the ISP.
Status at follow-up	Eight of the ten individuals had their ISP assessments submitted within the required timelines. Assessments for the ISP must be submitted at least 15 days prior to the ISP meeting.
#met /# rated at followup	8/10
Rating	Met

Indicator #	L87
Indicator	Support strategies
Area Need Improvement	For six of thirteen individuals, the agency did not submit the provider support strategies within the established timeframes. The agency needs to ensure that provider support strategies are completed and submitted within the established timelines.
Status at follow-up	For three of eight individuals, support strategies for the ISP were not submitted within the required timelines. Support strategies for the ISP must be submitted at least 15 days prior to the ISP meeting.
#met /# rated at followup	5/8
Rating	Not Met

Employment and Day Supports Areas Needing Improvement on Standard not met - Identified by DDS

Indicator #	L5
Indicator	Safety Plan

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Area Need Improvement	At one location the agency did not have a DDS authorized safety plan. The agency needs to ensure that all locations maintain a current DDS authorized safety plan.
Status at follow-up	Safety Plans were in place and current at the two locations.
#met /# rated at followup	2/2
Rating	Met

Indicator #	L55
Indicator	Informed consent
Area Need Improvement	For two of five audits where people's photographic image was used in a media publication, the agency had not obtained consents that clearly specified use of people's images. Consent for the use of people's images in media publications need to outline which specific images are proposed for distribution/ release, and the agency need to ensure this in its practices.
Status at follow-up	For two individuals, informed consent for media had been properly obtained.
#met /# rated at followup	2/2
Rating	Met

Indicator #	L63
Indicator	Med. treatment plan form
Area Need Improvement	The one medication treatment plan was not written to contain all of the required components. The agency needs to ensure that all medication treatment plans contain all required components.
Status at follow-up	The one Medication Treatment Plan contained all the required components.
#met /# rated at followup	1/1
Rating	Met

Indicator #	L64
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Indicator	Med. treatment plan rev.
Area Need Improvement	The one medication treatment plan had not been submitted to the ISP team prior to the person's ISP meeting. The agency needs to ensure that all medication treatment plans are submitted to the ISP team when developed .
Status at follow-up	The one Medication Treatment Plan had been submitted to the ISP team.
#met /# rated at followup	1/1
Rating	Met

Indicator #	L86
Indicator	Required assessments
Area Need Improvement	For three of six audits, the agency did not submit the required ISP assessments within the established timeframes. The agency needs to ensure that required assessments are completed and submitted within the established timelines for the ISP.
Status at follow-up	There were no new ISPs available for review.
#met /# rated at followup	
Rating	Not Rated

Indicator #	L87
Indicator	Support strategies
Area Need Improvement	For three of six individual's the agency did not submit the provider support strategies within the established timeframes for the ISP. The agency needs to ensure that provider support strategies are completed and submitted within the established timelines for the ISP.
Status at follow-up	There were no new ISPs available for review.

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#met /# rated at followup	
Rating	Not Rated

Indicator #	L91
Indicator	Incident management
Area Need Improvement	One of three incidents were not reported and/or finalized on HCSIS as mandated by regulation. The agency needs to ensure that all incidents are reported, reviewed and finalized as mandated by regulation.
Status at follow-up	The one incidents reported had been submitted and finalized within the required timelines.
#met /# rated at followup	1/1
Rating	Met

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

Indicator #	L65
Indicator	Restraint report submit
Area Need Improvement	Ten out of twenty restraint reports were not submitted and/or finalized within the required timelines. The agency needs to ensure that all restraints reports are submitted and finalized within the required timelines
Status at follow-up	The two restraints that occurred within the last sixty days had been submitted and reviewed within the required timelines.
#met /# rated at followup	2/2
Rating	Met

Indicator #	L66
Indicator	HRC restraint review

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Area Need Improvement	Four out of six restraints were not reviewed by the Human Rights Committee within the established time-frame. The agency needs to ensure that the committee reviews all restraints in accordance with the established timelines.
Status at follow-up	While the Human Rights Committee had not yet reviewed the two restraints that occurred within the last sixty days, they remain within the required timelines for review.
#met /# rated at followup	
Rating	Not Rated

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