

DEPARTMENT OF DEVELOPMENTAL SERVICES
LICENSURE AND CERTIFICATION
Mid-Cycle Review Final Report

Provider Triangle, Inc. Provider Address 420 Pearl St, Malden
 Survey Team Conley-Sevier, Jennifer; Date(s) of Review 21-OCT-24 to 23-OCT-24

Mid-Cycle Scope and results :					
Service Grouping	Licensure level and duration	# Indicators std. met/ std. rated at Mid-Cycle	Sanction status prior to Mid-Cycle	Combined Results post-Mid-Cycle;	Sanction status post Mid-Cycle
Residential and Individual Home Supports 3 Locations 7 Audits	Defer Licensure	9/15	<input checked="" type="checkbox"/> Eligible for new business <input type="checkbox"/> Ineligible for new business.	2 Year License with Mid-Cycle Review 80/86 (93.02%)	<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 Standards not met:

Indicator #	L7
Indicator	Fire Drills
Area Need Improvement	At one location, a fire drill was not conducted using the staffing ratio identified in the EESP. The agency needs to ensure fire drills are conducted with the correct staffing ratio as identified in Safety Plans.
Status at mid-cycle	All locations had conducted fire drills with the required number of staff as outlined in the Safety Plan.
#met /# rated at mid-cycle	3/3
Rating	MET

Indicator #	L12
Indicator	Smoke detectors
Area Need Improvement	At one location, the bed shaker for an individual who is hard of hearing was not in place. The agency needs to ensure that additional adaptations for safe evacuation are in place and operational as required.
Status at mid-cycle	The fire alarm systems at all three locations were fully functional with no issues. Smoke detectors sounded when tested, and all were interconnected.
#met /# rated at mid-cycle	3/3
Rating	MET

Indicator #	L15
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Indicator	Hot water
Area Need Improvement	At one location hot water temperatures were outside of the required range. The agency needs to ensure that hot water temperatures are within required ranges.
Status at mid-cycle	The hot water temperatures at all locations tested within the acceptable range.
#met /# rated at mid-cycle	3/3
Rating	MET

Indicator #	L23
Indicator	Egress door locks
Area Need Improvement	At one location a bedroom door lock was present for a bedroom containing an egress. The agency needs to ensure that bedrooms with egresses do not contain door locks.
Status at mid-cycle	There were no locks on bedroom doors leading to an egress.
#met /# rated at mid-cycle	3/3
Rating	MET

Indicator #	L36
Indicator	Recommended tests
Area Need Improvement	Two individuals had recommended tests or appointments with a specialist that were not made or kept. The agency needs to ensure all appointments for tests and/or examination by a specialist are made and kept.
Status at mid-cycle	Six of seven individuals requiring appointments and tests with specialists during this review period had received them.

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#met /# rated at mid-cycle	6/7
Rating	MET

Indicator #	L56
Indicator	Restrictive practices
Area Need Improvement	Door alarms were present at one location, however they were not intended to be present or active. The agency needs to ensure that when restrictive practices are no longer intended to be utilized that they are removed from the home.
Status at mid-cycle	For the one location with restrictive practices in place, door alarms were present with a specific written rationale reviewed by the Human Rights Committee and containing a mitigation component so as to not duly restrict the rights of others for whom this restriction was not in place.
#met /# rated at mid-cycle	3/3
Rating	MET

Indicator #	L63
Indicator	Med. treatment plan form
Area Need Improvement	Five individuals had medication treatment plans that did not include all required components. Plans were missing baseline or historical data and/or the clinical plan or course for use of the medication such as criteria for 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.

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Status at mid-cycle	Three out of five individuals had medication treatment plans that did not include all required components, including descriptions of target behaviors/symptoms in measurable and observable terms; in some cases, data collection was not consistently occurring. One of the individuals who was prescribed behavior modifying medication did not have a medication treatment plan in place. The agency needs to ensure all medication treatment plans are in place and contain the required components.
#met /# rated at mid-cycle	2/5
Rating	NOT MET

Indicator #	L64
Indicator	Med. treatment plan rev.
Area Need Improvement	For two individuals prescribed behavior modifying medications, plans had not been submitted to the ISP team for review as required. The agency needs to ensure that plans are submitted into HCSIS for inclusion in the ISP.
Status at mid-cycle	The medication treatment plans for four out of four individuals prescribed behavior modifying medications had been submitted into HCSIS for inclusion in the ISP.
#met /# rated at mid-cycle	4/4
Rating	MET

Indicator #	L67
Indicator	Money mgmt. plan
Area Need Improvement	For two individuals, money management plans did not accurately reflect the process utilized by the agency to secure and manage the individuals' funds. The agency needs to ensure that money management plans accurately reflect existing practices.

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Status at mid-cycle	For two of seven individuals reviewed, financial management plans were in place; however, there was no written agreement to the plan by the individual or guardian as required. The agency needs to ensure that money management plans contain the required components.
#met /# rated at mid-cycle	5/7
Rating	NOT MET

Indicator #	L85
Indicator	Supervision
Area Need Improvement	One location did not have an adequate system of supervision, management, and oversight in place to identify issues around evacuation, data collection, and/or medical care. The agency needs to ensure that it is providing support to direct service staff on a regular and ongoing basis, communication is clear, and systems and routines are consistently implemented.
Status at mid-cycle	One of the three locations did not have systems in place to ensure adequate oversight in identifying issues pertaining to data collection on ISP objectives and behavioral data. Managers at this location were not meeting with direct care staff on a regular and consistent basis. The agency needs to ensure that it is providing support to direct service staff on a regular and ongoing basis, communication is clear, and systems and routines are consistently implemented.
#met /# rated at mid-cycle	2/3
Rating	NOT MET

Indicator #	L86
Indicator	Required assessments

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Area Need Improvement	For two individuals, assessments had not been completed and submitted to DDS 15 days prior in preparation for the ISP. The agency needs to ensure that assessments are completed in preparation for the ISP and submitted in accordance with regulatory requirements.
Status at mid-cycle	For two of seven individuals, ISP assessments were not submitted at least 15 days prior to the ISP. The agency needs to ensure that assessments are completed in preparation for the ISP and submitted in accordance with regulatory requirements.
#met /# rated at mid-cycle	5/7
Rating	NOT MET

Indicator #	L87
Indicator	Support strategies
Area Need Improvement	For two individuals, support strategies had not been completed and submitted to DDS 15 days prior in preparation for the ISP. The agency needs to ensure that support strategies are completed in preparation for the ISP and submitted in accordance with regulatory requirements.
Status at mid-cycle	For six out of seven individuals, ISP support strategies were submitted at least 15 days prior to the ISP.
#met /# rated at mid-cycle	6/7
Rating	MET

Indicator #	L88
Indicator	Strategies implemented
Area Need Improvement	For four individuals, data collection on ISP objectives was either inconsistent or not occurring. The agency needs to ensure that data relating to ISP objectives is collected.

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Status at mid-cycle	For four of seven individuals, data collection on ISP objectives was inconsistent or support strategies were not being implemented as outlined in the ISP. The agency needs to ensure that data relating to ISP objectives is collected and support strategies are implemented as outlined in the ISP.
#met /# rated at mid-cycle	3/7
Rating	NOT MET

Indicator #	L91
Indicator	Incident management
Area Need Improvement	At one location, incident reports were not created and finalized with the required HCSIS time frames. The agency needs to ensure all incident reports are generated and finalized by the required HCSIS due dates.
Status at mid-cycle	Incident reports at all locations had been submitted and finalized within the required timelines.
#met /# rated at mid-cycle	3/3
Rating	MET

Indicator #	L94 (05/22)
Indicator	Assistive technology
Area Need Improvement	For two individuals, assistive technology assessments did not fully identify areas of need, or follow through on obtaining devices identified within assessments. The agency needs to ensure that assistive technology assessments are accurate, and identified technologies are obtained.

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Status at mid-cycle	For two of seven individuals reviewed, individuals had not been assessed for assistive technology needs or follow through on obtaining devices identified within previous assessments had not occurred. The agency needs to ensure that assistive technology assessments are accurate, and identified technologies are obtained.
#met /# rated at mid-cycle	5/7
Rating	NOT MET