

DEPARTMENT OF DEVELOPMENTAL SERVICES

LICENSURE AND CERTIFICATION

DDS FOLLOW-UP REPORT

Provider	Venture Community Services	Provider Address	1 Picker Road - P.O. Box 38 , Sturbridge
Survey Team	Adorno, Elsa; Baldwin, Stephanie; Chiaravallotti, Danielle; Comeau, Andrea; Dudley-Oxx, Susan; Himes, Marisa; Jones, Ken; Lunden, Eric; Edi-Osagie, Raymond;	Date(s) of Review	23-JUN-25 to 27-JUN-25

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 22 Locations 36 Audits	Defer Licensure	1/1	9/14	<input type="checkbox"/> Eligible for new business (Two Year License) <input checked="" type="checkbox"/> Ineligible for new business. (Deferred Status: Two year mid-cycle review License)	2 Year License with Mid-Cycle Review	<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 11 Audits	2 Year License		9/9	<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)

DEPARTMENT OF DEVELOPMENTAL SERVICES

LICENSURE AND CERTIFICATION

DDS FOLLOW-UP REPORT

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 eight individuals, Emergency Fact Sheets did not reflect current information, including medical conditions, medications, and relevant capabilities and preferences. The agency needs to ensure that Emergency Fact Sheets are current, accurately address all required information, and are available at the site where individuals receive services.
Status at follow-up	For eighteen of the twenty individuals reviewed, emergency fact sheets were current and included all relevant information. Venture Community Services updated all emergency fact sheets (EFS). An internal system was implemented to ensure monthly reviews with updates made as needed.
#met /# rated at followup	18/20
Rating	Met

Indicator #	L12
Indicator	Smoke detectors
Area Need Improvement	At four placement homes, smoke and carbon monoxide detectors were not operational and/or located where required. At one residential location, the carbon monoxide detectors were not located within 10 feet of sleeping areas. The agency needs to ensure that smoke and carbon monoxide detectors are located where required and are operational.
Status at follow-up	In nineteen of the twenty locations reviewed, smoke and carbon monoxide detectors were operational and in place where required. Venture Community Services (VCS) designated employees to visit all homes and placement service locations to ensure all sites had operational smoke and carbon monoxide detectors and that they were located where required in the homes. The testing of the detectors has been added to a monthly site visit checklist, to ensure they are being tested frequently. In addition, VCS developed a Compliance position within their facilities department to monitor all environmental compliance.
#met /# rated at followup	19/20
Rating	Met

DEPARTMENT OF DEVELOPMENTAL SERVICES

LICENSURE AND CERTIFICATION

DDS FOLLOW-UP REPORT

Indicator #	L39
Indicator	Dietary requirements
Area Need Improvement	For two individuals with medical conditions that required special dietary considerations, staff had not been trained. The agency needs to ensure staff are trained on special diets required in managing individuals' medical conditions.
Status at follow-up	A review of eleven individuals with specific dietary requirements found that ten had the necessary documentation/implementation in place and staff training was completed. Venture Community Services created binders for each of the homes that contained person-specific trainings, including special dietary requirements. These trainings were conducted in-person with staff, and training signoffs were attached. In Placement services, the case manager ensured that each provider was trained in special dietary requirements and person-specific trainings.
#met /# rated at followup	10/11
Rating	Met

Indicator #	L43
Indicator	Health Care Record
Area Need Improvement	For fourteen individuals, Health Care Records were not updated when significant medical information changed, including vaccinations, hospitalization and new diagnoses. The agency needs to ensure that Health Care Records are updated annually or when significant medical information changes throughout the year.
Status at follow-up	Five of the twenty-two health care records reviewed, had not been updated at the time of the ISP or within 30 days of a change in diagnosis, hospitalization, vaccination, or other pertinent information. Venture Community Services created an internal system for monthly reviews of health care records and updated them as needed. Once finalized by the manager, they are reviewed by the Program Directors.
#met /# rated at followup	17/22
Rating	Not Met

Indicator #	L56
Indicator	Restrictive practices

DEPARTMENT OF DEVELOPMENTAL SERVICES

LICENSURE AND CERTIFICATION

DDS FOLLOW-UP REPORT

Area Need Improvement	For one individual, a restrictive practice in place did not include a plan to fade over time. For another individual, there was no mitigation plan in place as the one impacted by a restriction nor notification to the guardian, and for a third individual there was no indication the HRC had reviewed the restriction.
Status at follow-up	Three of the five restrictive practices reviewed did not include required components, including a plan to fade and mitigation plans for others who they are not intended for, but may be impacted by the restrictions. Venture Community Services instituted a process for all clinically based restrictions to be reviewed by the Clinical Supervisor. The Clinical Supervisor forwards the plans to the Chair of the human rights committee for approval. Restrictions and plans to fade are reportedly data driven.
#met /# rated at followup	2/5
Rating	Not Met

Indicator #	L63
Indicator	Med. treatment plan form
Area Need Improvement	For fourteen individuals, medication treatment plans did not address required elements and/or the plan was not incorporated into the individual's ISP. The agency needs to ensure that medication treatment plans are developed for medications prescribed to control individuals' behaviors. This includes identifying the behaviors for treatment in observable and measurable terms, specific procedures to minimize risks of taking the medication, clinical indications for adjusting the medication, and frequency of data collection. In addition, medications prescribed to reduce anxiety prior to medical appointments and treatments must include strategies to assist the individuals in reducing or eliminating the need for the medication over time.
Status at follow-up	Of the nineteen individuals reviewed, the medication treatment plans for five individuals did not contain all the required components and/or agreement from the individual or guardian. Venture Community Services was in the process of revising the Medication Treatment Plans (MTP) with a new format to ensure they are individualized, and all required components are included.
#met /# rated at followup	12/19
Rating	Not Met

Indicator #	L64
Indicator	Med. treatment plan rev.
Area Need Improvement	For eight individuals, medication treatment plans were not incorporated into individuals' ISPs. The agency needs to ensure that the individual's medication treatment plans is shared with the DDS Service Coordinator for review by the ISP team and for incorporation into the individual's ISP.

DEPARTMENT OF DEVELOPMENTAL SERVICES

LICENSURE AND CERTIFICATION

DDS FOLLOW-UP REPORT

Status at follow-up	Of eighteen individuals MTP's that were reviewed, one medication treatment plan had not been incorporated into the ISP for review. Venture Community Services designated a specific person to upload medication treatment plans into HCSIS with each ISP cycle and when any changes have occurred to the plan.
#met /# rated at followup	17/18
Rating	Met

Indicator #	L67
Indicator	Money mgmt. plan
Area Need Improvement	None of the twenty-two individuals reviewed had written agreement from the individual and/or guardian to the funds management plans in place. Additionally, the plans were not individualized to address the specific needs and support given to each of the individuals with financial management. The agency needs to develop funds-management plans that outline the roles and responsibilities of the agency in supporting individuals to manage and spend their personal funds. These plans must be individualized, and if supported by the individual's ISP, they need to include a training plan to reduce the need for assistance. Additionally, funds management plans are subject to annual written agreement from the individual or his/her guardian.
Status at follow-up	Of the twenty-one individuals reviewed, funds management plan for five did not contain all the required information and/or agreement from the individual or guardian. Venture Community Services was in the process of revising the Funds Management Plans with a new format to ensure that plans are individualized and include all required information.
#met /# rated at followup	16/21
Rating	Not Met

Indicator #	L87
Indicator	Support strategies
Area Need Improvement	For seven individuals, provider support strategies were not submitted to DDS at least 15 days prior to the ISP. The agency needs to ensure that provider support strategies are submitted to DDS at least 15 days prior to the ISP.
Status at follow-up	Of the five individuals reviewed, four met the timelines for required submission of support strategies for the ISP. Venture Community Services Program Directors are working with the house managers to manage timelines for submission via the alert system in HCSIS.

DEPARTMENT OF DEVELOPMENTAL SERVICES

LICENSURE AND CERTIFICATION

DDS FOLLOW-UP REPORT

#met /# rated at followup	4/5
Rating	Met

Indicator #	L91
Indicator	Incident management
Area Need Improvement	At fourteen locations, incidents were not submitted or reviewed within the required timelines. The agency needs to ensure that incident reports are submitted and reviewed within the required timelines.
Status at follow-up	At six of twenty-two locations, the reporting and finalization of incident reports were not completed within the required timelines. Venture Community Services has developed a process for weekly reviews of incident submissions to ensure that required timelines are met.
#met /# rated at followup	16/22
Rating	Not Met

Indicator #	L99 (05/22)
Indicator	Medical monitoring devices
Area Need Improvement	For two individuals, required documentation was not in place for the use of CPAP machines. When medical monitoring devices are in use, the agency needs to ensure the device is authorization and must include instructions for applying and using the device, along with instructions for the care and cleaning of the device as well as frequency of safety checks.
Status at follow-up	Of the eleven individuals in the sample who utilized medical monitoring devices, two did not have the required authorizations and staff training on the devices was not evident. Venture Community Services Director of Nursing has created forms to be utilized at each house for the authorization of medical monitoring devices. The RN for each home will review and train the staff on use, care, and maintenance of the device.
#met /# rated at followup	9/11
Rating	Met

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

Indicator #	L1
Indicator	Abuse/neglect training

DEPARTMENT OF DEVELOPMENTAL SERVICES

LICENSURE AND CERTIFICATION

DDS FOLLOW-UP REPORT

Area Need Improvement	For three individuals, annual training was not provided on how to report allegations of abuse or neglect to the Disabled Persons Protection Commission (DPPC). The agency needs to ensure that all individuals are trained annually on how to report abuse or neglect to DPPC.
Status at follow-up	All six individuals reviewed received annual training on how to report alleged abuse/neglects. Venture Community Services had taken steps to ensure that all individuals are trained on DPPC and how to report abuse/neglect. This training was incorporated into the packet of trainings for annual review.
#met /# rated at followup	6/6
Rating	Met

Indicator #	L49
Indicator	Informed of human rights
Area Need Improvement	For three individuals, annual training on human rights and in the agency's grievance procedures had not been provided. The agency needs to ensure that all individuals are trained annually on human rights and on how to file a grievance.
Status at follow-up	All ten individuals reviewed received annual training on human rights. Venture Community Services had taken steps to ensure that all individuals are informed of their human rights and the process for filing a grievance. This training was incorporated into the packet of trainings for annual review.
#met /# rated at followup	10/10
Rating	Met

Indicator #	L67
Indicator	Money mgmt. plan
Area Need Improvement	For one individual requiring assistance with the management of money, there was no funds management plan in place outlining supports needed and given. The agency needs to develop funds-management plans that outlines the roles and responsibilities of the agency in supporting individuals to manage and spend their personal funds. These plans must be individualized, and if supported by the individual's ISP, they need to include a training plan to reduce the need for assistance. Additionally funds management plans are subject to annual written agreement from the individual or his/her guardian.
Status at follow-up	For one person who required assistance with the management of funds, a training plan was in place and met all requirements. Venture Community Services was in the process of revising the Funds Management Plans with a new format to ensure that the plans are individualized and include all required information.

DEPARTMENT OF DEVELOPMENTAL SERVICES

LICENSURE AND CERTIFICATION

DDS FOLLOW-UP REPORT

#met /# rated at followup	1/1
Rating	Met

Indicator #	L86
Indicator	Required assessments
Area Need Improvement	For one individual, ISP assessments were not submitted to DDS at least 15 days prior to the ISP. The agency needs to ensure that ISP assessments are submitted to DDS at least 15 days prior to the ISP.
Status at follow-up	The one individual reviewed met the required timelines for submission of required assessments for the ISP. Venture Community Services Program Directors are working with the managers to ensure that timelines for submission are met via the alert system in HCSIS.
#met /# rated at followup	
Rating	Not Rated

Indicator #	L87
Indicator	Support strategies
Area Need Improvement	For two individuals, provider support strategies were not submitted to DDS within 15 days prior to the ISP. The agency needs to ensure that provider support strategies are submitted to DDS within 15 days prior to the ISP.
Status at follow-up	For the one individual reviewed, the agency met the timelines for submission of support strategies for the ISP. Venture Community Services Program Directors are working with the managers to ensure that timelines for submission are met via the alert system in HCSIS.
#met /# rated at followup	1/1
Rating	Met

Indicator #	L91
Indicator	Incident management
Area Need Improvement	At one location, incidents were not submitted or reviewed within required timelines. The agency needs to ensure that incident reports are submitted and reviewed within the DDS required timelines.

DEPARTMENT OF DEVELOPMENTAL SERVICES

LICENSURE AND CERTIFICATION

DDS FOLLOW-UP REPORT

Status at follow-up	Timelines for the reporting and finalization of incident reports were met at the one CBDS location reviewed. Venture Community Services developed a process for weekly reviews of incident submissions to ensure that required timelines are consistently met.
#met /# rated at followup	1/1
Rating	Met

Indicator #	L93 (05/22)
Indicator	Emergency back-up plans
Area Need Improvement	For ten individuals, emergency back-up plans were not developed or shared with the individual. The agency needs to ensure that back-up plans for emergencies and/or disasters are developed and shared with individuals and the staff who support them.
Status at follow-up	Ten of the eleven individuals reviewed had emergency back up plans in place and the individuals had been trained on the plans. Venture Community Services created individualized emergency backup plans for each individual in employment and day supports services. Plans will be created upon the start of services henceforth and reviewed annually.
#met /# rated at followup	10/11
Rating	Met

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

Indicator #	L4
Indicator	Action taken
Area Need Improvement	For six investigations reviewed, follow-up on action plans issued by the DDS area office had not been submitted within the area office's designated timeframe. The agency needs to ensure when responding to actions issued by the DDS area office, that the response is within the timeframe agreed upon.
Status at follow-up	The review of ten investigations showed that nine were responded to with the required documentation and within the timeline established by the DDS Area Office. Venture Community Services created a tracking system to document DPPC investigations as they are reported. Actions required along with timelines set forth by the DDS Area Office are added to the tracking system to ensure a timely response.
#met /# rated at followup	9/10

DEPARTMENT OF DEVELOPMENTAL SERVICES

LICENSURE AND CERTIFICATION

DDS FOLLOW-UP REPORT

Rating	Met
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Indicator #	L65
Indicator	Restraint report submit
Area Need Improvement	Twenty one of the fifty-five restraint reports submitted were not submitted within the required timelines. The agency needs to ensure that restraint reports are submitted and reviewed within the DDS required timelines.
Status at follow-up	Nine of the eleven restraint reports were submitted to DDS within the required timeframe. Venture Community Services created a restraint management email, which alerts designees to include Directors/Clinical/Human Rights Coordinator. Weekly status reports are run and addressed by the clinical supervisor to ensure timely submission.
#met /# rated at followup	9/11
Rating	Met

Indicator #	L66
Indicator	HRC restraint review
Area Need Improvement	Twenty of the forty restraint reports submitted were not reviewed by the human rights committee within the required 120 days. The agency needs to support its human rights committee to review restraint reports within the required 120-day timeframe.
Status at follow-up	All eight restraints reported were reviewed by the human rights committee within the required 120-day timeline. Venture Community Services included the Human Rights Coordinator as a recipient of the restraint management email system. Once notified of a restraint, it is added to the agenda for review at the next scheduled human rights committee meeting.
#met /# rated at followup	8/8
Rating	Met