

DEPARTMENT OF DEVELOPMENTAL SERVICES

LICENSURE AND CERTIFICATION

DDS FOLLOW-UP REPORT

Provider Viability Provider Address 60 Brookdale Drive , Springfield
 Survey Team Comeau, Andrea; Hutchison, Melanie; Date(s) of Review 26-APR-23 to 27-APR-23

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
Employment and Day Supports 10 Locations 18 Audits	2 Year License		7/7	<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)
Residential and Individual Home Supports 3 Locations 3 Audits	2 Year License		7/8	<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 #	L5
Indicator	Safety Plan
Area Need Improvement	For three placement service locations, an approved Emergency Evacuation Safety Plan was not present in the home. A safety plan approved by the local DDS Area Office where the home is geographically located needs to be present at the placement services location.
Status at follow-up	The agency visited each placement service location to confirm that a signed safety plan was present. For two locations sampled, there was a current, signed safety plan present in the home.
#met /# rated at followup	3/3
Rating	Met

Indicator #	L43
Indicator	Health Care Record
Area Need Improvement	One individual did not have a current health care record. The agency needs to ensure that health care records are updated at least annually and within 30 days of a new diagnosis, immunization, or medical hospitalization.
Status at follow-up	The agency reviewed with staff the revised expectations for updating Health Care Records. Health Care Records were updated using information from individuals' most recent annual physical exams. Additionally, the health care record was added as part of the ISP checklist, and the agency expects that staff update the health care record within 30 days after a new diagnosis, immunization, or medical hospitalization occur. For one individual reviewed for follow-up, the health care record did not include the most recent Covid-19 booster.
#met /# rated at followup	2/3
Rating	Not Met

Indicator #	L63
Indicator	Med. treatment plan form

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Area Need Improvement	For two individuals, medication treatment plans did not contain all required components, including defined target behaviors, measurable criteria to reduce or discontinue medication, data collection methods, and procedures to minimize risk. A third individual was prescribed behavior modifying medication and did not have a medication treatment plan. When medications are administered to control or modify behaviors, the agency needs to ensure that the medication treatment plan addresses all required elements, including a description of the behaviors targeted for treatment defined in observable and measurable terms; method of data collection; procedures to minimize risk, and measurable criteria to prompt discussion with the prescriber about reducing or discontinuing the medication.
Status at follow-up	The agency updated and revised all medication treatment plans after consultation with OQE. For three individuals, the medication treatment plan contained all required components.
#met /# rated at followup	3/3
Rating	Met

Indicator #	L64
Indicator	Med. treatment plan rev.
Area Need Improvement	For two individuals, medication treatment plans were not incorporated into individuals' ISPs. The agency needs to ensure that the individual's medication treatment plan is shared with the DDS Service Coordinator for review by the ISP team and incorporation into the individual's ISP.
Status at follow-up	The agency reported that it shared the updated medication treatment plans with DDS either via an upload to the HCSIS ISP dashboard or forwarding the document to the Service Coordinator. For three individuals, the medication treatment plan was shared with DDS.
#met /# rated at followup	3/3
Rating	Met

Indicator #	L67
Indicator	Money mgmt. plan
Area Need Improvement	For one individual, the funds management plan did not address all required components. 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 include the amount of money individuals can manage independently. Additionally, funds management plans are subject to annual written agreement from the individual or his/her guardian.

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Status at follow-up	The agency updated its funds management plan template in March 2023. It reported that all individuals' funds management plans were updated in March and April 2023. For three individuals reviewed for follow-up, the funds management plan contained required components pertaining to how individuals' funds were managed and safeguarded as well as how much money individuals could manage independently. Funds management plans were mailed to individual's guardians in April 2023. One plan had been signed and returned by the guardian; two plans had not yet been returned.
#met /# rated at followup	3/3
Rating	Met

Indicator #	L68
Indicator	Funds expenditure
Area Need Improvement	For one individual, checks for personal spending were written to the home care provider. There was no mechanism in place to support that the individual's funds were used for his benefit. The agency needs to ensure that it employs an oversight mechanism to confirm that expenditures of individuals' funds are only made for their benefit.
Status at follow-up	The agency reported that all individuals supported in placement services have been assessed to be able to manage their personal spending money independently. It reviewed its process to provide these funds to individuals to ensure that checks written for personal spending were made payable to individuals. For three individuals in the follow-up sample, a review of the past two months of bank statements showed that the agency paid individuals' charges for care and made checks for personal spending money payable to individuals.
#met /# rated at followup	3/3
Rating	Met

Indicator #	L69
Indicator	Expenditure tracking
Area Need Improvement	For one individual, there was no financial tracking in place to monitor provider-assisted transactions. The agency needs to ensure that a transaction record and receipts are kept documenting all home care provider-assisted transactions, including the date, amount received or dispersed, and the purpose of the transaction. Transaction records must be kept in a manner that can be readily followed, reviewed, and audited.

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Status at follow-up	The agency ensured that checks for personal spending money were made payable to individuals. The home care providers did not assist with financial transactions. For the three individuals sampled, all received spending money checks payable to them. The home care providers did not assist with financial transactions, and no financial transaction records were required in the home. Individuals' bank statements provided a financial record of payments made to or on behalf of individuals.
#met /# rated at followup	3/3
Rating	Met

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

Indicator #	L15
Indicator	Hot water
Area Need Improvement	At one location, the hot water temperature exceeded the acceptable range for public lavatory sinks. The agency needs to ensure that the hot water temperature at CBDS locations does not exceed 110F.
Status at follow-up	The agency corrected hot water temperatures during the February 2023 survey. The agency continues to monitor hot water temperatures monthly. For three CBDS locations, the water temperature did not exceed 110 degrees Fahrenheit.
#met /# rated at followup	3/3
Rating	Met

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Indicator #	L61
Indicator	Health protection in ISP
Area Need Improvement	For one individual, use of health-related supports and protective equipment was not authorized, and there were no written instructions for their use and care. When individuals require health-related equipment and devices, the use of these devices must be authorized by a medical professional. This authorization must include instructions for applying and using the device, along with instructions for the care of the device as well as frequency of safety checks.
Status at follow-up	For all individuals who used health related supports and protective equipment, the agency received authorization from a health care provider and developed written instructions for the use and care of these devices. For two individuals, their health related supports and protective equipment were authorized and included written instructions for their care and use.
#met /# rated at followup	2/2
Rating	Met

Indicator #	L84
Indicator	Health protect. Training
Area Need Improvement	For one individual who used health-related equipment and devices, staff were not trained in the proper use, care, and cleaning of the equipment. The agency needs to ensure that staff are trained and knowledgeable in the use and application of health-related equipment and devices authorized for individuals. This training must include the proper care of the device as well as the frequency of conducting safety checks.
Status at follow-up	The agency trained staff on the authorized health related supports and protective equipment. For two individuals, staff had been trained on their health related supports and protective equipment.
#met /# rated at followup	2/2
Rating	Met

Indicator #	L86
Indicator	Required assessments
Area Need Improvement	For six individuals, ISP assessments were not submitted to DDS within required timelines. The agency needs to ensure that ISP assessments are submitted to DDS within 15 days prior to the ISP.

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Status at follow-up	The agency retrained staff on the timelines for submitting ISP assessments. For twelve out of thirteen individuals, ISP assessments were submitted in a timely manner.
#met /# rated at followup	12/13
Rating	Met

Indicator #	L87
Indicator	Support strategies
Area Need Improvement	For five individuals, provider support strategies were not submitted to DDS within required timelines. The agency needs to ensure that provider support strategies are submitted to DDS within 15 days prior to the ISP.
Status at follow-up	The agency retrained staff on the timelines for submitting support strategies. For ten out of twelve individuals, support strategies were submitted in a timely manner.
#met /# rated at followup	10/12
Rating	Met

Indicator #	L91
Indicator	Incident management
Area Need Improvement	At three locations, incidents were not submitted within required timelines. The agency needs to ensure that incident reports are submitted and reviewed within required timelines.
Status at follow-up	The agency retrained staff on the timelines for submitting incident reports. All incident reports in the past 60 days were submitted in a timely manner.
#met /# rated at followup	10/10
Rating	Met

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

Indicator #	L48
Indicator	HRC
Area Need Improvement	The agency's human rights committee lacked regular attendance of a member with legal expertise. The agency needs to support its human rights committee to meet composition and attendance requirements.
Status at follow-up	The agency's human rights committee composition included a member with legal expertise. The human rights committee met on 3/21/23. Members who attended this meeting included those with medical, clinical, and legal expertise.
#met /# rated at followup	1/1
Rating	Met