



**PROVIDER REPORT
FOR**

**Becket Family of Services
dba LifeConnections
633 NH ROUTE 10
ORFORD, NH 03777**

March 10, 2026

Version

Public Provider Report

**Prepared by the Department of Developmental Services
OFFICE OF QUALITY ENHANCEMENT**

SUMMARY OF OVERALL FINDINGS

Provider Becket Family of Services dba LifeConnections

Review Dates 1/7/2026 - 1/13/2026

Service Enhancement Meeting Date 1/28/2026

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Survey scope and findings for Residential and Individual Home Supports

Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Residential and Individual Home Supports	10 location (s) 10 audit (s)	Full Review	80/90 2 Year License 01/28/2026 - 01/28/2028		44 / 46 Certified 01/28/2026 - 01/28/2028
Residential Services	5 location(s) 5 audit (s)			Full Review	19 / 20
Placement Services	5 location(s) 5 audit (s)			Full Review	19 / 20
Planning and Quality Management				Full Review	6 / 6

EXECUTIVE SUMMARY :

Becket Family of Services dba Life Connections, headquartered in New Hampshire, provides a range of services to children and adults with Intellectual and Developmental Disabilities, and autism spectrum disorder. The agency also supports people with significant mental health disorders and sexually inappropriate behaviors in Massachusetts, Maine, Vermont, New Hampshire, South Carolina, and Florida.

This 2025 Department of Development Services licensing and certification survey conducted by The DDS Office of Quality Enhancement included a full review of services offered in the agency's residential service grouping which included 24/7 residential homes, individual home support (IHS), and Placement (Shared Living) homes located in Central/West, North Central, and the Southeast regions of Massachusetts.

Survey results showed that Life Connections had effective oversight systems in several key areas. The agency demonstrated the maintenance of a competent workforce as reflected in a staff training and tracking system which ensured that all staff were current in DDS mandatory training requirements including First Aid, CPR, human rights and the newer mandated training courses such as universal precautions, and procedures for preventing disease/virus transmission. The depth of knowledge staff possessed regarding the unique needs of individuals contributed to several individuals experiencing successes in many areas. Agency staff were compliant with mandated reporting responsibilities as incidents that rose to the level were reported to DPPC as required. The agency also demonstrated effective systems and oversight for responding to allegations of abuse and neglect and follow-up actions required by the respective DDS Area Offices.

The agency strengthened its oversight mechanisms and functions across all levels of the organization; this included within its compliance team that conducted quarterly site reviews among other duties to evaluate programmatic and support standards at each home. Life Connections also conducted monthly and quarterly audits of individuals' funds to ensure that funds were properly managed and safeguarded.

With the residences, Life Connections demonstrated the presence of effective monitoring and oversight in the healthcare domain. Individuals that resided in their residential homes were supported to obtain needed and timely healthcare services that supported them to maintain optimal health and wellness. Nursing staff had a visible presence in the different homes and oversight responsibilities were largely accomplished across all residential service types. Robust internal tracking was conducted to monitor and ensure that routine healthcare, psychiatry and other appointments with specialists and follow-up visits were kept. Training and oversight were offered for individual healthcare protocols and quarterly medication audits were conducted in each 24/7 homes. Nurses also visited placement homes at least quarterly and as needed to monitor individuals' health care appointments and other medical support needs.

Across all residences, staff and home providers were knowledgeable of individuals' support needs. Procedures to follow for prompt treatment for health conditions, dietary requirements, and physical activity needs were familiar to staff and properly supported for individuals. Health-related treatment protocols including seizure protocols, Diabetes, and procedures to monitor blood levels for the use of specific medications were being implemented as required. Individuals were encouraged to make healthy food choices, as well as engage in different forms of exercise during their day. The agency ensured that all individuals were offered access to a YMCA membership.

In the area of certification, across residential services, outcomes showed that individuals received consistent support to exercise choice and control over their lives and daily routines. Home and personal space decorations largely reflected people's interests and personal taste. Individuals were supported to have choice in when and how they participated in household routines, daily menu

planning, and how they spent their personal time. Individuals were generally supported to develop skills to maximize independence with their personal routines and preferred activities in the community.

Life Connections also recognized the importance of connections with family and friends; individuals were supported in a variety of ways to maintain and enhance relationships with family members, guardians, and friends on an on-going basis. Many individuals were supported by committed staff to spend meaningful time with friends and family in a variety of community settings and activities.

While the survey results reflected significant improvement over previous agency performances, the 2026 survey results found areas where the agency's oversight systems must be further strengthened to meet compliance. In the area of environmental safety, hot water temperature must be maintained to be within the recommended temperature range of 110°-120°F. In the area of healthcare, the agency must ensure that Health care records are updated as required; medications treatment plans are developed/updated to include all relevant information including prescribed behavior modifying medications; and emergency fact sheets are inclusive of the most current and accurate information. Additionally, staff training in signs and symptoms of illness must include all Observation Guidelines including "Not Just Right". Improved oversight and training are also needed to ensure the timely submission of ISP assessments and support strategies, and timely submission and finalization of incident and restraint reports. The agency's human rights committee must meet all mandates including membership and attendance requirements, reviews of all matters under its purview, and review of restraints within 120 days of occurrence.

Relative to certification, the agency must develop and implement a process for gathering and incorporating input from individuals across all service types into hiring of potential staff/home providers, and the ongoing performance evaluation of staff and home care providers.

Due to the result of the review, Life Connections Residential and Individual Home Supports service grouping has earned a Two-Year license having received an overall score of 89% of licensure indicators met. A follow-up review will be conducted by DDS OQE within sixty days of the SEM on all not-met licensure indicators due to the score.

Life Connection's residential service grouping is Certified with an overall score of 96% of certification indicators met.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	8/10	2/10	
Residential and Individual Home Supports	72/80	8/80	
Residential Services Placement Services			
Critical Indicators	8/8	0/8	
Total	80/90	10/90	89%
2 Year License			
# indicators for 60 Day Follow-up		10	

Organizational Areas Needing Improvement on Standards not met/Follow-up to occur:

Indicator #	Indicator	Area Needing Improvement
L48	The agency has an effective Human Rights Committee.	The review of human rights committee (HRC) meeting minutes from the past two years showed that the committee did not meet membership composition and attendance requirements, waiver for cross regional representation, and review of all matters under its purview. The agency must support its human rights committees to maintain regular attendance and the required composition and fulfill its oversight responsibilities.
L65	Restraint reports are submitted within required timelines.	30 out of 112 restraints were not submitted and finalized within the required timelines in HCSIS. The agency must ensure that restraint reports are submitted within three calendar days and finalized within five calendar days of the event in HCSIS.

Residential Areas Needing Improvement on Standards not met/Follow-up to occur:

Indicator #	Indicator	Area Needing Improvement
L8	Emergency fact sheets are current and accurate and available on site.	For three of ten individuals, emergency fact sheets did not include current/accurate information regarding diagnosis and prescribed medications. Emergency fact sheet must be developed/updated to include current/accurate information.

Residential Areas Needing Improvement on Standards not met/Follow-up to occur:

Indicator #	Indicator	Area Needing Improvement
L15	Hot water temperature tests between 110 and 120 degrees (as of 1/2014).	At four of ten homes where reviews occurred, hot water temperatures exceeded the maximum allowable temperature of 120°F. The agency must ensure that hot water temperature is set between 110°-120°F. The recommended water temperature for showers/tubs is 112°F.
L43	The health care record is maintained and updated as required.	Health care records for five of ten individuals did not include up-to-date information. HCRs must include the most current/accurate information required in all the sections including adaptive equipment, medication, diagnosis, hospitalizations, and immunizations. HCRs must be updated within thirty days of these significant events and other updates annually at the time of the ISP.
L63	Medication treatment plans are in written format with required components.	Four of eight individual's medication treatment plans did not include required information. When an individual is prescribed behavior modifying medications, medication treatment plans must include all current behavior modifying medications, description of behaviors to be controlled or modified, procedures to minimize risk, and data tracking on identified target behaviors.
L80	Support staff are trained to recognize signs and symptoms of illness.	At all 10 sites, staff training on the Signs and Symptoms of Illness did not include DDS recommended observation guidelines including "Just Not Right". The agency must ensure that its Signs and Symptoms of Illness training for staff includes all of the Observation Guidelines topics contained in the DDS Signs and Symptoms of Illness training module.
L86	Required assessments concerning individual needs and abilities are completed in preparation for the ISP.	For three of eight individuals, ISP assessments were not submitted at least 15 days prior to the ISP meetings. ISP assessments must be submitted at least 15 days prior to individual's ISP meetings.
L87	Support strategies necessary to assist an individual to meet their goals and objectives are completed and submitted as part of the ISP.	For three of eight individuals, ISP support strategies were not submitted at least 15 days prior to the ISP meetings. ISP support strategies must be submitted at least 15 days prior to the individual's ISP meetings.
L91	Incidents are reported and reviewed as mandated by regulation.	At five of the ten locations, incident reports were not submitted and/or finalized within the required timelines in HCSIS. The agency must ensure that incident reports are submitted within one day of a major, and three days of the occurrence of a minor incident and finalized within seven days in HCSIS.

CERTIFICATION FINDINGS

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	6/6	0/6	
Residential and Individual Home Supports	38/40	2/40	
Placement Services	19/20	1/20	
Residential Services	19/20	1/20	
Total	44/46	2/46	96%
Certified			

Placement Services- Areas Needing Improvement on Standards not met:

Indicator #	Indicator	Area Needing Improvement
C7	Individuals have opportunities to provide feedback at the time of hire / time of the match and on an ongoing basis on the performance/actions of staff / care providers that support them.	Three of five individuals were not offered the opportunity to provide input into the ongoing performance evaluation of staff/home care providers who supported them. The agency must ensure that individuals are offered the opportunity to provide input into the hiring and ongoing performance evaluation of staff/home care providers.
C7	Individuals have opportunities to provide feedback at the time of hire / time of the match and on an ongoing basis on the performance/actions of staff / care providers that support them.	For all five individuals, there was no established process for gathering and incorporating individuals' input into the hiring of and ongoing performance evaluation process of staff who supported them. The agency must ensure that individuals are offered the opportunity to provide input into the hiring and ongoing performance evaluation of support personnel.

MASTER SCORE SHEET LICENSURE

Organizational: Becket Family of Services dba LifeConnections

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
PE L2	Abuse/neglect reporting	10/10	Met
L3	Immediate Action	14/14	Met
L4	Action taken	13/14	Met(92.86 %)
L48	HRC	0/1	Not Met(0 %)
L65	Restraint report submit	82/112	Not Met(73.21 %)
L66	HRC restraint review	131/135	Met(97.04 %)
L74	Screen employees	5/5	Met
L75	Qualified staff	3/3	Met
L76	Track trainings	20/20	Met
L83	HR training	20/20	Met

Residential and Individual Home Supports:

Ind. #	Ind.	Loc. or Individ.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L1	Abuse/neglect training	I	5/5		5/5				10/10	Met
L5	Safety Plan	L	5/5		5/5				10/10	Met
℞ L6	Evacuation	L	5/5		5/5				10/10	Met
L7	Fire Drills	L	5/5						5/5	Met
L8	Emergency Fact Sheets	I	4/5		3/5				7/10	Not Met (70.0%)
L9 (07/21)	Safe use of equipment	I	3/4						3/4	Met
L10	Reduce risk interventions	I	2/2						2/2	Met
℞ L11	Required inspections	L	5/5		3/5				8/10	Met (80.0%)
℞ L12	Smoke detectors	L	4/5		4/5				8/10	Met (80.0%)
℞ L13	Clean location	L	5/5		5/5				10/10	Met
L14	Site in good repair	L	5/5		5/5				10/10	Met
L15	Hot water	L	4/5		2/5				6/10	Not Met (60.0%)
L16	Accessibility	L	5/5		5/5				10/10	Met
L17	Egress at grade	L	5/5		5/5				10/10	Met

Ind. #	Ind.	Loc. or Individ.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L18	Above grade egress	L	5/5		3/3				8/8	Met
L19	Bedroom location	L	3/3		3/3				6/6	Met
L20	Exit doors	L	5/5						5/5	Met
L21	Safe electrical equipment	L	5/5		5/5				10/10	Met
L22	Well-maintained appliances	L	5/5		3/3				8/8	Met
L23	Egress door locks	L	5/5						5/5	Met
L24	Locked door access	L	5/5		5/5				10/10	Met
L25	Dangerous substances	L	5/5						5/5	Met
L26	Walkway safety	L	5/5		5/5				10/10	Met
L27	Pools, hot tubs, etc.	L			1/1				1/1	Met
L28	Flammables	L	5/5						5/5	Met
L29	Rubbish/combustibles	L	4/5		5/5				9/10	Met (90.0%)
L30	Protective railings	L	5/5		5/5				10/10	Met
L31	Communication method	I	5/5		5/5				10/10	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L32	Verbal & written	I	5/5		5/5				10/10	Met
L33	Physical exam	I	5/5		5/5				10/10	Met
L34	Dental exam	I	5/5		5/5				10/10	Met
L35	Preventive screenings	I	5/5		4/5				9/10	Met (90.0%)
L36	Recommended tests	I	5/5		5/5				10/10	Met
L37	Prompt treatment	I	5/5		5/5				10/10	Met
℞ L38	Physician's orders	I	4/4		4/4				8/8	Met
L39	Dietary requirements	I	1/1						1/1	Met
L40	Nutritional food	L	5/5						5/5	Met
L41	Healthy diet	L	5/5		5/5				10/10	Met
L42	Physical activity	L	5/5		5/5				10/10	Met
L43	Health Care Record	I	4/5		2/5				6/10	Not Met (60.0%)
L44	MAP registration	L	5/5						5/5	Met
L45	Medication storage	L	5/5						5/5	Met
℞ L46	Med. Administration	I	5/5		3/4				8/9	Met (88.89%)
L47	Self medication	I	1/1		2/2				3/3	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L49	Informed of human rights	I	4/5		5/5				9/10	Met (90.0%)
L50 (07/21)	Respectful Comm.	I	5/5		5/5				10/10	Met
L51	Possessions	I	5/5		5/5				10/10	Met
L52	Phone calls	I	5/5		5/5				10/10	Met
L53	Visitation	I	5/5		5/5				10/10	Met
L54 (07/21)	Privacy	I	5/5		5/5				10/10	Met
L55	Informed consent	I	2/2		2/2				4/4	Met
L56	Restrictive practices	I	1/1						1/1	Met
L57	Written behavior plans	I	3/3						3/3	Met
L60	Data maintenance	I	3/3						3/3	Met
L61	Health protection in ISP	I	3/3		2/3				5/6	Met (83.33%)
L62	Health protection review	I	1/1						1/1	Met
L63	Med. treatment plan form	I	3/5		1/3				4/8	Not Met (50.0%)
L64	Med. treatment plan rev.	I	5/5		3/3				8/8	Met

Ind. #	Ind.	Loc. or Individ.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L67	Money mgmt. plan	I	5/5		1/2				6/7	Met (85.71 %)
L68	Funds expenditure	I	5/5		1/1				6/6	Met
L69	Expenditure tracking	I	5/5		1/2				6/7	Met (85.71 %)
L70	Charges for care calc.	I	5/5		4/4				9/9	Met
L71	Charges for care appeal	I	5/5		4/4				9/9	Met
L77	Unique needs training	I	5/5		5/5				10/10	Met
L78	Restrictive Int. Training	L	3/3						3/3	Met
L79	Restraint training	L	5/5						5/5	Met
L80	Symptoms of illness	L	0/5		0/5				0/10	Not Met (0 %)
L81	Medical emergency	L	5/5		5/5				10/10	Met
L82	Medication admin.	L	5/5						5/5	Met
L84	Health protect. Training	I	3/3		2/3				5/6	Met (83.33 %)
L85	Supervision	L	5/5		4/5				9/10	Met (90.0 %)
L86	Required assessments	I	2/4		3/4				5/8	Not Met (62.50 %)

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L87	Support strategies	I	2/4		3/4				5/8	Not Met (62.50%)
L88	Strategies implemented	I	5/5		5/5				10/10	Met
L90	Personal space/bedroom privacy	I	5/5		5/5				10/10	Met
L91	Incident management	L	1/5		4/5				5/10	Not Met (50.0%)
L93 (05/22)	Emergency back-up plans	I	4/5		5/5				9/10	Met (90.0%)
L94 (05/22)	Assistive technology	I	4/5		5/5				9/10	Met (90.0%)
L96 (05/22)	Staff training in devices and applications	I	2/2		4/4				6/6	Met
L99 (05/22)	Medical monitoring devices	I	1/1		2/2				3/3	Met
#Std. Met/# 80 Indicator									72/80	
Total Score									80/90	
									88.89%	

MASTER SCORE SHEET CERTIFICATION

Certification - Planning and Quality Management

Indicator #	Indicator	Met/Rated	Rating
C1	Provider data collection	1/1	Met
C2	Data analysis	1/1	Met
C3	Service satisfaction	1/1	Met
C4	Utilizes input from stakeholders	1/1	Met
C5	Measure progress	1/1	Met
C6	Future directions planning	1/1	Met

Residential Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	0/5	Not Met (0 %)
C8	Family/guardian communication	5/5	Met
C9	Personal relationships	5/5	Met
C10	Social skill development	5/5	Met
C11	Get together w/family & friends	5/5	Met
C12	Intimacy	5/5	Met
C13	Skills to maximize independence	5/5	Met
C14	Choices in routines & schedules	5/5	Met
C15	Personalize living space	5/5	Met
C16	Explore interests	5/5	Met
C17	Community activities	5/5	Met
C18	Purchase personal belongings	5/5	Met
C19	Knowledgeable decisions	5/5	Met
C46	Use of generic resources	5/5	Met
C47	Transportation to/ from community	5/5	Met
C48	Neighborhood connections	5/5	Met
C49	Physical setting is consistent	5/5	Met
C51	Ongoing satisfaction with services/ supports	5/5	Met
C52	Leisure activities and free-time choices /control	5/5	Met

Residential Services

Indicator #	Indicator	Met/Rated	Rating
C53	Food/ dining choices	5/5	Met

Placement Services

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	2/5	Not Met (40.0 %)
C8	Family/guardian communication	5/5	Met
C9	Personal relationships	5/5	Met
C10	Social skill development	5/5	Met
C11	Get together w/family & friends	5/5	Met
C12	Intimacy	5/5	Met
C13	Skills to maximize independence	5/5	Met
C14	Choices in routines & schedules	5/5	Met
C15	Personalize living space	4/5	Met (80.0 %)
C16	Explore interests	4/5	Met (80.0 %)
C17	Community activities	5/5	Met
C18	Purchase personal belongings	5/5	Met
C19	Knowledgeable decisions	5/5	Met
C46	Use of generic resources	5/5	Met
C47	Transportation to/ from community	5/5	Met
C48	Neighborhood connections	5/5	Met
C49	Physical setting is consistent	5/5	Met
C51	Ongoing satisfaction with services/ supports	5/5	Met
C52	Leisure activities and free-time choices /control	5/5	Met
C53	Food/ dining choices	5/5	Met