



**PROVIDER REPORT
FOR**

**Kennedy Donovan Center
Inc.
One Commercial Street
Foxboro, MA 02035**

March 24, 2026

Version

Public Provider Report

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

SUMMARY OF OVERALL FINDINGS

Provider Kennedy Donovan Center Inc.

Review Dates 1/28/2026 - 2/3/2026

Service Enhancement Meeting Date 2/17/2026

Survey Team Michelle Boyd
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Citizen Volunteers

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	14 location (s) 14 audit (s)	Full Review	70/72 2 Year License 02/17/2026 - 02/17/2028		26 / 26 Certified 02/17/2026 - 02/17/2028
Placement Services	13 location (s) 13 audit (s)			Deemed	
Individual Home Supports	1 location(s) 1 audit (s)			Full Review	20 / 20
Planning and Quality Management (For all service groupings)				Full Review	6 / 6

Survey scope and findings for Employment and Day Supports

Service Group Type	Sample Size	Licensure Scope	Licensure Level	Certification Scope	Certification Level
Employment and Day Supports	1 location(s) 5 audit (s)	Full Review	49/50 2 Year License 02/17/2026 - 02/17/2028		20 / 21 Certified 02/17/2026 - 02/17/2028
Community Based Day Services	1 location(s) 5 audit (s)			Full Review	14 / 15
Planning and Quality Management (For all service groupings)				Full Review	6 / 6

EXECUTIVE SUMMARY :

Kennedy Donovan Center (KDC), established in 1969, is a not-for-profit human service agency serving individuals and their families across central and southeastern Massachusetts and Cape Cod. The agency provides multiple services including residential supports, community-based day services, early intervention, DESE transitional supports, adult foster care, emergency respite, and family supports.

The scope of this survey conducted by the Department of Developmental Services' (DDS) Office of Quality Enhancement (OQE) consisted of a full licensing review of KDC's Placement Services, Individual Home Supports (IHS), and Community-Based Day Services (CBDS), as well as a full certification review of IHS and CBDS services. Kennedy Donovan Center is accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF) and is deemed Certified in lieu of DDS certification for Placement Services.

The licensure review revealed areas of strength at the organizational level. All instances of potential abuse and neglect were reported with immediate action being taken to protect individuals. Follow-up action plans were completed in response to investigations within the required timelines. The agency had a system for tracking staff trainings across all service types, which ensured that staff and caregivers had been trained in all mandatory trainings including human rights, DPPC, PBS, signs and symptoms of illness, and other health-related topics. KDC's Human Rights Committee had a waiver in place to allow for a single committee to cover several geographic regions. The KDC Human Rights Committee was comprised of the required requisite membership, attendance was met, and the committee reviewed and discussed all required materials such as restrictive practices, investigations, and health-related supports and protections.

Within certification organizationally, the agency utilized a variety of methods for collecting and analyzing data for trends, implementing action plans to mitigate any concerning patterns. Measured progress for Strategic Planning was reviewed during quarterly meetings. Audits were conducted across residential services and trends were reviewed to determine processes to mitigate concerns and/or improve quality.

In Placement Services and IHS for licensing, individuals had attended their annual physical exams, and they were consistently supported to obtain medical treatment for acute or episodic illnesses. Individuals were supported by their caregivers to follow healthy diets and engage in physical activities, including community walks and exercise equipment within the homes. Staff were trained and knowledgeable on individuals' unique needs and specialized medical protocols. Medication Treatment Plans were detailed and included all required components, and the data tracking system was consistent and thorough. Individuals' ISP goals were consistently implemented, with well documented data to demonstrate progress. Respectful communication, both written and verbal, was found to be consistent across settings. Individuals and guardians were educated on human rights, abuse/neglect, and the grievance process, with training materials in pictorial form to supplement understanding of rights and responsibilities for individuals with reading/language challenges. Caregivers received effective supervision and support from their KDC Case Managers, with consistent monthly site visits and a quarterly environmental review of the homes, which allowed any emerging issues or concerns to be addressed in a timely manner.

Within the IHS certification review, supports provided to the individual were found to be very person-centered. One individual drove his schedule of activities, meeting weekly with his staff to talk about options and then plan the week accordingly. KDC staff provided effective support to help him maintain his independence through the use of assistive technology, collaborating with Mass Commission for the Blind to trial new devices and trouble shoot any concerns. His assistive technology included a pen reader (Pen Friend), money reader, talking clocks, and raised dots on medication bottles to verify the administration time for each medication. The individual was also supported to actively visit with

friends and family members, helping him to be a good host to overnight visitors at his home by setting up the guest room and planning meals for the visit.

Within Day Services, staff were very familiar with the individuals' medical protocols and their unique needs. Individuals were supported to develop meaningful ISP goals, with subsequent implementation of those goals and thorough documentation of individuals' progress. Positive findings were observed in the mutual respectful interactions between staff and individuals. Individuals expressed satisfaction with the variety of community activities, including weekly trips to Orleans, libraries, and the grocery store to support their weekly cooking class. Job discovery and job exploration were another strength, with multiple volunteer opportunities provided to individuals including animal shelters, a horse farm, and stocking of vending machines. The individuals that were interviewed at CBDS voiced a strong love of animals, and they were satisfied with the various opportunities to volunteer and interact with animals while at CBDS. All activities and job opportunities were selected based on the individuals' interests, with completion of quarterly interest surveys, annual job assessments, and morning meetings to review the schedule.

Licensure areas that required further attention were also identified during the survey. In Residential Services, water temperatures were found to be above the regulatory range in several homes, and further oversight to ensure consistent water temperatures was needed. Also, the agency needed to ensure that any medical monitoring devices in use were authorized and implemented per the instructions of a health care provider.

Within CBDS, increased attention was needed regarding the submission of ISP support strategies within the required timelines. Also, individuals had not been given the opportunity to provide input on their staff at the time of hire and on an on-going basis.

Within Residential and Individual Home Supports, Kennedy Donovan Center received a rating of Met in 97% of licensing indicators, including all critical indicators, and will be issued a Two-Year License. In IHS, the agency met 100% of certification indicators and is fully certified. For Placement Services, Kennedy Donovan Center is deemed for certification based on CARF accreditation.

Within Day Supports, Kennedy Donovan Center received a rating of Met in 98% of licensing indicators, including all critical indicators, and will be issued a Two-Year License. The agency met 95% of certification indicators and is fully certified.

Follow-up on all licensing indicators that were rated as Not Met during the survey will be completed by Kennedy Donovan Center and submitted to OQE within 60 days of the Service Enhancement Meeting.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	8/8	0/8	
Residential and Individual Home Supports	62/64	2/64	
Placement Services Individual Home Supports			
Critical Indicators	7/7	0/7	
Total	70/72	2/72	97%
2 Year License			
# indicators for 60 Day Follow-up		2	

	Met / Rated	Not Met / Rated	% Met
Organizational	8/8	0/8	
Employment and Day Supports	41/42	1/42	
Community Based Day Services			
Critical Indicators	6/6	0/6	
Total	49/50	1/50	98%
2 Year License			
# indicators for 60 Day Follow-up		1	

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).	For six out of thirteen locations, the measured water temperature exceeded 120 degrees. The agency needs to ensure that deliverable water temperatures are within 110 to 120 degrees.

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

Indicator #	Indicator	Area Needing Improvement
L99 (05/22)	Medical monitoring devices needed for health and safety are authorized, agreed to, used and data collected appropriately. (eg seizure watches; fall sensors).	For one individual, the use of a chair alarm was not authorized by his medical provider and there were no clear instructions on its implementation. The agency needs to ensure that any medical monitoring devices are authorized, agreed to, and used, with relevant data collection in place.

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

Indicator #	Indicator	Area Needing Improvement
L87	Support strategies necessary to assist an individual to meet their goals and objectives are completed and submitted as part of the ISP.	For one out of three individuals, ISP support strategies were not completed within the required timelines. The agency needs to ensure that goals and objectives are completed and submitted within the required timelines.

CERTIFICATION FINDINGS

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	6/6	0/6	
Residential and Individual Home Supports	20/20	0/20	
Individual Home Supports	20/20	0/20	
Total	26/26	0/26	100%
Certified			

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	6/6	0/6	
Employment and Day Supports	14/15	1/15	
Community Based Day Services	14/15	1/15	
Total	20/21	1/21	95%
Certified			

Community Based Day 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.	Five individuals had not been provided with the opportunity to give feedback on their staff at the time of hire and on an ongoing basis. The agency needs to ensure individuals are provided with an opportunity to give feedback on their staff at the time of hire and on an ongoing basis.

MASTER SCORE SHEET LICENSURE

Organizational: Kennedy Donovan Center Inc.

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
L2	Abuse/neglect reporting	15/15	Met
L3	Immediate Action	8/8	Met
L4	Action taken	4/4	Met
L48	HRC	1/1	Met
L74	Screen employees	3/3	Met
L75	Qualified staff	2/2	Met
L76	Track trainings	9/9	Met
L83	HR training	9/9	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		1/1	13/13				14/14	Met
L5	Safety Plan	L		1/1	13/13				14/14	Met
℞ L6	Evacuation	L		1/1	13/13				14/14	Met
L8	Emergency Fact Sheets	I		1/1	13/13				14/14	Met
L9 (07/21)	Safe use of equipment	I		1/1					1/1	Met
L10	Reduce risk interventions	I			2/2				2/2	Met
℞ L11	Required inspections	L			13/13				13/13	Met
℞ L12	Smoke detectors	L			13/13				13/13	Met
℞ L13	Clean location	L			12/13				12/13	Met (92.31%)
L14	Site in good repair	L			11/12				11/12	Met (91.67%)
L15	Hot water	L			7/13				7/13	Not Met (53.85%)
L16	Accessibility	L			13/13				13/13	Met
L17	Egress at grade	L			13/13				13/13	Met
L19	Bedroom location	L			4/4				4/4	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L21	Safe electrical equipment	L			13/13				13/13	Met
L24	Locked door access	L			13/13				13/13	Met
L26	Walkway safety	L			13/13				13/13	Met
L27	Pools, hot tubs, etc.	L			3/3				3/3	Met
L29	Rubbish/combustibles	L			11/13				11/13	Met (84.62%)
L30	Protective railings	L			12/12				12/12	Met
L31	Communication method	I		1/1	13/13				14/14	Met
L32	Verbal & written	I		1/1	13/13				14/14	Met
L33	Physical exam	I		1/1	13/13				14/14	Met
L34	Dental exam	I		1/1	12/13				13/14	Met (92.86%)
L35	Preventive screenings	I		1/1	11/13				12/14	Met (85.71%)
L36	Recommended tests	I		1/1	12/13				13/14	Met (92.86%)
L37	Prompt treatment	I		1/1	13/13				14/14	Met
PE L38	Physician's orders	I			7/7				7/7	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L39	Dietary requirements	I			8/8				8/8	Met
L41	Healthy diet	L		1/1	13/13				14/14	Met
L42	Physical activity	L		1/1	13/13				14/14	Met
L43	Health Care Record	I		0/1	13/13				13/14	Met (92.86%)
L46	Med. Administration	I			10/11				10/11	Met (90.91%)
L47	Self medication	I		1/1	3/3				4/4	Met
L49	Informed of human rights	I		1/1	13/13				14/14	Met
L50 (07/21)	Respectful Comm.	I		1/1	13/13				14/14	Met
L51	Possessions	I		1/1	13/13				14/14	Met
L52	Phone calls	I		1/1	13/13				14/14	Met
L53	Visitation	I		1/1	13/13				14/14	Met
L54 (07/21)	Privacy	I		1/1	13/13				14/14	Met
L56	Restrictive practices	I			3/3				3/3	Met
L61	Health protection in ISP	I			3/4				3/4	Met
L63	Med. treatment plan form	I		1/1	10/10				11/11	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L64	Med. treatment plan rev.	I		0/1	9/10				9/11	Met (81.82%)
L67	Money mgmt. plan	I			9/10				9/10	Met (90.0%)
L68	Funds expenditure	I			10/10				10/10	Met
L69	Expenditure tracking	I			10/10				10/10	Met
L70	Charges for care calc.	I			13/13				13/13	Met
L71	Charges for care appeal	I			13/13				13/13	Met
L77	Unique needs training	I		1/1	13/13				14/14	Met
L78	Restrictive Int. Training	L			3/3				3/3	Met
L80	Symptoms of illness	L		1/1	13/13				14/14	Met
L81	Medical emergency	L		1/1	13/13				14/14	Met
L84	Health protect. Training	I			4/4				4/4	Met
L85	Supervision	L		1/1	13/13				14/14	Met
L86	Required assessments	I		0/1	12/12				12/13	Met (92.31%)
L87	Support strategies	I		0/1	11/12				11/13	Met (84.62%)

Ind. #	Ind.	Loc. or Individ.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L88	Strategies implemented	I		1/1	13/13				14/14	Met
L90	Personal space/bedroom privacy	I		1/1	13/13				14/14	Met
L91	Incident management	L		0/1	12/13				12/14	Met (85.71%)
L93 (05/22)	Emergency back-up plans	I		1/1	13/13				14/14	Met
L94 (05/22)	Assistive technology	I		1/1	13/13				14/14	Met
L96 (05/22)	Staff training in devices and applications	I		1/1	6/6				7/7	Met
L99 (05/22)	Medical monitoring devices	I			0/1				0/1	Not Met (0%)
#Std. Met/# 64 Indicator									62/64	
Total Score									70/72	
									97.22%	

Employment and Day Supports:

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L1	Abuse/neglect training	I			5/5	5/5	Met
L5	Safety Plan	L			1/1	1/1	Met
℞ L6	Evacuation	L			1/1	1/1	Met
L7	Fire Drills	L			1/1	1/1	Met
L8	Emergency Fact Sheets	I			5/5	5/5	Met
L9 (07/21)	Safe use of equipment	I			5/5	5/5	Met
℞ L11	Required inspections	L			1/1	1/1	Met
℞ L12	Smoke detectors	L			1/1	1/1	Met
℞ L13	Clean location	L			1/1	1/1	Met
L14	Site in good repair	L			1/1	1/1	Met
L15	Hot water	L			1/1	1/1	Met
L16	Accessibility	L			1/1	1/1	Met
L17	Egress at grade	L			1/1	1/1	Met
L18	Above grade egress	L			1/1	1/1	Met
L20	Exit doors	L			1/1	1/1	Met
L21	Safe electrical equipment	L			1/1	1/1	Met
L22	Well-maintained appliances	L			1/1	1/1	Met
L25	Dangerous substances	L			1/1	1/1	Met
L26	Walkway safety	L			1/1	1/1	Met
L29	Rubbish/combustibles	L			1/1	1/1	Met
L30	Protective railings	L			1/1	1/1	Met
L31	Communication method	I			5/5	5/5	Met
L32	Verbal & written	I			5/5	5/5	Met

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L37	Prompt treatment	I			5/5	5/5	Met
L38	Physician's orders	I			2/2	2/2	Met
L39	Dietary requirements	I			1/1	1/1	Met
L49	Informed of human rights	I			5/5	5/5	Met
L50 (07/21)	Respectful Comm.	I			5/5	5/5	Met
L51	Possessions	I			5/5	5/5	Met
L52	Phone calls	I			5/5	5/5	Met
L54 (07/21)	Privacy	I			5/5	5/5	Met
L77	Unique needs training	I			5/5	5/5	Met
L80	Symptoms of illness	L			1/1	1/1	Met
L81	Medical emergency	L			1/1	1/1	Met
L85	Supervision	L			1/1	1/1	Met
L86	Required assessments	I			2/2	2/2	Met
L87	Support strategies	I			2/3	2/3	Not Met (66.67 %)
L88	Strategies implemented	I			5/5	5/5	Met
L91	Incident management	L			1/1	1/1	Met
L93 (05/22)	Emergency back-up plans	I			5/5	5/5	Met
L94 (05/22)	Assistive technology	I			5/5	5/5	Met

Ind. #	Ind.	Loc. or Individ.	Emp. Sup.	Cent. Based Work	Com. Based Day	Total Met / Rated	Rating
L96 (05/22)	Staff training in devices and applications	I			5/5	5/5	Met
#Std. Met/# 42 Indicator						41/42	
Total Score						49/50	
						98.00%	

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

Individual Home Supports

Indicator #	Indicator	Met/Rated	Rating
C7	Feedback on staff / care provider performance	1/1	Met
C8	Family/guardian communication	1/1	Met
C9	Personal relationships	1/1	Met
C10	Social skill development	1/1	Met
C11	Get together w/family & friends	1/1	Met
C12	Intimacy	1/1	Met
C13	Skills to maximize independence	1/1	Met
C14	Choices in routines & schedules	1/1	Met
C15	Personalize living space	1/1	Met
C16	Explore interests	1/1	Met

Individual Home Supports

Indicator #	Indicator	Met/Rated	Rating
C17	Community activities	1/1	Met
C18	Purchase personal belongings	1/1	Met
C19	Knowledgeable decisions	1/1	Met
C21	Coordinate outreach	1/1	Met
C46	Use of generic resources	1/1	Met
C47	Transportation to/ from community	1/1	Met
C48	Neighborhood connections	1/1	Met
C51	Ongoing satisfaction with services/ supports	1/1	Met
C52	Leisure activities and free-time choices /control	1/1	Met
C53	Food/ dining choices	1/1	Met

Community Based Day 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
C13	Skills to maximize independence	5/5	Met
C37	Interpersonal skills for work	4/4	Met
C38 (07/21)	Habilitative & behavioral goals	3/4	Met
C39 (07/21)	Support needs for employment	3/4	Met
C40	Community involvement interest	5/5	Met
C41	Activities participation	5/5	Met
C42	Connection to others	5/5	Met
C43	Maintain & enhance relationship	5/5	Met
C44	Job exploration	4/4	Met
C45	Revisit decisions	5/5	Met
C46	Use of generic resources	5/5	Met
C47	Transportation to/ from community	5/5	Met
C51	Ongoing satisfaction with services/ supports	5/5	Met