



**PROVIDER REPORT  
FOR**

**NE CENTER FOR  
CHILDREN.  
33 Turnpike Rd  
Southboro, MA 01772**

**June 06, 2024**

**Version**

**Public Provider Report**

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

# **SUMMARY OF OVERALL FINDINGS**

**Provider** NE CENTER FOR CHILDREN.

**Review Dates** 4/1/2024 - 4/5/2024

**Service Enhancement Meeting Date** 4/22/2024

**Survey Team** Raymond Obeng (TL)  
Lisa MacPhail

**Citizen Volunteers**

**Survey scope and findings for Residential and Individual Home Supports**

<b>Service Group Type</b>	<b>Sample Size</b>	<b>Licensure Scope</b>	<b>Licensure Level</b>	<b>Certification Scope</b>	<b>Certification Level</b>
<b>Residential and Individual Home Supports</b>	1 location(s) 3 audit (s)	Full Review	74/78 2 Year License 04/22/2024 - 04/22/2026		26 / 26 Certified 04/22/2024 - 04/22/2026
Residential Services	1 location(s) 3 audit (s)			Full Review	20 / 20
Planning and Quality Management				Full Review	6 / 6

## **EXECUTIVE SUMMARY :**

The New England Center for Children (NECC) is a private non-profit organization based in Southborough, Massachusetts; the agency provides services to children and adults on the Autism Spectrum in the United States, as well as to those in other countries with related disorders. The agency's local and international ties include a global network of educators, clinicians, researchers, and interdisciplinary teams. NECC serves people beginning in childhood and extending into adulthood at sites such as its Southborough MA campus, and the two twenty-four-hour residential homes for adults diagnosed with Autism and Intellectual Disabilities.

For this 2024 survey, the Department of Developmental Services (DDS) Metro Office of Quality Enhancement conducted a full licensing and certification review of NECC's organizational systems and supports offered to people in the agency's 24/7 residential homes.

The survey results showed that NECC has effective organizational systems and a positive work culture that promoted desired outcomes for the people it supports. The agency screens potential employees prior to hire and has an effective training tracking system that ensured that staff received all the DDS-mandated trainings, including abuse and neglect. As it relates to staff development, the agency provides regular supervisory oversight, staff training, and other staff development activities.

NECC had a strategic plan that included goals related to the improvement of services for the people it supports, like the increased use of assistive technology. NECC has several tools for collecting, reviewing, and analyzing programmatic data/information (including incidents and medication occurrences). The collected data was used to assure effective ongoing supports and course correction as needed, within its residential programs. It collected feedback from stakeholders through satisfaction queries and ongoing conversations with the individuals, their families, their staff, DDS staff, amongst others.

Within residential, survey findings showed many positive outcomes for the people NECC serves. In the area of safety, people were supported to evacuate within the required timeframe, and the home had current safety and emergency backup plans. Inspections were conducted as required, and safety requirements such as functional smoke and carbon monoxide detectors were in place. Water temperature also measured within allowable limits. Relative to health care, staff supported people to attend annual physical and dental appointments, including facilitating a medical doctor's visit to the home to provide care when needed. All medical appointments were documented as required, and medication was administered in accordance with Physician orders and MAP policy. When medical treatment protocols were needed, they were properly developed, and staff were trained on their implementation. Staff also knew how to support people in the event of medical or other emergencies.

Staff were familiar with individual-specific unique needs and supported people to eat healthy diets and maintain a physical lifestyle. Within the home, people's bedrooms were decorated to suit their preferences, and bedrooms had lockable doors for privacy.

In the area of certification, written and oral communication with and about individuals was respectful. Staff supported people to access community activities and events, as well as develop good relationships with families, friends, and neighbors. People were afforded the opportunity to visit family members and friends, and/or talk to them on the telephone or through video conferencing. People also had an opportunity to utilize community resources such as local shops, malls, restaurants, parks, and recreation centers. Relative to sexuality and companionships, assessments were conducted to learn the preferences of each person for training and support, purposes. Many people were supported to have companionship needs met and actualize relationships.

Many successes were noted in both licensure and certification within the NECC residential program, but corrective attention is needed from the agency in a few other areas to meet requirements. Organizationally, relative to human rights, the agency's human rights committee did not meet the mandate for requisite member attendance. Additionally, relative to the environmental restrictions on

rights, the outlines for the practices of locked sharps, locked laundry cabinets, locked bathroom cabinets, exterior alarm doors from 10 pm to 7 am, bedroom windows, and common areas windows did not include plans for elimination or fading of the restrictions. Staff were also not fully trained on the restrictive interventions in the home, and on the "Signs and Symptoms of Illness" training curriculum that includes "Just Not Right."

NECC will receive a Two-Year License for its Residential Services grouping having met 95% of licensing indicators. The agency will conduct its follow-up review on the licensing indicators that were not met within 60 days of the Service Enhancement Meeting and submit the results to the DDS Metro Regional Office of Quality Enhancement. The residential service grouping is also Certified having met 100% of certification indicators.

## LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
<b>Organizational</b>	4/5	1/5	
<b>Residential and Individual Home Supports</b>	70/73	3/73	
Residential Services			
<b>Critical Indicators</b>	7/7	0/7	
<b>Total</b>	74/78	4/78	95%
<b>2 Year License</b>			
<b># indicators for 60 Day Follow-up</b>		4	

### **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 Human Rights Committee did not meet the mandate for requisite member attendance. The agency needs to ensure that members, including those with requisite expertise attend and offer input at Human Rights Committee meetings as required.

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

Indicator #	Indicator	Area Needing Improvement
L56	Restrictive practices intended for one individual that affect all individuals served at a location need to have a written rationale that is reviewed as required and have provisions so as not to unduly restrict the rights of others.	For all three individuals, environmental and restrictive interventions including locked sharps, locked laundry and bathroom cabinets, alarmed exterior doors (between 10p and 7a), common area window stops, and periodic bed checks intended for one individual that affects all individuals at the home had an outline that did not include plans to reduce or fade the restrictions per regulation. The agency must ensure that the "Interventions to Ensure Safety at the Home" outline includes plans for the elimination or fading of the above listed restrictions. Also, NECC must ensure that guardians for people living in homes who are impacted by the restrictions are informed of the restrictions, but not be presented with consent forms.

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

<b>Indicator #</b>	<b>Indicator</b>	<b>Area Needing Improvement</b>
L78	Staff are trained to safely and consistently implement restrictive interventions.	At the one home, staff were not fully trained on the restrictive interventions in the home. The agency must ensure that staff are fully trained to safely and consistently implement all restrictive interventions in the home.
L80	Support staff are trained to recognize signs and symptoms of illness.	At the one home, staff were not trained using a full "Signs and Symptoms of Illness" training curriculum that includes "Just Not Right." The agency must ensure that staff are trained and able to recognize signs and symptoms of illness to support individuals' health needs.

## **CERTIFICATION FINDINGS**

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

## **MASTER SCORE SHEET LICENSURE**

**Organizational: NE CENTER FOR CHILDREN.**

<b>Indicator #</b>	<b>Indicator</b>	<b>Met/Rated</b>	<b>Rating(Met,Not Met,NotRated)</b>
L48	HRC	<b>0/1</b>	<b>Not Met(0 % )</b>
L74	Screen employees	<b>4/4</b>	<b>Met</b>
L75	Qualified staff	<b>2/2</b>	<b>Met</b>
L76	Track trainings	<b>4/4</b>	<b>Met</b>
L83	HR training	<b>4/4</b>	<b>Met</b>

**Residential and Individual Home Supports:**

<b>Ind. #</b>	<b>Ind.</b>	<b>Loc. or Individ.</b>	<b>Res. Sup.</b>	<b>Ind. Home Sup.</b>	<b>Place.</b>	<b>Resp.</b>	<b>ABI-MFP Res. Sup.</b>	<b>ABI-MFP Place.</b>	<b>Total Met/Rated</b>	<b>Rating</b>
L1	Abuse/neglect training	I	3/3						3/3	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	3/3						3/3	Met
L9 (07/21)	Safe use of equipment	I	3/3						3/3	Met
L10	Reduce risk interventions	I	3/3						3/3	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
L19	Bedroom location	L	1/1						1/1	Met

Ind. #	Ind.	Loc. or Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
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
L23	Egress door locks	L	1/1						1/1	Met
L24	Locked door access	L	1/1						1/1	Met
L25	Dangerous substances	L	1/1						1/1	Met
L26	Walkway safety	L	1/1						1/1	Met
L28	Flammables	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	3/3						3/3	Met
L32	Verbal & written	I	3/3						3/3	Met
L33	Physical exam	I	3/3						3/3	Met
L34	Dental exam	I	3/3						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
L35	Preventive screenings	I	3/3						3/3	Met
L36	Recommended tests	I	3/3						3/3	Met
L37	Prompt treatment	I	3/3						3/3	Met
℞ L38	Physician's orders	I	2/2						2/2	Met
L39	Dietary requirements	I	1/1						1/1	Met
L40	Nutritional food	L	1/1						1/1	Met
L41	Healthy diet	L	1/1						1/1	Met
L42	Physical activity	L	1/1						1/1	Met
L43	Health Care Record	I	3/3						3/3	Met
L44	MAP registration	L	1/1						1/1	Met
L45	Medication storage	L	1/1						1/1	Met
℞ L46	Med. Administration	I	3/3						3/3	Met
L49	Informed of human rights	I	3/3						3/3	Met
L50 (07/21)	Respectful Comm.	I	3/3						3/3	Met
L51	Possessions	I	3/3						3/3	Met
L52	Phone calls	I	3/3						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
L53	Visitation	I	3/3						3/3	Met
L54 (07/21)	Privacy	I	3/3						3/3	Met
L55	Informed consent	I	1/1						1/1	Met
L56	Restrictive practices	I	0/3						0/3	Not Met (0 %)
L57	Written behavior plans	I	2/2						2/2	Met
L60	Data maintenance	I	2/2						2/2	Met
L63	Med. treatment plan form	I	3/3						3/3	Met
L64	Med. treatment plan rev.	I	3/3						3/3	Met
L67	Money mgmt. plan	I	3/3						3/3	Met
L68	Funds expenditure	I	3/3						3/3	Met
L69	Expenditure tracking	I	3/3						3/3	Met
L70	Charges for care calc.	I	3/3						3/3	Met
L71	Charges for care appeal	I	3/3						3/3	Met
L77	Unique needs training	I	3/3						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
L78	Restrictive Int. Training	L	0/1						0/1	Not Met (0 %)
L79	Restraint training	L	1/1						1/1	Met
L80	Symptoms of illness	L	0/1						0/1	Not Met (0 %)
L81	Medical emergency	L	1/1						1/1	Met
L82	Medication admin.	L	1/1						1/1	Met
L85	Supervision	L	1/1						1/1	Met
L86	Required assessments	I	3/3						3/3	Met
L87	Support strategies	I	3/3						3/3	Met
L88	Strategies implemented	I	3/3						3/3	Met
L90	Personal space/bedroom privacy	I	3/3						3/3	Met
L91	Incident management	L	1/1						1/1	Met
L93 (05/22)	Emergency back-up plans	I	3/3						3/3	Met
L94 (05/22)	Assistive technology	I	3/3						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
L96 (05/22)	Staff training in devices and applications	1	3/3						3/3	Met
<b>#Std. Met/#</b>									<b>70/73</b>	
<b>Total Score</b>									<b>74/78</b>	
									<b>94.87%</b>	

## 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	3/3	Met
C8	Family/guardian communication	3/3	Met
C9	Personal relationships	3/3	Met
C10	Social skill development	3/3	Met

**Residential Services**

<b>Indicator #</b>	<b>Indicator</b>	<b>Met/Rated</b>	<b>Rating</b>
C11	Get together w/family & friends	3/3	<b>Met</b>
C12	Intimacy	3/3	<b>Met</b>
C13	Skills to maximize independence	3/3	<b>Met</b>
C14	Choices in routines & schedules	3/3	<b>Met</b>
C15	Personalize living space	1/1	<b>Met</b>
C16	Explore interests	3/3	<b>Met</b>
C17	Community activities	3/3	<b>Met</b>
C18	Purchase personal belongings	3/3	<b>Met</b>
C19	Knowledgeable decisions	3/3	<b>Met</b>
C46	Use of generic resources	3/3	<b>Met</b>
C47	Transportation to/ from community	3/3	<b>Met</b>
C48	Neighborhood connections	3/3	<b>Met</b>
C49	Physical setting is consistent	1/1	<b>Met</b>
C51	Ongoing satisfaction with services/ supports	3/3	<b>Met</b>
C52	Leisure activities and free-time choices /control	3/3	<b>Met</b>
C53	Food/ dining choices	3/3	<b>Met</b>