



**PROVIDER REPORT
FOR**

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

Version

Provider Web Report

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

SUMMARY OF OVERALL FINDINGS

Provider	NE CENTER FOR CHILDREN.
Review Dates	1/22/2019 - 1/24/2019
Service Enhancement Meeting Date	2/7/2019
Survey Team	Lisa MacPhail (TL)
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	1 location(s) 3 audit (s)	Full Review	73 / 77 2 Year License 02/07/2019 - 02/07/2021		28 / 28 Certified 02/07/2019 - 02/07/2021
Residential Services	1 location(s) 3 audit (s)			Full Review	22 / 22
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. NECC has international ties (with a location in Abu Dhabi for example), extending its autism research and education mission to serving those on the autism spectrum as well as those with related disorders in other countries. The agency serves individuals beginning in childhood and extending into adulthood. At this time, NECC operates two 24/7 residential homes for adults with autism and ID providing wrap-around services encompassing both meaningful day activities as well as domestic endeavors.

For the purpose of this Department of Developmental Services (DDS) survey, a full licensing and certification review was conducted at one of the homes providing residential services. During the course of the survey there were many positive findings. On an administrative level, the agency had an effective system for tracking required staff trainings, ensuring that all staff received required trainings, and screenings of prospective employees occurred.

The review of licensing indicators showed that medical appointments, follow-up appointments, and appropriate screenings were supported, and consistent, clear, and concise record keeping practices were observed. Medications were administered and documented properly, and staff was trained on protocols and physician's orders to ensure proper implementation. Staff was also knowledgeable of the unique needs of each individual served. Individuals were supported to work on their ISP goals and objectives and data was specifically tracked and summarized using software which allows for individual analysis and adjustment to maximize effectiveness. The home was clean, well maintained and reflected the preferences of individuals that live there.

In the area of certification, individuals were found to be participating in community activities which appealed to their individual interests. NECC supported the young adults living in the home with developing skills to maximize their independence in typical daily routines. Local community resources were accessed on a regular basis for such things as shopping and leisure activities. Individuals were supported to maintain relationships with family and friends, and encouraged to choose what they did with their leisure time, and their schedule of daily activities. Staff was knowledgeable and very familiar with the individuals they served, and staff continually gaged individuals' satisfaction with services and their home life. Administratively the agency solicited feedback from individuals and families regarding satisfaction with services. NECC is currently in the fourth year of a five year strategic plan; it has established clear quality improvement targets and has sound mechanisms in place for measuring service improvement goals.

Survey findings revealed that NECC provides high quality supports in many areas; however, there were a few licensing areas in which the agency should focus on improving upon. Individuals should be trained and provided information on how to report alleged abuse and/or neglect. The agency also needs to ensure that fire drills are conducted as required by regulation, and successfully performed to ensure that all individuals can be assisted to meet the required evacuation timelines. Finally, the Human Rights Committee must not include any member with an administrative or financial tie to the agency, unless the agency has filed a waiver petition for this member to serve after filing with the state ethics board.

In conclusion, NECC met 95% of licensing indicators and will therefore receive a Two Year license for its Residential/ I H S service grouping. The agency is also Certified with 100% of the certification indicators met. The agency will perform its own follow-up on licensing indicators that were not met and submit the results to DDS within 60 days of the Service Enhancement meeting.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	6/7	1/7	
Residential and Individual Home Supports	67/70	3/70	
Residential Services			
Critical Indicators	8/8	0/8	
Total	73/77	4/77	95%
2 Year License			
# indicators for 60 Day Follow-up		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.	A Human Rights Committee voting member had financial ties to the agency. The HRC (voting members) needs to be comprised of volunteers with no direct or indirect financial or administrative ties to the agency, unless they file a waiver petition and obtain approval for this person to remain on the HRC.

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

Indicator #	Indicator	Area Needing Improvement
L1	Individuals have been trained and guardians are provided with information in how to report alleged abuse/neglect.	The three individuals surveyed were not provided with information regarding how to contact the Disabled Person's Protection Commission (DPPC) to report alleged abuse/neglect. The agency must ensure that individuals are trained and informed in how to contact the Disabled Person's Protection Commission (DPPC) to report alleged abuse/neglect.
L7	Fire drills are conducted as required.	Fire drills were not conducted according to DDS regulations as all of the asleep drills did not occur; and, when drills

		<p>were conducted, individuals were not always successful in exiting under 2.5 minutes. Fire drills must be conducted in accordance with the safety plan, and individuals must be supported to be successful in evacuating under 2.5 minutes.</p>
L91	<p>Incidents are reported and reviewed as mandated by regulation.</p>	<p>An incident was not entered into HCSIS within the required timelines. All incidents must be entered into the HCSIS system within the required timelines.</p>

CERTIFICATION FINDINGS

	Met / Rated	Not Met / Rated	% Met
Certification - Planning and Quality Management	6/6	0/6	
Residential and Individual Home Supports	22/22	0/22	
Residential Services	22/22	0/22	
TOTAL	28/28	0/28	100%
Certified			

MASTER SCORE SHEET LICENSURE

Organizational: NE CENTER FOR CHILDREN.

Indicator #	Indicator	Met/Rated	Rating(Met,Not Met,NotRated)
Ⓟ L2	Abuse/neglect reporting	1/1	Met
L48	HRC	0/1	Not Met(0 %)
L65	Restraint report submit	1/1	Met
L74	Screen employees	1/1	Met
L75	Qualified staff	1/1	Met
L76	Track trainings	2/2	Met
L83	HR training	2/2	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	0/3						0/3	Not Met (0 %)
L5	Safety Plan	L	1/1						1/1	Met
Ⓟ L6	Evacuation	L	1/1						1/1	Met
L7	Fire Drills	L	0/1						0/1	Not Met (0 %)
L8	Emergency Fact Sheets	I	3/3						3/3	Met
L9	Safe use of equipment	L	1/1						1/1	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
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
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
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	3/3						3/3	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
L47	Self medication	I	3/3						3/3	Met
L49	Informed of human rights	I	3/3						3/3	Met
L50	Respectful Comm.	L	1/1						1/1	Met
L51	Possessions	I	3/3						3/3	Met
L52	Phone calls	I	3/3						3/3	Met
L53	Visitation	I	3/3						3/3	Met
L54	Privacy	L	1/1						1/1	Met
L56	Restrictive practices	I	3/3						3/3	Met
L57	Written behavior plans	I	1/1						1/1	Met
L58	Behavior plan component	I	1/1						1/1	Met
L59	Behavior plan review	I	1/1						1/1	Met
L60	Data maintenance	I	1/1						1/1	Met
L63	Med. treatment plan form	I	1/1						1/1	Met
L64	Med. treatment plan	I	1/1						1/1	Met

	rev.									
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
L78	Restrictive Int. Training	L	1/1						1/1	Met
L79	Restraint training	L	1/1						1/1	Met
L80	Symptoms of illness	L	1/1						1/1	Met
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	0/1						0/1	Not Met (0 %)
#Std. Met/# 70 Indicator									67/70	
Total Score									73/77	
									94.81%	

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
C11	Get together w/family & friends	3/3	Met
C12	Intimacy	3/3	Met
C13	Skills to maximize independence	3/3	Met
C14	Choices in routines & schedules	3/3	Met
C15	Personalize living space	1/1	Met
C16	Explore interests	3/3	Met
C17	Community activities	3/3	Met
C18	Purchase personal belongings	3/3	Met
C19	Knowledgeable decisions	3/3	Met
C20	Emergency back-up plans	1/1	Met
C46	Use of generic resources	3/3	Met
C47	Transportation to/ from community	3/3	Met
C48	Neighborhood connections	3/3	Met
C49	Physical setting is consistent	1/1	Met
C51	Ongoing satisfaction with services/ supports	3/3	Met
C52	Leisure activities and free-time choices /control	3/3	Met
C53	Food/ dining choices	3/3	Met
C54	Assistive technology	3/3	Met

