



**PROVIDER REPORT
FOR**

**New England Center for
Children, Inc.
33 Turnpike Rd
Southboro, MA 01772**

May 11, 2026

Version

Public Provider Report

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

SUMMARY OF OVERALL FINDINGS

Provider New England Center for Children, Inc.

Review Dates 4/14/2026 - 4/16/2026

Service Enhancement Meeting Date 4/29/2026

Survey Team Cheryl Hampton (TL)
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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	1 location(s) 3 audit (s)	Targeted Review	DDS 12/12 Provider 68 / 68 80 / 80 2 Year License 04/29/2026-04/29/2028		DDS 0 / 0 Provider 26 / 26 26 / 26 Certified 04/29/2026 - 04/29/2028
Residential Services	1 location(s) 3 audit (s)			DDS Targeted Review	20 / 20
Planning and Quality Management				DDS Targeted 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 continues to have a local and international affiliation which includes 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 three residential homes for adults diagnosed with Autism and Intellectual Disabilities.

For this 2026 Licensing and Certification review the agency was eligible and approved to perform a self-assessment of both licensing and certification indicators. A targeted review performed by the Department of Developmental Services (DDS) Office of Quality Enhancement (OQE) encompassed all critical indicators as well as any licensing and certification indicators found to be not met at the agency's last review. The final survey results reflect a combination of ratings from the self-assessment process conducted by NECC and the review conducted by DDS, with ratings from DDS prevailing where indicators were rated by both entities.

The results of this review highlighted many positive practices and effective systems NECC had in place. The agency maintained strong organizational systems and fostered a positive organizational culture that supported positive outcomes for the individuals it serves. The agency's Human Rights Committee (HRC) met quarterly with all required members regularly in attendance. The HRC reviewed all information under its purview including environmental restrictions, the agency policy on Human Rights and mandated reporting, and Human Rights training materials, individual behavioral support plans, and conducted a location site visit within the past year in adherence with agency HRC bylaws. NECC's employee training system ensured that all employees held current certifications and DDS mandated trainings, inclusive of training in mandated reporting.

Relative to Licensure at the residential location visited, the home was clean and in good repair with all current environmental inspections maintained. Fire drills were conducted in accordance with written language in the approved Safety Plan and all fire system apparatus was operational when tested. Relative to health and well-being, medications were administered as prescribed by Medication Administration Program (MAP) certified staff. Physician ordered protocols were in place, inclusive of seizure disorder and EpiPen related protocols and training was provided to staff annually. For those impacted by others restrictive practices in the home;(i.e. locked sharps, locked food items), individuals for whom the restriction was not in place for had their own key to access items. Support staff were trained in all aspects of environmental restrictions as well as the Signs and Symptoms of Illness curriculum.

As a result of this review, NECC's Residential Services received an overall score of 100% of licensure indicators met. The agency will receive a Two-Year License for Residential Services. This service group is Certified with an overall score of 100% of certification indicators met.

The following is a description of the agency's self-assessment process.

Description of Self Assessment Process:

The New England Center for Children (NECC®) is committed to ongoing data-based assessment and review of all services provided. Scientifically validated data-based decision making is a fundamental principle of NECC and is implemented at all levels of the organization. The agency is in the first year of a strategic plan which identifies specific goals that have been implemented agency-wide and measures our performance toward those goals. All goals are set and evaluated by NECC Program Directors for their departments. Directors review performance with the Executive Committee as well as their teams. Changes are implemented based on performance on the objectives.

The New England Center for Children operates three adult homes and implements systems to ensure all standards are followed and reviewed regularly. The third adult home recently opened on 3/26/26. The homes are directly supervised by Coordinators who are supervised by the Clinical Program Specialist, Educational Specialist, and the Director of Adult Services through weekly scheduled meetings, as well as daily check-ins. Team meetings occur weekly with the program staff. During the evening and overnight hours, the program is formally supervised by the Residential Services Department under the supervision of the Director of Residential Services who reports to the Director of Administration. The Residential Services Department provides daily supervision and support to all areas of the program between the hours of 3:00 p.m. and 7:00 a.m. (24 hours during weekends). This department visits teams at residences each evening or overnight and provides support and supervision for routine reporting and clinical and administrative issues through a beeper system and nightly reporting summary system.

NECC ensures standards developed by DDS are met through ongoing system management. The Director of Adult Services and Director of Facilities ensure that maintenance technicians complete random safety checks, reviewing items such as water temperature, dryer vents, and CO detector batteries. Fire drills are scheduled through the Residential Services Department and implemented by the Coordinator and Residential Services. The outcome of the drills are reviewed in supervision meetings with Coordinator, Specialist, and Director for each of the three adult homes to identify success as well as areas for remediation. Following this meeting, the Coordinator then reviews the outcome of the drill in the next team meeting with staff. Safety/change of shift checklists are completed daily at 8:00 a.m. and 9:00 p.m. by the staff leaving and entering their shift and reviewed by the Coordinator. Nightly shift summaries are emailed to the Program Supervisors, as well as Residential Services and Nursing. This system is effective in managing all aspects of the residence including safety, programming, maintenance and home life, and allows for immediate follow-up on any issue that may arise as well as effective communication between staff at the residences across all shifts.

Staff development and training is a priority at NECC. The agency has a comprehensive 2 1/2 week training program for new staff. This training time includes 52 hours of competency-based, lecture/didactic training time and 48.5 hours of on-the-job training. New staff must complete all required training before they assume their duties on shift. Each year, staff also receive a minimum of 24 hours of refresher training. NECC offers on-site graduate training in Severe Special Education through Simmons University and a master in Applied Behavior Analysis through Western New England University. A doctoral program in Applied Behavior Analysis is also offered through Western New England University. New staff receive a total of 18 hours of CALM® physical and verbal training. This program has been reviewed and approved by DDS (1/31/2024). The goal of this curriculum is to teach the skills necessary to deescalate potential emergency situations and/ or safely manage an aggressive individual when the least restrictive options have been exhausted and imminent risk is present. All trainees are required to demonstrate mastery of the trained skills when presented in isolation as well as in the context of a role-play. All trainers have completed a trainer's course, and then assist a senior trainer with a course before being qualified as a trainer. In addition, all staff receive 8 hours of CALM refresher training each year.

Throughout the year teachers receive trainings in specific curriculum areas, instructed by the Coordinator and/or Program Specialist. Topics included in this format range from implementing task analyses to overnight guidelines. Much of this training is completed during weekly team staff meeting. The programs are explained, modeled, and then role-played. Staff are given feedback on their

performance and all questions are answered. The training is followed by direct observations of staff performance working directly with the individuals. In addition, all staff receive annual training/review in Human Rights, DPPC, EO509, PBS Universal supports, Safety Plan, Incident Management, Signs and Symptoms of Illness, Restrictive Procedures, and other required DDS trainings. This includes mandated reporter training, and the agency's response protocols. Additionally, staff receive ongoing training/review of individual specific unique needs (e.g., communication, medical, behavior, etc.). All staff receive initial training on COVID and cleaning/disinfection protocols, as well as regular refreshers/updates. Staff receive evaluations at 90 days and annually. Evaluations include on shift observations of interactions with individuals (e.g. QUIC observations), implementation of task analysis and discrete trial teaching as well as ensuring all training is up to date.

Health Services are monitored and scheduled by the Coordinator, Specialists, and Director of Adult Services with the Adult Services nurse consultant at NECC. The Coordinator or Nurse schedules appointments for the individuals in collaboration with the families. Meetings between nursing and the Coordinator/ Specialist occur monthly, and as needed to review cases and necessary medical follow-up as well as future planning.

Individual's human rights are safeguarded through a variety of systems and training. Guidelines are developed by the Coordinator and Clinical Program Specialist, who is a Board Certified and Licensed Behavior Analyst. Behavior plans that meet the criteria for targeted or intensive BSP interventions are reviewed by the NECC's internal Peer Review Committee consisting of Master and PhD-level clinicians. Data are reviewed weekly in supervision meetings with the Positive Behavior Support Team to address any needed changes in guidelines.

Money management is completed nightly with each individual to balance and account for personal funds on hand. Monthly, financial records are compiled and audited by case managers. Audits are submitted for review to the Specialist and Director. On a semi-annual basis, the NECC Business Office will request records for individuals' financial records at random to be reviewed and audited.

Each house has a weekly house meeting during which the individuals decide on the menu, activities, and community trips they want to take that week. There is a book with lists/pictures of local restaurants, places to visit, and activities (e.g. Autism Apex, grocery stores, state parks, Glow in the Dark Mini Golf, etc.) to supplement and assist some individuals in choosing. Individuals can use this book to help them make choices if they want. New items are added to the books as they become known. One-time events such as a play, or a Christmas light festival, are presented to the individuals as they occur. New activities are added from searches of the Internet, parent suggestions, local flyers, and other community sources for activities and information. Our individuals are supported to participate fully in their local community, through their place of employment and/or at local events, and restaurants/shopping areas. Individuals also receive quarterly training in Human Rights including how/when to contact DPPC.

In addition to these systems, which enable self-assessment within the adult program, NECC has a number of agency-wide safety systems to monitor and improve our service delivery as a whole. These systems include an agency-wide peer review system to evaluate the effectiveness of clinical programming and monitor restrictive interventions; a Staff Injury Committee to review injuries and make recommendations for improved safety; a Vehicle Safety Committee and a Medication Error Review Committee. Recommendations from the committees are reviewed by the Executive Committee. Committees disseminate information and recommendations for change at the weekly agency wide Program Directors' meetings. Any changes that are recommended are first trained at the supervisor level and then on the team level. Follow-up is then completed by team supervisors to ensure that changes are effective. Feedback is regularly solicited from all consumers and their families about the services they receive at NECC.

The ratings below were determined through direct observation, program review, and system analysis. For example, maintenance checklists for the past three months were reviewed as well as a site visit conducted by the Director of Adult Services, Director of Enrollment and Family Supports, and Director of Facilities on February 26, 2026. At this time, the hot water was tested and was found to be within stated range at both the kitchen sink and bathroom for both residences. Financial reviews are

completed monthly and audits completed semi-annually by the Business Office and were used for self-evaluation. Financial audits were completed by the Business Office for 2 of the individuals most recently in January 2026. Medical systems and related licensing/certification indicators are reviewed regularly by program coordinators and the consulting nurse ensuring systems are in place and effective. All systems that are in place for licensing/certification indicators are reviewed during regular supervision with the Program Director and Clinical Program Specialist. Licensing/Certification indicators were determined to be met through reviews of data from January 2026 - March 2026.

LICENSURE FINDINGS

	Met / Rated	Not Met / Rated	% Met
Organizational	6/6	0/6	
Residential and Individual Home Supports	74/74	0/74	
Residential Services			
Critical Indicators	8/8	0/8	
Total	80/80	0/80	100%
2 Year License			
# indicators for 60 Day Follow-up		0	

CERTIFICATION FINDINGS

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

MASTER SCORE SHEET LICENSURE

Organizational: New England Center for Children, Inc.

Indicator #	Indicator	Reviewed by	Met/Rated	Rating(Met,Not Met,NotRated)
Ⓡ L2	Abuse/neglect reporting	DDS	1/1	Met
L48	HRC	DDS	1/1	Met
L74	Screen employees	Provider	-	Met
L75	Qualified staff	Provider	-	Met
L76	Track trainings	Provider	-	Met
L83	HR training	Provider	-	Met

Residential and Individual Home Supports:

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L1	Abuse/neglect training	I	Provider	-						-	Met
L5	Safety Plan	L	Provider	-						-	Met
Ⓡ L6	Evacuation	L	DDS	1/1						1/1	Met
L7	Fire Drills	L	Provider	-						-	Met
L8	Emergency Fact Sheets	I	Provider	-						-	Met
L9 (07/21)	Safe use of equipment	I	Provider	-						-	Met
L10	Reduce risk interventions	I	Provider	-						-	Met
Ⓡ L11	Required inspections	L	DDS	1/1						1/1	Met
Ⓡ L12	Smoke detectors	L	DDS	1/1						1/1	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
Ⓡ L13	Clean location	L	DDS	1/1						1/1	Met
L14	Site in good repair	L	Provider	-						-	Met
L15	Hot water	L	Provider	-						-	Met
L16	Accessibility	L	Provider	-						-	Met
L17	Egress at grade	L	Provider	-						-	Met
L18	Above grade egress	L	Provider	-						-	Met
L19	Bedroom location	L	Provider	-						-	Met
L20	Exit doors	L	Provider	-						-	Met
L21	Safe electrical equipment	L	Provider	-						-	Met
L22	Well-maintained appliances	L	Provider	-						-	Met
L23	Egress door locks	L	Provider	-						-	Met
L24	Locked door access	L	Provider	-						-	Met
L25	Dangerous substances	L	Provider	-						-	Met
L26	Walkway safety	L	Provider	-						-	Met
L28	Flammables	L	Provider	-						-	Met
L29	Rubbish/combustibles	L	Provider	-						-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L30	Protective railings	L	Provider	-						-	Met
L31	Communication method	I	Provider	-						-	Met
L32	Verbal & written	I	Provider	-						-	Met
L33	Physical exam	I	Provider	-						-	Met
L34	Dental exam	I	Provider	-						-	Met
L35	Preventive screenings	I	Provider	-						-	Met
L36	Recommended tests	I	Provider	-						-	Met
L37	Prompt treatment	I	Provider	-						-	Met
Ⓡ L38	Physician's orders	I	DDS	3/3						3/3	Met
L39	Dietary requirements	I	Provider	-						-	Met
L40	Nutritional food	L	Provider	-						-	Met
L41	Healthy diet	L	Provider	-						-	Met
L42	Physical activity	L	Provider	-						-	Met
L43	Health Care Record	I	Provider	-						-	Met
L44	MAP registration	L	Provider	-						-	Met
L45	Medication storage	L	Provider	-						-	Met
Ⓡ L46	Med. Administration	I	DDS	3/3						3/3	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L49	Informed of human rights	I	Provider	-						-	Met
L50 (07/21)	Respectful Comm.	I	Provider	-						-	Met
L51	Possessions	I	Provider	-						-	Met
L52	Phone calls	I	Provider	-						-	Met
L53	Visitation	I	Provider	-						-	Met
L54 (07/21)	Privacy	I	Provider	-						-	Met
L55	Informed consent	I	Provider	-						-	Met
L56	Restrictive practices	I	DDS	3/3						3/3	Met
L57	Written behavior plans	I	Provider	-						-	Met
L60	Data maintenance	I	Provider	-						-	Met
L63	Med. treatment plan form	I	Provider	-						-	Met
L64	Med. treatment plan rev.	I	Provider	-						-	Met
L67	Money mgmt. plan	I	Provider	-						-	Met
L68	Funds expenditure	I	Provider	-						-	Met
L69	Expenditure tracking	I	Provider	-						-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L70	Charges for care calc.	I	Provider	-						-	Met
L71	Charges for care appeal	I	Provider	-						-	Met
L77	Unique needs training	I	Provider	-						-	Met
L78	Restrictive Int. Training	L	DDS	1/1						1/1	Met
L79	Restraint training	L	Provider	-						-	Met
L80	Symptoms of illness	L	DDS	1/1						1/1	Met
L81	Medical emergency	L	Provider	-						-	Met
L82	Medication admin.	L	DDS	1/1						1/1	Met
L85	Supervision	L	Provider	-						-	Met
L86	Required assessments	I	Provider	-						-	Met
L87	Support strategies	I	Provider	-						-	Met
L88	Strategies implemented	I	Provider	-						-	Met
L90	Personal space/bedroom privacy	I	Provider	-						-	Met
L91	Incident management	L	Provider	-						-	Met

Ind. #	Ind.	Loc. or Indiv.	Reviewed by	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI-MFP Res. Sup.	ABI-MFP Place.	Total Met/Rated	Rating
L93 (05/22)	Emergency back-up plans	I	Provider	-						-	Met
L94 (05/22)	Assistive technology	I	Provider	-						-	Met
L96 (05/22)	Staff training in devices and applications	I	Provider	-						-	Met
#Std. Met/# 74 Indicator										74/74	
Total Score										80/80	
										100%	

MASTER SCORE SHEET CERTIFICATION

Certification - Planning and Quality Management

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

Residential Services

Indicator #	Indicator	Reviewed By	Met/Rated	Rating
C7	Feedback on staff / care provider performance	Provider	-	Met
C8	Family/guardian communication	Provider	-	Met
C9	Personal relationships	Provider	-	Met
C10	Social skill development	Provider	-	Met
C11	Get together w/family & friends	Provider	-	Met
C12	Intimacy	Provider	-	Met
C13	Skills to maximize independence	Provider	-	Met
C14	Choices in routines & schedules	Provider	-	Met
C15	Personalize living space	Provider	-	Met
C16	Explore interests	Provider	-	Met
C17	Community activities	Provider	-	Met
C18	Purchase personal belongings	Provider	-	Met
C19	Knowledgeable decisions	Provider	-	Met
C46	Use of generic resources	Provider	-	Met
C47	Transportation to/ from community	Provider	-	Met
C48	Neighborhood connections	Provider	-	Met
C49	Physical setting is consistent	Provider	-	Met
C51	Ongoing satisfaction with services/ supports	Provider	-	Met
C52	Leisure activities and free-time choices /control	Provider	-	Met
C53	Food/ dining choices	Provider	-	Met