MASSACHUSETTS
Department of
Early Education and Care

November EEC Board Meeting

November 12, 2025

Agenda

Routine Business

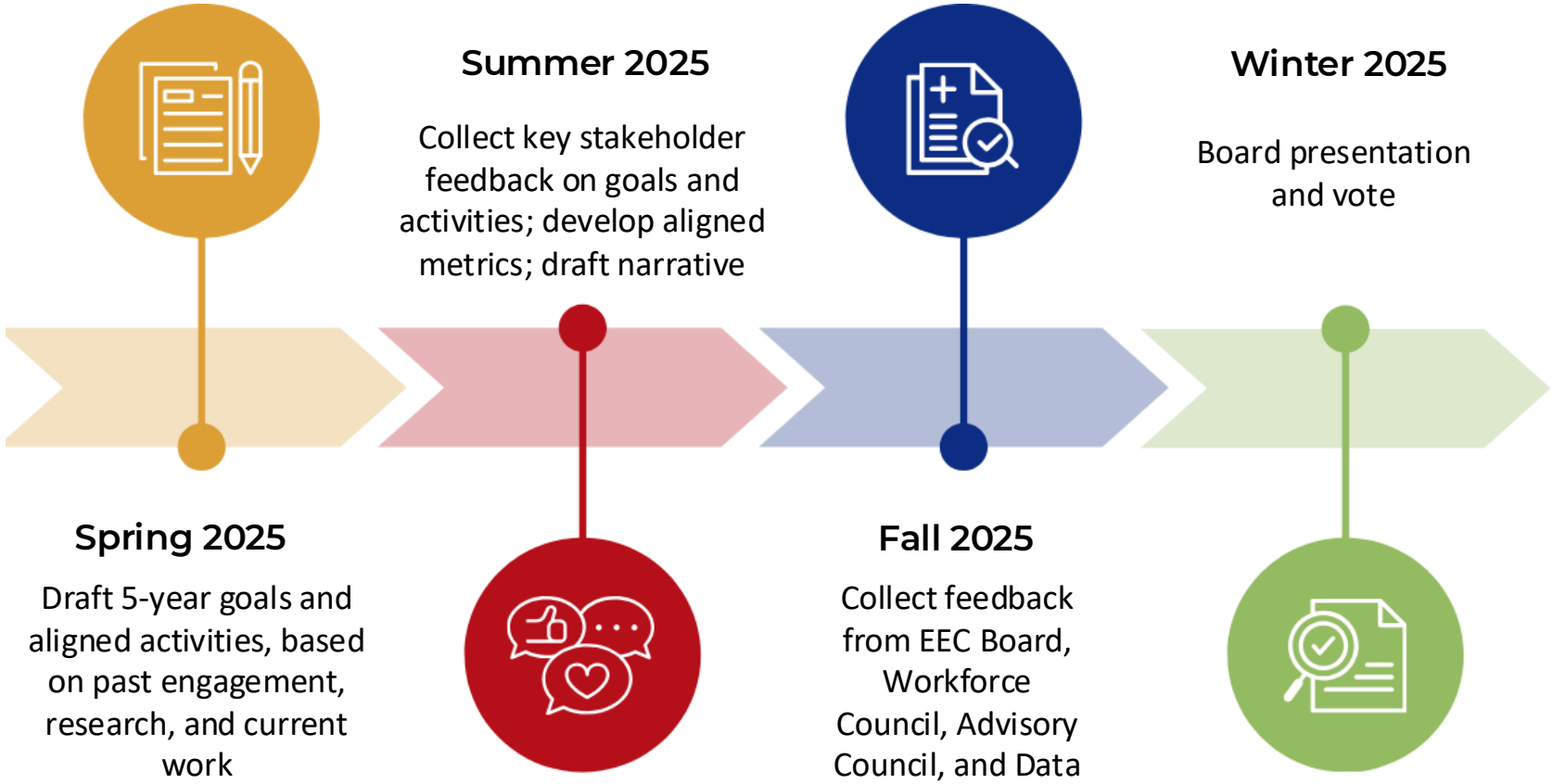
- Approval of revised minutes from the August 13, 2025 Meeting – VOTE
- Approval of minutes from October 15, 2025 Meeting – VOTE

Items for Discussion and Action

- 2026-2030 Draft Strategic Action Plan for Review
- Standards for the Licensure of Residential Programs, Regulation Revisions
- Family Access: Child Care Financial Assistance
  - Caseload Trends: Overview, Dynamics, and Factors
  - Program Updates

2026-2030 Draft Strategic Action Plan for Review

Strategic Action Plan Timeline



2026-30 Foundations: Strategic Objectives



FAMILY ACCESS

Families have equitable access to quality and affordable early education and care in the communities in which they live, learn, and work.



WORKFORCE SUPPORTS

A diverse field of educators, leaders, and program staff is competitively compensated and supported by clear professional pathways that promote quality, retention, and advancement.



PROGRAM QUALITY

Programs licensed or funded by EEC support children's health and safety and provide high quality environments that are culturally responsive, inclusive, and support children's learning and development in partnership with families.



PROGRAM STABILITY

Programs licensed or funded by EEC are operationally stable and financially sustainable.



AGENCY INFRASTRUCTURE

EEC has sufficient internal capacity, organizational structures, and diverse perspectives and expertise to carry out its mission and strategic objectives.

Engagement

2026-30 FOUNDATIONS

The agency has engaged with many stakeholders over the last few years and will use their input to inform our next Strategic Action Plan.

Inter-Agency Early Education and Child Care Task Force listening sessions

In the summer of 2024, the Task Force hosted 14 listening sessions across the state and virtually.



Regular stakeholder engagement opportunities

The agency regularly engages stakeholders through listening sessions, working groups, focus groups, and the 9:30 call.

Advisory, Workforce, and Data Advisory Councils/Commissions

On a quarterly basis, we meet with our council members to gather input on agency initiatives.

Regulation Revision Engagements

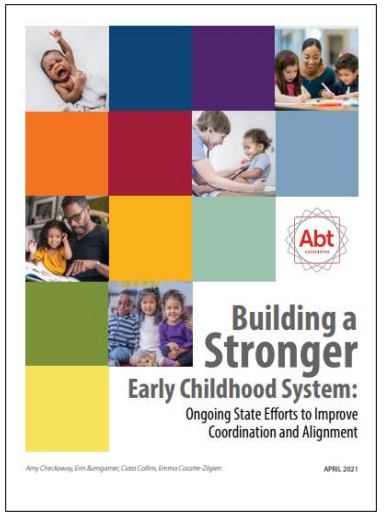
It is required by statue to host public comment opportunities whenever the agency revises regulations.

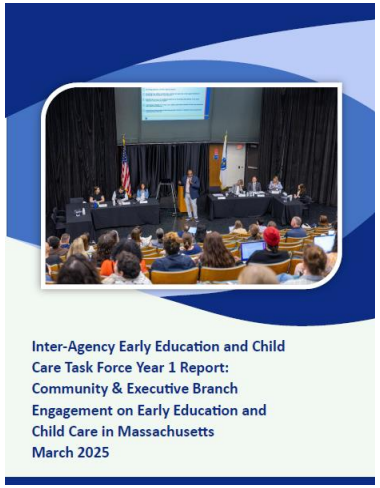
External Research Examples

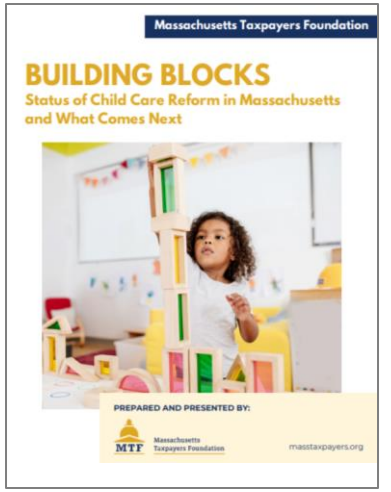
2026-30 FOUNDATIONS

- Building a Stronger Early Childhood System: Ongoing State Efforts to Improve Coordination and Alignment, Abt Associates, 2021
- MA Special Legislative Early Education and Care Economic Review Commission, 2022
- An Economic Analysis of the Childcare and Early Education Market in MA, Rappaport Institute for Greater Boston, 2024
- Building Blocks: Status of Child Care Reform in Massachusetts and What Comes Next, Massachusetts Taxpayers Foundation, 2024
- Inter-Agency Early Education and Child Care Task Force Year 1 Report, 2025





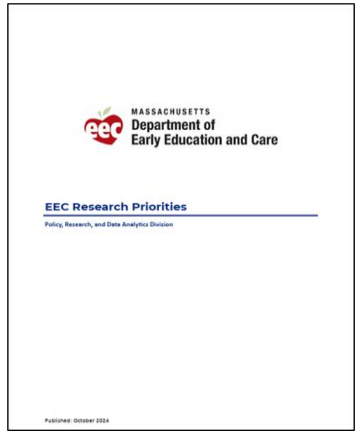


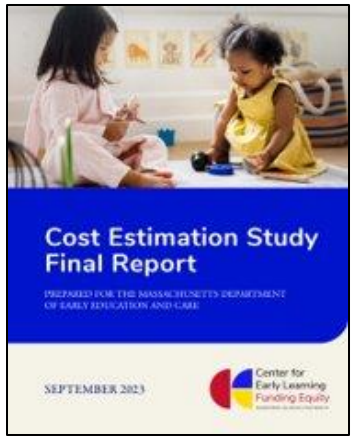


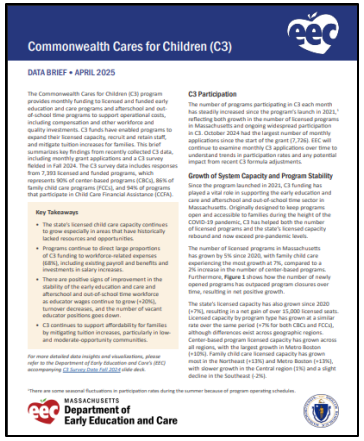
Research and Data Infrastructure

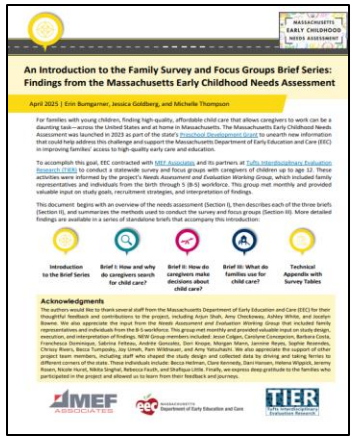
2026-30 FOUNDATIONS

Research Priorities and Projects

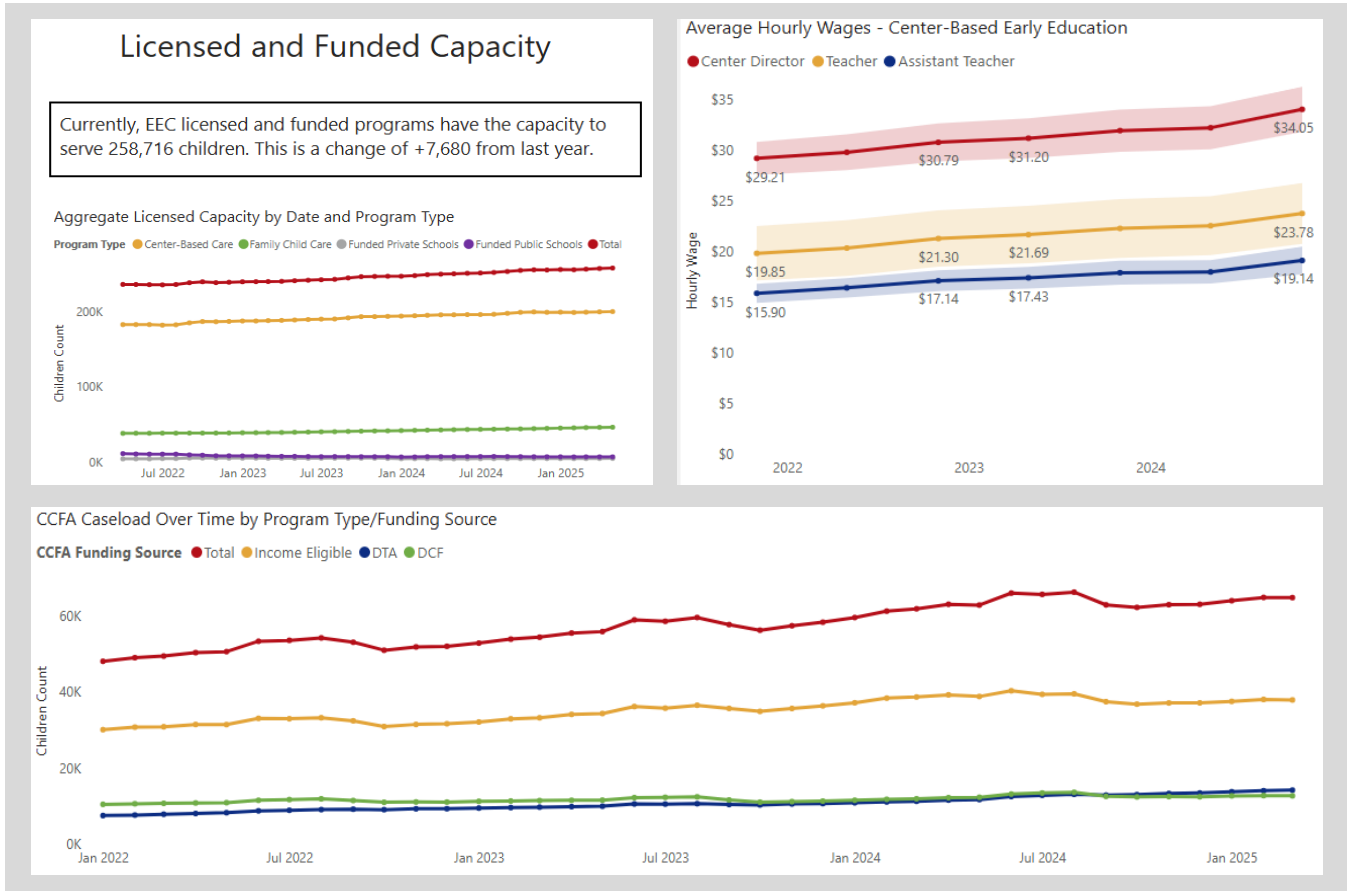








KPI Dashboard

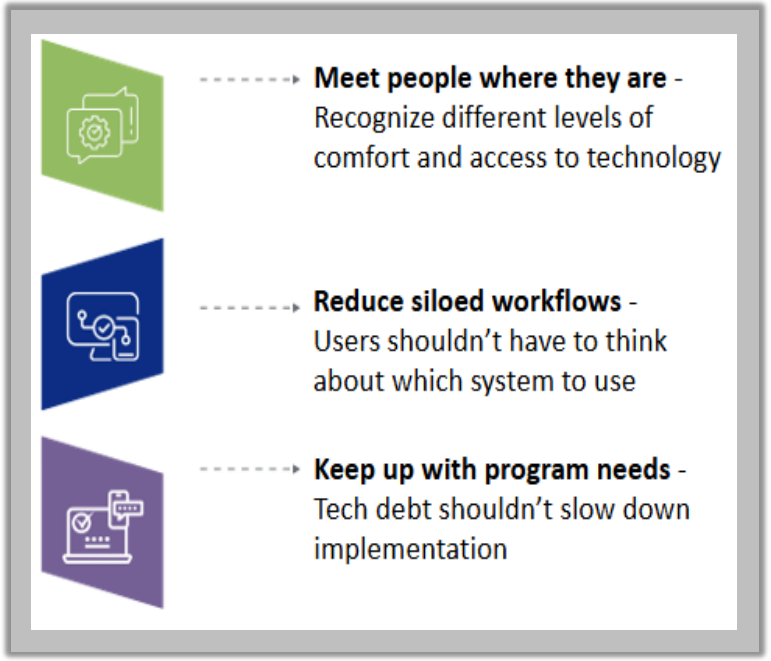


IT Modernization

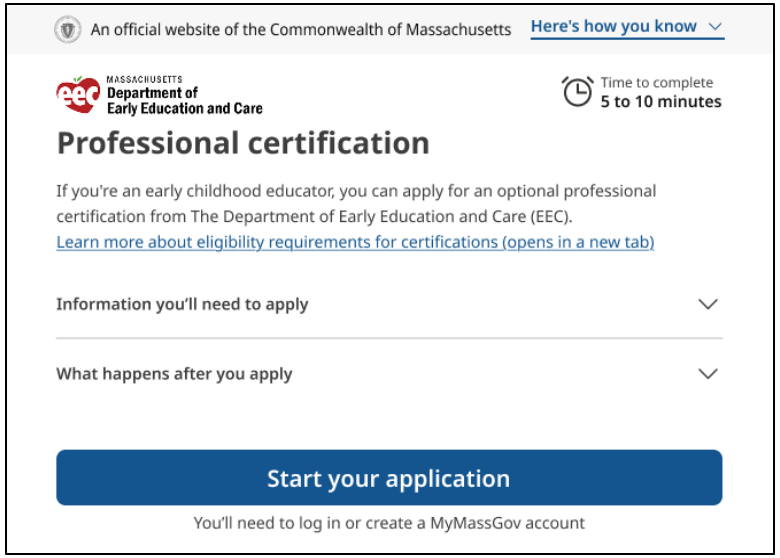
2026-30 FOUNDATIONS

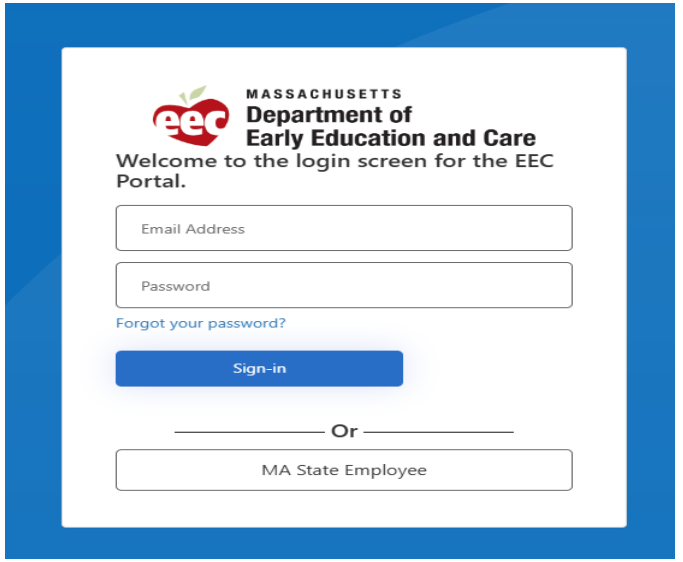
- Child Care Financial Assistance Family Portal
- Background Record Check Navigator Improvements
- Educator Portal
- Learning Management System (LMS)

Goals



Examples





Family Access Goals

1. EEC systems are positioned to maximize the use of available funding to make early education and care more affordable for more families.
2. Families will have a greater variety of early education and care options available in their communities that offer a wide range of services.
3. Families will be able to access information about early education and care programs and community resources, so they can find and enroll in the care they need.
4. Families who need assistance paying for early education and child care will have centralized access to the information they need to learn about and easily apply for financial assistance.

Program Stability Goals

1. Program directors and administrators will have access to trainings and resources that empower them to succeed as small businesses, supporting their effective management of operations and business administration.

2. Programs will have access to predictable funding opportunities that help support priority investment areas, including infrastructure and staffing.

3. EEC will further analyze how current funding streams work together to support program operations and identify gaps to inform future funding opportunities.

Program Quality Goals

1. Programs will have sufficient time and support to meet updated state standards for safety, responsive and appropriate practice, and partnerships with families.

2. Educators, direct care workers, program leadership, and FCC system staff will have access to and participate in training and technical assistance to support ongoing skill development.

3. Program leadership and FCC system staff will be supported in planning and organizing program- level professional learning and apply on-the-job supports towards ongoing continuous quality improvement.

4. EEC will manage funding strategically to support program investments in areas that drive quality, such as total compensation, professional development, curriculum, and comprehensive services.

Workforce Support Goals

1. Educators, direct care staff, and providers will have a transparent, efficient, and predictable background check experience.

2. Educators of all levels will have access to multiple defined pathways to enter the field, advance in their careers, and demonstrate qualifications for increased compensation that reflect what programs seek.

3. Educators, direct care staff, and providers will have convenient, centralized access to the information and support they need to develop their skills and advance professionally.

Agency Infrastructure Goals

1. EEC staff will thrive as members of an inclusive EEC community, and have access to resources, information, and professional development opportunities to help them succeed in their roles, advance in their careers, and incorporate inclusion and equity in their work.

2. EEC will use evidence and data to inform ongoing decision making and examine the effectiveness of its programs, policies, and investments.

3. Providers, advocates, researchers, legislators, and families will be able to engage with data and research that helps them understand EEC's work and the early education field.

4. Programs, educators, and families will have meaningful opportunities to engage with EEC and share their ideas, to better center their voices in EEC's services, policies, and initiatives.

5. EEC will have updated technology systems that improve the user experience for both internal and external users, reduce administrative burden, and improve the agency's access to quality data.

Approval Process & Next Steps

- November 12, 2025: Board review and discussion
- December 10, 2025: Proposed Board vote to approve and adopt
- January 1, 2026: Effective Date
- Once adopted, the Strategic Action Plan will be EEC's blueprint for moving key initiatives and priorities forward over the next five years
- EEC will continually assess the strategies and projects included in the Strategic Action Plan to ensure ongoing relevance and progress towards the Strategic Objectives
- EEC will revisit the Strategic Action Plan with the Board, at least annually, at the Strategic Planning Retreat

Standards for the Licensure of Residential Programs, Regulation Revisions

Overview of Residential Programs

EEC licenses residential care programs, foster care placement agencies, and adoption agencies operating in Massachusetts. These programs provide services to thousands of children, young adults, and families.

Residential Programs

- Serve children up to age 18 (or 22, for certain children living with disabilities).
- Many of the children residing at these programs have complex behavioral health and or social-emotional needs or are otherwise in need of additional complex support.
- Provide care and housing for children in a group care setting outside of their family home.
- Operate under regulations and contracts from multiple state agencies beyond EEC.



Group Care Programs

- Serve children in a residential setting for more than 45 days
- Include multiple types of care
- 311 currently licensed programs
- Licensed Capacity – 5,286



Temporary Shelter Programs

- Provide residential care and services to children under 18 for less than 45 days
- Provide specialized care, including clinical services and community-based acute treatment (CBAT)
- 23 currently licensed programs
- Licensed Capacity – 345

State Agency Involvement

EEC provides regulatory oversight and has licensing responsibility for residential programs and placement agencies. Other state agencies and external partners have different, and sometimes overlapping, roles in these systems.

Department of Elementary and Secondary Education (DESE)

Department of Public Health (DPH)

Department of Children and Families (DCF)

Department of Developmental Services (DDS)

Department of Youth Services (DYS)

Department of Mental Health (DMH)

Office of the Child Advocate (OCA)

Disabled Persons Protection Commission (DPPC)

Primary Goals of Revision

606 CMR 3.00 govern EEC's oversight and licensing of residential programs. These regulations have not seen a comprehensive revision since **1995**.

- There have been targeted revisions since that time, most recently in **2015,** regarding the use of prone, mechanical, and chemical restraints in the residential programs EEC licenses.

Goals of Revision



Center the experience of the **children and families** that are served by these programs.



Streamline to ensure better **efficiency** and less duplication.



Minimize financial impact and added costs on programs.



Foster the **development** of a **stable, skilled workforce.**



Eliminate provisions, practices, and language that are **outdated** or no longer applicable.



Utilize **research and evidence-based best practices** to **inform** revisions and recommended policy changes.



Enhance compliance, accountability, & transparency.

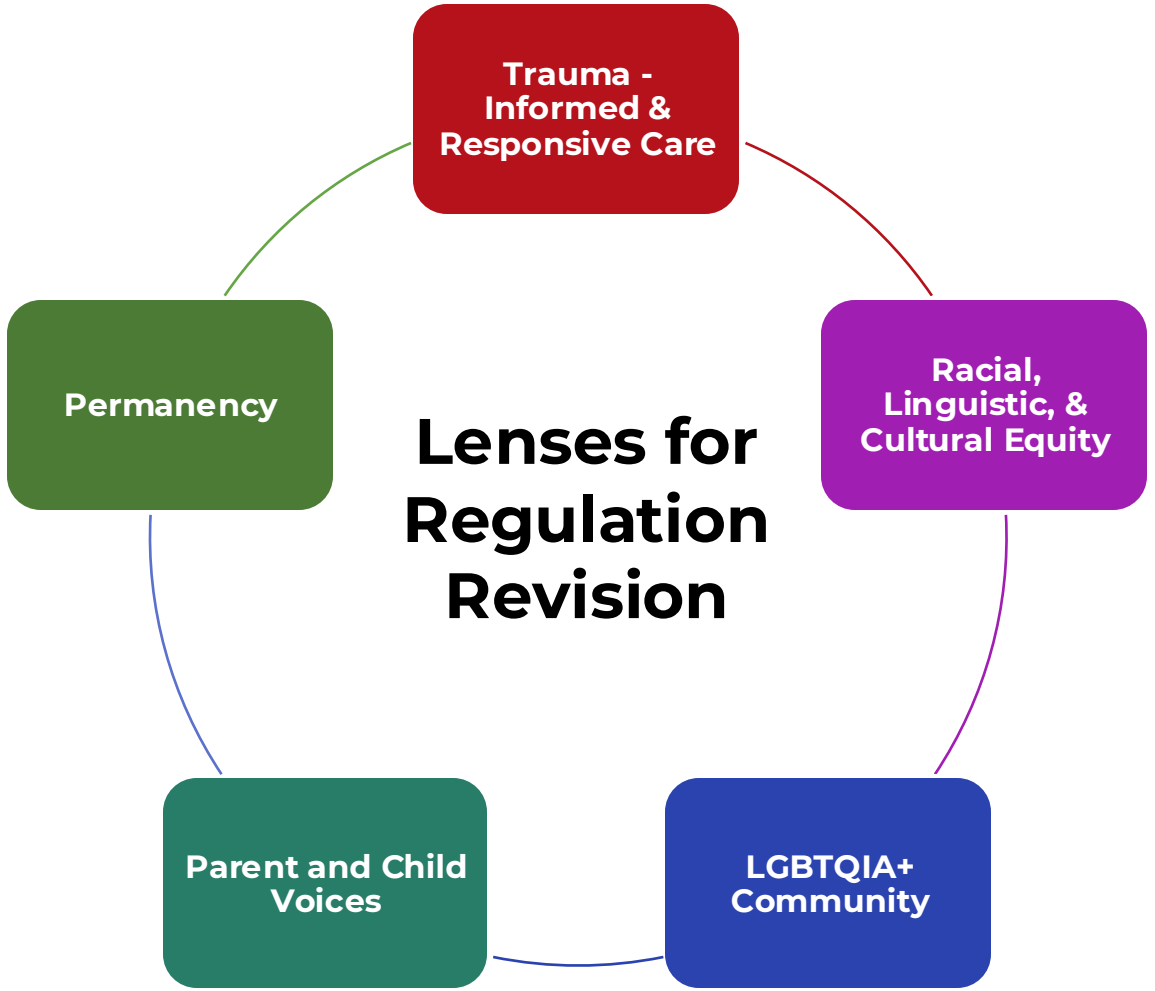


Promote inclusive, dignified **language & practices** that **reflect the needs** of the population served and **improve outcomes.**

Perspectives Framing Revisions & Engagement Goals

Engagement Goals

- Ensure feasibility of practical application
- Enhance compliance through clarity
- Limit/eliminate potential for unintended consequences
- Streamline across agencies for efficiency and improved child/family/staff experience
- Build relationships and promote further and ongoing collaboration
- Identify and problem solve potential barriers to implementation
- Identify and address gaps in current document
- Incorporate the voices of persons with lived experience



Engagement Informing the Work

Throughout the revision process, EEC has worked to meaningfully engage those that will be impacted by revisions to 606 CMR 3.00, hear their voices, and incorporate their viewpoints and experiences.



Internal surveys and collaborative meetings with the EEC Residential & Placement Licensing & Investigations Teams



Provider Surveys to learn from residential programs and understand current practice



Targeted Workgroups with Providers to dive deeper on key issues like use of cameras, transparency/ public posting, and behavior supports



Collaborative discussions with sister agencies to promote alignment and understanding of changes



Visits to Programs to learn more about individual program structures and the unique populations they serve



Targeted discussions with both trade and advocacy groups to learn about key areas of focus and promote collaboration

Thank You to Our Partners!

Residential Working Group

met with our team throughout the summer and fall to deep dive on key areas of reform

- Melmark
- Evergreen
- Guild
- St. Ann's
- St. Vincent's
- Key
- Baystate
- Chamberlain
- Centerboard
- Italian Home
- Wayside
- Gandara
- Judge Rotenberg Educational Center (JRC)
- North American Family Institute (NFI)
- Justice Resource Institute (JRI)
- Association for Behavioral Healthcare
- New England Center for Children (NECC)
- Old Colony YMCA
- Children's League of MA
- The Massachusetts Association of Approved Special Education Schools (MAAPS)
- Disability Law Center

State Agency Partners

detailed review of draft revisions providing feedback to enhance alignment and best practice

- **Executive Office of Education**
  - Department of Elementary & Secondary Education
- **Executive Office of Health & Human Services**
  - Department of Youth Services
  - Department of Children & Families
  - Department of Public Health
  - Department of Mental Health
- **Office of the Child Advocate**
- **Disabled Persons Protection Commission**

Key Areas of Focus

- Update “Behavior support” section
- Revise abuse/neglect requirement to include DPPC
- Clarify minimum initial and ongoing training requirements
- Outline rules for the use of surveillance cameras
- Public Posting & Transparency
- Updates to language throughout the document
- Include requirements for: LGBTQIA+, enhanced family engagement, trauma informed and responsive care
- Include Continuous Quality Improvement (CQI) and Accountability

Three Areas of Reform

RESIDENTIAL REGULATIONS



Modernize language, promote inclusivity, and enhance alignment with sister agencies



Incorporate a trauma-informed and responsive lens, permanency, and best practices to better support children and staff



Enhance clarity to promote compliance, transparency, and accountability

Modernize language, promote inclusivity, and enhance alignment with sister agencies



- The term “Resident” is retired and now replaced with “child” throughout
- "Teen parent" is now "young parent"
- Document-wide language updates include the use of gender-neutral pronouns, deletion of outdated terms, and the use of more positive, dignified language
- Added non-discrimination language which also aligns with DESE
- Definitions list now includes: permanency, age-appropriate, developmentally appropriate, culturally responsive, applicant, Chief Administrative Officer, Licensee, and Trauma-Informed Care; with updates made to many others
- Behavior support language now reflects strength based practices
- Address practice of seclusion aligning with DESE

Incorporate a trauma-informed & responsive care lens, permanency, and best practices to better support children and staff

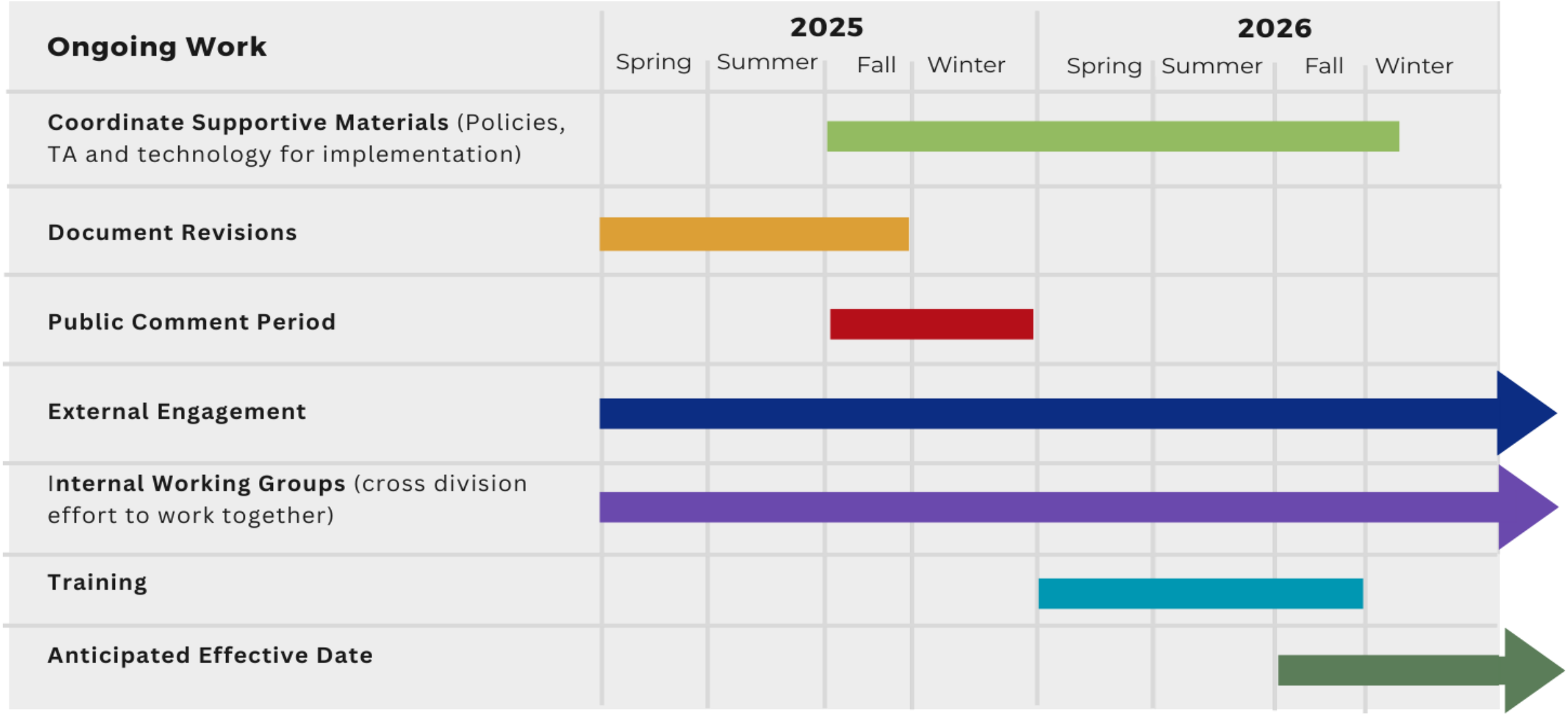


- Includes considerations for gender identity, LGBTQIA+, active and/or past history of trauma
- Professional development requirements now include training on trauma-informed care, working with LGBTQIA+ populations, sexual abuse and grooming, cultural responsiveness, and missing/absent children
- Treatment plans now must be developed based on a comprehensive assessment that considers permanency planning, past and active history of trauma, cultural/ religious considerations, LGBTQIA+ status, and behavior support history
- Includes updated requirements to share consents and other documents in preferred language, to consider linguistic equity

Enhance clarity to promote compliance, transparency, and accountability

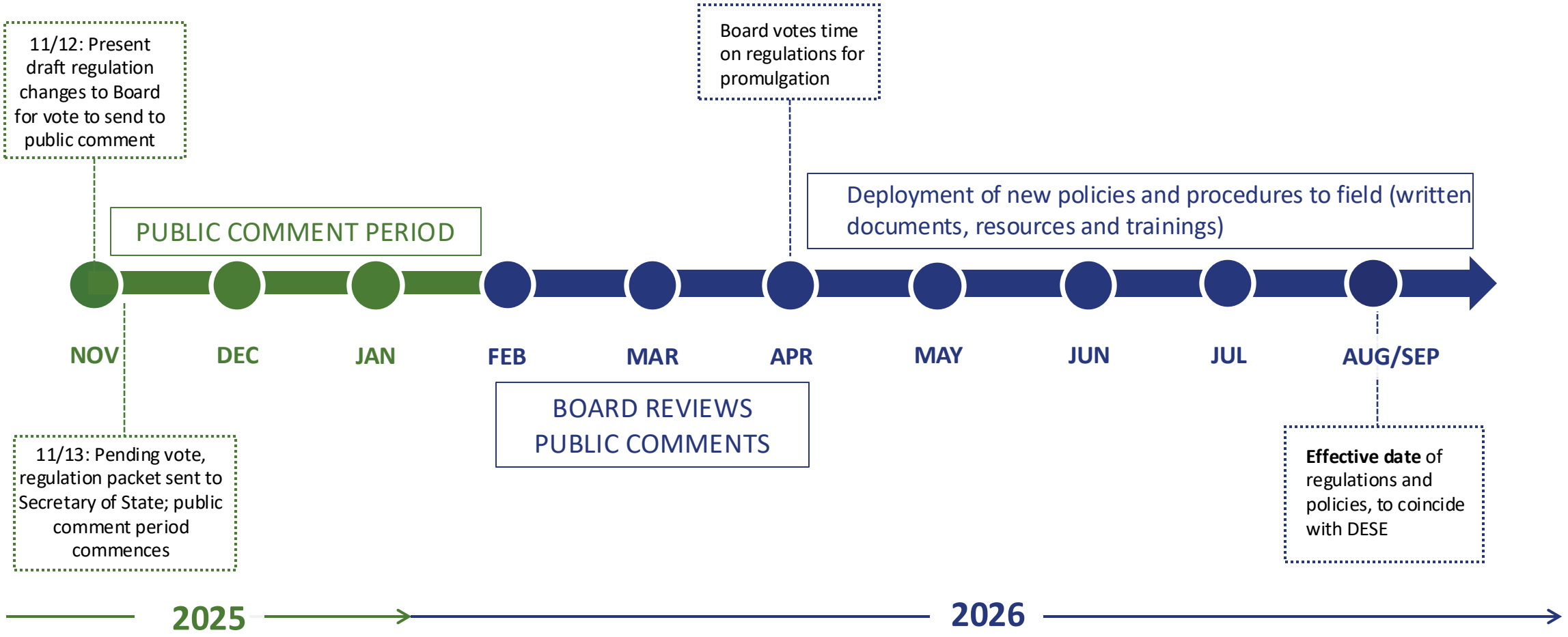
- Includes new language clarifying background record check (BRC) requirements
- Includes provider board experience requirements specific to the populations served, and requires minutes be maintained for at least four years
- Requires providers to share additional data with their boards (e.g. licensing reviews, investigations, etc.)
- Includes enhanced document retention requirements, including the portability of children's records, storage methods, confidentiality, and length of record retention
- Requires programs to submit training curriculum to EEC for review (including Orientation and program-specific ongoing training)
- Includes policies and procedures related to the use of surveillance cameras. EEC can require cameras, at our discretion.
- Requires expanded notifications for immediate notice of media/adverse events
- Expanded requirements for shift-to-shift communication among staff and administration (communication log) to have consistent expectations across programs
- Requires programs to create a physical plant maintenance plan, and regularly update and share with EEC

Upcoming Project Milestones



Draft For Policy Discussion Only

Path to Effective Date



Standards for the Licensure of Residential Programs Serving Children and Young Parents – Proposal to Send Regulation Revisions to Public Comment - VOTE

EEC seeks approval of the draft amended Residential Program Regulations, 606 CMR 3.00, and to authorize the Commissioner to file the amended regulations with the Secretary of the Commonwealth for publication and public comment, subject to approval of the final regulations, by the Board.

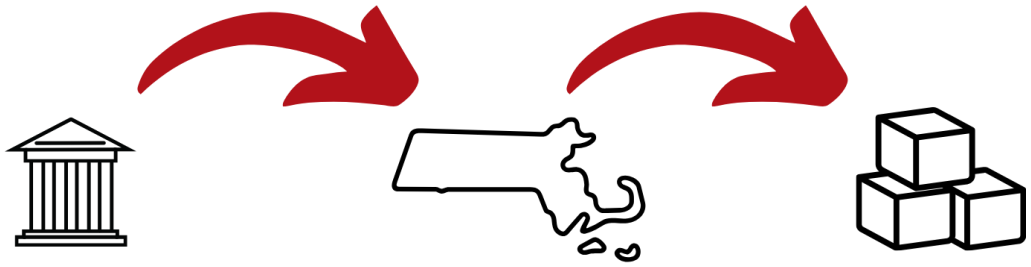
MOVED: that the Board of Early Education and Care, in accordance with G.L. c. 15D, § 3, hereby approves the draft amended regulations governing Residential Programs and authorizes the Commissioner of Early Education and Care to file the amended regulations with the Secretary of the Commonwealth for publication of a Notice of Public Comment in the Massachusetts Register consistent with the Department's proposed policy directions and subject to the approval of the final regulations, after a Public Comment period, by the Board.

Family Access: Child Care Financial Assistance

Child Care Financial Assistance (CCFA) Overview

Child Care and Development Fund (CCDF) BACKGROUND

The Child Care and Development Fund (CCDF) is a joint federal and state program authorized under the Child Care and Development Block Grant Act (CCDBG) which provides federal funding for child care subsidies to help eligible low-income families access child care and improve the quality of child care for all children. The state's Child Care Financial Assistance (CCFA) programs are funded by these resources and across multiple EEC accounts.



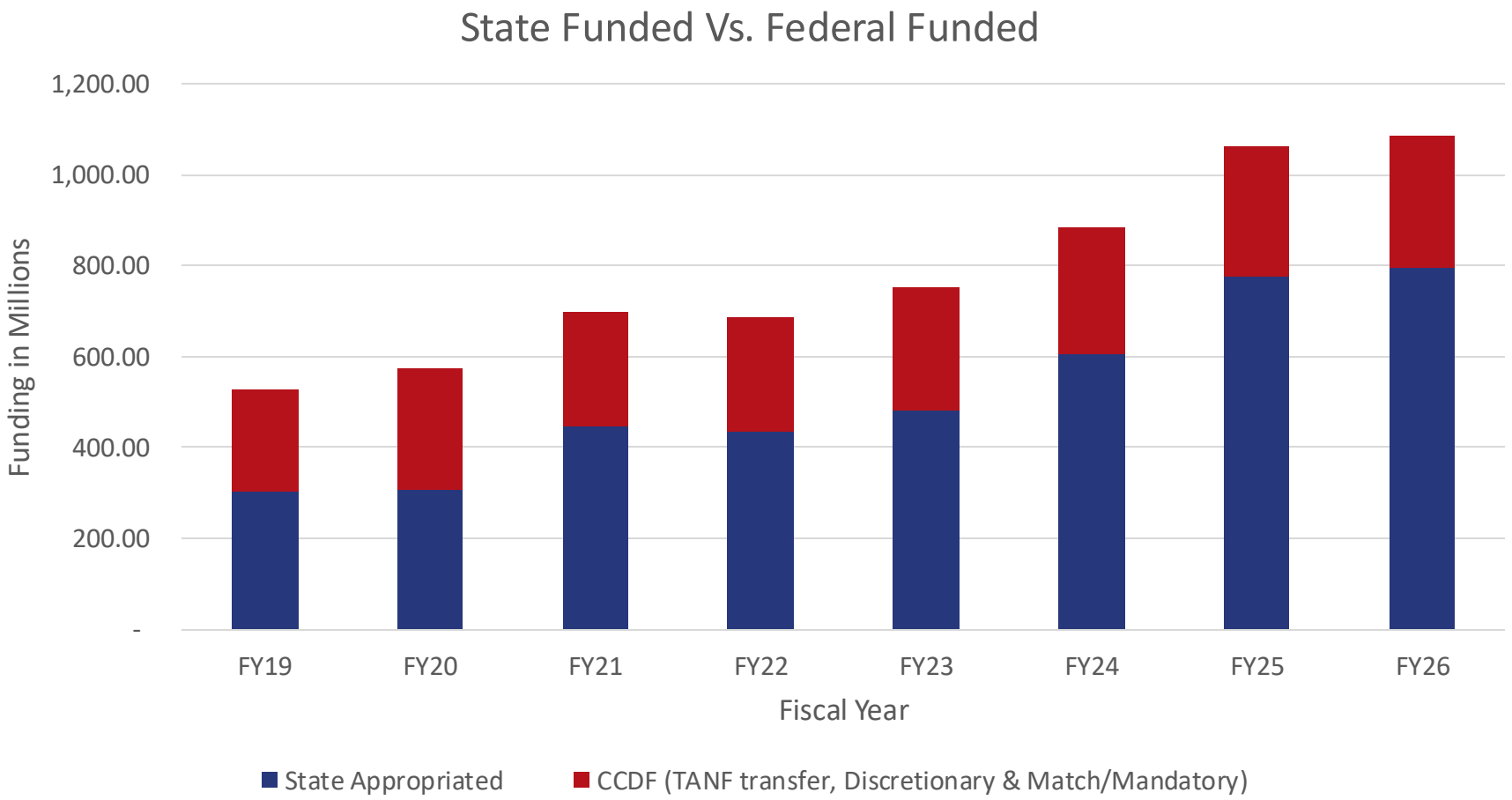
Approximately 50% of EEC's total budget in FY25 was either direct federal funding or tied indirectly to federal funding through either the CCDF or TANF block grants.

EEC administers three child care financial assistance programs accessible to families in the form of vouchers or contracted seats:

- Income Eligible (Line item 3000-4060)
- Department of Children and Family (DCF) Related (Line item 3000-3060)
- Department of Transitional Assistance (DTA) Related (Line item 3000-3060)

Federal and state resources interact to support CCFA

- CCFA is funded with appropriated state dollars through the annual state budget.
- EEC pays CCFA expenses directly from these funds.
- EEC then claims federal funding to reimburse the state for a portion of such spending.



Child Care Financial Assistance (CCFA) Programs

CCFA programs provide financial assistance for low-income families to access early education and care and out-of-school time programs. Some families are required to have a "service need" such as work, job training or education. **This assistance is for families with infants, toddlers, preschoolers, and school-age children (under 13 or up through 16 if the child has a disability).**

CCFA Program	Eligibility	Access point
Income Eligible (includes families experiencing homelessness, ECE Staff, Parents under 24 and children with a disability)	Families with household income at or below 50% SMI, maintaining eligibility up to 85% SMI once enrolled*	Statewide waitlist, subject to available funding
DTA Related	Families with an active DTA economic assistance (TAFDC) case or participating in SNAP Employment & Training Program and up to two years after case closure	Direct referral from DTA for immediate access per line-item language, not subject to waitlist
DCF Related	Families receiving support from DCF and up two years after case closure	Direct referral from DCF for immediate access per line item language, not subject to waitlist

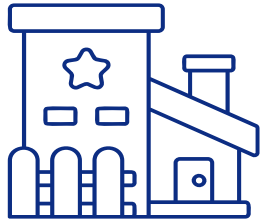
Initial eligibility will increase to 85% of SMI effective January 1, 2026

Forms of CCFA Assistance



Voucher

- These are portable - families can use them at any program that accepts CCFA
- Administered and managed by Child Care Resource and Referral agencies only
  - EEC re-procured CCRR services in 2023
- DTA/DCF receive immediate access to a voucher
- Access is subject to funding availability for income eligible families

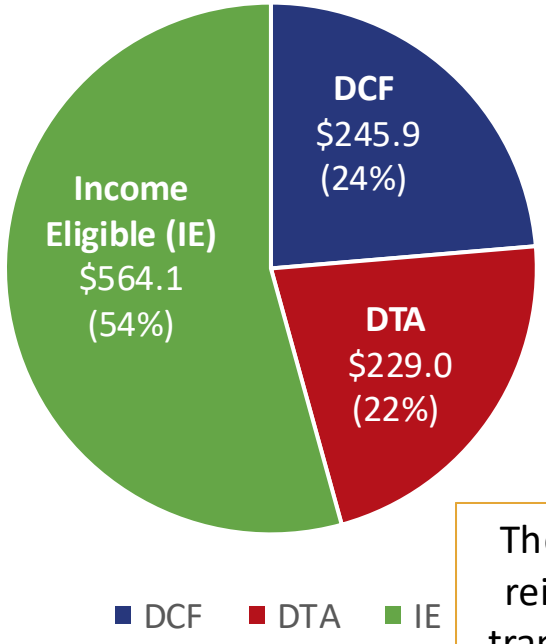


Contracted Seat

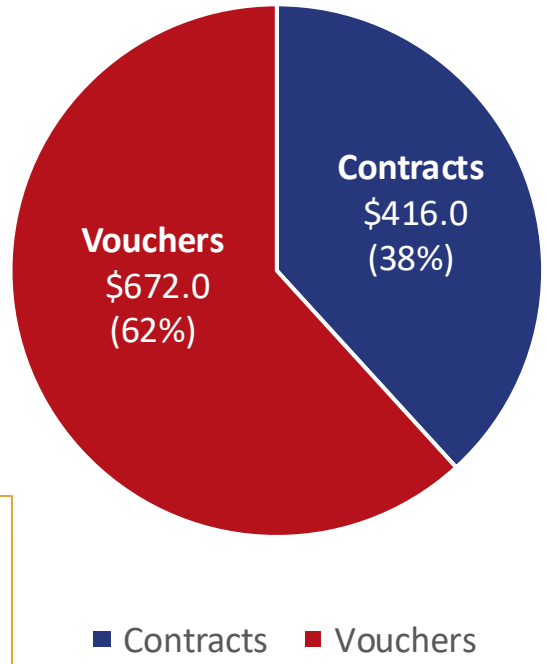
- Direct care contract at a center-based site or family child care system for a specific number of seats
  - These were re-procured in 2024 after 15 years
- Each contracted provider manages their own contracted seats, including CCFA eligibility
- Access subject to available awarded seats for Income Eligible or DCF related Care

CCFA Forms of Assistance and Spending

FY25 Financial Assistance Spending by Program ($$ in Millions)



FY26 CCFA Budget: Vouchers/Contracts ($$ in Millions)



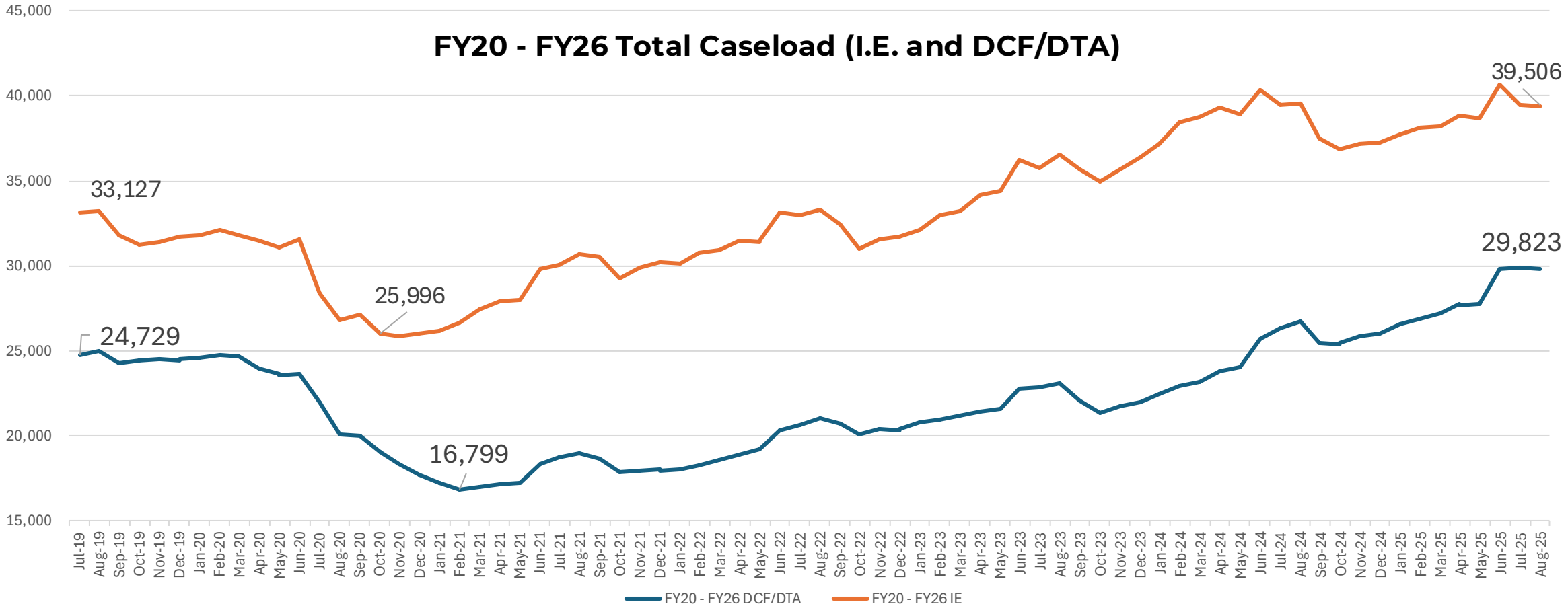
These funds include the per child daily reimbursement rate plus admin costs, transportation, language access, special needs funding, and supportive services.

EEC spends approx. $15,645 annually per child, and more than half of the FY25 total EEC budget was dedicated to financial assistance.

More than 69,000 children receive financial assistance and 69% of all MA providers accept child care financial assistance.

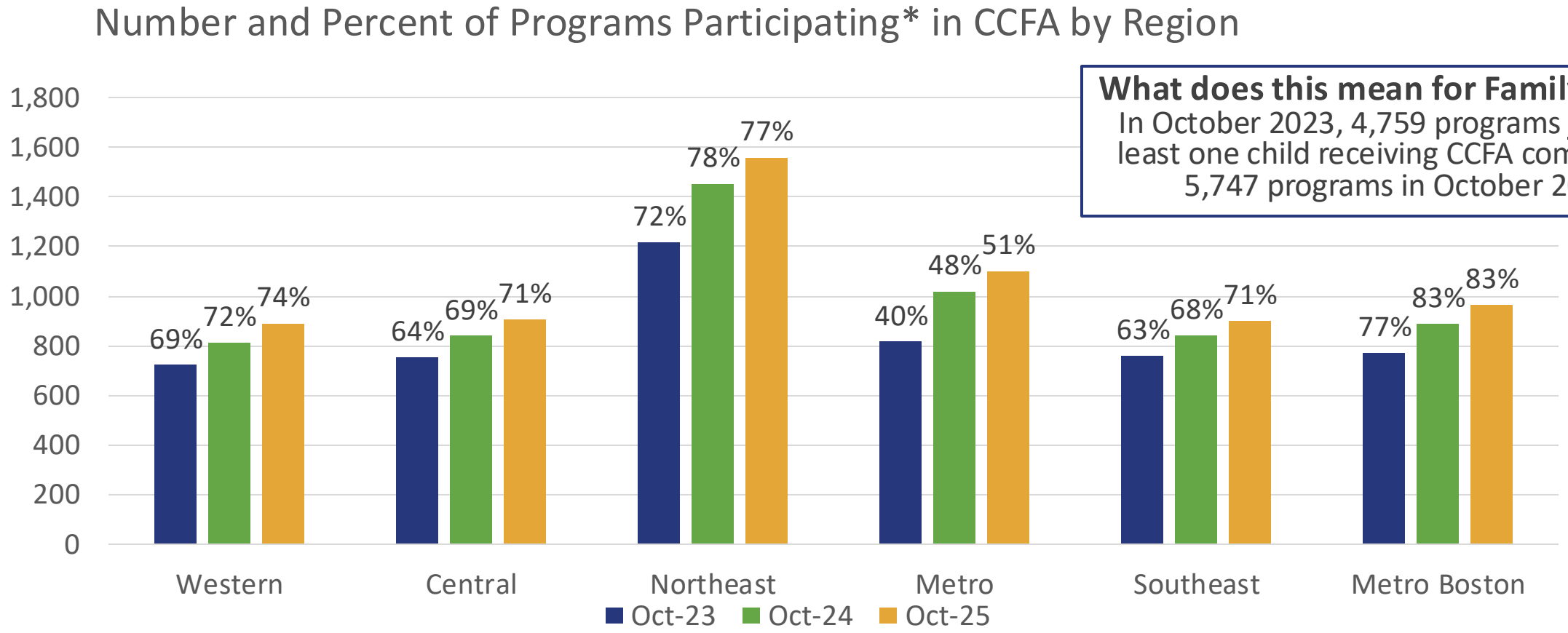
Caseload Trends: Overview, Dynamics, and Factors

The number of children receiving CCFA has steadily increased post-pandemic.



Note: Data here may differ from EEC's KPI dashboard due to children supported by multiple funding sources and/or enrolled inmultiple program types.

Program participation in CCFA has grown by over 1,000 programs since October 2023.

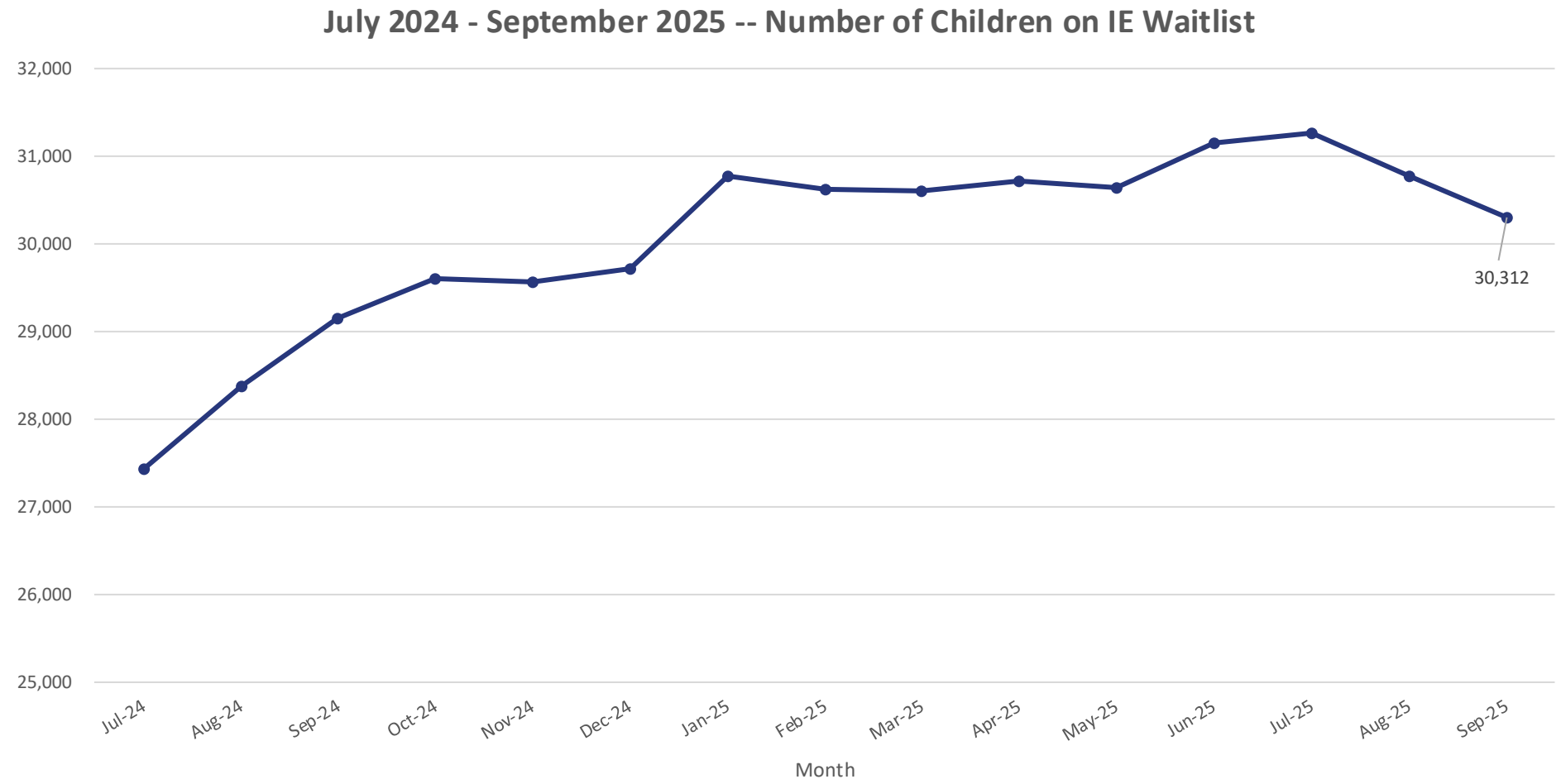


What does this mean for Family Access?
In October 2023, 4,759 programs served at least one child receiving CCFA compared to 5,747 programs in October 2025.

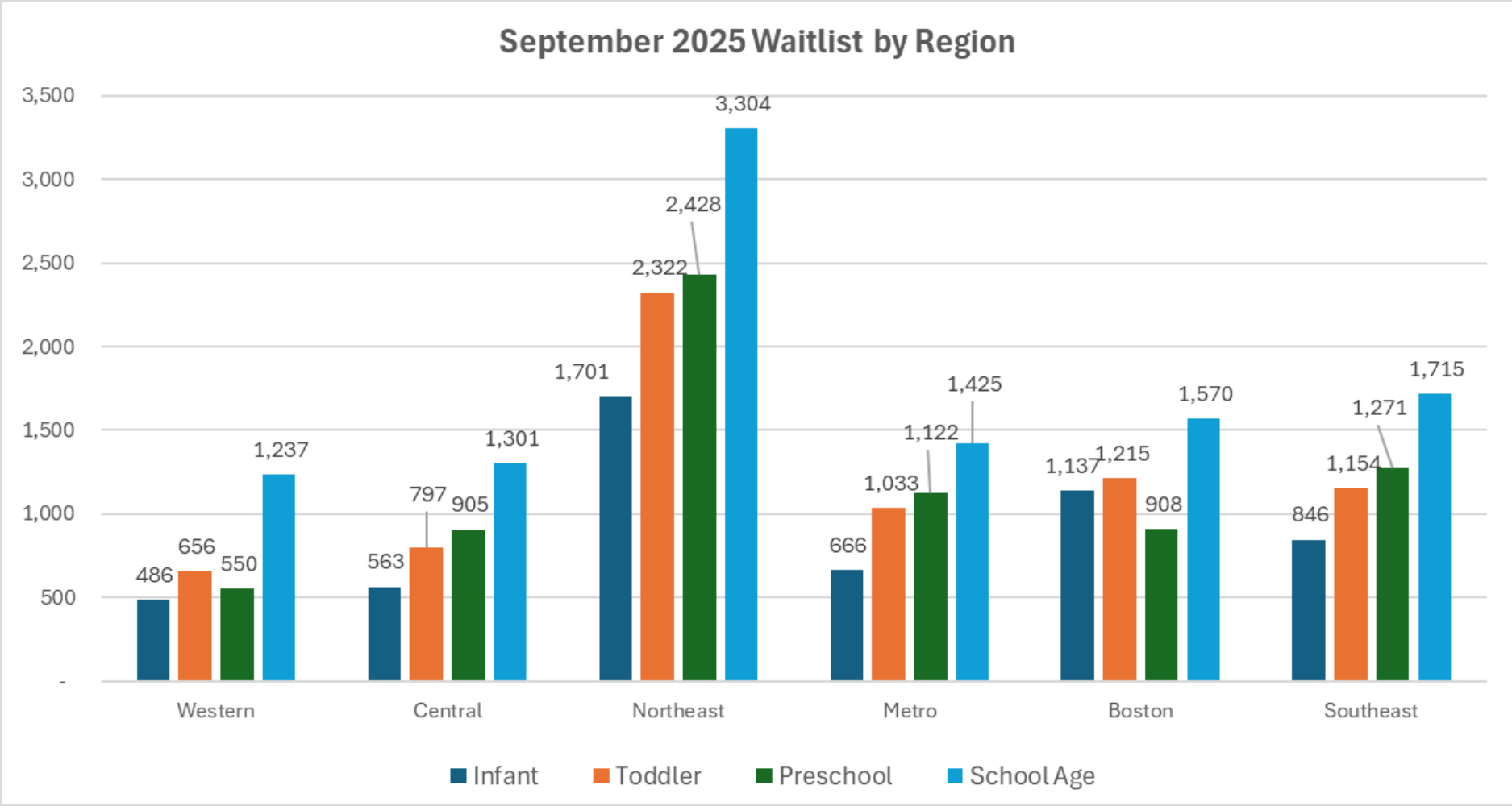
*Participation here defined as having a voucher agreement or contract to serve children with CCFA. The 'Metro' region includes towns/cities surrounding the City of Boston and the 'Metro Boston' region includes the City of Boston and a small number of adjacent communities.

The number of children on the Income Eligible Waitlist has also grown.

Between July 2024 and September 2025



Income Eligible Waitlist by Region and Age of Child in September 2025.



Factors Impacting Caseload Dynamics

Since 2023, policy reforms and investments have made Massachusetts' Child Care Financial Assistance (CCFA) system more family-centered — making it easier for families to access and maintain child care. These family-focused improvements and quality investments have expanded access, strengthened stability, and led to caseload growth that reflects both the success of these reforms and the increased costs tied to higher participation and longer enrollment durations.

Regulatory and Policy Reforms

- **Overall policies are more family-friendly with families entering the system more easily and staying longer**
- **Expanded access** for priority populations of DTA, DCF and homeless families extending time on assistance with minimal or no cost to parent
- **Waiver of income for Homeless families** improving access, although increasing per-family cost to EEC
- Removal of **Child support and SSI** from countable income, broadening eligibility and increasing the number of families served
- **Priority** for staff working in ECE and streamlined service delivery improving timeliness and family experience

DTA/DCF Referral and Access Trends

- **More referrals** from DTA and DCF increasing caseload entries
- Re-enforcement of DTA **work program requirements** driving higher demand
- DCF **simplified referrals** supporting faster placement and longer stability

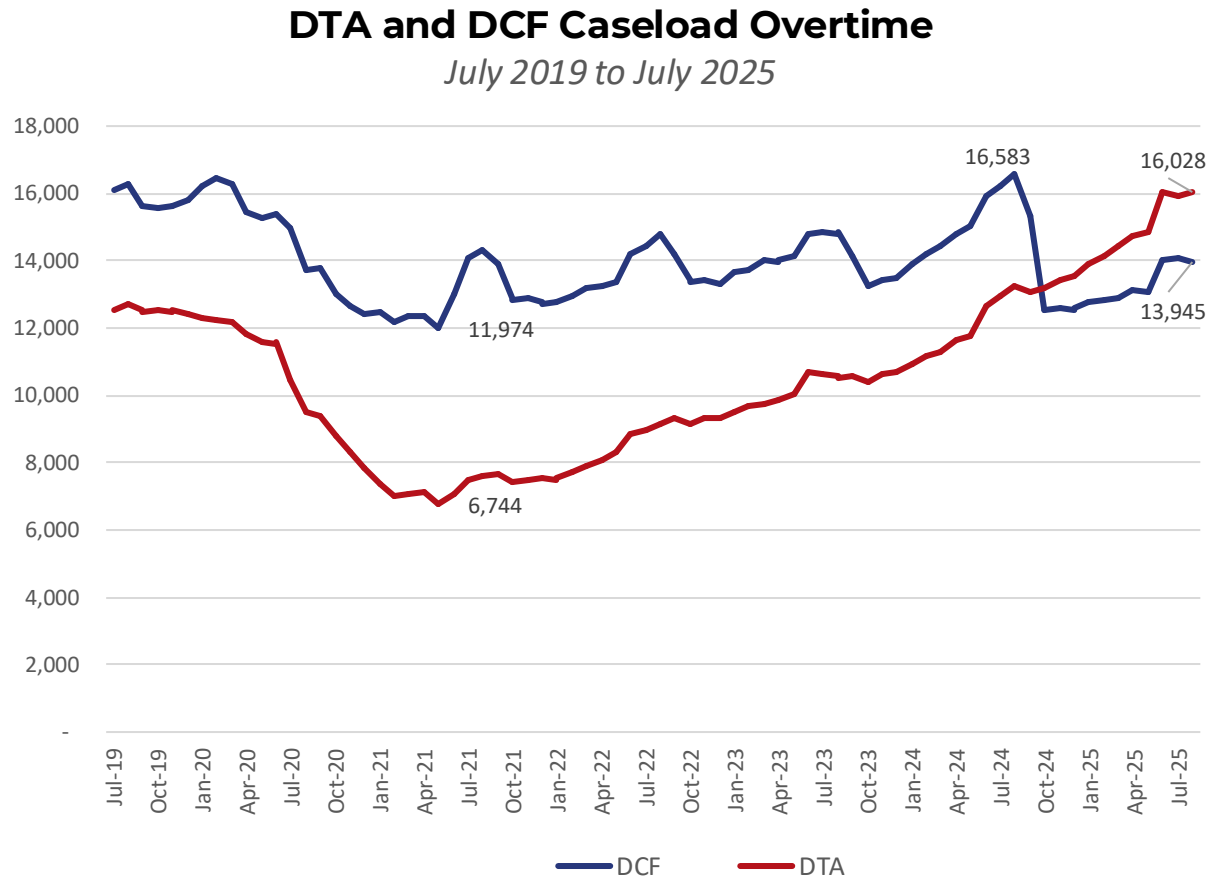
Program and Fiscal Drivers

- **Rate increases** improving provider participation, staff salaries and quality; and raising per-child costs
- **Re-procurement of contracted provider seats** strengthening **supports for families**, including **transportation and wraparound services** for **priority populations**
- **Higher CCFA participation** reflecting increased awareness, trust, and simplified access
- **Seasonal shifts in CCFA utilization** increase caseload costs during the summer months
- Increased **costs for transportation and program administration,** to better reflect actual program expenses

Since the pandemic, the number of DTA and DCF eligible children being served has grown.

- The number of both DTA and DCF children receiving CCFA has increased from lows in May 2021 to July 2025
  - DTA increased by 9,284 (138%)
  - DCF increased by 1,971 (16%)

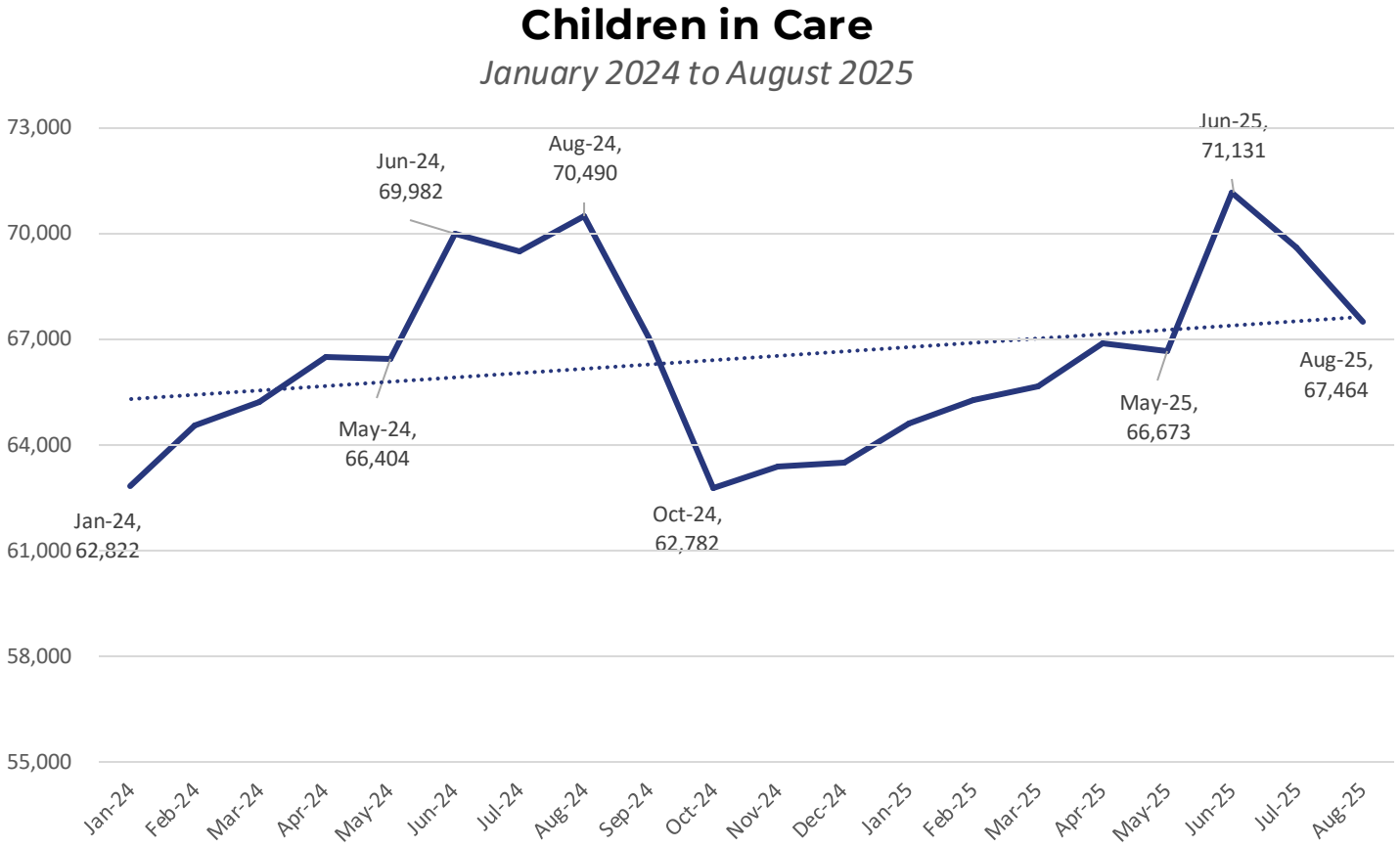
- The drop in DCF children in Fall 2024 is related to post-summer seasonal shifts for CCFA and the transition to newly procured contracts.



Note: Data here may differ from EEC's KPI dashboard due to children supported by multiple funding sources and/or enrolled in multiple program types.

Seasonal shifts in family preferences and needs impact caseload trends throughout the year.

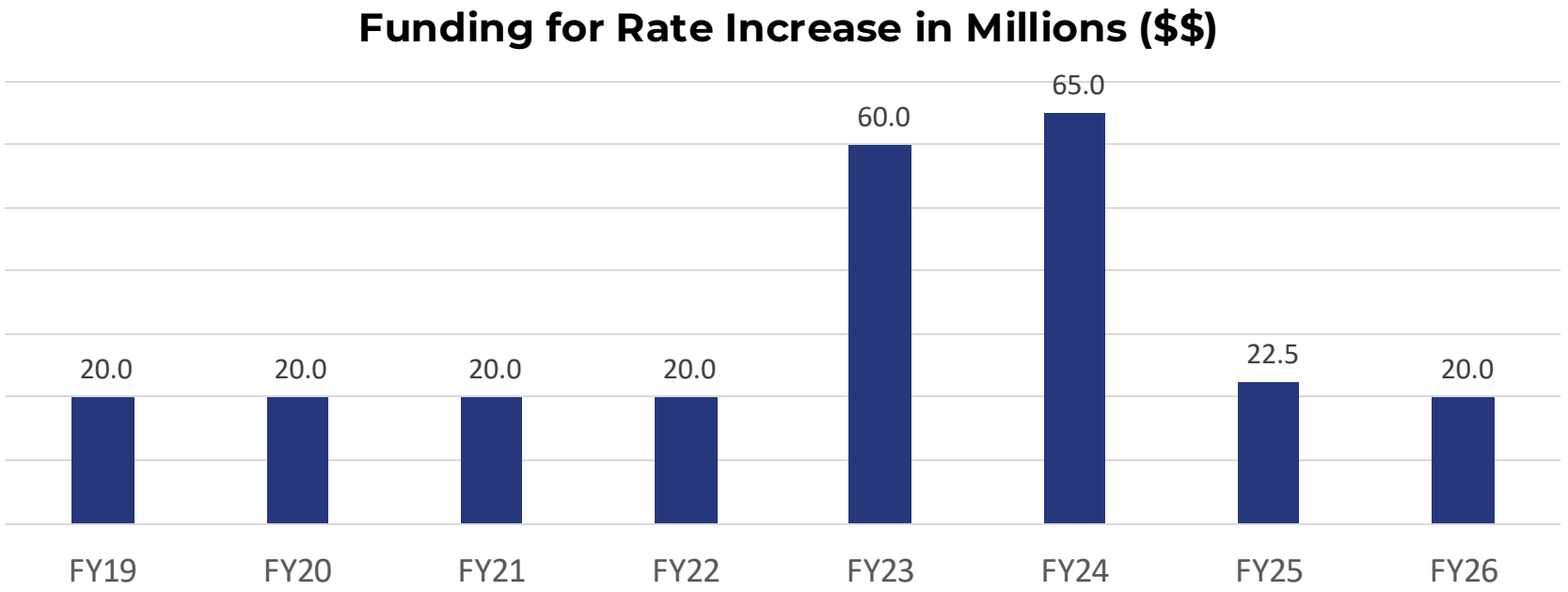
- Increases in caseload numbers and costs in the summer months have to do with factors such as:
  - Some children who may only be in before and after school care during the school year transition to full-day care during the summer.
  - Many school age children who do not receive CCFA during the school year, participate in summer programming at EEC licensed and funded programs.
- Summer serves as an entry point to CCFA for some families.



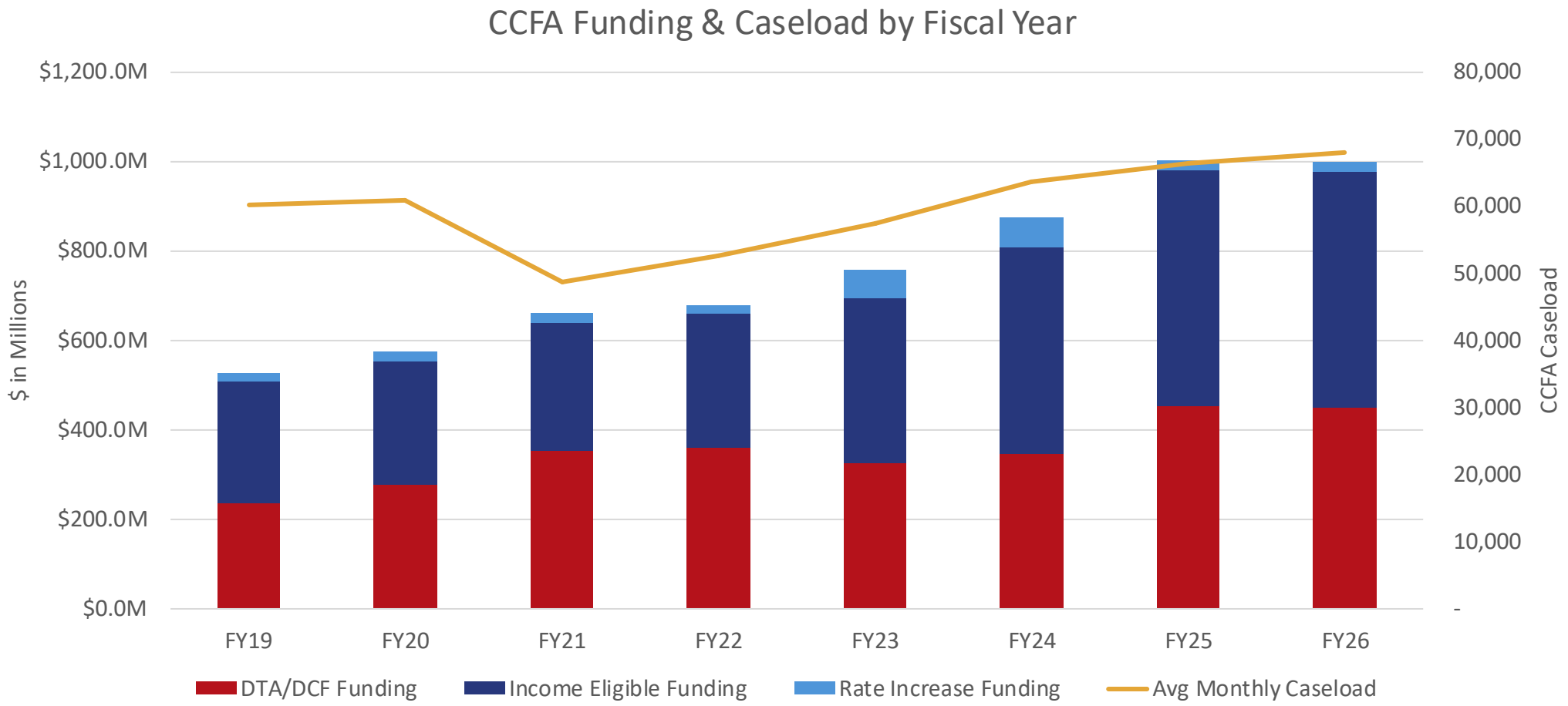
Note: Data here may differ from EEC's KPI dashboard due to children supported by multiple funding sources and/or enrolled in multiple program types.

Consistent and much needed CCFA rate increases and reforms have also contributed to growth in caseload costs.

- In total, **$248 million** has been appropriated to increase reimbursement rates since FY2019.
- The average infant rate has more than doubled, with similar average increases across toddler and preschool rates.
- Higher CCFA reimbursement rates mean additional funds for program operations, which includes salary increases, and expanded options for families.
- Serving the same number of children the year following a rate increase is more expensive.



CCFA Funding and Caseload by Fiscal Year



Data Note: FY26 average caseload figures include the first three months of the fiscal year (July 2025, August 2025, and September 2025).

Program Updates

Strengthening CCFA: Progress and Impact

Massachusetts' Child Care Financial Assistance (CCFA) system is stronger and more connected than ever—serving a record number of families through new investments and updated systems. Supporting nearly 69,000 children statewide, EEC continues to use data-driven insights to maximize resources, maintain stability, and better understand the experiences and needs of children and families served.

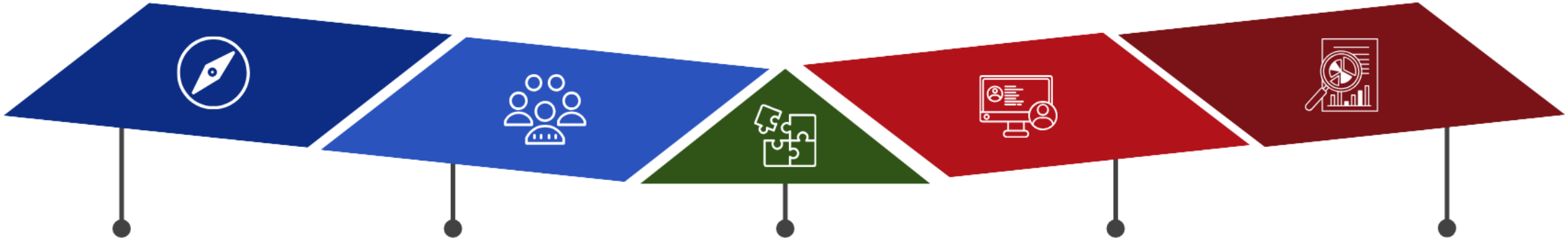
- **Serving more children** and families than ever before through CCFA.
- Families experience stable, continuous care and easier access to financial assistance.
- **Providers supported** through **rate increases** and continued **C3 grant funding** that strengthen program stability and incentive participation in CCFA.
- Communication and language access have improved — materials and policies are now translated into multiple languages.
- **Family and provider voices** are increasingly incorporated into EEC's work through ongoing feedback, advisory groups, and collaborative design efforts.
- **Stronger data and analytic** infrastructure to inform understanding of and improve the experiences of children and families served
- System **modernization underway**: launching a centralized, family-facing portal for CCFA applications and waitlist management to make applying easier and faster.

Strengthening CCFA: Current Status

EEC continues to build on progress while tracking resources and access closely.

- Access to **vouchers** remains open only for families **referred by DTA or DCF** and **siblings of currently enrolled** Income Eligible families.
- Funding priorities focus on:
  - **Maintaining existing enrollments** and projected growth in DTA/DCF programs.
  - Implementing **new contracted seats** from the recent re-procurement.
  - Carrying forward historic **rate increases** to sustain provider stability.
- Ongoing work to **refine caseload strategy** — evaluating how best to manage caseload dollars and projections, including the impact of rate increases and annualization, to ensure sustainability and readiness for future access expansion.
- As access remains limited for new Income Eligible families, EEC is preparing systems and processes now for when additional funding allows expansion

What's Next



Designing and implementing a system that is easier to navigate for families

Launch of Family Advisory Council

Support from Coordinated Family Community Engagement (CFCE) Network

Family Portal to improve ways programs are onboarded

Research and data infrastructure to monitor caseload trends and inform continuous improvement across programs and policy.

Thank you!

View Agency KPI Dashboards (updated monthly) here.

Next Meeting: December 10, 2025 (LEO Inc. - 156 Broad St., Lynn)

Appendix

Section by Section Details for Standards for the Licensure of Residential Programs, Regulation Revisions

Section 3.01: Introduction

SUMMARY OF KEY REGULATORY CHANGES

- Non-discrimination language updated to further align with M.G.L. c. 76, S. 5 (discrimination in public schools); now inclusive of: race, color, sex, gender identity, religion, national origin, immigration or citizenship status, disability or sexual orientation.
- Now identifies permanency planning as a core focus in all appropriate settings.
- Adds workforce development, advancement, and retention as goals of standards set forth in regulations.
- Specifically includes background record check requirement

**These highlights are not inclusive of all changes and updates made to 606 CMR and work to call attention to more substantive changes.*

Section 3.02: Definitions

SUMMARY OF KEY REGULATORY CHANGES

- The terms permanency, age-appropriate, developmentally appropriate, culturally responsive, applicant, Chief Administrative Officer, licensee, Statement of Purpose, Trauma-Informed Care, and Release added to list of definitions.
- "Child" expanded to include children under 22 with disabilities
- "Teen parent" is now "young parent"
- "Consent" broadened: includes parent/guardian; "consent" must be in preferred language
- "Child(ren) with disabilities" replaces "child(ren) with special needs"
- Definitions for mechanical restraint, medication restraint, prone restraint, and seclusion have been clarified
- The responsibilities of the "Restraint Coordinator" have been further clarified and defined; enhances accountability.
- Temporary Shelter, Transition to Independent Living, and Transitional Housing Programs clarified with duration and terminology changes.

**These highlights are not inclusive of all changes and updates made to 606 CMR and work to call attention to more substantive changes.*

Section 3.03: Licensure

SUMMARY OF KEY REGULATORY CHANGES

- Requires all documents be kept current for duration of license and copies provided upon request of Department
- Clarifies provisional licensing and renewals tied to M.G.L. c.30A §13.
- Requires staffing plan if using external/agency staff, including projected 4-week schedules.
- Expands mandate on submission of training curriculum, including restraint prevention, mandated reporting.
- Variance provisions updated to reference renumbered restraint/seclusion sections: 3.07(7)(h) and 3.07(8).
- Adds requirements for a plan related to the storage, maintenance, portability, and preservation of children's records
- Requires policies and procedures related to the use of surveillance cameras in programs that utilize them
- Includes requirements related to child sexual abuse and grooming behavior
- Now includes considerations for gender identity, active and/or past history of trauma

**These highlights are not inclusive of all changes and updates made to 606 CMR and work to call attention to more substantive changes.*

Section 3.04: Administration of the Program

SUMMARY OF KEY REGULATORY CHANGES

- Requires program's "statement of purpose" be conspicuously posted on the physical site and on the program's website, if a website is maintained; inclusion of permanency, workforce development, trauma informed care .
- Advisory board must meet quarterly; one member must have direct experience; minutes retained 4 years
- Prohibits multiple licenses for same space and mixing licensed/unlicensed programs.
- Expanded notifications: immediate notice of media/adverse events; quarterly restraint data reporting
- Incident reports expanded to include emotional status, witness statements, admin verification, parent input, child comments.
- Professional development "increased" to 24 hours/year-when considering implications of exclusion of orientation activities; additional training topics include TIC, LGBTQIA+, grooming, cultural responsiveness, missing/absent children.
- Monthly restraint safety committee required to review related data.
- Children's funds must be available for audit; retention clarified.
- Clarifies background record check requirements for owners, operators, corporate officers, volunteers, interns, clinician, and any other person having direct contact with children

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Section 3.05: Intake, Treatment, & Discharge Planning

SUMMARY OF KEY REGULATORY CHANGES

- Trauma history, LGBTQIA+ gender identity, triggers, prior interventions, permanency needs now required at intake.
- Intake assessment strengthened: trauma informed, gender identity, permanency focused evaluations required
- Child/family packet must be in preferred language.
- Service plan renamed 'treatment plan'; must include permanency, trauma, cultural/religious factors; based on comprehensive assessment
- ABA credential added to roster of those able to provide clinical oversight
- Treatment plan review cadence retained but must emphasize permanency and guardianship.
- Transition to adult services: planning must begin 1 year prior to 22nd birthday.
- Shelter extensions tied to individualized treatment plan demonstrating program can meet needs.

**These highlights are not inclusive of all changes and updates made to 606 CMR and work to call attention to more substantive changes.*

Section 3.06: Programs and Services

SUMMARY OF KEY REGULATORY CHANGES

- Case management expanded to include permanency planning and cross-service coordination
- Family engagement expanded: must promote healthy relationships, provide restraint curriculum to families, and support communication
- Clinical services clarified: individualized assessments must address trauma/permanency needs; timely referrals required
- Updates age and capacity requirements; adds stipulations for antipsychotic medication use
- Health services: strengthens equipment, medication training, prescriber instructions, monitoring
- Education: must comply with 504 plans as well as IEPs; ongoing school collaboration required
- Vocational planning must be documented in child record
- Recreation must be developmentally appropriate and linked to permanency goals
- Consent required for social media/electronic communications

**These highlights are not inclusive of all changes and updates made to 606 CMR and work to call attention to more substantive changes.*

Section 3.07: Supervision, Staffing, and Care Requirements

Summary of Key Regulatory Changes

- Adds mandated reporter duties and anti-grooming provisions
- Room assignments: trauma- and identity-informed placement required; emergency reassignment procedures added
- Bathing assistance must consider trauma and gender
- Nutrition: must include snacks/effort to provide meals when missed, USDA standards, culturally responsive meals; menus reviewed by dietitian
- Behavior support: must be trauma-informed, include data analysis, identify committee, prohibit restraint for punishment, convenience, or noncompliance
- Prohibited behavior intervention practices expanded
- Restraint safeguards codified: screening, airway protection, least-restrictive, notifications, >20-min approval, monitoring, release, child/parent debrief, weekly review
- Prone restraint narrowed: CAO consent, clinical justification, medical clearance, history of severe harm, last resort only
- Seclusion added: only permitted under strict safeguards (history, LMHP justification, parent/CAO consent, monitoring, de-escalation, room standards, inspections, DYS-only locked use);
- Communication: adds email/mobile phone rights; requires post-visit debrief;
- Missing/Absent Children: reframes 'runaways'/ replaces with 'missing/absent child(ren)'; requires trafficking prevention, LE identifiers, clarifies restraint use for safety
- Transportation: liability insurance updated to MA law minimums; clarifies supervision, licensure, inspections

**These highlights are not inclusive of all changes and updates made to 606 CMR and work to call attention to more substantive changes.*

Section 3.08: Physical Plant and Equipment

SUMMARY OF KEY REGULATORY CHANGES

- Inspections unchanged but clarifies reports must be kept onsite
- Emergency preparedness expanded: requires all-hazards plan, 12 drills/year, PEEPs for vulnerable children, detailed drill logs
- Bathrooms: sanitation standards strengthened; mechanical exhaust; hot water requirments; hand-drying required
- Kitchens: sealed food; expiry monitoring; no defective utensils
- Swimming pools: must comply with 105 CMR 435.00; supervision ratios; written safety plan

**These highlights are not inclusive of all changes and updates made to 606 CMR and work to call attention to more substantive changes.*

Section 3.09: Records & Confidentiality

SUMMARY OF KEY REGULATORY CHANGES

- Records retention clarified: secure (paper/electronic); portability
- Admissions record expanded to include placement source, demographics, admission/discharge dates
- Communication logs expanded to capture type, participants, subject, resolution
- Electronic records explicitly permitted; must include access controls, audit trails, FERPA compliance
- Confidentiality aligned with FERPA/HIPAA; sharing limited to treatment, payment, operations, legal obligations

**These highlights are not inclusive of all changes and updates made to 606 CMR and work to call attention to more substantive changes.*