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Use of Temporary Relief Staff in Residential Programs

Policy Number: RP-26-11

Release Date: July 8, 2026

Effective Date: November 17, 2026

Applicability: All Licensed Residential Programs

BACKGROUND

The Massachusetts Department of Early Education and Care (EEC) is committed to supporting residential programs as they address the periodic staffing challenges they face while providing services. To maintain safety and security as programs address such staffing challenges, EEC outlines requirements in this policy for the use of Residential Temporary Relief Staff in licensed residential programs.

AUTHORITY

- 606 CMR 3.03: Licensure
  - (7) All applications shall be accompanied by the following documents, if applicable, which shall be reviewed by the Department for completeness and compliance with 606 CMR 3.00. All documents must be kept current, with any updates submitted to the Department for review in a format determined by the Department throughout the term of the license:
    - (b) Staffing
    - (e) Health and Safety
- 606 CMR 3.04: Administration of the Program
  - (6) Personnel: (a), (e), (f)
  - (7) Orientation and Professional Development: (a), (b), (c), (e), (f), (g)
- 606 CMR 3.07: Supervision, Staffing, and Care Requirements
  - (13) Transportation of Residents

DEFINITIONS

For the purposes of this policy, the following definition is used:

- Residential Temporary Relief Staff: Temporary staff employed by a Staffing Agency, as defined by the Massachusetts Department of Labor Standards regulations in 454 CMR 24.02, and contracted to work in an EEC-licensed residential program, per 606 CMR 3.04(6)(f).

POLICY STATEMENT

Planning for the Use of Residential Temporary Relief Staff

Per 606 CMR 3.04(6)(f), a residential program must maintain a written policy which describes its plan for how the program will use Residential Temporary Relief Staff prior to onboarding such staff.

Per 606 CMR 3.04(6)(a) and 606 CMR 3.04(6)(f), Residential Temporary Relief Staff must be suitable according to EEC's background record check (BRC) process before they may work in a residential program.

Per 606 CMR 3.04(3)(a), all employees on duty shall know who on the premises is responsible for administrative supervision of the program at all times.

Training Requirements for Residential Temporary Relief Staff

Per 606 CMR 3.04(7)(c), a residential program must provide documented training to Residential Temporary Relief Staff on the following topics before the Residential Temporary Relief Staff may work in a supervised capacity with residents:

- characteristics of children served;
- symptoms and signs of emotional/behavioral disturbance, drug overdose, alcohol intoxication;
- the residential program's emergency procedures;
- procedures for reporting suspected incidents of abuse and neglect;
- review of the program's policies regarding medication, missing or absent children, behavior support and supervision of residents; and
- professionalism and boundary awareness.

Residential Temporary Relief Staff may only work unsupervised with residents in a residential program *if* they meet *all* initial training requirements described in 606 CMR 3.04(7)(c).

Such staff may only participate in physical restraint with residents at a residential program *if* they meet the behavior support/restraint training requirements described in 606 CMR 3.04(7)(e).

Such staff may only administer medication to residents at a residential program *if* they meet the medication administration training/certification requirements described in 606 CMR 3.04(7)(f).

Such staff may only conduct CPR/First Aid procedures at a residential program *if* they meet the CPR and First Aid certification requirements described in 606 CMR 3.04(7)(g).

Such staff may only provide transportation to residents at a residential program *if* they and the residential program meet the requirements described in 606 CMR 3.07(13).

COMPLIANCE

EEC staff may measure compliance with this policy by verifying BRC Suitability, reviewing the program's temporary staffing plans, and reviewing the documentation described in 606 CMR 3.04(6)(f).