



Child Care Licensing Unit

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I. Program Information

STATEMENT OF FINDINGS

ISSUE DATE : 3/12/2025

VISIT DATE : 2/18/2025

VISIT TYPE : Licensed Complaint

CORRECTIVE ACTION PLAN DUE DATE : 4/2/2025

Name of the program : MPA at Rumney

Program address : 1765 Route 25 Rumney New Hampshire 03266

License No. : CCRB-06690

Licensing Coordinator : Heather Dombroski

In accordance with RSA 170-E, the department finds non-compliance with the following statutes and/or rules:

II. Non-Compliance List

Regulation number : He-C.4001.19.(a)(2)

He-C.4001.19.(a)(2) : Program staff shall have the ability to identify the needs and problems of the children and possess skill in planning and implementing services of the program.

Observation : The program self-reported that on February 9, 2025, a staff member who was with two residents in the basement movie room observed the two residents engaging in inappropriate interactions while watching a movie. Staff C reported that on February 9, 2025, they observed Staff A sitting in the basement movie room with Resident A and Resident B, and that the two residents sitting side by side, which against program policy for supervision at the program, but Staff C reported they did not intervene and trusted Staff A to handle the situation. Resident A reported Resident B engaged in an inappropriate interaction with them while sitting next to each other when Staff A was with them in the basement movie room. Staff A stated they did not immediately intervene or separate Residents A and B when they suspected that they were engaging in inappropriate interactions because they wanted to be certain of their suspicions before confronting the residents about their behavior. The department has determined that Staff A failed to identify the needs and problems of the residents when they did not immediately intervene and separate Residents A and B when they observed them engaging in inappropriate interactions.

Corrective Action Plan : In response to this incident and the subsequent incident that MPA at Rumney was cited for an internal corrective action plan was created and addressed the following topics: -work phones for MPA at Rumney leadership were ordered and provided to Assistant Program Managers, the Residential Director and Program Manager -re-education and re-training was provided to MPA at Rumney faculty around high-risk problematic sexual behavior patterns (PSB) that occur on and off campus for the students at Rumney. In addition, on going training will be provided to faculty around various aspects of PSB including but not limited to setting conditions off-campus, grooming behaviors, maintenance behaviors and thinking errors -MPA at Rumney faculty will no longer program in the "middle room" in the basement at Rumney until video surveillance is put into that room -on a weekly basis, Rumney leadership will discuss their observations of faculty and go over plans to support (if deemed necessary depending on performance) -Youth Counselors and Community Leaders will complete written programming plans that are given to Rumney leadership for approval and then execution -all MPA at Rumney faculty were re-trained and -re-educated on the policy around student information on faculty devices and using personal devices for work-related reasons -MPA maintenance team has already provided assessment regarding video coverage at MPA at Rumney and is in process to add video cameras to areas in the building that do not have video surveillance or have "blind spots" in video coverage

Completion Date : 3/5/2025

Regulation number : He-C.4001.20.(a)

He-C.4001.20.(a) : Program staff shall provide care and supervision at all times to ensure that residents are safe and that their needs are met according to their developmental level, age, emotional or behavioral needs, and in accordance with their treatment plan.

Observation : The program self-reported that on February 10, 2025, a resident reported that on Sunday, January 26, 2025, a staff member had fallen asleep in the basement movie room while supervising three residents, resulting in inappropriate interactions between two of the residents. Resident A reported that Staff D had fallen asleep for about 10 – 15 minutes while they and two other residents were watching a movie in the basement. Staff C stated Resident A had reported to them that Staff D had fallen asleep on January 26, 2025 and that another resident engaged in inappropriate actions with them while Staff D was asleep. Staff B reported that when they asked Staff D about the incident, Staff D stated they did not feel they had fallen asleep but had been dozing in and out of sleep. Staff E reported that the program terminated Staff A due to this event.

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