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Frank L. Bird, M.Ed., BCBA
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for further information

Melmark New England
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INTRODUCTION TO MELMARK NEW ENGLAND

Melmark New England is a private, non-profit, community-based organization dedicated to serving children, adolescents and their families who have a history of challenging behavioral and educational difficulties. Using an interdisciplinary team approach, Melmark New England works to develop and enhance the confidence and abilities of these children by providing a safe, motivating and nurturing environment that is clinically proficient.

Students at Melmark New England range in age from three to twenty-two years old and have a diagnosis of acquired or traumatic brain injury, neurological disorders, autism spectrum disorders or dual diagnosis. All of the students have educational needs requiring special education services outside their public school systems. Many of the students referred for services also have significant behavioral needs.

Melmark New England’s overriding goal is to provide current “best practices” in behavior analysis; advocacy; consultation; training; crisis intervention; vocational preparation; collaborative services; inclusion support services; emergency services; education; and family, individual and group counseling supports. Supported by this framework, Melmark New England provides students with an educational curriculum in parallel to similar grade-level public school peers and seeks to provide educational and behavioral strategies that will enable students to return to public school. Additionally, Melmark New England assists families with long term planning and designing of inclusive activities with the public school and in the community. For students who are place residentially, Melmark New England seeks to provide family supports to assist with students returning to the family home as rapidly as possible.

The staff members of Melmark New England are experienced professionals from diverse backgrounds, including special education, psychology, behavior analysis and other human services. A full complement of health and rehabilitative therapies and specialized equipment is available in accordance with each student’s Individualized Education Program (IEP). All related services outlined in the IEP are met via the interdisciplinary team.

Melmark New England follows the Massachusetts Curriculum Frameworks, as outlined in the Education Reform Act of 1993. The curricula will be modified to meet the educational needs and grade levels as presented by students admitted to the Melmark New England program. These curricula will also meet the requirements of the individual student’s IEP. A listing of curriculum materials currently used for student programming is available on request.

The day school program operates daily from 8:30 a.m. to 3:00 p.m., 237 days per year. The school closes for a vacation period on the Independence Day (4th of July) week and the Winter Holiday-New Year week each year, as well as various holidays per the school calendar. Residential services are available all year with the exception of two vacation periods (Independence Day week and Winter Holiday-New Year week) and various holidays per the school calendar.
Melmark New England’s Program Philosophy, Goals and Objectives

**Program Philosophy**

Melmark New England is a private, non-profit, community-based organization dedicated to serving children, adolescents, adults and their families who have a history of challenging clinical, educational and health needs. Using an interdisciplinary team approach, Melmark New England will work to develop and enhance the confidence and abilities of these individuals by providing a safe, motivating, challenging and nurturing environment that is clinically proficient and whose overriding goal is personal welfare.

Melmark New England has adopted the philosophy that effective rehabilitation for people with disabilities requires individualized and multidisciplinary programming emphasizing ongoing assessment and evaluation. During the course of rehabilitation, the individual’s cognitive, emotional and physical functioning level will change, thereby necessitating the plan to be modified to meet those changing needs. The goal of rehabilitation for each individual served is to increase their independence while enhancing their quality of life and opportunities to succeed within their community.

**Program Goals**

Melmark New England’s overriding goal is to support the personal welfare, safety and dignity of the individual while providing current “best practices” in the areas of clinical development, advocacy, consultation, training, crisis intervention, collaborative services, education and family, vocational preparation and inclusion support services.

This goal is attained by the partnership that we create with the student, the family, the supporting staff at Melmark New England and the professional services that are available within the community.

**Program Objectives**

- Melmark New England will provide health care to ensure students reach their optimal health status.
- Melmark New England will notify students of their rights and ensure those rights are adhered to by all individuals.
- Melmark New England will provide educational and behavioral strategies that enable students to return to public school or live in the least restrictive educational setting.
• Melmark New England will provide for student participation in an educational curriculum to parallel their public school peers and/or will design the curriculum to meet their individual needs.

• Melmark New England will provide ongoing assessment and evaluation and modify educational and clinical programming based on changing needs.

• Melmark New England will assist families with long term planning and designing of inclusive activities with the public school, the community and the family.

• Melmark New England will seek to provide family supports to assist with students returning to the family as rapidly as possible.

• Melmark New England will provide all students over the age of 14 with appropriate transition and educational services in preparation for adulthood.

• Melmark New England will teach students functional skills and compensatory strategies enabling them to communicate needs and wants, make choices and problem-solve.

• Melmark New England will facilitate student participation in program design, implementation and evaluation.

• Melmark New England will provide students with a multidisciplinary team of professionals who will thoroughly assess and evaluate progress and recommend changes in a timely fashion.
Family Partnership and Collaboration

“Partnership and collaboration are not the goal, but rather the means by which to achieve a goal.”

Melmark New England considers the family to be the center of service delivery. Families serve as the facilitator, the navigator, the catalyst and the change agent who can assist us in providing the services necessary for their son or daughter. We consider the relationship to be a partnership of resources, advocacy and collaboration. Families assist us in providing quality services: who knows more about their child, the disability and how it affects others? Our goal is to create an environment that is warm and respectful of the family, listens to their needs, understands their challenges, focuses on their strengths and supports and enhances their objectives to ensure that their child receives the highest quality of service and education.

Senior Staff Bios

Rita M. Gardner, M.P.H., BCBA
Executive Director

Rita received her Master of Public Health degree from Boston University’s School of Public Health in the School of Medicine. Rita has devoted the last twenty-five years in the field of community based services for children and adults with the diagnosis of autism spectrum disorders, acquired brain injuries, neurological disorders and severe challenging behaviors. She has been involved in the organization, design, development and implementation of over 50 community based programs for children and adults.

Rita has written articles for professional journals and made a number of presentations on topics from program expansion, behavior management and transitioning students with brain injury back to the community.

Rita has provided project consultation to the Pediatric Alliance for Coordinated Care (PACC), under the direction of the Chief of General Pediatrics at the Children’s Hospital, Boston. In addition, Rita has provided organizational consultation to a program for children with Asperger’s Syndrome at McLean Hospital and the Crossroads Center for Children, a school for children with autism. Prior to her work at Children’s Hospital, Rita directed the service center of Behavioral Health and Rehabilitative Services for The May Institute. The center serves children and adolescents with acquired brain injuries and includes residential services, an approved Massachusetts Department of Education school (ages 5-22), school consultation and home based family training.

Rita’s legislative advocacy activities include involvement in the Autism Medicaid Waiver through the Division of Autism and the Act Relative to Insurance Coverage for Autism (ARICA). She sits on advisory committees with the Massachusetts Advocates for Children and Advocates for Autism of Massachusetts (AFAM). Rita is a member of the Steering Committee and Regulation and Policy Subcommittee of the Interagency Leadership Forum for the prevention of restraint and seclusion led by the Massachusetts Executive Office of Health and Human Services (EOHHS). Her most recent legislative involvement has been advocating for proposed bills regarding the use of better regulating and restricting aversive treatment, the licensure of Board Certified Behavior Analysts in Massachusetts and advocacy for appropriate responses for the adult service system.

In December 2010, Governor Deval Patrick appointed Rita to his Special Commission Relative to Autism. Her work on this commission is presently on-going. She was also the recipient of the “Essential Piece” award from the Teamsters Local 25 at their 2010 gala for autism.
Rita is presently affiliated with the following professional organizations:

- Association for Behavior Analysis
- Massachusetts Association for Behavior Analysis (Member, Board of Directors)
- Berkshire Association for Behavior Analysis
- American Public Health Association
- Massachusetts Association of Approved Private Schools (Member, Board of Directors)

Rita is an Adjunct Professor at the University of Massachusetts/Boston and is an instructor for a 5-course graduate series on Applied Behavior Analysis. Rita became a Board Certified Behavior Analyst (BCBA) in May of 2002.

**Statement of Purpose:** “I am pleased to have the opportunity to work with a provider that continues to keep its priority on the children, families and staff they serve. I will continue to strive to provide the best integrated care system for those children and families requiring a range of complex educational, clinical and health services.”
Frank L. Bird, M.Ed., BCBA  
Vice President & Chief Clinical Officer, Melmark, Inc.

Frank Bird received his Master in Education in Rehabilitation Counseling from Boston College. Frank received his Board Certification Behavior Analyst (BCBA) in June of 2001. Frank has over 30 years experience in the field of community based human service delivery systems in Massachusetts. He has served as a Director of Clinical Services at Vinfen Corporation, a Program Director at The Evergreen Center in Milford, Massachusetts and Vice President of MR/DD Services at The May Institute. Frank has an extended history of developing clinical support plans for challenging behaviors for children and adults with the diagnosis of autism, mental retardation, acquired brain injury, dual diagnosis and mental illness. His demonstrated abilities include clinical design, staff development, research and training, personnel management and program development.

Frank has developed over 50 programs in support of individuals with disabilities over the course of his career.

Frank Bird is presently affiliated with the following professional organizations:
- Association for Behavior Analysis

Frank Bird has published articles on functional communication training, reducing challenging behaviors utilizing reinforcement contingencies, acquisition of skills and community habilitation for individuals with dual diagnosis. Frank has presented over 170 papers and workshops on a variety of clinical topics both locally and nationally and is a clinical consultant for the Massachusetts Department of Developmental Disabilities and Department of Mental Health.

Frank is an Adjunct Professor at the University of Massachusetts/Boston and is the program coordinator for the 5-course graduate series on Applied Behavior Analysis.

Frank is responsible for clinically overseeing children services in Andover and in Pennsylvania. His primary responsibilities include developing and overseeing the Melmark’s clinical foundation, ensuring clinical integrity across programs, establishing clinical resources, mentoring young clinicians and educators and contributing to specific clinical needs.

Statement of Purpose: “I am extremely pleased to have the opportunity to create innovative services for children and adults with challenging medical and clinical needs. The greatest gift that I can extend to students and families is my genuine commitment to excellence and to ensure the dignity, safety and welfare of those I have the privilege in serving.”
Helena L. Maguire, M.S., BCBA
Senior Director of School Services

Helena Maguire received her Master of Science in Human Services Administration from the University of Massachusetts/Boston. Helena has worked extensively in the field of community based human service delivery systems in Massachusetts. Helena has served as a Program Director at Vinfen Corporation and as the Director of Adult Services at the May Institute. In both of these positions, Helena was responsible for the development and implementation of the staff orientation training curriculum, training for supervisory personnel and in-service training for all staff. Helena has presented numerous papers on staff management and staff training techniques, both at the local level and at the national level.

Helena’s primary role at Melmark New England is overseeing all clinical and operational school functions as well as staff training and professional development. Currently, Helena serves as a consultant to local public schools and collaboratives specializing in the areas of severe behavior disorders, parent and teacher training and strategies for successful inclusion.

Helena is a dynamic staff and parent trainer. She inspires individuals to reach for the highest level of skills whether it be her colleagues or the students she teaches.

Helena is an Adjunct Professor at Endicott College and the University of Massachusetts/Boston and is an instructor for a 5-course graduate series on Applied Behavior Analysis. Helena earned her Board Certification in Behavior Analysis (BCBA) in May of 2002.

Helena Maguire is presently affiliated with the following professional organizations:
- Berkshire Association for Behavior Analysis
- Massachusetts Brain Injury Association
- Association for Behavior Analysis
- American Association for Mental Retardation

Statement of Purpose: “I am pleased to have this opportunity. The most important contribution I can provide Melmark New England is to train staff to be competent and efficient teachers and clinicians. Children with disabilities deserve to have staff who are genuine, supportive and knowledgeable. I am confident that Melmark will provide the type of services for which students, their families and staff will be proud.”
Peter J. Troy, M.B.A.
Vice President

Peter Troy has devoted his career over the past 36 years to provision of quality services to individuals with disabilities in both the public and private sectors. His M.B.A. is in the area of Health Care Administration and was received from Baruch College of the City University of New York and the Mt. Sinai School of Medicine. In 1998, with other colleagues, he developed Melmark New England. This new program was founded to meet the needs of an underserved population in Massachusetts. The program was developed with a vision of a strong family-agency partnership, with inter-disciplinary teams guided by reliable data based on the principles of Applied Behavior Analysis. Formerly, a Vice President for Administrative Services with The May Institute, he developed financial and human resource systems as well as intimate involvement in the creation of innovative programs. Peter developed international relationships that allowed for staff exchanges in Europe and South America.

In the mid-1970s as Deputy Director of Support Services for New York State Department of Mental Retardation, he was instrumental in the development of the earliest community residences and day programs in Westchester County.

His contributions to his Cape Cod community are extensive through many years on the Chatham School Committee, Chairman of the School Building Committee, and President of the Chatham Athletic Association of the Cape Cod Baseball League.
Barbara O’Malley Cannon, Ph.D., BCBA
Director of Consultation Services

As Director of Consultation Services for Melmark New England, Barbara works with a team of seven Board Certified Behavior Analysts to provide a variety of consultation services across the state. She has a Master of Education from Northeastern University where she also received her Doctorate in their combined School and Counseling Psychology Program. She is a Board Certified Behavior Analyst who began her career in residential services for individuals with Autism Spectrum Disorders and has been providing services to these individuals and their families for 30 years as a teacher, program director and consultant. Much of her experience has been in developing and overseeing quality educational programs for young children with autism in the home and school settings. Dr. Cannon served for six years on the Interagency Coordinating Council, the advisory board to the Department of Public Health Early Intervention Services and participated in National Federal Conferences, as well as, state public hearings regarding early intervention services. Dr. Cannon’s work has also included therapeutic support services in public school settings, as well as, a private acute adolescent program. Dr. Cannon has presented at local, regional, and national conferences and has coauthored both peer reviewed journal articles and book chapters. One of Dr. Cannon’s primary clinical and research interests is the impact on families of having a child with a disability and how best to support these families.

Barbara is presently affiliated with the following professional organizations:
- American Psychological Association
- Association for Behavior Analysis
- Berkshire Association for Behavior Analysis

Statement of Purpose: “I have been privileged to have a career that has spanned the development of best practices for the treatment of individuals on the autism spectrum. I remain dedicated to providing quality services for children and families based on the latest research.”
Kimberly Duhanyan is the Director within the Residential Program of Melmark New England. Kim has been with the company since September of 2003, and previously completed the University of Massachusetts Applied Behavior Analysis Series, obtaining her Board Certification as an Associate Behavior Analyst. In August of 2009, Kim obtained her BCBA. She obtained her masters in Special Education in the Fall of 2008 from Simmons College.

Kim previously worked as the Float Program Coordinator for all the houses, the Program Coordinator for the Winona Street residence in Peabody, and Saugus residence, which has since moved to Dracut. As Assistant Director of Residential Services within Melmark New England, Kim previously worked in areas such as IEP development, staff training, clinical and academic programming for all students, family training, and overall promotion of independence for all students. Kim currently serves as the Director of Residential Services, overseeing all residential programs and the Assistant Director of Residential Services.

Statement of Purpose: “It’s amazing to see the development of the students’ skill levels and independence not only short term, but over the long term, as I have been at Melmark for awhile. I continue to strive to learn more about each and every student on a daily basis, with a focus on community access, further improving their quality of life.”
Organizational Structure
Bring Me the Ocean

*Bring Me the Ocean: Nature as Teacher, Messenger, and Intermediary* by Rebecca A. Reynolds (VanderWyk & Burnham, 1995) is a collection of true stories that has documented the work of Animals as Intermediaries, a program of Seabury School, Inc. Animals as Intermediaries started from the belief that everyone is connected through nature and that this connection can restore and embrace the human spirit. The following story demonstrates that anything is possible and provides us as service providers and you as family members, a reminder of how powerful we can be as teachers and advocates for the child we serve and the person you love.

“BRING ME THE OCEAN!” DECLARED Jim. Not the moon, not the stars - no, he wanted the ocean.

This was the second time Jim had asked for the ocean, and we were perplexed. How could we transport the ocean indoors to a chronic care hospital setting? When he asked again, Suzanne said, “How can we possibly bring you the ocean?”

“In buckets!” Jim replied, spelling it out letter by letter on his communication board. Several years before, while in his early thirties, Jim had suffered a head injury. The accident had left him trilegic and unable to communicate orally. He used a communication board on the armrests of his wheelchair to tell us his thoughts.

On our next visit we arrived with sloshing buckets full of Salty Atlantic Ocean. Other pails held seaweed, mussels, clams, periwinkles, and a lobster - all on loan from the sea for the day.

Along with hospital staff, we discovered what Jim had not yet told any of us. He had been a lobsterman prior to his injury. The ocean had been his livelihood. Every day in bad weather and good, he had been out on the ocean pulling up his line of lobster pots, sorting the catch and rebaiting the traps. A past emerged, and Jim showed us that anything, even the ocean, can be brought into an institution.

Over the years, requests such as Jim’s have extended the scope of our programs, encouraging us to expand our own perception of what is possible. We started with the seasons of the meadow, then the forest, and soon we looked to the desert. Meeting Jim, we learned to bring the ocean.
**DIRECTIONS**

Melmark New England  
461 River Road  
Andover, MA 01810  
978-654-4300

**Route 93 North: Take Exit 45 (River Road)**  
Turn RIGHT off exit ramp onto River Road.  
Follow River Road for 3.5 miles through country/residential area.  
Our school is next to the Franciscan Center on the right.

**Route 93 South: Take Exit 45 (River Road)**  
Turn LEFT off exit ramp onto River Road.  
Follow River Road for 3.5 miles through country/residential area.  
Our school is next to the Franciscan Center on the right.

**Route 495 North: Take Exit 39 (Route 133)**  
Turn LEFT at light at end of exit ramp onto Route 133  
Proceed through 2 traffic lights and take 1st RIGHT onto FISKE ST.  
Follow to end.  
Our school is across to the RIGHT next to the Franciscan Center.

**Route 495 South: Take Exit 39 (Route 133)**  
Turn RIGHT at light at end of exit ramp onto Route 133  
Proceed through 1 traffic light and take 1st RIGHT onto FISKE ST.  
Our school is across to the RIGHT next to the Franciscan Center.
FREQUENTLY ASKED QUESTIONS

Melmark New England is located in Andover, Massachusetts, north of Boston and close to both 495 and 93.

General Information
Melmark New England is both a day and residential program serving over 100 students with approximately 40 children receiving services in our residential program. The day school program is 237 days a year and the residential program is year round 24 hours a day. The school day is from 8:30 a.m. to 3:00 p.m. five days a week.

What is the treatment philosophy of Melmark New England?
Melmark New England’s treatment philosophy is above all empirically based. Our behavioral approach is based on Applied Behavior Analysis (ABA). Melmark New England uses positive reinforcement and least restrictive practices when working with the children. We do not use alternative or non validated treatment strategies.

What is Melmark New England’s philosophy about the use of most effective restrictive procedures?
Melmark New England uses the least restrictive, most effective procedures in all possible situations. More restrictive procedures are used only when least restrictive procedures are found not to be effective or there is concern for the individuals or others health and safety.

When would Melmark New England use physical restraint?
Melmark New England uses restraint only in a situation where it is determined that the student is at risk of harming themselves or others. Restraint procedures are not considered a treatment option but rather a safety protocol.

What student population(s) do we serve?
Students ages 3 to 22 with a diagnosis within the autism spectrum, brain injury, neurological disorders, dual diagnosis and severe challenging behaviors. We serve both male and female students in both our day school and residential program at a 2:1 (student to teacher ratio). We can staff a 1:1 ratio if a clinical determination has been made. Our admission cut off age is 16 years old.

Do you use edibles (food) for students during the school day?
Edible reinforces are used at Melmark but typically this is not the first choice of reinforcement for a student. The emphasis is to identify reinforcers via preference assessment and attempt to implement social reinforcement and generalized reinforcers as soon as possible.
**Who may refer to Melmark New England? How do I make a referral?**

A parent, a school system or guardian may refer a child to Melmark New England’s day or residential program. You can start the referring process by filling out the screening tool or the application form that can be found on-line at [www.melmarkne.org](http://www.melmarkne.org) (under Programs & Services tab, Admissions) or by requesting the forms from the Frank L. Bird (Chief Clinical Officer) at Melmark New England. School systems can refer students by sending a referral packet to Frank L. Bird. Once we receive a referral (screening tool must be completed) you can request a tour of the school facility. We schedule monthly tours, usually on Wednesdays or Thursdays from 10:00 a.m. to 12:00 p.m. If for some reason you cannot attend the group tour we can arrange smaller tours at different times.

**What are the primary teaching styles used within the school and residences?**

We utilize an integrated model with the foundation being applied behavior analysis (ABA). ABA concepts are woven throughout. We integrate Occupational Therapy, Physical Therapy, Speech-Language Therapy and other ancillary services into the classroom and train the classroom teachers to incorporate these services into the curriculum.

**How are parents involved in Melmark New England’s programs?**

Melmark New England feels a working relationship with parents is critical. Parents are able to observe their child in the class and residence. We offer training for families at the residence, school and in some instances at home. Parents are also involved in the IEP process and help develop an accurate document.

**How does Melmark New England provide family support?**

Families are updated weekly on their child’s progress by the lead teacher. Melmark New England also offers training to families at the residence and school.

**What is your policy around classroom observations?**

Observation periods within a classroom setting need to be scheduled 48 hours in advance with the Senior Director of School Services (Helena Maguire). This advanced scheduling enables the necessary personnel to be available to the family and to ensure the classroom setting and the educational programming is not disrupted. It is recommended that observations be limited to one hour. Observations do not include time meeting with school personnel regarding a child’s program.

**What is your policy on visitation/field trips?**

Parents and those involved with a child are asked to schedule visits with Melmark New England staff at least 48 hours before the visit. Parents or guardians are given advanced notice of a field trip.

**What licensure does Melmark New England have?**

We have licensure as a private special education program (day and residential) with the Massachusetts Department of Elementary and Secondary Education (DESE) and we are also approved for emergency services with the New York Department of Education. In addition, our residential programs are licensed with the Massachusetts Department of Early Education and Care (EEC).
Affiliations
Melmark New England is a Chapter 766 approved private school and we are a member of the Massachusetts Association of Approved Private Schools (MAAPS).

History of Melmark New England
Melmark New England’s school and residential program started in 1998. Melmark New England is affiliated with Melmark, Inc. located in Berwyn, Pennsylvania. Melmark, Inc. has been in existence since the late sixties. Our organizational structure can be found under the “Introduction to Melmark New England” section.

Do you have a professional development system for your staff?
Yes. Melmark New England supports and encourages employee growth. We offer tuition reimbursement, in-service trainings and adopt a philosophy of promoting staff from within.

Related Services
Speech and Language Pathology: Melmark staffed SLP providing 1:1, group and consultation.
Occupational Services: Melmark staffed OT providing 1:1, group and consultation.
Orientation and Mobility Services: This service is provided on a consultation basis through the Public School.
School Health Services: 3 full time nurses on the premises.
Parent training and counseling: Monthly parent training seminars.

Counseling Services
Consulting LICSW (social worker)
Staff LICSW (social worker)
Behavioral Psychologist/Neuropsychologist (Ph.D.)

Social Work Services
Staff LICSW (social worker)

Transportation
Arrangements for transportation are made through the public school responsible for your child.

Additional Services
Vocational services, career planning: Melmark New England has a full time vocational coordinator. We have children working both in the school and the community. We have had students working within medical offices, local universities, firehouses, as well as retail stores. We have a student store on campus where the students can practice pre-vocational skills (selling, calculating change, etc) as well as consumer skills (selecting items, paying and waiting for the item, etc).

What are the community opportunities available to students?
For our residential students there is an opportunity to have exposure to the community several times a week. The focus is on helping the student function as independently as possible given their age and level of functioning.
**Program Setting**
Services are provided in a structured ABA program both in the residential and day programs. Melmark New England collects data on both academic and behavior progress. Our curriculum and interventions are empirically based, overseen by a Chief Clinical Officer and two Assistant Directors of Clinical Services, all Board Certified in Behavior Analysis (BCBA).

**Staff Certifications**
A lead teacher is assigned to every classroom; they have a master’s degree in intense special needs or are in the process of obtaining one, with a DESE waiver. All ABA counselors have a bachelor’s degree in a related field. All residential staff members have a bachelor’s degree. The University of Massachusetts-Boston and Melmark New England have now offered the Applied Behavior Analysis for Special Populations graduate certificate program for six consecutive years. This certificate program has been approved by the national Behavior Analyst Certification Board.

The program has had over 250 students (including over 75 Melmark New England staff) enrolled in the course sequence. Those students who have decided to go forward and sit for the examination at either the Associate’s level or Master’s level has been extremely successful. Melmark New England current has over 30 staff members with this certification.

**Administrator Certifications**
- Executive Director: M.P.H., BCBA
- Vice President & Chief Clinical Officer: M.Ed., BCBA
- Senior Director of School Services: M.S., BCBA
- Vice President: M.B.A.
- Consulting Psychiatrist: M.D.

**Other Staffing**
- Physical Therapist: 1 full time PT, with a maximum service delivery of 2 X 30.
- Physical Therapist Assistant: 1 full time PTA.
- Occupational Therapist: 3 full time OT’s with a maximum service delivery of 3 X 30.
- Speech Pathologist: 4 full time speech pathologists with a maximum service delivery of 3 X 30.
- Medical Director/Psychiatrist: 1 consultant.
- Registered Nurse: 3 full time, with 1 full time administrative support staff.
- Psychologist: 1 full time.
- Behavior Specialist: 1 full time clinical director (BCBA) and 2 full time (one doctoral level, one masters level) assistant clinical directors (BCBA).
- Public School Consultants: 4 full time doctorate level (BCBA) and 6 full time masters level (BCBA).
- Director of Professional Development, Training and Research: 1 full time doctoral level (BCBA).

**What is a typical classroom day?**
Each classroom’s schedule is designed to meet the Massachusetts Department of Elementary and Secondary Education’s curriculum frameworks based on the Massachusetts Comprehensive Assessment System: Requirements for the Participation of with Disabilities (A Guide for Educators and Parents).
Following are two representative schedules from our Early Childhood Program and School Age Program.

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<tr>
<th>Time</th>
<th>Early Childhood Program</th>
<th>School Age Program</th>
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| 8:30 – 9:00 a.m. | Break/Arrival  
IEP goals: leisure skills, social skills, communication skills, activities of daily living skills | Arrival  
IEP goals: activities of daily living skills |
| 9:00 – 9:30 a.m. | Morning Group  
IEP goals: life skills (calendar), communication/social skills, behavior (attending) | Morning Group  
Bathroom  
Classroom discussion/meeting  
IEP goals: communication, social skills, attending, life skills |
| 9:30 – 10:00 a.m. | Snack  
IEP goals: social skills, communication skills, life skills | Vocational goals/objectives, school to work, community awareness |
| 10:00 – 10:30 a.m. | Cooperative Leisure  
IEP goals: social skills, communication, peer interaction | Math goals and objectives |
| 10:30 – 11:00 a.m. | English Language Arts | Vocational goals/objectives, school to work, community awareness |
| 11:00 – 11:30 a.m. | Lunch  
IEP goals: life skills, social skills, communication skills | English Language Arts goals and objectives |
| 11:30 a.m. – 12:00 p.m. | Math | Art/Group Lesson  
IEP goals: social skills, communication skills, behavior (attending), handwriting, science, social science, health curriculum  
Lunch  
IEP goals: life skills, social skills, communication skills |
| 12:00 – 12:30 p.m. | Lunch  
IEP goals: life skills, social skills, communication skills | Vocational goals/objectives, school to work, community awareness |
| 12:30 – 1:00 p.m. | Playground/Community Awareness  
IEP goals: social skills, physical therapy, community safety, life skills | English Language Arts goals and objectives |
| 1:00 – 1:30 p.m. | Math | Vocational goals/objectives, school to work, community awareness |
| 1:30 – 2:00 p.m. | Independent/Cooperative Leisure  
IEP goals: independence, collaborative skills, communication, social skills | Transition home, life skills, activities of daily living skills  
Clean up, transition to home  
IEP goals: life skills, activities of daily living skills |
| 2:00 – 2:30 p.m. | Transition home, life skills, activities of daily living skills | Clean up, transition to home  
IEP goals: life skills, activities of daily living skills |
| 2:30 – 3:00 p.m. | Transition home, life skills, activities of daily living skills | Clean up, transition to home  
IEP goals: life skills, activities of daily living skills |

*Please note that schedules may be adapted due to instructional needs such as behavior, weather, medical, clinical or other programmatic issues that arise on a daily basis.*
**What is Melmark New England’s clinical philosophy?**

Melmark New England defines its clinical philosophy from the field of behavior analysis. The approach of clinical programming within this organization integrates the technical and empirically-supported features of applied behavior analysis with the values of ABA in addressing the unique characteristics of the individual.

**What is applied behavior analysis?**

Applied behavior analysis (ABA) is the science of human behavior. Over the past 30 years, several thousand published research studies have documented the effectiveness of ABA across a wide range of:

- populations (children and adults with mental illness, developmental disabilities and learning disorders)
- interventionists (parents, teachers and staff)
- settings (schools, homes, institutions, group homes, hospitals and business offices), and
- behaviors (language; social, academic, leisure and functional life skills; aggression, self-injury, oppositional and stereotyped behaviors)

Applied behavior analysis is the process of systematically applying interventions based upon the principles of learning theory to improve socially significant behaviors to a meaningful degree, and to demonstrate that the interventions employed are responsible for the improvement in behavior (Baer, Wolf & Risley, 1968; Sulzer-Azaroff & Mayer, 1991).

**Why is applied behavior analysis a cornerstone to your clinical approach?**

There is a wealth of validated and peer-reviewed studies supporting the efficacy of ABA methods to improve and sustain socially significant behaviors in every domain, in individuals with autism. Importantly, results reported include "meaningful" outcomes such as increased social skills, communication skills, academic performance, and overall cognitive functioning. These reflect clinically-significant quality of life improvements. While studies varied as to the magnitude of gains, all have demonstrated long term retention of gains made.

**Is discrete trial training synonymous with applied behavior analysis?**

One of the instructional methodologies frequently used in ABA-based programs is Discrete Trial Training (DTT). Discrete trial training and ABA are not synonymous. While DTT is based upon principles of learning theory and has been demonstrated to be an effective intervention methodology, it represents only one of dozens of teaching strategies within the field of ABA.
What clinical ethical standards does Melmark New England follow?
Melmark New England adheres to a clinical code of ethics that are derived from a variety of resources within the field of psychology and applied behavior analysis. In the process of making decisions regarding our professional behavior, we require all personnel to establish a high standard of conduct and to strive to maintain a high standard of competence in their work. They recognize the boundaries of their particular competences and the limitations of their expertise. They provide only those services and use only those techniques for which they are qualified by education, training, or experience. They maintain knowledge of relevant scientific and professional information related to the services they render, and they recognize the need for ongoing education.

Do you incorporate other disciplines with applied behavior analysis? Do families play a role?
Traditionally, the field of applied behavior analysis has embraced models of assessment and intervention that have been expert-driven rather than consumer-driven. Thus, behavior analysts, for example, have functioned as experts, defining the issues, selecting the designing interventions, and enlisting the aid of consumers (e.g., parents, teachers) in implementing strategies. The broader approach to behavior analysis has emphasized that students or consumers and their families and other disciplines are not helpers but, rather, serve as active participants and with professionals in a process of reciprocal information exchange (Carr, et al., 2002). Melmark New England adheres to the philosophy that all team members play a significant role in contributing to a student’s educational plan. Therefore, input and recommendations are secured from all team members. The resulting product however adheres to the empirically-supported standards of ABA.

What credentials does Melmark New England require for staff to implement applied behavior analysis?
Melmark New England follows the standards that are highlighted by the Autism Special Interest Group of the Association for Behavior Analysis. The Autism Special Interest Group (SIG) of the Association for Behavior Analysis asserts that planning, directing, and monitoring effective ABA programs for individuals with autism requires specific competencies. Individuals with autism, their families, and other consumers have the right to know whether persons who claim to be qualified to direct ABA programs actually have the necessary competencies. Because of the diversity of needs of individuals in the autism spectrum and the array of specific competencies amongst the pool of potential service providers, consumers also need to focus on the match between their needs and the specific competencies of a particular provider. Formal credentialing of professional behavior analysts through the Behavior Analyst Certification Board (BACB) can provide some safeguards for consumers, including a means of screening potential providers, and some recourse if incompetent or unethical practices are encountered.

The University of Massachusetts/Boston and Melmark New England have now offered Applied Behavior Analysis for Special Populations Graduate Certificate Program for eight consecutive years. The program has had over 250 (including over 75 Melmark New England staff) students enrolled in the course sequence. Those students who have decided to go forward and sit for the examination at either the Associate’s level or Master’s level have been extremely successful. There are currently over 25 Melmark New England staff who have received their credentials through the Behavior Analyst Certification Board.
What are the cornerstone strategies that you utilize to address challenging behaviors?

Guiding our decisions regarding the use of behavioral strategies to address challenging behaviors, Melmark New England adheres to the guidelines that were adopted by a task force on the right to effective behavioral treatment. These rights are highlighted in an article, entitled *The Right to Effective Behavioral Treatment* (Van Houten et al., 1988).

Behavior analysts have a responsibility to insure that their clients' rights are protected, that their specialized services are based on the most recent scientific and technological findings, that treatment is provided in a manner consistent with the highest standards of excellence, and that individuals who are in need of service will not be denied access to the most effective treatment available.
## School Holidays and Vacations

**July 2015**
- July 4 – Independence Day
- July 3/July 10 – Summer Vacation

**September 2015**
- September 7 – Labor Day
- October 12 – Columbus Day
- November 26 – Thanksgiving Day
  (11/27 Professional Development Day)
- December 25 – Christmas Day
- December 24-January 1 – Winter Vacation

**School Hours:**
8:30 a.m. – 3:00 p.m.

**Early Release Hours:**
8:30 a.m. – 12:30 p.m.

**Transportation Pick-up/Dismissal:**
between 2:45 – 3:00 p.m.

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**Melmark New England**
461 River Road
Andover, MA 01810
978-654-4300
School Holidays and Vacations

- July 4 - Independence Day
- June 30 - July 4 - Summer Vacation
- September 1 - Labor Day
- October 13 - Columbus Day
- November 27 - Thanksgiving Day
- (11/28 Professional Development Day)
- December 25 - Christmas Day
- December 24 - January 2 - Winter Vacation

- January 1 - New Year's Day
- January 19 - Martin Luther King Jr. Day
- February 16 - Presidents' Day
- April 20 - Patriots' Day
- May 25 - Memorial Day

School Hours: 8:30 a.m. - 3:00 p.m.

Early Release Hours: 8:30 a.m. - 12:30 p.m.

Transportation Pick-up/Dismissal between 2:45 - 3:00 p.m.
Due to the number of applicants, Melmark New England will be unable to serve all children on our waitlist.

**REFERRAL AND POTENTIAL ADMISSION PROCESS**

**Parent**
- Parent(s) submits admissions application.
  - Application is reviewed. If appropriate, child is placed on active wait list.
  - Melmark New England sends written confirmation to parent(s) that information has been received.
  - Parent(s) can request tour with Melmark New England staff.

**School District**
- School district submits referral for admission with information regarding child.
  - Referral is reviewed. If appropriate, child is placed on active wait list.
  - Melmark New England sends written confirmation to school district that information has been received.
  - School district or parent(s) can request tour with Melmark New England staff.

Melmark New England will contact parent(s) or school district when there is an upcoming opening that fits their child’s profile.

In considering all candidates, Melmark New England will determine if the referred child is funded either through the school or private pay. Without funding, the child cannot be considered for placement.

An intake of the student is then scheduled. It is oftentimes necessary to do multiple intakes for one opening. During this process, the most appropriate candidate will be accepted and admitted to our program.

During this process, issues to be considered are:
- 1:1 staffing needs
- Medical needs
- Any physical mobility issues/accommodations needed