

**THE COMMONWEALTH OF MASSACHUSETTS
EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES
DEPARTMENT OF CHILDREN AND FAMILIES
CENTRAL ADMINISTRATIVE OFFICE
600 WASHINGTON STREET
BOSTON, MASSACHUSETTS 02111**

Linda Spears
Commissioner

Voice: (617) 748-2000
FAX: (617) 261-7428

IN THE MATTER OF)

KB)
FH #2017-0582)

FAIR HEARING DECISION

The Appellant in this Fair Hearing was KB (hereinafter "KB" or "the Appellant"). The Appellant appealed the Department of Children and Families' (hereinafter "DCF" or "the Department") decision to support the allegation of physical abuse and neglect pursuant to M.G.L. c. 119, §§51A and B.

Procedural History

On April 4, 2017, the Department received two (2) 51A reports alleging physical abuse of S (hereinafter "S" or "the child") by the Appellant. The Department conducted a response and, on April 26, 2017, the Department made the decision to support the allegation of physical abuse by the Appellant. The Department added and supported an allegation of neglect of S by the Appellant. The Department notified the Appellant of its decision and her right to appeal.

The Appellant made a timely request for a Fair Hearing under 110 CMR 10.06. The Hearing originally scheduled for July 18, 2017, was rescheduled at the request of Counsel for the Appellant. The Hearing was held on September 26, 2017, at the DCF Brockton Area Office. All witnesses were sworn in to testify under oath. The record remained open at the conclusion of the Hearing to afford the Appellant the opportunity to present additional information for consideration in the instant case; no supplementary information was submitted. The record closed on October 13, 2017.

The following persons appeared at the Fair Hearing:

Carmen Temme	Fair Hearing Officer
KB	Appellant
AN	Attorney for Appellant
DW	Department Response Social Worker (hereinafter "DW")
RW	Department Supervisor

In accordance with 110 CMR 10.03, the Hearing Officer attests to impartiality in this matter, having no direct or indirect interest, personal involvement, or bias in this case.

The Fair Hearing was recorded pursuant to DCF regulations. 110 CMR 10.26

The following documentary evidence was entered into the record for this Fair Hearing:

For the Department:

Exhibit A: DCF Intake Report/51A Report, dated 4/4/2017@10:29am
Exhibit B: DCF Intake report/51A Report, dated 4/4/2017@4:59pm
Exhibit C: DCF Child Abuse/Neglect Emergency/Non-Emergency Response, completed 4/26/2017

For the Appellant:

None

The Hearing Officer need not strictly follow the rules of evidence....Only evidence which is relevant and material may be admitted and form the basis of the decision. 110 CMR 10.21

Issue to be Decided

The issue presented in this Hearing is whether, based upon the evidence and the Hearing record as a whole, and on the information available at the time of and subsequent to the response, the Department's decision or procedural action, in supporting the 51A report, violated applicable statutory or regulatory requirements, or the Department's policies or procedures, and resulted in substantial prejudice to the Appellant. If there is no applicable statute, policy, regulation or procedure, the issue is whether the Department failed to act with a reasonable basis or in a reasonable manner, which resulted in substantial prejudice to the Appellant. For a decision to support a report of abuse or neglect, giving due weight to the clinical judgments of the Department social workers, the issue is whether there was reasonable cause to believe that a child had been abused or neglected and the actions or inactions by the parent(s)/caregiver(s) placed the child(ren) in danger or posed substantial risk to the child(ren)'s safety or well-being; or the person was responsible for the child(ren) being a victim of sexual exploitation or human trafficking. 110 CMR 10.05; DCF Protective Intake Policy #86-015, rev. 2/28/16

Findings of Fact

1. The subject child of this Fair Hearing was S; at the time of the 51A reports, S was twelve (12) years old. (Exhibit A, p.1; Exhibit B, p.1; Testimony DW)
2. The child's father is TG (hereinafter "TG"); the child's mother is KB. (Exhibit A; Exhibit B; Exhibit C; Testimony DW) At the time of the 51A reports, the Appellant and TG had been divorced for seven (7) years. (Exhibit C, p.2) S visited with TG two (2) out of every three (3) weekends; there was no Court ordered visitation agreement between S's parents. (Exhibit C, p.2)
3. The Appellant is S's mother and primary caregiver; therefore, she was deemed a caregiver pursuant to Departmental regulation 110 CMR 2.00; DCF Protective Intake Policy #86-016, rev. 2/28/2016.
4. According to the Appellant, S carried a diagnosis of Asperger's Syndrome and anxiety. The Appellant identified challenges such as S not eating solid food until age five (5), seeing a specialist in ██████████ and having social issues. S "was declared a genius" at age five (5). Learning came easily to S; he did extremely well in school; and received "perfect scores" on the MCAS exams. (Testimony Appellant; Exhibit C, p.2, p.4)
5. Since S was three (3) or four (4) years old, S received counseling services. (Testimony Appellant) Approximately seven (7) years prior to the 51A reports, the Appellant began counseling services with DA (hereinafter "DA"). Approximately five (5) years prior to the 51A reports, S started individual counseling services with DA. (Exhibit C, p.7; Testimony DW)
6. On June 25, 2016, the Department screened out allegations of neglect by the Appellant's in time boyfriend; the Appellant obtained a six (6) month restraining order. The Department had no other involvement with the Appellant and S. (Exhibit A, p.4; Testimony DW)
7. At the time of the 51A reports, the Appellant and S were in the process of completing their move from ██████████ MA to ██████████, MA. Prior to this, the Appellant and S resided in ██████████ and ██████████, MA. (Exhibit C, p.2, p.4) According to TG, the frequent moves were due to the Appellant's dislike for the school systems or people within the town(s). (Exhibit C, p.2)
8. Departmental documentation reflected that S was "very dramatic." (Exhibit C, p.4, p.7) When residing in ██████████, MA, S was involved with the drama club; the ██████████ school did not offer this extra-curricular activity, which S enjoyed. (Exhibit C, p.5; Testimony Appellant)
9. S was involved in karate and had his brown belt; karate assisted his level of confidence, as other children at school picked on him. S's karate instructor demonstrated how S

could defend himself. According to the Appellant, S “fell down dramatically” when his instructor “nudged” his; a nudge similar to how the Appellant nudged S. His instructor was reportedly unhappy with this reaction and told him to get up. (Exhibit C, p.5; Testimony Appellant)

10. The move from the old residence to the new residence was a difficult one for the Appellant, due to the number of stairs involved. For the week prior to the move, S did not assist with the Appellant’s repeated requests to pack. The Appellant acknowledged she was tired of packing and moving by herself and was “bitching” at him. On March 31, 2017, the Appellant texted S at 3:00am while he was at his father’s house, that “It wasn’t cool he only packed one bag while she was up four straight nights packing.” The Appellant had started a new job and could not take time off work. (Exhibit C, pp.4-5)
11. On April 3, 2017, the Appellant picked S up from TG’s home. The Appellant took away S’s phone due to his failure to assist with packing; she instructed him to pack when they arrived home. (Exhibit C, p.5)
12. On April 4, 2017, the Department received the two (2) reports from mandated reporters pursuant to M.G. L. c. 119, §51A, alleging physical abuse of S by the Appellant. (Exhibit A; Exhibit B) According to the child, the week prior, the Appellant’s yelling at the child increased as they were packing; the Appellant “screamed at him telling him he was lazy and selfish and he was no help at all.” On Friday March 31, 2017, at 3:00am, the Appellant texted, telling him, he was worthless; that he did nothing right, and that he was not good enough. On April 3, 2017, for the first time, the Appellant became physical with the child. While packing, the Appellant grabbed his shoulder and “shoved” him into the corner of the wall; he hit the wall with his arm a few times. When S did not put something away to the Appellant’s “standard” the Appellant (while standing behind the child) grabbed the child by the shoulder, put her hand in the center of his back, pushed forward on his back and pushed him down to the ground. When the child got up, the Appellant pushed him back down. When the child asked where something was that the Appellant asked for, the Appellant “grabbed the child by the back of the skull and twisted his neck while at the same time pushing his head down to show him where the item was that he was supposed to get.” The school nurse observed, “a small bruise on the right shoulder and the center of the small of the child’s back”. The child stated that he did not feel safe returning home to the Appellant; the school arranged for the child to go to his father’s home. (Exhibit A, p.2; Testimony DW)
13. The mandated reporter of the second 51A report described the child as having “a couple of abrasions.” The reporter described the incident as being “more disciplinary stuff as oppose to abuse...” [Sic] The reporter noted a concern with the Appellant’s negative comments to S; including that “he would not amount to anything.” The Appellant and TG “agree that {S} can be overly dramatic.” (Exhibit B, p.2; Testimony DW)
14. TG informed the Department the Appellant was increasingly “volatile” with him. TG communicated with the Appellant via e-mail rather than in person. TG denied concerns the Appellant was physical with the child; but rather, the Appellant was “emotionally

abusive” to the child. The Appellant grounded the child for weeks during which time he was unable to read books. The Appellant had mental health issues including depression and OCD, which included a germ phobia. (Exhibit A, p.3; Exhibit C, p.2) S referred to the Appellant as a "germaphobe." (Exhibit C, p.3)

15. The 51A reports were assigned for a response, pursuant to M.G.L. c. 119, § 51B to DW, Social Worker from the DCF Brockton Area office. (Exhibit C; Testimony DW)
16. At the conclusion of its response, the Department supported the aforementioned report for physical abuse of S; the Department added and supported neglect of the child by the Appellant. The Department cited the following in coming to the determination to support the allegation of physical abuse:
 - S’s report that the Appellant grabbed his shoulder and shoved him into a corner of the wall. (Exhibit C, pp. 3; Exhibit C, p.9; Testimony DW)
 - S’s report that the Appellant grabbed his shoulder, put her hand on the center of his back, and pushed him to the ground. The Appellant pushed him back down when he attempted to get up. (Exhibit C, p.3, p.9; Testimony DW)
 - S’s report that the Appellant then grabbed the back of his head and twisted his neck while pushing his head down to show him where a box was he was supposed to move. (Exhibit C, p. 3, p.9; Testimony DW)
 - The school nurse’s observation of a small bruise on S’s right shoulder and a small bruise on the center of the small of his back. (Exhibit C, p.1, p.4, p.9; Testimony DW)
 - S and S’s therapist statement that S told “the truth about his mother abusing him.”¹ (Exhibit C, p.3, p.6, p.9; Testimony Appellant)
17. In coming to its decision to add and support the allegation of neglect of S by the Appellant, the Department cited the following information:
 - S’s report that that Appellant had been “verbally and emotionally abusive to him.” The Appellant said things that were “hurtful to him and he receive{d} no support or positive reinforcement from her.” (Exhibit C, p.3, p.9; Testimony DW)
 - DA’s report that S told the truth when speaking about the Appellant “berating” S and telling him that he “won’t amount to anything.” The Appellant assumed no “responsibility” for her behavior. S was “fearful” of the Appellant and believed that she “hated” him. DA believed that the Appellant needed to “realize her current parenting style is not healthy for S.” (Exhibit C, pp.6-7; Testimony DW)
 - TG’s report that the Appellant had been “emotionally and verbally abusive” to S for an extended period; however, S had “protected” his mother. TG reported that the Appellant treated him in a similar fashion when they were married. (Exhibit C, p.2, p.9; Testimony DW)
 - The Appellant’s acknowledgement that she became frustrated with S when she had to repeat things over and over. The Appellant wanted “to raise {S} to be a man and a good grownup, not a lazy human who thinks the world owes him. She

¹ Counsel for the Appellant objected to DA’s statement that S “was telling the truth about his mother abusing him” wanting it stricken from the record as DA was not present for the reported altercation. (Fair Hearing Record)

stated her son is an entitled pampered child of divorced parents.” (Exhibit C, pp.4-5; p.9; Testimony DW)

18. According to the Appellant, when they resided in ██████████, MA, S “learned to be mediocre,” believing that it was acceptable to obtain grades of ‘C’ as these were average. According to the Appellant, S “has the ability to become whatever he wanted.” While in the ██████████ school system, S’s grades went from A+ to A-. The Appellant noted that S’s goal was to attend an Ivy League school as he was capable of doing the work. (Testimony Appellant) The Appellant informed DW that she did push S to do better as “things have been too easy for him.” S was “getting lazy and that has to stop now. He has to learn respect.” (Exhibit C, p.5)
19. According to the Appellant, S had a great deal of “attitude” and felt “entitled;” the Appellant was attempting to “cut the attitude” and have him work and earn things. (Testimony Appellant) According to the Appellant, since moving to ██████████, S turned into “a brat.” (Exhibit C, p.6) Up until a year prior, S “had been a good kid.” The Appellant denied that she verbally abused S. According to the Appellant, she herself had been verbally abused all of her life. The Appellant spoke of S’s disregard for her and there was “no parental respect.” (Exhibit C, p.5)
20. While neither TG nor DA filed a prior 51A report, (Testimony DW) both verbalized ongoing concerns regarding the Appellant’s mental health, parenting style and the resulting impact on S. (Exhibit C, p.2, pp.6-8) In addition to the aforementioned concerns, DA believed that “the problem is {the Appellant} is not stable herself.” S, TG and DA noted concern with the Appellant’s OCD. (Exhibit C, pp.2-3, p.6) According to DA, the Appellant “has the worst case of OCD.” The Appellant used an entire bottle of hand sanitizer at one time, resulting in red/raw hands. During sessions, the Appellant never sat down. The Appellant did not want S to sit down as she was concerned who had sat on the couch prior. (Exhibit C, p. 6) According to TG, the Appellant would not permit S’s friends to come to the house. S would get into trouble if he wiped the counter the wrong way. (Exhibit C, p.2)
21. Additionally, DA reported the Appellant was depressed and did not trust anyone. “When she is frustrated she makes everybody anxious.” For the preceding two (2) years, the Appellant adopted a “very strict” parenting style. The Appellant “lectures {S} about what he needs to do. She berates him and tells him that he won’t amount to anything.” S believed that his mother hates him. S “is highly intelligent but {the Appellant} cannot find anything kind to say about him. He is fearful of his mother.” The Appellant always found “fault” with S. The Appellant blamed DA for not addressing S’s anxiety and learning to respect her. DA welcomed DCF involvement, as the Appellant would not “listen to her or the school about her parenting techniques and the impact on S. DA observed positive changes in S since he went to reside with TG. (Exhibit C, pp.6-7) In light of DA’s long-term therapeutic relationship with the Appellant and child, due weight is given to her observations, assessment and opinions regarding the reported concerns.

22. In part, the Department based its decision-making on DA's aforementioned clinical opinions. Additionally, the Department considered S, TG and the school concerns for S and the Appellant's behaviors/interactions. The Department determined that the Appellant's actions impacted the child's emotional stability and growth, negatively affecting his self-esteem as he believed that he could never do anything right. Additionally, it resulted in S being "nervous and fidgety." (Testimony DW) DW observed S "had a nervous habit of playing with his hair or the back of his head during {their} conversation. At times he was nervous and twitchy." (Exhibit C, p.3)
23. S felt that nothing that he did pleased the Appellant. S detailed that many of the statements made by the Appellant were "hurtful" to him. (Exhibit C, p.3) The Appellant told him she had given him too much freedom and she did not care what DA or TG said. (Exhibit B, p.3)
24. According to TG and DA, the physical altercation between the Appellant and S was the "last straw" for S. Up until that point S was protective of the Appellant and did not want to leave her alone. (Exhibit C, p.2, p.6)
25. Based on the totality of the evidence, I find that the testimonial and documentary evidence was insufficient to determine that the Appellant's actions on April 3, 2017, constituted physical abuse per the Department's regulations and policies. While the Appellant was admittedly frustrated with S's lack of assistance during their move to a new residence, there was insufficient evidence to support that the Appellant was out of control or intentionally meant to harm S. While possible that S may have sustained the two (2) marks noted by school personnel during the reported incident, (Exhibit C, p.1, p.4, p.6, p.9; Testimony DW) I find that these marks did not cause or create a substantial risk of physical injury as defined by Departmental regulations and policy. 110 CMR 2.00; DCF Protective Intake Policy #86-015, rev. 2/28/2016
26. Based on the totality of the evidence, I find that the Department's decision to support the allegations of neglect of S by the Appellant was reasonable and made in compliance with the its regulations. The Appellant failed to provide S with minimally adequate care or emotional stability and growth. 110 CMR 2.00, 4.32(2) Additionally, the Appellant's actions placed S in danger or posed a substantial risk to the S's safety and well-being. DCF Protective Intake Policy #86-015 Rev. 2/28/16.

Applicable Standards

"Caregiver" is defined as:

- (1) A child's parent, stepparent or guardian, or any household member entrusted with responsibility for a child's health or welfare; or
- (2) Any other person entrusted with responsibility for a child's health or welfare, whether in the child's home, a relative's home, a school setting, a child care setting (including babysitting), a foster home, a group care facility, or any other comparable setting.

As such, the term "caregiver" includes, but is not limited to school teachers, babysitters, school

bus drivers and camp counselors. The "caregiver" definition should be construed broadly and inclusively to encompass any person who at the time in question is entrusted with a degree of responsibility for the child. This specifically includes a caregiver who is a child such as a babysitter under age 18. 110 CMR 2.00; DCF Protective Intake Policy #86-015, rev. 2/28/16

"Abuse" means (1) the non-accidental commission of any act by a caregiver which causes or creates a substantial risk of physical or emotional injury or sexual abuse to a child; or (2) the victimization of a child through sexual exploitation or human trafficking, whether or not the person responsible is a caregiver. This definition is not dependent upon location. Abuse can occur while the child is in an out-of-home or in-home setting. 110 CMR 2.00; DCF Protective Intake Policy #86-015, rev. 2/28/16

"Physical injury" is defined as death; or fracture of a bone, a subdural hematoma, burns, impairment of any organ, and any other such nontrivial injury; or soft tissue swelling or skin bruising depending on such factors as the child's age, circumstances under which the injury occurred, and the number and location of bruises. 110 CMR 2.00; DCF Protective Intake Policy #86-015, rev. 2/28/16

"Neglect" is the failure by a caregiver, either deliberately or through negligence or inability, to take those actions necessary to provide a child with minimally adequate food, clothing, shelter, medical care, supervision, emotional stability and growth, or other essential care; malnutrition; or failure to thrive. Neglect cannot result solely from inadequate economic resources or be due solely to the existence of a handicapping condition. 110 CMR 2.00; DCF Protective Intake Policy #86-015, rev. 2/28/16

"[A] presentation of facts which create a suspicion of child abuse is sufficient to trigger the requirements of §51A." Care and Protection of Robert, 408 Mass. 52, 63 (1990) This same reasonable cause standard of proof applies to decisions to support allegations under §51B. Id. at 64; M.G.L. c. 119, §51B "Reasonable cause" implies a relatively low standard of proof which, in the context of 51B, serves a threshold function in determining whether there is a need for further assessment and/or intervention. Id. at 64

"Reasonable cause to believe" means a collection of facts, knowledge or observations which tend to support or are consistent with the allegations, and when viewed in light of the surrounding circumstances and credibility of persons providing information, would lead one to conclude that a child has been abused or neglected. 110 CMR 4.32(2). Factors to consider include, but are not limited to, the following: direct disclosure by the child(ren) or caretaker; physical evidence of injury or harm; observable behavioral indicators; corroboration by collaterals (e.g. professionals, credible family members); and the social worker's and supervisor's clinical base of knowledge. 110 CMR 4.32(2)

A "support" finding of abuse or neglect means that there is reasonable cause to believe that a child(ren) was abused and/or neglected; and the actions or inactions by the parent(s)/caregiver(s) placed the child(ren) in danger or pose substantial risk to the child(ren)'s safety or well-being; or the person was responsible for the child(ren) being a victim of sexual exploitation or human trafficking. DCF Protective Intake Policy #86-015, rev. 2/28/16

“Danger” is defined as a condition in which a caregiver’s actions or behaviors have resulted in harm to a child or may result in harm to a child in the immediate future. DCF Protective Intake Policy #86-015, rev. 2/28/16

“Risk” is defined as the potential for future harm to a child. DCF Protective Intake Policy #86-015, rev. 2/28/2016

To prevail, an Appellant must show based upon all of the evidence presented at the hearing, by a preponderance of the evidence that: (a) the Department’s or Provider’s decision was not in conformity with the Department’s policies and/or regulations and/or statutes and/or case law and resulted in substantial prejudice to the Appellant, (b) the Department’s or Provider’s procedural actions were not in conformity with the Department’s policies and/or regulations, and resulted in substantial prejudice to the aggrieved party, (c) if there is no applicable policy, regulation or procedure, that the Department or Provider acted without a reasonable basis or in an unreasonable manner which resulted in substantial prejudice to the aggrieved party; or (d) if the challenged decision is a supported report of abuse or neglect, that the Department has not demonstrated there is reasonable cause to believe that a child was abused or neglected and the actions or inactions by the parent(s)/caregiver(s) placed the child(ren) in danger or posed substantial risk to the child(ren)’s safety or well-being; or the person was responsible for the child(ren) being a victim of sexual exploitation or human trafficking. 110 CMR 10.23; DCF Protective Intake Policy #86-015, rev. 2/28/2016

Analysis

It is undisputed that the Appellant was a caregiver for S. 110 CMR 2.00; DCF Protective Intake Policy #860915, rev. 2/28/2016.

The Appellant through Counsel disputed the Department’s decision to support the allegation of physical abuse of S. It was undisputed that the Appellant had been annoyed with S’s failure to assist her with the packing and moving to a new residence. The situation did not rise to the level of physical abuse. Whether the Appellant “nudged” S or used force when pushing S, the two (2) small marks observed on the child, did not cause or create a substantial risk of physical injury as defined by Departmental regulation 110 CMR 2.00. By all accounts, the physical interaction between the Appellant and S was an isolated event. Involved collaterals had no concerns for the Appellant being physically abusive to the child. The evidence presented was insufficient to determine that the Appellant’s actions constituted danger or risk as defined by the DCF Protective Intake Policy #86-015, re. 2/28/2016.

The second issue for resolution in the instant case was whether the Appellant’s actions constituted neglect per DCF regulations and policy. It was the intensity and the negativity of the Appellant’s parenting style and interaction with S, which raised concern for his well-being. S spoke in detail of the high expectations, ongoing negative and demeaning comments that the Appellant directed towards him. Additionally, the Appellant’s academic expectations for S were a reoccurring concern throughout the 51B response. S consistently and repeatedly spoke of the aforementioned to the involved professionals and to his father, TG. As a result, S felt nothing he

did was good enough for the Appellant. He felt unsupported by the Appellant and did not receive any positive reinforcement from the Appellant. As a result, S was afraid of the Appellant and did not want to return home; S believed the Appellant hated him.

S's stated concerns were corroborated by his father, TG, and the Appellant and S's long time therapist. This Hearing Officer gave weight to DA's concerns and observations of the Appellant. The extent that the Appellant's mental health issues influenced her parenting interactions remains questionable. According to DA, the Appellant was depressed, trusted no one and had a very severe case of OCD. DA stated the Appellant's parenting style was unhealthy for S. Additionally, the Appellant caused anyone around her to be anxious. DW observed S to be "nervous" and "twitchy" throughout their interview. According to DA, the Appellant assumed no responsibility for her behavior and placed blame on others. She would not hear or accept the observations and/or suggestions made by DA or the school. S, himself, was aware that the Appellant disregarded DA's suggestions

Reasonable cause" implies a relatively low standard of proof which, in the context of 51A, "serves a threshold function" in determining whether there is a need for further assessment and/or intervention. "[A] presentation of facts which create a suspicion of child abuse is sufficient to trigger the requirements of Section 51A." This same reasonable cause standard of proof applies to decisions to support allegations under 51B. Care and Protection of Robert, 408 Mass. 52, 63 (1990). As set forth in the Findings, and above, I find that the evidence presented was sufficient to support the Department's finding of neglect, wherein the Appellant failed to provide S with minimally adequate care, emotional stability and growth..." as delineated in 110 CMR 2.00, 4.32. The Appellant's ongoing and repeated actions, coupled with her inaction when failing to follow through with recommendations/suggestions made by the therapist, posed a substantial risk to the child's well-being. DCF Protective Intake Policy #86-015, rev. 2/28/16

The Appellant did not present persuasive evidence in this matter to allow for a reversal of the Department's support decision for neglect. The undersigned will not pass clinical judgment on the Department's broad discretion as delineated in the regulations.


Conclusion and Order

The Department's decision to support the 51A report of **physical abuse** on behalf of S by the Appellant is **REVERSED**.

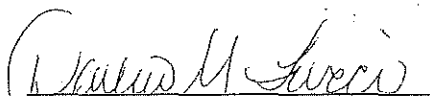
The Department's decision to support the 51A report for **neglect** of S, by the Appellant, is **AFFIRMED**.

This is the final administrative decision of the Department. If the Appellant wishes to appeal this decision, she may do so by filing a complaint in the Superior Court in Suffolk County, or in the county in which she resides, within thirty (30) days of the receipt of this decision. (See, M.G.L.

c. 30A, §14) In the event of an appeal, the Hearing Officer reserves the right to supplement the findings.


Carmen Temme
Administrative Hearing Officer

3/9/18
Date


Darlene M. Tonucci, Esq.
Supervisor, Fair Hearing Unit

Date

Linda Spears
Commissioner