

# **Department of Disabilities, Aging and Independent Living (DAIL) Developmental Disabilities Services Division (DDSD) Quality Assurance**

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# DAIL/DDSD Quality Assurance Staff

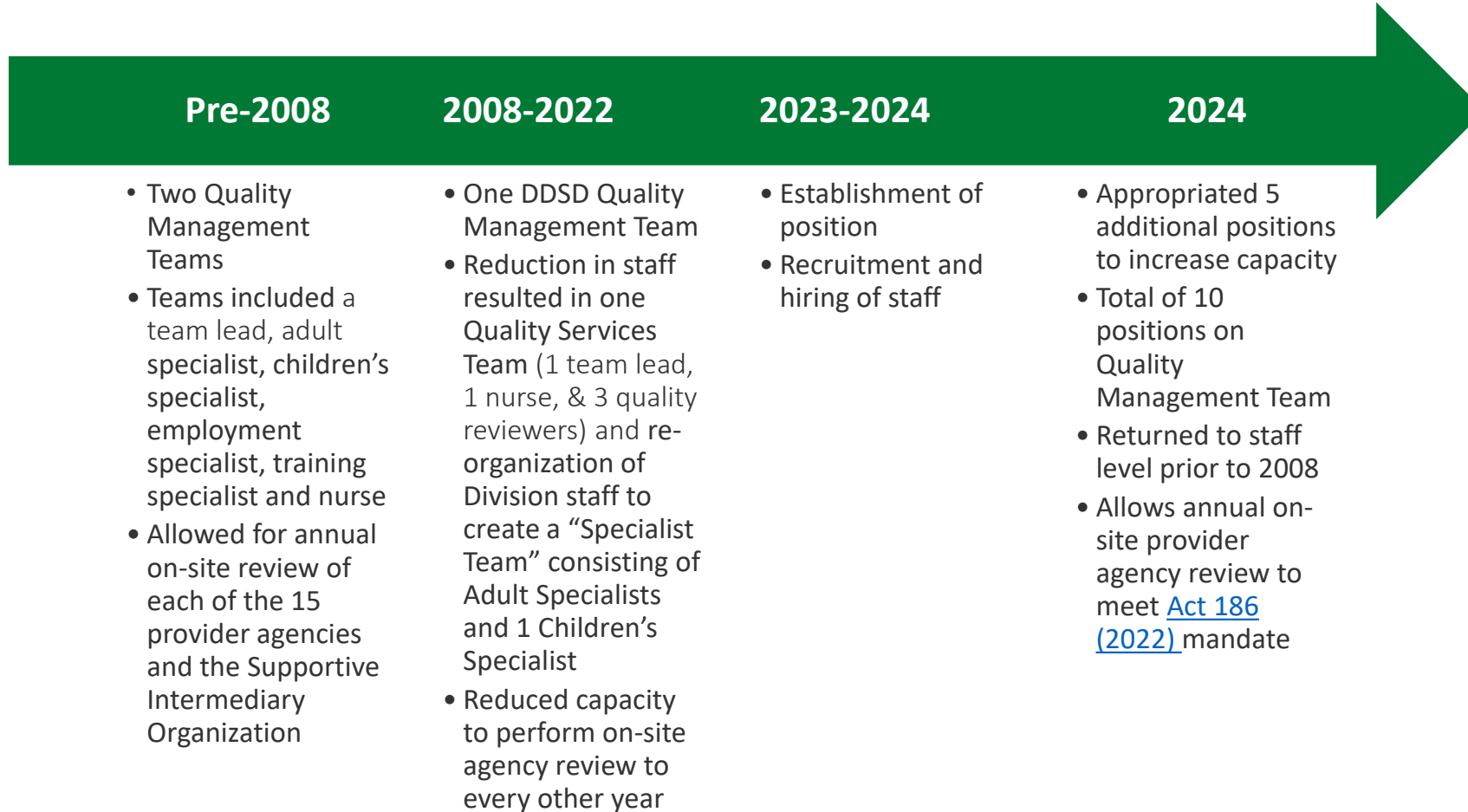
Included in V.S.A 18 204A §8723 (7) “maintain a statewide system of quality assessment and assurance for services provided to people with developmental disabilities and provide quality improvement support to ensure that the principles of service in section 8724 of this title are achieved

Quality Management Team consists of 10 Developmental Disabilities Services Division Staff

Current Structure (as of Jan 2025):

- 1 Quality Management Team Lead
- 7 Quality Management Team Reviewers
- 1 Quality Management Team Nurse Specialist (vacant since Sept 2024)
- 1 position under reclassification review

# DAIL/DDSD Quality Management Team



# Quality Assurance Responsibilities

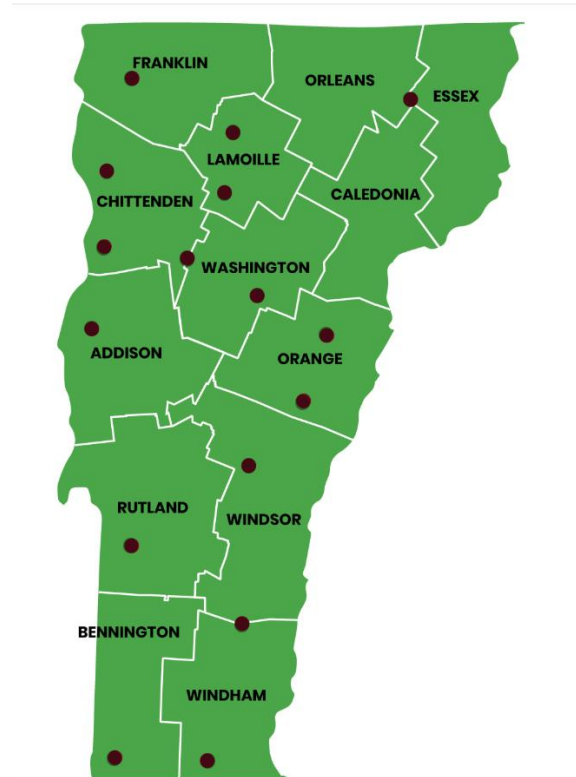
- Agency Designation
  - Review of each Designated Agency/Specialized Service Agency performed on a multi-year cycle
  - Designed to ensure needed services are available through local planning, service coordination, and monitoring outcomes within their geographic region.
- Critical Incident Reporting Monitoring
  - Monitor reports of critical incidents reported to the Department for individuals who receive services.
  - Incidents that must be reported include but are not limited to death, suspected abuse or neglect, medical emergency.
- Grievance Review
  - Performed within the requirements of the Health Care Administrative Rule ([HCAR 8.100](#))
- Housing Safety and Accessibility Review
  - Work to perform inspections for all residences of people with developmental disabilities (except those licensed through the Division of Licensing and Protection/DAIL or a public housing entity,
  - Enhanced by the addition of new Quality Management Team positions

# Quality Assurance Responsibilities (cont'd)

- Policy Development and Review
  - Participate in Department and Agency of Human Services level initiatives to create and review quality strategy and policy
  - Ensure compliance with Federal requirements
  - Develop best practices, and when practicable alignment across programs
  - Subject matter expertise related to case management standards and quality management expectations to develop policies related to Conflict-of-Interest compliance and Developmental Services Payment Reform
- Quality Service Reviews
  - Monitor and review the quality of services provided using Federal and State home and community-based services (HCBS) funding.
  - Ascertains the quality of the services provided by the Designated Agencies and Specialized Services Agencies and ensures that minimum standards are met with respect to DAIL and DDS guidelines and policies for developmental disabilities services
  - Returned to annual onsite Quality Services Review as of Calendar Year 2024
- Training and Technical Assistance
  - Formal training related to guidelines, rules, regulations
  - Technical assistances regarding specific situations, cases, and complex circumstances

# Agency Designation Review Process

- DAIL reviews 15 Developmental Services agencies
  - Including 1 Designated Agency and 5 Specialized Service Agencies
- Currently, performed on a 4-year cycle
- Shifting to 2-year cycle in Calendar Year 2025
- Administrative Rule on Agency Designation in process of update
  - Updates focus on language modernization and alignment with current practices
  - Revision from 2003
  - Presentation to Legislative Committee on Administrative Rules in February 2025



## Designated Agencies

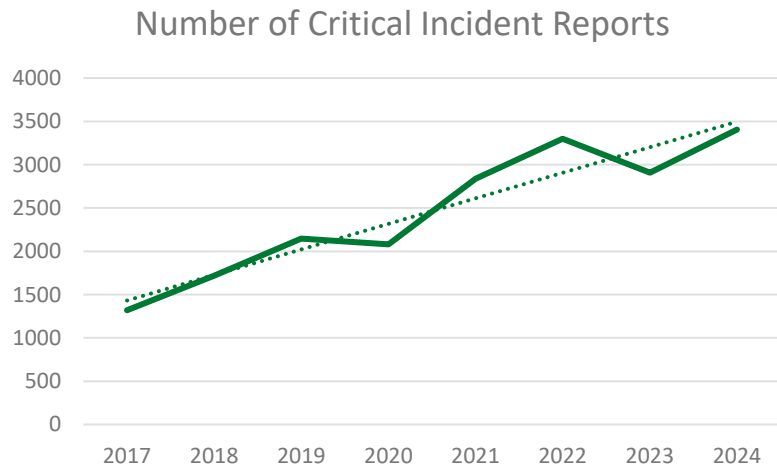
Counseling Services of Addison County  
Health Care and Rehabilitation Service  
Howard Center  
Lamoille Mental Health Services  
Northeast Kingdom Human Services  
Northwest Counseling and Support Services  
Rutland Mental Health Services  
United Counseling Services  
Upper Valley Services  
Washington County Mental Health

## Specialized Service Agencies

Champlain Community Services  
Families First of Southern Vermont  
Green Mountain Support Services  
Lincoln Street Inc.  
Specialized Community Care

# Critical Incident Reporting

- Reporting of incidents that occur for individuals receiving Home- and Community-Based Services
- Review and follow up with agency staff, as appropriate, by Quality Management Team



State Fiscal Year	Number of CIRs
2017	1319
2018	1716
2019	2147
2020	2079
2021	2837
2022	3299
2023	2909
2024	3405

# CIR Increase and Response

- Have seen steady increase in reported incidents over time
- Significant Increase in submissions in FY21 due to COVID Pandemic
- Continued to see increases in CIR submission as testing became more available
  - In response to pandemic, Team responded reporting and trends by increasing frequency of meetings with provider agencies
  - Met with agencies on a weekly basis during active stage of COVID-19 response
- Additional causes contributing to increased incidents in Developmental Services HCBS programs:
  - Increased age of population served
  - Increased acuity of the care needs of individuals engaged in services
  - Challenges related to Health-Related Social Needs and inflationary pressures
- Increased awareness of CIR submission requirements due to CMS Assurances, value-based payments, increased interactions with Quality Management team members.
- CIR follow up process where Quality Management members interact directly with agency staff regarding specific incidents.
- Identifies areas for training (behavior supports, trauma informed care, CIR submission, etc.)



# Quality Service Review Process

## Outcomes are measured through:

- Records review
  - Comprehensive review of Electronic Medical Record
  - Assess quality of records such Individual Support Agreement, Needs Assessment, Behavior Support Plan, Communication Plan, etc.
  - Determine compliance with State and Federal rules and regulations
- Interviews with individual engaged in services, family/guardian (if applicable), Service Coordinator, Direct Service Providers/Independent Direct Support Workers

# DAIL/DDSD Quality Service Review: Survey Outcomes

1. **Respect:** Individuals feel that they are treated with dignity and respect.
2. **Self-Determination:** Individuals direct their own lives.
3. **Person-Centeredness:** Individuals' needs are met, and their strengths are honored.
4. **Independent/Interdependent Lifestyle:** Individuals live and work as independently and interdependently as they choose.
5. **Relationships:** Individuals experience positive relationships, including connections with family and their natural supports.
6. **Participation:** Individuals participate in their local communities.
7. **Well-Being:** Individuals experience optimal health and well-being.
8. **Communication:** Individuals communicate effectively with others.

# Systems Outcomes

Determined through comprehensive review of Electronic Records

The Quality Management Team consistently noted the need for agencies to improve timeliness of assessments and service plans; and personalization of ISAs accordance with the Individual Support Agreement Guidelines.

- Strategies for documentation include:
  - Technical Assistance around measurable outcomes with the data to be collected and tracked to show progress clearly identified and relevant to the goal of outcome,
  - Completed outcome reviews performed on the timeline identified in the ISA, and
  - Timely and complete Needs Assessments/Periodic Review of Needs.
- Internal quality assurance for staff continuous development and continuous improvement, and mentoring, especially for effective supervision and mentoring, especially for service coordinators

Outcomes and trends drive technical assistance and trainings offered by Developmental Disabilities Services Division staff to provider agencies.

Quality Management Team offer training, at least annually, on Individual Support Agreement (ISA) guidelines to address the identified need.

Conflict-Free Case Management will bring specialized organization with increase capacity to focus more intensively on person-centered planning and timeliness of assessments.

Payment Reform will provide increased transparency and accountability.

# Quality Management Team CY2024 Improvement Planning

## Lessons Learned From Previous Years' Efforts:

- Two-year quality review cycle is too long
  - Need to work more frequently to identify and address issues as they arise
- Minor issues can turn into broader systematic challenges if not reviewed and addressed more frequently
- Length of time between resolving quality concerns can lead to areas of importance requiring attention through a Plan of Correction
  - May also impact an agency's designation process
- Trends largely showed issues with administrative and case management related activities

# Quality Assurance and Conflict-of-Interest and DS Payment Reform Initiatives

- Considered impact and timing of Conflict-of-Interest to develop interim quality assurance process
  - Implementation of Conflict-of-Interest results in changes in roles and responsibilities performed by provider agencies
  - Activities such as intake, eligibility, person-centered planning, Individual Support Agreement development and annual review, Needs Assessment and Periodic Assessment of Needs, will transition from the Designated Agency (DA)/Specialized Service Agency(SSA)
  - Independent parties will perform these activities within the Developmental Disabilities Services system to decrease partiality/perception of partiality within the system and meet federal compliance
- Factor implications of Developmental Disabilities Payment Reform into processes
  - Future model will approach Needs Assessment, funding proposals, and plan development through different method than current state
  - Will need to consider quality of Intake/Eligibility/Referral team, Needs Assessors, and Case Management Entity/Entities, as well as the Direct Service Organizations (DA/SSAs)

# CY 2024 Quality Service Review - Interim Process



## Average of monthly on-site review of services at each agency

Ensures adherence with statutory requirement for annual onsite quality review of each provider's services

Provides increased technical assistance, training and onsite presence at provider agencies

Each review follows the same process: individual chart review as well as interviews with individual and appropriate circle of support

81 individuals received a Quality Services Review in Calendar Year 2024



## New staff hired came with high level of experience and aptitude

New team members were hired in early 2024 (January and February)

Staff hired with variety of experience working in the Developmental Disabilities Services field



## Developed Interim Quality Review Process to address systems change

Identified a process to review services, on average monthly, at each agency

Balance the need to monitor quality of services with the upcoming changes related to Conflict-of-Interest

Interim process allows for "real time" feedback regarding agency services and areas in need of improvement

More frequent visits provides opportunities to work with service coordinators to improve processes and compliance



## Received positive response to Interim Quality Review Process

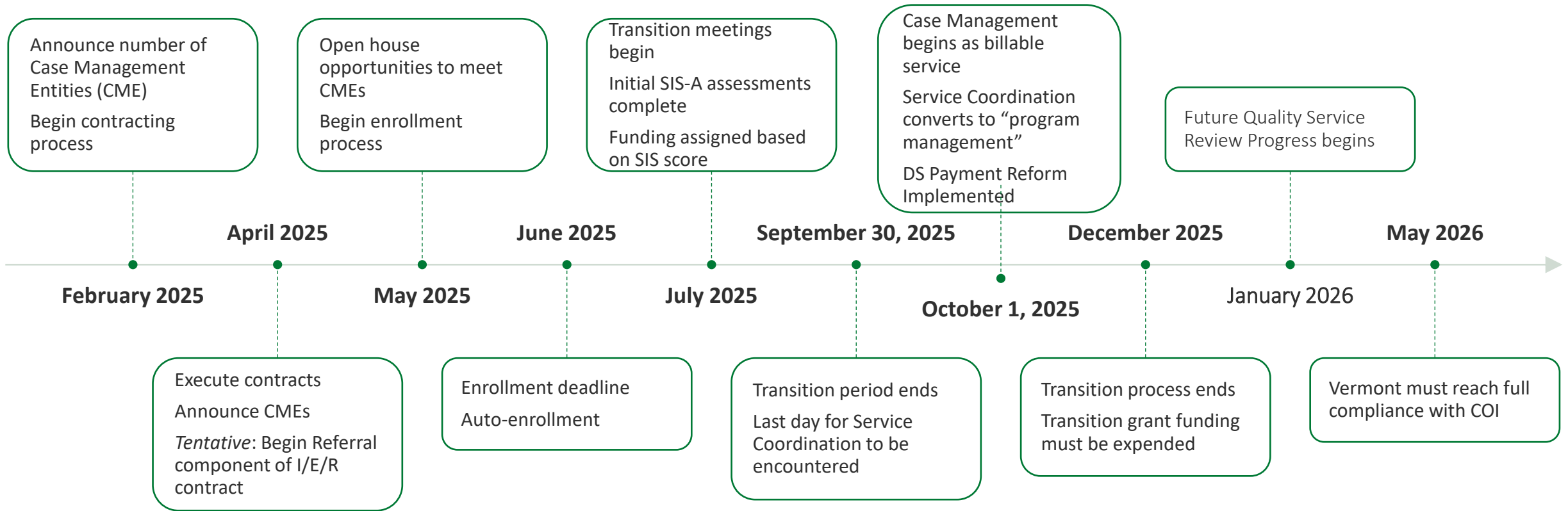
Allows for faster turnaround for feedback and corrective action

More nimble and responsive for agencies related to workforce shortage

Address challenges while spending less time responding to review process by the agency

# Future Quality Service Review Process

- Expansion of interim quality review process
  - Will include gathering input from key partners such as Green Mountain Self-Advocates (GMSA), Vermont Developmental Disabilities Council, Developmental Disabilities Services State Program Standing Committee
  - Leverage existing outcomes
  - Use both qualitative and quantitative metrics
- Maintain annual onsite review
- Expand Review Processes to all necessary organizations
- Minimum sample size of 10% of agency Home- or Community-Based Services participants or 40-person survey cap
- Revised summary report
  - Streamlined approach
  - Written in plain language
- Develop quality rating system and scorecard to allow increased transparency



# Future State Timeline for COI, Payment Reform and Quality Assurance