

**Sources of Quality Assurance and Protection  
for Citizens with Developmental Disabilities  
2018**

There are multiple sources of quality assurance and protection for Vermonters with developmental disabilities. There is great value in having a multi-faceted system of quality assurance, and the participation of numerous people in quality promotion activities is a strength. In Vermont, the overall quality assurance system includes, at a minimum, the following components:

**I. Within the Department of Disabilities, Aging and Independent Living (DAIL):**

**A. Designation Process.** DAIL designates one agency in each region of the state to ensure needed services are available through local planning, service coordination, and monitoring outcomes within their geographic region. The Designated Agency must either provide directly or contract with providers or individuals to deliver supports and services consistent with available funding; the state and local System of Care Plans; outcome requirements; and state and federal regulations, policies and guidelines.

- B. Agency Reviews.** Six staff (5.5 FTEs), including a registered nurse, conduct on-site reviews to assess the quality of services provided. The Quality Management Reviewers assess Medicaid funded services to ensure compliance with state and federal Medicaid standards and the outcomes detailed in the *Guidelines for Quality Review Process*. Site visits are conducted every two years with follow-up as appropriate.
- C. Office of Public Guardian.** There are twenty-eight (28) staff at the Office of Public Guardian, 24 of whom are full-time guardians who provide services as specified by law to about 755 adults with developmental disabilities and/or older Vermonters (age 60 and over). This includes the Director, five Regional Supervisors (with full caseloads), Program Technician, Intake and Diversion Specialist for Older Vermonters, and Financial Specialist who provides representative payee services. Public Guardians play distinct quality assurance functions, including on-going monitoring of people's welfare, assessment of quality of life and functional accessibility, participation in individual support plans, and advocacy for appropriate services. Public Guardians are expected to have contact with people for whom they are guardian at least once a month and are available for emergencies 24 hours a day.
- D. Safety and Accessibility Checks.** All residences of people with developmental disabilities (except those licensed through the Division of Licensing and Protection/DAIL or a public housing entity) funded by the Developmental Disabilities Services Division are inspected for compliance with safety and accessibility standards.
- E. Consumer Surveys.** The Developmental Disabilities Services Division contracts for independent statewide consumer interviews to take place on a regular basis to measure the satisfaction of people receiving services.
- F. Critical Incident Reporting Process.** Developmental service providers provide critical incident reports to the Developmental Disabilities Services Division when certain

incidents take place, such as the death of someone receiving services; use of restrictive procedures; allegations of abuse, neglect or exploitation; or criminal behavior by or against someone receiving services.

- G. Grievance and Appeals.** Each developmental service provider must have written grievance and appeals procedures and inform applicants and service recipients of that process. Both informal and formal grievance and appeal processes are available to people applying for or receiving DDS, their family members, guardians and other interested individuals.
- H. Ethics Committee.** An Ethics Committee convenes on a regular basis to review any critical health care decisions to abate life-sustaining treatment or advance care planning by Public Guardians for adults with developmental disabilities for whom they are guardian.
- I. Human Rights Committee.** A Human Rights Committee meets monthly to review policies, procedures, trends and patterns, individual situations and positive behavior support plans to safeguard the human rights of Vermonters receiving DDS. The committee provides an independent review of any restrictive procedures while assisting individuals and agencies to develop alternatives to restrictive procedures.
- J. Intermediate Care Facility for People with Developmental Disabilities (ICF/DD).** The ICF/DD is licensed and monitored under federally specified guidelines by nursing staff of the Division of Licensing and Protection/DAIL. The Developmental Disabilities Services Division conducts Utilization Reviews to determine whether continued stay is appropriate and necessary for each person residing in an ICF/DD.
- K. Residential Care Home Licensure.** The Department of Disabilities, Aging and Independent Living licenses residences where three or more unrelated people with disabilities live.

**L. Vocational Rehabilitation Services.** Vocational rehabilitation services, (as opposed to Medicaid-funded supported employment), are provided and reviewed by the Division of Vocational Rehabilitation /DAIL.

## **II. Elsewhere in State Government:**

**A. Abuse Complaints.** The Department for Children and Families and the Department of Disabilities, Aging and Independent Living handle complaints of abuse, neglect and exploitation for children and adults, respectively. Most human service workers, including Developmental Disabilities Services Division staff, are legally mandated to file an immediate report of any suspected abuse, neglect or exploitation of a child or vulnerable adult. For adults with disabilities, Adult Protective Services staff conduct independent investigations of each complaint and pursue legal or other recourse as indicated by the needs of the individual.

**B. Fire Safety Regulation.** Staff of the Department of Labor must approve all Level III Residential Care Homes and ICF/DD facilities. Facilities must meet appropriate standards of the National Fire Safety Code.

**C. Medicaid Fraud Unit.** This Unit investigates allegations of criminal activity, including abuse, neglect or exploitation, in any Medicaid-funded facility or involving a person receiving Medicaid-funded supports. The Medicaid Fraud Unit is a specially staffed unit within the Office of the Attorney General.

## **III. Within Developmental Disabilities Services Agencies:**

**A. The Individual's Circle of Support.** Each person applying for or receiving services is encouraged to develop a circle of support. If they do not already have a circle, the service provider can help them form one. The circle is a group of people who helps the individual identify his/her dreams, takes responsibility to help the person create

his/her plans and budgets, and determine the quality of his/her life. The primary focus of the circle is on the individual and what that person wants and needs. A circle of support is the ultimate safety net for that person.

- B. Local Program Standing Committee.** Each designated agency and service provider has a local standing committee that is made up of at least 51% consumer and families, of which 25% must be direct consumers. The purpose of the Local Program Standing Committee is to involve people receiving services in planning and decision-making regarding policies in order to increase consumer satisfaction, service and support quality, and organizational responsiveness.
- C. Internal Mechanisms.** All developmental service agencies have some level of an ongoing quality improvement process as well as internal quality assurance, such as a Human Rights Committee, peer review and Local Program Standing Committee oversight. The specific design and intensity of these efforts vary from agency to agency.
- D. Service Coordination.** Service coordination assists individuals in planning and accessing services. It can be instrumental in helping individuals obtain and maintain services, as well as developing and implementing the Individual Support Agreement; coordinating medical and clinical services; and maintaining a case record, among other things.

#### **IV. External to the Service System:**

- A. State Program Standing Committee for Developmental Disabilities Services.** The State Program Standing Committee for DDS was created by statute in 1990, (and updated through regulation in 1998), and is required to have at least 51% of its membership consumer and families. The Governor appoints this committee of people with developmental disabilities, family members, advocates, and people with

professional/advocacy expertise in the field of developmental disabilities. The committee meets monthly as a working advisory group to the Developmental Disabilities Services Division.

- B. Vermont Developmental Disabilities Council.** A broad-based, federally mandated board that provides independent oversight and systemic advocacy for the needs of people with developmental disabilities.
- C. Protection and Advocacy System.** Disability Rights Vermont (DR-VT) is a non-profit agency that has been designated by the governor to be the “protection and advocacy” (P&A) system for the state of Vermont. As such, DR-VT is federally funded to investigate abuse, neglect and rights violations of people with disabilities and to advocate for positive systems change. DR-VT contracts with the Disability Law Project (DLP) of Vermont Legal Aid to serve people with developmental disabilities and both organizations act independently of state government or providers. Services from informal lay advocacy to formal legal representation are available statewide through the P&A system by contacting either DR-VT or Vermont Legal Aid. The Vermont Long Term Care Ombudsman help protect the health, welfare and rights of individuals who live in long-term care facilities.
- D. Regional ARC Organizations.** There are three counties (Franklin, Rutland, Washington) with local ARC offices that provide information and a focus for families and concerned members of the public to identify and respond to the needs of people with developmental disabilities.
- E. Family Advocacy.** Vermont Family Network (VFN) is a statewide non-profit organization which promotes better health, education and well-being for all children and families, with a focus on children and adults with special needs. Family Support Consultants, including regional staff, support families and individuals by providing connections, information, and assistance navigating health, education,

state and federal systems. VFN also provides early intervention services and promotes family voices through leadership opportunities.

- F. Self-Advocacy.** Green Mountain Self-Advocates, a statewide self-advocacy group, works to empower people with disabilities to learn to make decisions, solve problems, speak for themselves, and to exert control over their own lives. It is committed to educating and making the general public aware of the strengths, rights and desires of people with disabilities, including legislators and state and local policy makers. They also support local self-advocacy chapters around the state.
- G. Other Advocacy Groups.** There are other locally-based groups of concerned families and advocates.
- H. Law Enforcement Agencies.** In recent years, many local and state police have received training in the techniques of interviewing people with developmental disabilities who are victims of crime. The traditional sources of citizen law enforcement—the police, State's Attorney's, and Attorney General's offices—have played an increasingly effective role in protecting citizens with developmental disabilities who may become victims of crime.
- I. Criminal Penalties.** Vermont law makes it a crime to abuse, neglect or exploit a person with a disability. The Office of Attorney General will prosecute for violations of this law.
- J. The Federal Government.** Through Medicaid audits and look-behind surveys, the federal government provides a back-up system of quality assurance.
- K. Concerned Members of the Public.** These include interested professionals (e.g., physicians, psychologists), members of the academic community, legislators, etc., who express their concerns through traditional channels of professional, administrative and legislative communication.

**L. Above all, individual friends, family members, guardians, coworkers, neighbors.**

Friends, family and neighbors provide for individuals in community settings the most important and dependable source of monitoring and advocacy – someone that will “go to bat” for you if things are not going well.