



State of Vermont
Developmental Disabilities Services Division
280 State Drive/HC 2 South
Waterbury, VT 05671-2030
www.dds.vermont.gov

Agency of Human Services

[phone] 802-241-0304
[fax] 802-241-0410

To: Designated Agency and Specialized Service Agency Directors

From: Jennifer Garabedian, DDSD Director *JLG*
Jeff Nunemaker, DDSD Assistant Director *JN*

Date: February 16, 2024

Re: DDSD Interim Quality Services Review Process--**UPDATED**

Attached please find the **updated** Interim Quality Services Review Process, effective January 2024 through July 2025. This version reflects input that we have received and is updated as of February 13, 2024.

Please feel free to contact your lead Quality Management Unit Reviewer if you have any additional questions.

Thank you.



Interim Quality Review Process January 2024 - June 2025

From January 2024 through June 2024, the Quality Review Team will be reviewing the HCBS funded services and supports of one (1) individual per agency every other month (total of three (3) individual reviews during that period).

The lead reviewer will contact the agency two weeks in advance notifying them of the individual whose services are being reviewed. The agency will provide access to the Electronic Health Record or submit the required documentation to the quality reviewer within two business days.

From July 2024 through June 2025, the Quality Review Team will be reviewing the HCBS funded services and supports of three (3) individuals each quarter (total of twelve (12) individual reviews per agency during that period). The Quality Review Team will prepare a list of possible individuals for the samples for each quarter. The Quality Review Team will have the final decision on who is chosen in the sample.

From January 2024 to June 2025 Agencies will be able to select two (2) individuals from the 15 total whose services are to be reviewed.

The lead reviewer will meet with the agency at the beginning of each quarter to work with the agency to schedule the reviews. Generally, the reviewer will be on-site at the agency on the day of the review(s). For individuals that reside in shared living, group living or staffed living models, the reviewer will make a visit to the home to meet with the individual. For individuals that reside in their family home or live independently in a location/format preferred by the individual.

The agency will provide access to the Electronic Health Record or submit the required documentation to the quality reviewer within two weeks after the sample is selected. Once the agency receives the individual review report, the agency can terminate access for the individuals chart.



The list of documents to be reviewed include, but are not limited to:

- Emergency Fact Sheet
- Medical Documentation (If Medical Review)
- Initial Persons Story and all Person Story Updates
- Needs Assessments/Periodic Reviews
- Current and Previous ISA (ISA Reviews, ISA changes, ISA extensions, etc.)
- Authorized Funding Limit Sheet
- Any support Plan or Attachment associated with the ISA (Behavior Support Plan, Community Safety Plan, Communication Plan, Special Care Procedure, etc.)
- Outcome Reviews for Current and Previous ISA
- Public Safety Documentation (If Applicable)
- Home Visit Documentation
- Housing Safety inspection
- Peggy's Law Form
- Legally Binding Residential Agreement
- Documentation of Person-Centered Planning Process for Setting Rule Guidance

The lead reviewer will generally be on-site at the agency the day of the review. The reviewer will meet with the service coordinator, and staff that the agency would like to be present, to discuss the documentation reviewed as well as the services/supports provided to the individual. Examples of Positive Practice or Necessary Changes may be included in the discussion.

The reviewer will submit a review report to the agency within two weeks of the interview. The reviewer will notify the agency if there are any delays in the report for extenuating circumstances. The review report will include the areas that require corrections or changes. The review report will also contain a brief narrative highlighting examples of positive practices or recommendations, if applicable. The agency is required to respond to necessary changes with a plan of correction within two weeks of receiving the review report.

An annual quality services review report will be generated and provided to each agency within 45 days of the agency receiving the letter of acceptance from their response to the last individual review for that calendar year. Please refer to the Quality Management Guidelines for the Plan of Correction process.

