# CEAG Annual Plan 2025: Advancing Community Life Engagement (CLE) Across Virginia

The Community Engagement Advisory Group (CEAG) is committed to transforming how individuals with developmental disabilities (DD) experience life in their communities. This plan outlines a strategic roadmap through 2026 to build understanding, remove barriers, and expand access to meaningful Community Life Engagement (CLE) by September 2026.

## Long Term Outcome I. Empower Stakeholders to Champion CLE

We aim to create a shared vision of CLE where individuals with DD are not just present in their communities, but actively engaged in ways that reflect their interests, strengths, and goals.

# Strategy 1: Build a shared understanding of CLE through in-person training.

### Goal 1:

Train at least 150 community partners (support coordinators, providers, individuals, families, and state agency staff) by September 2026.

### Outcome:

86% of participants demonstrate increased CLE understanding through pre and post-test surveys.

#	Lead(s)	Activities	Tasks	Deliverable(s)	Outcome(s)	Due Date
1	• CEAG	Incorporate community	CEAG Training and	Training slides,	Statewide standardized CLE	December 31,
	Education	partner input into	Education Committee	Training schedule,	training developed	2025
	and Training	standardized CLE	and DBHDS staff will	Pre-test survey in MS Forms,	incorporating community	
	Committee	training slides based on	prepare slide content	Post-test survey in MS Forms	feedback.	
	<ul> <li>DBHDS Staff</li> </ul>	national CLE standards	based on national CLE			
		for community and	standards, which will be		Trainings are scheduled and	
		state partners.	shared with select CSB,		announced.	
			provider, and			
			individual/family		Pre and post tests are	
			representatives for		prepared.	
			input.			
			CEAG Training and			
			Education Committee			
			and DBHDS staff will			

				finalize training slides and update notes/narrative.  Develop pre and post test surveys to determine increases in knowledge and understanding of CLE.			
2	•	DBHDS Staff	CLE in-person training is delivered in-person in an interactive format by DBHDS.	Training space is located, dates are selected, and CLE Training is scheduled for 2025 and advertised through DBHDS listservs and the DS Council.  Training is formatted and sent for posting to DBHDS LMS website following completion of in-person events.	At least three CLE Training events.	Trainings are held for support coordinators, providers, individuals and families and state agency staff.  CLE trainings are completed.  Tests are completed and analyzed to determine success.	March 31, 2026

Strategy 1: Q1 Status

Step 1

Step 2

# Strategy 2: Increase awareness and understanding of CLE though personal stories

## Goal 2:

By December 31<sup>st</sup>, 2025, record and post an on-demand video training for CLE that includes stories from people with lived experience.

# Outcome:

• CLE video developed, recorded, posted online, and announced by June 30, 2026.

#	Lead(s)	Activities	Tasks	Deliverable(s)	Outcome(s)	Due Date
1	CEAG     Education and     Training     Committee     DBHDS Staff	DBHDS and CEAG Education and Training Committee will develop a CLE video that incorporates the four pillars of CLE and includes perspectives of people with lived experience that can be provided to a diverse representation of DD community partners.	DBHDS staff and community partners will record narration for slides.  CEAG Training and Education Committee and DBHDS staff will identify resources to record video from individuals with lived experience and then edit the narrated PowerPoint with video content.	Draft video	Community partners contribute stories, which are incorporated into a draft video for final editing.	April 30, 2026
2	CEAG     Education and     Training     Committee     DBHDS Staff	DBHDS and CEAG Education and Training Committee will finalize CLE video	CEAG Training and Education Committee and DBHDS staff will finalize video by June 2026.  Final video is edited and posted to DBHDS website.	Final video	Final video is announced and available of the DBHDS DS website and LMS system.  Support Coordinators and Providers/DSPs are aware of CLE video and resources.	June 30, 2026

Strategy 2: Q1 Status

Step 1:

### Step 2:

DBHDS met with advocacy stakeholders to determine review of existing recorded content and solicitation of volunteers to record their lived CLE experiences. As of 8/14/2025 a solicitation has been distributed via the Arc of VA for individuals interested in recording stories about Community Life Engagement along with review of existing recorded content.

A DBHDS CRC trainer/presenter has been identified. Voice-overs will be scheduled within the next month.

As of 8/14/2025, the CLE provider training has been recorded and is currently undergoing leadership review. Once the recorded content is approved, individual and family and provider stories will be edited into the video.

As of 8/14/2025 TBD after recorded video content is finalized with input incorporated.

# Strategy 3: Include meaningful community life engagement conversations in provider policies and practices

### Goal 3:

By March 31<sup>st</sup>, 2026, support at least five provider organizations and two state agencies to incorporate CLE standards into their organizational policies and practices, as well as establish a method to confirm provider implementation within their programs.

#### Outcome:

• At least 86% (6/7) of participating agencies incorporate policies and practices that align with CLE standards as assessed through Quality Service Reviews (QSR).

#	Lead(s)	Activities	Tasks	Deliverable(s)	Outcome(s)	Due Date
1	<ul> <li>CEAG Policy Committee</li> <li>DBHDS staff</li> </ul>	Prepare and send evaluation criteria to DBHDS for inclusion in QSR reviews.	Review current community elements in QSR Round 7 to determine question enhancements.  Organize and share suggestions to DBHDS for consideration in Round 8.	Draft QSR language.	Suggestions are incorporated into QSR Round 8.	November 2025
2	CEAG Policy     Committee     DBHDS staff	Develop and pilot CLE conversation tools and other helpful resources as determined by committee members in collaboration with community partners.	Determine needed tools and develop in plain language versions to be accessible all DD community and state partners in Virginia.	CLE conversation guides and resources.	Tools are identified and developed.	March 31, 2026

3	CEAG Policy	Recruit and train	Send interest surveys to providers	Participation survey.	Providers are identified,	July 31, 2026
	Committee	participating	and state agencies to	Presentation materials.	trained, and supported to	
	• CEAG	agencies.	communicate expectations and	Example policies and	incorporate CLE.	
	Education and		secure participation.	practices.		
	Training				Learning from the pilot is	
	Committee		Schedule training session to share	Additional materials as	used to refine and develop	
	<ul> <li>DBHDS staff</li> </ul>		CLE standards, provide examples,	needed following pilot.	additional materials for	
			and discuss methods of		systemwide use.	
			incorporating standards into			
			policies and practices.			
			Establish procedures and provide			
			technical assistance as needed or			
			requested to support agency			
			development and			
			implementation.			

Strategy 2:	Status
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Step 2:

Step 3:

# Strategy 3: Include meaningful community life engagement conversations in planning

**Goal 4:** By November 30, 2025, update Virginia's ISP specifications related to the integrated community involvement (ICI) conversation to redefine ICI as a component of CLE.

## Outcome:

• Specification language is drafted with community partner input by November 2025.

#	ŧ	Lead(s)	Activities	Tasks	Deliverable(s)	Outcome(s)	Due Date
1	L	<ul> <li>CEAG Policy</li> </ul>	Prepare and send	Review current ISP elements,	Draft specification	Draft complete and	November 2025
		Committee	specification	determine needed revisions, draft	language.	submitted.	
		<ul> <li>DBHDS staff</li> </ul>		language and submit to DBHDS.			

		language updates to DBHDS.				
2	DBHDS staff EHR vendors CSB staff	Finalize specifications, test, and release ISP.	Incorporate suggestions into draft specifications.  Refine with EHR vendor group.  Proceed with testing and release of updated ISP.	Specifications finalized; ISP released.	ISP released for use that incorporates CLE.	May 1, 2026

Strategy 3: Status

Step 1:

Step 2:

Long Term Outcome II: Identify and document the root causes of Community Life Engagement (CLE) service barriers as reported by providers, to inform and develop targeted, quality-driven initiatives that address systemic challenges and improve service delivery.

We believe that understanding provider-reported barriers is essential to fostering inclusive, person-centered community engagement. By listening to those delivering services, we can co-create solutions that elevate quality, equity, and access for all individuals supported.

Strategy 4: Identify and address the root causes of barriers to the delivery of Community Engagement (CE), Community Coaching (CC), and Community Guide services under the DD Waiver (DDW), using data-driven approaches.

### Goal 4:

By September 30, 2026, using data collected through the DBHDS Community Engagement and Community Coaching Quality Improvement Initiatives (QII), identify the top five provider-reported barriers to delivering CE, CC, and Community Guide services. Share findings and mitigation strategies with providers

#### Outcome:

• At least 75% of participating providers reporting an improved understanding of the barriers and actionable strategies to address them, as measured by post-engagement surveys.

#	Lead(s)	Activities	Tasks	Deliverable(s)	Outcome(s)	Due Date
1	Committee r	Analyze provider- reported data and prepare findings.	Analyze provider-reported data from CE and CC QII initiatives.  Identify and categorize the top five recurring barriers.  Create a summary report and visual aids (e.g., infographics, slide decks) outlining key barriers and mitigation strategies.  Tailor report for different provider types (e.g., rural vs. urban, small vs. large agencies).	Data summary report	Report completed for distribution.	October 31, 2025
2	Committee o	Distribute findings, offer technical assistance, track participation.	Design and distribute a pre- and post-session survey to measure provider understanding and confidence.  Offer optional technical assistance or office hours for providers seeking help implementing strategies.  Track participation and feedback for continuous improvement.  Feedback from CLE survey used to develop a statewide QII targeted to those areas identified by providers in the survey to remediate barriers.	Survey, Tracking method for participation, QII draft	QII drafted based on findings from provider report review and related technical assistance.	January 31, 2026

### **Strategy 4: Q1 Status**

### Step 1:

Additional SME added to help address technical issues with the survey.

Survey draft #4 completed and sent to CEAG for a second test. 12 members completed the survey.

As of 8/14 Survey completed, tested and approved for distribution.

Reconciling provider contact information to be able to distribute the survey.

## Step 2:

Long-term Outcome III: A sufficient and geographically diverse network of providers is consistently and successfully implementing Community Engagement services across all regions of the state, ensuring equitable access and quality for individuals receiving DD Waiver supports.

We believe that every individual receiving DD Waiver services deserves equitable access to meaningful community engagement, regardless of where they live. By cultivating a geographically diverse and capable network of providers across all regions, we affirm our commitment to inclusion, person-centered practices, and the right to full participation in community life.

### Goal 5:

By September 30, 2026, increase the number of DD Waiver providers delivering Community Engagement services in underserved regions.

### Outcome:

• There is a 20% increase in CE providers in underserved areas as determined by the DBHDS Provider Data Summary, and at least 85% of those providers demonstrate compliance with person-centered, community-based service delivery standards, as measured through QSR reviews.

Strategy 5: Strengthen provider capacity and regional equity by identifying underserved areas, offering targeted technical assistance, and promoting best practices in Community Engagement service delivery to expand access and ensure consistent, person-centered implementation statewide.

#	Lead(s)	Activities	Tasks	Deliverable(s)	Outcome(s)	Due Date
1	<ul><li>CEAG Policy Committee</li><li>DBHDS staff</li></ul>	Complete data analysis	Use Provider Data Summary and service utilization data/geographic mapping to	Data report.	Data is aggregated and summarized to communicate gaps in CE	January 31, 2026
			identify underserved regions with limited or no Community Engagement (CE) service		services in underserved areas.	
			providers.  Prioritize regions based on		A written report is completed to summarize the findings for sharing with	
			population need, provider		midnigs for sharing with	

		availability, and historical service gaps.		current and potential CE providers.	
CEAG     Education and     Training     Committee      DBHDS staff	Engage the community.	Host targeted outreach sessions to engage existing providers in underserved areas.  Offer incentives (Jump-Start Funding) and/or technical assistance to encourage new provider enrollment or expansion in CE services.	Session schedule.  Communication re: invite.	Outreach sessions are scheduled and held to communicate data report finding and encourage provider growth.  A method of technical assistance is determined and implemented.	June 30, 2026

## Strategy 5: Q1 Status

**Step 1:** CLE team is reviewing data as part of the data summary report to determine baseline number of providers and individuals served.

## Step 2:

# Strategy 6: Increase service use.

## Goal 6:

Increase the percentage of individuals receiving DD Waiver services who are actively participating in meaningful Community Engagement (CE) services.

### Outcome:

• Individuals actively participating in meaningful Community Life Engagement (CLE) activities increases by 10% by September 30, 2026, as measured against a 2024 baseline to be established through provider reporting and individual service data.

#	Lead(s)	Activities	Tasks	Deliverable(s)	Outcome(s)	Due Date
1	<ul> <li>CEAG Policy</li> </ul>	Determine service	Define "meaningful participation"	Meaningful	Summary of individual CE	July 31, 2026
	Committee	authorization	from the individual's perspective,	participation, individual	service access statewide.	
	<ul> <li>DBHDS staff</li> </ul>	statewide and refine	using person-centered planning	perspective definition.		
		"meaningful	principles.		Data monitoring process	
		participation" to		Accessible, plain	established and	
		include the	Develop accessible materials	language resources	implemented to determine	
		perspectives of	(e.g., videos, brochures, peer-led		progress.	
			sessions) to help individuals			

		individuals using these services.	understand what CE is and how it can benefit them.		Meaningful participation, individual perspective defined.  Accessible, plain language resources are developed.	
2	<ul> <li>CEAG         Education and         Training         Committee</li> <li>DBHDS staff</li> </ul>	Collect and share successes.	In newsletters and/or listserv announcements, highlight stories of individuals who have achieved meaningful outcomes through CE to inspire others and promote what's possible.	Stories collected and shared.	Success stories are routinely communicated at a frequency determined by the CEAG to the broader DD community.	August 31, 2026
3	CEAG Policy Committee     DBHDS staff	Establish and implement data method and monitoring process.	Collect data on the number and percentage of individuals currently engaged in meaningful Community Engagement (CE) activities to establish a baseline.  Collect quarterly data on individual authorization rates.  Analyze trends and adjust outreach or supports to ensure equitable progress across regions and populations.	Baseline data and method to track progress.  Quarterly analysis of progress.	A baseline is determined, and progress is tracked quarterly with adjustments made at regional and local levels as needed.	September 30, 2026

# Strategy 6: Q1 Status

Step 1:			
Step 2:			
Step 3:			