

CEAG Annual Plan 2026: 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:

By June 2026 finalize, record and post an on-demand video training for CLE that defines and provides an overview of community life engagement.

Outcome:

- CLE video finalized, 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
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Strategy 1:

Q1 Status

Q2 Status

CEAG Meeting reset discussed due to very low meeting participation. Recommendation made to include additional members – especially members with lived experience. A small subcommittee was formed. Narrated re-recording of the training was reviewed and discussed by CEAG members. Recommendations were incorporated into the training with the provider video edited into the survey and one family member story. An additional story reflecting lived experience has been directly solicited. When received, it will be added, and the recording will be edited by our Communications Department for posting. CEAG reviewed Plan for new format using SMART goals.

Q3 Status

Goal 1:

1. Draft video has been developed, edited and is being reviewed internally
2. Awaiting CLE stories to be submitted for editing into the video before finalization of the video.

Strategy 2: Increase awareness and understanding of CLE through personal stories

Goal 1:

By May 2026, promote the development of personal stories about community from people with lived experience. Incorporate them into recorded training and share publicly via social media and other outlets.

Outcome:

- Recorded personal stories will be recorded as video by community stakeholder
- Personal stories will be incorporated into draft training video by May 2026 prior to posting.
- Finalized videos posted online

#	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 draft CLE video that incorporates the four pillars of CLE and include 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
#	Lead(s)	Activities	Tasks	Deliverable(s)	Outcome(s)	Due Date

3	- CEAG Education and Training Committee - DBHDS Staff	Incorporate community partner input into standardized CLE training slides based on national CLE standards for community and state partners.	CEAG Training and Education Committee and DBHDS staff will prepare slide content based on national CLE standards, which will be shared with select CSB, provider, and individual/family representatives for 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.	Training slides, Training schedule, Pre-test survey in MS Forms, Post-test survey in MS Forms	Statewide standardized CLE training developed incorporating community feedback. Trainings are scheduled and announced. Pre and post tests are prepared.	May 2026
4	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 slides are 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.	October 2026

Strategy 2:

Q1 Status

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 was 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.

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. Video has been reviewed and will be re-recorded to improve quality and engagement.

Q2 Status

Initial requests for video stories via advocacy groups were not successful. Stories were solicited directly from among known advocacy organizations and self-advocates. There is a need to repopulate the CEAG due to low participation. The application and request for new CEAG nominees was shared externally but no responses were received. There will be a more targeted push to drive this initiative at the start of the year, and a meeting will be scheduled with the membership volunteers to review potential members.

Q3 Status

Goal 2:

1. Draft video has been recorded, edited and is being reviewed internally
2. Awaiting CLE stories to be submitted for editing into the video before finalization of the video (recorded footage was received on 3/24/2026. We are in the process of incorporating them into the CLE video and creating a separate video that can also be used for training purposes.)
3. Pre and post-test evaluation will occur once training video is finalized and posted
4. CLE in person training will occur once training video is finalized.

Goal 3:

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.

1	• CEAG Education and Training Committee • DBHDS Staff	Incorporate community partner input into standardized CLE training slides based on national CLE standards	CEAG Training and Education Committee and DBHDS staff will prepare slide content based on national CLE	Training slides, Training schedule, Pre-test survey in MS Forms, Post-test survey in MS Forms	Statewide standardized CLE training developed incorporating community feedback.	May 2026
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		for community and state partners.	standards, which will be shared with select CSB, provider, and individual/family representatives for 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.		Trainings are scheduled and announced. Pre and post tests are prepared.	
Strategy 2: Q1 Status Q2 Status Slides have been finalized, with draft video recorded and is in the process of a second editing to add stakeholder stories. In-Person Training and pilot training will begin once video is finalized, posted, and accessed broadly, Q3 Status Goal 3: • In-Person Training and pilot training will begin once video is finalized, posted, and accessed broadly. • Annual Plan revised to reflect that the in-person provider training will occur after video is finalized.						
Strategy 3: Include meaningful community life engagement conversations in provider policies and practices						

Goal 1:

By November 2027, 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	- 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 plain language versions to be accessible to all DD community and state partners in Virginia.	CLE conversation guides and resources.	Tools are identified and developed.	September 2026
2	- CEAG Policy Committee - CEAG Education and Training Committee - DBHDS staff	Recruit and train participating agencies.	Send interest surveys to providers and state agencies to communicate expectations and secure participation. Schedule training session to share CLE standards, provide examples, and discuss methods of incorporating standards into policies and practices. Establish procedures and provide technical assistance as needed or requested to support agency development and implementation.	Participation survey. Presentation materials. Example policies and practices. Additional materials as needed following pilot.	Providers are identified, trained, and supported to incorporate CLE. Learning from the pilot is used to refine and develop additional materials for systemwide use.	November 2027

Strategy 3:**Q1 Status****Q2 Status:**

CLE flow process to distinguish between CLE and ICI was drafted and discussed by CEAG with edited flow document incorporated into the edited vides. Flow is designed to help the community understand the difference between CLE and ICI (Integrated Community Inclusion – focused on service provision). In-Person Training and pilot training will begin once video is finalized, posted, and accessed broadly. The CLE definitions and ICI expectations will be reviewed and discussed at the upcoming CEAG meeting.

Q3 Status**Goal 1:**

1. Video is in the process of a second editing by the Communications Department. Development of resources, standards, and processes will occur after finalization of the training video. Collaboration in developing resources will occur from HCBS reviewers
2. Piloting of in-person training will begin once video is finalized, posted, and accessed broadly. Annual Plan was revised to reflect that the in-person provider training will occur after video is finalized.

Strategy 4: Include meaningful community life engagement conversations in planning

Goal 1: By May 2026, update Virginia’s ISP specifications related to 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.

#	Lead(s)	Activities	Tasks	Deliverable(s)	Outcome(s)	Due Date
1	• CEAG Policy Committee • DBHDS staff	Prepare and send specification language updates to DBHDS.	Review current ISP elements, determine needed revisions, draft language and submit to DBHDS.	Draft specification language.	Draft complete and submitted.	May 2026
2	• DBHDS staff • EHR vendors • CSB staff	Finalize specifications, test, and release ISP.	Incorporate suggestions into draft specifications. Refine with EHR vendor group.	Specifications finalized; ISP released.	ISP released for use that incorporates CLE.	May 1, 2026

			Proceed with testing and release of updated ISP.			
Strategy 4: Q1 Status Q2 Status CLE expectations will be built into the new ISP. Staff will review and discuss with the CEAG, monitoring of CLE provider training and technical assistance and oversight of CLE via ISP implementation. Q3 Status Goal 1 1. CEAG reviewed ISP changes during its meeting February 2026. Members discussed and offered feedback to be incorporated into ISP in WaMS 2. New CLE elements have been incorporated into the IFSP in WaMS and testing is currently underway.						
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. <i>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.</i>						
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 1: 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	- CEAG Policy Committee - DBHDS staff	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.	May 2026
2	- CEAG Policy Committee - DBHDS staff	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 Additional SME added to help address technical issues with the survey and capture provider contact data. Survey draft #4 completed and sent to CEAG for a second test. 12 members completed the survey. Survey completed, tested and approved for distribution. Reconciling provider contact information to be able to distribute the survey. Q2 Status Survey finalized and distributed with results compiled and shared with CEAG highlighting themes. CEAG workgroup convened to review and analyze responses for inclusion in a resource to be shared with providers. Q3 Status Goal 1 1. The CEAG reviewed the Data Summary results during its meeting on March 20, 2026. Responses to the survey representing barriers to CE and CC were analyzed from the survey data and developed into themes. Responses were compiled and categorized for the PDSA discussion which occurred during the 2/2026 CEAG meeting. 2. The new QII PDSA proposed is an Infographic series summarizing survey results, identifying primary barriers, and connecting them to initiatives already underway or proposed. Draft infographics have been developed and will be reviewed. Infographics will be distributed during provider meetings to initiate discussions and listening sessions/ workgroups will be convened to propose solutions. 3. TA support will be developed and tailored to addressing barriers and proposed resolutions to barriers.						
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. <i>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.</i>						
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.						
Goal 1: 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.

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

Strategy 5:**Q1 Status****Q2 Status:**

Following posting of CLE video, we will solicit feedback on video (insert a poll feature) and utilizing that feedback, we will develop targeted in-person and other trainings on CLE and its relationship to ICI. CLE Process flow finalized.

Q3 Status

Goal 1

1: The CLE team has begun reviewing data as part of the data summary report to determine the baseline number of providers and individuals served in community waiver services.

2: Targeted interventions will be developed following review of the data. A Provider infographic series is being developed from the CE/CC survey to highlight barrier themes and propose solutions.

Strategy 6: Increase service use.**Goal 1:**

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	- CEAG Policy Committee - DBHDS staff	Determine service authorization statewide and refine “meaningful participation” to include the perspectives of individuals using these services.	Define “meaningful participation” from the individual’s perspective, using person-centered planning principles. Develop accessible materials (e.g., videos, brochures, peer-led sessions) to help individuals understand what CE is and how it can benefit them.	Meaningful participation, individual perspective definition. Accessible, plain language resources	Summary of individual CE service access statewide. Data monitoring process established and implemented to determine progress. Meaningful participation, individual perspective defined. Accessible, plain language resources are developed.	July 31, 2026
2	- CEAG Education and Training Committee - DBHDS staff	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
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Strategy 6:

Q1 Status

Q2 Status

CLE video recorded. CLE video, listening sessions and other direct input from community members will be used to share information on CLE.

Q3 Status

Goal 1:

1. CLE video in the process of being re-edited. Input from various listening sessions/shared values meetings is being compiled to determine what resources should be created and how they should be developed to encourage a shared understanding of “meaningful participation”
2. Use of video stories (under development), interviews and other narratives
3. Continue to collect and review baseline data on community waiver services