DBHDS

Virginia Department of Behavioral Health and Developmental Services

Part 3
Developmental Disability Quality Management System System Accomplishments

State Fiscal Year 2025

A Life of Possibilities for All Virginians

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Part 3 DD QMS System Accomplishments

As the DBHDS Developmental Disability (DD) Quality Management Plan (QMP) focuses primarily on the accomplishments within the key performance areas (KPAs) and the work of the of the DD quality committees, this appendix speaks to the overall DD quality management system (QMS), which includes the DD quality committees, offices within the divisions of Developmental Services, Provider Management, Crisis Services, and Clinical Quality Management. In this appendix, the system accomplishments, the results of quality actions that significantly impacted individuals, and quality actions that were started in the fiscal year are shown.

System Accomplishments:

Office of Licensing (OL):

- ✓ Conducted look behinds of licensing inspections to ensure consistency with interpreting these targeted regulations. The required staff training and look behinds have assisted OL with increasing inter-rater reliability in licensing inspections.
- ✓ Revised the Conditional Licensing process so that only one conditional license is approved at a time per provider. This revision allowed providers the full conditional period to demonstrate compliance with the regulations prior to adding additional services, and the Office of Licensing to determine if the provider is in substantial compliance with the regulations prior to the provider adding additional services. This change encouraged consistency and increased compliance prior to a provider expanding. During FY 25 Licensing Specialist completed 1,117 conditional inspections.
- ✓ Updated internal Licensing processes to improve the efficiency and effectiveness of Licensing staff
- ✓ IMU developed, in conjunction with SIU, a protocol that identifies risk trends that are triggers for a pre-investigation review. Patterns, severity, and repeated incidents were identified as key indicators. Trial period was held 10/1/2025-10/31/2025. SIU began DD serious incident investigations in Nov 2024.
- ✓ IMU developed the protocol for the Serious Injury Pre-investigation Triage Look Behind.

Quality Actions Resulting in Significant Impact for Individuals (Improved Outcomes)

Mortality Review Committee:

QII #1: The MRC initiated an IDD (Intellectual and Developmental Disabilities) Emergency Department (ED) Utilization QII to track repeat ED visits by IDD individuals for the same (repeated) health issue/concern. Through data analysis and working in collaboration with external stakeholders (such as the Department of Medical Assistance Services and Community Service Boards), educational materials on the role of Managed Care

Organization Care Coordinators were developed to improve continuity of care for IDD individuals receiving DBHDS licensed services and reduce those repeat ED visits. The draft version of educational materials remains under review by the DBHDS Office of Integrated Health (OIH) in preparation for distribution to licensed providers.

QII #2: The Preventive Screenings QII initiated in October 2024 was completed and noted a lack of preventive screening and risk factor documentation in IDD individual's service plans (ISPs). The MRC investigated inclusion of preventive screenings documentation in the ISPs of IDD individuals receiving a licensed DBHDS service. Developed and posted educational materials and an Annual Exam Toolkit.

QII #3: The MRC completed the Medical Emergencies QII which included the development and implementation of a medical emergency toolkit (MET), educational materials, and a training module for provider use in preparing for medical emergencies. The MRC continues to monitor provider adherence to their medical emergency protocols for all potentially preventable deaths.

Office of Behavior Network Supports (BNS):

- ✓ To improve timely connection to behavioral services, in SFY25, BNS used the "Performance Diagnostic Checklist-Human Services" to assess barriers (to timely connection to services) for CSBs where data demonstrated performance lower than other CSBs within the region. An intervention package of action steps based on assessment results, feedback, and real-time data sharing every two weeks with CSBs served to improve performance for CSBs. This has helped to improve statewide performance from 73% in the previous 6-month period (July-December 2024) to 78% of people receiving a service authorization for therapeutic behavioral consultation within 30 days (between January and June 2025).
- ✓ Additionally, the BNS team continues to use the Behavior Support Plan Adherence Review Instrument (BSPARI) to review a statistically significant sample of behavior support plans annually. The BSPARI measures adherence to the DBHDS/DMAS Practice Guidelines for Behavior Support Plans, with reviews completed by Licensed and Board Certified Behavior Analysts within BNS. A critical element of this quality assurance intervention package is sharing scored BSPARIs with authoring clinicians and providing virtual feedback sessions to help plan authors understand the areas that are in adherence and those that need improvement. Starting in SFY25, behavior plans that did not meet required passing scores on the BSPARI were required to be revised and resubmitted to DBHDS. Scores on the BSPARI are combined with service utilization data on therapeutic behavioral consultation to yield a generalized percentage of people that received adequate behavioral services. In FY25, this percentage was 80%, which is a

twelve-percentage point improvement over FY24 (68%). While neither effort has met the required 86% performance benchmark, data continues to display an increasing trajectory.

Office of Integrated Health Support Network (OIHSN):

Mobile Rehabilitation Engineering (a gap service that provides durable medical equipment (DME) maintenance and repair services to individuals with intellectual and developmental disabilities who don't have these services currently available elsewhere*)*:

- ✓ Assisted 3528 individuals
- ✓ Performed 7690 repairs to 5955 pieces of durable medical equipment DME, Complex Rehab Technology (CRT) and assistive technology items
- ✓ Completed 61 CRT custom adaptations, which specifically reduced risk of injury to the individual and the risk of infection transmission due to skin breakdown
- ✓ 4678 repairs reduced risk of bodily injury
- ✓ 2692 repairs reduced risk of infection
- ✓ 231 repairs were minor adjustment to increase comfort

Dental Team:

- ✓ Added two additional mobile units that were both received in FY25Q4, expanding the Dental Team's reach
- ✓ Worked with DentaQuest in developing and expanding their complex Case Coordination Team (initially created to assist MCO Care Coordinators with emergent dental needs presented to them from their members) increasing member access to CSB Support Coordinators and members directly
- ✓ Presented instructions for accessing the complex Case Coordination Team at DentaQuest at the Provider Round Table meetings in January 2025

Community Nursing Team:

- ✓ Hosted the DentaQuest Complex Case Coordination Team at the 5 virtual regional nursing meetings in November 2024 to discuss the Medicaid Dental Benefits and how to access DentaQuest for assistance with challenges accessing
- ✓ Rolled out new training on substance use disorder and dementia as it relates to individuals with DD
- ✓ Provided training on more than 30 different topics to 965 provider attendees.
- ✓ 1, 134 received training on these topics, available on COLVc:
    - The Fatal Seven Training 2022
    - Falls and Individuals with Intellectual and Developmental Disabilities 2021
    - The Importance of Calling 911

- Choking and Airway Obstruction 2023
- REVIVE! Training 2023
- Sepsis Training 2023
- UTI Training 2023
- Recognizing Changing or Declining Health & Medical Emergencies Among Individuals with DD 2024
- Vital Signs Training 2022
- Division Overview
- The My Care Passport & Advocacy Tips Sheet Training 2022
- Medication Administration Overview 2024

Quality Actions Started in SFY25

Office of Integrated Health Support Network Dental Team:

- ✓ OIHSN Dental Program to increase the number of individuals with a DD Waiver who can access an annual dental exam and help to close the gap between the current % met and the metric goal
- ✓ Increase the number of clinics at CSB locations by encouraging CSBs to submit referrals in batches and work with the OIHSN Dental Team to schedule a clinic day that can meet the needs of multiple individuals

Office of Licensing

- ➢ Trained Licensing staff on new Inter-Rater Reliability process, which will occur three times per year
- ➢ Developed "Initial Applicant Orientation Training Resources", which includes training, links, a checklist and an exam to be launched in SFY26
- ➢ Implemented a pilot program in Region 4 that assigns licensing specialists to population specific caseloads. The pilot will focus on ensuring consistency and reliability in inspections and complete more thorough reviews of the services. The pilot program will run for 12 months, with quarterly check-ins with six licensing specialists assigned to providers of DD services. If the pilot program goes well, it could be implemented in additional regions.