



STATE OF VERMONT  
DEPARTMENT OF DEVELOPMENTAL AND  
MENTAL HEALTH SERVICES

DIVISION OF DEVELOPMENTAL SERVICES

# **GUIDELINES FOR QUALITY SERVICES**

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**STATE OF VERMONT**  
**DIVISION OF DEVELOPMENTAL SERVICES**

**GUIDELINES FOR QUALITY SERVICES**

**PURPOSE**

The State of Vermont, Division of Developmental Services, has the responsibility to assure that supports and services sponsored by the State meet certain standards. This document was originally developed and updated to insure an effective evaluation and continuous quality improvement process for supports provided to people with developmental disabilities.

All quality enhancement activities focus on the right of individuals with developmental disabilities, as supported by important people in their lives, including families and guardians, to have their needs met in ways that honor the basic life choices and responsibilities that all people face. The goals and outcomes identified within this document reflect on the quality of life, health, safety, civil and human rights of people supported by the developmental services system in Vermont.

**PRINCIPLES OF DEVELOPMENTAL SERVICES**

In 1996, the Vermont Legislature passed an important law reflecting the work of people with disabilities, their families and guardians, providers, advocates and Division of Developmental Services staff. The **Developmental Disabilities Act of 1996 (19 VSA, Section 8724)** incorporates the following mutually agreed upon principles:

- ❖ **Children's Services.** Children, regardless of the severity of their disability, need families and enduring relationships with adults in a nurturing home environment. The quality of life of children with developmental disabilities, their families and communities is enhanced by caring for children within their own homes. Children with disabilities benefit by growing up in their own families; families' benefit by staying together; and communities benefit from the diversity that is provided when people with varying abilities are included.
- ❖ **Adult Services.** Adults, regardless of the severity of their disability, can make decisions for themselves, can live in typical homes and can contribute as citizens to the communities where they live.
- ❖ **Full Information.** In order to make good decisions, people with developmental disabilities and their families need complete information about the availability, choices and cost of services, how the decision making process works, and how to participate in that process.
- ❖ **Individualized Support.** People have differing abilities, needs, and goals. To be effective and efficient, services must be individualized to the capacities, needs and values of each individual.

- ❖ **Family Support.** Effective family support services are designed and provided with respect and responsiveness to the unique needs, strengths and cultural values of each family, and the family’s expertise regarding its own needs.
- ❖ **Meaningful Choices.** People with developmental disabilities and their families cannot make good decisions without meaningful choices about how they live and the kinds of services they receive. Effective services shall be flexible so they can be individualized to support and accommodate personalized choices, values and needs and assure that each recipient is directly involved in decisions that affect that person’s life.
- ❖ **Community Participation.** When people with disabilities are segregated from community life, all Vermonters are diminished. Community participation is increased when people with disabilities meet their everyday needs through resources available to all members of the community.
- ❖ **Employment.** The goal of job support is to obtain and maintain paid employment in regular employment settings.
- ❖ **Accessibility.** Services must be geographically available so that people with developmental disabilities and their families are not required to move to gain access to needed services, thereby forfeiting natural community support systems.
- ❖ **Health and Safety.** The health and safety of people with developmental disabilities is of paramount concern.
- ❖ **Trained Staff.** In order to assure that the goals of this chapter are attained, all individuals who provide services to people with developmental disabilities and their families must receive training as required by section 8731 of this title.
- ❖ **Fiscal Integrity.** The fiscal stability of the service system is dependent upon skillful and frugal management and sufficient resources to meet the needs of Vermonters with developmental disabilities.

## **QUALITY GOALS AND OUTCOMES**

The quality goals and outcomes seek to provide a benchmark to evaluate how well providers assist people with developmental disabilities to achieve their life goals.

### ***GOAL 1***

**People with disabilities are treated with respect and dignity.**

#### **OUTCOMES**

- 1.1 Services are provided in settings which are valued and logical to the intent of the service.
- 1.2 Practices respect and encourage the human and civil rights of people.
- 1.3 Environments and services allow for personal privacy.

- 1.4 Interactions and approaches are respectful to people at all times.
- 1.5 Services and environments are respectful of individual differences and are physically, culturally, and linguistically accessible.

## ***GOAL 2***

**People are supported in their own families, in their own homes, in local neighborhoods and communities.**

### OUTCOMES

- 2.1 People have a sense of belonging, inclusion and membership within their communities.
- 2.2 Opportunities which include variety and choice are provided for community membership based on the interests of the person.
- 2.3 People receive the necessary supports to live with their family when desired.
- 2.4 No people are admitted to institutional settings in or out of state.
- 2.5 Homes for people receiving residential services are suited to the person.
- 2.6 Services are available and provided for people requesting and needing those services.

## ***GOAL 3***

**People and their families and guardians have opportunities to make meaningful choices about services.**

### OUTCOMES

- 3.1 People and their families and guardians participate in the development of services.
- 3.2 People make choices regarding their daily lives and future planning with assistance if necessary.
- 3.3 Families and guardians are involved and informed of events and changes concerning people and their services.
- 3.4 People are presented with a variety of opportunities and options to broaden their understanding of their choices.
- 3.5 People receive assistance in accepting responsibility for their own decisions.
- 3.6 Personalized services are planned in accordance with the process outlined in the ISA Guidelines.

## ***GOAL 4***

**Services foster the development of personal relationships with other community members.**

### OUTCOMES

- 4.1 Opportunities are presented and support is provided for people to develop and maintain relationships outside of their home.

## ***GOAL 5***

**Services support people in regular jobs and/or activities of their choice.**

### OUTCOMES

- 5.1 Employment is actively pursued for people who want to work.
- 5.2 Activities are pursued and people are supported and encouraged to develop their abilities in the arts, sports, and hobbies of personal interest.
- 5.3 Services include activities and environments which allow people to contribute as well as benefit from their involvement.

## ***GOAL 6***

**Services foster the development of practical life skills.**

### OUTCOMES

- 6.1 Skills are taught which benefit the individual, promote independence, interdependence, and offer personal challenges.
- 6.2 Services make use of generic resources, settings and activities.

## ***GOAL 7***

**Services are supported and managed in a manner that ensures the fiscal stability of the system.**

### OUTCOMES

- 7.1 Generic services and resources are not duplicated.
- 7.2 The types of services provided ensure financial accountability.
- 7.3 Annual fiscal audits support stable financial management.

## ***GOAL 8***

**Services are designed to enhance the varying abilities of people to communicate and are responsive to their needs.**

### OUTCOMES

- 8.1 People have access to the necessary technologies to enhance their communication.
- 8.2 Opportunities to expand communication skills are offered using the communication modality chosen by the person.
- 8.3 People with whom the individual communicates most frequently have the ability to understand, interpret and respond using the modality chosen by the person.

## ***GOAL 9***

### **People providing services are properly trained and perform their work competently.**

#### OUTCOMES

- 9.1 People providing services demonstrate the ability to perform their job of enhancing services for people with whom they work.
- 9.2 People providing services demonstrate knowledge of people with whom they work.
- 9.3 People providing services demonstrate knowledge of community resources.
- 9.4 Staff are supported and empowered to provide quality services for people with whom they work.
- 9.5 Staff receive training relevant to their responsibilities.

## ***GOAL 10***

### **The safety and health of people are valued and promoted.**

#### OUTCOMES

- 10.1 People have access to support and services which promote their physical and emotional well-being.
- 10.2 People receive training and support to be safe in their daily lives.
- 10.3 People live in homes which meet applicable standards for fire safety and accessibility.
- 10.4 People receive medical and dental services in a manner consistent with those available to all community members.
- 10.5 Medical services are provided for people receiving services in accordance with the Medical Guidelines.

## **QUALITY ENHANCEMENT ACTIVITIES**

To ensure adherence to the principles outlined in the Developmental Disabilities Act of 1996 and in order to continually evaluate the quality of supports and services and improve in areas needing attention, the Division of Developmental Services undertakes the following quality enhancement activities involving organizations that provide services to people with developmental disabilities:

### **1. QUALITY SERVICES REVIEWS**

The Division of Developmental Services annually conducts an on-site review of all Medicaid funded services provided by each agency to assess the quality of services with respect to the Division's Quality Goals and Outcomes and to assure compliance with state and federal Medicaid standards.

### **2. THE STATE SYSTEM OF CARE PLAN**

The Developmental Disabilities Act of 1996 requires the Division of Developmental Services to adopt a plan describing the nature, extent, allocation, and timing of services that will be provided to people with developmental disabilities and their families. The System of Care Plan, developed every three years and updated annually, defines priorities to continue existing services and programs or to develop new services; criteria for receiving services and funding; and a process for evaluating and assessing the success of services and program. The report is based on collective input about the needs and effectiveness of supports to people with developmental disabilities obtained through a variety of means and from a wide range of individuals.

### **3. HOUSING AND ACCESSIBILITY SAFETY PROCESS**

Housing and accessibility safety reviews are conducted by the Division of Developmental Services to assess safety and accessibility of all relevant residential and agency community support sites. Residential reviews will occur prior to the person moving into the home. Agency community support sites attended by four or more people are also reviewed.

### **4. FISCAL AUDITS**

Annually, each agency contracts for an independent audit of its developmental services in accordance with their contract with the Department of Developmental and Mental Health Services.

### **5. UTILIZATION REVIEWS**

An initial Utilization Review is conducted by the Division of Developmental Services for each person within six (6) months of admission to an ICF/MR. Subsequent Utilization Reviews are conducted by the Division once every six (6) months to determine whether continued stay is appropriate and necessary for each person residing in an ICF/MR. Notification will not exceed forty-eight (48) hours prior to the review.

## **6. DATA ANALYSIS**

Each agency submits a Monthly Service Report consisting of specific person and service data for all services provided. Agencies also submit human resources data consisting of specified professional/personal information and financial information for staff and direct contractors. In addition, agencies report information on a yearly basis for the Division of Developmental Services' Annual Report. This information is reviewed to determine system trends of agency services.

## **7. PASARR REVIEWS**

Annual reviews of specialized services provided through the federally required program of Pre-admission Screening and Resident Review (PASARR) are conducted through the Quality Services Review process by the Division of Developmental Services to determine the quality of services provided to people residing in nursing homes. Individuals receiving specialized services are included in the review sample and are included in the Quality Services Review Reports for each agency providing these services.

## **8. DEVELOPMENTAL SERVICES STATE STANDING COMMITTEE**

The purpose of the Developmental Services State Standing Committee is to advise the Division of Developmental Services on the performance of the developmental service system in Vermont. The committee is comprised of 15 members representing consumers, family members and human service professionals and advocates. The majority of the committee is comprised of disclosed consumer and family members. The State Standing Committee advises the Division of Developmental Services on a wide array of topics.

## **9. DESIGNATION PROCESS**

Every four years, the Department of Developmental and Mental Health Services designates one Designated Agency in each geographic region of the state as responsible for ensuring needed services are available through local planning, service coordination and monitoring outcomes within their geographic region. A Designated Agency must provide directly or contract with other 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.

## **10. MORTALITY REVIEW**

An analysis of individual deaths and also of trends in mortality is an important component of health and safety oversight of a publicly funded developmental services system. The Division of Developmental Services reviews all deaths of individuals receiving DDS Services. Immediate phone notification of every death is required so that a determination of the need for an autopsy or police involvement can be made and the scene preserved. The Division of Developmental Services actively request an autopsy in any death where the death was unexpected and the cause of death is not clearly established. Any death report which raises a concern that abuse or neglect of care may have occurred is reported to Adult Protective Services (for adults) and SRS (for children). When a situation raises questions about the care provided, DDS may initiate an investigation by a DDS nurse. Annually a report on mortality is completed and reviewed by DDS staff and the State Standing Committee.

## **11. COMPLAINTS AND APPEALS PROCESS**

Each service provider must have a written complaint and appeals procedure and inform applicants and service recipients of that process. Both informal and formal complaint and appeal processes are available to people applying for or receiving developmental services, their family members, guardians and other interested individuals. Individuals may also choose mediation or arbitration to resolve their complaints or appeals. All complaint and appeals procedures must comply with the Developmental Disabilities Act of 1996.

## **12. GUARDIANSHIP SERVICES REVIEWS AND CONTACTS**

Twenty-one (21) Guardianship Services Specialists provide guardianship services as specified by law to about 580 adults with developmental disabilities. Guardianship Services Specialists play distinct quality assurance functions, including ongoing monitoring of people's welfare, assessment of quality of life and functional accessibility, participation in individual support plans, and advocacy for appropriate services. Guardianship Services Specialists are expected to have face-to-face contact with people for whom they are guardian at least once a month.

## **13. CRITICAL INCIDENT REPORTING PROCESS.**

Service providers provide critical incident reports to the Division when certain incidents take place, such as the death of someone receiving services, allegations of abuse, neglect or exploitation, or criminal behavior by or against someone receiving services. Monitoring of critical incident reports enables the Division of Developmental Services to ensure proper follow up to critical incidents and to monitor trends within provider agencies and the within the statewide developmental service system.

## **14. ETHICS COMMITTEE**

An Ethics Committee convenes bimonthly as needed, or on an emergency basis, to review any decisions by a Guardianship Services Specialist or other DDS staff to abate life-sustaining treatment for a person receiving services. In addition, any individual who wants advice about the ethical aspects of a decision, or is dissatisfied with a critical care decision made for a non-consenting person with developmental disabilities, may request the Ethics Committee to review the decision.

## **15. HUMAN RIGHTS COMMITTEE**

The purpose of the State Human Rights Committee is to safeguard the human rights of Vermonters receiving developmental services. The committee provides an independent review of any restrictive procedures while assisting individuals and agencies to develop alternatives to restrictive procedures. The committee meets regularly to review policies, procedures, trends and patterns, individual situations and individual behavior support plans.

## **16. CONSUMER & FAMILY SURVEYS**

The Division of Developmental Services contracts for an independent statewide consumer survey to take place regularly to measure the satisfaction of people receiving services. A confidential family satisfaction survey is also conducted periodically to assess how families feel about services that they receive to support their family members who live at home.

**STATE OF VERMONT  
DIVISION OF DEVELOPMENTAL SERVICES**

**QUALITY SERVICES REVIEW PROCESS**

A. **Review Overview:**

Annually, the Division of Developmental Services conducts a review to assess the quality of the services provided by each agency. The quality of individual services, as well as systems and organizational issues, are evaluated through interviews, observations, and record reviews. Services are reviewed for fifteen to fifty percent of the individuals receiving services funded by DDS through Medicaid waiver, ICF/MR, targeted case management, and nursing facility day rehabilitation, depending on the size of the agency. People are selected for review who are new to services, whose services have not been reviewed in three or more years, whose services have changed, and by request of the agency, Division of Developmental Services staff, or other interested people. Services reviewed include home supports provided through shared living homes, staffed apartments, supervised apartments, group homes, and ICF/MRs; community supports provided by staff and contracted providers; work supports; family support; nursing facility day rehabilitation services; and service coordination. Crisis programs are reviewed as part of the Quality Services Review. Self and family managed services are also reviewed. Every attempt is made to review a sample of all DDS funded services provided by the agency, except for Flexible Family Funding.

B. **Team Composition:**

The review is conducted by a team of Community Alternative Specialists (CASs), which includes a registered nurse and specialists with expertise in employment, children's services, adult services, and training.

C. **Record Reviews:**

An abbreviated record review is completed for approximately eighty percent (80%) of the people selected to assure that documentation reflects services provided. Records are reviewed in-depth to determine the quality of documentation and consistency with the ISA Guidelines for approximately twenty percent (20%) of the people selected for review. Additional in-depth reviews may be conducted, dependent upon review team findings.

D. **Visits:**

Quality of life issues and quality of services are assessed for each individual reviewed within the framework of the Quality Goals and Outcomes through interviews, personal observations, and record reviews. Interviews are conducted with people who receive services, their staff, contracted providers, guardians, and families. People receiving home, community, and work supports are typically visited in the settings where they receive services, except when it is agreed that a particular visit would be disruptive for the person.



E. **Medical Reviews:**

A sample of people receiving home supports, their staff, contracted providers, and guardians are visited or interviewed to assess the quality of medical care received with respect to the goals and outcomes.

Health care records are reviewed for a sample of individuals to assess the quality of documentation and consistency with the Health and Wellness Guidelines.

F. **Verbal Feedback:**

An overview of the review team's findings is presented and discussed at a formal verbal feedback meeting with the agency. Priority areas of importance to enhance the quality of services are agreed upon during the verbal feedback. The agency may also suggest additional areas or programs that they plan to focus on during the coming year.

Person-specific feedback is discussed with the individual's case manager during the review whenever possible.

G. **Agency Report:**

A report of the findings from the review is forwarded to the agency within forty-five (45) days from the date of the verbal feedback.

Individuals' services are evaluated with respect to the Division's Quality Goals and Outcomes. Trends in services are identified through the analysis of the quality goals and outcomes data. The compiled data is presented in the report as the percent of the total number of individuals scored on the outcome whose services exceeded the outcome, the percent whose services met the outcome, and the percent whose services did not meet the outcome. Areas of importance to improve the quality of services are identified through the quality review process and the analysis of data generated by the review.

The review team's findings and areas for improvement are discussed in the Agency Review Summary. Selected examples of positive practices, recommendations, practices requiring improvement and necessary changes relating to specific individuals are discussed within the framework of the relevant goals in the Quality Goals and Outcomes Summary

Additionally, the Areas of Importance are outlined. Although several areas of importance may be identified through the review process, those areas addressed as Priority Areas of Importance are mutually agreed upon.

The report also includes summaries of the in-depth ISA record reviews and the Health and Wellness Guidelines Review Findings.

If it is determined that services provided by an agency are not adequate to meet the needs of the people they serve, the Division will act in accordance with 18 VSA, Section 8911 and the agency's contract for services with the Department of Developmental and Mental Health Services.

**H. Agency Response:**

An agency's response to the report includes a written Plan of Correction that addresses the Necessary Changes identified within the report as well as the Health and Wellness Guidelines Review. In addition, the agency needs to submit a plan for quality improvement that addresses the Priority Areas of Importance. This plan may include a summary of progress on the areas. The Plan of Correction and the Plan for Quality Improvement must be submitted to the Division within forty-five (45) calendar days after receipt of the report.

Technical assistance and support is available from Division staff upon request. The CAS agency contact and, as appropriate, team specialists monitor progress on the priority areas of importance throughout the year.

**L Appeal Process:**

If the agency disagrees with any content of the agency report, the concern is presented to the CAS contact for the agency to reach an agreeable solution. If agreement cannot be reached between these parties, the agency's Developmental Services Director may appeal to the CAS team leader who makes a decision regarding the identified concern.

If the agency disagrees with the decision, the Director may appeal to the Director of the State Division Developmental Services at which time he/she may present evidence upon which a decision is made. The decision may be further appealed by the Executive Director of the agency to the Commissioner of the Department of Developmental and Mental Health Services. The Commissioner's decision on the matter will be final.

**STATE OF VERMONT  
DIVISION OF DEVELOPMENTAL SERVICES**

**HOUSING SAFETY AND ACCESSIBILITY REVIEW PROCESS**

Housing safety and accessibility reviews are conducted by the Division of Developmental Services to assess safety and accessibility of all relevant residential and agency community support sites. Residential reviews will occur prior to the person, moving into the home. Agency community support sites attended by four or more people are also reviewed.

**Review Schedule:**

A safety and accessibility review is conducted by the Division of Developmental Services of all homes not required to be licensed by the Division of Licensing and Protection. Prior to the person moving into the home, or utilizing an agency community support site, the agency requests a safety and accessibility review. This inspection occurs at the beginning of the placement. The home provider and agency agree to maintain all of the items on the checklist. Re-inspections only occur if there are going to be major renovation to the day-site or home of a new consumer before a new consumer move into the home or space not previously inspected. The Division of Developmental Services should be notified by the provider agency of any agency community support sites that is in need of a safety and accessibility review.

**Division Report:**

At the actual review the agency representative and home provider are given a copy of the report, which details the deficiencies, and the standard for the corrections required. The report also specifies that all corrections need to be accomplished within thirty days from the date of the inspection. The identifying data and date of review are entered into the Division's database. If the report is returned to the Division within the thirty days, then the information is recorded and a hard copy of the corrections is kept on file. If the information is not received within thirty days, then the agency receives written notice and is monitored until all items are complete.

**Agency Response:**

The agency is required to complete all of the corrections and verify their completion through a follow-up inspection from the Division's representative, or as verified by an agency staff member within thirty days.

If the agency has not verified that the corrections have been made, they are sent written notice and are monitored by agency staff to insure compliance. If after 60 days they have not completed the corrections, the agency is notified that the funding for that home may be suspended.

**Appeal Process:**

If the agency disagrees with any of the items on the report, the agency may appeal to the Division's representative. If a solution is not reached, then the agency may appeal to the Director of the Division of

Developmental Services, at which time the agency may present evidence upon which a decision will be made. The decision of the Director of the Division of Developmental Service shall be final.

**STATE OF VERMONT  
DIVISION OF DEVELOPMENTAL SERVICES**

**DESIGNATION PROCESS**

A. Application

Each developmental services designated agency must be evaluated for re-designation every four years. The Commissioner of the Department of Developmental and Mental Health Services (DDMHS) begins the process by notifying the President of the Board of Directors and the Executive Director that the agency must submit an application for re-designation. The agency shall submit a letter of intent to apply for re-designation to the Commissioner within 30 days of notification and shall submit a formal application for re-designation within 60 days.

B. Public Comment

Upon receipt of the completed application for re-designation, the Commissioner shall publish in newspapers in the geographic area of the designated agency the intent of the agency to seek re-designation, the time and location of a public hearing on the agency's re-designation and a process for providing written comment for those unable to attend the hearing. The public hearing shall be held within 45 days of the completed application. Representatives of the Developmental Services State Standing Committee shall attend the public hearing.

C. Information Gathering

In addition to the information gathered through the public hearing and public comment period, the Division of Developmental Service (DDS) Staff conduct a designation review of the agency based on the criteria set forth in the **Administrative Rules on Agency Designation**. Typically, this review is performed at the time of the agency's Quality Services Review, during the year the agency is applying for re-designation. Some of the key responsibilities of a Designated Agency that are reviewed include the following:

- ❖ Receive and act upon referrals and applications for services and supports;
- ❖ Inform applicants and service recipients of their rights;
- ❖ Assure a person-directed support plan is developed for each recipient;
- ❖ *Respond to information on people's satisfaction, complaints and appeals;*
- ❖ *Provide crisis response services for any eligible individual within the geographic area;*
- ❖ *Evaluate and address training needs of board members, staff, family members, and service recipients;*
- ❖ *Identify or develop a comprehensive service network, and assure the capacity to meet the service needs and desired outcomes of eligible people in the region;*
- ❖ *Monitor and report data about regional performance to DDMHS.*

*Information is gathered from a wide variety of sources and methods including interviews with consumers, family members, provider agency staff, DDMHS staff, local standing committees, agency*

*Board of Directors, community members, policy reviews, record reviews and a review of the local system of care plan. A report of the findings is completed by DDS staff and a draft report is provided to the designated agency.*

## **APPENDIX C**

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#### **D. Developmental Services State Standing Committee Review**

*A responsibility of the Developmental Services State Standing Committee is to evaluate each application for re-designation and provide recommendation to the Commissioner of DDMHS. A sub-committee of the State Standing Committee reviews the DDS report of the findings. The sub-committee meets with both DDS staff and with designated agency staff (e.g., DS Director) to clarify and gather additional information. The sub-committee presents its comments and the DDS report of the findings to the full State Standing Committee. The State Standing Committee has 90 days from the completed application for re-designation to submit a written recommendation to the DDMHS Commissioner.*

#### **E. Decision by the DDMHS Commissioner**

*The DDMHS Commissioner, in consultation with the DDS Director, shall review the State Standing Committee's recommendation and DDS report of the findings regarding agency performance, and make a decision regarding agency re-designation within 110 days of the completed application for re-designation. The DDMHS Commissioner shall notify the designated agency of the designation decision within 120 days of the completed application for re-designation. The notification will include a final copy of DDS report of the findings along with the State Standing Committee's comments. If the agency is placed on provisional status or is re-designated with minor deficiencies, a plan of correction with timelines will be completed by the designated agency. DDS staff will follow up with the designated agency during the set time period to assure that the corrections have been made.*

**STATE OF VERMONT  
DIVISION OF DEVELOPMENTAL SERVICES**

**DEVELOPMENTAL SERVICES STATE STANDING COMMITTEE**

*The purpose of the Developmental Services State Standing Committee is to advise the Division of Developmental Services on the performance of the developmental service system in Vermont. The committee is comprised of 15 members representing consumers, family members and human service professionals. The majority of the committee is comprised of disclosed consumer and family members. The State Standing Committee advises the Division of Developmental Services on a wide array of topics.*

*Its primary responsibilities include:*

- ❖ **Evaluation of Key Management:** The Commissioner of DDMHS shall seek advice from the committee in the appointment of a new Division of Developmental Services Director, and the DDS Director shall annually seek feedback from the committee regarding program management.*
- ❖ **Evaluation of Quality:** The committee shall review information and advise the Department on the quality and responsiveness of services offered statewide.*
- ❖ **State System of Care Plan:** The committee shall participate in the development of the Vermont State System of Care Plan for Developmental Services.*
- ❖ **Resource Allocation:** The committee shall review information on how resources are being allocated statewide to meet the needs of consumers, consistent with the Vermont State System of Care Plan for Developmental Services.*
- ❖ **Service Planning and Implementation:** The committee shall provide feedback on the development, design and functioning of the statewide developmental service system in relationship to the Vermont State System of Care Plan for Developmental Services and the Agency of Human Services and DDMHS specified outcomes.*
- ❖ **Department Policy:** The committee shall review and recommend policy regarding services for individuals with developmental disabilities.*
- ❖ **Grievances:** The committee shall review aggregate information on the frequency, nature and resolution of complaints about services.*
- ❖ **Designation Process:** The committee shall advise and make recommendation to the Commissioner of DDMHS on applications for initial designation and re-designation of agencies.*