

Quality Services Review (QSR)

The [Developmental Disability Services Division \(DDSD\)](#) Quality Services Review (QSR) is intended to meet the [Department of Disabilities, Aging, and Independent Living's \(DAIL's\)](#) commitment to the State of Vermont and the [Centers for Medicare and Medicaid Services \(CMS\)](#) to monitor and review the quality of services provided using Federal and State home and community-based services (HCBS) funding. The purpose of the QSR is to ascertain the quality of the services provided by the [Designated Agencies and Specialized Services Agencies \(DA/SSAs\)](#) and to ensure that minimum standards are met with the respect to DAIL and DDSD guidelines and policies for developmental disabilities services. The QSR involves on-site reviews by DDSD Quality Management Reviewers to assess the quality of Medicaid-funded services. Site visits are conducted every two years with follow-up as appropriate.

The QSR is based upon nine [DDSD Outcomes](#). These outcomes are evaluated based on the services provided to a sample of individual's receiving HCBS funding. To the degree possible, the sample will be reflective of the spectrum of supports provided by the agency.

The QSR consists of a visit and conversation with each individual in the sample and their support team; a conversation with the person's guardian/family, where applicable; a review of the individual's agency file (including the individual's support plan), and a conversation with the individual's service coordinator. The DDSD Nurse Surveyor also focuses specifically on how well the agency meets the medical requirements set out in the [Health and Wellness Guidelines](#).

The QSR report is the formal mechanism for notifying the agency of the DDSD review team's findings. The report consists of:

- A summary of key service areas along with strengths and opportunities for improvement;
- A table with specific "Examples of Positive Practice" and instances that do not meet the standard, thus requiring "Necessary Changes;"
- Recommendations where applicable:
- Areas in which the agency is expected to ensure some system improvements, identified as "Areas of Importance."

The agency has 45 days to respond with a plan of corrections to address any identified area of importance, necessary changes and opportunities for improvement. The DDS D lead reviewer, nurse surveyor and other members of the team will review the plan and work with the agency to ensure all the identified areas are brought into compliance.

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