



# SFY23 Developmental Disabilities (DD) Quality Management Plan (QMP) Annual Report



- What it is:
  - The Annual Report is the third part of the DD QMP. Part 1 describes the programs involved in the DD QM System and processes used in managing their programs. Part 2 describes the DD quality committees. Parts 1 & 2 are published separately, at the beginning of the fiscal year. The Annual Report is published during Quarter 3.
- What it does:
  - The Annual Report summarizes the work of the DD quality subcommittees, and the DD QM System overall.
- What it displays:
  - The Annual Report describes key accomplishments, summary of performance measure indicators (PMIs) per key performance area (KPA) and data reports, summary of quality improvement initiatives (QIIs), and identifies areas for improvement.
  - It includes a data quality summary and DD quality committees' evaluation summaries.

- Why it is important:
  - ✓ Parts 1 and 2 plan the work to be done in the coming fiscal year.
  - ✓ The Annual Report (Part 3) describes the work that occurred and connects Parts 1 and 2 to Part 3. It tells us how the DD QM System (QMS), the improvement efforts deployed during the year and the effectiveness of those and previous efforts to improve the system. It identifies where changes are needed.

- ✓ Enhanced functionality of the hyperlinks
- ✓ Streamlined the Data Quality section
- ✓ Restructured the Quality Improvement Initiative section
- ✓ Restructured the Internal Quality Management System Evaluation section

	Domain	Fully Met	Partially Met	Not Met
<b>Health, Safety &amp; Wellbeing Key Performance Area</b>	Safety & Freedom from Harm	2	0	1
	Physical, Mental and Behavioral Health & Wellbeing	0	3	0
	Avoiding Crisis	0	1	0
<b>Community Inclusion &amp; Integration Key Performance Area</b>	Stability	1	2	0
	Choice & Self-Determination	2	1	0
	Community Inclusion	1	1	1
<b>Provider Capacity &amp; Competency Key Performance Area</b>	Access to Services	2	1	3*
	Provider Capacity	1	0	3

\* Two of three PMIs in Not Met column were retired in SFY24 Q1 as it was determined they were being reported elsewhere in DBHDS.

- ✓ Previous years efforts realized as:
  - ✓ Some PMIs saw significant gains for the first time
  - ✓ CSBs received timely data for their use in improving SC/CM performance, in the easing of administrative burden for CSBs and providers, and in system updates that improved the ease of data entry
- ✓ Sustainability of the CSB and provider work force: with the continued shortages in the workforce, the impacts on individuals served varied. Two workgroups (Provider Issues Resolution Workgroup and System Issues Resolution Workgroup) met to identify problem areas and make recommendations to DBHDS on several topics that involve staffing shortages. These recommendations are planned to be finalized and presented in SFY 24.

# DBHDS Quality Improvement Initiative(QII) Summary

## HSW QIIs:

7 continued in implementation  
2 were completed  
2 abandoned  
3 *proposed, not approved\**  
3 approved for implementation in SFY23/24

MRC, RMRC, KPA

Workgroups RQC2, RQC4

*\*RQC3 joined KPW Workgroups in implementing a QII*

## CII QIIs:

4 continued in implementation  
1 abandoned  
3 approved for implementation in SFY23/24

KPA Workgroups, RQC2, RQC5

## PCC QIIs:

10 continued in implementation  
2 were completed  
4 approved for implementation in SFY23/24

KPA Workgroups, CMSC, MRC, RMRC with RQC5, RMRC, RQC1

## Resources in Use with Current, Approved QIIs:

OIH, Provider Development, OL, DBHDS licensed providers, CSBs, Pharmacy, Behavioral Health, REVIVE! & SUD materials, COVLc, OCQM, OCQI, CRCs, RST, IT, DMAS, VDH Covid materials, OHR, KPA Workgroups, Employment First Advisory Group, Community Engagement Advisory Group, Individual & Family Support Program, VA Board for People with Disabilities, ARC of VA, Partnership for People with Disabilities, Parent Educational Advocacy Training Center (PEATC), individuals with disabilities



Identified through the QM Program Assessment tool, QIC subcommittee input, the Data Quality Monitoring Plan, and assessment of ongoing continuous quality improvement efforts throughout the DD Quality Management System, the following opportunities were noted:

- Most opportunities were incorporated into the Path Forward
- Data Quality opportunities were found in below areas with 123 duplicated recommendations made (meaning that recommendations apply to multiple data sources or data source systems):
  - ✓ Data Validation
  - ✓ Key Documentation
  - ✓ Manual Data Processing
  - ✓ User Interface and Backend Structure
  - ✓ Training







- ❖ DBHDS will continue the work initiated in SFY23, as listed in the SFY23 DD QMP Parts 1& 2.
- ❖ DBHDS will improve sustainability of the QII process.
- ❖ DBHDS will improve upon the meeting formats (structure and content) for the Quality Improvement Committee and the Regional Quality Councils





# Questions / Comments

