



**Virginia Department of Behavioral Health and
Developmental Services
Quality Service Reviews (QSRs)
Frequently Asked Questions (FAQs)
November 2020**

HSAG maintains a dedicated email account for providers to submit questions; providers are encouraged to contact VAQSR@hsag.com for questions about the QSR process.

Users can “jump” to a particular FAQ section using the following links (hover over the section and CTRL+Click to follow the link):

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Access to HSAG VAQSR SharePoint Site	
How do we obtain access to the SharePoint site?	<p>Access can be obtained in three ways:</p> <ul style="list-style-type: none"> • Submit the provider information form, <i>CSB and Provider Initial Information Request Form</i>, that is available on the DBHDS website on the Developmental Services Home page under Quality Service Reviews at the following location: http://www.dbhds.virginia.gov/developmental-services#qsreview • Email VAQSR@hsag.com and an initial provider information form will be emailed to you. • Complete the form with your QSR Reviewer, who will forward the information to the VAQSR@hsag.com account for processing. <p>Access to the HSAG VA QSR SharePoint site will be provided upon receipt of the provider information form.</p>
If I have a staff member that is struggling with the SharePoint registration do I contact the help email address? Will they resend a new link?	Please contact VAQSR@hsag.com for assistance in accessing the SharePoint site. Providers may also contact their assigned QSR reviewer for assistance.
What if my agency has not yet received our logins to the system?	Please email VAQSR@hsag.com for assistance.



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Finding the Sample	
Where can I find the sample list of individuals you are requesting documents for?	The PQR document request list is on the SharePoint site. Please select the Provider Uploads tab on the left of the SharePoint site screen. Then select the folder titled Provider Information. In the Provider Information folder there is a Word document. The table on the second page of the Word document contains the list of individuals selected for the QSR.
Notification when information is added to SharePoint by HSAG - many providers were given an initial audit sample only to access SharePoint at a later date to find additional records have been requested. Since then, additional surveys have been added. There was no notification that additional requests were made. We are not checking this audit SharePoint daily. The only way many CSBs/BHAs have stumbled upon these requests is through communication with one another. Can an alert be established on behalf of HSAG?	HSAG has advised that all names have been provided to the CSBs/BHAs. There may be a few replacements needed (based on if an individual declines the interview, has passed away and/or did not receive services in the waiver service evaluation window). HSAG does not anticipate many replacements. Alternates/replacement cases are selected by HSAG to ensure representative via the required sampling methodology, and communicated to the provider via the assigned QSR reviewer and uploaded to SharePoint. DBHDS requested that the HSAG reviewer advise the affected provider/CSB/BHA as soon as possible in the event a change in the individuals to be reviewed occurs; HSAG reviewers are completing that process. DBHDS also recommends that all CSBs/BHAs check the SharePoint site regularly.
Uploading/Sharing Documents	
What documents do I need to upload?	Instructions on the information that should be uploaded are available on the SharePoint site in the Provider Resources folder, in the document titled, "PQR PCR Documentation Submission Checklist." A direct link to the checklist is also available on the homepage of the SharePoint site, as well as the DBHDS website on the Developmental Services Home page under Quality Service Reviews at the following location: http://www.dbhds.virginia.gov/developmental-services#qsreview Specific questions about documents can be directed to your QSR Reviewer.
What is the timeframe for documents that need to be uploaded?	Provider documentation must encompass October 1, 2019-March 31, 2020 service delivery. Support coordination documentation must encompass July 1, 2019-June 30, 2020 case management. Providers and CSBs/BHAs should upload documentation that cannot be located on WaMS.



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Did I hear correctly that all documents must be sent/uploaded 2 weeks prior to the Provider Quality Review?	Documents must be submitted a minimum of two weeks prior to the scheduled PQR.
If I am not a CSB/BHA, how will the support coordination documents be provided?	HSAG will work with the CSBs/BHAs to ensure that records needed for the QSR are received.
How do I upload documents to SharePoint?	<p>Instructions for how to upload documents to SharePoint are available on the SharePoint site in the Provider Resources folder, in a document named, "Upload Documents to SharePoint."</p> <p>If you have followed the instructions and are having issues uploading, please contact your QSR Reviewer or the VAQSR@hsag.com email for assistance.</p>
How do we share the password with you if we have encrypted the document?	<p>Providers are assigned a password by HSAG for encrypting documents that are submitted that contain personally identifiable information (PII) or personal health information (PHI). The password will be sent by HSAG to the provider when registering for the HSAG VA QSR SharePoint site.</p> <p>Any documents containing PII and/or PHI must be encrypted; providers may upload documents as one set file or as separate documents.</p> <p>If you have created your own password for encrypting documents, please advise your QSR reviewer and/or email us at VAQSR@hsag.com so that we can note the password.</p>
Please send out instructions on how to password protect a document before uploading it to your SharePoint site.	Instructions for how to password protect documents are available on the SharePoint site. Select the Provider Resources link to find the document named, "Password Protect (Encrypt) Documents." The document is updated as additional guidance is added. HSAG provides technical assistance and support to providers, if needed.
Finding a better way to secure/encrypt and transmit documents. One CSB reported it took them one full work day to encrypt and upload the documents requested. Suggest reducing the amount of records requested or consolidate to fewer files per individual.	HSAG is working on a solution to relieve providers of the burden of encrypting individual record documents. It is anticipated that providers/CSBs/BHAs will be able to upload documents directly, thereby eliminating the need for the encryption. HSAG anticipates this solution to be available for Round 2.
Clarify the expectation to provide documents if they are available through other sources such as WaMS.	HSAG will access WaMS for ISP, VIDES, and other documentation, if it is available in WaMS. If the documentation is not available, the provider will need to upload the documentation.



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Clarify the expectation for documentation submission for CAPs and why there are licensing reports on SharePoint that are not applicable to the review.	In an effort to reduce burden on the providers to upload licensing information, HSAG uploaded all DBHDS licensing reports that are publicly-available. QSR reviewers only utilize the reports applicable to the provider service type selected for the review. For any CAPs, providers should submit documentation that provides evidence of the status of remediation of the CAP, e.g. updated policies, training information, other documents showing the provider’s progression on the CAP accepted by Licensing.
Does information related to serious incident reporting need to be provided?	DBHDS provides HSAG with CHRIS reports. QSR reviewers may request case-specific SIR documentation in order to complete review of PCRs.
Providing EHR Access or Reviewing Documents Virtually via Webinar	
Any possibility of HSAG using a provider's EHR to do chart reviews directly versus downloading and then password protecting & uploading onto SharePoint?	HSAG will work with providers to receive access to the provider’s electronic record system to conduct the record review. Please email VAQSR@hsag.com or contact your QSR Reviewer to notify HSAG of your request to provide access to HSAG for a virtual EHR review.
Who do we contact to set up a virtual review of EHR information?	HSAG can coordinate a virtual review of the records contained in the electronic record system. Please email VAQSR@hsag.com or contact your QSR Reviewer to notify HSAG of your request to conduct a virtual EHR review.
Several Boards have reported HSAG has requested one central audit login profile for their auditors to access the record. For those Boards willing and able to allow electronic access of the records, we suggest HSAG provide each CSB/provider with the name(s) of the reviewers who will need access to the electronic record if the CSB chooses to enable electronic record access. Note - not all CSBs are willing or able to provide that level of electronic access based on their own internal HIPAA and EHR security policies.	HSAG’s process accommodates each CSB’s/BHA’s/provider’s access procedures, which vary from providing a limited number of accounts, linked accounts to individual reviewers, etc. HSAG does not require any provider to designate one central audit login profile. HSAG will also provide the names of specific reviewers that will require access to records (and which specific records they will access) to assist CSBs/BHAs/providers in creating the required audit trail of record access. Questions or concerns regarding EHR access should be directed to VAQSR@hsag.com .
Scheduling	
In cases where a large number of individuals' records are needed, will the provider be given extra time to submit that information? Desk audits take extra work from providers. Will HSAG consider providing extensions for this process?	Providers should select a PQR date that allows an appropriate amount of time to submit documentation and prepare for the PQR. HSAG will continue to advise DBHDS of requests for extensions and will provide DBHDS’ guidance information if received. HSAG will



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	work with providers to the extent possible to address extenuating circumstances that may impact the time needed for submission.
For individuals named in the random sampling, should they be available during the scheduled review date/time for interviews?	Your QSR Reviewer will work with you to determine the agenda for your QSR. In many cases, interviews with individuals, family members, support coordinators and direct support workers can be scheduled prior to the PQR date with the QSR reviewer.
It might be a good idea to delay this process for a couple of weeks so providers can review all information necessary for complete review?	HSAG is following the DBHDS approved timeline for the QSRs.
HSAG should provide adequate notice of the staff members and individuals they need to interview, including the estimated timeframe for said interviews. Based on the volume of records requested all CM staff at many CSBs will be involved in the interviews.	HSAG has a standardized agenda template, available for use for all providers, which identifies the estimated length of time for all interviews included in the QSR process, including those with provider staff, individuals, family members/substitute decision makers, direct support staff, and support coordinators. HSAG welcomes the opportunity to work with all providers to ensure logistics of scheduling and sensitivity to providers' staff schedules.
Post-Review	
Will identified deficiencies (during the QSR process) result in receiving CAPs with DBHDS and submitting a second corrective action plan?	The purpose of the Quality Service Review (Provider Quality Review) is to ensure continuous quality improvement in the services provided to individuals with developmental disabilities through the assessment of individual outcomes and provider services. . Quality Service Review requirements will be scored as <i>Met</i> or <i>Not Met</i> . If the requirement receives a score of <i>Not Met</i> , a quality improvement plan will be required and must be submitted to HSAG. HSAG will review and approve the quality improvement plan.
For the QIP, will this include recommendations that are not regulation based will all be tied to a regulation, how will this be addressed? Is there a rebuttal, response or appeal process?	The QSR process is not intended to focus on compliance with codes or regulations. The QSR process is a quality improvement process. The purpose of the Quality Service Review (Provider Quality Review) is to ensure continuous quality improvement in the services provided to individuals with developmental disabilities through the assessment of individual outcomes and provider services.
After the quality improvement plan has been completed where does it go....licensure, DBHDS, DMAS, Human Rights?	The completed quality improvement plan will be submitted to HSAG for review and approval and DBHDS Quality Management. It is expected that CSB/BHAs and providers will incorporate the review results into their quality improvement and risk management process to ensure continuous quality improvement is services provided.



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HSAG is not informing and or giving providers an exit interview.	As stated, all related provider PCRs must be completed as these are included in the Provider report. HSAG will advise providers if any opportunities for improvement were identified post-PQR interview, if those opportunities were not already communicated. Opportunities for improvement will be included in provider reports. Providers will receive communication about the anticipated receipt of their reports from HSAG. HSAG will communicate to providers when reports are available on SharePoint for provider review. Questions about the reports can be emailed to VAQSR@hsag.com .
Process Methodology	
Is there clarity about whether these QSRs apply to non-licensed waiver service providers?	QSRs apply to CSBs/BHAs and DBHDS-licensed DD waiver service providers. DBHDS selected the following provider service types for inclusion in the QSR process for Round 1: <ul style="list-style-type: none"> • Case management • Community coaching • Community engagement • Crisis support services • Group day • Group residential support <= 4 persons • Group residential support > 4 persons • Group home (customized rate) • Independent living supports • In-home supports • Sponsored residential • Supported living
How many QSR audits are going to be scheduled?	During the first round of QSRs, HSAG will be conducting approximately 2,532 person-centered reviews and 562 provider quality reviews.
What is a representative sample? Is it a percentage?	A representative sample is a subset of a population that seeks to accurately reflect the characteristics of the larger group.
So, the numbers are not based on percentage within a particular agency? It is random selection from the total across the state?	The representative selection methodology is a little more complex than a simple random selection. The methodology for the representative sample is posted on the DBHDS website on the Developmental Services Home page under Quality Service Reviews.
Can we get an idea of the number of files or sites pulled for each program?	The sample size is randomly selected and may be between 1 case and up to approximately 110 cases. If an over-sample is needed due to individuals declining to participate



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	in the PCR process, the provider sample may increase or decrease slightly.
This sounds an awful lot like a licensure audit. How is HSAG operating differently?	The QSR process is not intended to focus on compliance with codes or regulations. The purpose of the Quality Service Review (Provider Quality Review) is to ensure continuous quality improvement in the services provided to individuals with developmental disabilities through the assessment of individual outcomes and provider services, and is inclusive of implementation of the Home and Community Based Settings Rule and requirements of the DBHDS Settlement Agreement with the Department of Justice requirements, and related rules and regulations.
Will you share the form/checklist you are using to evaluate the quality of services? Will you share the tool you are using to evaluate PQR and PCR?	The PQR and PCR tools are available on the SharePoint site in the Provider Resources folder, in a document named, “Sample PQR Packet with Appendix II and Appendix III Template.” This document can also be found in each provider’s SharePoint Provider Uploads folder, in the Provider Information folder.
Have guardians been given information on this review?	Information about the QSR process is available on the DBHDS website on the Developmental Services Home page under Quality Service Reviews. QSR reviewers provide information on the review to individuals, shared decision makers, and family during outreach calls and through the interview process.
Will there be interviews with the individuals themselves? What about individuals who may not want to be interviewed or individuals who have challenges with communication?	Yes, interviews with individuals will be conducted during the person-centered review process. Individuals may decline to be interviewed; those individuals will be replaced with an alternate. Individuals who have challenges with communication can be aided in the interview by a support person, including a family member, substitute decision maker, direct support professional, or other person chosen by the individual to assist them in participating in the interview. QSR reviewers document whether the individual is assisted in responding to interview elements. Individuals who have challenges with communication are not excluded from the review unless the individual or representative declines to be interviewed.
What if family members do not want to participate? Additionally, what happens if the family/individual does not have a way to do virtual visit? Will telephone interview work?	Family members are encouraged to participate but do have the right to decline participation. HSAG will ensure that PCRs are conducted according to DBHDS-approved processes. HSAG offers the option to complete interviews in-person. If the individual/family declines this option,



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	HSAG requests a virtual interview. If declined, HSAG will complete telephonic interviews.
What if the individual requires an interpreter to participate?	QSR reviewers will consider the needs and requests of an individual to utilize a known interpreter (for instance, if the individual is comfortable with and would prefer to use an interpreter from the provider). HSAG also provides interpreter services.
Interview questions seem to be more geared toward residential services.	Thank you for your feedback. As part of the quality improvement process, HSAG and DBHDS will evaluate potential revisions to tool elements upon the conclusion of Round 1.
With the elements of <i>Met</i> and <i>Not Met</i> for these QSR reviews being used as feedback to CSBs, if an individual or guardian refuses to participate, how will HSAG check the results of the review - <i>Met</i> or <i>Not Met</i> or something else and will there be any further action from CSBs?	HSAG will draw from a PCR oversample when an individual declines to participate in a PCR. During Round 2, if no oversample is available for a provider, all other components of the PCR will be completed, including interviews with provider staff members.
For clarity, is each provider doing the QSR twice a year or is there two separate groups?	DBHDS has contracted with HSAG to conduct two complete rounds of QSRs between July 2020 and February 2021. All CSBs/BHAs and DBHDS licensed DD Waiver service providers will be included in each round of reviews.
What policies will not be reviewed?	During the 2020 QSRs, the Home and Community Based Settings Rule policies and procedures reviewed and approved by the Department of Medical Assistance Services (DMAS).
Timeframe provided is insufficient in light of the new volume of cases. This is an enormous documentation request and a short amount of time allotted to respond during normal times, but especially with the pandemic and all its associated impacts on our capacity. Can the volume be decreased while still honoring the DOJ requirements?	The QSR analysis requires a representative sample of individuals for each DD Waiver service provided, such that estimates of proportions may be calculated with a 5 percent margin of error (MOE), and a 95 percent confidence interval (CI). The timeline was set to ensure that two rounds of reviews occur in FY2021.
My understanding was the review will be from July 2019 to June 2020. Did I hear you say you will be reviewing 2 years?	DBHDS has contracted with HSAG to conduct two rounds of QSRs between July 2020 and February 2021. Round 2 timeframes will be communicated to CSBs/BHAs/providers as soon as they are available.