

Division of Developmental Services
Virginia SIS® Standard Operating Procedures (SOP) and Review Request Process

What is the Supports Intensity Scale® (SIS)?

The Supports Intensity Scale is a standardized and norm-referenced assessment developed in 2004 by the American Association on Intellectual and Developmental Disabilities (AAIDD). This assessment has been tested nationwide to ensure validity and reliability. More information can be found on the AAIDD website: www.aaidd.org/sis.

The SIS is an assessment of an individual's support needs. The SIS gathers information through an interview with the individual and people who know the individual well, identified as respondents.

A Qualified Respondent (QR) is someone who has known the individual for at least 90 days and has recently had the opportunity to observe and support them in at least one environment for an extended period. A Support Coordinator (SC) is also considered a qualified respondent after being assigned to the individual in the Waiver Management System (WaMS) for at least 90 days.

A trained Interviewer collects information from respondents and the individual on many aspects of community living. The interview questions focus on the supports an individual would fully participate in the community.

The SC and providers have access to the SIS report via Attachments in Waiver Management System (WaMS). and should download and maintain a copy for their record. The SC makes a copy of the SIS report available to the family within 15 business days of the SIS interview. Regulation (12VAC30-122-200) states that information gathered during the SIS should inform the person-centered plan (PCP).

The SIS does not determine eligibility for Developmental Disability (DD) Waiver services. It does not determine the type of DD waiver assigned, the number of available services, or number of hours approved for each service. A completed SIS assessment and, when appropriate, the Virginia Supplemental Questions and Verification Record Review are utilized to calculate the individual's support level, which determines the DD waiver provider reimbursement tier.

Virginia Standard Operating Procedures (SOP) for the SIS

1. An AAIDD-recognized SIS Interviewer administers the SIS.
2. Unless otherwise indicated, the individual is expected to participate as a respondent in the interview. The individual is free to choose their level of participation. However, the SIS Interviewer must meet the individual.
3. Legal guardians must be invited to participate in the SIS interview.
4. Before the interview, the SIS Interviewer will explain the reason for the SIS, the assessment process, the respondents' role, and the Interviewer's role.
5. A SIS interview will not move forward with less than 2 respondents.
6. Each question on the assessment must be asked and answered with additional discussion as needed. Once the assessor has arrived at a rating, the assessment will proceed.
7. The respondent's role is to describe the individual's support needs for each item. Respondents may be asked follow-up questions to gain additional information.
8. The interviewer will determine and assign the appropriate score based on the descriptions of support needs provided by respondents.
9. Sections 1A and 1B of the SIS identify exceptional medical and exceptional behavioral supports. The Virginia SIS Supplemental Questions will be completed as indicated.
10. The Interviewer will Document the names of all participants on the "Virginia Standard Operating Procedures Checklist for the SIS Interview."

11. Immediately following the SIS, the Interviewer will review the “Virginia Standard Operating Procedures Checklist” with participants and ask for their verbal agreement/disagreement with these items. This expression of agreement or disagreement alone does not affect the validity of the SIS or its outcomes. The interviewer will note the responses. Respondent signature confirms participation in assessment.
12. Respondents are expected to participate fully in the assessment, including avoiding distractions (texting, checking emails, doing paperwork, having side conversations, etc.)
13. If a respondent must leave before the interview has ended, the Interviewer will note the time on the Checklist.
14. No Recording (audio, video, or through artificial intelligence) of the SIS interview is permitted. This prohibition includes the use of security recording devices.

What if there are concerns about how the SIS was conducted?

The individual, guardian, or family member who participated in the interview may request that DBHDS review whether the Virginia Standard Operating Procedures for administering the SIS were followed.

There is no appeal for the SIS assessment or specific SIS ratings. Requests to review or compare specific ratings will not be considered. DBHDS and AAIDD trust and endorse SIS interviewers to assign accurate ratings based on their intensive ongoing training and the respondent descriptions. If an individual, their guardian, or family member who participated in the assessment feels that SIS Standard Operating Procedures were not followed, they may request a review by the SIS Review Unit by submitting a completed and signed copy of the Virginia SIS SOP Review Request Form. A request must be made within 45 calendar days of the SIS report becoming available to SC and Providers in the Waiver Management Systems (WaMS). A SIS SOP Review Request also requires a letter from the requestor detailing how the SOPs were not followed in the assessment.

The Review form and letter shall be mailed to

DDS SIS Review Unit
DBHDS Division of Developmental
Services PO Box 1797, Richmond,
Virginia 23218-1797

or submitted via encrypted email to the

SIS Review Unit at
SIS@dbhds.virginia.gov

The Virginia SIS Review Unit, in consultation with the SIS vendor, and the SC will complete a comprehensive review of the request and the individual’s Person-Centered Plan (PCP). DDS will issue a decision finding that the Virginia Standard Operating Procedures were either followed or not followed. A final decision will be made within 60 business days of the date the Review form is received by DBHDS. Notification to the requestor and SC will be sent within 5 business days of the decision.

If it is found by DDS that the Virginia Standard Operating Procedures for the administration of the SIS were not followed, a new SIS will be requested and scheduled with an AAIDD recognized Interviewer within 90 calendar days the decision rendered by DDS it is found by DDS that the Virginia Standard Operating Procedures were followed, the review will be closed and a new SIS assessment will not be authorized.

The DDS determination regarding compliance with the Virginia Standard Operating Procedures is final.

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This form is used to report that the interview was not conducted according to Standard Operating Procedures (SOPs). If this is not your intent, do NOT complete the form.

Please send a completed and signed copy of this form along with a letter detailing the specific ways in which the Virginia Standard Operating Procedures (SOPs) for the administration of the SIS were not followed to *DDS SIS Review Unit* at the address or email listed below.

Name of individual assessed: _____

CSB/BHA/Training Center and Support Coordinator name: _____

Date of SIS: _____

Please check the SOP(s) not followed during the SIS.

☒ SOP NOT followed	Standard Operating Procedures for Conducting a SIS (This list is not all inclusive. Refer to pages 1 & 2 for all SOPs.)
	The SIS reflects the needed supports both in the home and in the community.
	During the introduction, the SIS Interviewer explained the reason for the SIS, the assessment process, the role of respondents, and the role of the interviewer.
	The SIS interview was conducted with at least two Qualified Respondents, defined as persons who have known the individual for at least 90 days and have recently had the opportunity to observe and support them in one or more environments. DBHDS identifies Support Coordinators as a Qualified Respondents 90 days after the individual has been assigned to the SC in the Waiver Management System (WaMS).
	At least 2 respondents from the individual's life were present for the entire interview.
	When necessary, opportunity for discussion was given.
	Items on the assessment were described as necessary.
	The SIS interviewer shares the rating they assigned for each question.
	The SIS exceptional medical and exceptional behavioral questions were discussed during the interview.
	Other (Identify the SOP that was not followed)

Print Name

Signature

Date

Relationship to Assessed Individual

☐ I confirm that I have reviewed the SOPs and am authorized to submit this review request.

Contact Information: Phone number, mailing address

**Please send this form and a letter outlining SOP
concern via mail or encrypted email to:**

DDS SIS Review Unit
DBHDS Division of Developmental
Services PO Box 1797, Richmond,
Virginia 23218-1797
SIS@dbhds.virginia.gov