1. **Which advanced competencies are required for each level 5, 6, and 7?** For each individual assigned a level 5, 6, or 7 (Tier 4 reimbursement rate), DBHDS-licensed providers complete the advanced competency checklists that relate to each person’s support needs. Support to some individuals may require multiple Advanced Competency Checklists. So, if someone is assigned a Tier 4 (Levels 5, 6, or 7) *AND*:

The presence of a complex health condition that necessitates specific supports and instructions, Advanced Health Competencies must be met (DMAS P244a).

A diagnosis of autism, Autism Competencies must be met (DMAS P201a).

The need for behavioral supports in either the ISP or in a formal behavioral plan, the Behavioral Supports Competencies must be met (DMAS 240a).

1. **How do you determine which advanced competencies is required for a level 5, tier 4 with no exceptional needs in medical or behavioral and no diagnosis of autism?** Since Tier 4 represents a “maximum level” of support needs, the circumstances described would be the exception rather than the rule. If there are no documented health/medical/behavioral needs or a diagnosis of autism, advanced checklists would not be required. There should be clear documentation that supports this status to include SIS results, any assessments completed, as well as the Individual Support Plan that all align with this decision.
2. **If a new hire is terminated or quit within the first 180 days of hire and competency checklists have not been completed, what procedure should agencies follow?** Keep on file per record retention requirements that employee’s Orientation Test Answer Sheet (indicating a passing score of 80% or better), their DSP Assurance, the Supervisor Assurance of the supervisor who trained them, and the competency checklist documenting their progress towards meeting proficiency that was completed up until the time of their departure.
3. **What do you do if former employer refuses to turn over certificate, tests, etc. to new agency?** You would then need to retrain the DSP, administer the orientation test, and have them complete a new DSP Assurance.
4. **In what circumstances are the observations N/A, and what’s the best way to document that**? If a specific skill is not applicable to the support being provided, it can be marked N/A with an explanation as to why it is not applicable. For example, a job coach most likely would not administer medication or assist with teeth brushing, so these skills could be marked N/A for that staff with an explanation as to why they do not provide those supports. You want to be absolutely certain the skill is not applicable before doing so as to avoid possible citation or payback.
5. **Can customized rates be requested to cover the cost of the staff already deemed proficient working alongside staff who have not yet been deemed competent with Competency 3?** No, Customized Rate is not available for this purpose.
6. **What should you do if an employee refuses to sign competency checklists?** If someone isn’t deemed as proficient within 180 days, which is documented on the competency checklists. They cannot provide Medicaid reimbursable supports until this documentation is complete.
7. **How do we confirm competency/proficiency for a Sponsored Residential provider who does not yet have a person in their home?** Pending regulation 12VA30-122-180 states that “The date of hire can be the date that the sponsor begins providing service in the sponsored home setting.”
8. **Who should maintain competencies for Workplace Assistants?** The Employment Service Organization or the DBHDS-licensed provider who employs the Workplace Assistant.
9. **How often does a supervisor need to get a new certificate?** DSP Supervisors only need to complete DSP Supervisory Training once, passing the online test with 80% or better. If a DSP Supervisor previously completed the 2016 version of the supervisory training, it is optional for them to take the 2020 DSP Supervisory Training, not required. DSP Supervisors will need to be confirmed proficient after 180 days of hire and annually thereafter with a new checklist every 5th year.
10. **So for a Tier 4 you only have to do the competencies that pertain to them and not all three advance competencies?** You only need to complete the basic competency checklist along with whatever advanced competency checklists pertain to that individual as defined in Question 1 above.
11. **Do supervisors have to maintain the competency checklist too or does the Supervisor Training suffice?** DSP Supervisors must meet and maintain the appropriate competency checklists, as well as the Orientation training certificate and assurance.
12. **Are there more ways to observe competency while not being observed working 1:1?** There are several items on the basic competency checklist that can be assessed by the supervisor through conversation with the DSP, such as “Describes the identified health and behavioral support needs for each individual and their role in providing support to each person.” The skills that can be confirmed with conversation can be identified by the word, “Describes,” in the indicator, versus the word, “Demonstrates,” would indicate this should be physically observed.
13. **Can you provide a list of the professionals/credentials that are qualified to verify the trainings for the advanced competencies?** Training may be accessed through a variety of means as long as it is nationally recognized or developed or approved by a qualified professional in each competency area. Health professionals include: a physician, nurse practitioner, psychiatric nurse practitioner, or registered nurse (RN). Autism professionals include: a psychiatrist; a psychologist; psychiatric nurse practitioner; a Licensed Professional Counselor (LPC); a Licensed Clinical Social Worker (LCSW); a Psychiatric Clinical Nurse Specialist, or a Certified Autism Specialist (CAS), a Licensed Behavior Analyst (LBA), or a Licensed Assistant Behavior Analyst (LABA). Behavioral professionals include: a psychiatrist; a psychologist; psychiatric nurse practitioner; a Licensed Professional Counselor (LPC); a Licensed Clinical Social Worker (LCSW); a Psychiatric Clinical Nurse Specialist, Positive Behavioral Support Facilitator (PBSF), a Licensed Behavior Analyst (LBA), or a Licensed Assistant Behavior Analyst (LABA). For a list of topics that must be covered in each Advanced Competency training, refer to the *Direct Support Professional (DSP) and DSP Supervisor DD Waiver Orientation and Competencies Protocol*, dated March 6, 2020.
14. **How often are the competencies supposed to be done?** DSPs and DSP Supervisors must be deemed as proficient in the basic competencies and, if a DBHDS-licensed provider, applicable advanced competencies within 180 days of hire (or within 180 days of supporting a person with related needs), reconfirmed annually, with a new checklist every 5th year. Upon approval of DD Waiver regulations, DSPs and DSP Supervisors must be deemed “competent” with Competency 3 before providing supports in the absence of paid staff who has already demonstrated proficiency.
15. **For Supported Employment services under Waiver are job coaches required to be DSP trained or only if we are working with WPA?** DSPs and DSP Supervisors of Workplace Assistance, Individual Supported Employment, and Group Supported Employment must meet both training and basic competency requirements. If a DBHDS-licensed provider, they will need to meet advanced competencies for individuals assigned a tier 4 reimbursement.
16. **Aren’t advanced competencies only required when a provider is receiving the customized rate regardless of the SIS score?** It is possible that as a stipulation of the Customized Rate that you will be required to meet advanced competency requirements without an assignment of tier 4. These Customized Rates operate outside of the traditional 4-tier reimbursement structure. However, they are also required for any individual in an applicable DBHDS-licensed service and assigned a tier 4 as stated above.
17. **When is annual review date of the competencies checklist? Is it to the day or within the month?** Competency checklists should be reconfirmed before the anniversary date of the initial checklist.
18. **If a DSP is hired in 2018 and completed a checklist. Do they have to complete the newly formatted checklist for 2020?** Upon approval of the final DD Waiver regulations, all DSPs and DSP Supervisors will need to use the new checklist upon their annual competency review.
19. **What happens if the DSP fail the DBHDS test?** You will need to retrain and retest the DSP.
20. **With services being tied to SIS level, will SIS reviews be more flexible to re-evaluation for a person changing their support needs?** There has to be 6 months’ worth of evidence supporting the change in support needs, and the submission has to come through the SC. Any questions or requests for new SIS evaluations need to be directed to the Regional Support Specialist.
21. **Can DSP competencies be completed/oversight by consultant?** The DSP Supervisor should be observing competencies for DSPs, with the Agency Director or designee observing the DSP Supervisor’s competencies.
22. **Is the provider responsible for maintaining competency checklists for temp staff?** If the temp staff works longer than 180 days, they will need to meet competency requirements as well. Any temp staff should be meeting Orientation Training and Testing requirements before providing reimbursable services under DD Waiver. Upon approval of DD Waiver Regulations, temp staff will need to be deemed “competent” with Competency 3 before providing supports in the absence of paid staff who has already demonstrated proficiency.
23. **Does each supervisor in each organization need to take this online training prior to declaring DSPs as competent?** Every DSP Supervisor who is either providing training or confirming competencies will need to take the DSP Supervisory Training in the Commonwealth of Virginia Learning Center, pass the test with 80% or better, complete a Supervisor Assurance, and be deemed proficient within 180 days of hire in basic competencies and applicable advanced competencies.
24. **Does the fifth year new evaluation have a timeline to be completed?** The new checklist completed in the 5th year should be completed before the 5th anniversary of the initial confirmation of the competencies.
25. **Will DSP orientation/training need to be redone for employees who completed this when we were providing a licensed service? If supervisor test was previously done when we were providing a licensed service, will supervisor need to do training/assurance again?** DSPs and DSP Supervisors only need to retake Orientation Training and pass the test again if they have not completed the 2016 Orientation Training and pass the test with 80% or better.
26. **Why are CD Personal Assistance, Respite and Companion omitted from this requirement?** In the CD model of services, the individual/SDM determine and train CD attendants on needed competencies/skills.In addition, the definition of DSP in the DD Waiver regulations, does not include CD staff or Services Facilitators:

*"Direct support professional," "direct care staff," or "DSP" means staff members identified by the provider as having the primary role of assisting an individual on a day-to-day basis with routine personal care needs, social support, and physical assistance in a wide range of daily living activities so that the individual can lead a self-directed life in his own community. This term shall exclude consumer-directed staff and services facilitation providers.*

1. **What are the educational requirements for a team member to obtain the Supervisor certificate through DBHDS Knowledge Center? Can non-human service degreed employees (like director of HR) earn this certificate and have the Agency Director sign off on assurance?** There is no prerequisite educational requirements to take the DSP Supervisory Training. An HR director who has taken the DSP Supervisory Training and passed the test with 80% or better can receive a certificate from the training, have the Agency Director or designee sign the Supervisor Assurance, and provide DSP Orientation Training. The DSP’s Supervisor should be discussing how training content applies within the agency, answering any DSP questions, and observing and confirming proficiency for DSP Competencies.
2. **Does the director or designee have to complete any training, as they observe the supervisor?** It is not required unless they provide Medicaid reimbursable services, but the Agency Director or designee may take the DSP Supervisory Training, should they desire.
3. **What is considered the date of hire for employees of Individual Supported Employment agencies after the regulations are approved, for current employees?** Non DBHDS licensed services that must meet training and competency requirements will have 180 days from the approval of DD Waiver regulations confirm proficiency for existing employees.
4. **For advanced competencies-if a qualified person writes the curriculum for the training can Supervisors present the training? Or does the training NEED to be presented by a qualified person?** Supervisors may present the training, as long as it has been approved by a qualified professional as listed in the March 6, 2020 protocol.
5. **We are seeing Tier 4 needs that are not either in Medical, Behavioral, or Autism. Do the standard basic competencies meet this?** There are basic support needs related to the health and safety of all individuals included in the basic competencies. The advanced competencies go beyond this basic level, but may not include every skill needed for every person. DSPs and supervisors need to be able to meet each person’s individual needs regardless of the standards established through the competency process.
6. **If a Qualified person writes the training a supervisor presents, does the qualified person have to sign off on the certificates or trainings for all DSPs receiving the training?** No, they will only have to sign off on the approved curriculum and include their credentials with their signature. The supervisor can sign training certificates.
7. **If we are providing Supported Employment services to an individual with a SIS level 5, 6 or 7 no advanced competencies are needed? Is any documentation of additional training needed?** If you do not hold a DBHDS license, you do not need to complete advanced competencies and related training requirements. If you do hold a DBHDS license, you will need to complete the applicable competencies and additional trainings for any staff supporting an individual with a SIS level 5, 6, or 7. There is an expectation that individual needs be met regardless of competency standards. Ensure that anyone providing support is able to do so effectively based on the person’s needs and preferences.
8. **Must everyone with a behavioral competency have a formal behavior support plan?** Not necessarily; however, the team should discuss if there is a need for a referral to a behavior specialist.
9. **Is it at the provider’s discretion to determine which competencies do not apply to our DSPs?** The services you provide and specific supports will help you identify if any of the competencies do not apply to your organization’s DSPs.
10. **As we transition to documenting competencies on the new forms, do we start from year 1 for everyone? Or can year 3 be the old checklist and year 4 be the new one, for example?** You may begin the new 2020 streamlined checklist now, if you wish, and it will not be required until approval of DD Waiver regulations. You may begin the new checklist whenever it is time to reconfirm the competencies on the previous checklist.
11. **Where are the streamlined documentation forms located?** You can find the March 6, 2020 streamlined basic competencies checklist, along with the March 6, 2020 protocol on the Provider Development webpage under “March 6, 2020 Optional for use” [http://www.dbhds.virginia.gov/developmental-services/provider-development](%20http:/www.dbhds.virginia.gov/developmental-services/provider-development)
12. **I have been having my staff do the test over annually, is this needed?** Testing is only required once.
13. **If we have individuals that are not a tier 4 but have a behavioral plan, is the advanced competency required to be completed?** Not unless the person is receiving a Customized Rate and has behavioral support needs. Otherwise, Advanced Behavioral Competencies are only required if someone is assigned a Tier 4 (Levels 5, 6, and 7) **AND** has behavioral support needs identified in the ISP or a Behavior Support Plan.
14. **Is there a crosswalk to let us know what has been updated in the new competencies?**  No, however many of the changes were described in the response to public comments available for review here: <https://dbhds.app.box.com/file/642180125832?s=wi7vwe5tk0zbot1p4gr3kae6uv5f458g>
15. **FOR SE and GSE - these staff do not meet your definition of a DSP - why do they need to go thru this - especially since there is language from the General Assembly that excludes them from this if CARF accredited. Why was this included in the new regulations?** Virginia’s Settlement Agreement requires that staff who are providing Individual Supported Employment and Group Supported Employment meet Orientation Training and Competency requirements, which is why it is included in the new DD Waiver Regulations. Any skills that clearly do not relate to the work of ISE and GSE may be justified as “not applicable” on the checklists.
16. **If we are not testing staff annually, do we need a new signed DSP Assurance each year?** No, the DSP Assurance is only needed upon passing the Orientation Test with 80% or better.
17. **Can we create advanced competencies and have the qualified professionals approve?** Yes.
18. **When a supervisor is determining a DSP's competencies and they arrive to the company highly qualified (Nurse or QMHP) can the supervisor determine they are competent at time of hire?** Any agency employee, regardless of credentials, who provides Medicaid Waiver reimbursable direct support must complete the DBHDS DSP Orientation process. This process also applies to supervisors who oversee the work of DSPs. If a nurse is only providing nursing services under the waiver, the process would not apply. If a nurse is providing and documenting direct support related to the DSP definition, they would apply. They would also apply if the nurse is in the role of supervising DSPs.
19. **Are there any issues if we take the competency forms and put them in an LMS?**  Forms may be adapted to an electronic format as long as no content is lost and the form is identifiable.
20. **Regarding the Tier 4, does everyone in the agency have to have additional proficiency training, or just the supervisor?** Anyone providing Medicaid reimbursable services to that person will need to participate in documented training and meet proficiency with the applicable advanced competencies as required.
21. **How does the Program Manager/Owner get observed for competencies when no one is at a higher level?** The agency director is ultimately accountable and deemed qualified by nature of his or her role. If the DSP Supervisor is also the agency director, it is recommended that a peer provider or alternate manager (internally or from a partner agency) confirm competencies for this manager/owner.
22. **Will the advanced competencies be streamlined?** There are currently no plans to make any changes to the advanced competencies, however DBHDS is always looking to streamline and improve processes to the extent possible. Future edits may occur over time.
23. **I have heard agencies will still require the staff to take the advanced competencies even though they do not provide services to a person with a tier 4.** While not required by regulation, agencies are able to require staff to receive training for the Advanced Competencies; however, observing competency may be difficult if not supporting a person with those particular needs. The exception to this would be supporting a person at a lower tier who receives a customized rate and then the advanced competencies would be required.
24. **Where are the Assurance forms located?** You will find the DSP and Supervisor Assurances, 2016 Basic Competencies, and Advanced Competency checklists here: <https://web.partnership.vcu.edu/DSP_orientation/Competencies-Assurances-Tests.html>. The pending regulations version of the assurances are available in the DD Orientation and Competency Requirements link under "March 6, 2020 optional for use” section here: <https://dbhds.virginia.gov/developmental-services/provider-development>.
25. **So if we support an individual with a SIS Tier 4 and autism, all staff must complete that competency?** All DSPs and DSP Supervisors in DBHDS-licensed settings, regardless of credentials, who provides Medicaid reimbursable support to that person.
26. **Can you please speak about refresher training? For instance, a Provider hires a new DSP with training from 2010.** A DSP with Orientation Training prior to 2016, will need to retake the 2016 Orientation Training and Test.
27. **What signature should we date at the bottom the competency at hire or the competency before the 180 days?** The boxes next to each skill are to confirm competency and proficiency throughout the 180 days. The signature at the bottom is confirming proficiency with all 3 basic competencies upon completion of the form.
28. **If a DSP competency is completed 2/1/2020 and 2/6/2020, is that considered out of compliance for it occurring 5 days after the initial year?** Yes, proficiency should be reconfirmed before the end of the anniversary date. Any mitigating circumstances that caused the delay should be maintained on file.
29. **Just to confirm all DSPs must have training from 2016?** Yes, all DSPs must have completed and passed the 2016 Orientation Training with 80% or better before providing reimbursable services under any DD Waiver.
30. **Is it just the staff who is "primarily" assigned to support an individual who met criteria for Advanced Health Competency who needs to demonstrate competency/proficiency? Or is it required that any staff who provides support to the individual even if just a couple times (ex the primary staff is on Leave) will an advanced competency be required for that back up staff?** Anyone who provides Medicaid reimbursable services to that person, no matter how frequent, will need to be confirmed as proficient within 180 days of hire (or within 180 days of beginning to provide support to a person with related needs as applicable).
31. **If a newly hired staff is only able to provide the certificate they received from an outside agency and not the test answers what do you recommend?** You should retrain them using the 2016 DSP Orientation Training, they should pass the test with 80% or better, and complete a new DSP Assurance. Keep a copy of the scored test and assurance on file.
32. **Should DSPs who support tier 4 individuals complete both the basic competency AND the advanced competency?** Yes, all staff must complete the basic competencies and any staff supporting an individual assigned a tier 4, should complete both basic and applicable advanced competencies.
33. **Where do we get the supervisor training?** You can find instructions on how to access the DSP Supervisory Training in the Commonwealth of Virginia Learning Center on the Provider Development webpage under “Orientation Requirements for Supervisors”: <http://www.dbhds.virginia.gov/developmental-services/provider-development>
34. **To be clear, a determination of "competent" in the 3 competencies is not sufficient. All DSPs must achieve "Proficiency" in all 3 areas?** Yes, all DSPs and DSP Supervisors must be deemed “proficient” within 180 days of hire. Once regulations are approved, it is expected that competency 3 related to health and safety will need to be documented at a “competent” level prior to providing supports in the absence of other qualified staff. Proficiency within 180 days of hire will still apply.
35. **Is there any grace extended to providers who were unclear about the expectations which were based on their interpretation since this guidance is provided after this DSP competency was initially rolled out?** DSP Competencies have been required since 2016, so there is no grace period for not knowing the requirements. Any mitigating circumstances that caused a delay should be maintained on file.
36. **Can the QDDP QIDP do the training for advanced competencies?** They can develop and provide the training, as long as it has been approved by a qualified professional as listed above.