



## **Quality Improvement Plan (2026)**

### **Table of Contents**

1. Background
2. Mission, Vision, Values, Operating Principles, Agency Key Results
3. Organizational Chart
4. Goals of Quality Improvement Plan
5. Quality Improvement Plan
6. Performance Reporting
7. Self-Evaluation Process

## **1. Background**

Starbridge was formed on June 1, 2015 from the merger of The Advocacy Center and LDA Life and Learning Services. The merger combines the strengths of both organizations to provide a unique and integrated approach to advocacy, education, and community services.

Starbridge's mission is to transform communities to include everyone by partnering with people who have disabilities, their families, and others who support them. Starbridge provides a unique and valuable combination of services and advocacy for individuals with disabilities and their circles of support. Starbridge is uniquely positioned to facilitate education, community living, employment, and community inclusion for people with disabilities. We work side by side with those we support, to form a partnership rooted in collaboration, inclusion, integrity and trust, in order to identify opportunities and seek possibilities for success. Our vision is that every person has the right to define and lead a fulfilling life. Starbridge has many years of experience assisting people to reach their highest level of independent living possible. Current programs and services include community habilitation, community pre-vocational services, educational advocacy, fiscal intermediary, family advocacy, parent training and information, supported employment, and residential services.

Starbridge is committed to providing exceptionally high-quality programs and services. Starbridge strives for excellence in management and support services for people with intellectual and developmental disabilities and their families, and takes pride in upholding common standards and expectations to promote the well-being of those we support. In partnership with internal program and functional department leadership (i.e.: human resources/workforce, finance), Starbridge's Corporate Compliance and Quality Improvement departments continually review guidance from various regulatory agencies including but not limited to OPWDD, OMIG, NYS Justice Center, NYSDOH, and NYSED. The goal of this collaborative partnership is to ensure that appropriate systems and processes are in place to adhere to all applicable regulations. The Quality Improvement department provides various measures of direct oversight to ensure that the individuals Starbridge supports are cared for and educated about how to remain healthy, safe, and as independent as possible. The primary focus of Starbridge employees is to provide person-centered services and improve people's lives.

Starbridge's governing body must ensure there is a comprehensive plan for quality oversight and improvement. A Quality Improvement Plan is required, and annual Board review/approval of the plan must be noted in the Board's meeting minutes. The plan must include a requirement concerning the annual collection and review of data along with identifying areas for improvement. An annual analysis of the data will determine if revisions to the Plan are necessary. The Quality Improvement Plan should reflect consideration for achieving the following outcomes:

- Person Centered Planning and Service Delivery
- Assurance of Individuals' Health, Safety, Rights, and Freedom from Abuse/Neglect
- Processes to Address Compliance with OPWDD, state, and federal requirements
- Mechanism to proactively solicit input from staff, individuals, families, and other stakeholders

- Continuous Quality Improvement
- Governance and Leadership

Starbridge implements an ongoing quality improvement process that involves multiple departments and levels within the organization. In recent years, Starbridge's internal quality improvement practices have been focused on OPWDD-funded programs and services. The Corporate Compliance and Quality Improvement department continues to strategically prepare for the expansion of internal auditing measures to Starbridge programs funded by other external oversight agencies. Assisting each person in living the highest quality of life, free from abuse/neglect and exploitation, is considered whenever developing quality improvement initiatives, person-centered service plans, staff development plans, and program assessments. Quality initiatives are embedded in every department and involve all facets of the organization. These initiatives include continual analysis of agency-wide systems, best practices, policies, and procedures. The Vice President of Corporate Compliance and the Quality Improvement department provide ongoing support and training (as needed) to program staff and ensure compliance with state and federal regulations. Members of the Quality Improvement department (and the Vice President of Corporate Compliance, when appropriate) attend statewide and regional meetings / webinars on a regular basis. It is the expectation that Program Directors will also attend such meetings when the agenda and/or topics of discussion pertain to their program's service delivery. The goal of the Quality Improvement department is to partner with programs to provide guidance and support related to the delivery of high-quality services, to assist in the implementation of regulations, and to provide feedback relative to incident corrective action plans and external program reviews.

## **2. Mission / Vision / Values / Operating Principles / Key Results**

### **MISSION**

Transforming communities to include everyone by partnering with people with disabilities, their families and those who support them.

### **VISION**

Ensuring every person has the right to define and lead a fulfilling life.

### **VALUES**

Inclusion, Integrity, Collaboration, Trust

## **OPERATING PRINCIPLES**

Starbridge's ability to grow as a successful, person-centered human service organization will be dictated by the strength of our staff and volunteer belief in, and commitment to, the operating principles and values inherent in our mission. Shared awareness and clear understanding of these principles will enable us to rally around a common purpose in all that we do.

It is the intent of Starbridge to:

- Focus our person-centered planning and development on individualized supports created in partnership with Individuals supported and families.
- Create an organizational environment where openness, choice, new ideas and innovation in support of the Starbridge mission can flourish because they are encouraged, understood and supported.
- Actively work both individually and as an organization to remove physical, attitudinal and communication barriers that exclude people with disabilities from their fundamental right to full community inclusion and participation.
- Constantly strive to maintain an Individual/family driven focus in all that we do based on the highest standards of service quality.
- Support Starbridge employees in the belief that they can make a difference, will be treated with respect and be challenged in a positive work atmosphere that fosters cooperation over competition through a dedication to team process.
- Pursue service growth and expansion in keeping with our mission that is cost conscious, well planned and supports the financial stability of the organization.
- Promote the Individual, family and employee understanding and awareness of the agency culture by actively listening to their feedback and encouraging open expression opportunities throughout the agency.

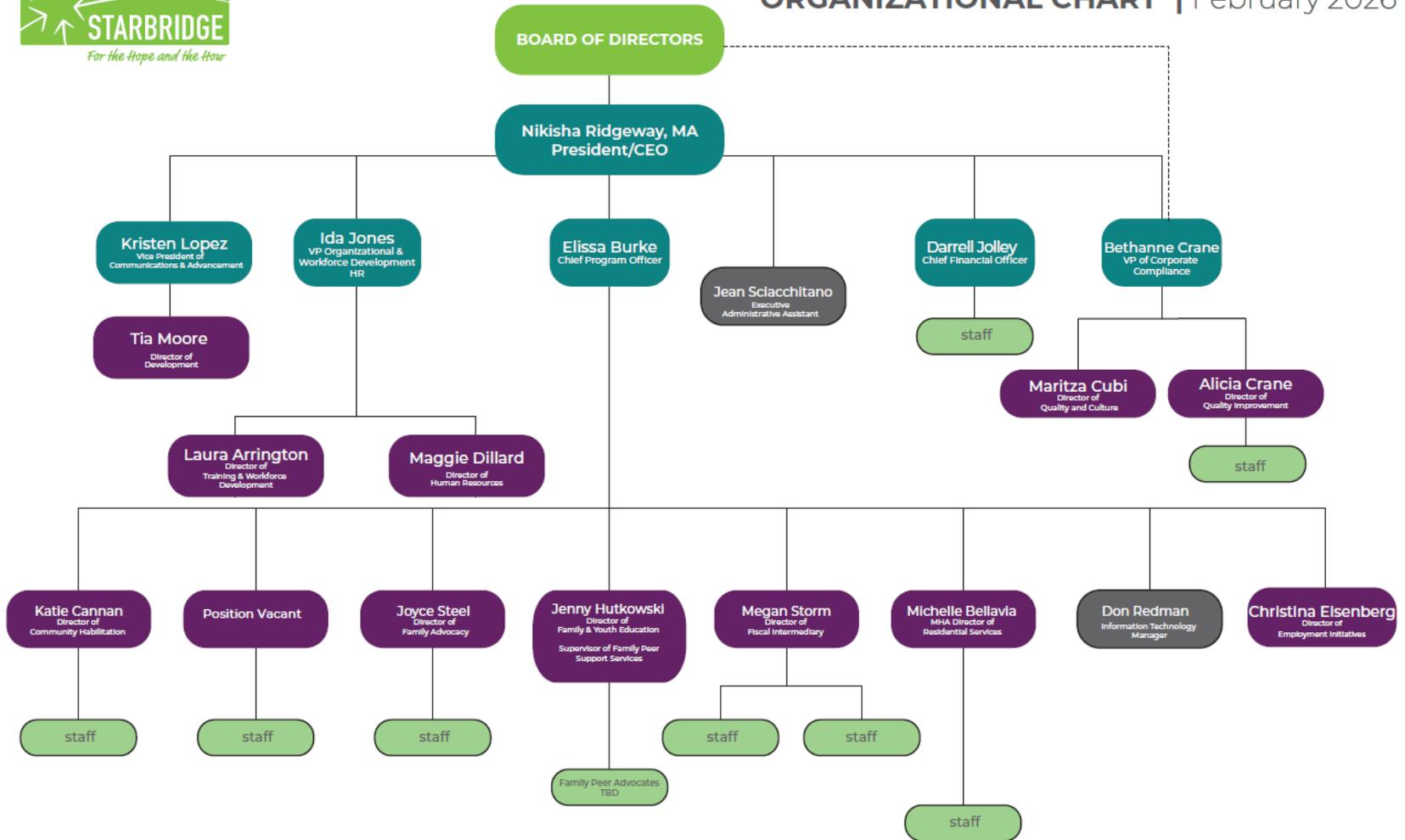
## **STARBRIDGE KEY RESULTS**

1. Individuals supported are safe.
2. Individuals are treated with dignity and respect and their rights are protected at all times.
3. Individual's choices are understood, encouraged, respected, and followed.
4. Employee interactions with each other are respectful.
5. Teamwork is valued by all employees through working cooperatively together to ensure all Individuals receive the best and safest level of care.
6. The medical needs of all Individuals are promptly identified and addressed.
7. Individual's personal allowance money is secure and handled appropriately and per regulations at all times.
8. Individuals are assisted in any manner they request or require which keeps them comfortable, clean and well groomed.
9. Individual's adaptive equipment is maintained in proper working order and available to Individuals at all times.
10. Starbridge facilities are kept clean, safe and well-maintained at all times.
11. Quality supports, as defined by the Individuals and their families/guardians/advocates, are provided at all times.
12. The workforce is well-trained and supported to meet Starbridge expected outcomes.
13. Agency operations are compliant with all New York State and Federal laws and regulations.
14. All agency actions comply with agency operations and personnel policies and procedures.



### 3. Organizational Chart

ORGANIZATIONAL CHART | February 2026



#### **4. Goals of Quality Improvement Plan**

Starbridge is committed to providing the highest level of care to the people we support. Our person-centered residential sites are home for the people that live there and as such, we believe it is their right and our responsibility to ensure that they live as independently as possible, and as they choose, with the appropriate and consistent support of Starbridge workforce in helping to create and maintain their home. Our advocacy, education, transitional planning, community, and employment supports are meaningful and important to the Individuals who utilize them, and their families / circles of support. As such, it is our responsibility to ensure these supports and services are provided *in partnership* with Individuals and their families with the intent of guiding people through life's transitions, assisting people with finding answers and/or discovering new pathways, and working to make an impact with shaping strong, well-connected and supportive communities. The following goals are supported by the Starbridge Board of Directors and agency leadership. Each is addressed in detail and paired with measurable outcomes, action items and timelines for implementation.

The goals outlined below focus on the strengths, needs, and desires of the Individuals supported at Starbridge. The goals were established through active and ongoing collaboration between and among members of the Executive Leadership Team, the Director Leadership Team, the Quality Improvement Team, and verbal input from Individuals supported and their families / circles of support.

It is a Starbridge imperative that all Individuals supported and served are manifestly safe whenever they are receiving services from Starbridge, and that all supports are driven to the fullest extent by this essential value. Given this underlying commitment to the well-being, rights protection assurance, safety, and security of the persons we support, the following goals have been chosen for 2026:

**GOAL 1. Individuals will be provided supports that are in accordance with HCBS settings requirements whenever they are receiving supports and services from Starbridge.**

**GOAL 2. Individuals will be provided opportunities for self-advocacy when they are receiving supports and services from Starbridge.**

**GOAL 3. Starbridge will provide for organizational protections against conflict of interest in person-centered planning and service delivery, and what to do if a conflict arises.**

**GOAL 4.** Starbridge will provide a mechanism to determine Individuals' satisfaction with the services and supports they receive, and a process for addressing/remediating dissatisfaction reported through the mechanism.

**GOAL 5.** Starbridge will continue to hire and retain highly qualified employees who display ethical work behavior consistent with the agency's Mission, Vision, Operating Principles and Agency Culture.

**GOAL 6.** In order to comply with newly adopted Emergency Preparedness regulations, Starbridge will develop policies / procedures and complete Hazardous Risk Assessments, which will create a framework for addressing and reducing vulnerabilities to potential threats / disasters. In order to protect the health and well-being of Individuals supported, Starbridge will integrate and coordinate activities necessary to prevent, prepare for, mitigate, successfully respond to, and recover from disasters and threats.

**GOAL 7.** Starbridge will implement strategies that provide opportunities to assist Individuals with facilitating the creation, development, and continuation of natural support networks.

**GOAL 8.** Starbridge will continue to develop, implement, monitor and keep current policies and procedures that include strategies to facilitate the communication of the agency's mission and goals to all people receiving services, their families/advocates; all levels of employees; and the governing body.

**GOAL 9.** On an annual basis, Starbridge will review, evaluate, revise, and communicate to all stakeholders the goals and objectives of its organizational Quality Improvement Plan which includes measurement, aggregation, and analysis of factors related to the outcomes and the quality of life desired by individuals supported.

**GOAL 10.** Starbridge will continue to enhance current processes to create more detailed and robust strategies to assess and/or measure rates of compliance and/or factors influencing compliance/non-compliance.

## 5. QI PLAN OBJECTIVES

**GOAL 1. Individuals will be provided supports that are in accordance with HCBS settings requirements whenever they are receiving supports and services from Starbridge.**

Objective 1: Starbridge will develop written policies and procedures to facilitate and ensure that residential and non-residential settings where HCBS services are provided comply with HCBS settings requirements.

Obj. 1. - Action Items	Process Owner	Implementation Date	Status Reporting
1a. Starbridge Compliance/QI leadership will work with an OPWDD regulatory consultant to create agency-wide HCBS Settings policy and procedure which complies with HCBS Settings regulations.	Vice President of Corporate Compliance; QI Director	Q4 2025 (11-2025)	Status - completed
1b. Starbridge QI Plan Taskforce will meet monthly to assess the requirements of HCBS settings, and evaluate progress towards goal.	Vice President of Corporate Compliance	Monthly meetings beginning 03-2025 and continuing in 2026	
1c. In conjunction with OPWDD regulatory consultant and/or Starbridge Compliance and QI Leadership (if requested and/or deemed necessary), Starbridge Program Directors will develop written program-specific processes and best practices for implementing HCBS settings regulations within each HCBS waiver program(s).	Program Leadership	By end Q2 2026	
1d. In conjunction with OPWDD regulatory consultant and/or Starbridge Compliance and	Director of Training & Talent Acquisition;	Q1 2026	

QI Leadership (if requested and/or deemed necessary), Starbridge Training and Workforce Development team will create and implement an agency-wide HCBS Settings training. This training will be mandatory for all Starbridge employees.	Vice President of Corporate Compliance; QI Director		
---	--	--	--

**GOAL 2. Individuals will be provided opportunities for self-advocacy when they are receiving supports and services from Starbridge.**

Objective 1: Starbridge will develop and implement an effective mechanism for supporting individuals in self-advocacy.

Obj. 1. - Action Items	Process Owner	Implementation Date	Status Reporting
1a. Starbridge Compliance/QI leadership and program leadership will develop and implement a Self-Advocacy policy and procedure and Self-Advocacy assessment tool in order to assist individuals in assessing their self-advocacy strengths and abilities regarding decision-making and expressing wants and needs regarding their activities, life planning, and/or agency operations of programs/services.	Vice President of Corporate Compliance; QI Director; Program Leadership	Q4 2025	Status - completed
1b. Starbridge QI Plan Taskforce will meet monthly to assess implementation status of self-advocacy mechanisms and activities to increase opportunities in self-advocacy, as well as assess progress towards goal.	Vice President of Corporate Compliance	Monthly meetings beginning 03-2025 and continuing in 2026	
1c. Starbridge Program Directors will implement the Self-Advocacy P&P and	Program Leadership	By end Q2 2026	

assessment tool within each HCBS waiver program(s). All Individuals enrolled in an HCBS waiver program shall have a Self-Advocacy Assessment completed by 06-30-2026.			
1d. Starbridge QI team will review self-advocacy assessments during regular and ongoing internal audits, and summarize findings and make recommendations to share with the QI Plan Taskforce.	QI Director & QI Team	Q3 2026	
1e. Starbridge QI Director will solicit feedback from HCBS waiver program leadership, employees, and individuals regarding the Self-Advocacy assessment tool for the purposes of continuous improvement (revisions, recommendations; etc.).	QI Director; Program Leadership	By end Q3 2026	
1f. Compliance/QI leadership will ensure the self-advocacy policy and assessment tool are reviewed annually, incorporating feedback received as noted above and making sure appropriate revisions have been made to reflect changes and continuous quality improvement modifications in internal processes and best practices.	Vice President of Corporate Compliance; QI Director	By end Q3 2026	

Objective 2: The Starbridge Board of Directors will have a mechanism for active representation of individuals receiving services in agency governance and decision making.

Obj. 1. - Action Items	Process Owner	Implementation Date	Status Reporting
------------------------	---------------	---------------------	------------------

1a. Starbridge will develop and implement procedures and practices that increase opportunities for self-advocacy for individuals supported. This item will be considered met when individual(s) receiving services have active representation in agency governance and decision-making.	Starbridge Executive Leadership; Starbridge Board of Directors	By Q3 2026	
1b. Starbridge QI Plan Taskforce will meet monthly to assess current status of active representation of individuals receiving services in agency governance and leadership.	Vice President of Corporate Compliance	Monthly meetings beginning 03-2025 and continuing in 2026	

**GOAL 3. Starbridge will provide for organizational protections against conflict of interest in person-centered planning and service delivery, and what to do if a conflict arises.**

Objective 1: Starbridge will develop policies and procedures to provide protection against conflict of interest and provide guidance to staff on what to do should a conflict arise.

Obj. 1. - Action Items	Process Owner	Implementation Date	Status Reporting
1a. Vice President of Corporate Compliance will ensure Conflict of Interest in Person-Centered Planning P&P (and accompanying Common Ground Committee Referral Form) is reviewed on an annual basis, by evaluating instances of Common Ground Committee referrals in the previous year, and soliciting feedback on the process from those involved in such instances.	Vice President of Corporate Compliance	Q3 2026	

(Data on feedback received shall be shared with the QIP Taskforce.)			
1b. Vice President of Corporate Compliance will call the Common Grounds Committee together in any instance when deemed appropriate (based on Common Ground Committee referral), but will ensure the Committee has the opportunity to convene 1x annually, at minimum, to review current processes and practices.	Vice President of Corporate Compliance	Q4 2026	
1c. Starbridge QI Plan Taskforce will meet monthly to evaluate progress towards goals above related to Conflict of Interest in Person-Centered Planning.	Vice President of Corporate Compliance	Monthly meetings beginning 03-2025 and continuing in 2026	

Objective 2: Starbridge will develop and implement a mechanism to clearly document individuals' engagement in the person-centered planning and service delivery process, as well as develop mechanisms to allow the agency to measure the effectiveness of such person-centered service delivery.

Obj. 2. - Action Items	Process Owner	Implementation Date	Status Reporting
2a. Starbridge Compliance / QI leadership and program leadership will develop and implement policies, procedures, and more robust tools / resources for the documentation of person-centered planning processes and service delivery in order to assist individuals in participating in person-centered planning to the fullest extent possible.	Vice President of Corporate Compliance; QI Director	Q4 2025	Status - completed

<p>2b. Starbridge QI Plan Taskforce will meet monthly to identify and assess current person-centered planning mechanisms and activities, as well as evaluate progress towards individual action items.</p>	<p>Vice President of Corporate Compliance</p>	<p>Monthly meetings beginning 03-2025 and continuing in 2026</p>	
<p>2c. Starbridge Program Directors will implement the Person-Centered Planning P&amp;P and tool within each HCBS waiver program(s). All Individuals enrolled in an HCBS waiver program shall have a Person-Centered Planning document completed by 06-30-2026.</p>	<p>Program Leadership</p>	<p>By end Q2 2026</p>	
<p>2d. Starbridge QI team will review completed person-centered planning documents during regular and ongoing internal audits, and summarize findings and make recommendations to share with the QI Plan Taskforce.</p>	<p>QI Director &amp; QI Team</p>	<p>Q3 2026</p>	
<p>2e. Starbridge QI Director will solicit feedback from HCBS waiver program leadership, employees, and individuals regarding the Person-Centered Planning tool for the purposes of continuous improvement (revisions, recommendations; etc.).</p>	<p>QI Director</p>	<p>By end Q3 2026</p>	
<p>2f. Compliance/QI leadership will ensure the person-centered planning policy and planning tool are reviewed annually, incorporating feedback received as noted above and making sure appropriate revisions have been made to reflect changes and continuous quality</p>	<p>Vice President of Corporate Compliance; QI Director</p>	<p>By end Q3 2026</p>	

improvement modifications in internal processes and best practices.			
2f. Starbridge QI leadership and program leadership will create a plan to evaluate and measure this initiative by reviewing the outcomes of the implementation of the person-centered plan once all persons supported have had an opportunity to complete the person-centered tool.	QI Director; Program Leadership	Q4 2026	

**GOAL 4. Starbridge will provide a mechanism to determine individuals' satisfaction with the services and supports they receive, and a process for addressing/remediating dissatisfaction reported through this mechanism.**

Objective 1: Starbridge will develop and implement a mechanism to uniformly solicit information from the individuals receiving services regarding satisfaction that focuses on individual's input and/or the individual's point of view.

Obj. 1. - Action Items	Process Owner	Implementation Date	Status Reporting
1a. Together with oversight from the Starbridge QI Team, Starbridge programs will continue implementing the satisfaction survey method developed and documented in policy and procedure, with the intent of measuring and addressing Individual's satisfaction and input with Starbridge services. 100% sample size will be given the opportunity to respond to the satisfaction survey. Positive response of 60%. Note: A critical question within the survey will be whether or not the Individual and/or family	Starbridge programs; QI Director & QI Team	Agency-wide survey implementation date Q1 2025; Continue in 2026	Status - completed

feel they are treated with dignity and respect, and that their rights are protected at all times.			
1b. QI Plan Taskforce will meet monthly to identify and assess current mechanism for soliciting information regarding satisfaction and a process for addressing dissatisfaction within this mechanism.	Vice President of Corporate Compliance	Monthly meetings beginning 03-2025 and continuing in 2026	
1c. Satisfaction survey findings will be reviewed by the QI Plan Taskforce 1x/year. The QI Plan Taskforce will be responsible for reviewing and analyzing this information to determine if additional items need to be added to the agency QI Plan, and/or if additional strategies need to be implemented in order to remediate concerns.	QI Director	Q4 2026	
1d. QI Director and QI team will ensure the satisfaction survey policy is reviewed annually, and that appropriate revisions have been made to reflect changes and continuous quality improvement modifications in internal processes and best practices.	QI Director	Q2 2026	

**Goal 5: Starbridge will continue to hire and retain highly qualified employees who display ethical work behavior consistent with the agency’s Mission, Vision, Operating Principles and Agency Culture.**

Objective 1: Starbridge will continue to assess and improve hiring practices.

Obj. 1. - Action Items	Process Owner	Implementation Date	Status Reporting
------------------------	---------------	---------------------	------------------

<p>1a. Starbridge Workforce/HR leadership will continue to actively and regularly assess hiring practices across the organization, including interviewing and recruiting processes, in order to hire and retain highly qualified employees.</p>	<p>Workforce/HR Leadership</p>	<p>Ongoing; Report progress to the QIP Taskforce quarterly</p>	
<p>1b. Starbridge Workforce/HR Leadership team will develop and implement a “Ready to Hire” resource for Starbridge hiring managers, with the overall goal to enhance awareness and understanding of the current recruitment environment as well as improve consistency among Starbridge’s internal processes for recruiting, interviewing, and hiring.</p>	<p>Director of Training &amp; Talent Acquisition</p>	<p>By end Q2 2026</p>	
<p>1c. QI Plan Taskforce will review and evaluate ongoing updates received from Workforce/HR Leadership regarding various hiring initiatives listed above. The taskforce will discuss and make additional recommendations (as appropriate).</p>	<p>Vice President of Corporate Compliance</p>	<p>Monthly meetings beginning 03-2025 and continuing in 2026</p>	

Objective 2: Starbridge will continue to assess and improve training practices, while ensuring that all staff receive initial and annual trainings within established OPWDD timeframes and that employees providing direct services are afforded appropriate training/learning experiences to develop and maintain the ability to identify, understand and support the diverse personal outcomes of people supported.

Obj. 2. – Action Items	Process Owner	Implementation Date	Status Reporting
2a. Starbridge Workforce/HR leadership will continue to actively and regularly assess training practices across the organization by brainstorming the action items below and evaluating relevant feedback from supervisors and employees.	Workforce/HR Leadership	Ongoing; Report progress to the QIP Taskforce quarterly	
2b. Starbridge Workforce/HR leadership will review and revise the Mandatory Training Policy & Procedure, and ensure this policy is implemented agency-wide.	Workforce/HR Leadership	Implemented Q2 2025	Status - completed
2c. Starbridge Workforce/HR leadership will brainstorm, develop, and implement a sustainable plan for reviewing and updating all agency trainings on an ongoing and consistent basis. This may involve convening a team to objectively review and evaluate that trainings are meeting funder regulations and learning objectives, while also adhering to the highest level of quality and internal Starbridge brand guidelines / best practices. Note: this action item also involves ensuring all agency trainings undergo a formal process for translation (i.e.: Spanish) to ensure that Starbridge trainings are accessible to all employees.	Director of Training & Talent Acquisition; Workforce/HR Leadership; Compliance/QI Leadership	Q4 2026; Report progress to the QIP Taskforce quarterly	
2d. Starbridge Workforce/HR leadership will continue to actively evaluate agency training effectiveness for all Starbridge employees, with the goal of implementing improvements when appropriate. Director of Training & Talent Acquisition will convene a team to brainstorm and explore additional methods of soliciting and evaluating feedback from employees for all trainings (this will involve exploring current	Director of Training & Talent Acquisition; Workforce/HR Leadership	Q3 2026; Report progress to the QIP Taskforce quarterly	

learning management system to ensure the agency is maximizing its fullest potential).			
2e. Starbridge Workforce/HR leadership will continue to evaluate and increase high quality training offerings for Starbridge supervisors, managers, and emerging leaders. The Director of Training & Talent Acquisition will oversee these efforts with the assistance of other team members and subject matter experts. The focus areas of these training offerings may include, but will not be limited to: emotional intelligence in leadership, receiving / giving effective feedback, effective meeting management / facilitation, and building courageous leadership skills.	Workforce/HR Leadership	Q3 2026; Report progress to the QIP Taskforce quarterly	
2f. Starbridge Workforce/HR leadership will explore the idea of identifying and training peer mentors for Direct Support Professionals (DSP's). This may include providing peer mentors for new staff as well as providing peer mentor and refresher training for staff identified as a result of compliance review. (Note: this will not apply to self-hire employees.)	Workforce/HR Leadership	Q3 2026	
2g. Starbridge QI Plan Taskforce will review and evaluate ongoing updates received from Workforce/HR Leadership regarding various training initiatives listed above. The taskforce will engage in discussion and make additional recommendations as warranted in the areas of updates to internal trainings, soliciting feedback on current trainings, enhanced offerings for supervisors, and the possibility of peer mentorship.	Vice President of Corporate Compliance	Monthly meetings beginning 03-2025 and continuing in 2026	

2h. Starbridge Workforce/HR leadership will ensure that policies and procedures are developed for any new training-related initiatives, and that current policies and procedures are appropriately modified to reflect changes and/or updates in internal processes and best practices.	Workforce/HR leadership	Ongoing, as warranted and as identified	
---	-------------------------	---	--

Objective 3: Starbridge will continue to reinforce a culture of recognition and praise.

Obj. 3. – Action Items	Process Owner	Implementation Date	Status Reporting
3a. In conjunction with the Vice President of Communications & Advancement (formerly Director of Marketing & Communications), Starbridge Workforce/HR leadership will develop and implement an agency Recognition Program. The goal of this program will be to foster and nurture a positive work environment by recognizing and giving praise/feedback on a regular basis in accordance with the Starbridge mission, vision, and values.	Vice President of Communications & Advancement (formerly Director of Marketing & Communications); Workforce/HR Leadership	Implemented Q2 2025	Status - completed
3b. The QI Plan Taskforce will evaluate the implementation of the agency Recognition Program on a routine and consistent basis. Vice President of Communications & Advancement (formerly Director of Marketing & Communications) will provide a report to the QI Plan Taskforce on at least an annual basis regarding employee usage of the program, whether the program continues to advance the Starbridge mission/vision/values, and whether the program continues to enhance an agency	Vice President of Communications & Advancement	By end of Q2 2026	

<p>culture of recognition and praise. Recommendations will be made in accordance with information provided at report out, if necessary.</p>			
---	--	--	--

Objective 4: Starbridge will continue to verify and document that employees hired meet the qualifications for the position for which the person was hired; Starbridge will continue to ensure a current process exists whereby employees review and sign off on job description and this documentation is maintained in the personnel file.

Obj. 4. – Action Items	Process Owner	Implementation Date	Status Reporting
<p>4a. Starbridge Workforce/HR leadership will modify Candidate Activity Record checklist to ensure appropriate credentials are clearly documented (and maintained in personnel file). Starbridge Workforce/HR leadership will also revise orientation practices to ensure all new hires sign Starbridge Job Description during initial orientation.</p>	Workforce/HR Leadership	Completed and implemented by end Q1 2025	Status - completed
<p>4b. Starbridge Workforce/HR leadership will evaluate and measure both of the above process changes by reviewing a sample of personnel files on an annual basis to verify documented credentials and signatures on job descriptions.</p>	Workforce/HR Leadership	Q3 2026	
<p>4c. The QI Plan Taskforce will continue to evaluate the implementation of the above process changes in 2026 by receiving a report from the HR Director on at least an annual basis regarding the audit findings indicated in #3b to ensure organizational compliance with the above-named practices.</p>	HR Director and/or Designee	Q3 2026	

Objective 5: Starbridge will provide opportunities for Individuals supported to play a role in the process of hiring of new employees to include candidate recruitment, interview and hiring decisions.

Obj. 5. – Action Items	Process Owner	Implementation Date	Status Reporting
5a. Starbridge Workforce/HR leadership and Compliance/QI leadership will work with an OPWDD regulatory consultant to create procedures and processes that address individuals' involvement in hiring practices.	Workforce/HR Leadership, Compliance/QI Leadership	Q1 and Q2 2025	Status - completed
5b. Starbridge Workforce/HR leadership will work directly with Hiring Managers and Compliance/QI leadership to brainstorm methods of involving Individuals supported in recruiting, interviewing, and hiring practices. Brainstorming may include test run-throughs with program(s), evaluation, and collaborative discussion about possible process and/or document revisions and improvements.	Workforce/HR Leadership; Compliance/QI Leadership; Hiring Managers	Beginning Q2 2025; Process revisions and improvement continuing into 2026	
5c. Starbridge Workforce/HR leadership will ensure that policies and procedures which reflect individual involvement in hiring practices have been developed and implemented. This team will also be responsible for revising these policies and procedures, should the need for process changes or improvements arise.	Workforce/HR Leadership	By end Q2 2026	
5d. Starbridge QI Plan Taskforce will meet monthly to review and assess current practices for involving individuals supported in hiring practices. The QI Plan Taskforce may request a report out from Workforce/HR leadership in order to evaluate how current processes are	Vice President of Corporate Compliance	Monthly meetings beginning 03-2025 and continuing in 2026	

being implemented, and may make recommendations for improvement if warranted.			
---	--	--	--

Objective 6: Starbridge will ensure that effective agency policies and procedures are implemented for the use of the National Alliance of Direct Support Professionals (NADSP) Code of Ethics, DSP Core Competencies, and the NYS DSP Performance Evaluations per OPWDD requirements; Starbridge will ensure all employees receive performance evaluations on a regular and ongoing basis according to agency policy and procedure.

Obj. 6. – Action Items	Process Owner	Implementation Date	Status Reporting
6a. Starbridge Workforce/HR leadership and Compliance/Quality Improvement leadership will work with an OPWDD regulatory consultant to ensure organizational compliance of practices and procedures associated with the NADSP Code of Ethics, DSP Core Competencies, and NYS DSP Performance Evaluations.	Workforce/HR Leadership; Compliance/QI Leadership	Q1 and Q2 2025	Status - completed
6b. Starbridge Workforce/HR leadership will ensure that policies and procedures which reflect adherence to the NADSP Code of Ethics requirements, DSP Core Competency requirements, and DSP Performance Evaluation requirements have been developed and implemented. This team will also be responsible for ensuring these policies and procedures undergo an annual review, and are updated according to process and/or continuous quality improvement changes.	Workforce/HR Leadership	Q3 2026	
6c. In collaboration with Workforce/HR leadership, Starbridge Program leadership will ensure that internal practices are adhered to for	Workforce/HR Leadership, Program Leadership	Q3 2026	

<p>employees whose job titles are aligned within the NADSP Code of Ethics and DSP Core Competency requirements. Program Leadership and Workforce/HR Leadership shall verify that DSP Core Competencies are being reviewed with all appropriate employees, as well as that DSP Performance Evaluations are being completed as appropriate. The QI Plan Taskforce may request a report out from Workforce/HR leadership in order to evaluate how current processes are being implemented, and may make recommendations for improvement if warranted.</p>			
<p>6d. Starbridge Workforce/HR leadership, along with the Executive Leadership Team, will plan to revise portions of the annual Starbridge Performance Appraisal in order to assist supervisors, managers, and employees with planning for professional growth opportunities, as well as evaluating current job performance as it pertains to the Starbridge mission, vision, values, and ABIDE (accessibility, belonging, inclusion, diversity, equity) goals. (Note: This performance appraisal process is adhered to for all employees not classified as DSP's per NADSP guidelines.)</p>	<p>Workforce/HR Leadership; Executive Leadership Team</p>	<p>By end Q2 2026</p>	
<p>6e. Once the Performance Appraisal template, as mentioned in #6d above, has been approved, Starbridge Workforce/HR leadership will oversee the implementation of the performance appraisal process agency wide. This team will also ensure Performance Appraisal policy and procedure accurately reflects current processes and practices. This team will be responsible for ensuring this policy</p>	<p>Workforce/HR Leadership</p>	<p>By end Q3 2026</p>	

and procedure is reviewed annually, and is updated according to process and/or continuous quality improvement changes.			
6f. QI Plan Taskforce will meet monthly to review and assess current practices for adhering to NADSP/OPWDD evaluations for DSP's, as well as internal Starbridge performance appraisal practices. The QI Plan Taskforce may request a report out from Workforce/HR leadership in order to evaluate how current processes are being implemented, and may make recommendations for improvement if warranted.	Vice President of Corporate Compliance	Monthly meetings beginning 03-2025 and continuing in 2026	

**Goal 6: In order to comply with newly adopted Emergency Preparedness regulations, Starbridge will develop policies / procedures and complete Hazardous Risk Assessments, which will create a framework for addressing and reducing vulnerabilities to potential threats / disasters. In order to protect the health and well-being of Individuals supported, Starbridge will integrate and coordinate activities necessary to prevent, prepare for, mitigate, successfully respond to, and recover from disasters and threats.**

Objective 1: Starbridge will ensure each certified site undergoes a comprehensive Hazardous Risk Assessment. Site-Specific Emergency Preparedness Plans will be updated for each certified site, and an organization-wide Emergency Management Plan will be revised and implemented. All accompanying emergency management policies and procedures will be reviewed, updated, and implemented.

Obj. 1. – Action Items	Process Owner	Implementation Date	Status Reporting
1a. Starbridge Compliance / QI leadership and Starbridge Residential Services leadership will work directly with an OPWDD regulatory consultant to oversee the process of Hazardous Risk Assessment completion, Emergency Preparedness Plan updates, and P&P updates	Vice President of Corporate Compliance; QI Director; Residential Leadership	Beginning Q4 2025 and ongoing into 2026	

<p>with the overall goal to plan/prepare for potential risks and vulnerabilities, thereby integrating and coordinating activities aimed at preventing / mitigating Individuals' exposure to threats and hazards.</p>			
<p>1b. Starbridge Compliance / QI leadership and Starbridge Residential Services leadership will continue to meet and work directly with OPWDD regulatory consultant until all sites have completed a Hazardous Risk Assessment and Emergency Preparedness Plan. This item will not be considered complete until all accompanying emergency management / preparedness P&amp;P's have been updated and/or created as determined appropriate.</p>	<p>Vice President of Corporate Compliance, QI Director, Residential Leadership</p>	<p>Q2 2026</p>	
<p>1c. Starbridge QI Plan Taskforce will meet monthly to assess the requirements of OPWDD's newly adopted Emergency Management regulations and progress toward implementation.</p>	<p>Vice President of Corporate Compliance</p>	<p>Monthly meetings beginning 03-2025 and continuing in 2026</p>	
<p>1d. Once completed, program staff will be trained in the agency's customized Emergency Management framework for dealing with potential disasters and hazards. An important component of this training will be the necessity of reducing Individuals' vulnerability to threats and hazards through the integration and coordination of activities necessary to plan, prepare for, mitigate, successfully respond to, and recover from disasters and threats.</p>	<p>Residential Leadership</p>	<p>By end Q2 2026</p>	

**GOAL 7: Starbridge will implement strategies that provide opportunities to assist Individuals with facilitating the creation, development, and continuation of natural support networks.**

Objective 1: Policies and procedures will be implemented to facilitate the creation, development, and continuation of natural support networks for individuals.

Obj. 1. – Action Items	Process Owner	Implementation Date	Status Reporting
1a. Starbridge Compliance / QI leadership and Starbridge program leadership will develop organizational processes aimed at actively facilitating the creation, development, and continuation of natural support networks for individuals supported (i.e.: policies, procedures, natural support document). *Note: P&P will include Starbridge best practice for regular and timely communication regarding individuals with family/advocates and/or natural supports (per the individual’s preferences).	Vice President of Corporate Compliance; QI Director; Program Leadership	Q4 2025	Status - completed
1b. Starbridge QI Plan Taskforce will meet monthly to assess implementation status of natural support mechanisms and activities in place to assist in facilitating the creation, development, and continuation of natural support networks for individuals supported.	Vice President of Corporate Compliance; QI Director	Monthly meetings beginning 03-2025 and continuing in 2026	
1c. Starbridge Program Directors will implement the Natural Supports P&P as well as the Contact / Authorization / Natural Support document within each HCBS waiver program(s). All Individuals enrolled in an HCBS waiver program shall have a Contact / Authorization / Natural Support document completed by 06-30-2026.	Program Leadership	By end Q2 2026	

1d. Starbridge QI team will review Contacts / Authorizations / Natural Supports documents during regular and ongoing internal audits, and summarize findings and make recommendations to share with the QI Plan Taskforce.	QI Director & QI Team	Q3 2026	
1e. Starbridge QI Director will solicit feedback from HCBS waiver program leadership, employees, and individuals regarding the Contacts / Authorizations / Natural Supports document for the purposes of continuous improvement (revisions, recommendations; etc.).	QI Director; Program Leadership	By end Q3 2026	
1f. Compliance/QI leadership will ensure the natural supports policy and contacts / authorizations document are reviewed annually, incorporating feedback received as noted above and making sure appropriate revisions have been made to reflect changes and continuous quality improvement modifications in internal processes and best practices.	Vice President of Corporate Compliance; QI Director	By end Q3 2026	

**GOAL 8: Starbridge will continue to develop, implement, monitor, and keep current policies and procedures that include strategies to facilitate the communication of the agency's mission and goals to all people receiving services, their families/advocates; all levels of employees; and the governing body.**

Objective 1: Starbridge leadership will implement strategies to engage all agency members in the implementation of the mission and goals of the agency. Policies and procedures will be developed, implemented, and monitored to facilitate the communication of Starbridge's mission and goals to all Stakeholders (i.e.: people receiving services, their families/advocates; all levels of employees; and the governing body).

Obj. 1. – Action Items	Process Owner	Implementation Date	Status Reporting
1a. On a continual and ongoing basis, Starbridge leadership will evaluate current practices and processes for facilitating communication to the people receiving and providing services, and to afford opportunities to engage all Stakeholders (people receiving services, their families / advocates, all levels of employees, and the governing body) in Starbridge’s mission, vision, values, and goals.	Executive Leadership Team; Program Leadership	Ongoing in 2026	
1b. Starbridge Compliance / QI leadership, Starbridge Executive Team, and Starbridge program leadership will continue working directly with an OPWDD regulatory consultant as a resource to assist with the creation of policies, procedures, and strategies for facilitating communication to agency stakeholders.	Executive Leadership; Vice President of Corporate Compliance; QI Director; Program Leadership	Ongoing into 2026	
1c. Starbridge QI Plan Taskforce will meet monthly to monitor and evaluate the implementation of the practices and strategies for facilitating communication to all stakeholders regarding mission and goals, as well as engagement of employees, persons receiving services, and governing body in the mission, vision, values, and goals of the agency.	Vice President of Corporate Compliance	Monthly meetings beginning 03-2025 and continuing in 2026	

**GOAL 9: On an annual basis, Starbridge will review, evaluate, revise, and communicate to all stakeholders the goals and objectives of its organizational Quality Improvement Plan which includes measurement, aggregation, and analysis of factors related to the outcomes and the quality of life desired by Individuals supported.**

Objective 1: In its annual Quality Improvement Plan (QIP), Starbridge will ensure that the following factors are addressed: measurement, aggregation, and analysis of data related to the outcomes and the quality of life desired by individuals; person-centered planning and service delivery; assurance of Individuals' health, safety, rights, and freedom from abuse/neglect and exploitation; and areas important to stakeholders based on their satisfaction and solicited input.

Obj. 1. – Action Items	Process Owner	Implementation Date	Status Reporting
1a. Starbridge Compliance / QI leadership will continue working directly with an OPWDD regulatory consultant as a resource to assist with ensuring that the QI Plan complies with OPWDD requirements, and to assist with ensuring methods of aggregation and analysis of data are appropriately incorporated into the annual QI Plan.	Vice President of Corporate Compliance; QI Director	Q1 2025 and ongoing	
1b. Starbridge will implement, and convene on a monthly basis (but no less than a quarterly basis), a Quality Improvement Plan Taskforce whose primary responsibility it is to oversee the implementation of the QI Plan, as well as to review and assess progress towards goals, objectives, and action items.	Vice President of Corporate Compliance; QI Director; QI Plan Taskforce	Established Q1 2025; ongoing on a monthly basis	
1c. Starbridge Compliance / QI leadership will ensure that the QI Plan P&P, as well as the QI Plan Taskforce P&P, remain current and up to date, and undergo an annual review with the agency P&P Committee.	Vice President of Corporate Compliance; QI Director	Q3 2026	
1d. Starbridge will develop a process to ensure that the Starbridge Board of Directors reviews and approves the QI Plan on an annual basis.	Vice President of Corporate Compliance	By end Q1 2026	
1e. After the QI Plan has been approved by the Starbridge Board of Directors, the Agency will inform stakeholders and other interested parties	Vice President of Corporate Compliance; QI Director;	Q2 2026	

of the QIP (this includes a mechanism for making the QI Plan known to persons supported, employees, agency stakeholders, and other interested parties).	Executive Leadership Team		
---	---------------------------	--	--

Objective 2: As part of its Quality Improvement Plan, Starbridge is committed to ensuring and verifying that policies and procedures translate governmental mandates and regulations into meaningful organizational policy and practice to affect programs, supports, and services. Starbridge will ensure the regular and timely review of all organizational policies and procedures in an effort to continuously monitor its processes to facilitate quality services, to promote stated outcomes, and to demonstrate compliance with applicable NYS and Federal requirements.

Obj. 2. – Action Items	Process Owner	Implementation Date	Status Reporting
2a. Starbridge Compliance / QI leadership will continue the implementation of a Starbridge Policy & Procedure Committee, convened on a bi-weekly basis (or more frequently as needed). The Committee’s primary responsibility is to advance organizational compliance with applicable laws and regulations, promote operational efficiencies, enhance the Starbridge mission, and reduce institutional risks.	QI Director	Established Q4 2024; ongoing on a bi-weekly basis	
2b. Starbridge Compliance / QI leadership will develop a process whereby it is ensured that all organizational P&P’s are reviewed on at least an annual basis. This will include a certification statement from Program Leadership to demonstrate timely review and revisions.	QI Director	By end Q3 2026	

**GOAL 10. Starbridge will continue to enhance current processes to create more detailed and robust strategies to assess and/or measure rates of compliance and/or factors influencing compliance/non-compliance.**

Objective 1: Starbridge Quality Improvement team will develop and implement a mechanism for ensuring agency quality initiatives and data from QI processes, projects, and activities are utilized to inform the development of the agency Quality Improvement Plan.

Obj. 1. - Action Items	Process Owner	Implementation Date	Status Reporting
1a. Starbridge Compliance and QI leadership will continue working directly with an OPWDD regulatory consultant to brainstorm and develop additional ways that quality initiatives and data from internal QI processes are utilized to inform the development of the annual QI Plan.	Vice President of Corporate Compliance; QI Director	On a weekly basis in 2025 and 2026	
1b. Quality Improvement Team will report internal audit tool trends to the QI Plan Taskforce on an ongoing and routine basis. The QI Plan Taskforce will engage in active discussion, and be responsible for analyzing the internal audit information for patterns and trends, and to determine if additional goals, strategies, and/or processes need to be added to the agency QI Plan.	QI Director	Q2 and Q4 2026	
1c. On an ongoing basis, the QI Plan Taskforce will review, assess, and discuss current internal QI initiatives and practices, as presented by the QI department, to evaluate data and activities with the goal of making recommendations to enhance the agency QI Plan.	Vice President of Corporate Compliance	Monthly meetings beginning 03-2025 and continuing in 2026	

## **6. Performance Reporting on Key Results Metrics**

### **Status Updates/Performance Reporting**

Data and ratings collected from all observation / data collection and survey activity will be summarized into aggregate performance scores and reported throughout the program on a monthly basis. At each point in the information sharing process staff involved will compare actual data with Baseline, Target, and available and relevant Benchmark data.

- The Executive Leadership Team will review the summary of measures, ratings, and comments quarterly. Based on review of these scores against objectives, baseline data and available and relevant benchmarks with these scores, trends will be identified and additional actions will be put into place as needed (i.e. declining trends or static low scores).
- Results will be reported quarterly to the Executive Leadership Team by the Vice President of Corporate Compliance.
- The quarterly results and rating scores for measurements of each objective will also be summarized and reported to the Starbridge Quality Improvement Taskforce at each of their scheduled meetings.
- Summary to the Starbridge Quality Improvement Taskforce will document results and any trends that require action in addition to actions that will be or have been taken, timelines for implementation, and person responsible.
- The Starbridge Quality Improvement team will present the results of completed external survey[s] and any actions requiring corrective measures to the Starbridge Quality Improvement Taskforce at their scheduled meetings. The Starbridge Quality Improvement Taskforce will evaluate the results and any identify trends that require action in addition to actions that will be or have been taken, timelines for implementation, and person responsible.
- QI activities will include an annual progress summary that identifies the QI actions taken, results/effectiveness, provide a summary describing the implementation of QI actions and the summary analysis of the effects of the actions to bring about the desired and intended change/improvement should include changes in quality and actions that appear to not have an impact. The annual progress summary will be presented to the Quality Improvement Taskforce, Executive Leadership Team and the Board for approval, analysis and actional feedback.
- Following Board approval of the annual progress summary, the report will be made available on Starbridge website annually in March and/or at the request of stakeholders/other interested parties.

## **7. Self-Evaluation Process**

The self-evaluation process will be ongoing and will happen at a number of different levels within the organization.

First, as mentioned previously, key result data on progress toward Goals and Objectives will be reviewed regularly at many different levels in the organization as evidenced in this plan. Once baselines are established for each of the Key Result Measures, observational measures will be completed as outlined in the plan.

This data will be shared / reviewed / evaluated at scheduled meetings to include the Executive Leadership Team and the Starbridge Quality Improvement Taskforce. As gaps are found between performance and objectives with no improvement over time, Root Cause Analysis may be completed to identify obstacles and new or revised action plans will be implemented.