

Regional Quality Council Charter

Established: August 1, 2013

Revised: June 24, 2024

MISSION

To identify and address risks of harm, ensure the sufficiency, accessibility, and quality of services to meet individuals' needs in integrated settings; to collect and evaluate data to identify and respond to trends to ensure continuous quality improvement.

PURPOSE

To review and evaluate state and available regional data related to performance measure indicators (PMIs) and monitoring efforts to identify trends; to recommend responsive actions in their respective regions to ensure continuous quality improvement.

AUTHORIZATION/SCOPE OF AUTHORITY

The Regional Quality Councils (RQCs) are part of the Department of Behavioral Health and Developmental Services (DBHDS) quality oversight structure and represent each of the five DBHDS regions in Virginia. The RQCs are a subcommittee of the DBHDS Developmental Disabilities (DD) Quality Improvement Committee (QIC). DBHDS provides the RQCs with relevant and reliable data including comparisons with other internal or external data, as appropriate, as well as multiple years of data (as it becomes available). RQCs may request data that may inform quality improvement initiatives (QIIs) and if requested data is unavailable, RQCs may make recommendations for data collection to the DD QIC. The RQCs provide recommendations to DBHDS when systemic issues are identified, in response to analysis of the relevant data provided to them and provide input to the provider reporting measures. Data reviews occur as part of quality improvement activities and as such are not considered research. Additional workgroups may be established as needed.

DEFINITIONS

Term	Definitions
Alternate	An alternate regularly attends the RQC meetings to be informed and serve as the back-up to the member of the same role for voting purposes, should the member not be in attendance for that meeting.
Continuous Quality Improvement	An ongoing process of data collection and analysis for the purpose of improving programs, services, and processes.
Designee	A person selected to carry out a duty or role within a quality committee on behalf of a voting member. This person assumes voting member responsibilities when acting on behalf of voting member and should be in a position reflective of that authority, including awareness of the organization or system impact of actions taken by the QIC. Designees may also be selected by an advisory member to fill in when the advisory member is unable to attend. Person should have the same/similar role as that of the advisory member.

Eight Domains	Designated spheres of knowledge, influence, or activity within the structure of the DD QMS: safety and freedom from harm; physical, mental, and behavioral health and wellbeing, avoiding crises, stability, choice and self-determination, community inclusion, access to services, and provider capacity.
Family Members	Family members who are actively engaged in the individual's life of one who currently receives or has previously received services or is on the waitlist including those who have passed away or lost services, for whatever reason, within the past 3 years.
Key Performance Areas	DBHDS defined areas aimed at addressing the availability, accessibility, and quality of services. The DD QMS has established three: health, safety and wellbeing, community inclusion and integration, and provider capacity and competency.
National Core Indicators	Standard performance measures used in a collaborative effort across states to assess the outcomes of services provided to individuals and families and to establish national benchmarks. Core indicators address key areas of concern including employment, human rights, service planning, community inclusion, choice, health, and safety.
Performance Measure Indicators (PMIs)	Outcome and output measures used to report the progress towards specified targets established by DBHDS DD QMS, designed to address areas of importance, or need for DBHDS.
Provider Reporting Measures	Measures that providers report progress on to DBHDS that assess both positive and negative aspects of health and safety and of community integration.
Quality Committees	A collective term used to describe the groups of people with the DD QMS who consider, investigate, act, and report on quality assurance, risk management, and quality improvement. Groups include quality improvement committee (QIC), subcommittees, work groups, and councils.
Quality Improvement Committee	Overarching quality committee that exists as part of the DD Quality Management System (QMS)
QIC Subcommittees	Committees, councils, and workgroups that exist as part of the DD QMS and who report to the DD QIC.
Quality Improvement Initiative (QII)	A formal plan, based upon data reviews, that addresses identified areas for improvement and uses the Model for Improvement.
Quality Plan aka Quality Management Plan (QMP)	Three-part document that describes (1) the programs involved in the DD QMS, and processes deployed by the programs, (2) the quality committee structure, and (3) an annual report detailing the work of the DD QMS including evaluation of the quality committees.
Quality Service Review	Review conducted for evaluation of services at individual, provider, and system-wide levels to evaluate whether individuals' needs are being identified and met through person-centered planning and thinking, whether services are being provided in the most integrated setting appropriate to the individuals' needs and consistent with their informed choice; and whether individuals are having opportunities for integration in all aspects of their lives. QSRs also assess the quality and adequacy of providers' services, quality improvement and risk

	management strategies, and provide recommendations to providers for improvement.
Quorum	Number of voting members required for decision-making
Regional Quality Councils (RQCs)	DBHDS formulated councils, comprised of providers, CSBs, DBHDS quality improvement personnel, and individuals served and their family members that assess relevant data to identify trends and recommend responsive actions for their respective DBHDS designated regions.
Voting Members	Members of the quality committees with the authority to approve meeting minutes, charters, PMIs, and other activities requiring approval. Voting members must designate a proxy, who can attend meetings when the voting member is unable to do so.

RESPONSIBILITIES, DUTIES, ACTIVITIES

General

- Utilizes an interdisciplinary team approach
- Includes one person from each stakeholder group per region plus an additional support coordinator/case manager and family member per region:
 - Residential Services Providers
 - Employment Services Providers
 - Day Services Providers
 - Community Services Boards (CSBs) DD Directors
 - Support Coordinators/Case Managers
 - CSB Quality Assurance/Improvement Staff
 - Provider Quality Assurance/Improvement Staff
 - Crisis Services Providers
 - Individuals Receiving Services or the DD Waiver Waitlist (self-advocate)
 - Family Members of individual previously or currently receiving services or on the waitlist
 - Alternate for each membership role
- Includes standing members:
 - DBHDS Director Community Quality Management or designee
 - Regional Quality Improvement Specialist
 - Community Resources Consultant
- Commits to a culture of quality characterized by:
 - Supported by leadership
 - Person Centered
 - Led by staff who continuously learn and empowered as change agents
 - Supported by an infrastructure that is sustainable and continuous
 - Driven by data collection and analysis
 - Responds to identified issues by using QIIs and other mitigating strategies as indicated
- Implements continuous quality improvement processes or practices
- Develops and reviews annually the charter with revisions as needed
- Completes a committee performance evaluation annually that includes the accomplishments and barriers of the RQCs
- Provides orientation and training to members to include:
 - DBHDS DD Quality Management System

- RQC charter
- Member responsibilities
- Continuous quality improvement
- Reports to the DD QIC for oversight at least three times per year including analysis of PMIs, provider reporting measures inputs, outcomes and QIIs
- Shares data with quality subcommittees when significant patterns or trends are identified and as appropriate to the work of the subcommittee
- Adheres to agency policy on HIPAA compliance and protecting confidentiality (IT.001 – Privacy Policies and Procedures for the Use and Disclosure of PHI)
- Nominates members and alternates (excluding DBHDS standing employee members) for approval by the DD QIC chair/co-chair

Data Review and Analysis

- Monitors progress towards achievement of identified performance measure indicators (PMIs) reported by the DD QIC subcommittees
- Suggests actions, for PMIs below target, that are designed to raise the performance for the reporting subcommittee's consideration
- Recommends preventive, corrective and improvement measures where PMIs indicate health and safety concerns
- Receives relevant data (statewide aggregate, regional) from DBHDS including comparisons to other internal or external data with multiple years as available
- Analyzes, reviews, and evaluates data to identify trends, gaps, and other findings, at least quarterly
- Utilizes data analysis to identify areas for improvement and monitor trends; identifies priorities and recommends QIIs as needed
- Reviews the results of Quality Service Reviews (QSR) and uses findings to make recommendations to the QIC regarding identified needs.
- Reviews the results of the National Core Indicators (NCI) In-Person Survey to identify areas for improvement

Quality Improvement Initiative(s)

- Identifies areas for development of quality improvement initiatives (QIIs) using:
 - presented data
 - analysis of data including trends and patterns
 - noted problems at individual service delivery and systemic levels
- Utilizes the Model for Improvement, which includes the Plan-Do-Study-Act cycle when considering a quality improvement initiative (QII)
- Develops QII Toolkit, per directions, when proposing a QII
- Proposes at least one QII per year, consistent with the Model for Improvement and Plan-Do-Study-Act cycles
- Implements approved QIIs within 90 days of the date of approval, and as directed by the DD QIC
- Monitors progress of assigned, approved QII(s) and addresses concerns/barriers as needed, via updates to QII Toolkit(s)
- Evaluates the effectiveness of the approved QII(s) for its intended purpose
- Provides updates to the DD QIC on QII(s) status
- Monitors progress of assigned, approved QII(s) and addresses concerns/barriers as needed, via updates to QII Toolkit(s)
- Proposes at least one measurable outcome for each QII recommended by the RQC

- Monitors the regional status of any statewide QII implemented as directed by the QIC
- Reports annually to the QIC on the results of the RQC implemented QIIs

Meetings

- Conducts regular meetings to ensure continuity of purpose
- Reviews and approves meeting minutes to ensure accurate reflection of discussion, evaluation of data, and recommendations of the RQC.
- Maintains reports and/or meeting minutes as necessary and pertinent to the committee’s function
- Aligns work to the assigned key performance area (KPA), including the domains associated with the KPA
- Utilizes approved system for tracking PMIs, the efficacy of preventive, corrective and improvement measures, and work of the RQCs
- Discusses and responds to the DD QIC assignments or directives
- Reviews and assesses (i.e., critically consider) the data that is presented to identify:
 - a) possible trends
 - b) questions about the data
 - c) any areas in need of QIIs
 - d) identifies and records themes in meeting minutes
- Determines for each identified topic area if:
 - a) more information/data is needed for the topic area,
 - b) a QII should be prioritized for the region and/or recommend a QII to DBHDS, or,
 - c) no action is needed/will be taken in that area at this time
- Monitors and reviews provider reporting measures at least semi-annually and provides input to the DD QIC on these measures
- Updates members on status of assigned QII(s)
- Presents 100% of agreed upon recommendations to the QIC

MEMBER ROLES AND RESPONSIBILITIES

Role and Title	Responsibility
Chair Regional Quality Improvement Specialist	<ul style="list-style-type: none"> • Ensures subcommittee executes responsibilities • Ensures subcommittee performs its function • Facilitates meetings • Creates agenda • Schedules meetings • Monitors quorum; alerts chair/co-chair of quorum status • Takes minutes and develop reports • Submits requests, questions, and suggestions to the DD QIC subcommittees via RQC Liaison Process • Provides update to DD QIC as scheduled
Voting Members	<ul style="list-style-type: none"> • Serves as voting member • Reviews meeting materials in preparation for meeting participation. • Attends and participates in meetings • Brings perspective of stakeholder group to discussions

	<ul style="list-style-type: none"> • Contributes to review and analysis of presented data • Nominates members and alternates for approval • Appoints a member to serve as liaison to the DD QIC, one per RQC • Informs chair if unable to attend
<p>Alternates See roles listed above in General section</p>	<ul style="list-style-type: none"> • Serves as a designee at meetings (with voting rights) when the voting member cannot attend • Represents the same stakeholder group as the member • Reviews meeting materials in preparation for meeting participation. • Attends meetings regularly to maintain familiarity and readiness to fulfill designee role • Brings perspective of stakeholder group to discussions • Nominates members and alternates for approval • Informs chair if unable to attend
<p>RQC Liaison Title varies according to the role of the person appointed</p>	<ul style="list-style-type: none"> • Attends DD QIC meetings, representing respective RQC • Reports all agreed upon RQC recommendations to the DD QIC • Provides update from DD QIC meeting at next respective RQC meeting • Informs chair if unable to attend the DD QIC meeting

MEMBERSHIP

<p>Voting Members Membership includes one person from each of these stakeholder groups with an additional Support Coordinator/Case Manager and Family Member for each region.</p>	<ul style="list-style-type: none"> • Residential Services Providers • Employment Services Providers • Day Services Providers • Community Services Board (CSB) Developmental Services Directors • Support Coordinators/Case Managers • CSB Quality Assurance/Improvement staff • Provider Quality Assurance/Improvement staff • Crisis Services Providers • Individuals receiving services or on the Developmental Disability Waiver waitlist (self-advocate) • Family members of an individual previously or currently receiving services or on the waitlist (<i>Defined as within the past 3 years, either the individual having passed or lost services for whatever reason.</i>) <p>Plus. the following DBHDS employees:</p>
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	<ul style="list-style-type: none"> • Director, Community Quality Management, or designee • Regional Quality Improvement Specialist • Community Resources Consultant
Alternates	<ul style="list-style-type: none"> • Residential Services Providers • Employment Services Providers • Day Services Providers • Community Services Board (CSB) Developmental Services Directors • Support Coordinators/Case Managers • CSB Quality Assurance/Improvement staff • Provider Quality Assurance/Improvement staff • Crisis Services Providers • Individuals receiving services or on the Developmental Disability Waiver waitlist (self-advocate) • Family members of an individual previously or currently receiving services or on the waitlist

MEETINGS

Meeting Frequency	The RQCs will meet on a quarterly basis, at minimum. Each RQC shall meet with a quorum at least three (3) of the four (4) quarterly meetings in a state fiscal year.
Quorum	<p>A quorum is defined as at least 60% of members or their alternates, including representation from the following groups (one member may satisfy two roles):</p> <ul style="list-style-type: none"> • a representative from the DBHDS DD QIC • an individual experienced in data analysis • a DD service provider • an individual receiving services or on the DD Waiver waitlist or a family member of an individual receiving services or on the DD waiver waitlist <p>Meetings can occur in the absence of quorum; however, no actions can be taken during the meeting. These actions require quorum: approval of minutes, RQC recommendations to the DD QIC, approval/denial of proposed QIIs, and proposed charter revisions.</p>
Agenda and Minutes	<p>The agenda, meeting materials and draft minutes will be distributed prior to each meeting via email.</p> <p>The DBHDS Office of Community Quality Improvement maintains approved meeting minutes and meeting materials for each meeting.</p>

CONTACT

Division, Office, or Program	Role Title
Office of Community Quality Management	Director
Office of Community Quality Improvement	Quality Improvement Specialist, Region 1
Office of Community Quality Improvement	Quality Improvement Specialist, Region 2

Office of Community Quality Improvement	Quality Improvement Specialist, Region 3
Office of Community Quality Improvement	Quality Improvement Specialist, Region 4
Office of Community Quality Improvement	Quality Improvement Specialist, Region 5