DBHDS
Virginia Department of Behavioral Health and Developmental Services

Developed by Office of Clinical Quality Management

Tab Name	Tab Name Instructions
Subcommittee Requirements	The QIC Subcommittees Work Plan is the system for tracking PMIs and development, implementation, and progress of QIIs across subcommittees/councils/ workgroups consistently. In addition, the QIC Subcommittees Work Plan will assist the subcommittee in completing its annual subcommittee performance evaluation and subcommittee report. Column instructions are found in the italic font directly under each column header. Each QIC subcommittee is responsible to review this work plan at least quarterly, before the QIC meeting. QIC Subcommittees to which this tab applies: CMSC, RMRC, KPA Workgroups, MRC Persons responsible for completion of this tab: QI Implementation Manager, Director, QI Analytics and Processes, MRO Program Coordinator, or designee Timeline for completion: Per QI subcommittee meeting schedule with the completed SFY QIC Subcommittee Work Plan due to the QM Coordinator by COB July 31, 2026 Document Location: in Teams Owner of the Document: Rebecca Laubach
RQC Requirements and Monitoring	Subcommittees Work Plan will assist the subcommittee in completing its annual subcommittee performance evaluation and subcommittee report. Column instructions are found in the italic font directly under each column header. QIC Subcommittees to which this tab applies: RQCs Persons responsible for completion of this tab: QI Specialist Timeline for completion: Quarterly with the completed SFY QIC Subcommittee Work Plan due to the QM Coordinator by COB July 31, 2026 Document Location: in Teams Owner of the Document: Rebecca Laubach
PMI Monitoring	The QIC Subcommittees Work Plan is the system for tracking PMIs and development, implementation, and progress of QIIs across subcommittees/councils/ workgroups consistently. In addition, the QIC Subcommittees Work Plan will assist the subcommittee in completing its annual subcommittee performance evaluation and subcommittee report. Column instructions are found in the italic font directly under each column header. Each QIC subcommittee is responsible to review this work plan at least quarterly, before the QIC meeting. **If PMI is performing below target, comments must include what efforts will occur to raise performance. Subsequent monitorings must then indicate the effectiveness of these efforts. If data is not available at the time of review, the reason must be listed under comments.** QIC Subcommittees to which this tab applies: CMSC, RMRC, KPA Workgroups, MRC Persons responsible for completion of this tab: QI/QM Coordinator, MRO Program Coordinator, or designee Timeline for completion: Quarterly with the completed SFY QIC Subcommittee Work Plan due to the QM Coordinator by COB July 31, 2026 Document Location: in Teams Owner of the Document: Rebecca Laubach **The PMI data contained on this tab is not the primary or official source of PMI data. This data is used in conjunction with subcommittee activities found within this spreadsheet. The spreadsheet is designed for tracking and monitoring of status and interventions.**
To Do	The QIC Subcommittees Work Plan is the system for tracking PMIs and development, implementation, and progress of QIIs across subcommittees/councils/ workgroups consistently. In addition, the QIC Subcommittees Work Plan will assist the subcommittee in completing its annual subcommittee performance evaluation and subcommittee report. QM Plan Part III Annual Report and Evaluation outlines the statewide recommendations for the QM system to implement. These are provided to the subcommittees as indicated and listed within each subcommittee's QIC Subcommittees Work Plan. For subcommittees that produce annual reports or semi-annual reports, their recommendations will also be incorporated into the applicable subcommittee's QIC Subcommittees Work Plan. For the KPA Workgroups (who do not produce any reports), subcommittee work are tasks identified through review of materials/reports presented during meetings. Recommendations from other external investigative reports can be included here as well, if the subcommittee chooses. Ongoing work of the subcommittee not identified on the Requirements tab, shall be included here. This can include review of safety alerts, guidance documents and so on. Each subcommittee should utilize this tab to capture work that the subcommittee elects to engage in such as root cause analysis, improvement strategies,or informal quality improvement initiatives. Each QIC subcommittee is responsible to review this work plan at least quarterly. QIC Subcommittees to which this tab applies: CMSC, RMRC, KPA Workgroups, MRC, RQCs Persons responsible for completion of this tab: QI/QM Coordinator, QI Specialist, or designee Timeline for completion: Per QI subcommittee meeting schedule with the completed SFY QIC Subcommittee Work Plan due to the QM Coordinator by COB July 31, 2026 Document Location: in Teams Owner of the Document: Rebecca Laubach

DBHDS Virginia Department of Behavioral Health and Developmental Services **Date Met During SFY** *List meeting date in which these were discussed*	**Surveillance Data Element(s) Reviewed** *Describe the data being reviewed include pertinent details (report name, time frame, etc.); indicate what patterns or trends are noteworthy. If surveillance data is not reviewed, simply state 'not reviewed'.*	**Actions in Response to Surveillance Data Review and Analysis** *Describe the subcommittee's response to the data review and analysis. This can include taking a deeper dive into the data, form/tool changes, training, protocol revisions, mitigating strategies, other improvement strategies, developing a PMI or even proposing a QII. If the surveillance data analysis comes through OCQM review and brought to the subcommittee's attention, please indicate as such.*	**Ideas for Potential QIIs** *Based upon data reviews (PMI, surveillance, QSR, etc.), list the ideas the subcommittee is considering as potential QIIs and include the data prompting the idea, if available. This helps the subcommittee to see what ideas for potential QIIs have been noted. This column should be incorporated into the QII Toolkit as the subcommittee is discussing potential QIIs.*	**Proposed QII** *List the proposed QII. This entry becomes important for tracking proposed QIIs that are disapproved by the QIC. Additional details can also be noted as needed.*	**QIC Action: Approval/Disapproval** *The QIC action must be noted per proposed QII. QIIs disapproved by the QIC can be modified and presented again. Information on approved QIIs can be found on the Approved QII Progress Tracking tab.*	**Approved QII Update** *Provide a summary of the updates for each subcommittee approved QII discussed during the subcommittee meeting. The summary update should include 'Where Are You in Your Plan?', Where Are you in your Do?', 'How Are You Studying?' and 'Lessons Learned; How You Will Act Next?' A reference to the associated updated QII PDSA should be included.*	**List the Outreach, Education, or Training provided as part of each approved QI Initiative** *List the date and describe what outreach, education or training that has been done related to the QII. This will show the effectiveness of the outreach, education or training.*	**Data Requests** *List any requests for additional data from the RQCs (be specific in listing which RQC). List any follow-up questions or recommendations from the RQCs as well. If there are no data requests, list NA. Include date received.*	**Data Requests Follow-Up** *List the subcommittee's response to the data request(s) and answer to any questions posed. Identify if data request cannot be fulfilled and why. Identify if data request is determined to be unavailable. This information (responses to data requests and answers to questions) is shared with the RQC. The RQC will report to the QIC on unfulfilled data requests and any data determined to be unavailable. Once the data request has been fulfilled, indicate some type of closure including date.*	**Response to QSR Recommendations** *Describe the subcommittee's actions in response to recommendations from the QSR vendor. If there are no QSR recommendations, list NA.*	**Response to Other Recommendations** *Describe the subcommittee's actions in response to recommendations found in other reports such as those in the Independent Review Report, OSIG Report, etc. If there are no other recommendations that have come before the subcommittee, list NA.*	**Other** *Describe any other work the subcommittee does that is not captured in any of the columns listed in this work plan. Include rationale for the work, supporting data as applicable, identification of challenges/barriers and resolution to challenges/barriers. This can include any requests from other subcommittees and the resulting response/action.*	**Comments** *Provide additional comments as needed to further support the preceding columns. Other pertinent information should be included if it impacts the work of the subcommittee. If data trends support a proposed new PMI, list that information here.*

Committee	**Date Met During SFY** *List meeting date*	**Data and Reports Reviewed** *Describe the data reviewed - list subcommittee, type of data (PMI, surveillance, CM, employment, etc.), regional breakdown available and reported.*	**Provider Reporting Measures** *CMSC has 4 (2 PMIs under HSW, 2 PMIs under CII). RMRC has 1+7 surveillance measures under HSW; KPA Workgroups has 1 in HSW and 2 in CII.* *List subcommittee and whether there is input for the QIC to consider.*	**Analysis** *Describe the summary of the RQC's analysis relative to patterns, trends or gaps. Is more information needed?*	**Data Requests/Recommendations to Subcommittees** *List any requests/recommendations for additional data for the subcommittee (be specific). List any follow-up questions for the subcommittee.*	**Data Requests/Recommendations to Subcommittees Follow-Up** *List the subcommittee's response to the data request/recommendation and answer to any questions posed. Identify any data request that remain unfulfilled and the reason provided. Identify if data request is determined to be unavailable. Unfulfilled data requests and data determined to be unavailable will be presented to the QIC during the RQC presentation..*	**Subcommittee Data Request Close Date** *List the date the RQC determines it has the information needed to close out the request.*	**Recommendations for the QIC (by RQC consensus)** *These are identified areas for systemic improvement based upon the review and analysis of data presented to the RQC.*	**RQC Ideas for QIIs** *List ideas (include the data prompting the idea, if available) that are generated through discussion that the RQC can further explore via QII Toolkit as potential QIIs. These ideas can also be prioritized based upon discussion regarding DBHDS' stated priorities.*	**RQC Proposed QII** *Using the QII Toolkit, list the proposed QII the RQC has agreed upon.*	**QIC Action per RQC Proposed QII: Approval/Disapproval** *List the QIC action and date of action. If QII is disapproved by the QIC, it can be modified and presented again. Identify which subcommittee will implement the approved QII if it is assigned other than to the RQC. If assigned to the RQC, the Approved QII Progress Tracking tab must be completed..*	**Approved QII Update** *Provide a summary of the updates for each subcommittee approved QII discussed during the subcommittee meeting. The summary update should include 'Where Are You in Your Plan?', Where Are you in your Do?', 'How Are You Studying?' and 'Lessons Learned; How You Will Act Next?' A reference to the associated updated QII PDSA should be included.*	**List the Outreach, Education, or Training provided as part of each approved QI Initiative** *List the date and describe what outreach, education or training that has been done related to the QII. This will show the effectiveness of the outreach, education or training.*	**Comments** *Provide additional comments as needed to further support the preceding columns. Other pertinent information should be included if it impacts the work of the subcommittee.*
RQC 1														
RQC 2														
RQC 3														
RQC 4														
RQC 5														

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PMI *List the QIC Approved PMI*	**PMI Target (% and/or #)** *List PMI target*	**List Data Source** Per Section V of Process Document	**List Data Reporting Period (Q, Semi-Annual, Yearly, note if FY or calendar year)**	**Date of Review**	**Results**	**Comments** *If data is not available, provide rationale and any actions underway to address the issue.*	**Date of Review**	**Results**	**Comments**	**Date of Review**	**Results**	**Comments** *If data is not available, provide rationale and any actions underway to address the issue.*	**Date of Review**	**Results**	**Comments** *If data is not available, provide rationale and any actions underway to address the issue.*

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Date *List date work item is identified*	**Identified Work** *List the identified work item and the related issue that triggered the work.*	**Identified Actions** *List the actions the subcommittee is performing to address the identified work item.*	**Identify Resources Needed** *Describe the resources needed to complete the previous two columns.*	**Identify Resources Used** *List the resources actually used in meeting the recommendation or completing the actions. As review cycles occur, describe any resource challenges experienced and what was done to resolve them. Include dates as applicable.*	**Review Date** *List each date the work items are reviewed*	**Comments** *Describe relevant information related to each review date*	**Anticipated Date of Completion**	**Date Completed**	**Final Comments** *Include any final comments related to the accomplishment/finalization of the work item or barriers that kept the work item from being completed*