



Maryland Department of Human Resources  
Office of Licensing and Monitoring  
311 W. Saratoga Street  
Baltimore Maryland 21201  
Office: 410-767-7377 Fax 410-333-8408

## QUALITY IMPROVEMENT PLAN RESPONSE FORM

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Name and Address of Facility: \_\_\_\_\_

Current License Number: \_\_\_\_\_

Inspection/Monitoring Date(s): \_\_\_\_\_

Licensing Coordinator: \_\_\_\_\_

Name of Program Administrator or Designee:

Signature of Program Administrator or Designee:

\_\_\_\_\_

\_\_\_\_\_

**DEFINITION AND PURPOSE:** A Quality Improvement Plan (QIP) is an informal technical assistance tool and feedback mechanism designed to help a provider improve program operations before any issue becomes a more significant programmatic concern. A QIP is not a formal request for a corrective action plan or a sanction under applicable regulations. The use of a QIP by OLM is entirely discretionary, and OLM is not required to issue a QIP before requesting a formal corrective action plan or imposing sanctions. OLM may exercise its discretion to issue a QIP whenever it determines that it is necessary or appropriate to direct the provider's attention to any aspect of its program or delivery of services that needs improvement.

**Quality Improvement Plan Recommendation:**

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**Provider Plan of Improvement:**

(This section may be used by providers to respond to the QIP recommendation.)

**Target Date** \_\_\_\_\_

**OLM USE ONLY:**

**OLM Comments:**

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**Plan Accepted?** Yes No

Date: \_\_\_\_\_ -

LC Initials: \_\_\_\_\_ --