

**Compliance/Quality Improvement  
Committee Meeting Minutes  
Thursday, October 17, 2019  
Central Florida Cares Health System, Inc.  
Training Room**



**ATTENDANCE**

**Central Florida Cares Health System Board of Directors**

Ian Golden, Brevard County Housing & Human Services  
Luis Delgado, Surf Monkey Media/Consumer Advocate

**Central Florida Cares Health System, Inc. Staff**

Maria Bledsoe, Chief Executive Officer  
Geovanna Gonzalez, Risk Manager  
Miralys Martinez, Quality Specialist  
Angela Gambino, Care Coordinator  
Rummy Miranda, Contract Manager  
Karla Pease, Executive Assistant and Recording Secretary

**Meeting Called to Order**

The Central Florida Cares Health System, Inc. (CFCHS) Compliance/Quality Improvement Committee meeting was held on Thursday, October 17 at 1:30 p.m. at 707 Mendham Blvd., Suite 201, Orlando, FL 32825. The meeting was called to order at 1:39 p.m.

At the commencement of the meeting, there was only one member present. There was no quorum.

The approval of minutes and the Compliance Charter will be tabled until the next meeting.

**Quality Improvement**

The Provider Satisfaction Survey was discussed in detail and at length.

The Chair suggested the meetings going forward having a new start time at 1:00 pm instead of 1:30 pm.

**Compliance**

The following items were briefly discussed:


- a. Incident reports – chart shows a spike in incidents. Each type of incident was discussed.
- b. FWA - none
- c. Complaints & Grievances - The majority of the complaints were regarding non-funded clients, so these complaints were directed to providers.
- d. Whistleblower Reports - none

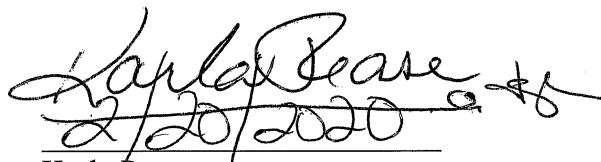
**Other/Public Input** – None

**Next Meeting**

The next meeting will be February 20, 2020 at 1:00 pm.

The meeting adjourned at 2:46 p.m.

  
Tara Hormell, Acting as Chair  
on behalf of Ian Golden,  
Compliance/QI Committee Chair

  
2/20/2020  
Karla Pease  
Recording Secretary

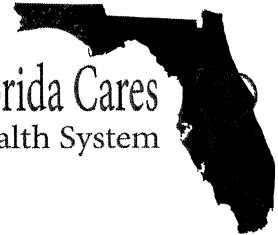
**Compliance/Quality Improvement  
Committee Agenda  
Thursday, Oct. 17, 2019  
1:30 pm to 2:30 pm  
Central Florida Cares Health System, Inc.  
Training Room**



<b>I. Welcome/Introductions</b>	Ian Golden	3 minutes
<b>II. Approve Minutes</b>	Ian Golden	3 minutes
<b>III. Compliance Charter Changes</b>	Geovanna Gonzalez	5 minutes
<b>IV. Quality Improvement</b>		
a) Provider Satisfaction Survey Report	Miralys Martinez	10 minutes
b) Board Satisfaction Survey Report	Miralys Martinez	5 minutes
c) Client Satisfaction Survey Report	Miralys Martinez	5 minutes
d) Utilization Management	Angela Gambino	5 minutes
• High Utilizers		
• Waiting List		
e) Performance Measures	Geovanna Gonzalez	5 minutes
f) Risk Management	Geovanna Gonzalez	10 minutes
• Incident Reports Data		
<b>V. Compliance</b>	Geovanna Gonzalez	5 minutes
a) CFCHS Compliance Line Reports		
b) FWA/Complaints & Grievances/Investigations		
c) HIPAA Privacy/Security		
d) Training		
e) Network Monitoring		
f) Public Records Requests		
g) Whistleblower Reports		
h) CARF		
<b>VI. Other/Public Input</b>	Group	3 minutes/person
<b>VII. Adjourn - Next Meeting</b>	Group	1 minute

**Compliance/Quality Improvement  
Committee Meeting Minutes  
Thursday, August 15, 2019  
Central Florida Cares Health System, Inc.  
Training Room**

Central Florida Cares  
Health System



**ATTENDANCE**

**Central Florida Cares Health System Board of Directors**

Ian Golden, Brevard County Housing & Human Services  
Jules Brace, Orange County Sheriff Office  
Luis Delgado, Surf Monkey Media/Consumer Advocate  
Tara Hormell, Children's Home Society

**Central Florida Cares Health System, Inc. Staff**

Maria Bledsoe, Chief Executive Officer  
Geovanna Gonzalez, Risk Manager  
Karla Pease, Executive Assistant and Recording Secretary

**Guests**

Deanne Rothenberg, Aspire Health Partners  
Jill Krohn, DCF  
Michelle Gharssoubsalgado, SAMH

**Meeting Called to Order**

The Central Florida Cares Health System, Inc. (CFCHS) Compliance/Quality Improvement Committee meeting was held on Thursday, August 15 at 1:30 p.m. at 707 Mendham Blvd., Suite 201, Orlando, FL 32825. The meeting was called to order at 1:32 p.m.

**Compliance Charter**

The Compliance Charter was discussed where membership was noted, but the charter did not clarify what constituted a quorum. Under Procedures, #2 Membership, it mentions Board Members and staff constitute a quorum. This charter should be modified to remove "and staff" since staff do not constitute a quorum or vote. The CEO will look into and revise.

Ian Golden opened up discussion for nominations for a chair person. After discussion among members, it was decided that Ian Golden would be the most appropriate candidate for the chair of this committee.

*Ian Golden nominated himself for chair of the Compliance/Quality Improvement Committee, Luis Delgado seconded, motion passed.*

**Introduction to the Compliance/Quality Improvement Committee**

Ian mentioned instead of following the agenda for today's meeting, for the Risk Manager to give an overview of the committee and go over anything that needs to be addressed at this time.

The Risk Manager discussed in detail what the Compliance program actually is, how the program is divided into Quality Improvement and Compliance, the duties of the committee, the compliance hotline, and the reports that will be emailed to them one week prior to the meetings.

The Risk Manager spoke next about the Enterprise Risk Management exercise which addressed every perceived or real risk to the agency and scored them and making sure mitigating factors are in place to address the risks. This is a prevention mechanism to make sure the agency is in compliance.

The Compliance Plan will be emailed out to the committee for their review.

### **Quality Improvement**

- a. The Client Satisfaction Survey was discussed being implemented electronically via Survey Monkey and the use of phones/tablets for client input. The cost of man hours with paper copies and input versus digital input was discussed.
- b. Utilization Management shows a waiting list for priority populations and shows which programs for substance abuse and detox residential were at 90% capacity.
- c. Performance Measures were projected.
- d. Risk Management shows incidents reported to CFCHS for the quarter and any incidents CFCHS has generated.

### **Compliance**

The following items will be discussed at each meeting:

- a. CFCHS Compliance Line Reports
- b. FWA/Complaints & Grievances/Investigations
- c. HIPAA Privacy/Security
- d. Training
- e. Network Monitoring
- f. Public Records Requests
- g. Whistleblower Reports
- h. CARF

### **Other/Public Input** – None

### **Next Meeting**

The next meeting will be October 17, 2019 at 1:30 pm.

*Tara Hormell made a motion to adjourn, Jules Brace, seconded, motion passed.*

The meeting adjourned at 2:42 p.m.

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Ian Golden  
Compliance/QI Committee Chair

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Karla Pease  
Recording Secretary