

**Compliance/Quality Improvement
Committee Meeting Minutes
Thursday, August 19, 2021
Central Florida Cares Health System, Inc.
Board Room**



ATTENDANCE

Central Florida Cares Health System Board of Directors

Ian Golden, Chair, Brevard Housing & Human Services
Luis Delgado, Surf Monkey Media/Consumer Advocate
Sherri Gonzalez, Children's Home Society
Natalie Mullet, Park Place Behavioral Health Care
Thomas Todd, Connection Church/Consumer Advocate

Central Florida Cares Health System, Inc. Staff

Geovanna Gonzalez, Compliance Director
Maria Bledsoe, Chief Executive Officer
Miralys Martinez, Risk Management Specialist
Trinity Schwab, Chief Operations Officer
Karla Pease, Executive Assistant and Recording Secretary

Guests

None

Meeting Called to Order

The Central Florida Cares Health System, Inc. (CFCHS) Compliance/Quality Improvement Committee meeting was held on Thursday, August 19, 2021 at 1:00 p.m. at 707 Mendham Blvd., Suite 201, Orlando, FL 32825. The Chair called the meeting to order at 1:04 p.m.

Minutes

A motion to approve the minutes from April 15, 2021 was made by Thomas Todd; Luis Delgado seconded; motion passed.

Quality Improvement

a) Client Satisfaction Survey

Quarter 4 results were shown. During the FY2021 Quarter 4, Central Florida Cares Health System, Inc. (CFCHS) received 348 consumer satisfaction surveys from the provider network, of which 343 were valid. Adult Mental Health has 173 valid surveys and Adult Substance Use had 79 valid surveys. CFCHS sends a reminder to providers to complete surveys which impacted completion numbers this quarter. There were more female surveys received than men this quarter. The network met the 85% target threshold for all the survey domains.

DCF has created a new electronic Client Satisfaction Survey to be taken directly on a DCF website link. Neither CFCHS nor its network providers were requested input. Apparently, there are only 10 questions in the survey, and it is still unclear how the MEs and the providers will receive data from the survey results.

- b) Performance Measures - All performance measures were met for the quarter.

Risk Management

- a) Incident Reports data was reviewed and explained. Trends were discussed. The three categories receiving the largest numbers of incidents in Q4 were in elopements, death, and “other” category. It was suggested by a member to spell out the acronym OBD (one business day). Another suggestion was to place a dash in between the fiscal years. Compliance with Attestation reporting was at 75%. Follow up was suggested to clarify the causes of death when unknown, so death incidents do not remain as cause “not listed” or “pending” at each meeting.

Compliance

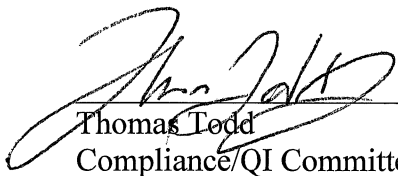
- a) CFCHS Compliance Line Reports - none
b) FWA/Complaints & Grievances/Investigations – internally when conducting the Inventory Review to DCF, it was found that two new Surfaces purchased on May 20th were missing and not inventoried. DCF will be paid back for the Surfaces through non-restricted funds and charged to the two employees responsible. Steps were taken to improve the processes.
c) HIPAA Privacy/Security – One of the network providers experienced a cyberattack, but forensic investigators concluded no breach had taken place.
d) Training – a chart was shown with numerous trainings for CFCHS and Network providers completed this quarter.
e) Network Monitoring-Schedule, Findings, Issues – A chart was shown with the status of FY 20-21 monitoring. Also, the results of the Network Monitoring Survey were shown with the supplied provider feedback. There was discussion about the 2-day turnaround for IRMS responses. Recommendations will be brought back to the committee at the next meeting.
f) Public Records Requests - none
g) Whistleblower Reports - none
h) CARF – CFCHS is working through the process for re-accreditation.

Other/Public Input – The Chair is stepping down from this committee.

Next Meeting

The next meeting will be October 21, 2021 at 1:00 pm.

The meeting adjourned at 2:50 p.m.


Thomas Todd
Compliance/QI Committee Chair


Karla Pease
Recording Secretary

**Compliance/Quality Improvement
Committee Agenda
Thursday, August 19, 2021
Central Florida Cares Health System, Inc.
Board Room**



I. Welcome/Introductions	Ian Golden	5 minutes
II. Approve Minutes	Ian Golden	10 minutes
III. Quality Improvement		
<ul style="list-style-type: none"> • Client Satisfaction Surveys • Performance Measures 	Miralys Martinez Geovanna Gonzalez	10 minutes 10 minutes
IV. Risk Management	Miralys Martinez	10 minutes
<ul style="list-style-type: none"> • Incident Reports Data • Complaints and Grievances 		
V. Compliance	Geovanna Gonzalez	15 minutes
<ul style="list-style-type: none"> a) CFCHS Compliance Line Reports b) FWA/Complaints & Grievances/Investigations c) HIPAA Privacy/Security d) Training e) Network Monitoring-Schedule, Findings, Issues f) Public Records Requests g) Whistleblower Reports h) CARF 		
VI. Other/Public Input	Group	3 minutes/person
VII. Adjourn	Group	1 minute
Meeting Dates for FY 2122 (Q1-Oct 21, Q2-Feb 17, Q3-April 21)		

**Compliance/Quality Improvement
Committee Meeting Minutes
Thursday, April 15, 2021
Central Florida Cares Health System, Inc.
Board Room**



ATTENDANCE

Central Florida Cares Health System Board of Directors

Ian Golden, Chair, Brevard Housing & Human Services
Luis Delgado, Surf Monkey Media/Consumer Advocate
Jules Brace, Orange County Sheriff Office
Thomas Todd, Connection Church/Consumer Advocate

Central Florida Cares Health System, Inc. Staff

Geovanna Gonzalez, Compliance Director (via Zoom)
Maria Bledsoe, Chief Executive Officer
Miralys Martinez, Risk Management Specialist
Trinity Schwab, Chief Operations Officer
Daniel Nye, Chief Financial Officer
Karla Pease, Executive Assistant and Recording Secretary (via Zoom)
Chayla German, Contract Manager

Guests

None

Meeting Called to Order

The Central Florida Cares Health System, Inc. (CFCHS) Compliance/Quality Improvement Committee meeting was held on Thursday, April 15, 2021 at 1:00 p.m. at 707 Mendham Blvd., Suite 201, Orlando, FL 32825. The Chair called the meeting to order at 1:09 p.m.

Minutes

A motion to approve the minutes from February 18, 2021 was made by Jules Brace, Thomas Todd seconded, motion passed.

Quality Improvement

- a) Client Satisfaction Survey
Quarter 3 results were shown. During the FY2021 Quarter 3, Central Florida Cares Health System, Inc. (CFCHS) received 393 consumer satisfaction surveys from the provider network. CFCHS has automated the survey collection process and implemented the use of Survey Monkey to collect and report client data. During the current quarter, the moratorium on survey collection by the Department of Children and Families continued due to the global pandemic of Covid 19. The following results is data collected by the CFCHS' network providers for services rendered to clients via telehealth, or in-person visits. Not all network Subcontractors participated in the survey collection due to Covid 19 restrictions for in home and group visits.

The Chair suggested a note be added before the report is sent to providers that there was a reduction in surveys due to the covid-19 pandemic impact and telehealth.

CFCHS sends a reminder to providers to complete surveys which impacted completion numbers this quarter. Adult mental health had 70 valid surveys, and adult substance abuse had 188 valid surveys. Children's mental health had 105 valid surveys, and children's substance abuse had 3 valid surveys. There were more male surveys received than women. The network as a whole met the 85% target, however, a few domains fell below the 85% threshold and those providers were identified and discussed.

- b) Performance Measures - All performance measures are being met except for percentage change in clients who are employed from admission to discharge and stable housing, which are usually a challenge. Discussion followed among members and staff with various recommendations previously submitted to the state and are still ongoing with the state on how to achieve the target measure, are other MEs meeting their targets, and could the state lower the target to be more achievable.

Risk Management

- a) Incident Reports data was reviewed and explained. Trends were discussed. The "other" category was broken down individually and explained. "Deaths" category was discussed in detail. It was asked if the data was obtained by one provider or several providers. It was suggested to dig deeper into any category that has a 25% increase/decrease from last year and generate a separate chart or memo with specific details. At the next committee meeting, it was asked if the actual reports received from providers be presented that might be higher risks. The committee will look at anything that is 25% above or below last year in each category.
Attestation reporting was at 87%, which is an increase from last quarter.
- b) FWA/Complaints & Grievances/Investigations. There was one complaint/grievance but for a non-funded client.

Compliance

- a) CFCHS Compliance Line Reports - none
- b) FWA/Complaints & Grievances/Investigations - none
- c) HIPAA Privacy/Security - none
- d) Training - a chart was shown with numerous trainings completed this quarter.
The Orange County Sheriff's Office does have Homeland Security and has active shooter and workplace violence presentations. This will be explored.
- e) Network Monitoring-Schedule, Findings, Issues - A chart was reviewed covering the monitoring process. Two separate board members volunteered to be a part of the virtual on-site entrance and exit interviews for the last two provider's monitoring.
- f) Public Records Requests - none
- g) Whistleblower Reports - none
- h) CARF - Documents will be reviewed in November or December for CARF re-accreditation.

Other/Public Input - None

Next Meeting

The next meeting will be August 19, 2021 at 1:00 pm.

The meeting adjourned at 2:05 p.m.

Ian Golden, Chair
Compliance/QI Committee Chair

Karla Pease
Recording Secretary

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