

The purpose of this handbook is to inform Network Subcontractors on what to expect before, during, and after an on-site monitoring visit by Central Florida Cares Health System, Inc.

Network Monitoring Handbook

A Guide for On-Site
Monitoring Visits



TABLE OF CONTENTS

Introduction	- 3 -
Risk Assessment.....	- 3 -
On-Site Monitoring Schedule.....	- 3 -
Pre-Site Visit Activities	- 4 -
Central Florida Cares Health System.....	- 4 -
Network	- 5 -
On-Site Monitoring Activities.....	- 5 -
Entrance Conference.....	- 5 -
Site Visit.....	- 6 -
Exit Conference.....	- 8 -
Post-Site Visit Activities.....	- 8 -
Requirements	- 9 -
REGULATORY Hyperlinks	- 10 -
Monitoring Tools and Protocols	- 12 -
Format	- 12 -
Scoring	- 13 -
Appendices	- 13 -

INTRODUCTION

It is the policy¹ of Central Florida Cares Health System, Inc. (CFCHS) to monitor its Subcontractor network to ensure compliance with laws and regulations, negotiated program descriptions, clinical quality, and contract requirements. Frequency of monitoring is determined by the annual risk assessment performed in July of each fiscal year. Monitoring tools and the Network Monitoring Handbook are available on the CFCHS website to assist Network Subcontractors in understanding the monitoring process and planning operations to be successful in complying with requirements.

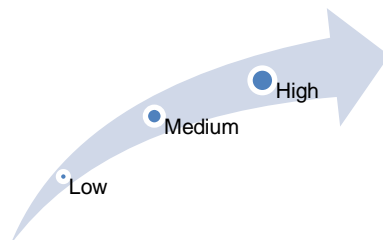
RISK ASSESSMENT

It is the policy² of Central Florida Cares Health System (CFCHS), Inc. to assess each Subcontractor annually to determine the level of risk. The level of risk assessed will be utilized in the development of the Network monitoring schedule. This risk determination will be made utilizing a risk assessment tool developed by the CFCHS staff.

Risk factors include:

- Contract Amount
- Financial Ratios
- Type of Funding and Services
- Key Organizational Change
- Incident Reports
- Complaints
- Issues with Service Provision
- Performance Measures
- Accreditation Status
- Date of Last Contract Monitoring Visit
- Historical Corrective Action Plans

ON-SITE MONITORING SCHEDULE



Subcontractors will be assigned a risk level of low, medium, or high calculated by the Risk Assessment Tool. During the duration of the contract, all subcontractors will be monitored,

¹ See Appendix A

² See Appendix A

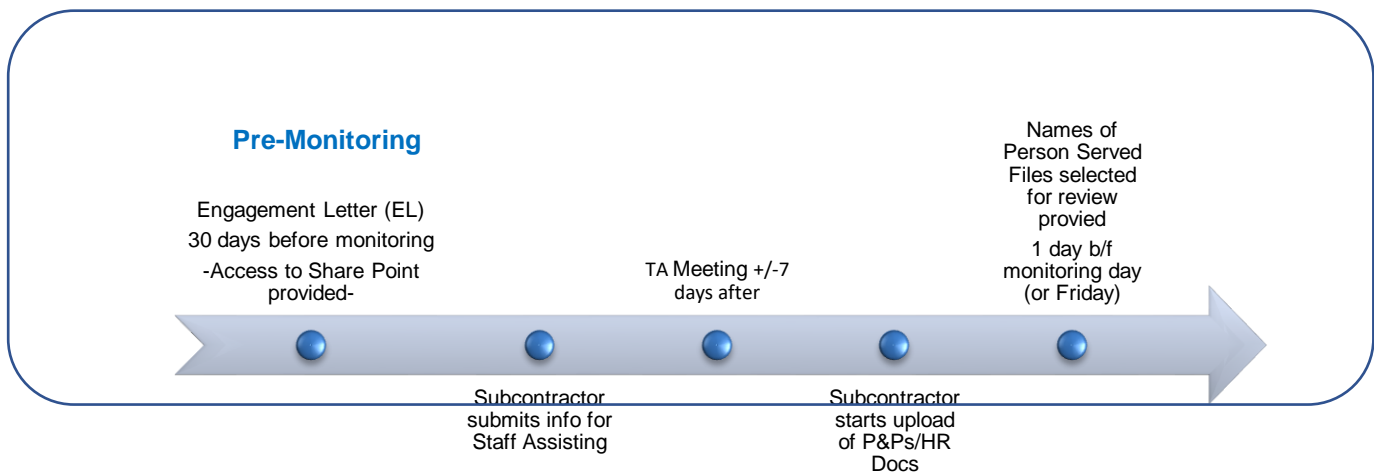
however, those deemed high risk will be scheduled more frequently than the ones deemed low risk. The monitoring scope will vary based on service provision, identified issues, and the Department Guidance Documents.

PRE-SITE VISIT ACTIVITIES

CENTRAL FLORIDA CARES HEALTH SYSTEM

The CFCHS Compliance Department typically takes the lead and assembles a Monitoring Team to develop the monitoring scope and establish the sample size of person served and staff files to be reviewed. Other activities include:

- The assigned Contract Manager is responsible for obtaining, distributing, and presenting to the Monitoring Team any external monitoring, corrective action plans, licensure, and/or accreditation reports from reviews conducted within the past 12-36 months.
- Reviewing internal monitoring reports, corrective action plan follow-ups, complaints, performance measures, burn rates, mergers, acquisitions, changes in key administrative personnel, and any other variable that may influence changes in service provision.
- Based on the Monitoring Team review, the Subcontractor received a Monitoring Engagement letter 30 days prior to the visit. This would include the scope, sample size, establishing roles and responsibilities of the Monitoring Team.
- Coordinating with the Subcontractor dates, times, location for the on-site visit.
- Conducting with the Subcontractor a Pre-Monitoring Technical Assistance Video Meeting to set up clear expectations, coordination, and to answer any questions the Subcontractor may have.
- Ensure that the Monitoring Team signs the Conflict-of-Interest form.
- One business day prior to the onsite visit, send to the Subcontractor a list of persons served files to be reviewed as included in the scope.



NETWORK

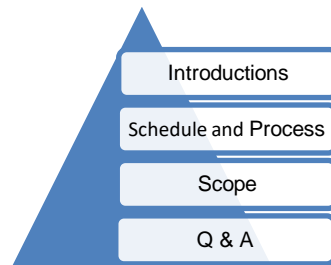
It is highly recommended that the Subcontractor assigns a single-point-of-contact for the duration of the monitoring process, from preliminary activities through closure of a corrective action plan, if necessary. This person should be available by phone or email and should be present for the on-site visit which could be face to face or virtual.

Activities expected of the single point of contact at this stage include:

- Coordinate with the CFCHS Compliance Department in terms of dates, times, document submission, and platforms for virtual meetings. If a face-to-face meeting, confirm the location(s) of the site visit.
- Provide upon request any external monitoring, licensure, and/or accreditation reports from reviews conducted within the past 12-36 months.
- Provide any other lists, materials, policy/procedures, or documents upon request.
- Review and distribute to pertinent staff the monitoring scope, the CFCHS Network Monitoring Handbook and Monitoring Tools, both of which are available on the CFCHS website. **This is a critical step in ensuring the on-site visit goes smoothly and efficiently.**
- Coordinate with the Subcontractor's internal team that will be assisting with the on-site visit.

ON-SITE MONITORING ACTIVITIES

ENTRANCE CONFERENCE



An entrance conference lasting 15-30 minutes will occur before the site visit begins. The meeting will be facilitated by the Monitoring Team Lead, which is the CFCHS Compliance Department. If available or necessary, the entire CFCHS Monitoring Team will be present for the entrance conference. The main purpose of the meeting will be to introduce the team, finalize pending details related to the schedule, process, and scope, and discuss any questions the Subcontractor may still have about the monitoring.

Though greatly appreciated, please refrain from supplying free refreshments or gifts during face-to-face site visits. Gratuitous items may create the appearance of impropriety, which is against CFCHS ethical standards. CFCHS staff may purchase refreshments from the Subcontractor at fair market value if necessary or may bring their own refreshments or make other arrangements.

SITE VISIT

Team:

The CFCHS Monitoring Team will consist of a Lead Monitor and subject matter experts from the following CFCHS Departments:

- Contract
- Compliance
- Finance
- Data
- System of Care

Length of Visit:

The site visit could last anywhere from one day to one week or more depending on the scope and volume of records to be reviewed. The specific length of time for each individual site visit will be coordinated between the CFCHS Lead Monitor and the Subcontractor's Single Point of Contact during the pre-site visit activities. There is also the possibility that the length may change once the team is onsite, regardless of what was discussed during the pre-site visit. If that occurs, the Lead Monitor will coordinate this with the Subcontractor Single Point of Contact.

Environment:

Face-to-face onsite visit - A private conference room or vacant office is necessary for the Monitoring Team to be able to work without disrupting Subcontractor operations. Additionally, an environment absent of distractions will allow the team to complete the site visit timely and accurately. Access to wireless internet is preferred, but not mandatory.

Virtual Onsite - Access to a virtual platform for document sharing, or remote electronic health record (E.H.R) access may be required based on previously agreed terms. A private room may be needed to conduct staff or person served interviews, if applicable.

Person Served Record Access:

If the person served records need to be reviewed, the Subcontractor must make those charts available in a timely manner. If access to the Subcontractor electronic health record is necessary to view the charts, that could be conducted via the Subcontractor computer systems. If access needs to be granted via a web portal, then the team can access the files on their own CFCHS issued computers.

Method:

The specific agenda for the site visit will be presented during the Entrance Conference. However, it can usually be expected for a combination of the following to occur during each monitoring:

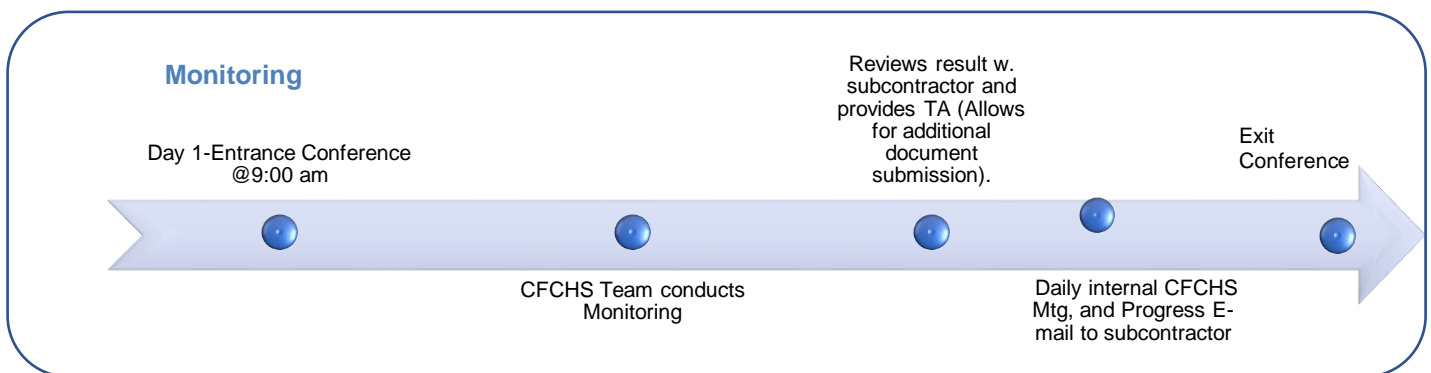
- Entrance Conference
- Review of Policies and Procedures
- Review of Personnel and training records
- Review of Person Served Charts (via hard copy or electronic health record) and Service Activity Logs
- Review of Incident Report log
- Review of Complaints and Grievance log
- Interviews with Person Served and Staff
- Tour of Facility
- Observation of data, financial, and billing processes
- Secret Shopper Calls
- Exit Conference

The CFCHS Monitoring Team will make every effort to:

- Create as little disruption to the Subcontractor’s operations as possible while on site.
- Update the monitoring plan to include the scope, as needed, and communicate this to the Subcontractor Single Point of Contact.
- Communicate frequently with Subcontractor Single Point of Contact as well as Subcontractor staff to ensure expectations have been clearly communicated prior to the Exit Conference.
- Debrief with the Subcontractor Single Point of Contact at the end of each day.

Activities expected of the Subcontractor Single Point of Contact at this stage include:

- Coordinate with the CFCHS Lead Monitor in terms of all on-site activities.
- Function as the main liaison between the CFCHS Monitoring Team and the Subcontractor’s staff during the site visit.
- Attend the daily debrief.
- Review and distribute completed tools to other Subcontractor staff, as necessary.
- Provide any missing documents as outlined on completed tools preferably by the next day or by the exit conference at the latest.



EXIT CONFERENCE



An exit conference will occur at the conclusion of the site visit, after the CFCHS Monitoring Team has met to organize and clarify all work papers with the CFCHS Lead Monitor. An exit conference should last no longer than 60 minutes, depending on the scope of the site visit. The meeting will be facilitated by the CFCHS Monitoring Team Lead. If available or necessary, the entire CFCHS Monitoring Team will be present for the exit conference, either face to face, virtually, by phone, or a combination. The main purpose of the meeting will be to summarize the strengths and weaknesses discovered during the site visit, provide opportunity for any final questions and answers, and to discuss a timeline for next steps.

Activities expected of the Subcontractor Single Point of Contact at this stage include:

- Assemble pertinent Subcontractor staff for the Exit Conference.
- Coordinate with the CFCHS Lead Monitor in terms of all post-site visit activities.

NOTE: The Exit Conference marks the end of the on-site visit. Any findings reported at the Exit Conference cannot be disputed or further negotiated later. Therefore, CFCHS encourages Subcontractors to communicate any questions, concerns, or disputes to the CFCHS Monitoring Team DURING the site visit. In the same manner, the CFCHS monitoring team will communicate all questions, concerns, and findings to the Subcontractor DURING the site visit, ensuring a fully transparent and open process.

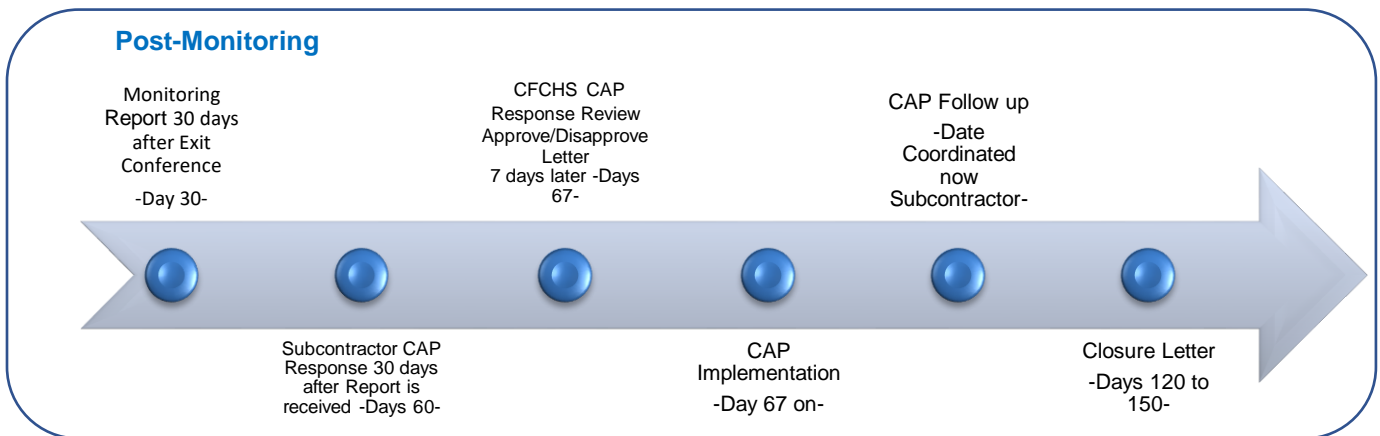
POST-SITE VISIT ACTIVITIES

After the Exit Conference, the Lead Monitor will conduct the following activities off site:

- Coordinate finalizing the report and obtain all appropriate signatures, including the CFCHS Monitoring Team and CFCHS management.
- Deliver the report to the subcontractor within 30 calendar days of the Exit Conference.
- Request subcontractor's response to the report within 30 calendar days of receipt of report, unless another due date is specified. **Corrective actions due to person served health and safety must be submitted and implemented**

immediately upon discovery. The Subcontractor response must include specific steps and dates to implement the corrective action plan.

- Coordinate with CFCHS Monitoring Lead to distribute any corrective action plan responses received from the Subcontractor to the appropriate CFCHS Monitoring Team for review.
- Within seven business days of receipt of the Subcontractor CAP response, CFCHS will notify in writing an acceptance or rejection of CAP response.
- Schedule a follow-up visit, either via desk review or on-site, within two to three months from the date of the CAP acceptance letter.
- Report results to CFCHS Management Team.



REQUIREMENTS

All Subcontractors are required to abide by the following³ and compliance will be assessed during the site visit:

- The contract between CFCHS and the Subcontractor
- Contract GHME1 and all amendments which can be found at <https://facts.fldfs.com/Search/ContractDetail.aspx?AgencyId=600000&ContractId=GHME1>
- The submitted and approved Subcontractor Program Description(s)
- Regulatory Authorities to include but not limited to:
 - Florida Administrative Codes
 - THE DEPARTMENT CF Operating Procedures
 - Florida Statutes
 - Federal Regulations

³ This list is not exhaustive of all required laws, rules, and regulations that a subcontractor must follow.

REGULATORY HYPERLINKS

Below is a listing of the Florida Administrative Codes that apply to the Department of Children and Families funded programs. Copies of these rules may be obtained by clicking on the hyperlinks in the “Chapter No.” column or from the Department of State website (<https://www.flrules.org/default.asp>).

<u>Chapter No.</u>	<u>Chapter Title</u>
FLORIDA ADMINSTRATIVE CODES	
65E-4	Community Mental Health Regulation
65E-5	Mental Health Act Regulation
65E-9	Licensure of Residential Treatment Centers
65E-10	Psychotic and Emotionally Disturbed Children - Purchase of Residential Services Rules
65E-11	Behavioral Health Services (Title XXI)
65E-12	Public Health Crisis Stabilization Units and Short-Term Residential Treatment Programs
65E-14	Community Substance Abuse and Mental Health Services - Financial Rules
65E-16	Indigent Psychiatric Medication Program
65E-20	Forensic Client Services Act Regulation
65E-25	Sexually Violent Predator Program
65E-26	Substance Abuse and Mental Health Priority Populations and Services
65D-30	Substance Abuse Services Office
58A-5	Assisted Living Facilities
FLORIDA STATUES	
394	Mental Health
397	Substance Abuse Services
408	Health Care Administration
427	Special Transportation and Communication Services
435	Employment Screening

	<p>INCORPORATED GUIDANCE DOCUMENTS (ME TEMPLATES) https://www.myflfamilies.com/service-programs/samh/managing-entities/</p> <p>Note: Please choose the correct fiscal year by scrolling to the ME templates.</p>
12	Behavioral Health Network (BNet)
13	Indigent Drug Program (IDP)
15	Projects for Assistance in Transition from Homelessness (PATH)
16	Florida Assertive Community Treatment (FACT)
17	Temporary Assistance for Needy Families (TANF)
18	Family Intensive Treatment (FIT)
	CF Operating Procedures
40-5	Acquisition of Vehicles for Transporting Transportation Disadvantage Clients
50-2	Security of Data and Information Technology Resources
60-10	Auxiliary Aids and Services for Persons Who Are Deaf or Hard-of-Hearing
60-16	Methods of Administration-Equal Opportunity in Service Delivery
60-17	Chapter 7 HIPAA Breach Notification Procedure
60-25	Employee Security Background Screening
155-01 – 155-65	Mental Health and Substance Use
170-3	Prevention, Reporting and Services to Missing Children
180-4	Mandatory Reporting to the Inspector General
	Incident Reporting and Analysis System (IRAS)
215-7	Child Fatality Notification Requirements
	CODE OF FEDERAL REGULATIONS
20 CFR	Employees' Benefits
45 CFR	Public Welfare
31 CFR	Money and Finance: Treasury

	OTHER
	2010 DCF-HHS Settlement Agreement
	CFCHS TANF Guide
	CFCHS Mobile Response Team (MRT) Guidelines
	CFCHS Forensic Multi-Disciplinary Team (FMT) Guidelines
	Behavioral Health Consultant Protocol
	Care Coordination Guidelines
	PAM 155-2
	Block Grant Requirements Manual for Managing Entities (Exhibit B1) https://www.myflfamilies.com/service-programs/samh/managing-entities/2020/Exhibits/Exhibit%20B1%20Block%20Grant.docx
	Executive Order No. 11-116
	Section 504 ADA
	Public Health Service Act Title V Sec. 522.290cc-22 (b)(7) A

MONITORING TOOLS AND PROTOCOLS

FORMAT

Each Monitoring tool is labeled for the program or service being monitored⁴.

Each monitoring tool contains a heading where the Monitoring Team will record the following information:

- Reviewer Name
- Date
- Subcontractor Name

Each monitoring tool lists the reference and the requirements to be assessed for compliance. From left to right on each tool you will find the following columns:

- Citation: indicates the reference citation from law, rule, policy, or contract
- Requirement: the verbiage of the citation to be assessed during site visit
- Record 1, Record 2, Record N: the Monitoring Team will use these columns to document a record identifier and compliance status with the requirement.
- Comments: This column will be used to make pertinent notations about compliance or non-compliance.

⁴ See Appendix B

SCORING

Compliance with each requirement will be scored using the following point system:

- Yes = 1 point
- No = 0 points
- N/A = will not be figured into the denominator of the total score

Compliance rate for an individual tool will be calculated as follows:

1. Sum the points earned for each requirement.
2. Divide the total points earned by the number of requirements applicable.

Thresholds:

- 85% or above – full compliance
- 84% or below – requires a corrective action plan.

Scoring exception: If any one requirement on a tool scores 84% or below, it is up to the discretion of the Monitoring Team if a CAP is requested.

Any deficiencies discovered during the site visit that affect client safety will require immediate corrective action by the Subcontractor.

APPENDICES

Appendix A – CFCHS Policies

1. Subcontractor Risk Assessment
2. Subcontractor Monitoring

Appendix B – CFCHS Monitoring Tools

1. For all Subcontractors:
 - a. Administrative/ Policies and Procedures
 - b. Human Resources
 - c. Service Validation
 - d. Auxiliary Aid
 - e. Incident Reporting
 - f. Performance Measures
 - g. HIPAA Security and Privacy
 - h. Fiscal Administrative
 - i. Facility Checklist
 - j. Client and Staff Interviews (to include Recovery Oriented Systems of Care – ROSC)
 - k. Secret Shopper
2. Program specific:
 - a. Mental Health Client Record

- b. Mental Health Residential Treatment
- c. Crisis Stabilization/Short-Term Residential Treatment
- d. Assisted Living Facilities with a Limited Health License (ALF-LMHL)
- e. Florida Assertive Community Team (FACT)
- f. Civil/Forensic Case Management
- g. Temporary Assistance for Needy Families (TANF)
- h. Substance Abuse State Licensed Programs
- i. Family Intensive Treatment Team (FITT)
- j. Behavioral Health Consultants (BHC)
- k. Care Coordination Client Record
- l. Community Action Team (CAT) Client Record
- m. Federal Substance Abuse Prevention and Treatment Block Grant Compliance