

**Compliance/Quality Improvement
Committee Agenda
Thursday, April 21, 2022
Central Florida Cares Health System, Inc.
Board Room**



I. Welcome/Introductions	Thomas Todd	5 minutes
II. Approve Minutes	Thomas Todd	5 minutes
III. Quality Improvement		
<ul style="list-style-type: none"> • Employee Satisfaction Surveys • Board Satisfaction Survey • Person Served Satisfaction Surveys 	Valentina Melnichuk Miralys Martinez Miralys Martinez	20 minutes 15 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"> • CFCHS Compliance Line Reports • FWA/Complaints & Grievances/Investigations • HIPAA Privacy/Security • Training • Network Monitoring-Schedule, Findings, Issues • Public Records Requests • Whistleblower Reports • CARF 		
VI. Other/Public Input	Group	3 minutes/person
VII. Next Meeting	Group	1 minute
<ul style="list-style-type: none"> • August 18, 2022 		

**Compliance/Quality Improvement
Committee Meeting Minutes
Thursday, October 21, 2021
Central Florida Cares Health System, Inc.
Board Room**



ATTENDANCE

Central Florida Cares Health System Board of Directors

Thomas Todd, Chair, Connection Church/Consumer Advocate
Jules Brace, Orange County Sheriff Office
Sherri Gonzalez, Children's Home Society
Natalie Mullett, Park Place Behavioral Health Care

Central Florida Cares Health System, Inc. Staff

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

Guests

Anne Sutherland, Department of Children and Families
Amy Hammett, Department of Children and Families

Meeting Called to Order

The Central Florida Cares Health System, Inc. (CFCHS) Compliance/Quality Improvement Committee meeting was held on Thursday, October 21, 2021 at 1:00 p.m. at 707 Mendham Blvd., Suite 201, Orlando, FL 32825. The Chair called the meeting to order at 1:02 p.m.

Minutes

Natalie Mullett made a motion to approve the minutes from August 19, 2021, Sherri Gonzalez seconded; motion passed.

Quality Improvement

- a) Client Satisfaction Survey
Quarter 1 results were shown. Quarter 2 will reflect a new process implemented by DCF which is still being developed, but these results were obtained via Survey Monkey. During the FY2122 Quarter 1, Central Florida Cares Health System, Inc. (CFCHS) received 578 consumer satisfaction surveys from the provider network, of which 547 were valid and 31 invalid. There were more female surveys received than men this quarter. The network met the 85% target threshold for all the survey domains.
- b) Provider Satisfaction Surveys – Each of the 28 questions was reviewed with the committee and discussed. The survey was open from September 1-30, 2021. CFCHS received 60 respondents mostly completed by management/administrators and executives. Comments from respondents were discussed among members. A member

suggested to have a general comment box so anything could be stated, rather than just if you disagree. Another suggestion was to add a line where they can add their name if they want to be contacted.

- c) Performance Measures – The Chief Information Officer (CIO) stated that DCF produces a guidance document incorporated into our contract called Guidance 24 Performance Measures. Guidance 24 is in review and being revised for the new data system, FASAMS, that went live July 1. There are no approved algorithms for it or approved code. The CIO adapted DCF’s original draft code to work in our environment for reporting. A bigger issue is providers have had difficulty getting data out of their EHR systems and into the system. CFCHS is missing data from the four largest providers and another provider in the top seven. Although we can report on performance measures, this is not a reasonable representation of what is true. DCF’s new system is still a work in progress.

Risk Management

- a) Incident Reports data was reviewed and explained. Trends were discussed. The three categories receiving the largest numbers of incidents in Q1 were in employee misconduct, death, and elopements. Thirteen employee misconducts were unsubstantiated. CFCHS met with the provider who reported 19 employee misconducts and investigated and determined half of the misconducts were from non-funded CFCHS clients.

Compliance

- a) CFCHS Compliance Line Reports – none
- b) FWA/Complaints & Grievances/Investigations – none
- c) HIPAA Privacy/Security – A hacked email was received from an apparent provider requesting a change in their bank account information. The email and the form looked legitimate, but was not. The deposit was made to other than the provider. CFCHS contacted our bank to reinstate the funds since we were in the 5-day grace period. Payment was reversed and funds returned to CFCHS. CFCHS has implemented policy changes with a two-step process to verify the request.
- 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 21-22 monitoring. The Compliance Director asked for non-provider members to volunteer to be a part of a monitoring process. There are still two providers with corrective action plans outstanding from last fiscal year’s monitoring cycle.
- f) Public Records Requests – none, but DCF asked for a PRTS progress report.
- g) Whistleblower Reports - none
- h) CARF – The virtual audit will take place around the end of the year.

Other/Public Input – none

Next Meeting

The next meeting will be February 17, 2022 at 1:00 pm.

Jules Brace made a motion to adjourn, Natalie Mullett seconded, motion passed.

The meeting adjourned at 2:02 p.m.

Thomas Todd
Compliance/QI Committee Chair

Karla Pease
Recording Secretary

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