Compliance/Quality Improvement Committee Agenda Thursday, April 18, 2024 Central Florida Cares Health System, Inc. Board Room



I.	Welcome/Introductions	Sherri Gonzales	2 minutes
II.	<b>Approve February 2023 Minutes</b>	Sherri Gonzales	2 minutes
III.	Policies and Charter Review	Geovanna Gonzalez	15 minutes
IV.	<ul><li>Risk Management</li><li>Incident Report Data &amp; Trends</li></ul>	Miralys Martinez	10 minutes
V.	<ul> <li>Quality Improvement</li> <li>Person Served Satisfaction Surveys</li> </ul>	Jerrymar Foster	10 minutes
VI.	<ul> <li>Compliance</li> <li>a) CFCHS Compliance Line Reports</li> <li>b) FWA/Complaints &amp; Grievances/Investigate</li> <li>c) HIPAA Privacy/Security</li> <li>d) Training</li> <li>e) Network Monitoring-Schedule, Findings,</li> <li>f) Public Records Requests</li> <li>g) Whistleblower Reports</li> <li>h) CARF</li> </ul>		15 minutes
VII.	<b>Proposed meeting dates for next FY</b> August 15 - Review of prior FY Q4 October 17 - Review of current FY Q1 February 20 - Review of Q2 April 17 - Review of Q3	Geovanna Gonzalez	5 minutes
VIII.	<b>Other/Public Input</b>	Group	3 minutes/person
IX.	Adjourn	Group	1 minute

Compliance/Quality Improvement Committee Meeting Minutes Thursday, February 15, 2024 Central Florida Cares Health System, Inc. Board Room



# ATTENDANCE

### Central Florida Cares Health System Board of Directors

Sherri Gonzales, Chair, Children's Home Society Mark Broms, Advocate Luis Delgado, Advocate Alex Greenberg, Orange County Sheriff's Office Garrett Griffin, Park Place Behavioral Health Care Ana Scuteri, Department of Health Seminole County

## Central Florida Cares Health System, Inc. Staff

Maria Bledsoe, Chief Executive Officer Geovanna Gonzalez, Compliance Director Trinity Schwab, Chief Operating Officer Miralys Martinez, Risk Management Specialist Jerrymar Foster, Quality Improvement Specialist Karla Pease, Executive Assistant

### **Guests**

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, February 15, 2024, at 1:30 p.m. at 707 Mendham Blvd., Suite 201, Orlando, FL 32825. The Chair called the meeting to order at 1:31 p.m.

### **Minutes**

The minutes from October 19, 2023, were approved by Luis Delgado; Sherri Gonzalez seconded; motion passed.

## **Risk Management**

- Incident Reports compared FY22-23 to FY23-24 data. Data was reviewed and explained.
- Year-to-date Compliance with Reporting in One-Business-Day (OBD) trends were shown. An automated email is sent to providers reminding them of OBD requirements.
- Compliance attestations compared FY 22-23 to FY23-24 where 84% attested due to automated email reminding providers to submit the attestation.
- Incident types (Death, Elopements, and Employee Misconduct) were compared (FY22-23 to FY23-24) and were reviewed with members.

## **Quality Improvement**

- Community Person Served Satisfaction Surveys (CPSSS) The Quality Improvement Specialist shared the second quarter survey results as well as compared FY22-23 to FY23-24 survey results as a point of reference. Also shared were domains with percentages.
- FY 22-23 Board Satisfaction Survey results were shared with members.
- FY 22-23 Provider Satisfaction Survey results were also shared with members.

### **Complaints and Grievances**

- Quarter two had five reported complaints and two of those were for non-funded clients. The provider reviewed and resolved them. For the third complaint, the person who made the report left their name, but never returned CFCHS calls. For the fourth report, was filed anonymously making it not possible to get clarification or ask further questions. The fifth complaint was about billing for a person receiving services from a funded provider. The investigation showed that the billing was accurate.
- So far for Q3, CFCHS has received two complaints. One related to a non-funded child who needed a prescription for their medication. The provider was notified and resolved it. The other complaint was about an employee being rude and disrespectful and is being investigated.

#### **Compliance**

- a) Network Monitoring-Schedule, Findings, Issues A table showing FY22-23 provider monitoring status of one open CAP was presented and discussed with members. A table showed thirteen providers to be monitored in FY23-24 and board members were asked to participate in the monitoring pre, entrance and exit conferences, if they are available.
- b) Training a chart of internal training and technical assistance to the network was shown.
- c) Performance measures stable housing is still below target and is a challenge to meet.
- d) FWA none
- e) HIPAA Privacy/Security none
- f) Public Records Requests none
- g) Whistleblower Reports none
- h) CARF Accreditation expires December 31, 2024.

The Pharming incident was discussed with members and will be reiterated in more detail at the Board of Director's meeting following this meeting. No data was compromised.

The Phishing incident was discussed with members. No systems were jeopardized. The final report is pending to close out.

### Other/Public Input – None

### Next Meeting

The next meeting will be April 18, 2024, at 1:30 pm.

*Luis Delgado made a motion to adjourn, Alex Greenberg seconded, motion passed.* The meeting adjourned at 2:39 pm.

Sherri Gonzales, Chair