

**Compliance/Quality Improvement
Committee Agenda
Thursday, April 17, 2025
Central Florida Cares Health System, Inc.
Board Room**



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|--|--------------------------------------|--------------------------|
| I. Welcome/Introductions | Sherri Gonzales | 2 minutes |
| II. Approve Minutes | Sherri Gonzales | 2 minutes |
| III. Risk Management <ul style="list-style-type: none">• Incident Report Data & Trends | Miralys Martinez | 10 minutes |
| IV. Quality Improvement <ul style="list-style-type: none">• Person Served Satisfaction Surveys• Provider Satisfaction Survey | Jerry-mar Foster
Jerry-mar Foster | 10 minutes
10 minutes |
| V. Compliance <ul style="list-style-type: none">a) CFCHS Compliance Line Reportsb) FWA/Complaints & Grievances/Investigationsc) HIPAA Privacy/Securityd) Traininge) Network Monitoring-Schedule, Findings, Issuesf) Public Records Requestsg) Whistleblower Reportsh) CARFi) Compliance Committee Charter | Geovanna Gonzalez | 15 minutes |
| VI. Other/Public Input | Group | 3 minutes/person |
| VII. Next Meeting
August 21, 2025 at 1:30 pm | | |

**Compliance/Quality Improvement
Committee Meeting Minutes
Thursday, October 17, 2024
Central Florida Cares Health System, Inc.
Board Room**



ATTENDANCE

Central Florida Cares Health System Board of Directors

Sherry 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

Central Florida Cares Health System, Inc. Staff

Maria Bledsoe, Chief Executive Officer
Geovanna Gonzalez, Compliance Director (via Zoom)
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, October 17, 2024, at 1:30 p.m. at 707 Mendham Blvd., Suite 201, Orlando, FL 32825. The Chair called the meeting to order at 1:36 p.m.

Minutes

A motion to approve the April 18, 2024 minutes was made by Garrett Griffin, Mark Broms seconded; motion passed.

Risk Management – Incident Report Data & Trends

- Incident Reports compared Quarter 1 FY23-24 (45 submissions) to Quarter 1 FY24-25 (55 submissions) data. Data was reviewed and explained.
- Compliance attestations compared FY 23-24 to FY24-25. In Quarter 1, 13 events were reported, and 7 of those were reported outside of the one business day. Reporting numbers have increased this quarter over last fiscal year Quarter 1 due to automated e-mail reminding providers to submit the attestation.
- Year-to-date Compliance with Reporting in One-Business-Day (OBD) trends were shown. This correlates with the beginning of the monitoring season, which often identifies incidents that met criteria, but were not reported.
- Incident types were compared (FY23-24 to FY24-25) and were reviewed with members.

Quality Improvement – Person Served Satisfaction Surveys

The Quality Improvement Specialist shared the Quarter 1 survey results and compared FY23-24 to FY24-25 survey results as a point of reference.

The Provider Satisfaction Survey and Board Satisfaction Survey were reopened and resent due to low participation and will be presented at the next meeting in February.

Compliance - Complaints and Grievances

- During Quarter there were two complaints received on the compliance line. The first complaint was not CFCHS related but referred to the Dept. of Corrections Office of the Inspector General via their complaints and grievances online form. The second complaint did involve a network provider and its leadership. The provider's board of directors hired a third-party legal firm to investigate. Allegations against the leadership were unsubstantiated. There were substantiated findings against a clinical staff whose employment was terminated. There is an open investigation from Equal Employment Opportunity Commission.
- Network Monitoring – a table was shown showing the schedule of FY 24-25 monitoring. CFCHS will monitor 46% of the network, although the Department only asks for 20%. During Quarter 1, CFCHS followed up and closed all pending CAPs from the prior fiscal year. Directors were invited to attend via virtual the monitoring technical assistance meeting or the exit meeting if they desired.
- HIPAA Privacy/Security – none. There is a new Civil Rights Officer with DCF who is thoroughly reviewing incidents related to data security issues and requesting more information from network providers.
- Internal Training - a chart of internal training and technical assistance to the network was shown for Quarter 1.
- Public Records – none
- Whistleblower – none
- CARF –All policies and procedures have been updated, finalized, and completed with the new logo. Employees have until November 30 to update the CARF requirements master document, and to upload their policies and plans to their respective CARF folders. CARF will visit CFCHS in January/February 2025.

Other/Public Input – None

Next Meeting

The next meeting will be on February 20, 2025, at 1:30 pm.

A motion to adjourn was made by Dr. Garrett Griffin, Alex Greenberg seconded; motion passed.

The meeting adjourned at 2:10 pm.

Sherri Gonzales, Chair

Karla Pease, Recording Secretary