

**Compliance/Quality Improvement
Committee Agenda
Thursday, February 19, 2026
Central Florida Cares
Board Room**



I. Welcome/Introductions	Luis Delgado	2 minutes
II. Approve Minutes	Luis Delgado	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">• CPSSS	Jerrymer Foster	20 minutes
V. Compliance <ul style="list-style-type: none">a) CFC Compliance Line Reportsb) FWA/Complaints & Grievances/Investigationsc) HIPAA Privacy/Securityd) Traininge) Network Monitoring-Schedule, Findings, Issuesf) Public Records Requestsg) Whistleblower Reportsh) CARF	Geovanna Gonzalez	20 minutes
VI. Other/Public Input	Group	3 minutes/person
VII. Next Meetings April 16, 2026		

**Compliance/Quality Improvement
Committee Meeting Minutes
Thursday, October 16, 2025
Board Room**



ATTENDANCE

Central Florida Cares Health System Board of Directors

Sherrí Gonzales, Chair, Children’s Home Society
Wayne Holmes, Advocate
Celestia McCloud, Osceola County Government

Central Florida Cares Health System, Inc. Staff

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

Guests

None

Meeting Called to Order

The Central Florida Cares (CFC) Compliance/Quality Improvement Committee meeting was held on Thursday, October 16, 2025, at 1:30 p.m. at 707 Mendham Blvd., Suite 201, Orlando, FL 32825. The Chair called the meeting to order at 1:30 p.m.

Minutes

A motion to approve the August 21, 2025, minutes was made by Wayne Holmes, Celestia McCloud seconded; motion passed.

Risk Management – Incident Report Data & Trends

- Incident Reports compared Qt 1 FY24-25 to Qt 1 FY25-26 Data was reviewed and explained.
- Incident types were compared Qt 1 FY24-25 to Qt FY25-26 and were reviewed with members.

Quality Improvement

- **Person Served Satisfaction Surveys**
The Quality Improvement Specialist shared the FY survey Submissions by Programs, Domain Satisfaction, and Program Area Satisfaction and compared QT 1 FY24-25 to FY25-26 survey results as a point of reference.
- **Board Satisfaction Surveys**
Only 8 board members submitted a survey. Survey results were shared with the committee.

- **Network Provider Satisfaction Surveys**

22 responses were received compared to 45 responses from last year. Results were reviewed with the committee.

Compliance - Complaints and Grievances

- Four complaints received on the compliance line for Qt 1. Three complaints were for non-funded CFC clients and were unsubstantiated; 1 was funded by CFC and is undergoing further review.
- Network Performance Measures were shown for June 2025 (FY25-26). All performance measures were met in Qt 1 except for Adult Substance Use Stable Housing and Adult Substance Use Successful Completion.
- HIPAA Privacy/Security – none
- Internal Training - a chart of internal training and technical assistance to the network was shown for Quarter 1.
- Network Monitoring Schedule – 44% of the network will be monitored in FY25-26 (15 out of 34 providers) A hybrid model will be used in monitoring.
- Public Records – none
- Whistleblower – none
- CARF accreditation is through December 2027.

Other/Public Input – None

Next Meeting

The next meeting will be on February 19, 2026 at 1:30 pm.

A motion to adjourn was made by Wayne Holmes, Celestia McCloud seconded; motion passed.

The meeting adjourned at 2:39 pm.

Sherri Gonzales, Chair

Karla Pease, Recording Secretary