

Series:	Risk Mgmt/Quality Assurance	COA: RPM 2 & PQI 4 CFOP: NA
Procedure Name	Compliance Review Process Level 2 Review	
Procedure Number:	RQ-506	
Reviewed Date:	12/13/19, 4/16/24, 1/22/2025	
Revision #/Date:	1/22/2025, 11/01/2008, 7/1/2025	
Effective Date:		
Applicable to:	All Family Partnerships of Central Florida (FPOCF) Staff and Contract Providers	

SUBJECT: **Compliance Review Process – (Level 2 Review)**

PURPOSE: To serve Family Partnerships of Central Florida, in the identification, evaluation, and the mitigation of risk, to ensure the health, safety and well being of children served; and to ensure the protection of rights and privacy of all children and families served through FPOCF Network of Providers, as well as to ensure that practices by FPOCF and/or its providers are in compliance with any and all state regulations and/or State/Community Based Care of Brevard contract requirements.

PROCEDURE:

References

FPOCF Policies/Procedures: GOV-202, GOV-203, OP1181, RQ-502

Overview:

1. The Compliance Review Process is deemed as Level 2 Review process. Level 1 Review process of same documents is the Risk Management Committee (see Risk Management Committee Procedure RQ-502.)
2. The Compliance Review Process is comprised of the following Family Partnerships of Central Florida staff or their designee:
 - a. President and CEO
 - b. Vice President and COO
 - c. Chief Legal Officer
 - d. Chief Financial Officer
 - e. Chief Administrative Officer
 - f. Placement and Behavioral Health Administrator
 - g. Administrator of Performance, Quality and Training
 - h. Contracts and Compliance Director / Compliance Officer
 - i. Human Resources Director
 - j. Any additional staff may be identified due to the nature of the issue/concern
3. The Compliance Review process includes a review of critical incidences, complaints, grievances, and any other issues that are received from the Level 1 Risk Management

Committee and deemed necessary to be reviewed at the level 2 committee. Those documents will be transferred for review by the Risk Management Committee Chair. For those that require immediate review by the committee, information will be forwarded to the Vice President and COO within 24 hours of the Level 1 Review.

4. The Compliance Review Process outlines all needed internal investigation processes and/or conduct internal investigations as appropriate to review and address:
 - a. Any corrective action(s) that may be placed on Family Partnerships of Central Florida through the State contract monitoring process.
 - b. Any high risk and/or critical corrective action plans developed for one of our contracted providers through Family Partnerships of Central Florida contract monitoring process.
 - c. Other investigations/monitoring problems that may be identified as a result of auditing, survey processes and/or identified area of potential risk.
5. As a part of an ongoing Compliance Review Process, the Executive Team reviews compliance with all recommendations made as a result of any initial follow-up or subsequent recommendations made through all levels of the review/investigation process; to include the Level 1 process of the Risk Management Committee.

Review of High-Risk Incidents and Critical Issues (Level 2):

1. All incidents, grievances, and/or complaints will be received and reviewed initially by the Family Partnerships of Central Florida staff assigned to these review functions. This initial review by Family Partnerships of Central Florida staff, and in consultation with the Director of Contracts and Compliance/Compliance Officer, will determine whether a particular incident, complaint, or grievance should be immediately referred to the Level 1 Risk Management Committee or the Level 2 Compliance Committee and/or concurrently to the appropriate State agency.
2. At any time, a complaint or grievance may be reviewed directly as part of the Compliance Review Process and/or Vice President and COO or designee.
3. Once an issue has been received for review as part of the Compliance Review Process (outside of the regularly scheduled review meetings) a meeting will be convened to determine the next appropriate step.

The Investigative Process and Recommendations:

1. Following the review of the incident, grievance, or complaint by the Compliance Committee, a decision for further investigation may be made.
 - a. If an investigation is warranted due to the severity of the alleged complaint, this Committee will determine the scope of the investigation and assign the appropriate staff to conduct the respective internal investigation. See OP1181 regarding steps to take regarding a serious injury or death.
 - b. The investigation could be handled by members of the Committee or depending on the complaint; grievance or incident may need to be assigned outside of the Committee.
2. The investigation may include interviews with clients, families, staff, and providers, collecting and reviewing data/evidence, analyzing all relevant information and finally making recommendations regarding the resolution of an issue which may include additional required

training, retraining, and changes in practices and/or recommend corrective action to curtail the problem.

3. In addition, the Compliance Review process analyzes and determines whether there are patterns of incidences, complaints, and/or grievance regarding an individual child and/or family, an organization or employee and/or employees for those high risk and/or critical issues.
4. Examples of issues which should be referred immediately for a Compliance Review include issues regarding allegations of violations of client's rights and privacy, health and safety issues of children, issues regarding quality of care, funding and/or contract compliance complaints, both internal and external.
5. As part of the review process and/or investigation process, the Compliance Review Process ensures the timeliness and responsive review of any and all High Risk Incidences and Critical complaints and/or grievances, to ensure that all incidents reported to Family Partnerships of Central Florida were reviewed and followed up and/or investigated appropriately, and that the follow up and/or investigation was thorough, responsive, and timely.
6. These reviews and/or investigations may be concurrent to the standard incident/grievance review process which may still be in process at the receipt of the initial report or retrospective depending on the type or nature of the incident, grievance, or complaint that has been received; to include any issues referred through the Level 1 Risk Management Committee review process.

BY DIRECTION OF THE PRESIDENT AND
CHIEF EXECUTIVE OFFICER



PHILIP J. SCARPELLI
President and Chief Executive Officer
Family Partnerships of Central Florida

DATE: 10/16/2025