**Meeting Minutes**

CDS Family & Behavioral Health Services, Inc.

Meeting: **Interface Youth Program Central**

Date: **May 22, 2025**

Time: **4pm-5pm**

Location: **3456 NE 39th Avenue, Gainesville, Florida 32609**

Date of Next Meeting: **June 12, 2025**

Attendance: **Brian Smith, Naomi Thompson, Belinda Ross, Melissa Hodges,**

**Anita Jenkins-McCarter, Jacovy Smith, Travis Grigger, Bonita Barkley,**

**William Harmon, Shaci Davis, LaRose Manker, Joe Mattox and**

**Zeke Whitter.**

Absent**: Vince Lipford, Kevin Lee, Ken Welcome, Gretchen Strickland**

**Christina Vinson and Tameka Rollins**

**I. Business Operations:**

A. Monthly Budget (Revenue and Expenses)

*1. Sub-topic:*

*Discussion*: No discussion

*Outcome, Actions, Timeframe:*

B. Marketing and Business Development

*1. Sub-topic:*

*Discussion:* No discussion

*Outcomes, Actions, Timeframes:*

C. Regulatory Issues

*1. Sub-topic:*

*Discussion:* No discussion

*Outcome, Actions, Timeframes:*

D. Human Resource Issues (Staffing and Training)

*1. Sub-topic:* **Medication Management Quarterly Training**

*Discussion:* **Residential Supervisor/Super User Brian Smith and Residential Counselor**

**Naomi Thompson facilitated this Medication Management Quarterly**

**Training.**

*Outcome, Actions, Timeframe:* **This Medication Management Quarterly Training is a**

**Requirement of the Florida Network of Youth and Family Services. Please**

**review the attachment regarding the Medication Management Quarterly**

**Training Notes.**

*2.**Sub-topic:* **Be On Time For Your Work Shift**

*Discussion:* **Staff must focus on coming to work on time and following the CDS Policy**

**on notifying the Program according to the CDS Supervision and Staffing**

**Ratio / Scheduling Policy.**

*Outcome, Actions, Timeframes:* **Staff must review their Job Description as it relates to**

**this work attendance requirement. In addition, staff must arrive to work**

**on time and be prepared to work.**

E. Annual Budget Planning and Process

*1. Sub-topic:*

*Discussion:*  No discussion

*Outcome, Actions, Timeframe:*

# II. Health and Safety:

A. External Inspections

*1. Sub-topic***:**

*Discussion:*

*Outcome, Actions, and Timeframe:*

B\_\_ Self-Inspection (Reports, analysis of trends, recommendations)

*1. Sub-topic:*

*Discussion:* No discussion

*Outcome, Actions, Timeframe:*

C. Incident Reports (Reports, analysis of trends, recommendations)

*1. Sub-topic:*

*Discussion:*  No discussion

*Outcome, Actions, Timeframe*:

# III. Quality Improvement

A. File Audits and Case Record Review (reports and recommendations)

*1. Sub-topic:*

*Discussion* No discussion

*Outcome, Actions, Timeframe:*

B. Outcome Management (status, reports, recommendations)

*1. Sub-topic:*

*Discussion:* No discussion

*Outcome, Actions, Timeframe:*

C. Accreditation and Regulatory Requirements

*1. Sub-topic:*

*Discussion:*  No discussion

*Outcome, Actions, Timeframe:*

D. Policy and Procedure Updates and/or Review

*1. Sub-topic:*

*Discussion:* No discussion

*Outcome, Actions, Time .*

E. Participant Complaint and Grievance (specific and quarterly review of trends)

*1. Sub-topic:*

*Discussion:*  No discussion

*Outcome, Actions, Timeframe:*

F. Planning Documents (reports, status of goals and objectives, reformulation)

*1. Sub-topic:* Strategic Plan

*Discussion:*  No discussion

*Outcome, Actions, Timeframe:*

*2. Sub-topic:* Accessibility Plan

*Discussion:*  No discussion

*Outcome, Actions, Timeframe:*

*3. Sub-topic:* Cultural Competence Plan

*Discussion:*  No discussion

*Outcome, Actions, Timeframe:*

*4. Sub-topic:* Input Plan

*Discussion:*  No discussion

*Outcome, Actions, Timeframe:*

*5. Sub-topic:* Community Relations plan

*Discussion:*  No discussion

# *Outcome, Actions, Timeframe:*

# IV. Risk Management

A. Risk Management Plan (exposure to loss)

*1. Sub-topic:*

*Discussion:*  No discussion

*Outcome, Actions, Timeframe:*

B. Employee Concerns or Complaints

*1. Sub-topic:*

*Discussion:*  No discussion

*Outcome, Actions, Timeframe:*

C. Potential regulatory audits and/or investigation of operations

*1. Sub-topic:*

*Discussion:*  No discussion

*Outcome, Actions, Timeframe:*

# V. Information Technology

A. Technology Plan

*1. Sub-topic:*

*Discussion:*  No discussion

*Outcome, Actions, Timeframe:*

# I. Clinical/Program

A. Medical and Medication Issues

*1. Sub-topic:*

*Discussion:* No discussion

*Outcome, Actions, Timeframe:*

B. Counseling and Programming Issues

*1. Sub-topic:*

*Discussion:* No discussion

*Outcome, Actions, Timeframe:*

**VII. Other Business:**

*1. Sub-topic:*

Discussion:

*Outcome, Actions, Timeframe***:**

Respectfully submitted by:

|  |  |  |  |
| --- | --- | --- | --- |
| **Zeke Whitter** |  |  | **June 20, 2025** |

Name Date

**Quarterly Medication Meeting Notes: 05.22.2025 4-5 pm**

**YCW Duties**

* No staff is exempt staff from doing the medication process
* Should be notifying supervisor before or after administering medication
* Do not multi-task during medication process

**Medications**

* Must be verified by the pharmacy each time they are brought in
* When meds get to 7 pills notified guardian of low pill count
* Read the bottle and instructions – ensure pills match the description
* If ½ pills provide parent with pill cutter WE DO NOT CUT PILLS

**MRLs**

* We need 2 staff signatures when counting meds on shifts
* We still recommend medication counts occur at the start of the shift where there is an overlap of staff
* Control med counts are documented each shift daily – weekend had some misses
* Non control medication counts are documented on 7,14,21,28 of each month on the highlighted shift or when it is an SLA

**Pyxis Discrepancies**

* There are currently numerous discrepancies that the Res Supervisor are working on clearing out of the system – staff should be doing this
* Discrepancies are usually related to counts
* You should be discussing the discrepancy with a supervisor
* **Discrepancies must be addressed by the end of the day**

**Medication Counts**

* Count medication each time you are administering medication
* Do not follow other’s counts as they may be wrong and it will not only create a discrepancy in Pyxis but create issues on the MRL -🡪 results in unnecessary CCC issues
* If error is identified follow policy and protocol

**Pyxis Accounts**

* Many staff have indicated they are locked out of Pyxis
* Account passwords can be reset today after the meeting
* If you are locked out of your account you must notify the nurse or supervisor
* Issue over the weekend where no staff could remove a medication during disposition and parent had to return to IYPC - this isn’t acceptable.

**Pyxis Practice/ Annual Training**

* You need to be fluent with Pyxis
* To become fluent you must practice
* If you need a retrain or prior to the nurse leaving you weren’t trained we will be doing that before July 1st

**Nurse**

We hope to have a nurse on staff by July 1st – in the hiring process at this time

**Email**

It is your duty to read your emails – and respond when warranted. This is the most efficient way to communicate changes, needs, concerns outside of staff meetings. Pleas ensure you check your emails and spam as well

Last email sent 05.21.2025