

Fairfax-Falls Church Community Services Board
Compliance Committee Meeting Minutes
March 17, 2021

The Compliance Committee of the Fairfax-Falls Church Community Services Board met electronically due to the COVID-19 pandemic that has made it unsafe to physically assemble a quorum in one location or to have the public present. Access was made available via video and web conferencing platform to CSB Board members, CSB staff, and members of the public. The meeting notice, including participation instructions, was posted electronically and on the building in which the meeting is typically held. Additionally, attendees were offered an opportunity to register for public comment during the 30 minutes prior to the meeting being called to order.

The following Committee members were present: Bettina Lawton (Vienna), Board Chair; Jennifer Adeli (Great Falls); Sheila Coplan Jonas (Alexandria); and Garrett McGuire (Alexandria)

The following Committee members were absent:

The following staff were present: Daryl Washington, Luann Healy, Cindy Tianti, and Lyn Tomlinson

Guests: Geoff Griffith, Recovery Centers of America

1. Meeting Called to Order

Bettina Lawton, CSB Board Chair, called the meeting to order at 4:04 p.m.

2. Roll Call and Audibility

Ms. Lawton conducted a roll call with each CSB Board Member present, as identified above, to confirm that a quorum of CSB Board members was present and audible.

Ms. Lawton passed the virtual gavel to CSB Board Vice Chair Garrett McGuire to make several motions required to begin the meeting.

- o A motion was offered confirming that each member's voice was audible to each other member of the CSB Board present; this motion was seconded by Garrett McGuire and passed unanimously.

3. Preliminary Motions

CSB Board Chair Bettina Lawton made a motion that the State of Emergency caused by the COVID-19 pandemic makes it unsafe for the CSB Board to physically assemble and unsafe for the public to physically attend any such meeting, and that as such, FOIA's usual procedures, which require the physical assembly of this CSB Board and the physical presence of the public, cannot be implemented safely or practically.

A further motion was made that this Board may conduct this meeting electronically through a video and web conferencing platform, that may be accessed via Meeting ID: 98675439799 and Passcode 929233. Motions were seconded by Sheila Jonas and unanimously approved.

Ms. Lawton made a final motion that that all the matters addressed on today's agenda are statutorily required or necessary to continue operations and the

discharge of the CSB Board's lawful purposes, duties, and responsibilities. The motion was seconded by Garrett McGuire and unanimously passed.

4. Matters of the Public.

None were offered.

5. Amendments to the Meeting Agenda

The meeting agenda was provided for review. Acknowledging no recommendations were forthcoming, the meeting agenda was accepted as presented.

6. Review of Meeting Minutes

Meeting minutes of the February 19, 2020 Compliance Committee were provided for review and revision. As no recommendations were forthcoming, Sheila Jonas made a motion to approve the minutes as presented, which was seconded and approved with one abstention from Garrett McGuire.

7. Follow up items from the prior Compliance Committee Meeting

Daryl Washington, acknowledging that Luann Healy, Director of Office of Compliance and Risk Management) would provide updates to compliance trends and activities, including:

- In April 2020 DBHDS (Department of Behavioral Health and Developmental Services) requested that the CSB track positive COVID-19 tests. Results included:
 - 361 positive tests with 15 related deaths reported to date.
 - Individuals receiving DD (Developmental Disability) services have been predominantly impacted.
 - The average age is 42.5 years of age.
 - Clarification to Level I, II, and III incident definitions was provided:
 - Level I: *Level I serious incident" means a serious incident that occurs or originates during the provision of a service or on the premises of the provider and does not meet the definition of a Level II or Level III serious incident. Level I serious incidents do not result in significant harm to individuals but may include events that result in minor injuries that do not require medical attention or events that have the potential to cause serious injury, even when no injury occurs."*
 - Level II: *"Level II serious incident" means a serious incident that occurs or originates during the provision of a service or on the premises of the provider that results in a significant harm or threat to the health and safety of an individual that does not meet the definition of a Level III serious incident. "Level II serious incident" includes a significant harm or threat to the health or safety of others caused by an individual.*
 - Level III: *"Level III serious incident" means a serious incident whether or not the incident occurs while in the provision of a service or on the provider's premises and results in:*
 - *Any death of an individual;*
 - *A sexual assault of an individual;*
 - *A suicide attempt by an individual admitted for services, other than licensed emergency services, that results in a hospital admission.*

Note: Level I, II, and III definitions were added to further clarify definitions provided at this meeting.

8. Updates

ComplyTrack

- Board attention was directed to the compliance program update charts provided in the meeting materials. Highlights included:
 - Audit – a reminder was offered that tracked audits can be internal or external. Tracking definitions are *Green*-attention, no issues, *Yellow*-careful attention, potential issues, and *Red*-focused attention, immediate resolution. A further reminder was offered that new programs are monitored for 12 months. The tracking results will start as red and decrease in intensity as the programs develop and require less monitoring.
 - CAP (Corrective Action Plan) – primarily related to ongoing and new requirements related to the Department of Justice Settlement Agreement (DOJSA). DBHDS has established an incident management unit that is involved in reviews including human rights complaints, deaths, etc. that has increased the number of chart reviews and CAPs issued.
 - Education – the mandatory staff training in DMAS (Department of Medical Assistance) rules and regulations has been added to the online training catalog relieving OCRM (Office of Compliance and Risk Management) staff of the need to provide live training.
- *Electronic Healthcare Record Update*
 - Daryl Washington provided a brief update to changes to the Electronic Healthcare Record platform. It was noted that Credible, the current vendor has experienced some minor issues with limited downtime.
- *CSB Serious Incident Report – February 2021*
 - Luann Healy provided the Serious Incident Report for the last month.

Bettina Lawton inquired whether there any matters that required discussion in closed session. As no one raised any matters or need for a closed session and there being no further business to come before the Committee, the meeting was adjourned at 4:40 p.m.

Actions Taken –

- Minutes of the February 19, 2020 Compliance Committee meeting were reviewed and approved.

April 21, 2021

Date of Approval



Clerk to the CSB Board