



---

## FAIRFAX-FALLS CHURCH COMMUNITY SERVICES BOARD COMPLIANCE COMMITTEE MEETING

Garrett McGuire, Chair

**Wednesday, April 20, 2022, 4:00 p.m.**

Will be held electronically due to the COVID-19 pandemic

**Dial by your location to access live audio of the meeting:**

+1 301 715 8592 US (Washington DC)      +1 669 900 9128 US (San Jose)      +1 646 558 8656 US (New York)  
+1 253 215 8782 US (Tacoma)      +1 312 626 6799 US (Chicago)      +1 346 248 7799 US (Houston)

Meeting ID: [870 3259 3002](#) • Passcode: 349081

### **MEETING AGENDA**

- |  |                 |
|--|-----------------|
| 1. Meeting Called to Order                         | Garrett McGuire |
| 2. Roll Call, Audibility and Preliminary Motions   | Garrett McGuire |
| 3. Matters of the Public                           | Garrett McGuire |
| 4. Amendments to the Meeting Agenda                | Garrett McGuire |
| 5. Approval of the March 16, 2022, Meeting Minutes | Garrett McGuire |
| 6. Follow up items from the February Meeting       | Joan Rodgers    |
| 7. Updates   | Joan Rodgers    |
| A. ComplyTrack Reports                             |                 |
| B. CSB Serious Incident (Level III) Report         |                 |
| 8. Open Discussion                                 | Garrett McGuire |

*Closed Session: Discussion of a personnel matter as permitted by Virginia Code Section 2.2-3711(A)(1) and consultation with legal counsel employed by a public body regarding specific legal matters requiring the provision of legal advice by such counsel, as permitted by Virginia Code Section 2.2-3711(A)(8).*

- |                |                 |
|----------------|-----------------|
| 9. Adjournment | Garrett McGuire |
|----------------|-----------------|

Meeting materials are posted online at [www.fairfaxcounty.com/municipal/community-services-board/board/archives](http://www.fairfaxcounty.com/municipal/community-services-board/board/archives) or may be requested by contacting Joseline Cadima at 703-324-7827 or at [joseline.cadima@fairfaxcounty.gov](mailto:joseline.cadima@fairfaxcounty.gov)

**FAIRFAX FALLS-CHURCH COMMUNITY SERVICES BOARD  
COMPLIANCE COMMITTEE VIRTUAL MEETING MINUTES  
MARCH 16, 2022**

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.

**1. Meeting Called to Order**

Committee Chair Garrett McGuire called the meeting to order at 4:00 p.m.

**2. Roll Call, Audibility, and Preliminary Motions**

**PRESENT:**      **BOARD MEMBERS:** GARRETT MCGUIRE (ALEXANDRIA, VA), COMMITTEE CHAIR; JENNIFER ADELI (GREAT FALLS, VA); CAPTAIN DEREK DEGEARE (ASHBURN, VA); BETTINA LAWTON (VIENNA, VA); ANNE WHIPPLE (GREAT FALLS, VA)

**ABSENT:**      **BOARD MEMBERS:** DAN SHERRANGE

**Also present:** Executive Director Daryl Washington, Deputy Director of Clinical Operations Lyn Tomlinson, Deputy Director of Administrative Operations Daniel Herr, County Attorney Cynthia Tianti, Director of Quality Improvement Joan Rodgers, and Board Clerk Joseline Cadima.

Committee Chair Garrett McGuire conducted roll call, as identified above, to confirm that a quorum of Board members was present and audible. Committee Chair Garrett McGuire passed the virtual gavel to Committee Member Captain Derek DeGeare to make several motions required to begin the meeting. 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 Committee Member Anne Whipple and passed unanimously.

**Preliminary Motions**

Committee Chair Garrett McGuire 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: 852 3980 5304 and Passcode: 655026. Motions were seconded by Committee Member Anne Whipple and unanimously approved. Committee Chair Garrett McGuire made a final motion

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 Committee Anne Whipple and unanimously passed.

3. **Matters of the Public.**

None were presented.

4. **Amendments to the Meeting Agenda**

The meeting agenda was provided for review and no amendments were made.

**COMMITTEE CONSENSUS TO APPROVE AGENDA ITEM NO. 4**

**AYES: BOARD MEMBERS:** GARRETT MCGUIRE (ALEXANDRIA, VA), COMMITTEE CHAIR;  
JENNIFER ADELI (GREAT FALLS, VA); CAPTAIN DEREK DEGEARE (ASHBURN, VA);  
BETTINA LAWTON (VIENNA, VA); ANNE WHIPPLE (GREAT FALLS, VA)

**NOES: BOARD MEMBERS:** NONE

**ABSTAIN: BOARD MEMBERS:** NONE

**ABSENT: BOARD MEMBERS:** DAN SHERRANGE

5. **Approval of Minutes**

Committee minutes for the February 16, 2022, Compliance Committee Meetings were provided for review and revision.

**MOVED BY COMMITTEE MEMBER BETINNA LAWTON, SECONDED BY BOARD MEMBER CAPTAIN DEREK DEGEARE TO APPROVE THE AGENDA ITEM NO. 5.**

**AYES: BOARD MEMBERS:** GARRETT MCGUIRE (ALEXANDRIA, VA), COMMITTEE CHAIR;  
JENNIFER ADELI (GREAT FALLS, VA); CAPTAIN DEREK DEGEARE (ASHBURN, VA);  
BETTINA LAWTON (VIENNA, VA); ANNE WHIPPLE (GREAT FALLS, VA)

**NOES: BOARD MEMBERS:** NONE

**ABSTAIN: BOARD MEMBERS:** NONE

**ABSENT: BOARD MEMBERS:** DAN SHERRANGE

6. **Follow up items**

**Director of Quality Improvement Joan Rodgers** mentioned a delay in finalizing the personalized employee training report, additional time is needed to find a solution for the integration of the learning management system and the personnel system. As it’s been previously noted, the Department of Information Technology cannot merge the two systems due to the lack of similar staff identification numbers. Reported on the ongoing audit by the Health Services Advisory Group (HSAG) as part of the Department of Justice settlement with Developmental Disabilities which is

extended to 2023 where one year of compliance with standards has to be demonstrated. The review consisted of 135 support coordination charts and 1 chart from developmental disabilities residential from the time period of January 1, 2021, through June 30, 2021. The audit concluded at the end of February 2022, but no feedback has been provided. Additionally, the Department of Justice conducted an audit using an independent reviewer, the audit focused on the Quality and Implementation Risk Management Plan throughout the organization with emphasis on support coordination and developmental disabilities services. No feedback has been provided. Lastly, the Department of Behavioral Health and Developmental Services conducted an unannounced audit by a licensed specialist that reviewed the risk management plan pertinent to support coordination. Positive feedback was received regarding support coordination charts, awaiting further feedback on the risk management plan.

**Committee Member Bettina Lawton** requested the inclusion of external audit information pertinent to the Department of Justice and Health Services Advisory Group in future Audit Reports.

## 7. Updates

### A. **ComplyTrack Reports**

- **Director of Quality Improvement Joan Rodgers** provided the Audit Action Plan Report, Correct Action Plan Report, and the Education Reports.

### B. **CSB Serious Incident (Level III) Report**

- **Director of Quality Improvement Joan Rodgers** provided the Serious Incident Report (SIR) Report for February 2022.

### C. **Electronic Health Record Update**

- **Executive Director Daryl Washington** requested the removal of this item from the Compliance Committee Agenda, noting it will be covered during the Executive Director Report in the Executive Committee and Board Meetings. The Chair agreed with this request.

## 8. Open Discussion

None were raised.

## 9. Adjournment

Committee Chair Garrett McGuire made the motion to adjourn the meeting at 4:32 p.m.

**AYES: BOARD MEMBERS:** GARRETT MCGUIRE (ALEXANDRIA, VA), COMMITTEE CHAIR;  
JENNIFER ADELI (GREAT FALLS, VA); CAPTAIN DEREK DEGEARE (ASHBURN, VA);  
BETTINA LAWTON (VIENNA, VA); ANNE WHIPPLE (GREAT FALLS, VA)

**NOES: BOARD MEMBERS:** NONE

**ABSTAIN: BOARD MEMBERS:** NONE

**ABSENT: BOARD MEMBERS:** DAN SHERRANGE

---

Date Approved

---

Clerk to the Board

DRAFT

## Audit Report CSB Board For April 2022

Item Custom Id	Audit Start Date	Entity	Audit Scope	Audit Type	Sample Size	CSB Board Reporting	Audit Action Plan	Additional Information
2242	7/1/21	Merrifield	Targeted Review	Record	24	Standard business risk	Monitoring - 12 months	The OBOT Program is being reviewed to ensure that it meets billable standards according to regulatory requirements
2255	7/1/21	Merrifield	Targeted Review	Record	43	Standard business risk	Monitoring - 12 months	The Turning Point Program is being reviewed to ensure they meet regulatory requirements
2256	7/1/21	Chantilly	New Program	Record	2	Standard business risk	Monitoring - 12 months	The Crossroads Program converted to a new license and is being reviewed as a new program due to changes in as part of the ASAM criteria being instated
2257	7/1/21	Chantilly	New Program	Record	7	Standard business risk	Monitoring - 12 months	The Detox Program converted to a new license and is being reviewed as a new program due to changes in as part of the ASAM criteria being instated
2258	7/1/21	Pennino	Targeted Review	Record		Standard business risk	Monitoring - 12 months	Continued reviews of the ACRS Supervised Living Program for FY 2022
2260	7/1/21	Chantilly	New Program	Record	2	Standard business risk	Monitoring - 12 months	The A New Beginning Program converted to a new license and is being reviewed as a new program due to changes in as part of the ASAM criteria being instated

2392	7/1/21	Merrifield	Monitoring	Record	4	Standard business risk	Monitoring - 12 months	Cornerstones review for ongoing chart compliance maintenance audits
3073	Jan 25, 2022	DBHDS	DD Support Coordination Annual Inspection	Record and Physical Environment	8	Standard business risk	One time Review	Review for regulatory compliance standards
2862	Feb 11, 2022	CSB agency wide	HIPAA Security	HIPAA Security Reports	16	Standard business risk	Monitoring - 3 months	Review of same name/same address

AUDIT LEGEND	
Item CustomID	Identification number automatically assigned by ComplyTracker
Audit Start Date	Date the audit was initiated
Entity	Location where the audited service was provided
Audit Scope	The agency conducting the audit and the scope of the audit
Audit Type	Description of audit, e.g., record review only, onsite audit
Sample Size	Number of charts reviewed
CSB Board Reporting	Level of business risk associated with audit findings
Action Plan	Description of actions taken in response to the audit

## CSB Board CAP Report For April 2022

Item Custom Id	Start Date	Entity	Reviewing Agency	Corrective Action (Narrative)	Date CAP Closed	Additional Information
2830	Nov 16, 2021	Chantilly	DBHDS	Corrective Action Plan submitted	waiting for DBHDS review	Serious Incident Reporting
003073	Jan 25, 2022	DD Case Management Support Coordination	DBHDS	Corrective Action Plan submitted 1. Timely completion of a quarterly serious incident review 2. Timely completion of an annual systemic risk assessment 3. Timely completion of a compliant quality improvement plan 4. Compliance with intake procedures for new clients		DD Support Coordination Annual Inspection

<b>CAP LEGEND</b>	
Item CustomId	Identification number automatically assigned by Comply Tracker
Audit No.	References the audit number in the Audit Report
Start Date	Date the CSB was notified of the need for a CAP
Entity	Location where the audited service was provided
Reviewing Agency	Agency requesting and reviewing the CAP
CAP Narrative	Description of the reason for the CAP
Date CAP Closed	Date the reviewing agency approved the CAP



### CSB Board Education Report For April 2022

Item CustomId	Start Date	Training Name	Duration	Entity	Number of Attendees	Method of Delivery	Training Type
001776	Mar 8, 2021	DBHDS Licensure Education	0.5	Pennino	38	Webinar	Regulatory
001845	Apr 7, 2021	SIR Training	2	Northwest Center	15	Webinar	Regulatory
001918	May 5, 2021	SIR Education	1	Pennino	5	Webinar	Educational
002028	Jun 9, 2021	Human Rights Training Refresher	2	Chantilly	22	Live On-site	Educational
002029	Jun 9, 2021	Human Rights Training Refresher	2	Chantilly	20	Live On-site	Educational
002167	Aug 5, 2021	Root Cause Analysis	0.5	Merrifield	3	Webinar	Educational
002374	Oct 6, 2021	SIR Training	1.5	Chantilly	27	Webinar	Educational
002461	Oct 27, 2021	Root Cause Analysis	0.5	Chantilly	3	Webinar	Educational
002462	Oct 28, 2021	Root Cause Analysis	0.75	Chantilly	6	Webinar	Educational
002475	Nov 4, 2021	Root Cause Analysis	0.5	Chantilly	5	Webinar	Educational
002476	Nov 5, 2021	Root Cause Analysis	0.5	Chantilly	6	Webinar	Educational
002954	Feb 17,2022	SIR Training	1	South County Center	1	Webinar	Educational

EDUCATION REPORT LEGEND	
Item Custom ID	Number automatically assigned by ComplyTracker
Start Date	Date the education was provided
Training Name	Type of Training Provided
Duration	Length of time for the educational activity
Entity	Site receiving the education
Number of Attendees	Number of staff who participated in the educational activity
Method of Delivery	How the training was provided
Training Type	Whether the training was to address a regulatory matter or for professional development