



FAIRFAX-FALLS CHURCH COMMUNITY SERVICES BOARD COMPLIANCE COMMITTEE MEETING

Garrett McGuire, Chair

Wednesday, February 16, 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:

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Meeting ID: [813 1186 1223](#) • Passcode: 792279

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 December 8, 2021, & January 19, 2022, Meeting Minutes | Garrett McGuire |
| 6. Follow up items from the January Meeting | Joan Rodgers |
| 7. Updates | Joan Rodgers |
| A. ComplyTrack Reports | |
| B. CSB Serious Incident (Level III) Report | |
| C. Electronic Health Record Update | |
| 8. Open Discussion | |
| <i>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).</i> | |
| 9. Adjournment | Garrett McGuire |

Meeting materials are posted online at www.fairfaxcounty.com/municipal-services-board/board/archives or may be requested by contacting Joseline Cadima at 703-324-7827 or at joseline.cadima@fairfaxcounty.gov

**FAIRFAX FALLS-CHURCH COMMUNITY SERVICES BOARD
COMPLIANCE COMMITTEE VIRTUAL MEETING MINUTES
DECEMBER 8, 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.

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 (HERNDON, VA); CAPTAIN DEREK DEGEARE (LOUDON COUNTY, VA); BETTINA LAWTON (AUSTIN, TX); DAN SHERRANGE (CHANTILLY, VA); ANNE WHIPPLE (GREAT FALLS, VA)

ABSENT: **BOARD MEMBERS:** NONE

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 Dan Sherrange 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 Board Member Captain Derek DeGeare 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: 828 4113 4961 and Passcode: 130275. Motions were seconded by Committee Member Captain Derek DeGeare 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 Member Captain Derek DeGeare 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 (HERNDON, VA); CAPTAIN DEREK DEGEARE (LOUDON COUNTY, VA); BETTINA LAWTON (AUSTIN, TX); DAN SHERRANGE (CHANTILLY, VA); ANNE WHIPPLE (GREAT FALLS, VA)

NOES: BOARD MEMBERS: NONE

ABSTAIN: BOARD MEMBERS: NONE

ABSENT: BOARD MEMBERS: NONE

5. **Approval of Minutes**

Meeting minutes of the November 10, 2021, Compliance Committee were provided for review.

MOVED BY COMMITTEE MEMBER DAN SHERRANGE, SECONDED BY BOARD MEMBER CAPTAIN DEREK DEGEARE TO APPROVE AGENDA ITEM NO. 5.

AYES: BOARD MEMBERS: GARRETT MCGUIRE (ALEXANDRIA, VA), COMMITTEE CHAIR; JENNIFER ADELI (HERNDON, VA); CAPTAIN DEREK DEGEARE (LOUDON COUNTY, VA); DAN SHERRANGE (CHANTILLY, VA); ANNE WHIPPLE (GREAT FALLS, VA)

NOES: BOARD MEMBERS: NONE

ABSTAIN: BOARD MEMBERS: BETTINA LAWTON (AUSTIN, TX) *

ABSENT: BOARD MEMBERS: NONE

*Board Member Bettina Lawton abstained from the vote, citing her absence during the November 10, 2021, Compliance Committee Meeting.

6. **Follow up items**

Deputy Director of Administrative Operations Daniel Herr mentioned a collaboration with the Department of Human Resources to write a specific program that would help collect data in regard to the number of trainings that staff are required to take in a year, completion of trainings, and

non-compliance of trainings. This report is a top priority for the Executive Leadership Team and will continue to provide an update on its progress.

7. Updates

Deputy Director of Administrative Operations Daniel Herr introduced Joan Rodgers, Director of Quality Improvement to the Committee and stated that she will be the CSB representative to this Committee starting with the January 19, 2022, meeting.

Director of Quality Improvement Joan Rodgers thanked Daniel Herr for the introduction and shared her enthusiasm for being a part of the CSB as the Director of Quality Improvement.

Deputy Director of Administrative Operations Daniel Herr advised the Committee that the Department of Behavioral Health and Developmental Services will begin a review of quality services for individuals in Developmental Disabilities beginning in mid-January of 2022. The review will encompass 135 charts from Developmental Disabilities Support Coordination and 1 from Developmental Disability Residential from the time period of January 1, 2021, through June 30, 2021.

A. **ComplyTrack Reports**

- Deputy Director of Administrative Operations Daniel Herr provided the Audit Action Plan Report, Corrective Action Plan Report, and the Education Reports.

B. **Electronic Health Record Update**

- Executive Director Daryl Washington reported on the most recent meeting with Welligent, Continuum Cloud (recently acquired Welligent), the Department of Information and Technology, and CSB staff, in which the main discussion point was the importance of meeting certain deliverables and what the expectations were moving forward. The Executive Leadership Team emphasized that if deliverables are not met in a timely manner, then payments to them will not be made. Weekly meetings will be held in an effort to resolve this matter, the Compliance Committee will receive an update during the January 19, 2022, meeting.

C. **CSB Serious Incident (Level III) Report**

- Director of Administrative Operations Daniel Herr provided the Serious Incident Report (SIR) Report for November 2021.

D. **New Crisis Services Regulations**

- Executive Director Daryl Washington stated that he will provide this update during the Executive Committee Meeting.

8. Open Discussion

Committee Chair Garrett McGuire requested an update on guidance from the Department of Behavioral Health and Developmental Services in regard to the 50 families who are not comfortable meeting face-to-face but would prefer receiving services through a virtual option.

Also inquired if there is progress being made on case reviews for Developmental Disabilities Priorities I, II, and III.

Executive Director Daryl Washington responded that the CSB has not received any written guidance on how to move forward with face-to-face services but have been told a solution is being pursued. And responded that progress is being made on reviewing cases for Priorities I, II, and III with the support of staff from the Department of Behavioral Health and Developmental Disability.

9. Closed Session

Committee Chair Garrett McGuire inquired whether there any matters that required discussion in closed session, none were raised.

10. Adjournment

Committee Chair Garrett McGuire made the motion to adjourn the meeting at 4:30 p.m.

AYES: BOARD MEMBERS: GARRETT MCGUIRE (ALEXANDRIA, VA), COMMITTEE CHAIR; JENNIFER ADELI (HERNDON, VA); CAPTAIN DEREK DEGEARE (LOUDON COUNTY, VA); BETTINA LAWTON (AUSTIN, TX); DAN SHERRANGE (CHANTILLY, VA); ANNE WHIPPLE (GREAT FALLS, VA)

NOES: BOARD MEMBERS: NONE

ABSENT: BOARD MEMBERS: NONE

Date Approved

Clerk to the Board

**FAIRFAX FALLS-CHURCH COMMUNITY SERVICES BOARD
COMPLIANCE COMMITTEE VIRTUAL MEETING MINUTES
JANUARY 19, 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

Acting Committee Chair Dan Sherrange called the meeting to order at 4:00 p.m.

2. Roll Call, Audibility, and Preliminary Motions

PRESENT: **BOARD MEMBERS:** DAN SHERRANGE (CHANTILLY, VA), ACTING COMMITTEE CHAIR; JENNIFER ADELI (GREAT FALLS, VA); CAPTAIN DEREK DEGEARE (LOUDON COUNTY, VA); BETTINA LAWTON (VIENNA, VA); ANNE WHIPPLE (GREAT FALLS, VA)

ABSENT: **BOARD MEMBERS:** GARRETT MCGUIRE

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, Assistant Deputy Director Barbara Wadley-Young and Board Clerk Joseline Cadima.

Acting Committee Chair Dan Sherrange conducted roll call, as identified above, to confirm that a quorum of Board members was present and audible. Acting Committee Chair Dan Sherrange 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 Bettina Lawton and passed unanimously.

Preliminary Motions

Acting Committee Chair Dan Sherrange 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: 865 1746 3555 and Passcode: 203194. Motions were seconded by Committee Member

Bettina Lawton and unanimously approved. Acting Committee Chair Dan Sherrange 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 Member Bettina Lawton and unanimously passed.

3. **Matters of the Public.**

None were presented.

4. **Amendments to the Meeting Agenda**

Committee Members decided to remove the Approval of the December 8, 2021, Meeting Minutes and place it on the upcoming February 16, 2022, Compliance Committee Meeting Agenda and requested the Electronic Health Record Update be provided at the Executive Committee Meeting.

MOVED BY COMMITTEE MEMBER CAPTAIN DEREK DEGEARE, SECONDED BY COMMITTEE MEMBER BETINNA LAWTON TO APPROVE AGENDA ITEM NO. 4.

AYES: BOARD MEMBERS: DAN SHERRANGE (CHANTILLY, VA), ACTING COMMITTEE CHAIR; JENNIFER ADELI (GREAT FALLS, VA); CAPTAIN DEREK DEGEARE (LOUDON COUNTY, VA); BETTINA LAWTON (VIENNA, VA); ANNE WHIPPLE (GREAT FALLS, VA)

NOES: BOARD MEMBERS: NONE

ABSTAIN: BOARD MEMBERS: NONE

ABSENT: BOARD MEMBERS: GARRETT MCGUIRE

5. **Per Agenda No. 4, Meeting Minutes for the December 8, 2021, Compliance Committee Meeting were removed from this meeting agenda.**

6. **Follow up items**

Director of Quality Improvement Joan Rodger provided an update on developing a specialized report with the help of the County’s Management System Administrator to monitor CSB employee compliance on 14 courses (2 upon orientation, 2 courses that are bi-annual, and 8 that are annually) that are required by the Department of Behavioral Health and Developmental Services and Licensed Programs. There will be a short testing phase to ensure that the report gathers the information needed, and an update will be provided in the February meeting. There is a current Health Services Advisory Group audit for individuals with a Developmental Disability as part of the settlement with Department of Justice that is wrapping up. The review is encompassing 135 charts from Developmental Disabilities Support Coordination and 1 from Developmental Disability Residential from the time period of January 1, 2021, through June 30, 2021.

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 December 2021.

C. Staff Vacancy Impact

- **Executive Director Daryl Washington** noted a billing retraction of around \$30,000.00 for services should not have been billed. This led to two staff members being let go by the CSB.
- **Director of Quality Improvement Joan Rodgers** commented on assigning Office of Compliance Risk and Management (OCRM) staff to service areas, there will be a deeper connection with programs on the field and will allow OCRM staff and clinical staff to have that consistent support. OCRM will also increase its randomized sample audits to 20 a month, continue to support targeted audits for billing services, and will make themselves available to provide supervisors to audit those who are identified as having poor performance issues.
- **Assistant Deputy Director Barbara Wadley-Young** reported on how workload is being spread to different staff members to provide assistance on different levels due to the vacancy impact.

D. Electronic Health Record Update

- **Per the Amended Agenda, this item was moved to the Executive Committee Meeting on January 19, 2022, at 4:30 p.m.**

E. Crisis Services Regulations

- **Executive Director Daryl Washington** requested to cover this item on the Executive Committee Meeting.

8. Open Discussion

Committee Member Bettina Lawton asked if there are any new reasons for the most recent resignations.

Deputy Director of Administrative Operations Daniel Herr responded that there are no new reasons, the main reasons continue to be salary, compensation and workload.

Closed Session

Acting Committee Chair Dan Sherrange inquired whether there any matters that required discussion in closed session, none were raised.

9. Adjournment

Committee Member Captain Derek DeGeare made the motion to adjourn the meeting at 4:37 p.m.

AYES: BOARD MEMBERS: DAN SHERRANGE (CHANTILLY, VA), ACTING COMMITTEE CHAIR;
JENNIFER ADELI (GREAT FALLS, VA); CAPTAIN DEREK DEGEARE (LOUDON COUNTY,
VA); BETTINA LAWTON (VIENNA, VA); ANNE WHIPPLE (GREAT FALLS, VA)

NOES: BOARD MEMBERS: NONE

ABSTAIN: BOARD MEMBERS: NONE

ABSENT: BOARD MEMBERS: GARRETT MCGUIRE

Date Approved

Clerk to the Board

DRAFT

Audit Report CSB Board For February 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
002255	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
002256	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
002257	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
002258	7/1/21	Pennino	Targeted Review	Record		Standard business risk	Monitoring - 12 months	Continued reviews of the ACRS Supervised Living Program for FY 2022
002259	7/1/21	Chantilly	New Program	Record		Standard business risk	Monitoring - 12 months	The New Generations Program converted to a new license by DBHDS and is reviewed as a new program due to changes in as part of the ASAM criteria being instated
002260	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

002261	7/1/21	Chantilly	New Program	Record		Standard business risk	Monitoring - 12 months	The Intensive Outpatient 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
002392	7/1/21	Merrifield	Monitoring	Record	4	Standard business risk	Monitoring - 12 months	Cornerstones review for ongoing chart compliance maintenance audits

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 February 2022

Item Custom Id	Start Date	Entity	Reviewing Agency	Corrective Action (Narrative)	Date CAP Closed	Additional Information
002436	7/2/21	Pennino	DBHDS	Corrective Action Plan has been submitted to review and acceptance by DBHDS. This was a direct result of a review by the Office of Human Rights (OHR).		Assessment and referral for medical services
-2200	8/4/21	Merrifield	DBHDS	The Corrective Action Plan was submitted to DBHDS and was partially approved. The CAP was re-submitted to the Program Director for review and completion.. This was a direct result of the 2021 Triennial Review by the Office of Licensing (OL). Please reference Audit #002186	Resubmitted CAP and awaiting review	Client engagement in services
002553	11/8/21	Northwest Center	MCO	The Corrective Action Plan has been submitted to Anthem Health Keepers for review and approval. This was a direct result of a review by Anthem Health Keepers (MCO).		Serious Incident Reporting
002830	Nov 16, 2021	Chantilly	DBHDS	Notification of Corrective Action Plan sent to Program, pending program response.		Serious Incident Reporting
002670	12/2/21	Pennino	DBHDS	Corrective Action Plan has been submitted to DBHDS, through the CONNECT Portal, for review and approval. This was a result of an audit by the Office of Licensing (OL).		Serious Incident Reporting
002826	Dec 21, 2021	Pennino	DBHDS	The CAP has been submitted and waiting for approval from DBHDS		Serious Incident Reporting

2827	Jan 27, 2022	Chantilly	DBHDS	Program has been notified of the CAP, pending response.		Serious Incident Reporting
002828	Feb 1, 2022	Northwest Center Reston	DBHDS	Notified the Program of the Corrective Action Plan, pending response.		Serious Incident Reporting
002829	Feb 2, 2022	Chantilly	DBHDS	Notification of Corrective Action Plan sent to Program, pending program response.		Serious Incident Reporting

CAP LEGEND	
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	Date the reviewing agency approved the CAP

CSB Board Education Report For February 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

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