

# Fairfax-Falls Church CSB Compliance Committee

Merrifield Center, 8221 Willow Oaks Corporate Drive, Fairfax

Room 3-314, West

September 18, 2019, 4:00 p.m.

## Meeting Agenda

Agenda Item	Facilitator
Meeting Called to Order	Bettina Lawton
Approval of August 21, 2019 Committee Meeting Notes	Bettina Lawton
Follow up items from August meeting	Daryl Washington
Updates: <ul style="list-style-type: none"><li>• ComplyTrack<ul style="list-style-type: none"><li>○ Reports</li></ul></li><li>• CSB Serious Incident (Level III) Report Update</li></ul>	Bill Hanna Luann Healy
CSB Board Policy Review Update <ul style="list-style-type: none"><li>• #2300 – Corporate Compliance Review</li><li>• #2600 – Risk Management</li></ul>	CSB Board members and staff
<b><i>Closed Session: Consultation with legal counsel employed or retained 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></b>	
Next Steps/Other Issues	Bettina Lawton
Adjourn	

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**CSB Board Compliance Committee Meeting**  
**Incident Definitions**  
**September 18, 2019**

*Serious incident means any event or circumstance that causes or could cause harm to the health, safety, or well-being of an individual. The term serious incident includes death and serious injury. \**

**Level III serious incident** is a serious incident regardless if 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 serious injury of an individual that results in or likely will result in permanent physical or psychological impairment; or
- A suicide attempt by an individual admitted for services that results in a hospital admission.

**Level II serious incident** is 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. The incident does not meet the definition of a Level III serious incident and includes a significant harm or threat to the health or safety of others caused by an individual. Examples include:

- A serious injury;
- An individual who is missing;
- An emergency room or urgent care facility visit when not used in lieu of a primary care physician visit;
- An unplanned psychiatric or unplanned medical hospital admission;
- Choking incidents that require direct physical intervention by another person;
- Ingestion of any hazardous material; or
- A diagnosis of A decubitus ulcer or an increase in severity of level of previously diagnosed decubitus ulcer; a bowel obstruction; or aspiration pneumonia.

**Level I serious incident** is 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. The incident does 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.

*\*DBHDS Office of Licensing Guidance for Serious Incident Reporting: 12VAC35-105-20. Definitions.*  
<http://dbhds.virginia.gov/assets/QMD/licensing/draft.dbhds.seriousincidentguidance.2018.08.06.pdf>

Fairfax-Falls Church Community Services Board  
Compliance Committee Meeting Minutes  
August 21, 2019

The Compliance Committee of the Fairfax-Falls Church Community Services Board met in regular session at the Merrifield Center, 8221 Willow Oaks Corporate Drive, Fairfax, VA.

The following Committee members were present: Bettina Lawton, Board Chair; Jennifer Adeli; Ken Garnes; Sheila Coplan Jonas; Suzette Kern; and Diane Tuininga

The following Committee members were absent:

The following staff were present: Bill Hanna, Luann Healy, Cynthia Tianti, and Lyn Tomlinson

1. Meeting Called to Order

The meeting was called to order at 4:03 p.m.

2. Review of Meeting Minutes

Meeting minutes of the July 17, 2019 Compliance Committee were provided for review and revision. As no recommendations were forthcoming, Suzette Kern made a motion to approve the minutes as presented, which was seconded and approved.

3. Follow up items from July 2019 Compliance Committee Meeting

Bill Hanna noted that the follow up from July was covered by the following agenda item.

4. Updates

*ComplyTrack*

Bill Hanna directed attention to the ComplyTrack Project Schedules included in the meeting materials and provided a recap of the accomplishments to date. As illustrated, the projected date for initial CSB Board reports is October 2019. It was clarified that the reports will provide data from the first quarter of FY2020. For the proposed initial CSB Board reports, three deliverables were selected based on areas of interest expressed at previous Compliance Committee meetings. The templates include:

- *Corrective Action Plan (CAP) Templates* – including CAPs issued by DBHDS (Department of Behavioral Health and Developmental Services) following a licensing visit or a CSB implemented CAP following an internal audit.
- *Audit Template* – includes reports of audits conducted internally by Office of Compliance & Risk Management (OCRM) staff, including the results of each.
- *Education Documentation* – includes the education efforts by OCRM staff in support of the CAPS and Audits.

Confirming that Board members will have an opportunity to provide input in the configuration of the CSB Board reports, sample reports will be provided two weeks prior to the September 2019 committee meeting for feedback and refinement of the data points.

5. CSB Serious Incident (Level III) Report Update

Luann Healy provided the update to serious incidents for July.

6. CSB Board Policy Review

Cynthia Tianti distributed revised copies of CSB Board policies #2300 Corporate Compliance Review and #2600 Risk Management, requesting guidance on further steps. Following robust discussion and recognizing that further discussion is needed, it was decided to table the approval until the September 2019 Compliance Committee meeting. Ms. Tianti will propose further revisions to CSB Board policy #2300. Lyn Tomlinson will follow up with the executive leadership team in regard to risk management.

7. Next Steps/Other Issues

Ken Garnes, distributing copies of page 6 of the FY2019 Year End Report, proposed some revisions to include:

- Revising the term ‘Compliance Department’ to ‘Compliance Program’.
- Removing the statement regarding the DOJ (Department of Justice) guidance on the expectation for a compliance department.

Both revisions were accepted by the Committee and will be applied to the version submitted to the full CSB Board at the August meeting for approval.

Suzette Kern inquired whether there was anything that needed to be discussed in closed session. As no one raised any issues or need for a closed session and there being no further business to come before the Committee, the meeting was adjourned at 5:07 p.m.

Actions Taken –

- Minutes of the July 17, 2019 Compliance Committee meeting were reviewed and approved.
- *Sample CSB Board reports from ComplyTrack will be forwarded to the Committee at least one week prior to the September 11, 2019 Compliance Committee in preparation of discussion at the meeting.*
- *Cynthia Tianti will propose further revisions to CSB Board policy #2300.*
- *Lyn Tomlinson will follow up with the executive leadership team in regard to risk management.*

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Date Approved

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Staff to the Board