



FAIRFAX-FALLS CHURCH COMMUNITY SERVICES BOARD COMPLIANCE COMMITTEE MEETING

Garrett McGuire, Chair

**Sharon Bulova Center for Community Health
8221 Willow Oaks Corporate Drive, Level 3, Room 3-314, West
Fairfax, VA 22031**

Wednesday, April 19, 2023, 4:00 PM

This meeting can also be attended via electronic access through Zoom

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Meeting ID: [819 3278 3324](https://zoom.us/j/81932783324) • Passcode: 555163

MEETING AGENDA

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|--|------------------------|
| 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 14, 2022, Meeting Minutes | Garrett McGuire |
| 6. Follow up items from the April Meeting | Joan Rodgers |
| 7. Updates | Joan Rodgers |
| A. ComplyTrack Reports | |
| B. CSB Serious Incident (Level III) Report | |
| C. CSB Board Annual Training Data | |
| 8. Open Discussion | Garrett McGuire |
| 9. Adjournment | |

Meeting materials are posted online at [Community Services Board | Community Services Board \(fairfaxcounty.gov\)](https://www.fairfaxcounty.gov/csrb) or may be requested by contacting Sameera Awan at 703-324-7827 or at Sameera.Awan@fairfaxcounty.gov

**FAIRFAX FALLS-CHURCH COMMUNITY SERVICES BOARD
COMPLIANCE COMMITTEE VIRTUAL MEETING MINUTES
DECEMBER 14, 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 PM.

2. Roll Call, Audibility, and Preliminary Motions

PRESENT: **BOARD MEMBERS:** COMMITTEE CHAIR GARRETT MCGUIRE (ALEXANDRIA, VA); JENNIFER ADELI (GREAT FALLS, VA); ANDREW SCALISE (FAIRFAX, VA); BETTINA LAWTON (VIENNA, VA); DAN SHERRANGE (CHANTILLY, VA); ANNE WHIPPLE (FAIRFAX, VA)

Also present: Executive Director Daryl Washington, Deputy Director of Clinical Operations Lyn Tomlinson, Deputy Director of Community Living Barbara Wadley-Young, Healthcare Systems Director Jennifer Aloj, and Board Clerk Sameera Awan.

Committee Chair Garrett McGuire conducted a roll call with each CSB Board Member present, as identified above, to confirm that a quorum of CSB Board members were present and audible. Committee Chair Garrett McGuire passed the virtual gavel to Committee member Jennifer Adeli to make several motions required to begin the meeting. A motion was offered to confirm that each member's voice was audible to each other member of the CSB Board present; this motion was seconded by Committee Member Jennifer Adeli and approved 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 attend any such meeting physically 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 dedicated online video and web conferencing platform and that the public may access this meeting via Meeting ID: 872 0259 0531 and Passcode: 786935. Motion was seconded by Committee Member Jennifer Adeli with Committee Member Bettina Lawton opposing and approved unanimously.

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

5. Approval of Minutes

Meeting minutes of the June 15, 2022, Compliance Committee were provided for review.

MOVED BY COMMITTEE MEMBER DAN SHERRANGE, SECONDED BY BOARD MEMBER JENNIFER ADELI TO APPROVE AGENDA ITEM NO. 5.

6. Follow up items

None were noted.

7. Updates

A. Comply Track Reports

- **Director of Quality Improvement Joan Rodgers** provided the Audit Action Plan Report, Corrective 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 2022.

8. Open Discussion

None were raised.

9. Adjournment

Committee Member Dan Sherrange made the motion to adjourn the meeting at 4:29 PM.

Date Approved

Clerk to the Board

Audit Report CSB Board For April 2023

Item Custom Id	Audit Start Date	Entity	Audit Scope	Audit Type	Sample Size	CSB Board Reporting	Audit Action Plan	Additional Information
3267	7-Feb-22	DBHDS	Group Homes, Supervised Living, and Support Coordination Annual Inspection	Records, Training, Personnel, and Environment	4 staff/4 individuals	Standard business risk	License Review	Licensing activity
3319	31-May-22	DBHDS	DD Case Management	Records	1 record	Standard business risk	License Review	Licensing activity
	Jun 14, 2022	Virginia Board of Pharmacy	Fairfax Detox	Records	on-site review	Standard business risk	Pharmacy License Review	Licensing and DEA
3320	Jun 14, 2022	DBHDS	OBOT	Records, Training, and Personnel	2 staff/4 individuals	Standard business risk	License Review	Licensing activity
3374	Jun 24, 2022	DBHDS	SA Medical/Detox Diversion	Records, Training, Personnel, and Environment	2 staff/4 individuals	Standard business risk	License Review	Licensing activity
3375	Jun 24, 2022	DBHDS	Crossroads	Records, Training, Personnel, and Environment	2 staff/4 individuals	Standard business risk	License Review	Licensing activity
3376	Jun 24, 2022	DBHDS	Cornerstones	Records, Training, Personnel, and Environment	2 staff/4 individuals	Standard business risk	License Review	Licensing activity

3377	Jun 24, 2022	DBHDS	SA Supervised Living	Records, Training, and Personnel	2 staff/4 individuals	Standard business risk	License Review	Licensing activity
3378	Jun 24, 2022	DBHDS	Youth Outpatient	Records, Training, and Personnel	2 staff/4 individuals	Standard business risk	License Review	Licensing activity
3379	Jun 24, 2022	DBHDS	Intensive Outpatient	Records, Training, and Personnel	2 staff/4 individuals	Standard business risk	License Review	Licensing activity
2934	Jul 1, 2022	CSB Internal	Merrifield	Records	8 records	Standard business risk	Monitoring	Routine/Ongoing Adult MH Case Management
3593	Jul 1, 2022	CSB Internal	Chantilly	Records	16 records	Standard business risk	Monitoring	Routine/Ongoing Cornerstones ASAM 3.3 Detoxification Center
3595	Jul 1, 2022	CSB Internal	Chantilly	Records	6 records	Standard business risk	Monitoring	Routine/Ongoing Support Coordination
3598	Jul 1, 2022	CSB Internal	Northwest Center Reston	Records	2 records	Standard business risk	Monitoring	Routine/Ongoing Youth & Family SA Outpatient Behavioral Health Outpatient Programs
3600	Jul 1, 2022	CSB Internal	Merrifield	Records	2 records	Standard business risk	Monitoring	Routine/Ongoing Youth & Family SA Outpatient Behavioral Health Outpatient Programs
3686	Jul 1, 2022	CSB Internal	South County Human Services Center	Records	5 records	Standard business risk	Monitoring	Routine/Ongoing Youth & Family SA Outpatient
3689	Jul 1, 2022	CSB Internal	Gartlan	Records	6 records	Standard business risk	Monitoring	Routine/Ongoing Behavioral Health Outpatient Services
3691	Jul 1, 2022	CSB Internal	Merrifield	Records	3 records	Standard business risk	Monitoring	Quality Review Behavioral Health Outpatient Services

3791	1-Jul-22	CSB Internal	Northwest Center Reston	Records	18 records	Standard business risk	Monitoring	Supportive Community Residential Services
3793	1-Jul-22	CSB Internal	Chantilly	Records	11 records	Standard business risk	Monitoring	Residential Treatment and Detoxification Services
3795	1-Jul-22	CSB Internal	Gartlan	Records	9 records	Standard business risk	Monitoring	Intensive Community Treatment Services
3797	1-Jul-22	CSB Internal	Northwest Center Reston	Records	9 records	Standard business risk	Monitoring	Intensive Community Treatment Services
3799	1-Jul-22	CSB Internal	Pennino	Records	3 records	Standard business risk	Monitoring	Assisted Community Residential Services
3913	1-Jul-22	CSB Internal	Merrifield	Records	11 records	Standard business risk	Monitoring	Diversion & Jail-based Services
3916	1-Jul-22	CSB Internal	Merrifield	Records	6 records	Standard business risk	Monitoring	Intensive Community Treatment Services
4017	1-Jul-22	CSB Internal	Northwest Center Reston	Records	6 records	Standard business risk	Monitoring	Supportive Community Residential Services
4033	1-Jul-22	CSB Internal	Chantilly	Records	5 records	Standard business risk	Monitoring	Residential Treatment & Detox Services
4136	1-Jul-22	CSB Internal	Gartlan	Records	3 records	Standard business risk	Monitoring	Behavioral Health Outpatient Services
4138	1-Jul-22	CSB Internal	Gartlan	Records	5 records	Standard business risk	Monitoring	Behavioral Health Outpatient

4140	1-Jul-22	CSB Internal	Chantilly	Records	1 record	Standard business risk	Monitoring	Behavioral Health Outpatient Services
4142	1-Jul-22	CSB Internal	Northwest Center Reston	Records	1 record	Standard business risk	Monitoring	Behavioral Health Outpatient Services
4131	1-Jul-22	CSB Internal	Chantilly	Records	3 records	Standard business risk	Monitoring	Residential Treatment & Det
4335	1-Jul-22	CSB Internal	Chantilly	Records	2 records	Standard business risk	Monitoring	Intensive Community Treatm
	1-Jul-22	CSB Internal	Pennino	Billing	3 records	Standard business risk	Monitoring	Routine/Ongoing ACRS
3597	22-Jul-22	CSB Internal	Gartlan	Billing	5 records	Standard business risk	Monitoring	Routine/Ongoing Behavioral Health Outpatient Services
	29-Jul-22	DBHDS	MH Supervised Living	Records, Training, Personnel, and Environment	1. All active individuals with admission dates 2. All discharged individuals from 8/13/2021 forward 3. All staff, and relief staff, with hire dates	Standard business risk	License Review	Licensing activity
	29-Jul-22	DBHDS	Assertive Community Treatment Services	Records, Training, and Personnel	1. All active individuals with admission dates 2. All discharged individuals from 8/13/2021 forward 3. All staff, and relief staff, with hire dates	Standard business risk	License Review	Licensing activity

	2-Aug-22	DBHDS	Block Grant Review	Mental Health Services & Substance Use Disorder Services	Policies and Procedures, Records, Site Visit, Personnel	Standard business risk	Block Grant Review	A review of programs to ensure the implementation is in accordance with the Block Grant funding and requirements MHOP Adult and Youth, MHCM Adult and Youth, SA OP Adult and Youth, ACT, EAR, IOP, Jail Diversion, MAT, and SUD 3.1-3.7.
	6-Aug-22	VCU (DBHDS)	ACRS (ID/DD Group Homes)	Interview with 1 individual in service	Satisfaction with services	Standard business risk	National Core Indicators (contracted to VCU)	Licensing activity
	15-Aug-22	Diox Health (Anthem)	System Review	5 Records Review (1/1/20 - 12/31/22)	Quality Review	Standard business risk	Quality of Care	Quality of Care Review
	15-Aug-22	HSAG	Support Coordination & DD Services	Records and interviews	1 - DD; 77 - Support Coordination (July 1, 2021 - April 30, 2022)	Standard business risk	DOJ Settlement	4th Round - analyzing results
	16-Aug-22	DBHDS	Support Coordination	Quality Reviews with Individual, family, staff, & records	4 records, staff, family, and individual interviews	Standard business risk	License Review	Licensing activity

3591	23-Aug-22	DMAS	Intensive Outpatient (Agency-wide)	DMAS Desk Audit (2019, 2020)	Chart reviews (3), Provider Requirements, Employee Records (32 staff)	Standard business risk	DMAS Quality Review	<p>Chart requirements: assessments, reassessments, intakes, service plans, quarterlies, service authorizations, progress notes, discharge summaries, admission paperwork (releases, rights), med and hospital documentation, supervision documents</p> <p>Provider - DBHDS license, MCO agreement, EHR policy & procedure, approval of marketing materials</p> <p>Employee Records - application, resume, college transcripts, position identification, date of hire, licenses & certifications, triennial license with QMHP-eligible staff, approval of any DMAS variance related to QMHPs, Monthly OIG LEIE exclusion database (List of Excluded Individuals/Entities), documentation of required supervision</p>
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	19-Sep-22	IPS Employment Center/DMAS	Behavioral Health Employment Team	Evidence- based Practice Fidelity Review	Charts, Interviews with Staff and Individuals in service	Standard business risk	Base-line program review	DARS (Virginia Department for Aging and Rehabilitative Services) as the contracting entity, Individual Placement and Support: an evidence-based approach to supported employment for people who have a mental illness.
3934	22-Nov-22	DBHDS	Adult Mental Health Case Management	Desk Review	2 individuals/2 staff records	Standard business risk	License Review	Mental Health Services Annual Review
3935	22-Nov-22	DBHDS	Youth Mental Health Case Management	Desk Review	2 individuals/2 staff records	Standard business risk	License Review	Mental Health Services Annual Review
3936	22-Nov-22	DBHDS	Outpatient Services	Desk Review	2 individuals and 2 staff records	Standard business risk	License Review	Mental Health Services Annual Review
3937	22-Nov-22	DBHDS	Partial Hospitalization Program	Desk Review	2 individuals and 2 staff records	Standard business risk	License Review	Mental Health Services Annual Review
3938	22-Nov-22	DBHDS	Supervised Housing	Desk Review	2 individuals and 2 staff records	Standard business risk	License Review	Mental Health Services Annual Review
3939	22-Nov-22	DBHDS	Residential Crisis Stabilization	Desk Review	2 individuals and 2 staff records	Standard business risk	License Review	Mental Health Services Annual Review
3940	22-Nov-22	DBHDS	Crisis Intervention (Emergency Services)	Desk Review	2 individuals and 2 staff records	Standard business risk	License Review	Mental Health Services Annual Review

	17-Jan-23	DBHDS	ARCS	Records, Personnel Records, and Residence	3 records/2 personnel records	Standard business risk	License Review	Annual Review
	17-Jan-23	DBHDS	Support Coordination	Records and Personnel Records	2 in service/1 discharge, 2 personnel records	Standard business risk	License Review	Annual Review
	6-Feb-23	DMAS	ACRS	Records, Personnel Records of all staff assigned, interview with individual in service	3 records, 23 ACRS personnel records, 1 individual interview	Standard business risk	DMAS Quality Management Review	DMAS funded individuals through waivers
	6-Feb-23	DMAS	Support Coordination	Records, Personnel Records of all staff assigned, interviews with individuals in	93 records, 52 personnel records, 2 individual interviews	Standard business risk	DMAS Quality Management Review	DMAS funded individuals through waivers
	30-Mar-23	HSAG	Support Coordination	Records and interviews	45 Records/Support Coordination (May 1 - Dec 31, 2022)	Standard business risk	DOJ Settlement	5th Round Review
	TBD (May 2023)	DBHDS	SA ASAM & ACT	Records, Personnel Records, and Sites	TBD	Standard business risk	License Review	Annual Review

AUDIT LEGEND

Item CustomID	Identification number automatically assigned by ComplyTracker
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
Board Reportin	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 2023

Item Custom Id	Start Date	Entity	Reviewing Agency	Corrective Action (Narrative)	CAP Status	Additional Information
4217	Jan 31, 2023	Support Coordination	DBHDS	Corrective Action Plan submitted for review by DBHDS, Office of Licensing (OL).	Under Review	Risk Management and QI Plans, Root Cause Analysis Policy
4317	16-Feb-23	Youth & Family	DBHDS	Corrective Action Plan was accepted by DBHDS, Office of Human Rights (OHR).	CAP Closed	Late Reporting
4218	28-Feb-23	ACRS	DBHDS	Corrective Action Plan submitted for review by DBHDS, Office of Licensing (OL).	Under Review	QI Plan, Root Cause Analysis Policy
4316	2-Mar-23	Intensive Case Management Services	DBHDS	Corrective Action Plan was accepted by DBHDS, Office of Human Rights (OHR).	CAP Closed	Late Reporting
4318	6-Mar-23	Support Coordination	DBHDS	Corrective Action Plan was accepted by DBHDS, Office of Human Rights (OHR).	CAP Closed	Guardianship process
4319	14-Mar-23	Youth & Family	DBHDS	Corrective Action Plan submitted for review by DBHDS, Office of Human Rights (OHR).	Under Review	Late 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	Description of the reason for the CAP
Date CAP	Date the reviewing agency approved the CAP

CSB Board 2022 Annual Training Completion Percentage

96%