



FAIRFAX - FALLS CHURCH

**Community
Services Board**

FAIRFAX-FALLS CHURCH COMMUNITY SERVICES BOARD COMPLIANCE COMMITTEE MEETING

Captain Daniel Wilson, Chair (acting)

Wednesday, December 13, 2023, 4:00 PM

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

MEETING AGENDA

- | | |
|--|------------------------------|
| 1. Meeting Called to Order | Captain Daniel Wilson |
| 2. Roll Call, Audibility and Preliminary Motions | Captain Daniel Wilson |
| 3. Matters of the Public | Captain Daniel Wilson |
| 4. Amendments to the Meeting Agenda | Captain Daniel Wilson |
| 5. Approval of the August 16, 2023, Meeting Minutes | Captain Daniel Wilson |
| 6. Follow up items from the August 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 | Captain Daniel Wilson |
| 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 MEETING MINUTES
AUGUST 16, 2023**

The CSB Compliance Committee met in regular session at the Sharon Bulova Center, 8221 Willow Oaks Corporate Drive, Level 3, Room 3-314 West, Fairfax, VA 22031

1. Meeting Called to Order

Committee Chair Dan Sherrange called the meeting to order at 4:00 PM.

2. Roll Call, Audibility, and Preliminary Motions

PRESENT: BOARD MEMBERS: COMMITTEE CHAIR DAN SHERRANGE; GARRETT MCGUIRE, BETTINA LAWTON; CLAUDIA VOLK; ANDREW SCALISE

ABSENT: BOARD MEMBERS: ANNE WHIPPLE; CAPTAIN DANIEL WILSON

Also present: Executive Director Daryl Washington, Deputy Director of Community Living Barbara Wadley-Young, Deputy Director of Administrative Operations Jean Post, Director of Clinical Operations Abbey May, Healthcare Systems Director Jennifer Aloï, Legislative and Grants Analyst Elizabeth McCartney, Director of Quality Improvement Joan Rodgers and Board Clerk Sameera Awan.

3. Matters of the Public

None were presented.

4. Amendments to the Meeting Agenda

The meeting agenda was presented for review, and no amendments were made by the consensus of the Committee. The meeting agenda was adopted unanimously.

5. Approval of Minutes

April 19, 2023, Compliance Committee minutes were distributed for review.

MOTION TO ADOPT APRIL 19, 2023, MEETING MINUTES AS AMENDED WAS MOVED BY COMMITTEE MEMBER BETTINA LAWTON, SECONDED BY COMMITTEE MEMBER GARRETT MCGUIRE.

MOTION TO ADOPT WAS APPROVED BY DAN SHERRANGE, ANDREW SCALISE AND CLAUDIA VOLK.

6. Follow up Items

Director of Quality Improvement Joan Rodgers presented the Audit Action Plan Report, the Correct Action Plan Report, and the Education Reports. No follow-up occurred after the July meeting, but a debrief happened on August 10th regarding the Health Services Advisory Group (HSAG) fifth-round review. These audits evaluate the quality of home and community-based services within the DD waiver program through quality service reviews. In the review, HSAG staff examined 45 support coordination records. It's important to note that a quality improvement plan was submitted in response to their

findings, addressing issues mainly related to individual service plans. However, it's worth mentioning that correcting inaccuracies in the HSAG audit review doesn't reconcile with the data submitted to the Department of Behavioral Health and Developmental Services (DBHDS). I expressed concern about the submission of inaccurate data to the state. Another noteworthy point is that, in the quality service review results and recommendations for improvement, the report states that the results in the appendices are not statistically significant. This means a deficiency in an individual record should not be generalized as a program-wide deficiency.

7. Updates

A. Comply Track Reports

- **Director of Quality Improvement Joan Rodgers** provided the CSB Board Audit Report, the CSB Board CAP Report, and the CSB Annual Training Data

B. CSB Serious Incident (Level III) Report

- **Director of Quality Improvement Joan Rodgers** provided the Serious Incident Report (SIR) Report for August 2023.

8. Open Discussion

None were raised.

9. Adjournment

A motion to adjourn the meeting was made by Committee Member Garrett McGuire and seconded by Committee Member Bettina Lawton. The motion was approved unanimously, and the meeting was adjourned at 4:30 PM.

Date Approved

Clerk to the Board

CSB Board CAP Report For November 2023

Item Custom Id	Start Date	Entity	Reviewing Agency	Corrective Action (Narrative)	CAP Status	Additional Information
4884	9/21/23	MH Supervised Living Program (Residential Intensive Care)	DBHDS	Corrective Action Plan submitted to DBHDS Office of Human Rights (OHR) and approved.	Closed	Med Error - no harm
4885	9/26/23	Intensive Community Treatment Services - Assertive Community Treatment (ACT)	DBHDS	Corrective Action Plan submitted to DBHDS Office of Human Rights (OHR) and approved.	Closed	Med Error - no harm
5005	10/11/23	Assisted Community Residential Services (ID Group Homes)	DBHDS	Corrective Action Plan submitted to DBHDS Office of Human Rights (OHR) and approved.	Closed	Late Reporting
5096	11/6/23	Residential Treatment & Detox Services (Crisis Care/Wellness Center)	DBHDS	Corrective Action Plan submitted to DBHDS Office of Human Rights (OHR) and approved.	Closed	Med Error - no harm

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 2023 Annual Training is open to staff for completion by January 31, 2024