

CENTRAL FAIRFAX SERVICES, INC.
RISK MANAGEMENT REPORT
FISCAL YEAR 2009

Guiding Principles: Central Fairfax Services, Inc. (CFS) is committed to conducting its operations and maintaining an environment that assures the safety of persons served, employees, volunteers, and others. CFS recognizes that providing services to a large number of adults with severe and multiple disabilities place our organization in a high risk position. The strategies employed by CFS include the identification, assessment, and control of these risks to the best of our abilities.

Board Policy: In April, 2005, the Board adopted the Risk Management Policy which formalizes the Guiding Principles listed below.

I. Safe Environment

- a.) Evacuation Drills: Drills were conducted on a monthly basis under the direction of the Safety Committee. Managers (or designees) exited with emergency supply backpacks for each department; walkie-talkies (to report individuals who had been evacuated to a central person) were maintained or replaced as needed; and rosters of all staff, including persons not assigned to a specific program department, were updated as needed. Some drills were conducted with a “blocked exit” to practice alternative evacuation routes. The results of these exercises were reviewed by the Safety Committee at its following monthly meeting. Additional wheelchairs were obtained to assist persons with ambulation disabilities to safely exit the building. Deb Bauer, Assistant Executive Director, continued to train other managers to serve as drill coordinators. Reports of evacuation drills are on file and available for review.
- b.) Shelter in Place Drills: Drills were conducted on a quarterly basis. Like evacuation drills, this procedure was written to reflect accountability and provisions (i.e., thermal blankets, non perishable food, and water). Deb Bauer also trained other managers to serve as drill coordinators. The results of these activities were analyzed by the CFS Emergency Preparedness Team. Reports of these exercises are on file and available for review.
- c.) Safety Committee: This Committee was led by Mary Spampneto, Facilities Manager, and met on monthly basis. Members of the Committee conducted a walk through each month using an updated checklist. Representatives from all six program departments, nursing, administration, senior management, maintenance, and consumers served on the Committee. Matters addressed during the past year included servicing lifts and electric mat tables, issuing extreme weather procedures and alerts, review of evacuation and shelter-in-place drill reports, monitoring emergency supplies, testing fire extinguishers, and transportation safety. Minutes of the Safety Committee meetings are posted on the main bulletin board and are on file for review.

- d.) Emergency Preparedness: The Emergency Preparedness Team (EPT), chaired by Paul Wexler, Executive Director, met on a quarterly basis. The Team determined travel restrictions in relation to the Homeland Security threat code, reviewed shelter-in-place drills, ordered and replaced emergency supplies, marked the posted floor plans with “safe zones”, reviewed emergency equipment (radios and cell phones), and monitored weather and traffic alerts issued by local and federal government agencies. Minutes of the EPT meetings are posted on the main bulletin board and are on file for review.
- e.) Buildings and Grounds Maintenance and Security: CFS staff worked closely with the managing agent, Simpson Properties, to assure a safe environment. Staff quickly responded to reports from the Safety Committee, written maintenance request forms, and verbal reports of hazardous situations. Snow was removed through a contract and efforts by CFS maintenance staff, damaged ceiling tiles were replaced, HVAC malfunctions were promptly reported and repaired, faulty lighting was repaired, fire extinguishers were checked and replaced as needed, and ramps were cleared of leaves and debris. The intercom system in the four changing rooms was maintained to enable communication with the front desk in case of an emergency situation. Exterior security cameras were maintained and monitored and the electronic door access system was maintained. Designated employees have the capability to monitor the exterior of the building from their home as well as office computers.
- f.) Occupancy Permit: CFS was reclassified as a Day Health Care Facility for Adults in 2006. Inspection by the Fire County Fire Department indicated no deficiencies. An updated occupancy permit was obtained and is posted at the front door.
- g.) Vehicles: The Vehicle Committee, chaired by Mary Spampneto, had regular and informal meetings throughout the year. A list of drivers was reported to the auto insurance company by Jacque Scholl, Human Resources Manager, for continuing eligibility. Regular drivers completed checklists for their assigned vehicles. The Committee assured that safety and emissions inspections and registrations were current; routine maintenance was completed in a timely manner; vehicles were serviced for repairs, cleaning, and weatherization. Staff assured that first aid kits were properly stocked in all vehicles. The work of this committee became more critical as the fleet of vehicles was aging and required increased repairs and safety monitoring. Three new vehicles purchased in June, 2008, have improved reliability. Minutes of the committee meetings were posted on the main bulletin board and are on file for review.

- h.) Training: Employees received training in risk management topics including abuse and neglect reporting, adult protective services, back management, behavior management, contagious disease, CPR/AED, criminal background investigations, emergency preparedness, falls risk assessment, first aid, human rights, incident report writing, insurance, lift operation, medication administration, private healthcare information, seizure care, universal precautions, and wheelchair safety. Training is recorded in individual personnel files and included in the Quarterly Performance Reports which are reviewed by staff, submitted to the Board, and funding sources and posted on the main bulletin board.
- i.) Incident Reports: Employees were required to write an incident report in the event of consumer illness, injury, or endangering behavior. All completed reports were reviewed and signed by the Program Manager, Assistant Executive Director, Executive Director, and other staff (i.e., nurses and therapists) as indicated. Reports were analyzed by the AED and Sutapa Ghosh, Quality Assurance Manager, for trends and follow-up actions as necessary. Reports of major significance were forwarded to the consumer's authorized representative, case manager, residential provider, and regulatory organizations. Two consumers were discharged and four referrals were not admitted due to the risks their aggressive behaviors posed to other consumers.
- j.) Medication Error Reports: Medication error reports were completed by the nurses and medication technicians for individuals served as they occurred. Quarterly summaries and an annual report were reviewed by senior management staff and procedural changes made as necessary. During FY 09, there were over 23,000 doses of medication administered with only eight errors, **zero** of which were attributable to CFS. None of these errors resulted in consequences to the consumer.

II. Financial

- a.) Funding: The Board of Directors took several actions in an effort to assure the long term sustainability of the Corporation in light of continuing underfunding by the state and local governments. Representatives of CFS took successful advocacy actions by testifying, meeting, and writing to state officials on the need to preserve transportation and day support services and increase the number of ID Medicaid Waiver slots statewide. The Planning Committee presented the Long Term Strategic Plan (2008-2013) including consequences if rates are not sufficiently increased. The Community Relations Committee and staff continued fundraising efforts which resulted in successful donation campaigns and grant awards. The ongoing effort to secure adequate funding is considered to be the primary challenge facing the organization.

b.) Bonding: All staff and volunteers were bonded in accordance with the guidelines of BB&T Insurance Services, Inc. and the requirements of funding and regulatory bodies.

c.) Audit: The Board of Directors, upon the recommendation of the Finance Committee, selected Ted Ritman, CPA, to conduct the annual independent financial audit. Mr. Ritman presented the FY 08 audit to the Finance Committee and then to the full Board.

d.) Controls: The Board received and accepted the following documents: Accessibility, Annual Report, Board meeting Minutes, Budget Reports, CARF Survey, Committee Reports, Consumer Satisfaction, Corporate Compliance, Critical Incidents, Employee Satisfaction, Human Rights, Independent Audit, Insurance portfolio, Legal, Medicaid, Medication Administration, Performance, and Risk Management.

e.) Advocacy: In addition to its own actions, CFS worked cooperatively with The Arc, Virginia ACCSES, Coalition for the Mentally Disabled, PAIR, and other advocacy groups to expand and improve services for people with disabilities.

f.) Medicaid: The Virginia Department of Medical Assistance Services and its contractor have been conducting very strict audits on Waiver provider agencies. CFS has not been subject to an audit, however, colleague agencies throughout the state have been subjected to paybacks largely based on technicalities. Consideration could be given to increasing the reserve account as a risk management strategy.

III. Insurance

Portfolio Review: All policies were reviewed by Directors and staff with our representative from BB&T Insurance Services, Inc., Tom Field, for proper coverage under the Commercial Package. These policies were designed for nonprofit corporations with special provisions for the population served by CFS. Policies included Property, General Liability, Automobile, Directors and Officers, Group Accident, Medical, Umbrella, and Workers Compensation. Contagious Disease Outbreak coverage was added. Efforts to increase D&O coverage and to obtain more cost efficient Workers Compensation coverage are in progress.

IV. Legal

Legal Actions: CFS conducted all legal actions in accordance with applicable laws and regulations. All matters, including, but not limited to, contracts, and litigation, were reported to the Board by the Legal Committee. A separate legal report has detailed information.

V. Goodwill

- a.) Satisfaction Surveys: In accordance with the Board policy on Input from People Served, surveys were conducted for consumers, employees, and residential partners. The summaries were provided to the Board of Directors, respondents, funding sources and other interested parties, and posted on the main bulletin board and on the website.

- b.) Publicity: Directors and staff represented CFS in a variety of public speaking opportunities at local business, university, elected official, and civic settings. The Corporation enjoys a very good reputation with the Northern Virginia Community Services Boards, ICFs, and local public school systems special education departments.

Submitted By,

Paul J. Wexler
Executive Director

07/16/09

