

AGENDA

GOVERNANCE COMMITTEE OF THE EL CAMINO HOSPITAL BOARD OF DIRECTORS

Wednesday, May 29, 2019 – 5:30pm

El Camino Hospital | Conference Room E (ground floor)
2500 Grant Road Mountain View, CA 94040

PURPOSE: To advise and assist the El Camino Hospital (ECH) Board of Directors (“Board”) in matters related to governance, board development, board effectiveness, and board composition, i.e., the nomination and appointment/ reappointment process. The Governance Committee ensures the Board and Committees are functioning at the highest level of governance standards.

AGENDA ITEM	PRESENTED BY		ESTIMATED TIMES
1. CALL TO ORDER/ROLL CALL	Peter C. Fung, MD, Chair		5:30 – 5:32pm
2. POTENTIAL CONFLICT OF INTEREST DISCLOSURES	Peter C. Fung, MD, Chair		5:32 – 5:33
3. PUBLIC COMMUNICATION a. Oral Comments <i>This opportunity is provided for persons in the audience to make a brief statement, not to exceed three (3) minutes on issues or concerns not covered by the agenda.</i> b. Written Correspondence	Peter C. Fung, MD, Chair		information 5:33 – 5:36
4. CONSENT CALENDAR <i>Any Committee Member or member of the public may remove an item for discussion before a motion is made.</i> Approval a. Minutes of the Open Session of the Governance Committee Meeting (4/2/3019) Information b. Progress Against Committees’ FY19 Goals c. Article of Interest	Peter C. Fung, MD, Chair	<i>public comment</i>	motion required 5:36 – 5:38
5. REPORT ON BOARD ACTIONS ATTACHMENT 5	Peter C. Fung, MD, Chair		information 5:38 – 5:43
6. FY20 BOARD & COMMITTEE MASTER CALENDAR ATTACHMENT 6	Peter C. Fung, MD, Chair	<i>public comment</i>	possible motion 5:43 – 5:48
7. FY20 COMMITTEE GOALS ATTACHMENT 7	Peter C. Fung, MD, Chair	<i>public comment</i>	possible motion 5:48 – 6:08
8. FY20 COMMITTEE MEMBER AND COMMITTEE CHAIR ASSIGNMENTS ATTACHMENT 8	Peter C. Fung, MD, Chair	<i>public comment</i>	possible motion 6:08 – 6:18
9. ADJOURN TO CLOSED SESSION	Peter C. Fung, MD, Chair		motion required 6:18 – 6:19
10. POTENTIAL CONFLICT OF INTEREST DISCLOSURES	Peter C. Fung, MD, Chair		6:19 – 6:20

AGENDA ITEM	PRESENTED BY		ESTIMATED TIMES
11. CONSENT CALENDAR <i>Any Committee Member or member of the public may remove an item for discussion before a motion is made.</i> Approval <i>Gov't Code Section 54957.2:</i> a. Minutes of the Closed Session of the Governance Committee Meeting (4/2/2019)	Peter C. Fung, MD, Chair		motion required 6:20 – 6:21
12. <i>Gov't Code Section 54956.9(d)(2) – conference with legal counsel – pending or threatened litigation:</i> - Governance Oversight of ECH Affiliates	Mary Rotunno, General Counsel; Michael Peregrine, Partner, McDermott Will & Emery, LLP		discussion 6:21 – 7:01
13. ADJOURN TO OPEN SESSION	Peter C. Fung, MD, Chair		motion required 7:01 – 7:02
14. RECONVENE OPEN SESSION/ REPORT OUT To report any required disclosures regarding permissible actions taken during Closed Session.	Peter C. Fung, MD, Chair		information 7:02 – 7:03
15. APPOINTMENT OF AD HOC COMMITTEE TO ASSESS AND MAKE RECOMMENDATIONS REGARDING SYSTEM GOVERNANCE ISSUES	Peter C. Fung, MD, Chair	<i>public comment</i>	possible motion 7:03 – 7:08
16. PROPOSED FY20 PACING PLAN <u>ATTACHMENT 16</u>	Peter C. Fung, MD, Chair	<i>public comment</i>	possible motion 7:08 – 7:12
17. ROUND TABLE DISCUSSION <u>ATTACHMENT 17</u>	Peter C. Fung, MD, Chair		discussion 7:12 – 7:14
18. ADJOURNMENT	Peter C. Fung, MD, Chair	<i>public comment</i>	motion required 7:14 – 7:15pm

Upcoming Meetings: (*pending Board approval*) August 13, 2019; October 15, 2019; February 4, 2020; March 31, 2020; June 2, 2020 || **Board/Committee Educational Sessions** (*pending Board approval*): October 23, 2019; April 22, 2020



**Minutes of the Open Session of the
Governance Committee
Tuesday, April 2, 2019
El Camino Hospital | Conference Room A (ground floor)
2500 Grant Road, Mountain View, CA 94040**

Members Present

Peter C. Fung, MD, Chair
Gary Kalbach, Vice Chair
Christina Lai
Peter Moran
Bob Rebitzer

Members Absent

None

Agenda Item	Comments/Discussion	Approvals/ Action
1. CALL TO ORDER/ ROLL CALL	The open session of the Special meeting of the Governance Committee of El Camino Hospital (the “Committee”) was called to order at 5:38pm by Chair Fung. A silent roll call was taken. All Committee members were present at roll call.	
2. POTENTIAL CONFLICT OF INTEREST DISCLOSURES	Chair Fung asked if any Committee members had a conflict of interest with any of the items on the agenda. No conflicts were noted.	
3. PUBLIC COMMUNICATION	None.	
4. CONSENT CALENDAR	<p>Chair Fung asked if any member of the Committee or the public wished to remove an item from the consent calendar. Chair Fung removed Item 4b: FY20 Governance Committee Meeting dates. The Committee requested that the August 2019 meeting be moved to August 13th and the April 2020 meeting be moved to March 31, 2020.</p> <p>Motion: To approve the consent calendar: Minutes of the Open Session of the Governance Committee Meeting (March 5, 2019); FY20 Governance Committee Meeting Dates (as amended above); and for information: Progress Against Committee Goals.</p> <p>Movant: Moran Second: Kalbach Ayes: Fung, Kalbach, Lai, Moran, Rebitzer Noes: None Abstain: None Absent: None Recused: None</p>	<i>Consent Calendar approved</i>
5. REPORT ON BOARD ACTIONS	Chair Fung and Mr. Kalbach answered the Committee members’ questions about the written report.	
6. ANNUAL BOARD ASSESSMENT TOOL	<p>Erica Osborne from Via Healthcare Consulting provided an overview of the Proposed Annual Board Self-Assessment Tool.</p> <p>Following discussion and with input from Ms. Osborne, the Committee members requested the following changes:</p> <ol style="list-style-type: none">1. Move Section V up to Section III, making Sections III and IV now Sections IV and V respectively.2. Section I: Reverse the order of the questions (“Q”)3. Section II:<ul style="list-style-type: none">- Change the order: Q10 → Q6; Q8 → Q7; Q6 → Q8; Q7 → Q9;	<i>Annual Board Assessment tool recommended</i>

	<p>Q9 → Q10</p> <ul style="list-style-type: none"> - Add a question addressing whether the Board has sufficient expertise and competency to satisfy its duty to oversee quality <p>4. Section V (Now Section III):</p> <ul style="list-style-type: none"> - Add a question related to the Board’s working relationship with members of the leadership team other than the CEO. - Question 22: add the words “understand and” before the word “respect.” - Remove Question 27 <p>5. Section III (Now Section IV): Add Committee members to Q12</p> <p>6. Section IV (now Section V): No changes</p> <p>7. Section VI:</p> <ul style="list-style-type: none"> - Add a question about appropriateness of frequency and duration of meetings - Add a question addressing Board meeting structure enabling effective, efficient, and generative discussions <p>Motion: To recommend the Board approve the Proposed Annual Board Self-Assessment Tool with the amendments as above.</p> <p>Movant: Kalbach Second: Lai Ayes: Fung, Kalbach, Lai, Moran, Rebitzer Noes: None Abstain: None Absent: None Recused: None</p> <p>Follow Up: Erica Osborne was asked to make the changes as requested and to have Chair Fung review them before submission to the Board.</p>	
7. PROPOSED FY20 GC GOALS	<p>The Committee discussed the Proposed FY20 Governance Committee Goals. Mr. Moran suggested a goal around ensuring management has a leadership succession plan in place. Chair Fung suggested that discussion be had when the Pacing Plan is discussed.</p> <p>Motion: To approve the Proposed FY20 Governance Committee Goals.</p> <p>Movant: Kalbach Second: Rebitzer Ayes: Fung, Kalbach, Lai, Moran, Rebitzer Noes: None Abstain: None Absent: None Recused: None</p>	<i>FY20 Governance Committee Goals approved</i>
8. ADJOURN TO CLOSED SESSION	<p>Motion: To adjourn to closed session at 7:06pm pursuant to <i>Gov’t Code Section 54957.2</i> for approval of the Minutes of the Closed Session of the Governance Committee Meeting (March 5, 2019).</p> <p>Movant: Kalbach Second: Moran Ayes: Fung, Kalbach, Lai, Moran, Rebitzer Noes: None Abstain: None Absent: None Recused: None</p>	<i>Adjourned to closed session at 7:06pm</i>
9. AGENDA ITEM 12: RECONVENE	<p>Open session was reconvened at 7:09pm. Agenda items 9-11 were addressed in closed session. During the closed session, the Committee</p>	

OPEN SESSION/ REPORT OUT	approved the Minutes of the Closed Session of the Governance Committee Meeting (March 5, 2019) by a unanimous vote in favor of all members present (Fung, Kalbach, Lai, Moran, Rebitzer).	
10. AGENDA ITEM 13: FY19 COMMITTEE PACING PLAN	<p>Mr. Woods asked the Committee members if they would like to add to the Pacing Plan a discussion and possible a recommendation to the Board regarding the level of detail currently provided in the monthly financial report to the Board. It was suggested to first have that discussion with the Finance Committee. Other changes to the Pacing Plan included:</p> <ul style="list-style-type: none">- Add a discussion about management's leadership succession plan in August 2020- Chair Fung asked that the discussion about the possible changes to the ECH Bylaws be moved to August 2019- Move Annual Review of Advisory Committee Composition to August 2019; In the meantime, the Committee requested that Ms. Murphy ask each of the Committees to consider whether they have a full set of the right competencies represented in their committee membership to cover all of their chartered oversight responsibilities.- In accordance with Ms. Lai's request, the Committee agreed to move the June 4, 2019 meeting to May 29, 2019.	
11. AGENDA ITEM 14: ROUND TABLE DISCUSSION	The Committee discussed the effectiveness of the meeting.	
12. AGENDA ITEM 15: ADJOURNMENT	<p>Motion: To adjourn at 7:35pm.</p> <p>Movant: Kalbach</p> <p>Second: Moran</p> <p>Ayes: Fung, Kalbach, Lai, Moran, Rebitzer</p> <p>Noes: None</p> <p>Abstain: None</p> <p>Absent: None</p> <p>Recused: None</p>	<i>Meeting adjourned at 7:35pm</i>

Attest as to the approval of the foregoing minutes by the Governance Committee of El Camino Hospital:

Peter C. Fung, MD
Chair, Governance Committee

**EL CAMINO HOSPITAL
COMMITTEE MEETING COVER MEMO**

To: Governance Committee
From: Cindy Murphy, Director of Governance Services
Date: May 29, 2019
Subject: Progress Against Committees' FY 19 Goals

Purpose:

To update the Governance Committee on the status of the FY19 Committee Goals

Summary:

1. Situation: Annual review of progress towards completion of Committee goals is conducted by the Governance Committee at its last meeting of each fiscal year.
2. Authority: Governance Committee Charter
3. Background: All FY19 Committee Goals are complete or on track to be completed.
4. Assessment: N/A
5. Other Reviews: N/A
6. Outcomes: N/A

List of Attachments:

1. Progress Against FY19 Compliance and Audit Committee Goals
2. Progress Against FY19 Executive Compensation Committee Goals
3. Progress Against FY19 Finance Committee Goals
4. Progress Against FY19 Governance Committee Goals
5. Progress Against FY19 Investment Committee Goals
6. Progress Against FY19 Quality, Patient Care and Patient Experience Committee Goals

Suggested Committee Discussion Questions: None. This is a consent item.

FY19 COMMITTEE GOALS

Compliance and Audit Committee

PURPOSE

The purpose of the Compliance and Audit Committee (the "Committee") is to advise and assist the El Camino Hospital (ECH) Hospital Board of Directors ("Board") in its exercise of oversight of Corporate Compliance, Privacy, Internal and External Audit, Enterprise Risk Management, and Information Technology (IT) Security. The Committee will accomplish this by monitoring the compliance policies, controls, and processes of the organization and the engagement, independence, and performance of the internal auditor and external auditor. The Committee assists the Board in oversight of any regulatory audit and in assuring the organizational integrity of ECH in a manner consistent with its mission and purpose.

STAFF: **Diane Wigglesworth**, Sr. Director, Corporate Compliance (Executive Sponsor)

The Sr. Director, Corporate Compliance shall serve as the primary staff to support the Committee and is responsible for drafting the Committee meeting agenda for the Committee Chair's consideration. Additional members of the Executive Team or outside consultants may participate in the meetings upon the recommendation of the Executive Sponsor and at the discretion of the Committee Chair.

GOALS	TIMELINE	METRICS
1. Review the Hospital's Compliance Program internal assessment compared to DOJ 2017 Compliance Program guidance on the evaluation of Compliance Programs	Q2 FY19	Committee recommends changes in Compliance Program to Compliance Officer – reviewed on 11/15/18 meeting
2. Ensure strategic alignment and proper oversight of the Enterprise Risk Management (ERM) Program	Q3 FY19	Committee reviews and provides guidance to the Board on the ERM Program, including developing a risk escalation process and ensuring regular reporting to the Board on ERM - reviewed on 2/6/19 meeting and provided guidance to Board at 3/13/19 meeting
3. Review results of IT metrics tracked during the fiscal year to ensure metrics support appropriate oversight	Q4 FY19	Committee reviews and provides recommendations to the CIO – reviewed at 5/16/19 meeting
4. Review ECH's IT Security Program, specifically as it relates to medical device security	Q4 FY19	Committee reviews controls related to medical device security (including any applicable procedure updates) – reviewed at 5/16/19 meeting

SUBMITTED BY:

Chair: Sharon Anolik Shakked

Executive Sponsor: Diane Wigglesworth

Approved by the El Camino Hospital Board on June 13, 2018

FY19 COMMITTEE GOALS (Progress as of 4/2/2019)

Executive Compensation Committee

PURPOSE

The purpose of the Executive Compensation Committee (the "Committee") is to assist the El Camino Hospital (ECH) Hospital Board of Directors ("Board") in its responsibilities related to the Hospital's executive compensation philosophy and policies. The Committee will advise the Board to meet all legal and regulatory requirements as it relates to executive compensation.

STAFF: **Kathryn Fisk**, Chief Human Resources Officer (Executive Sponsor); **Julie Johnston**, Director, Total Rewards;
Cindy Murphy, Director of Governance Services

The CHRO shall serve as the primary staff to support the Committee and is responsible for drafting the Committee meeting agenda for the Committee Chair's consideration. The CEO, and other staff members as appropriate, may serve as a non-voting liaison to the Committee and may participate at the discretion of the Committee Chair. These individuals shall be recused when the Committee is reviewing their individual compensation.

GOALS	TIMELINE	METRICS
1. Advise the Board ensuring strategic alignment and proper oversight of compensation-related decisions including performance incentive goal-setting and plan design	<ul style="list-style-type: none"> - Review FY18 Org Scores (Q1) - Review and approve (or recommend) FY18 Individual Scores and Payout amounts (Q1) - Receive status update on FY19 progress toward goals and overview of FY20 strategic priorities (Q3) - Receive FY20 market analysis report - Receive FY20 market analysis and review and approve (or recommend) CEO's base salary recommendations (Q4) - Review proposed FY20 org and individual goals (Q4) 	<ul style="list-style-type: none"> - Committee (or Board) approves FY18 Executive Performance Incentive Scores and Payouts (October 2018) COMPLETED - Board approves FY18 Executive Performance Incentive Scores and Payouts (October 2018) COMPLETED - Board approves Letters of Reasonableness (January 2019) COMPLETED - Committee (or Board) approves FY20 Executive Base Salaries (May/June 2019) ON TRACK - Board approves FY20 CEO Base Salary (June 2019) ON TRACK - Committee (or Board) approves FY20 Individual Executive Incentive Goals (May/June 2019) ON TRACK - Board approves FY20 Org Goals (June 2019) ON TRACK
2. Support successful implementation of changes in Board's delegation of authority to the Committee	<ul style="list-style-type: none"> - Evaluate effectiveness of changes in process (Q4) - Discuss impact of the delegation change on the effectiveness of the Committee and Committee meetings (Q4) 	<ul style="list-style-type: none"> - Report to the Board regarding effectiveness of changes and proposed changes or process improvements (June 2019) ON TRACK
3. Evaluate the effectiveness of the independent compensation consultant	<ul style="list-style-type: none"> - Survey Committee members and administrative staff on performance of current consultant and determine whether or not to conduct an RFP (Q1) - If conducting an RFP, complete selection process (Q2) 	<ul style="list-style-type: none"> - Determine whether or not to conduct an RFP (September 2018) COMPLETED - Renewal of Consulting Agreement or selection of another firm (no later than December 31, 2018) Extension COMPLETED - If new firm selected, select by December 31, 2018 and complete contracting by February 10, 2019 -- N/A

SUBMITTED BY:

Chair: Bob Miller

Executive Sponsor: Kathryn Fisk

Approved by the El Camino Hospital Board on June 13, 2018

FY19 COMMITTEE GOALS

Finance Committee

PURPOSE

The purpose of the Finance Committee (the "Committee") is to provide oversight, information sharing, and financial reviews related to budgeting, capital budgeting, long-range financial planning and forecasting, and monthly financial reporting for the El Camino Hospital (ECH) Hospital Board of Directors ("Board"). In carrying out its review, advisory, and oversight responsibilities, the Finance Committee shall remain flexible in order to best define financial strategies that react to changing conditions.

STAFF: **Iftikhar Hussain**, Chief Financial Officer (Executive Sponsor)

The CFO shall serve as the primary staff to support the Committee and is responsible for drafting the Committee meeting agenda for the Committee Chair's consideration. Additional members of the Executive Team may participate in the meetings upon the recommendation of the Executive Sponsor and at the discretion of the Committee Chair.

GOALS	TIMELINE	METRICS
1. Review major capital projects	Each regular meeting	Update on major capital projects in progress COMPLETED
2. Review two education topics: 1) Medicare Loss and 2) Inpatient and Outpatient Margins	Q1	Presentation at the July meeting COMPLETED
3. Post-Implementation review	Q2	Review results of major investments after their first year of implementation COMPLETED
4. Review the top three (3) service lines: 1) Heart & Vascular Institute (HVI), 2) Oncology, and 3) Behavioral Health Services (BHS)	- HVI (Q1) - Oncology (Q2) - BHS (Q3)	Presentations in September, November, and March. BHS moved to March from Jan to allow review of Ad Hoc Committee work. HVI follow up scheduled for the May meeting. COMPLETED

SUBMITTED BY:

Chair: John Zoglin

Executive Sponsor: Iftikhar Hussain

Approved by the El Camino Hospital Board on June 13, 2018

FY19 COMMITTEE GOALS

Governance Committee

PURPOSE

The purpose of the Governance Committee (the “Committee”) is to advise and assist the El Camino Hospital (ECH) Hospital Board of Directors (“Board”) in matters related to governance, board development, board effectiveness, and board composition, *i.e.*, the nomination and appointment/reappointment process. The Governance Committee ensures the Board and Committees are function at the highest level of governance standards.

STAFF: **Dan Woods**, Chief Executive Officer (Executive Sponsor); **Cindy Murphy**; Director of Governance Services

The CEO shall serve as the primary staff to support the Committee and is responsible for drafting the Committee meeting agenda for the Committee Chair’s consideration. Additional members of the Executive Team may participate in the meetings upon the recommendation of the Executive Sponsor and at the discretion of the Committee Chair.

GOALS	TIMELINE	METRICS
1. Review the governance structure of the Hospital Board, conduct research, and make recommendations on preferred competencies	Q1 FY19	- Recommendation for high-priority Hospital Board member competencies made to Hospital and District Board COMPLETED 8/7/18
	Q4 FY19	- Chair nominates Governance Committee member to serve on District Board Ad Hoc Committee and participate in the Non-District Board Member recruitment/interview process as requested by the District Board COMPLETE - C. Lai serving
	Q4 FY19	- Assess implementation of changes to ECH Board Structure and make recommendations PACED FOR AUGUST 2019
2. Promote, enhance, and sustain competency-based, efficient, effective governance	Q2-Q3 FY19	- FY19 Self-Assessment Tool recommended to the Board (Q2) and survey completed (Q3) BOARD APPROVED ASSESSMENT TOOL on 4/10; SURVEY LAUNCHED 5/14
	Q3-Q4 FY19	- Reports are completed and made available to the Board and the District Board (Q3-Q4) WILL DO WHEN BOARD ASSESSMENT COMPLETE IN Q1 FY20
	Quarterly	- Monitor progress toward achievement of FY19 Board Goals REVIEWED AT 3/5/19 MTG.
3. Develop Board and Committee Education Plan for FY19	Q1 FY19	- Develop and recommend FY19 Board and Committee Education Plan DISCUSSED AT 8/7/18 MTG; APRIL ED SESSION DISCUSSED AT 3/5 MTG
	Q2 FY19	- Recommend FY19 Annual Retreat Agenda to the Board COMPLETED 8/7/18

SUBMITTED BY:

Chair: Peter C. Fung, MD | **Executive Sponsor:** Dan Woods

Approved by the El Camino Hospital Board on June 13, 2018

FY19 COMMITTEE GOALS

Investment Committee

PURPOSE

The purpose of the Investment Committee (the "Committee") is develop and recommend to the El Camino Hospital (ECH) Hospital Board of Directors ("Board") the investment policies governing the Hospital's assets, maintain current knowledge of the management and investment funds of the Hospital, and provide oversight of the allocation of the investment assets.

STAFF: **Iftikhar Hussain**, Chief Financial Officer (Executive Sponsor)

The CFO shall serve as the primary staff to support the Committee and is responsible for drafting the Committee meeting agenda for the Committee Chair's consideration. Additional members of the Executive Team may participate in the meetings upon the recommendation of the Executive Sponsor and at the discretion of the Committee Chair.

GOALS	TIMELINE	METRICS
1. Review performance of consultant recommendations of managers and asset allocations	Each quarter – ongoing	Committee to review selection of money managers and make recommendations to the CFO - Complete
2. Educate the Board and Committee: investment strategy in volatile markets	Q1 FY19	Completed by the end of Q1 - Committee received report in August 2018. Report is going to the ECH Board in June.
3. Asset Allocation, Investment Policy review, and ERM framework	Q3 FY19	Completed by February 2019 – Investment Policy review and revision completed in November and February. Approved by the Board in March. Asset Allocation and ERM Framework completed May 13, 2019.

SUBMITTED BY:

Chair: Jeffrey Davis, MD

Executive Sponsor: Iftikhar Hussain

Approved by the El Camino Hospital Board on June 13, 2018

FY19 COMMITTEE GOALS

Quality, Patient Care and Patient Experience Committee

PURPOSE

The purpose of the Quality, Patient Care and Patient Experience Committee (the “Committee”) is to advise and assist the El Camino Hospital (ECH) Hospital Board of Directors (“Board”) in constantly enhancing and enabling a culture of quality and safety at ECH, to ensure delivery of effective, evidence-based care for all patients, and to oversee quality outcomes of all services of ECH. The Committee helps to assure that exceptional patient care and patient experiences are attained through monitoring organizational quality and safety measures, leadership development in quality and safety methods, and assuring appropriate resource allocation to achieve this purpose.

STAFF: **Mark Adams**, Chief Medical Officer (Executive Sponsor)

The CMO shall serve as the primary staff to support the Committee and is responsible for drafting the Committee meeting agenda for the Committee Chair’s consideration. Additional clinical representatives and members of the Executive Team may participate in the meetings upon the recommendation of the Executive Sponsor and at the discretion of the Committee Chair. These may include: the Chiefs/Vice Chiefs of the Medical Staff, physicians, nurses, and members from the community advisory councils, or the community at-large.

GOALS	TIMELINE	METRICS
1. Review the Hospital’s organizational goals and scorecard and ensure that those metrics and goals are consistent with the strategic plan and set at an appropriate level as they apply to quality	- FY18 Achievement and Metrics for FY19 (Q1 FY19) - FY20 Goals (Q3 – Q4)	Review management proposals; provide feedback and make recommendations to the Board – reviewed FY18 results on 9/5/18; FY20 goals review paced for 5/6/19
2. Alternatively (every other year) review peer review process and medical staff credentialing process; monitor and follow through on the recommendations	Q2	- Receive update on implementation of peer review process changes (FY20) N/A - Review Medical Staff credentialing process (FY19) – COMPLETE - reviewed at 10/1/2018 meeting
3. Review Quality, Patient Care and Patient Experience reports and dashboards	- FY19 Quality Dashboard (Q1-Q2 proposal; monthly for review and discussion, if needed) - CDI Core Measures, PSI-90, Readmissions, Patient Experience (HCAHPS), ED Patient Satisfaction (x2 per year) - Leapfrog survey results and VBP calculation reports (annually)	Review reports per timeline – on track
4. Oversee execution of the Patient and Family-Centered Care plan and LEAN management activities and cultural transformation work	Quarterly	Review plan and progress; provide feedback to management – paced quarterly
5. Monitor the impact of interventions to reduce mortality and readmissions	Quarterly	Review progress toward meeting quality organizational goals – on the FY19 dashboard

SUBMITTED BY:

Chair: David Reeder

Executive Sponsor: Mark Adams, MD, CMO

Approved by the El Camino Hospital Board on June 13, 2018



GOVERNING HEALTH

UPDATE FOR THE BOARD'S NOMINATING COMMITTEE

May 10, 2019

The Board's Nominating Committee will benefit from an awareness of a series of recent, important governance developments relating to the Committee's responsibilities; e.g., board size, overboarding, and director turnover and refreshment.

Board Size. Tesla recently announced its decision to reduce its board size from 11 to seven directors over the next several years as part of a gradual effort to increase the number of independent directors on its board, and more broadly to increase the effectiveness of board oversight.

The Tesla action is likely to attract broader attention in the corporate world. Many CEOs, focused on concerns of board efficiency, are attracted to the smallest board size possible. Yet particularly with boards of less than 10 members, questions about engagement and effectiveness of oversight are paramount.

Overboarding. Also noteworthy is the latest development focused on "overboarding" and its relationship to director effectiveness. The asset manager Vanguard's new proxy voting guidelines for U.S. portfolio companies essentially limit a board member to no more than four directorships (and only one outside board directorship for the CEO), in order to help address the demands of board and committee membership.

The ultimate focus of overboarding guidelines is on the governance relationship between experience offered by holding multiple board positions and the engagement risks arising from being over-extended by board service and other distractions.

The Conference Board Survey. Perhaps **the most impactful development** is a recent survey of corporate board practices of the "Russell 3000" conducted by The Conference Board. The survey notes that despite the "profound transformation" of corporate governance in the last two decades, the composition of the board of directors has not changed as rapidly as other governance practices.

The Conference Board's findings provide important context to the current debate on board refreshment practices and the diversification of director expertise, qualifications and experience. It identifies the key reasons why progress towards a diverse board remains limited: the average director tenure remains lengthy; board seats rarely become open; and when they do, the spot is frequently taken by an experienced director rather than a "new face" with little or no previous board experience.

For further information on The Conference Board "Corporate Board Practices" Report:

<http://www.forbes.com/sites/michaelperegrine/2019/05/10/the-nominating-c...strong-headwinds>

GET IN TOUCH



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**EL CAMINO HOSPITAL
COMMITTEE MEETING COVER MEMO**

To: Governance Committee
From: Cindy Murphy, Director of Governance Services
Date: May 29, 2019
Subject: Report on Board Actions

Purpose:

To keep the Committee informed with regards to actions taken by the El Camino Hospital and El Camino Healthcare District Boards.

Summary:

1. Situation: It is important to keep the Committees informed about Board activity to provide context for Committee work. The list below is not meant to be exhaustive, but includes agenda items the Board voted on that are most likely to be of interest to or pertinent to the work of El Camino Hospital's Board Advisory Committees.
2. Authority: This is being brought to the Committees at the request of the Board and the Committees.
3. Background: Since the last Executive Governance Committee Meeting the Hospital Board has met twice and the District Board has met twice. In addition, the Board has delegated certain authority to the Finance Committee and the Executive Compensation Committee. Going forward, those approvals will also be noted in this report.

A. ECH Board Actions

April 10, 2019

- Approved FY19 Period 7 and Period 8 Financial Reports.
- Approved the Annual Board Assessment Tool and Process to be Conducted by Via Healthcare Consulting

May 8, 2019

- Approved Resolution 2019-06 acknowledging the Stroke Team for receiving Thrombectomy Capable Stroke Center Designation from The Joint Commission
- Elected Board Officers for Two-Year Term effective July 1, 2019
 - o Lanhee Chen, Board Chair
 - o John Zoglin, Vice Chair
 - o Julia Miller Secretary/Treasurer
- Approved Revised Executive Incentive Plan Policy

B. ECHD Board Actions

May 20, 2019

- Approved motion to include Jeffrey Davis MD among candidates to be considered for open ECH Board seats.

Report on Board Actions
May 29, 2019

May 21, 2019

- Elected Jack Po, MD, PhD to the El Camino Hospital Board of Directors for a three year term effective July 1, 2019 expiring on June 30, 2022
- Elected Don Watters to the El Camino Hospital Board of Directors for a term effective immediately expiring on December 4, 2020.

C. Finance Committee and Compliance and Audit Committee Actions

- Approved Annual Report of Physician Financial Arrangements

D. Executive Compensation Committee Actions: None Since Last Meeting

4. Assessment: N/A
5. Other Reviews: N/A
6. Outcomes: N/A

List of Attachments: None.

Suggested Committee Discussion Questions: None

JULY 2019

S	M	T	W	T	F	S
30	1	2	3	4 July 4th	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29 FC	30	31	1	2	3

AUGUST 2019

S	M	T	W	T	F	S
28	29	30	31	1	2	3
4	5 QC	6	7	8	9	10
11	12 IC	13 GC	14	15 CC	16	17
18	19	20	21 ECHB	22	23	24
25	26	27	28	29	30	31

SEPTEMBER 2019

S	M	T	W	T	F	S
1	2 Labor Day	3	4	5	6	7
8	9 QC	10	11 ECHB	12	13	14
15	16	17	18	19 ECC	20	21
22	23 FC	24	25	26 CC	27	28
29	30	1	2	3	4	5

OCTOBER 2019

S	M	T	W	T	F	S
29	30	1	2	3	4	5
6	7 QC	8	9 ECHB?	10 ECHB?	11	12
13	14	15 GC	16	17	18	19
20	21	22 ECHD	23 Education	24	25	26
27	28	29	30	31	1	2

NOVEMBER 2019

S	M	T	W	T	F	S
27	28	29	30	31	1	2
3	4 QC	5	6 ECHB	7 ECC	8	9
10	11 IC	12	13	14	15	16
17	18	19	20	21 CC	22	23
24	25 FC	26	27	28 Thanksgiving	29	30

DECEMBER 2019

S	M	T	W	T	F	S
1	2 QC	3	4	5	6	7
8	9	10	11 ECHB	12	13	14
15	16	17	18	19	20	21
22	23	24 Xmas Eve	25 Xmas Day	26	27	28
29	30	31	1	2	3	4

JANUARY 2020

S	M	T	W	T	F	S
29	30	31	1 New Year's	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20 MLK Day	21 ECHD	22	23 CC	24	25
26	27 FC* IC	28	29	30	31	1

FEBRUARY 2020

S	M	T	W	T	F	S
26	27	28	29	30	31	1
2	3 QC	4 GC	5	6	7	8
9	10 IC	11	12 ECHB	13	14	15
16 ski wk	17 President's	18	19	20	21	22
23	24	25	26 Retreat	27	28	29

MARCH 2020

S	M	T	W	T	F	S
1	2 QC	3	4	5	6	7
8	9	10	11 ECHB	12	13	14
15	16	17 ECHD	18	19 CC	20	21
22	23 FC	24	25	26	27	28
29	30	31 GC	1	2	3	4

APRIL 2020

S	M	T	W	T	F	S
29	30	31	1	2 ECC	3	4
5 spr bk	6 QC	7	8	9	10	11
12	13	14	15 ECHB	16	17	18
19	20	21	22 Education	23	24	25
26	27 FC	28	29	30	1	2

MAY 2020

S	M	T	W	T	F	S
26	27	28	29	30	1	2
3	4 QC	5	6	7	8	9
10	11 IC	12	13 ECHB	14	15	16
17	18	19 ECHD	20	21 CC	22	23
24/31	25 Memorial	26 ECHB FC*	27	28 ECC	29	30

JUNE 2020

S	M	T	W	T	F	S
31	1 QC	2 GC	3	4	5	6
7	8	9	10 ECHB	11	12	13
14	15	16 ECHD	17	18	19	20
21	22	23	24	25	26	27
28	29	30	1	2	3	4

District Board ECHD	Hospital Board ECHB	Compliance CC	Executive Comp ECC	Finance FC	Governance GC	Investment IC	Quality QC	Educational Sessions	Board Retreat
5x per year 3 rd Tuesday + after election	10x per year 2 nd Wednesday (traditional)	6x per year 3 rd Thursday	4x per year Thursdays	7x per year 4 th or Last Monday	5x per year 1 st Tuesday	4x per year 2 nd Monday	10x per year 1 st Monday	2x per year 4 th Wednesday	1x per year

**EL CAMINO HOSPITAL
COMMITTEE MEETING COVER MEMO**

To: Governance Committee
From: Cindy Murphy, Director of Governance Services
Date: May 29, 2019
Subject: Proposed FY20 Committee Goals

Purpose:

To obtain the Governance Committee's recommendation that the Board approve the proposed FY20 committee goals.

Summary:

1. Situation: Each Committee has developed proposed goals for FY20. To ensure that the board has oversight of the areas of focus for each Committee, the goals are brought forward through the Governance Committee each year for approval.
2. Authority: Governance Committee Charter
3. Background: Every year, each of the Advisory Committees develops goals for the upcoming fiscal year. All of the committees have done so for FY20; their recommended goals are attached.
4. Assessment: N/A
5. Other Reviews: All Committees
6. Outcomes: N/A

List of Attachments:

1. Proposed FY20 Compliance and Audit Committee Goals
2. Proposed FY20 Executive Compensation Committee Goals
3. Proposed FY20 Finance Committee Goals
4. Proposed FY20 Governance Committee Goals
5. Proposed FY20 Investment Committee Goals
6. Proposed FY20 Quality, Patient Care and Patient Experience Committee Goals

Suggested Committee Discussion Questions:

1. Are the proposed Committee goals at the correct strategic level?
2. Do they reflect important strategic issues facing the Board in FY20?
3. Are the proposed Committee goals "SMART" (Specific, Measurable, Relevant, Attainable, Time Bound)?

DRAFT
FY20 COMMITTEE GOALS
Compliance and Audit Committee

PURPOSE

The purpose of the Compliance and Audit Committee (the "Committee") is to advise and assist the El Camino Hospital (ECH) Hospital Board of Directors ("Board") in its exercise of oversight of Corporate Compliance, Privacy, Internal and External Audit, Enterprise Risk Management, and Information Technology (IT) Security. The Committee will accomplish this by monitoring the compliance policies, controls, and processes of the organization and the engagement, independence, and performance of the internal auditor and external auditor. The Committee assists the Board in oversight of any regulatory audit and in assuring the organizational integrity of ECH in a manner consistent with its mission and purpose.

STAFF: **Diane Wigglesworth**, Sr. Director, Corporate Compliance (Executive Sponsor)

The Sr. Director, Corporate Compliance shall serve as the primary staff to support the Committee and is responsible for drafting the Committee meeting agenda for the Committee Chair's consideration. Additional members of the Executive Team or outside consultants may participate in the meetings upon the recommendation of the Executive Sponsor and at the discretion of the Committee Chair.

GOALS	TIMELINE	METRICS
1. Review reporting from the new compliance program incident management tool and assess if the level of detail is sufficient for the committee's oversight.	Q2 FY20	Committee reviews and provides recommendations to the Compliance Officer
2. Review the hospital's assessment and any action plans if necessary of the impact of the new 2020 California Consumer Privacy Act on Hospital operations.	Q3 FY20	Committee reviews and provides recommendations to the Compliance Officer
3. Review the results and mitigation action plan if necessary from the privacy and security risk assessment of SVMD operations.	Q3 FY20	Committee reviews and provides recommendations to the Compliance Officer
4. Review ECH's IT Security Strategic Plan.	Q4 FY20	Committee reviews and provides recommendations to CIO

SUBMITTED BY:

Chair: Sharon Anolik Shakked

Executive Sponsor: Diane Wigglesworth

DRAFT
FY20 COMMITTEE GOALS
 Executive Compensation Committee

PURPOSE

The purpose of the Executive Compensation Committee (the "Committee") is to assist the El Camino Hospital (ECH) Hospital Board of Directors ("Board") in its responsibilities related to the Hospital's executive compensation philosophy and policies. The Committee will advise the Board to meet all legal and regulatory requirements as it relates to executive compensation.

STAFF: **Kathryn Fisk**, Chief Human Resources Officer (Executive Sponsor); **Julie Johnston**, Director, Total Rewards;
Cindy Murphy, Director of Governance Services

The CHRO shall serve as the primary staff to support the Committee and is responsible for drafting the Committee meeting agenda for the Committee Chair's consideration. The CEO, and other staff members as appropriate, may serve as a non-voting liaison to the Committee and may participate at the discretion of the Committee Chair. These individuals shall be recused when the Committee is reviewing their individual compensation.

GOALS	TIMELINE	METRICS
1. Advise the Board ensuring strategic alignment and proper oversight of compensation-related decisions including performance incentive goal-setting and plan design	<ul style="list-style-type: none"> - Review and recommend FY19 Org Scores (Q1) - Review and approve FY19 Individual Scores and Payout amounts (Q1) - Review and recommend approval of letter of reasonableness (Q3) - Review and approve FY21 executive base salaries (not including the CEO) (Q4) - Review and recommend proposed FY21 organizational goals (Q4) - Review and approve FY21 individual goals (Q4) 	<ul style="list-style-type: none"> - Board approves FY19 organizational score (Q1/2) - Committee approves FY19 Executive Performance Incentive Scores and Payouts (Q1) - Board approves Letter of Reasonableness (Q3) - Committee approves FY21 executive base salaries (not including the CEO) (Q4) - Board approves FY21 organizational goals (Q4) - Committee approves FY21 individual goals (Q4)
2. Evaluate the effectiveness of the independent compensation consultant and the Committee	<ul style="list-style-type: none"> - Review consultant performance (Q2) - Complete ECC self-assessment (Q3) 	<ul style="list-style-type: none"> - Complete assessment of consultant (Q2) - Board Chair reviews cost/value of consultant (Q2) - Committee discusses results of self-assessment (Q4)
3. Review Leadership Development/Succession Planning	<ul style="list-style-type: none"> - Review CEO FY19 performance review process (Q1) - Review Leadership Development and Succession Plan (Q4) 	<ul style="list-style-type: none"> - Board Chair completes CEO review (Q1) - CHRO updates Committee on leadership (Q4)

SUBMITTED BY:

Chair: Bob Miller

Executive Sponsor: Kathryn Fisk

DRAFT
FY20 COMMITTEE GOALS
Finance Committee

PURPOSE

The purpose of the Finance Committee (the "Committee") is to provide oversight, information sharing, and financial reviews related to budgeting, capital budgeting, long-range financial planning and forecasting, and monthly financial reporting for the El Camino Hospital (ECH) Hospital Board of Directors ("Board"). In carrying out its review, advisory, and oversight responsibilities, the Finance Committee shall remain flexible in order to best define financial strategies that react to changing conditions.

STAFF: **Iftikhar Hussain**, Chief Financial Officer (Executive Sponsor)

The CFO shall serve as the primary staff to support the Committee and is responsible for drafting the Committee meeting agenda for the Committee Chair's consideration. Additional members of the Executive Team may participate in the meetings upon the recommendation of the Executive Sponsor and at the discretion of the Committee Chair.

GOALS	TIMELINE	METRICS
1. Review major capital projects	Each regular meeting	Update on major capital projects in progress
2. Evaluate consumer-facing bills for ease of understanding, including patient portal (MyChart)	Q1	Review 5 – 10 bills with common/usual diagnoses/procedures and make recommendations to staff and Board
3. Review the top three (3) service lines: 1) Heart & Vascular Institute (HVI), 2) Ortho, Neuro and Spine, and 3) MCH	- HVI (Q1) - Ortho, Neuro and Spine (Q2) - MCH (Q3)	Presentations in September, November, and March

SUBMITTED BY:

Chair: John Zoglin

Executive Sponsor: Iftikhar Hussain

DRAFT
FY20 COMMITTEE GOALS
 Governance Committee

PURPOSE

The purpose of the Governance Committee (the "Committee") is to advise and assist the El Camino Hospital (ECH) Hospital Board of Directors ("Board") in matters related to governance, board development, board effectiveness, and board composition, *i.e.*, the nomination and appointment/reappointment process. The Governance Committee ensures the Board and Committees are function at the highest level of governance standards.

STAFF: **Dan Woods**, Chief Executive Officer (Executive Sponsor); **Cindy Murphy**, Director of Governance Services

The CEO shall serve as the primary staff to support the Committee and is responsible for drafting the Committee meeting agenda for the Committee Chair's consideration. Additional members of the Executive Team may participate in the meetings upon the recommendation of the Executive Sponsor and at the discretion of the Committee Chair.

GOALS	TIMELINE	METRICS
1. Review the governance structure of the Hospital Board, conduct research, and make recommendations on preferred competencies	Q1 FY20 Q4 FY20 Q4 FY20	<ul style="list-style-type: none"> - Recommendation for high-priority Hospital Board member competencies made to Hospital and District Board - Chair nominates Governance Committee member to serve on District Board Ad Hoc Committee and participate in the Non-District Board Member recruitment/interview process as requested by the District Board - Assess implementation of changes to ECH Board Structure and make recommendations
2. Promote, enhance, and sustain competency-based, efficient, effective governance	Q4 FY19 –Q1 FY21 Q1- FY20	<ul style="list-style-type: none"> - FY19 Self-Assessment Survey Completed (Q4 FY19 – Q1 FY20) - FY20 Self-Assessment Tool recommended to the Board (Q3) and survey completed (Q4 FY20 – Q1 FY21) - Reports are completed and made available to the Board and the District Board (Q1) - Develop FY20 Board Goals (Q1)
3. Develop Board and Committee Education Plan for FY20	Q1 FY20 Q2 FY20	<ul style="list-style-type: none"> - Develop and recommend FY20 Board and Committee Education Plan - Recommend FY20 Annual Retreat Agenda to the Board

SUBMITTED BY:

Chair: Peter C. Fung, MD

Executive Sponsor: Dan Woods

DRAFT
FY20 COMMITTEE GOALS
Investment Committee

PURPOSE

The purpose of the Investment Committee is to develop and recommend to the El Camino Hospital (ECH) Board of Directors ("Board") the investment policies governing the Hospital's assets, maintain current knowledge of the management and investment funds of the Hospital, and provide oversight of the allocation of the investment assets.

STAFF: **Iftikhar Hussain**, Chief Financial Officer (Executive Sponsor)

The CFO shall serve as the primary staff to support the Committee and is responsible for drafting the Committee meeting agenda for the Committee Chair's consideration. Additional members of the Executive Team or hospital staff may participate in the meetings upon the recommendation of the CFO and at the discretion of the Committee Chair. The CEO is an ex-officio member of this Committee.

GOALS	TIMELINE	METRICS
1. Review performance of consultant recommendations of managers and asset allocations	Each quarter - ongoing	Committee to review selection of money managers and make recommendations to the CFO
2. Education Topic: Environmental and Social Governance	FY20 Q1	Complete by the August 2020
3. Asset Allocation, Investment Policy Review and ERM framework including Efficient Frontier	Q4	Completed by May 2020

SUBMITTED BY:

Chair: Jeffrey Davis, MD

Executive Sponsor: Iftikhar Hussain

FY20 COMMITTEE GOALS
Quality, Patient Care and Patient Experience Committee
PURPOSE

The purpose of the Quality, Patient Care and Patient Experience Committee (the "Committee") is to advise and assist the El Camino Hospital (ECH) Hospital Board of Directors ("Board") in constantly enhancing and enabling a culture of quality and safety at ECH, to ensure delivery of effective, evidence-based care for all patients, and to oversee quality outcomes of all services of ECH. The Committee helps to assure that exceptional patient care and patient experiences are attained through monitoring organizational quality and safety measures, leadership development in quality and safety methods, and assuring appropriate resource allocation to achieve this purpose.

STAFF: **Mark Adams**, Chief Medical Officer (Executive Sponsor)

The CMO shall serve as the primary staff to support the Committee and is responsible for drafting the Committee meeting agenda for the Committee Chair's consideration. Additional clinical representatives and members of the Executive Team may participate in the meetings upon the recommendation of the Executive Sponsor and at the discretion of the Committee Chair. These may include: the Chiefs/Vice Chiefs of the Medical Staff, physicians, nurses, and members from the community advisory councils, or the community at-large.

GOALS	TIMELINE	METRICS
1. Review the Hospital's organizational goals and scorecard and ensure that those metrics and goals are consistent with the strategic plan and set at an appropriate level as they apply to quality	- FY19 Achievement and Metrics for FY20 (Q1 FY20) - FY21 Goals (Q3 – Q4)	Review management proposals; provide feedback and make recommendations to the Board
2. Alternatively (every other year) review peer review process and medical staff credentialing process; monitor and follow through on the recommendations	Q2	- Receive update on implementation of peer review process changes (FY20) - Review Medical Staff credentialing process (FY21)
3. Review Quality, Patient Care and Patient Experience reports and dashboards	- FY21 Quality Dashboard (Q1-Q2 proposal; monthly for review and discussion, if needed) - CDI Core Measures, PSI-90, Readmissions, Patient Experience (HCAHPS), ED Patient Satisfaction (x2 per year) - Leapfrog survey results and VBP calculation reports (annually)	Review reports per timeline –
4. Oversee execution of the Patient and Family-Centered Care plan and LEAN management activities and cultural transformation work	Quarterly	Review plan and progress; provide feedback to management –
5. All committee members regularly attend and are engaged in committee meeting preparation and discussions	Review quarterly at the end of the meeting	Attend 2/3 of all meetings in person Actively participate in discussions at each meeting
6. Monitor the impact of interventions to reduce mortality and readmissions	Quarterly	Review progress toward meeting quality organizational goals

SUBMITTED BY: Chair: Julie Kliger, MPA, BSN

Executive Sponsor: Mark Adams, MD, CMO

This document is in process and will be made available when ready, and may be presented verbally at the meeting.

Governance Committee

Created April 4, 2019

Proposed FY20 GC Pacing Plan – Q1		
July 2019	August 13, 2019	September 2019
<p><i>No scheduled meeting</i></p> <p><i>At each meeting:</i></p> <p>Regular Consent Calendar Items: Minutes, Committee Recruitment Update, Article of Interest</p> <p>Other Regular Items:</p> <ul style="list-style-type: none"> - Board Recruitment Update - Report on Board Actions 	<ul style="list-style-type: none"> - Consider Hospital Board Member Competencies for FY20/21 - FY20 Board Education Plan <ul style="list-style-type: none"> o Topics for Semi-Annual Board and Committee Education Sessions o Topic for Annual Retreat (February) - Review Annual Board Self-Assessment (BSA) Results - Develop Proposed Action Plan Based on BSA Results - Consider Revision to ECH Bylaws (# of Board Seats) - Review Composition of Advisory Committees - ECH Leadership Succession Planning 	<p><i>No scheduled meeting</i></p>
FY20 GC Pacing Plan – Q2		
October 15, 2019	November 2019	December 2019
<ul style="list-style-type: none"> - Review and Recommend Annual Board and Committee Self-Assessment Tool (?) - Review Delegations of Authority to Committees - Review Process for Election and Re-Election of Non-District Board Members to the El Camino Hospital Board of Directors - Final Planning October 23 Education Session - Assess Progress on FY20 Board Action Plan <p>Wed., 10/23/2019 Board & Committee Educational Gathering</p>	<p><i>No Scheduled Meeting</i></p>	<p><i>No scheduled meeting</i></p>

Created April 4, 2019

FY20 GC Pacing Plan – Q3		
January 2020	February 4, 2020	March 31, 2020
No scheduled meeting	<ul style="list-style-type: none"> - Planning April Education Session - Assess progress on FY20 Board Action Plan - Final Planning for February 26th Board Retreat - Review and Recommend Annual Board and Committee Self-Assessment Tool (?) 	<ul style="list-style-type: none"> - Set FY21 Governance Committee Dates - Develop FY21 Governance Committee Goals - Final Planning April Education Session
FY20 GC Pacing Plan – Q4		
April 2020	May 2020	June 2, 2020
No scheduled meeting	No scheduled meeting	<ul style="list-style-type: none"> - Review and Recommend all FY20 Committee Goals to Board - Review Proposed Advisory Committee and Committee Chair Assignments - Review Committees' progress against FY19 Goals - Confirm Self-Assessment Sent to District (from GC charter) - Finalize FY20 Master Calendar (for Board approval in June) - Assess ECH Board Structure
<p>Wed. 4/22/2020</p> <p>Board & Committee Educational Gathering</p>	<p>Launch Board and Committee Self-Assessment</p>	

**EL CAMINO HOSPITAL
COMMITTEE MEETING COVER MEMO**

To: Governance Committee
From: Cindy Murphy, Director of Governance Services
Date: May 29, 2019
Subject: Roundtable Discussion

Purpose:

To review the effectiveness of the Committee's meeting.

Summary:

1. Situation: How effective was this meeting?
2. Authority: N/A
3. Background: We included an excerpt from the Governance Institute's "Elements of Governance" Series titled "Board Committees" in the Committee's February 6, 2018 packet. Committee Chair Fung asked that we include the questions posed in the "Committee Meeting Effectiveness Assessment Options" section for the Committee to discuss at the conclusion of the meeting.
4. Assessment: N/A
5. Other Reviews: N/A
6. Outcomes: N/A

List of Attachments: None.

Suggested Committee Discussion Questions:

1. Brief discussion topics: what worked well/should be repeated? What should be changed/added/deleted?
2. Were the meeting packet and agenda helpful?
3. Did key issues receive sufficient attention?
4. Did we spend the right amount of time on each issue?
5. Was there a significant amount of discussion (vs. presentation)?
6. Were discussions kept at the governance level?
7. Did all members participate fully?
8. Did we hold ourselves accountable to the rules of engagement?