



**Minutes of the Open Session of the
Compliance and Audit Committee
of the El Camino Hospital Board of Directors
Thursday, May 21, 2020**

El Camino Hospital | 2500 Hospital Drive, Mountain View, CA 94040

Members Present**

Sharon Anolik Shakked, Chair
Lica Hartman
Jack Po, MD, Vice Chair
Christine Sublett
Don Watters

Members Absent

****All via teleconference**

Agenda Item	Comments/Discussion	Approvals/ Action
1. CALL TO ORDER/ ROLL CALL	The open session meeting of the Compliance and Audit Committee of El Camino Hospital (“the Committee”) was called to order at 5:00pm by Chair Anolik Shakked. All Committee members participated via teleconference and were present at roll call. A quorum was present pursuant to State of California Executive Orders N-25-20 dated March 12, 2020 and N-29-20 dated March 18, 2020.	<i>Called to order at 5:00pm</i>
2. POTENTIAL CONFLICT OF INTEREST	Chair Anolik Shakked asked if any Committee members had a conflict of interest with any of the items on the agenda. No conflicts were reported.	
3. PUBLIC COMMUNICATION	None.	
4. CONSENT CALENDAR	<p>Chair Anolik Shakked asked if any member of the Committee or the public wished to remove any agenda items from the consent calendar. No committee members asked for items to be removed.</p> <p>Chair Anolik Shakked pulled agenda items 4b and 4c for discussion. In regards to Item 4b regarding the Status of FY20 Committee Goals: Chair Anolik Shakked stated that Goal #3 review the results and mitigation action plan of a privacy and security risk assessment of SVMMD will not be met at this meeting due to insufficiency in materials provided. Diane Wigglesworth, Sr. Director, Corporate Compliance, confirmed that there will be a short conversation about the topic during the IT report, and confirmed additional information will be presented at the August meeting. In regards to Item 4c regarding the Proposed FY21 Committee Goals, Chair Anolik Shakked requested clarification on what recommendations the committee would be providing for Goal #3 (related to Board education). Ms. Wigglesworth explained that after the education session, the committee should recommend if any of the information should be presented to the Hospital Board regarding the revisions to the Stark Law and Anti-Kickback Statute. Mary Rotunno, General Counsel, also stated that Goal #3 would also be subjective to when the final rules will be issued. Ms. Wigglesworth asked if the committee would like this goal be removed. Chair Anolik Shakked recommended leaving Goal #3 on the Proposed FY21 Committee Goals.</p> <p>Motion: To approve the consent calendar a) Minutes of the Open Session of the Compliance and Audit Committee Meeting (03/19/2020); and for information: b) Status of FY20 Committee Goals and c) Proposed FY21 Committee Goals.</p> <p>Movant: Hartman</p>	<i>Consent Calendar approved</i>

	<p>Second: Po Ayes: Anolik Shakked, Hartman, Po, Sublett, & Watters Noes: None Abstentions: None Absent: None Recused: None</p>	
<p>5. REPORT ON BOARD ACTIONS</p>	<p>Chair Anolik Shakked asked if any Committee members had any questions about the Report on Board Actions. No questions were reported.</p>	
<p>6. KPIs, SCORECARD, AND TRENDS</p>	<p>Ms. Wigglesworth reported on the Key Performance Indicators. Ms. Wigglesworth noted last year’s YTD numbers included SVMD activity whereas this year’s number do not. She also indicated there were a number of new COVID-19 related issues regarding billing and privacy that were addressed; details are reflected in the logs included in the closed session materials.</p> <p>In response to a committee member’s questions, Ms. Wigglesworth confirmed that there were categories added to this scorecard which explains why some are noted as zero from the previous years. Ms. Hartman suggested for management to state ‘N/A’ instead of putting ‘zero’ for the previous year if categories did not have data gathered. Ms. Wigglesworth also explained that the “Total Incidents” are inquiries or concerns that were brought to the compliance department and not all inquiries are investigated or substantiated one way or the other. Chair Anolik Shakked suggests that the titling be changed to ‘issues’ or ‘reports’ so that it doesn’t unintentionally imply validated concerns.</p>	
<p>7. ADJOURN TO CLOSED SESSION</p>	<p>Motion: To adjourn to closed session at 5:24pm. Movant: Hartman Second: Po Ayes: Anolik Shakked, Hartman, Po, Sublett, & Watters Noes: None Abstentions: None Absent: None Recused: None</p>	<p><i>Adjourned to closed session at 5:24pm</i></p>
<p>8. AGENDA ITEM 16: RECONVENE OPEN SESSION/ REPORT OUT</p>	<p>Open session was reconvened at 7:36pm. Agenda items 8-15 were discussed in closed session. During the closed session, the Committee approved the Minutes of the Closed Session of the Compliance and Audit Committee Meeting (1/23/2020 and 3/19/2020) and the proposed FY21 Internal Audit Work Plan.</p> <p>Ms. Wigglesworth provided an updated to the Committee stating that on the Pacing Calendar in the month of August, management had indicated the SVMD Compliance Program Annual Report would be presented; however, the timing will not work out because the SVMD Board needs to review it first. Therefore, the report will be paced to be received by the committee at the September meeting.</p>	<p><i>Open session reconvened at 7:36pm</i></p>

9. AGENDA ITEM 17: ADJOURNMENT	Motion: To adjourn at 7:40pm. Movant: Watters Second: Sublett Ayes: Anolik Shakked, Hartman, Po, Sublett, & Watters Noes: None Abstentions: None Absent: None Recused: None	<i>Meeting adjourned at 7:40pm</i>
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Attest as to the approval of the foregoing minutes by the Compliance and Audit Committee of El Camino Hospital:

DocuSigned by:



Sharon Anolik Shakked

Chair, Compliance and Audit Committee