

AGENDA

COMPLIANCE AND AUDIT COMMITTEE OF THE EL CAMINO HEALTH BOARD OF DIRECTORS

Monday, September 29, 2025 – 5:00 pm

El Camino Health | 2500 Grant Road, Mountain View, CA 94040 | Sobrato Boardroom 1

Sharon Anolik Shakked will be participating via teleconference from 330 East Strawberry Drive, Mill Valley, CA 94941

Christine Sublett will be participating via teleconference from 5221 Rambler Way, Sacramento, CA 95841

THE PUBLIC IS INVITED TO JOIN THE OPEN SESSION PORTION OF THE MEETING LIVE AT THE ADDRESS
ABOVE OR VIA TELECONFERENCE AT:

1-669-900-9128, MEETING CODE: 957 7842 1988 #. No participant code. Just press #.

To watch the meeting, please visit:

[Compliance and Audit Committee Link](#)

Please note that the livestream is for **meeting viewing only** and there is a slight delay; to provide public comment, please use the phone number listed above.

NOTE: In the event that there are technical problems or disruptions that prevent remote public participation, the Chair has the discretion to continue the meeting without remote public participation options, provided that no Board member is participating in the meeting via teleconference.

A copy of the agenda for the Regular Meeting will be posted and distributed at least seventy-two (72) hours prior to the meeting. In observance of the Americans with Disabilities Act, please notify us at **(650) 988-3218** prior to the meeting so that we may provide the agenda in alternative formats or make disability-related modifications and accommodations.

AGENDA ITEM	PRESENTED BY	ACTION	ESTIMATED TIMES
1. CALL TO ORDER/ROLL CALL	Lica Hartman, Chair		5:00 pm
2. CONSIDER APPROVAL FOR AB 2449 REQUESTS	Lica Hartman, Chair	Possible Motion	5:00 pm
3. POTENTIAL CONFLICT OF INTEREST DISCLOSURES	Lica Hartman, Chair	Information	5:00 pm
4. PUBLIC COMMUNICATION a) Oral Comments <i>This opportunity is provided for persons to address the Board on any matter within the subject matter jurisdiction of the Board that is not on this agenda. Speakers are limited to three (3) minutes each.</i> b) Written Public Comments <i>Comments may be submitted by mail to the El Camino Hospital Board Compliance and Audit Committee at 2500 Grant Avenue, Mountain View, CA 94040. Written comments will be distributed to the Committee as quickly as possible. Please note it may take up to 24 hours for documents to be posted on the agenda.</i>	Lica Hartman, Chair	Information	5:00 pm
5. CONSENT CALENDAR ITEMS <i>Any Committee Member may pull an item for discussion before a motion is made.</i> a) Approve Minutes of the Open Session of the CAC meetings (06/25/2025) b) Receive FY 2026 Committee Pacing Plan c) Receive FY 2026 Committee Goals Status	Lica Hartman, Chair	Motion Required	5:00 – 5:05
6. RECESS TO CLOSED SESSION	Lica Hartman, Chair	Motion Required	5:05 – 5:05

AGENDA ITEM	PRESENTED BY	ACTION	ESTIMATED TIMES
7. RECEIVE FY 2025 CONSOLIDATED FINANCIAL STATEMENTS, 403 (B), AND CASH BALANCE AUDIT RESULTS <i>Gov't Code Section 54956.9(d)(2) – conference with legal counsel – pending or threatened litigation</i>	Joelle Pulver, Moss Adams Bertha Minnihan, Baker Tilly/Moss Adams Theresa Fuentes, Chief Legal Officer	Motion Required	5:05 – 5:30
8. RECEIVE FY 2025 ANNUAL PATIENT SAFETY/CLAIMS REPORT <i>Gov't Code Section 54956.9(d)(2) – conference with legal counsel – pending or threatened litigation</i>	Sheetal Shah, Sr. Director Risk Management & Patient Safety Theresa Fuentes, Chief Legal Officer	Discussion	5:30 – 5:40
9. CYBERSECURITY PROGRAM UPDATE <i>Gov't Code Section 54957(a) –discussion and report regarding cybersecurity threats to essential public services</i>	Deb Muro, CIO Josh Spencer, CISO Theresa Fuentes, Chief Legal Officer	Discussion	5:40 – 6:05
10. INTERNAL AUDIT REPORTS a) Follow-up for ECHMN HR Process Audit b) Hospital Outpatient Charge Capture <i>Gov't Code Section 54956.9(d)(2) – conference with legal counsel – pending or threatened litigation</i>	Peter Goll, Chief Administrative Officer Maria Ocanas, Director ECHMN HR Diane Wigglesworth, VP Compliance Theresa Fuentes, Chief Legal Officer	Discussion	6:05 - 6:20
11. RECEIVE FY 2025 ANNUAL COMPLIANCE PROGRAM REPORT <i>Gov't Code Section 54956.9(d)(2) – conference with legal counsel – pending or threatened litigation</i>	Diane Wigglesworth, VP Compliance Theresa Fuentes, Chief Legal Officer	Discussion	6:20 – 6:35
12. RECEIVE COMPLIANCE PROGRAM REPORTS a) KPI Scorecard and Trends b) Activity Logs - June - August 2025 c) Internal Audit Work Plan FY 2026 d) Internal Audit Follow-Up Table <i>Gov't Code Section 54956.9(d)(2) – conference with legal counsel – pending or threatened litigation</i>	Diane Wigglesworth, VP Compliance Theresa Fuentes, Chief Legal Officer	Discussion	6:35– 6:45
13. APPROVE MINUTES OF THE CLOSED SESSION OF THE COMPLIANCE & AUDIT COMMITTEE a) Minutes of the Closed Session of the CAC Meeting (06/25/25) <i>Gov't Code Section 54957.2 for closed session minutes.</i>	Lica Hartman, Chair	Motion Required	6:45 – 6:50

AGENDA ITEM	PRESENTED BY	ACTION	ESTIMATED TIMES
14. EXECUTIVE SESSION <i>Gov't Code Section 54957(b) for discussion and report on personnel performance matters: Senior Management</i>	Lica Hartman, Chair	Discussion	6:50 – 6:55
15. RECONVENE TO OPEN SESSION	Lica Hartman, Chair	Motion Required	6:55 – 6:55
16. CLOSED SESSION REPORT OUT <i>To report any required disclosures regarding permissible actions taken during Closed Session.</i>	Lica Hartman, Chair	Information	6:55 – 7:00
17. ADJOURNMENT	Lica Hartman, Chair	Motion Required	7:00 pm

Upcoming Meeting: November 5, 2025, March 4, 2026, June 3, 2026

**Minutes of the Open Session of the
Compliance and Audit Committee
of the El Camino Hospital Board of Directors
Wednesday, June 25, 2025**

Members Present

Lica Hartman, Chair
Julia Miller, Vice Chair
Sharon Anolik Shakked **
Sylvia Fong
Jack Po
Christine Sublett **

Members Absent
Guests Present

**via teleconference

Staff Present

Theresa Fuentes, CLO
Tracey Lewis Taylor, COO
Deb Muro, CIO
Diane Wigglesworth, VP, Compliance
Josh Spencer, CISO
Anne Yang, Executive Director,
Governance Services
Gabriel Fernandez, Coordinator,
Governance Services

Agenda Item	Comments/Discussion	Approvals/ Action
1. CALL TO ORDER/ ROLL CALL	Chair Hartman called to order the open session meeting of the Compliance and Audit Committee of El Camino Hospital ("the Committee") at 5:05 p.m. A quorum was present.	<i>Called to order at 5:05 p.m.</i>
2. CONSIDER APPROVAL FOR AB 2449 REQUESTS	Ms. Sublett participated remotely with Just Cause due to caregiving needs of a family member.	
3. POTENTIAL CONFLICT OF INTEREST	Chair Hartman asked if any Committee member had a conflict of interest with any of the items on the agenda. None were reported.	
4. PUBLIC COMMUNICATION	There were no members of the public present in person or via teleconference.	
5. CONSENT CALENDAR	<p>Chair Hartman asked if any members of the Committee would like to remove an item from the Consent Calendar for further discussion. Director Miller removed item c) Receive FY25 Committee Goals.</p> <p>Motion: To approve the consent calendar minus item c) Receive FY25 Committee Goals.</p> <p>Movant: Miller Second: Sublett Ayes: Fong, Hartman, Miller, Po, Sublett, Anolik-Shakked Noes: None Abstentions: None Absent: None Recused: None</p>	<p><i>Consent calendar approved.</i></p> <p><i>Consent calendar item c approved.</i></p>

	<p>Motion: To approve consent calendar item c) Receive FY25 Committee Goals.</p> <p>Movant: Miller</p> <p>Second: Po</p> <p>Ayes: Fong, Hartman, Miller, Po, Sublett, Anolik-Shakke</p> <p>Noes: None</p> <p>Abstentions: None</p> <p>Absent: None</p> <p>Recused: None</p>	
<p>6. REVIEW AND APPROVE REVISED FY2026 COMMITTEE GOALS</p>	<p>Diane Wigglesworth, Vice President of Compliance, and Anne Yang, Executive Director of Governance Services, presented the updated FY2026 Compliance and Audit Committee Goals. Ms. Yang reported that the proposed goals were reviewed during the June 2, 2025, Governance Committee meeting. She further noted that the Governance Committee requested that the stated metrics be clearly measurable and aligned with the written goals.</p> <p>Motion: To approve the revised FY2026 Committee Goals</p> <p>Movant: Sublett</p> <p>Second: Fong</p> <p>Ayes: Fong, Hartman, Miller, Po, Sublett, Anolik-Shakke</p> <p>Noes: None</p> <p>Abstentions: None</p> <p>Absent: None</p> <p>Recused: None</p>	<p>Revised FY2026 Committee Goals approved</p>
<p>7. RECESS TO CLOSED SESSION</p>	<p>Motion: To recess to closed session at 5:22 p.m.</p> <p>Movant: Po</p> <p>Second: Sublett</p> <p>Ayes: Fong, Hartman, Miller, Po, Sublett, Anolik-Shakke</p> <p>Noes: None</p> <p>Abstentions: None</p> <p>Absent: None</p> <p>Recused: None</p>	<p><i>Recess to closed session at 5:22 p.m.</i></p>
<p>8. AGENDA ITEM 16: RECONVENE OPEN SESSION/ REPORT OUT</p>	<p>Agenda items 8 – 15 were covered in Closed Session. Mr. Fernandez reported that during the Closed Session, the Compliance and Audit Committee approved the closed session minutes of the April 23, 2025, meeting.</p>	<p><i>Reconvened to Open Session at 6:57 p.m.</i></p>

9. AGENDA ITEM 17: ADJOURNMENT	Motion: To adjourn at 6:58 p.m. Movant: Fong Second: Shakked Ayes: Fong, Hartman, Miller, Po, Sublett, Anolik-Shakked Noes: None Abstentions: None Absent: None Recused: None	<i>Meeting Adjourned at 6:58 p.m.</i>
---	---	--

**Attest as to the approval of the foregoing minutes by the Compliance and Audit Committee of
El Camino Hospital:**

Gabriel Fernandez
Governance Services Coordinator

Prepared by: Gabriel Fernandez, Governance Services Coordinator
Reviewed by: Diane Wigglesworth, VP of Compliance; Theresa Fuentes, Chief Legal Officer

Compliance and Audit Committee FY26 Pacing Plan

AGENDA ITEM	Q1			Q2			Q3			Q4		
	JUL	AUG	SEP 9/29	OCT	NOV 11/5	DEC	JAN	FEB	MAR 3/4	APR	MAY	JUN 6/3
STANDING AGENDA ITEMS												
Results of Internal Audits			✓		✓				✓			✓
Cybersecurity Program			✓		✓				✓			✓
Enterprise Risk Management (ERM) Metrics					✓				✓			
Discussion Items/Committee Actions												
Review FY 25 Annual Enterprise Compliance Program Report			✓									
Review FY 25 Annual Patient Safety/Claims Report			✓									
Review Status of Current FY Compliance Work Plan Activity Completed and next FY work plan												✓
Receive FY 25 Financial Auditors Consolidated Financial Statements, 403(b) and Cash Balance Audit results			✓									
Review Summary Report of Physician Financial Agreements									✓			
Approve next FY Committee Goals and Meeting Dates									✓			
Review FY 26 Annual Financial Audit Plan with Financial Auditors									✓			
Review OIG Work Plan and Management's Response									✓			
Review Internal Audit Risk Assessment and next FY Internal Audit Work Plan												✓
Committee Reviews Self-Assessment Results									✓			
COMMITTEE GOALS												
Review ERM metrics and assess if any modifications are needed to current domains or metrics to align with enterprise risk tolerance					✓							
Evaluate potential revisions to CAC Charter or Code of Conduct to foster continuous committee improvement									✓			
Review 2027 Strategic Plan, Goals and JV/Business Affiliates for potential impact to Compliance Program									✓			

FY26 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 Audits, Financial Audit, Enterprise Risk Management, and Cybersecurity. The Committee will accomplish this by monitoring the compliance policies, controls, and processes of the organization and the engagement, independence, and performance of the external financial 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**, Compliance/Privacy Officer (Executive Sponsor)

The VP, 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	STATUS	METRICS
1. Review Enterprise Risk Management (ERM) metrics and assess if any modifications are needed to current domains monitored or individual metrics to align with enterprise risk tolerance.	Q2 FY26	50%	Committee reviews and provides feedback regarding ERM domains or metrics.
2. Evaluate potential revisions to the Committee Charter and Code of Conduct to foster continuous improvement within the Compliance Committee.	Q3 FY26	0 %	Committee provides recommendations for revisions and monitors impact to committee self-assessment results.
3. Review 2027 Strategic Plan, Goals and Joint Ventures/Business Affiliates for potential impact on Compliance Program.	Q3 FY26	0%	Committee provides recommendations if compliance assessments or modifications to Compliance Program are needed for strategies the organization is undertaking.

SUBMITTED BY:

Chair: Lica Hartman

Executive Sponsor: Diane Wigglesworth