

Minutes of the Open Session
Corporate Compliance, Privacy and Internal Audit Committee
Thursday, January 21, 2016
El Camino Hospital, 2500 Grant Road, Mountain View California
Conference Room A/B
and
46 Rue de la Montagne Saint Genvieve 75005, Paris, France

Members Present

John Zoglin
 Christine Sublett
 Sharon Anolik-Shakkeed
 Jeff Davis

Members Present by Phone

Ramy Houssaini

Members Absent

None

Agenda Item	Comments/Discussion	Approvals/Action
1. CALL TO ORDER	The Corporate Compliance, Privacy and Internal Audit (“CCPIA”) Committee of El Camino Hospital (the “Committee”) was called to order by Chair John Zoglin at 5:00 p.m. A quorum was present.	
2. POTENTIAL CONFLICT OF INTEREST DISCLOSURES	Chair Zoglin asked if any Committee member may have a conflict of interest on any of the items on the agenda. No conflict of interest was reported.	
3. PUBLIC COMMUNICATION	Chair Zoglin asked if there was any public communication. There was none.	
4. REPORT ON BOARD ACTIONS	<p>Board Actions taken at the January Board meeting:</p> <ul style="list-style-type: none"> • Mick Zdeblick reported that as the initial implementation of iCare has been completed, and as we enter a period of stabilization, iCare challenges are being identified and addressed. • A recent Joint Commission survey identified that Plans of Care were not as robust as needed. This will be addressed and The Joint Commission will return in 45 days to re-survey in this area. • The El Camino Hospital District has purchased a highly sought after parcel of land in south San Jose (near Highway 85 and Great Oaks), which will allow us to extend our services to a greater part of the south valley. ECH was very fortunate to acquire this parcel over several high profile Silicon Valley tech companies. • Due to a drop in the number of patients visiting the ECH Rotocare clinic (volume is down by 2/3, primarily due to the Affordable Care Act), Rotocare services for low income and uninsured members of the community will transition to Mayview Community Health Clinics. 	
5. MEMBER VACANCIES AND RECRUITMENT RECOMMENDATIONS	It was announced that Member Wes Alles has retired from the Committee. Member Ramy Houssaini, who calls into the meetings from Paris, France, will discuss retirement from the Committee with Chair John Zoglin. A brief discussion followed regarding a	

	<p>search for new Committee members:</p> <ul style="list-style-type: none"> • Skill sets based on the Committee’s core mission, and skills of the other current committee members will be taken into consideration in recruiting new members. • Specific skills sets recommended are auditing, compliance including fraud, waste and abuse identification because of the increase scrutiny that health care organizations are now facing. • The integration of physician practices and Stark issues into our system should also be taken into consideration. • It was suggested that job descriptions be reviewed, and updated if necessary, before recruitment begins. • Should referrals from committee members be considered before going to a search firm? Members Houssaini and Sublett indicated they can offer immediate candidate recommendations. • How many advisors/committee members are needed overall? Should we consider more to cover how the range of compliance needs is evolving? • It was noted that, depending on how many new Committee members it’s determined are needed, changes to the Committee Charter may become necessary. <p>Further discussion was tabled until the March meeting.</p>	
<p>6. CONSENT CALENDAR ITEMS</p>	<p>No items were requested to be removed from the Consent Calendar. A motion to approve the Consent Calendar was requested.</p> <p>Motion: To approve the open session Consent Calendar Movant: Anolik-Shakked Second: Sublett Ayes: Anolik-Shakked, Davis, Sublett, Zoglin, Houssaini (phone) Noes: None Abstentions: None Absent: None Recused: None</p>	<p><i>Motion passed</i></p>
<p>7. RECOMMENDATION REGARDING DEREGULATING BOARD OVERSIGHT OF ORGANIZATIONAL POLICIES</p>	<p>Mary Rotunno reported on research into how other similar organizations (John Muir, Stanford and Dignity Health hospitals) address oversight of organizational policies, indicating that there is no consistent format, and regulations regarding oversight of policies seem to fall into a gray area. Ms. Rotunno reported that the general interpretation of Title 22 and TJC regulations is that when policies need to be “approved by the Board”, this applies to clinical policies. Administrative polices are not subject to board approval, but approval by management. Further discussion included the following for consideration:</p> <ul style="list-style-type: none"> • The hospital board must receive, at a minimum, a list of policies being approved. • It should be clearly determine who recommends approvals, how frequently each policy is reviewed, and when summary 	

	<p>would come to compliance committee.</p> <ul style="list-style-type: none"> • While the hospital Board is happy to delegate, do we have a comfort level of due diligence in allowing another body to review, or should this be done by subject experts. Most important is to make sure the right people are reviewing. Compliance issues should come to compliance. How these committees would be composed is important. They should probably be Board Committees exclusively designed to approve. • Suggested that clinical policies would need to go through a Board committee; administrative and management policies would go through other sources. • Alex Robison, from Protiviti, was asked his opinion, to which he stated that he has never seen policies go through a Board Committee, but instead through a Credentialing or Policies Committee. • It was requested that Ms. Rotunno and Ms. Wigglesworth come back with a straw model for Board Approval of clinical and non-clinical policies for the committee’s input. 	
<p>8. POLICIES FOR APPROVAL</p>	<p>Discussion and recommendations on policies submitted for approval included:</p> <p>Member Anolik-Shakked requested that policies 8c Staff Non Participation and 8m Provisional Period for New Employees be pulled. Relative to 8c the committee requested more details on the process. , and recommended that the 8m was too ambiguous, and recommended this policy be reviewed/rewritten for clarity. Member Houssaini recommended that Steps 3 – 5 of the Guideline Section D: Patient Request be reviewed/rewritten for clarification regarding how ECH handles DNR orders from a procedural perspective when a staff member’s personal conflict of bioethical care through DNR orders occurs.</p> <p>It was determined that these two policies pulled would be brought back to next meeting with changes.</p> <p>Motion: Approval of Policies for Approval not pulled and recommendation of approval to the Board.</p> <p>Movant: Anolik-Shakked</p> <p>Second: Davis</p> <p>Ayes: Anolik-Shakked, Davis, Sublett, Zoglin, Houssaini (phone)</p> <p>Noes: None</p> <p>Abstentions: None</p> <p>Absent: None</p> <p>Recused: None</p>	
<p>9. KEY PERFORMANCE INDICATORS – SCORECARD AND TRENDS</p>	<p>Ms. Wigglesworth reviewed key performance indicators, indicating that there was an increase of concerns prior to Epic Go-Live and during staff training, and Compliance worked with the appropriate areas of the organization to address the issues. There will be further review in closed session.</p>	

10. NEW ARTICLES	Ms. Wigglesworth briefly reviewed two articles: One from Moody's regarding cyber risks and one from KPMG on Healthcare and cybersecurity. Brief discussion followed.	
11. ADJOURN TO CLOSED SESSION	<p>Chair Zoglin requested a motion to adjourn to closed session, Motion: To adjourn to closed session at 6:00pm Movant: Anolik-Shakked Second: Sublett Ayes: Anolik-Shakked, Davis, Sublett, Zoglin, Houssaini (phone) Noes: None Abstentions: None Absent: None Recused: None</p>	<i>Motion approved</i>
12. AGENDA ITEM 21 – RECONVENE OPEN SESSION/ CLOSED SESSION REPORT OUT	Open Session was reconvened at 7:25pm Agenda Items 12 – 18 were addressed in closed session. Chair Zoglin reported that the minutes of the closed session of November 12, 2015 and other consent items were approved.	
13. AGENDA ITEM 20 - STATUS OF FY16 COMMITTEE GOALS	Ms. Wigglesworth reported that Committee goals are on track.	
14. AGENDA ITEM 21 – COMMITTEE COMMENTS	There were no additional comments by Committee members.	
15. ADJOURNMENT	<p>Chair Zoglin requested a motion to adjourn the meeting.</p> <p>Motion: To adjourn the meeting of the Corporate Compliance Committee Movant: Anolik-Shakked Second: Sublett Ayes: Anolik-Shakked, Davis Sublett, Zoglin, Houssaini (phone) Noes: None Abstentions: None Absent: None Recused: None</p> <p>Meeting was adjourned at 7:33 p.m.</p>	<i>Motion passed</i>

Attest as to the approval of the foregoing minutes by the CCPIA Committee and by the Board of Directors of El Camino Hospital:



 John Zoglin
 Chair, ECH CCPIA Committee