

AGENDA
CORPORATE COMPLIANCE/PRIVACY AND INTERNAL AUDIT
COMMITTEE MEETING OF THE EL CAMINO HOSPITAL BOARD

Thursday, August 17, 2017 – 5:00 pm

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

Sharon Anolik Shakked will be participating via teleconference from 214 Hidden Lake Loop Dr. Olympic Valley, CA 96145.

PURPOSE: The Corporate Compliance/Privacy and Internal Audit Committee is responsible for providing direction for both the Corporate Compliance and Internal Audit programs at all locations of El Camino Hospital (ECH). Responsibilities include providing oversight on compliance issues requiring executive-level interaction, assessing physician relationship risk as it relates to compliance, reviewing HIPAA/Privacy laws as they relate to compliance, and directing ECH on compliance strategies. The Committee also serves as the ad-hoc mobilization team for any external investigations and/or actions. Further, additional responsibilities include providing direction and oversight to ongoing internal audit activity and determining appropriate organizational response in order to identify and mitigate organizational risk.

AGENDA ITEM	PRESENTED BY		ESTIMATED TIMES
1. CALL TO ORDER / ROLL CALL	John Zoglin, Chair		5:00 – 5:01 pm
2. POTENTIAL CONFLICT OF INTEREST DISCLOSURES	John Zoglin, Chair		5:01 – 5:02
3. PUBLIC COMMUNICATION a. Oral Comments <i>This opportunity is provided for persons in the audience to make a brief statement on issues or concerns not covered by the agenda.</i> b. Written Correspondence	John Zoglin, Chair		information 5:02 – 5:05
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 Corporate Compliance/Privacy and Internal Audit Committee Meeting (May 18, 2017) Information b. Progress Against FY18 Committee Goals	John Zoglin, Chair	<i>public comment</i>	motion required 5:05 – 5:10
5. REPORT ON BOARD ACTIONS	John Zoglin, Chair		information 5:10 – 5:15
6. POLICY FOR APPROVAL	Diane Wigglesworth, Sr. Director, Corporate Compliance	<i>public comment</i>	possible motion 5:15 – 5:20
7. REVIEW IT SECURITY AWARENESS TRAINING PLAN	Deb Muro, Interim CIO; Diane Wigglesworth, Sr. Director, Corporate Compliance		information 5:20 – 5:25
8. REVIEW RECORD RETENTION PERIODS	Diane Wigglesworth, Sr. Director, Corporate Compliance; Mary Rotunno, General Counsel		information 5:25 – 5:35
9. KPIS, SCORECARD AND TRENDS	Diane Wigglesworth, Sr. Director, Corporate Compliance		information 5:35 – 5:40
10. ADJOURN TO CLOSED SESSION	John Zoglin, Chair		motion required 5:40 – 5:41

A copy of the agenda for the Regular Committee 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) 988-7504 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		ESTIMATED TIMES
11. POTENTIAL CONFLICT OF INTEREST DISCLOSURES	John Zoglin, Chair		5:41 – 5:42
12. CONSENT CALENDAR <i>Any Committee Member 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 Corporate Compliance/Privacy and Internal Audit Committee Meeting (May 18, 2017) Information <i>Gov't Code Section 54956.9(d)(2) – Conference with legal counsel – pending or threatened litigation.</i> b. Compliance Log (May-June 2017) c. Privacy Log (May-June 2017) d. Internal Audit Work Plan e. Committee Pacing Plan	John Zoglin, Chair		motion required 5:42– 5:45
13. Report involving <i>Gov't Code Section 54956.9(d)(2) – Conference with legal counsel – pending or threatened litigation:</i> - FY17 Patient Safety/Claims Report	Sheetal Shah, Director, Risk Management and Patient Safety		motion required 5:45 – 5:55
14. Report involving <i>Gov't Code Section 54956.9(d)(2) – Conference with legal counsel – pending or threatened litigation:</i> - FY 17 Annual Compliance and Privacy Report	Diane Wigglesworth, Sr. Director, Corporate Compliance		motion required 5:55 – 6:05
15. Report involving <i>Gov't Code Section 54956.9(d)(2) – Conference with legal counsel – pending or threatened litigation:</i> - Report on Internal Audit Activity	Diane Wigglesworth, Sr. Director, Corporate Compliance		information 6:05 – 6:10
16. <i>Health and Safety Code Section 32106(b)</i> for a report involving health care facility trade secrets: - ERM Activity and Framework	Mick Zdeblick, COO; Diane Wigglesworth, Sr. Director, Corporate Compliance		discussion 6:10 – 6:40
17. Discussion involving <i>Gov't Code Section 54956.9(d)(2) – Conference with legal counsel – pending or threatened litigation:</i> - IT Security Discussion	Deb Muro, Interim CIO		information 6:40 – 6:50
18. Report involving <i>Gov't Code Section 54957</i> for discussion and report on personnel performance matters: - Executive Session	John Zoglin, Chair		discussion 6:50 – 6:55
19. ADJOURN TO OPEN SESSION	John Zoglin, Chair		motion required 6:55 – 6:56
20. RECONVENE OPEN SESSION / REPORT OUT To report any required disclosures regarding permissible actions taken during Closed Session.	John Zoglin, Chair		6:56 – 6:59
21. ADJOURNMENT	John Zoglin, Chair		motion required 6:59 – 7:00pm

Upcoming Meetings

- September 13, 2017 (*Joint Session with Hospital Board, to provide ERM Program Update*)
- September 28, 2017
- November 16, 2017
- January 18, 2018
- March 15, 2018
- May 17, 2018

Board & Committee Educational Gatherings

- October 25, 2017
- April 25, 2018