

# Bartlett Regional Hospital

3260 Hospital Drive, Juneau, Alaska 99801 907.796.8900 [www.bartletthospital.org](http://www.bartletthospital.org)

## Board Compliance & Audit Committee Meeting

### Minutes

February 17, 2021

**Called to order at 7:07 AM., by Board Compliance Committee Chair, Iola Young**

#### **Compliance Committee and Board Members:**

**Board Members:** Iola Young\*, Committee Chair; Hal Geiger\*; Deborah Johnston\*(absent)

**Staff/Other:** Nathan Overson, Compliance Officer; Kevin Benson, CFO and interim CEO; Rose Lawhorne, CNO; Dallas Hargrave, HR Director

**Previous Board Compliance Meeting Minutes Approval:** *Mr. Geiger made a MOTION to approve the October 7<sup>th</sup> 2020 Board Compliance and Audit Committee Meeting minutes as submitted. Ms. Young seconded the motion, and hearing no objection, Ms. Young approved the meeting minutes without change.*

#### **Committee Compliance Training:**

Mr. Overson spoke about the government's expectation that the Governing Board "shall be knowledgeable about the content and operation of the compliance and ethics program and shall exercise reasonable oversight of it." Besides regular meetings with the Compliance Officer, an independent third party-led Compliance Program Evaluation and Risk Assessment is a best practice that organizations should undertake every 2-3 years. An evaluation acts as a verification/validation and also has legal precedence as evidence of "reasonable oversight." Ms. Young suggested the Hospital Compliance Committee Meeting minutes should be part of this committee's meeting packet as another way to maintain oversight.

#### **Compliance Program Evaluation – 3<sup>rd</sup> Party Review Contract Update:**

Mr. Overson gave an update on the RFP for an outside Compliance Program Evaluation. The contract has been executed and the program evaluation by PYA, PC is underway. Ms. Young asked about the timeline which has deliverables scheduled for approximately 12 weeks. There was also committee discussion regarding scheduling the next Compliance and Audit Committee Meeting around the time the evaluation report would come out; presumably end of April-beginning of May.

#### **Compliance Officer Report:**

In the Compliance Officer's report Mr. Overson talked through the Compliance Log Dashboard. Compliance incidents from CY 2019, CY 2020 were discussed. Mr. Overson highlighted some of the changes made to the Compliance Log Dashboard for clarity purposes. It was noted that "Compliance Consults" increased from 2019 to 2020 in conjunction with a reduction to minor incidents. No major incidents were reported. Ms. Young asked about the definitions of the risk categories and suggested that the categories be the topic of the next few education agenda items. The Hospital Compliance Work Plan was discussed and Mr. Geiger asked for some additional resources to better understand the elements of the work plan.

**Executive session:** This meeting did not go into executive session.

**Meeting Adjourned:** 8:05 am

**Next Meeting:** Tentatively scheduled for April TBD