

UC Riverside, School of Medicine Policies and Procedures**Policy Title:** UCR SOM Compliance Committee**Policy Number:** 950-02-034

Responsible Officer:	Chief Compliance and Privacy Officer for Health Sciences
Responsible Office:	Compliance Advisory Services
Origination Date:	03/18/2013
Date of Revision:	07/20/2022
Scope:	The Committee is advisory to the Chief Compliance and Privacy Officer and is responsible for: developing and approving the annual compliance work plan; education / training plan; reviewing status reports on ongoing compliance activities; and making other recommendations to the Compliance and Privacy Officer as deemed necessary.

I. Policy Summary

The UC Riverside School of Medicine Compliance Committee (the Committee) oversees the Compliance and Privacy Program (Program). The Committee is charged with ensuring that appropriate compliance policies and procedures are in place; approving the annual Compliance Program work plan that provides for the ongoing assessment of compliance with established policies and procedures; reviewing compliance results; endorsing, as needed, corrective actions resulting from compliance reviews; and approving recommendations or other actions for improving the Program effectiveness.

II. Definitions

N/A

III. Policy Text**A. Compliance Committee Structure and Composition**

1. The Committee is comprised of leaders from the Clinical Enterprise. The Vice Chancellor and Dean of the School of Medicine is responsible for approving the Compliance Committee members.
2. The Committee shall maintain a charter, setting out membership and purpose which shall be reviewed and updated periodically.
3. The Vice Chancellor for Health Sciences/ Dean of the School of Medicine will serve as Chair of the Committee and the Chief Compliance and Privacy Officer shall serve as substitute Chair when the Vice Chancellor is not available.

B. Meetings

1. The Committee shall meet at least four times per year, usually quarterly or more frequently as circumstances dictate.
2. A quorum will be satisfied by the attendance of greater than 60% of the voting members.

- a. When a quorum is present, votes may pass by a simple majority.

IV. Responsibilities

A. To fulfill its duties, the Compliance Committee shall:

1. Support the Compliance and Privacy Officer in the execution of his responsibilities;
2. Analyze the organization's health care compliance environment, the legal requirements with which it must comply, and specific risk areas;
3. Assess, review, and approve policies and procedures that address these aforementioned areas for possible incorporation into the Program;
4. Work with appropriate departments to develop and then review control systems and standards of privacy information to promote compliance;
5. Determine the appropriate strategy/approach to promote compliance with the Program;
6. Maintain systems to solicit, evaluate, and respond to complaints and problems;
7. Participate in the investigation of Program violations, endorsing, when appropriate, that a violation has likely occurred;
8. Perform any other activities that the Compliance and Privacy Officer and Compliance Committee deem necessary or appropriate;
9. Review and update the charter of the compliance Committee as conditions dictate.

V. Procedures

N/A

VI. Forms/Instructions

N/A

VII. Related Information

N/A

VIII. Revision History

New 03/25/2013

Revised 07/20/2022

Approvals:

COMPLIANCE COMMITTEE (08/17/2022)

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8/22/2022 | 9:47 AM PDT

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