

**UC Riverside, School of Medicine Policies and Procedures****Policy Title:** UCR SOM Compliance Committee**Policy Number:** SOM 3.0

<b>Responsible Officer:</b>	Compliance and Privacy Officer
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<b>Origination Date:</b>	March 18, 2013
<b>Date of Revision:</b>	
<b>Scope:</b>	The Committee is advisory to the 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:** (Not Applicable)**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. In addition to the Compliance and Privacy Officer, the Committee will include the Senior Associate Dean of Clinical Affairs, the Associate Dean of Clinical Affairs, the Executive Director of the UCR Health Group, and the Privacy Analyst.
3. The Compliance and Privacy Officer will serve as Chair of the Committee.

**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 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** (Refer to Responsibilities section)**VI. Forms/Instructions** (Not Applicable)**VII. Contacts**

Unit	Title	Phone
Compliance and Privacy	Compliance and Privacy Officer	951-827-4672
Clinical Affairs	Senior Associate Dean, Clinical Affairs	951-827-7698

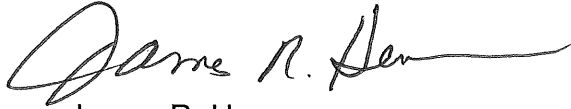
**VIII. Related Information** (Not Applicable)**IX. Revision History:**

Create Date: March 25, 2013

UCR-SOM,

Administrative Policy Committee Review/Approval Date: March 25, 2013

**Approval Signature(s):**

A handwritten signature in black ink, appearing to read "James R. Herron", with a long horizontal flourish extending to the right.

James R. Herron  
Compliance and Privacy Officer  
School of Medicine