

Clifton-Fine Hospital (CFH) shall designate a compliance committee and outline the structure and duties in the form of a charter. CFH's Quality and Compliance Committee (QC Committee) will be responsible for coordinating with the compliance officer to ensure that CFH is conducting its business in an ethical and responsible manner, consistent with its compliance program.

**1. Membership**

- a. Per Regulation membership in the committee shall, at a minimum, be comprised of senior leaders.
- b. The Chairperson of the QC Committee is the Compliance Officer/Director of Quality and Compliance
- c. The CFH QC Committee shall be comprised of at least one (1) member of the Board of Directors, the CEO and representation from Hospital Leadership: Operations (Emergency Preparedness), Support Services, Nursing, Rehabilitation Services, Pharmacy, Infection Prevention, Information Systems, Business Office, Laboratory and Workforce Operations.

**2. Meetings**

- a. Per regulation the compliance committee shall meet no less frequently than quarterly.

**3. Responsibilities**

- a. The compliance committee's responsibilities shall include:
  - i. Coordinating with the compliance officer to ensure that the written policies and procedures, and standards of conduct are current, accurate and complete, and that the training topics required timely completed;
  - ii. Coordinating with the compliance officer to ensure communication and cooperation by affected individuals on compliance related issues, internal or external audits, or any other function or activity required by this SubPart;
  - iii. Advocating for the allocation of sufficient funding, resources and staff for the compliance officer to fully perform their responsibilities;
  - iv. Ensuring that the required provider has effective systems and processes in place to identify compliance program risks, overpayments and other issues, and effective policies and procedures for correcting and reporting such issues; and
  - v. Advocating for adoption and implementation of required modifications to the compliance program.

**4. Authority**

- a. 18 NYCRR 521 Fraud Waste and Abuse Prevention, SubPart521-1.4(c)

**5. Approval**

- a. Per regulation charter will be reviewed and approved at least annually by the QC Committee. Initial Board of Directors adoption is documented below. All future approval dates of the Board and QC Committee are electronically documented in MCN Policy Manager.

**Approved and adopted by the Board of Directors: March 23, 2023**

**Annual review and approval: December 28, 2023**