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| Topic: Communication of compliance activities to the Board of Directors | Department: Quality Improvement/Corporate Compliance |
| Original effective date: 4/15/02 | Last revision date: 3/21/24 |
| Owner: QP for Quality and Compliance | Frequency of reviews: Annual |
| Internal/Regulatory Reference(s) (all that apply): 18 NYCRR 521.3(a)(4) | |
| Related documents/Links: NA | |

Policy: It is the policy of The Arc of Monroe that business, administrative and support functions promote personal and organizational outcomes.

Additional Information: Regular and appropriate communication between the compliance function and the Board of directors is essential in ensuring transparency and effective governance.

ICC stands for Internal Compliance Committee.

VPQC stands for VP for Quality and Compliance.

| Procedure | |
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| Task: | Responsible party: |
| General Guidelines: | |
| 1. Consistent with regulatory requirements, a report regarding compliance-related activities will be presented to the Board of Directors on a quarterly basis. | ICC Chairperson; VPQC |
| 2. Full-year compliance reports will be presented to the full Board annually. Also presented are the ArcNY Quality Improvement Plan and the Compliance Officer’s Compliance work plan for the upcoming year. | VPQC |
| 3. Semi-annually, ArcNY quality data will be reviewed with the Board’s Life Services Committee. | VPQC |
| 4. Issues or situations of a significant or serious nature requiring Board notification or communication will be shared as soon as is reasonably possible, but within 5 business days. This may be done through written communication, presentation, or a combination of the two. This may occur prior to or concurrent with notification to appropriate regulatory bodies. | VPQC; Designee |
| 5. Minimally, the following would be shared: *Overview of the issue or situation *How it was discovered *Potential impact on the agency *What has been done to date in response | VPQC; Designee |
| 6. The VP for Quality and Compliance may consult with members of Arc’s Executive Management Team (EMT) and/or Board leadership before making the determination to present the situation to the full Board. | VPQC; EMT |
| 7. At least once annually, the VPQC will participate in a closed session with the full Board. This is to provide an opportunity for open and candid discussion without agency leadership present. | VPQC; Board of Directors |

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| 8. At least once each year, formal Corporate Compliance training will be provided to the Board as a means of communicating requirements with which the agency and the Board comply. | VPQC |
| VP for Quality and Compliance: | |
| 1. The VP for Quality and Compliance acts as the agency’s Compliance Officer as required in NYS law. | VPQC |
| 2. Has primary responsibility for administering the agency’s compliance program, and related policies and procedures. | VPQC |
| 3. Has primary responsibility for ensuring that the Board is kept apprised as necessary and appropriate of compliance-related activities and situations. | VPQC |
| 4. Presents the quarterly Compliance Reports, the year-end report and conducts the annual trainings. | VPQC or designee |
| 5. Has the right to meet alone with the Board or any members thereof (in the absence of agency leadership) with or without the knowledge or approval of members of Arc’s executive management team, at their discretion, if/when necessary. | VPQC |

Document revision record:

| Revision Date | Release Date | Reason for change | Approver |
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| 10/27/05 | 10/27/05 | Reason for revision not documented | P Dancer |
| 4/14/06 | 4/14/06 | Reason for revision not documented | P Dancer |
| 1/8/07 | 1/8/07 | Reason for revision not documented | P Dancer |
| 5/13/08 | 5/13/08 | Reason for revision not documented | P Dancer |
| 6/24/09 | 6/24/09 | Reason for revision not documented | P Dancer |
| 10/20/11 | 10/20/11 | Revised to reflect periodic updates to the Board vs. a specific number of times; included that the executive committee of the Board functions as the formal compliance committee; added that the Board will get a summary of compliance activities and training at least annually | P Dancer |
| 5/22/12 | 5/22/12 | Removed the statement re: keeping the executive committee apprised of the status of emergent and non-emergent issues through their resolution | P Dancer |
| 3/20/13 | 3/20/13 | Added formal policy statement at the top | P Dancer |
| 4/24/17 | 4/24/17 | Reason for revision not documented | P Dancer |
| 11/9/18 | 11/9/18 | Qualified “emergent issues” to reflect “serious emergency issues”; clarified step 5 to reflect “issue” and not “emergent issue” | P Dancer |
| 10/15/19 | 10/15/19 | Transitioned to the new procedural format | P Dancer |
| 4/21/21 | 4/30/21 | Updated to reflect new compliance committee and reporting from that to the Board. Clarified timing of reporting to Board and regulatory bodies. Added section for responsibilities of the VPQC, added reference to closed session and to the VPQC’s right to access the Board | ICC |

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| 3/29/22 | 4/6/22 | Added sections reflecting the reporting to the executive committee and to life services committee | ICC |
| 3/21/23 | 3/21/23 | Updated to reflect change in regular reporting to Board (via executive committee); added chairperson as responsible party | ICC |
| 3/21/24 | 4/25/24 | Updated to reflect quarterly reports to the board; added that the ArcNY Quality Improvement Plan and Compliance Workplan are presented to the Board; added that formal compliance training occurs annually; added that the VPQC or designee is responsible for presenting reports and providing training | ICC |