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| Topic: Annual Compliance Program Review | Department: Corporate Compliance |
| Original effective date: 3/28/23 | Last revision date: 9/13/23 |
| Owner: VP for Quality and Compliance | Frequency of reviews: Annual |
| Internal/Regulatory Reference(s) (all that apply): 18 NYCRR 521-1.4(g)(2) | |
| Related documents/Links: | |

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

Additional Information: The Arc of Monroe will conduct a review of its compliance program no less than annually, using the OMIG Compliance Program Review module, site visits, interviews with a sample of affected individuals, and review of agency records as appropriate. The VP for Quality and Compliance (VPQC) is responsible for initiating and conducting the annual compliance program review consistent with this policy and procedure. Affected parties will be asked a sampling of questions from the list of Compliance Program Review Interview Questions.

| Procedure | |
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| OMIG Compliance Program Review Module | |
| Task: | Responsible party: |
| 1. Prior to beginning the annual Compliance Program Review, the NYS OMIG website will be checked to ensure we are using the most current version of the Program Review Module | VPQC |
| 2. The VPQC will compile the necessary records as required by the module and identify if there are any areas where apparent gaps are noted | VPQC |
| 3. | |
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| Site Visits and Interview with Affected Individuals | |
| 1. The VPQC will identify a sample of sites to visit. The purpose of these visits is to talk with a sample of staff from all levels of the organization, and to conduct an observation of the facility to identify if there are any compliance-related concerns noted. | VPQC |
| 2. Site observations may include but are not limited to observing office operations, interactions between different staff or between staff and people we support, the provision of services, management of PHI, and documentation of services provided. | VPQC |
| 3. Staff will be asked a sample of questions from the list of Compliance Program Review Interview Questions. | VPQC |
| 4. In addition to staff, a sampling of other affected parties will be identified (such as contractors, students, volunteers, and Board members). They will be asked a sampling of questions from the list of Compliance Program Review Interview Questions. | VPQC |
| 5. Responses will be documented, to include the date, time, location/method, name of person interviewed and title/role. | VPQC |

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| 6. Where appropriate, retraining or additional information will be provided to correct inaccurate information shared by the interviewee. | VPQC |
| 7. Interview results will be summarized/aggregated. Individual responses will not be shared. | VPQC |
| 8. Site visit observations will be summarized | VPQC |
| Record Reviews: | |
| 1. A review of internal and external audit results and trends, as well as of other documentation or information as appropriate will be conducted to identify any area(s) where additional focus might be needed in the compliance program | VPQC |
| Final Compliance Program Review Report | |
| 1. The results of the Program Review Module, the interviews of affected people, the site visit observations, and the record review will be consolidated into a single report. | VPQC |
| 2. The final report will be submitted to the Internal Compliance Committee (ICC) for review and discussion. | VPQC |
| 3. The ICC will review the complete final report and provide feedback to the VPQC and others with responsibility for the findings. | ICC |
| 4. In response to findings for which the VPQC/Compliance Officer is directly responsible, the VPQC will submit a formal written response to the findings to the ICC. | VPQC |
| 5. In response to findings for which others are responsible, the Senior Leader with responsibility for the area with findings will be responsible for submitting a formal written response to the ICC. | VPQC; VP |
| 6. The ICC will review the responses, provide additional feedback if necessary. When responses are deemed acceptable, the ICC will accept both the full report and the agency's response to its findings. | ICC |
| 7. All Compliance Program Reviews will be archived for a period of 6 years from date of final acceptance by the ICC. | VPQC |
| 8. A summary of the Compliance Program Review findings will be included in annual Compliance Program Review presentation to the Board of Directors. Board members may request to see the full Compliance Program Review at any time. | VPQC; Board of Directors |

Document revision record:

| Revision Date | Release Date | Reason for change | Approver |
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| | 4/28/23 | New policy – Written 3/15/23; Approved 4/28/23 | ICC |
| 9/13/23 | 9/13/23 | Removed redundancies and stated formally that individual interview results will not be shared | ICC |