
Annual Compliance Work Plan – Calendar Year 2024

Purpose and Organization

The Lake County Health Department and Community Health Center (LCHD/CHC) Compliance Program Work Plan (Work Plan) describes activities in support of the Agency's Compliance Plan during the calendar year 2024. It is used to provide a structured approach to implementing ongoing activities such as compliance program audits and training as well as "one time" projects intended to improve processes or program results.

The Work Plan addresses one or more aspects of the following seven elements of an effective compliance program:

- 1) Written Policies, Procedures, and Standards
- 2) Designation of a Compliance Officer and Compliance Committee
- 3) Effective Training and Education
- 4) Developing Effective Lines of Communication
- 5) Auditing and Monitoring
- 6) Enforcing Standards Through Well-Publicized Disciplinary Guidelines
- 7) Response to Violations and Development of Corrective Actions

Gift Card Audit – Effective auditing and monitoring are key elements of an effective compliance program. In 2023, Finance conducted an audit of Gift Card purchases to determine adherence to internal policies and procedures, as well as to any grant rules and regulations regarding the use of Gift Cards. Changes were recommended consistent with findings and evolving state requirements. In 2024, there will be audits at a program level to determine the compliance with the additional state requirements and consistency of processes.

Policy Management Site Assessment – Policies and standards are one of the key elements of an effective compliance program. In 2023, the agency pursued, procured, and began implementation of a new policy management system. The plan is to fully implement the new PowerDMS policy management site in Q2 2024. In late Q3 or Q4, we will evaluate the implementation and survey staff to understand how this site is received in support of their understanding of policies and assisting them in their duties.

Compliance Training Curriculum – Effective training and education are key elements of an effective compliance program. The current general corporate compliance e-Learning module has been in use for several years. We will assess the content of the current module and determine what changes are required. The result might be to refresh the existing content which was developed by staff to be specific to LCHD or to consider content from other sources like the Relias Learning Management System.

Technology Asset Management – Technology assets have been deployed, monitored, and recovered with various platforms. Part of an effective technology management process includes the ability to track users, locations, purchases, and contracts. A new system, FreshService, is being implemented to help manage the wide range of activities required for effective Lifecycle Management within the Technology Asset Management program. Following implementation, Finance will conduct an audit to ensure the accuracy of the transition and any new asset acquisitions and dispositions.

Auditing and Monitoring of Technology Vulnerabilities – Effective auditing and monitoring are key elements of an effective compliance program. Lake County Health Department and Community Health Center is a Covered Entity within Lake County. This means that we must comply with requirements under the Health Insurance Portability and Accountability Act (HIPAA) and other applicable federal and state laws with respect to protecting the privacy and security of health information. Recent incidents related to technology vulnerabilities and the required

responses prompted increased vigilance on information technology operations. LCHD controls segments of the technology infrastructure. County IT controls other segments.

The Director of HI&T has engaged the Lake County Chief Information Officer and Virtual Chief Information Security Officer to identify critical core systems and systems that perform healthcare data transactions that will require further isolation from County Infrastructure to achieve HIPAA compliance. A Security & Privacy Operations Committee (SIPOC) has been established to assure comprehensive action in response to the heightened need for assessments and timely response. The SIPOC will address vulnerabilities, determine how HI&T and County IT are responding, and how to improve.

We will identify the current gaps in the structure, set action plans to mitigate the gaps, respond to security incidents, and develop a log monitoring and response process. Action plans will include dates, costs, responsible parties, and implications for not closing gaps.