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Meet Sarah Couture: Teaching the essentials and ensuring effectiveness

by Sarah Couture RN, CHC, CHRC, CHPC, and Adam Turteltaub, CHC, CCEP

AT: I've enjoyed teaching the Healthcare Compliance Essentials Workshop with you and joining you in the networking events that are a part of it. It's good seeing so many people who are new to compliance. I'm curious, what do you find that new people struggle with the most when entering the profession?

SC: Yes, the Healthcare Compliance Essentials Workshops have been great. I think this course and format have really filled an educational need and seem to be continually well-received by attendees. And I've been so impressed with the expertise and humility of the faculty and the way they come alongside attendees.

When entering the compliance profession, an early struggle is truly understanding what compliance is and how it is different from operations. Most of those we are meeting through the Healthcare Compliance Essentials Workshops are coming from other roles in healthcare organizations, primarily operational roles; it can take time to understand the role and purpose of compliance—especially the independence from operations—and that compliance doesn't "do" or fix operations. It can be quite a shift!

Another challenge is knowing where to start. Attending a Healthcare Compliance Essentials Workshop or a Healthcare Compliance Academy can be like drinking from a firehose: what do you do with the enormous amount of information you heard? Instead of rushing full steam ahead, those who are new to compliance should take time to process what they've just learned and make a thoughtful plan for how to best move forward. Getting to know the organization and considering how the compliance program should be implemented to be most effective is a good place to start. This means prioritizing building relationships with leaders and managers to help gain insights and learn how the organization works. Then start building the foundation for the compliance program infrastructure and an understanding of the risk profile.

AT: Looking to your start in the profession after years in nursing, what do you remember of those first few months?

SC: The first thing I remember— a story that my friends from those days don't let me forget—is the first question I asked as a compliance professional. I was told that I'd be helping with the compliance program's response to the U.S. Department of Health & Human Services Office of Inspector General (OIG) Work Plan (which at that time came out annually). I asked, "What's the OIG?"

It's funny now to think about, but the learning curve moving from clinical to compliance is not insignificant. It's

a whole new world, angle, and vocabulary. As a new compliance professional, and certainly still figuring out what compliance was, as we were just discussing, I found compliance was very natural for my skills and personality. Collaboration with operations' personnel and strategic problem-solving for the common good (patients, departments, the institution) was a winning combination. I was the first hire in the compliance program at that academic medical center to have a clinical background, which proved to be beneficial from a knowledge and expertise perspective as well as a rapport perspective with clinical departments that may not have been as cooperative with administrative departments in the past. If you have heard my Healthcare Compliance Essentials Workshop session on compliance program governance and administration, you've heard me share my perspective and examples of how a compliance program staff with diverse professional experiences, from clinical to legal to auditing to operations, etc., best positions a compliance program for success.

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