

**GUAM BEHAVIORAL HEALTH AND WELLNESS CENTER
REVIEW AND ENDORSEMENT CERTIFICATION**

The signatories on this document acknowledge that they have reviewed and approved the following:

Policies and Procedure


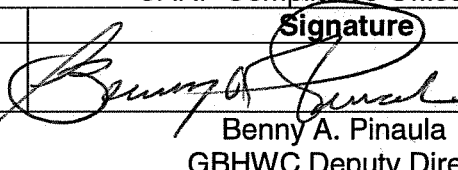
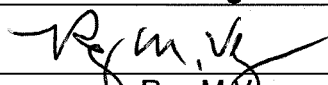
Submitted by: Compliance Officer

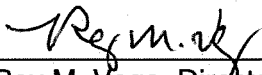
Protocol/Form

Policy No: AD-31

Bylaws

Title: GBHWC Committee and Committee Guidelines

Reviewed/Endorsed	Date	Signature
	6/2/17	
Title	Name Title Cydsel Victoria Toledo CARF Compliance Officer	
Reviewed/Endorsed	Date	Signature
	6/2/2017	
Title	Name Title Benny A. Pinaula GBHWC Deputy Director	
Reviewed/Endorsed	Date	Signature
	JUN 02 2017	
Title	Name Title Rey M. Vega GBHWC Director	

GUAM BEHAVIORAL HEALTH AND WELLNESS CENTER		
TITLE: GBHWC Committees and Committee Guidelines	POLICY NO: AD - 31	Page 1 of 2
RESPONSIBILITY: Administration		
APPROVED BY:  Rey M. Vega, Director	EFFECTIVE: JUN 02 2017	LAST REVIEWED/REVISED:

PURPOSE:

The purpose of this policy is to ensure attendance at scheduled committee meetings, to provide a mechanism for rotating committee membership among different individuals, and to ensure committee business will be transacted more effectively.

POLICY:

Guam Behavioral Health and Wellness Center recognizes the need for stakeholders' opinion to the decision making process of the department, and for the continued evaluation and assessment of the different functional structure and program plans. For this reason, the Department Director shall form committees with an identified purpose and designated membership.

RESPONSIBILITIES:

I. GBHWC COMMITTEES:

- A. Executive Management Committee; main functions are but not limited to the following;
 - 1. Review and adopt policies and procedures relevant to the operation of GBHWC
 - 2. Review pertinent findings of other committees and clinical programs, goals, progress, and other operational issues.
 - 3. Communicate extraordinary events and issues requiring administrative action.

- B. Environments of Care; main functions are but not limited to the following;
 - 1. Develops the accessibility plan and review it annually for relevance
 - 2. Implements an ongoing process for identification of barriers such as but not limited to architecture, environment, attitudes, transportation and communication for the persons served and other stakeholders.
 - 3. Develops plans and policies covering security, safety and maintenance which will ensure GBHWC provides a safe environment to staff, consumers and visitors.

- C. Cultural Humility and Diversity Committee; main functions are but not limited to the following;
 - 1. Develops the Cultural Humility and Diversity Plan and review annually for relevance
 - 2. Shall implement and have oversight of the cultural humility and diversity activities of GBHWC.

- D. Strategic Planning Committee
 - 1. Shall develop the Strategic Plan and review it annually
 - 2. Assess the strategic direction and achievement of the Department's strategic goals at least annually.

- E. Quality Performance Improvement Committee; main function are but not limited to the following; (*see policy AD-15 Quality Performance Improvement Plan for full function of the committee*)
1. Develops the Quality Improvement Plan and Risk Management Plan
 2. Provides ongoing operational leaderships of continuous quality improvement activities.
 3. Meets regularly to review quarterly data gathered from each department.
- F. Others as deemed appropriate to address clinical and or operational issues

PROCEDURES:

1. Committee membership is appointed by the Director or the Committee Chair on an annual or as needed basis in accordance with policy guidelines.
2. Chairpersons of committees are responsible for preparing minutes and keeping attendance rosters.
3. Minutes of all committee meetings are to be forwarded to the administrative assistant of the Director for review at the Executive Management Committee (EMC).
4. Committee members **MUST** attend a minimum of 75% of all committee meetings. Failure to do so will be noted in the individual's annual performance evaluation. The member's immediate supervisor shall make accommodations to promote maximum participation. Failure to attend meetings will be communicated by the committee chairperson to the employee's supervisor on a quarterly basis.
5. Should a member fail to participate in three (3) consecutive meetings, the Chairperson shall notify the Director and recommend removal from the committee. The Director shall designate a new member to fill the vacancy. Removal from a committee will be documented in the individual's annual performance evaluation.

REFERENCES:

RELATED POLICY (IES):

SUPERSEDES:

ATTACHMENTS:

- I. *Management Reporting Flow Chart*