

Chapter: Governing Body (GB)

Section 1: Governing Body

Policy

The Utah State Hospital is a state-owned and -administered psychiatric facility. Authority for its governance is delegated from the Governor of the State of Utah through the Executive Director of the Department of Human Services to the Director of the State Division of Substance Abuse and Mental Health. In this capacity, the Director of the State Division of Substance Abuse and Mental Health serves as chair of the Hospital's Governing Body. The Governing Body of the hospital consists of the Director of the State of Utah Division of Substance Abuse and Mental Health, the Hospital Superintendent, the Hospital Clinical Director, Hospital Medical Staff President, a representative of the Department of Human Services, Executive Director's office, family representative and consumer. The Hospital's Governing Body is responsible for the following:

1. Assuring the effective organization of the hospital to accomplish its mission and function by appointment of Chief Executive Officer and a Hospital Clinical Director and causing to become established a medical staff organization;
2. Assist with institutional planning;
3. Appoint members of the medical staff;
4. Approve medical staff activities, i.e., credentialing, privileging, reappointment, and termination of staff;
5. Monitor provisions of patient care via performance improvement reports/activities;
6. Monitor provisions of treatment services through unit and department implementation of the written plan for services;
7. Plan, approve, and monitor resource allocations: annual budget, capital expenditure, funding reduction priorities, staff and space allocation, and clinical services;
8. Approve hospital policies and monitor implementation of state board policies;
9. Provides a system for resolving conflicts among individuals working in the hospital.
10. Oversee safety management / risk management;
11. Participate in the Joint Commission survey process;
12. Provide for the effective functioning of activities related to professional graduate education.

Implemented: 9-92

Revised: 8-95

Reviewed: 6-98

Revised: 3-02

Revised: 1-05

Revised: 4-09

Revised: 2-12

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Section 2: Procedure for Developing or Revising Hospital Policy

Policy

Utah State Hospital (USH) employees participate in the development of policy and procedure.

Definitions

USHOPP – Utah State Hospital Operational Policy and Procedure Manual.

Procedure

1. The USH Governing Body, USH Superintendent and/or Executive Staff are authorized to approve, categorize, promulgate, and repeal policies.
 2. The Governing Body has final approval for all policies.
 3. Employees may submit ideas or suggestions for hospital policy and procedure to their supervisor or any member of the Hospital Executive Staff for consideration.
 - 3.1. Supervisors take suggestions to their respective meetings for further consideration.
 4. Working drafts are reviewed by Executive Staff.
 - 4.1. All policies and changes are tracked by the person designated by the Hospital Superintendent to manage/coordinate establishment of policies and policy changes.
 - 4.1.1. Any policies in revision or initially proposed are tracked by the Medical Staff coordinator.
 5. Working drafts are taken from Executive Staff to the Administrative Services Committee, and Medical Staff for review, input, and approval.
 - 5.1. Drafts may also be submitted to other appropriate personnel/committees for review.
 6. Upon approval of all appropriate committees, working drafts are re-submitted to the Executive Staff for review and approval.
 - 6.1. USH Superintendent and/or Executive staff is authorized to approve new and/or changes to existing policies until Governing Body has given final approval.
 7. When substantive changes occur, they are referred to Governing Body for final approval. Governing Body may make changes prior to final approval.
 - 7.1. When there are no substantive changes to policy, the Hospital Superintendent can approve policy revisions for Governing Body.
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8. Upon approval, working drafts are typed into USHOPP format.
 - 8.1. Effective dates for implementation of policies and policy changes are established before final approval, with consideration given to allow for training of staff, e-chart/computer changes and implementation of overall policy.
 - 8.2. Appropriate personnel are notified, by e-mail, of approved policies, training requirements, and date of implementation.
9. The Governing Body intervenes and makes decisions to resolve conflicts regarding policy and procedure, between the leadership groups of the hospital.

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