

CONNECTICUT VALLEY HOSPITAL OPERATIONAL PROCEDURE MANUAL

SECTION II:	ORGANIZATION FOCUSED FUNCTIONS
CHAPTER 6	LEADERSHIP
REVISED:	02/23/09; 02/18
Governing Body Approval:	02/23/09; 04/18

VALUE - In accordance with the Vision and Mission Statements of the Department of Mental Health and Addiction Services Governing Authority and Connecticut Valley Hospital (CVH), the leadership of CVH sets the organizational policy that supports quality patient care.

GOAL - To provide quality care through a hospital structure that:

- a. outlines accountabilities and relationships of all major divisions, departments, offices, and committees; and
- b. reflects the hospital's vision, mission, policies and by-laws which govern the hospital's operations.

POLICY-

1. By direction of the Governing Authority, CVH has established a Governing Body which is responsible for:
 - a. Defining clear lines of authority in relation to strategic planning and organizational management;
 - b. Operations;
 - c. Establishment of policies and procedures; and
 - d. Evaluation at each level of governance as is demonstrated in the Structural and Functional tables of organization.

1. The Governing Body of CVH includes the following members; appointed by the CEO:
 - a. Chief of Professional Services;
 - b. Chief of Staff;
 - c. Director of Compliance and Performance Improvement;
 - d. Facility Human Resources Director;
 - e. Director of Fiscal Services and Plant Operations;
 - f. Director of Facility Operations;
 - g. Director of Patient Care Services;
 - h. Director of Staff Development;
 - i. Director of Accreditation & Regulatory Compliance;
 - j. Director of Ambulatory Care Services;
 - k. President of the Medical Staff;
 - f. President-Elect of the Medical Staff;
 - g. Director, General Psychiatry Division;

- h. Director, Addiction Services Division; and
 - i. Director of Recovery and Consumer Affairs.
3. The Governing Body has overall responsibility for the following functions, including but not limited to:
- a. Quality Patient Care;
 - b. Strategic Planning;
 - c. Performance Improvement;
 - d. Safety and Risk Management;
 - e. Medical Staff Privileging;
 - f. Financial Management;
 - g. Compliance; and
 - h. HIPAA Compliance
4. The Governing Body develops, reviews, revises and abides by the by-laws which address its legal accountability and responsibility to patients served by the hospital.
5. The Governing Body By-Laws address the following:
- a. Name and Principle Office;
 - b. Role and Scope of the Governing Body;
 - c. CVH Vision and Mission Statements;
 - d. Statutory Authority;
 - e. Structure and Composition of the Governing Body;
 - f. CEO's Duties and Responsibilities;
 - g. Selection and Responsibilities of the Governing Body Members;
 - h. Meetings and Committees of the Governing Body;
 - i. Organized Medical Staff;
 - j. Discipline Chairs and Associate Chairs;
 - k. Quality of Patient Care;
 - l. Patient Rights and Patient Education;
 - m. Conflict of Interest;
 - n. Performance, Orientation, and Education of the Governing Body; and
 - o. Adoption & Amendment of the Governing Body By-Laws.
6. Medical Staff at CVH have representation at the Governing Body meetings to:
- a. Contribute to hospital strategic planning, budget, safety management, and improving organizational performance; and
 - b. Make recommendations to the Governing Body for its approval of the following:
 - 1. structure of the Medical Staff;
 - 2. the credentialing and privileging procedure;
 - 3. recommending delineated clinical privileges for eligible Medical Staff members; and
 - 4. the organization and the process of the Medical Staff's performance improvement activities;
 - 5. the process for terminating Medical Staff membership; and
 - 6. the process for fair hearing procedures.

7. The Governing Authority, Commissioner of Mental Health and Addiction Services, establishes a criteria-based process for selecting a qualified and competent Chief Executive Officer.
8. The Governing Body provides for compliance with applicable law and regulations.
9. The Governing Body provides for an Operational Policy and Procedure Committee which develops, reviews, and revises hospital policies and procedures, and submits them to the Clinical Management Committee (CMC) and the Governing Body for final approval. The Governing Body ensures that all discipline, department and division policies and procedures are reviewed, and revised if needed, at least every two (2) years.
10. The Governing Body ensures that procedures address the following key items:
 - a. Nursing Policy and Procedures are based on Nursing Standards of Care and Practice; (refer to Nursing Policy and Procedure Manual); and
 - b. Medical Staff review its by-laws, rules and regulations consistent with this policy, its own by-laws, and other applicable law or requirement.
11. The Governing Body has a policy for timely conflict resolution as delineated in the Governing Body By-Laws. This policy is designed to resolve conflicts among the leadership of the facility.