SURGICAL GOVERNANCE COMMITTEE BY-LAWS

PURPOSE STATEMENT:

The Surgical Governance Committee is committed to effective surgical governance to ensure quality experience for our community and quality service provided by medical staff and YOUR HOSPITAL OR MEDICAL CENTER Perioperative staff. The Surgical Governance Committee will be committed to excellence and working collectively to promote openness, accountability and compliance. Provide general oversight of surgical-related strategies, policies and practices that relate to promoting quality healthcare, cost-effective measures.

MEMBERSHIP:

The Surgical Governance Committee will be composed of Organizational, Perioperative and Surgical leadership; leading YOUR HOSPITAL OR MEDICAL CENTER community surgeons; surgical services leadership, and a member of the Surgical Services SPT group (Magnet Hospitals).

- Co-Chair - Director of Surgical Services
- Co-Chair - Chief of Surgery
- Co-Chair - Anesthesiologist - Medical Director
- Chief Operating Officer - Ad Hoc
- Chief Nursing Officer – Ad Hoc
- Chief of the Medical Staff - Ad Hoc
- Surgeons (7) - representing various surgical specialties
- Surgical Services managers - member
- Surgical Services SPT group (Magnet Hospitals)

SELECTION:

Members will be nominated by the Director of Surgical Services, Surgical Section Chief, Chief of Surgery and the Medical Director of Anesthesiology. Nominated (potential) Committee members will be approved by the Co-Chairs of the Surgical Governance Committee. Committee members may be removed and/or replaced upon recommendation of the voting members and approval by the Co-Chairs of the Surgical Governance Committee. Membership will be structured on a one year term. Committee members will serve and actively participate in Committee activities and meetings until their resignation, or until completion of the yearly membership period.

MEETINGS:

Meetings will be held once per month. Meeting agendas, minutes and materials will be prepared for every meeting and provided to committee members prior to each meeting. The governance committee will act only on affirmative vote of the committee. Minutes will be recorded at each meeting.
STATEMENT OF RESPONSIBILITY:

The Surgical Governance Committee believes open and direct communication between Administrative staff; Nursing; Surgeons and Anesthesiologists is essential to the success of effective governance.

- Provide oversight and direction to surgical section teams and or workgroups
- Assure processes are compliant with policy and procedures and or regulatory standards
- Remain engaged in Surgical Governance Committee activities and meetings while a committee member
- Facilitate the achievement of Committee objectives
- Review standard operational criteria as outlined below & make recommendations to the Board as deemed appropriate by Committee.

1. OR Productivity Reports
2. Block Time Schedule Requests
3. Product Requests
4. Quality Metrics (HARMS, SCIP and Organization Dashboard)
5. Review Policy & Procedure compliance issues
6. Financial efficiencies
7. Revenue generating initiatives
8. Review significant medical strategies and initiatives designed to enhance surgical services interaction with the medical community
9. Review governance principles and practices annually
10. Make recommendations to the Board regarding committee structure and member responsibilities
11. Evaluate Committee effectiveness and performance annually
12. Recommend future Surgical Governance Committee members to Board

- Act as an ambassador of YOUR HOSPITAL and the medical community to promote and encourage medical staff's participation and support change as agreed upon by this committee

REPORTING RELATIONSHIP:

Reports to the Hospital Quality Committee

AUTHORITY STATEMENT:

The Surgical Governance Committee shall make decisions on all Surgical Service operations initiatives and interests in a timely manner. Decisions will be based upon unanimous consensus. In rare circumstances when a consensus cannot be obtained the Co-Chairs will hold final approval or veto authority.

SUPPORT:

This committee will be supported by managers, physician champions, departmental staff and surgical services leadership. Members of this Committee have duties and responsibilities as defined above in this Charter but this Charter or contents of this Charter are not intended to imply or create a legal responsibility of the members.

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