

79301 Governing Body

(a)

The governing body shall be responsible for: (1) Defining and adopting in a written statement, the qualifications, authority, and duties of the medical director and the alternate physician who shall provide for the coverage of the duties of the medical director in the medical director's absence. (2) Appointment of an administrator when the medical director does not also serve as the administrator. (3) Defining and adopting, in a written statement, the qualifications, authority, and duties of the administrator. (4) Granting the medical director direct access to the governing body conjointly with the administrator in all matters relating to the maintenance and improvement of patient care within the CDRH when the medical director does not also serve as the administrator. (5) Notifying the Department, in writing, whenever a change of administrator or medical director occurs. (6) Appointment and granting of clinical privileges to the medical staff.

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Appointment and granting of clinical privileges to the medical staff.

(b)

The governing body shall assure that all services, including care and treatment, provided to both the CDRH's inpatients and outpatients are adequate and safe at all times.

(c)

The governing body shall adopt written bylaws in accordance with legal requirements and its community responsibility which shall include but not be limited to: (1) Identification of the purposes of the CDRH and the means of fulfilling them, including organizational structure. (2) Preparation and maintenance of a complete and accurate health record for each patient. (3) Provision of appropriate physical resources and personnel required to meet the needs of the patients. (4) Participation in planning to meet the health needs of the community. (5) Conformance with all applicable federal, state, and local laws and regulations,

including those relating to licensure, fire inspection, and other safety measures.

(6) Provisions for the control and use of the physical and financial resources of the CDRH. (7) Performance of utilization reviews. (8) Provisions for the availability of a physician for emergencies among the inpatient CDRH population when neither the medical director nor the alternate is available. (9) Provisions to, at least annually, determine the personal current competency of the medical director, the alternate physician, and each member of the professional staff engaged in the care and/or treatment of persons who are chemically dependent.

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Provisions to, at least annually, determine the personal current competency of the medical director, the alternate physician, and each member of the professional staff engaged in the care and/or treatment of persons who are chemically dependent.

(d)

At least annually, a committee appointed by the governing body shall prepare a written evaluation of the services provided and shall submit written recommendations for the resolution of identified problems to the governing body.