

Oregon State Hospital Committees and Subcommittees

Oregon State Hospital defines a committee as a formally chartered group established to fulfill a defined regulatory, strategic, or cross-functional oversight function. Committees shall have a clearly defined scope of authority, operate under a structured workplan with regular reporting, and be accountable to a designated oversight body. A committee's scope of authority may include recommendation or decision-making responsibilities, as outlined in its charter, to ensure it adds value and drives outcomes. Committees chartered outside of MAHPS oversight will be multidisciplinary and cross-functional.

A subcommittee is defined as a formally established group that operates under the authority of a source committee. Subcommittees are responsible for addressing specific aspects of the source committee's scope and reports findings, recommendations, or outcomes back to that body. Subcommittees may be standing or ad hoc.

This document serves as the official roster of all committees and subcommittees at Oregon State Hospital. Groups that are not listed in this document are not recognized as committees or subcommittees within the organization.

Oregon State Hospital Governed Committees

The following have been approved by the Superintendent, or designee, or the Medical and Allied Health Professional Staff (MAHPS) Executive Committee in accordance with MAHPS bylaws. They are recognized and chartered to ensure compliance, quality, and operational excellence at Oregon State Hospital.

- Accident and Incident Review Subcommittee
- Administration and Operations Committee
- API Governance Council

- Assault Mitigation Subcommittee
 - Bylaws Committee
 - Central Safety Committee
 - Clinical Advisory Team
 - Credentials Committee
 - Data Governance Subcommittee
 - Ethics Committee
 - Falls Subcommittee
 - Gender Expansive Care and Organizational Support Subcommittee
 - Graduate Medical Education Committee
 - Infection Prevention Committee
 - Licensed Dietitian Peer Review Committee
 - Medical and Allied Health Professional Staff (MAHPS) Executive Committee
 - Medical Performance Committee
 - Medical Records Committee
 - Medication Safety Committee
 - Medication Variance Subcommittee
 - Patient Experience Committee
 - Pharmacy & Therapeutics Committee
 - Physical Environment Committee
 - Psychology Peer Review Committee
 - Quality and Safety Oversight Committee
 - Quality Council
 - Research Committee
-

- Social Work Peer Review Committee
- Seclusion or Restraint Subcommittee
- Technology Governance Committee
- Utilization Review Committee

The hospital also maintains several committees that operate outside the established management and governance structure and, as such, are not subject to Policy 1.017 requirements.

- Legislatively required committees
 - Multidisciplinary Staffing Committee
 - Nurse Staffing Committee
 - Contractually required committees
 - SEIU Labor/Management Committee
 - AFSCME Labor/Management Committee
 - LLC operating within OSH
 - OSH Wellness Committee
-