

PART 4 TECHNICAL RESOURCE GROUPS

CHAPTER 1 - HEALTH FACILITIES ADVISORY COMMITTEE

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1-2.1 DEFINITION, SCOPE AND PURPOSE

The Health Facilities Advisory Committee (HFAC) is an interdisciplinary body of nine professionals versed in matters related to the design, construction, operation and maintenance of health facilities and facilities in-general. The body advises the Director, Office of Environmental Health and Engineering, Indian Health Service, and the recommendations are recorded in HFAC decision documents. If approved, these recommendations will be implemented through the Technical Handbook for Environmental Health and Engineering (OEHE Technical Handbook) and through occasional Technical Memoranda, when appropriate. The HFAC operates in a senior staff capacity, as it identifies and establishes best-practices, standards and guidelines for the Agency to utilize in planning, design, construction and operation and maintenance of facilities. The HFAC does not substitute for the authority and priorities of the Area Directors over Area program management. The HFAC does not establish IHS management and/or operational policy.

A. Background

The IHS Office of Environmental Health and Engineering (OEHE) is charged with implementing the planning, design, construction, operation, and maintenance programs for health care facilities and staff quarters serving American Indians and Alaska Natives as authorized and funded by the Congress. This requires coordination and communication among many different disciplines to stay current with changes in technology, model codes, and federal/state and local technical requirements. Because of the unique nature of IHS health care facilities (e.g., remote locations, cultural sensitivity, etc.), the model codes and standard practices of the regular government entity often do not adequately address all issues. These are the types of matters brought before the HFAC for evaluation and resolution.

B. Purpose

The HFAC is established for the purpose of reviewing, evaluating, developing, and issuing technical criteria requirements used in the

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planning, design, construction, operation, and maintenance of IHS health care facilities and staff quarters as determined by the respective health care facilities program Division Directors. The HFAC's major thrust is in developing generic standards to provide continuity and consistency in IHS health care facilities. The standards will minimize the need to "reinvent the wheel." Recommendations by the HFAC will be documented and will be based on past experience, sound judgment, deductive risk management, and suitability for standardization in the IHS arena. The HFAC operates in a staff capacity, and does not substitute for line management or in any way exercise the prerogatives of the operating programs. Management of the programs is under the line authority of the Area Directors with management guidance set by IHS headquarters and documented in the OEHE Technical Handbook and other documentation issued by the headquarters program directors.

1-2.2 COMMITTEE MEMBERSHIP AND METHOD OF OPERATION

A. Composition of Committee

The HFAC is composed of nine members selected from representative programs that deal with the planning, design, construction, cooperation, and maintenance of IHS health care facilities and staff quarters. Members are not expected to represent their organization or program, rather they are selected because they are knowledgeable professionals who represent a cross section of the interests, concerns, and responsibilities of IHS health care facilities and staff quarters programs.

The HFAC will consist of the following nine members:

- Four IHS representatives from the Headquarters program (two representatives from Headquarters East, one representative from ES-Dallas and one representative from ES-Seattle);
- One IHS representative from the Area Office institutional environmental health program; and
- Three at-large Area Facilities Engineers, who occupy a position of Area Facility Director or equivalent.
- One at-large Facilities Engineer (facility program head/director/chief) from an in-patient health care facility.

All members shall designate an alternate to attend on their behalf during their absence. Members may delegate their HFAC responsibilities in writing to an alternate representative within the same groupings indicated above.

HFAC members, or their delegated representatives, are to be Registered / Licensed / Certified professionals in their fields.

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It is desirable to rotate membership between those eligible within the groupings as possible.

B. Term of Appointments

Membership on the HFAC for the four representatives from the environmental health and engineering program will generally be the Headquarters Division Directors, other representatives will be appointed by the Director, OEHE. The length of term for the three at-large Area Facilities Engineers, the one Facility Engineer and one representative from the institutional environmental health program will normally not exceed three years. However, the HFAC membership may approve an extension for up to one year when justified, e.g., an individual is heavily engaged in ongoing committee tasks, or a member is elected to Chairperson or Vice-chairperson and total service beyond three years is appropriate. When the term of an at-large Area Facilities Engineer member and one Facility Engineer member has expired or that person no longer serves in an Area Facilities Engineer position or Facility Engineer position respectively, replacement members are jointly selected and appointed by the HFAC membership. At-large members may serve up to two consecutive terms.

C. Chairperson and Vice-Chairperson

The term of both the Chairperson and Vice-chairperson is three years. A person may not serve more than two consecutive terms in either one of these positions.

If the Chairperson must vacate that position for any reason, the remainder of the term will be served by the Vice-chairperson. If the position of Vice-chairperson becomes vacant for any reason, the membership will elect a new Vice-chairman to begin serving a new term.

D. Nominations

Upon a vacancy, the Chairman shall solicit nominations from the HFAC membership.

E. Method of Operation

The HFAC shall develop its own internal procedures relative to its method of conducting business. These shall include, as a minimum, consideration of the following:

1. A meeting shall be held quarterly and may be conducted as conference calls. When possible, HFAC meetings should be scheduled in conjunction with workshops, conferences, etc., which are attended by HFAC members.
2. In accord with the HFAC procedures, provision may be made for the Chairperson to appoint an executive secretary.
3. A proposed agenda for each meeting will be developed and made

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available to the members prior to the meeting.

4. Minutes of each HFAC meeting will be drafted, distributed, and approved by the HFAC membership.
5. A quorum consists of at least 50 percent of the HFAC voting membership. A person attending as an Alternate representative of a member shall not be counted in determining the quorum requirement.
6. A person attending as an Alternate representative of a member cannot vote.
7. Where voting is required or appropriate, e.g., election of the Chairperson, action will be determined by the simple majority of the HFAC voting membership. Consensus is the method preferred in determining HFAC actions.
8. The HFAC may elect to establish standing or ad hoc subcommittees, membership of which may include non-HFAC members provided that the chairperson of that subcommittee is a voting member of the HFAC.
9. The HFAC will adopt and follow an established procedure to develop, review, and issue standards or guidelines. This includes the following items:
 - The HFAC will establish specific priority areas where standard guidelines are needed. Written suggestions and concerns for topics to be considered by the HFAC are encouraged from any personnel involved in the planning, design, construction, operation, and maintenance of health care facilities. Specific assignments may be made by the Chairperson and performed by individual members or subcommittees for later presentation and approval by the HFAC.
 - The HFAC member assigned to specific tasks should prepare a completed draft guideline which will be distributed to the HFAC members and reviewed for editorial comments. The comments will be mailed to the preparer by the individual members. Then, the preparer will revise or correct the completed draft guideline and distribute to the HFAC members. The preparer will present the corrected draft guideline for discussion at the meeting.
 - After the discussion, the HFAC membership could accept or reject the corrected draft. If the draft is acceptable, the Chairperson will ask for a motion to adopt or follow the draft. If the draft is rejected, due to incomplete write-ups, or because it needs additional information, etc., the chairperson will ask for resubmission at a later date.
 - The Chairperson is responsible for assuring that appropriate personnel have an opportunity to review and comment on the proposed

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guidelines, and that the membership has considered these comments, before they are approved by the HFAC.

- The executive secretary will record the approved motion, prepare a decision notice outlining the HFAC position; the actions taken; and the issue, decision, reference, and date when the guideline was voted by the HFAC membership. The decision notice may include a draft technical handbook chapter prepared by HFAC members or subcommittee or others. The decision notice may also include or reference a published guideline or standards used by the Federal government or private sector.
- The Chairperson will review and sign the decision notice, and the executive secretary will mail this notice to the HFAC membership and Area offices together with a draft of any affected guidance subject to editorial revision.
- The signed decision notice will be filed on the HFAC website, and, if the decision involves preparation of a technical handbook chapter, it will be prepared and processed in accordance with the guidance in Chapter 2-1, "Technical Handbook Implementation."