



## New Board Member Policy

Approved: June 1, 2016

Revised and Approved: January 8, 2018

Revised and Approved: June 8, 2020

Revised and Approved: June 14, 2021

**Purpose:** The purpose of this policy is to establish a procedure for filling vacant Board seats.

### Summary of Board Voting Seats:

Sectors and At-Large with voting seats on the Board (n=15)	Tribes with voting seats on the Board (n=7)
1. Federally Qualified Health Center 2. At-Large (clinical) 3. Mental Health Treatment 4. Substance Use Disorder Treatment 5. Behavioral Health Administrative Services Organization 6. Medicaid Managed Care Organization 7. Private/Not for Profit Hospital 8. Public Hospital 9. Critical Access Hospital 10. Public Health 11. Long Term Care/Area Agency on Aging/Home Health 12. At-Large (community) 13. Community Action Program/Social Service Agency 14. At-Large (community) 15. At-Large (community)	1. Hoh Tribe 2. Jamestown S'Klallam Tribe 3. Lower Elwha Klallam Tribe 4. Makah Tribe 5. Port Gamble S'Klallam Tribe 6. Quileute Tribe 7. Suquamish Tribe

### Procedure:

- Nominations to the Olympic Community of Health (OCH) Board of Directors (Board) are to be made when a new sector seat is identified or an at-large seat is designated, a member's term limit is nearing, a member retires, a member resigns, or a member can no longer represent their sector. Nominations will be confirmed at Board meetings.
- Sector Seats:** Sector nominations for primary and alternates to the Board are to be made among and by peers within the sector for whom the individual serves as the representative. Staff may assist in facilitating the nomination process. If partners within a sector cannot agree on their representative or are unable to caucus with other partners in their sector to select a representative, an *ad hoc* Nominating Committee of at least three Board members will receive



and vet nominations and recommend a sector representative to the Board. Sector representatives are expected to communicate on behalf of and represent the sector as a whole and to ensure a system for regular communication and feedback within their sector as a responsibility of their Board participation. Each sector will constitute one “vote” in decision making.

3. **Tribal Seats:** Each Tribe is allotted one vote and may appoint alternate representatives as desired. The Board does not have authority to confirm or deny Tribal appointments. For additional detail, please refer to the Tribal Collaboration and Communication Policy.
4. **Medicaid Managed Care Organizations (MCO) Seats:** One board seat be provided to the MCOs with one vote. MCO representatives will rotate on an annual basis using the calendar year. The MCO sector notify the OCH Board of Directors one month prior to the end of each term to inform the Board about which person will rotate on for the next term. Terms for the MCO sector will cycle annually, on the January – December cycle. For additional detail, please refer to the MCO Sector Representation Policy.
5. **At-Large Seats:** At-large seats are nominated by the individual who wishes to participate on the Board and must include at least one reference. At-large representatives are not required to caucus with any sector and vote in the best interest of the region based on their personal or professional knowledge and experience.
6. This policy and the Board sector and at-large seats shall be renewed annually.