Governing Policies of the BGC Board of Directors

Adopted March 2013
Last revised September 22, 2019
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Introduction

This Governing Policies Manual contains the current standing (ongoing) performance standards, values and expectations of the Board of Directors (“the Board”) of the Board for Global EHS Credentialing (BGC).

**Purpose:** This Manual is designed to help the Board approach decisions from the perspective of its own, previously established standards, values and expectations by:

- Elevating efficiency of having all ongoing Board policies in one place.
- Quickly orienting new Board members to current policies.
- Eliminating redundant or conflicting policies.
- Having greater ease of reviewing current policy when considering new issues.
- Providing clear, proactive policies to guide the Chief Executive Officer (CEO) and staff, as well as Board officers, members and committees.

**Consistency:** Each policy in this document is expected to be consistent with the law, the Articles of Incorporation and the Bylaws, all of which have precedence over these Board policies. Except for time-limited or procedural-only Board decisions (approving minutes, electing officers, etc.), which are recorded in Board meeting minutes, all standing Board policies shall be included or referred to in this document. The Chief Executive Officer is responsible for developing operational and administrative policies and procedures that are consistent with the standards set forth in this Manual.

**Transition:** Unless a prior Board resolution or contract obligates the organization with regard to a specific matter, these policies supersede previous Board resolutions with the exception of those obligating the organization in regard to a specific matter. If an actual or apparent conflict arises between this Manual and other policies or Board resolutions, the matter shall be brought to the Board’s attention for resolution.

**Changes:** These policies are intended to be reviewed and refined, as appropriate. Proposed revisions may be submitted for Board consideration, by any Board member or by the Chief Executive Officer. Whenever changes are adopted, the updated document should be dated and promptly disseminated to the Board and Chief Executive Officer.

**Specificity:** Each new policy will be drafted to fit into the appropriate section of the Manual. For consistency, policies should be drafted starting with the broadest policy statement, then adding specificity down to the level of detail that the Board finds appropriate/necessary for Board action. The Board will afford discretion for implementation (allowing reasonable interpretation) when delegating further decisions to the Board Chair, Board Committees or the Chief Executive Officer.
The mission of the Board for Global EHS Credentialing®:

To be the leader in offering credentials that elevate the technical and ethical standards for professionals practicing the science of protecting, managing, and enhancing the health and safety of people and the environment.

Vision

The Board for Global EHS Credentialing is recognized worldwide for establishing and administering credentials that set the standards of proficiency and ethics for professionals who practice the science of protecting, managing, and enhancing the health and safety of people and the environment.

Priority Results (Ends and Means):

End 1.1 BGC Credentialed practitioners will be abundant, effective, and globally competitive.

- BGC creates methods for the initial and on-going credentialing of practitioners in professions based on the science of protecting and enhancing the health, safety, and environment of people at work and in their communities.

End 1.2 BGC (Board and Staff) will be strategic, innovative, and relevant to its community of interest.

- BGC continually improves its structure and activities using evidence-based decisions through internal and external assessment.
- BGC maintains relevance, organizational stability and financial viability through innovation and the development of opportunities.
- BGC disseminates educational content about its processes and information about the benefits of its credentialed practitioners and organization.
2.0 Governance Commitment
Date of adoption / Last revision: March 16, 2013

The purpose of the Board, on behalf of current and future Diplomates, is to assure that the Board for Global EHS Credentialing (a) achieves appropriate results for appropriate recipients at an optimal cost, and (b) avoids unacceptable actions and situations.
2.1 Governing Style and Values
Date of adoption / Last revision: January 21, 2017

The Board will govern lawfully, using Policy Governance principles, with an emphasis on (a) integrity and truthfulness in all of its activities and practices, (b) outward, long term vision, (c) encouragement of diverse viewpoints, (d) strategic leadership, (e) clear distinction of Board and chief executive roles and accountabilities, (f) collective rather than individual decisions, (g) being pro-active rather than reactive.

Accordingly:

1. The Board will cultivate a sense of group responsibility. The Board, not the staff, will be responsible for Board performance. The Board will lead BGC by proactively setting performance expectations for the organization.

2. The Board will use the expertise of its members to enhance its understanding of issues, but will not defer to that expertise as the judgment of the entire Board.

3. The Board will set performance standards and expectations for the organization through the careful establishment of written governing policies. The Board's primary policy focus will be on the intended long-term impacts for and on behalf of current and future Diplomates, not on the staff administrative or programmatic means of attaining those results.

4. The Board will adhere to its own performance expectations pertaining to matters such as attendance, preparation for meetings, policymaking, respect of roles, speaking to CEO and the public with one voice, and continually building the capability and reputation of the Board as an effective leadership team.
   A. Continual Board development will include periodic discussion of its own performance, orientation of new Board members in the Board's governance process, enhanced learning for seasoned Board members.
   B. New Board members must participate in an orientation program prior to their being seated as voting Board members. Orientation for new Board members will include three primary components:
      i. Governance process: Board leaders will ensure provision of training including the governance principles underlying this document, and review of BGC's Bylaws and these policies, with particular emphasis on the Board Members' Code of Conduct policy.
      ii. Current strategic issues: Board leaders and the Chief Executive Officer will provide overview and background information on significant issues being addressed and decided upon early in new Board member’s tenure.
      iii. Operational overview: The Chief Executive Officer will help new Board members achieve a general understanding of BGC's operating organization (financials, key personnel, key products/programs/services, FAQs, etc.).

5. The Board will be accountable to current and future Diplomates for competent, conscientious and effective fulfillment of its governance obligations. The Board will not allow any officer, individual or Board Committee to be an obstacle to this commitment.

6. While the Board may change these governing policies at any time, it will diligently observe those currently in effect.
7. All on-going policies of the Board are contained in this document, and they remain in effect, unless amended or deleted by Board action.

8. The Board will regularly evaluate and strive to improve its performance, including self-assessment at each face-to-face meeting, in which the Board will compare its activity and discipline standards set forth in these Governance Process and Board-CEO Delegation policies.

9. The Board will not allow the organization, in its hiring, selection of new Board members and other activities, to discriminate on the basis of race, creed, national origin, religion, age, disability, political affiliation, sex, sexual orientation, marital, parental or military status, or any other legally protected status.

10. While its primary fidelity is to current and future Diplomates, the Board recognizes that excellence in BGC’s work reaches a diverse realm of beneficiaries, including:

- Employees
- Employers
- Professions based on the science of protecting and enhancing the health, safety, and environment of people at work and in their communities
- BGC Diplomates
- Applicants
- Public and Community at Large
- Local Emergency Planning Committees
- Allied Professions & Consumers
- University Educators and students - Graduate & Undergraduate
- Regulatory & Legislative Bodies
- Military
- Allied Professional Boards
- Insurance Industry
- Legal Profession
- Special Interest Groups
As an informed agent on behalf of current and future Diplomates, the Board’s job is to define and ensure appropriate organizational performance. The Board’s specific job products are unique to its trusteeship role and necessary for proper governance and management of BGC.

Accordingly, the Board will:

1. Connect the interests of current and future Diplomates with the BGC operating organization.
2. Ensure that written performance standards, as set forth in these governing policies, appropriately address the broadest levels of all organizational decisions and situations.
   A. Ends: Priority results pertaining to organizational products, impacts, benefits, outcomes, recipients, and their relative worth (what good for which recipients at what cost/worth).
   B. Executive Limitations: Constraints on executive authority defining the boundaries of prudence and ethics within which all executive activity and decisions must take place.
   C. Governance Process: Specification of how the Board defines, executes and assesses its own work.
   D. Board-Management Delegation: How authority is delegated to management, and its proper use monitored; the CEO role, authority and accountability.
3. Ensure Ends fulfillment, financial solvency and organizational integrity by holding the CEO accountable for successful achievement of Ends, and adherence to Executive Limitations.
4. Pertaining to ethics cases, the Board has sole authority to:
   A. Establish and maintain a Code of Ethics for individuals applying for or holding BGC designations or certifications.
   B. Establish and maintain an Ethics Case Procedure.
   C. Empower the CEO to establish an Ethics Review Committee according to the Ethics Case Procedure and governing policies.
   D. Establish a Board Appeals Committee for resolving all appropriate appeals concerning decisions of the Ethics Review Committee.
5. Pertaining to certifications, the Board has sole authority to:
   A. Establish or acquire new certification programs.
   B. Approve qualification requirements for certification examinations.
   C. Approve additions or discontinuations of existing categories of certification.
   D. Approve changes to certification maintenance requirements.
   E. Approve modifications to the examination structure.
   F. Approve advice or recommendations of BGC Committees.
   G. Establish and maintain a Certification Appeals Procedure.
   H. Establish a Board Certification Appeals Committee for resolving all appropriate appeals concerning decisions related to certification.
   I. Resolve final certification appeals consistent with Certification Appeals Procedures sections M and N.
To fulfill its role, the Board will prepare and follow an annual work plan which (a) re-explores Ends policies annually and (b) continually improves Board performance through Board education and interactions with staff, customers, beneficiaries and outside experts.

1. **Annual Cycle:** The Board's annual planning cycle will conclude each year at its fall meeting so that administrative planning and budgeting for the next calendar year can be based on planning for both long-and short-term Ends achievement.

2. **Board Work Plan Development:** The Board’s planning cycle will also begin at its fall meeting. At that time, the officer serving as Chair for the next year will present for the Board’s consideration and approval a suggested work plan for the following year’s meetings. Considerations should include:
   
   A. **Ownership Linkage:** Consultations with selected groups, within the ownership or among beneficiaries, or other methods of gaining their input.
   
   B. **Board Education:** Identification of topics for Board education, primarily related governance, ethics, and external issues and trends that affect Ends, and to a lesser extent key areas of operations.
   
   C. **Ends Review:** How the Board will systematically review all of its Ends over the course of the year, (e.g., by priority, by topic, or other emphasis of the Board’s choosing).
   
   D. **Assessment/Evaluation of CEO Performance:** Reviewing the schedule of planned monitoring activities to assure performance on Ends and Executive Limitations policies.
   
   E. **Board Self-Assessment:** Methods and timeline for periodic and objective evaluation of how well the Board is fulfilling its role (i.e., in accordance with its Governance Process and Board/Management Delegation policies) and open discussion of how the Board’s performance can be improved.
   
   F. **Meeting Schedule:** Establishment of the meeting schedule for the coming year to maximize Board member attendance and participation.

3. **Meeting Agendas:** The Chair will determine the agenda for any particular meeting, although Board members and the CEO may request or recommend any appropriate matters for Board consideration.
   
   A. A Board member or the CEO may recommend or request a matter for Board discussion by submitting the item to the Chair at least eight (8) days prior to the regularly scheduled Board meeting.
   
   B. The meeting agenda and packet (background materials for decision items on the agenda, monitoring reports, etc.) are to be received by Board members at least four (4) days prior to the scheduled Board meeting.
   
   C. By an affirmative vote of a majority of those present, additional matters may be added to the agenda of any regular Board meeting.
4. **Consent Agenda**: Throughout the administrative year, the Board will attend to consent agenda items (those items delegated to the CEO but which are required by Bylaws or third-party to be board-approved) as expeditiously as possible.

5. **Chief Executive Officer Monitoring**: The Board will act on Chief Executive Officer monitoring reports received subsequent to its last meeting, determining by majority vote whether the report:
   
   A. Conveys a reasonable interpretation of the respective policy, and
   
   B. Provides reasonable substantiation of compliance with the policy, as interpreted.

6. **Chief Executive Officer Annual Compensation Review**: At the fall Board meeting, the Board will summarize and review its judgments of Chief Executive Officer performance based on its monitoring activities (monitoring reports, audits, etc.) in the previous year, and will determine any adjustments to the Chief Executive Officer’s compensation and benefits, to be effective January 1st.
2.4 Board Chair’s Role and Authority

Date of adoption / Last revision: March 16, 2013

Serving as BGC’s chief governance officer, the Board Chair’s primary role is to assure the integrity of the Board’s process, and secondarily to represent the Board to outside parties.

Accordingly:

1. The Chair’s job is to ensure that the Board acts in a manner consistent with its policies and any requirements legitimately imposed upon it from outside the organization.
   A. Meeting discussion content (e.g., meeting agendas) will include only those issues, which according to Board policy, clearly belong to the Board to decide or to monitor, or to otherwise inform/educate the Board so it can best fulfill its responsibilities.
   B. Deliberation will be fair, open and thorough, but also timely, orderly and kept to the point.

2. The Chair has authority to make decisions consistent with Board policies on Governance Process and Board-Management Delegation, with the exception of (a) employment/termination of the Chief Executive Officer, or (b) instances where the Board specifically delegates portions of its authority to others. The Chair may use any reasonable interpretation of these policies.
   A. The Chair is empowered to preside at Board meetings with all the commonly accepted authority of that position such as ruling and recognizing.
   B. The Chair has no authority to make decisions within the Board’s Ends and Executive Limitations policy areas. Therefore, the Chair has no authority to supervise or direct the CEO.
   C. The Chair may represent the Board to outside parties in announcing Board-stated positions and in stating decisions and interpretations within the area delegated to the Chair.
   D. The Chair may delegate this authority, but remains accountable for its use.
   E. Except where specified otherwise in Bylaws or Board Policies, the Chair may appoint Board members to serve on Board Committees.
2.5  Board Members’ Code of Conduct
Date of adoption / Last revision: October 22, 2017

The Board expects of itself and its members ethical, businesslike and lawful conduct, including proper use of authority and appropriate decorum when acting as Board members.

1. Board members must demonstrate loyalty to the interests of current and future Diplomates, superseding any conflicting loyalties to segments of the ownership, family members, advocacy or interest groups, staff or other organizations, or of any personal interest as a consumer of BGC’s services.

2. Board members are to discharge their duties honestly and in good faith. Board members shall exercise the degree of care, diligence and skill that a reasonably prudent person would exercise in similar circumstances.

3. Board Members must avoid conflict of interest with respect to their fiduciary responsibilities, and also take into consideration potential for an appearance of conflict of interest.
   A. There will be no self-dealing or business by a Board member with the staff organization, except as procedurally controlled to assure openness, competitive opportunity and equal access to inside information.
   B. Board members will annually complete a form disclosing their involvement with other organizations, with vendors or any other affiliations that might be, or might reasonably be, seen as being a conflict of interest. Board members will promptly update their disclosures if, during the year, a material change in circumstances should occur.
   C. When the Board is to decide upon an issue about which a member has an actual or potential conflict of interest, that member shall disclose the conflict to the Board, recuse themselves and not participate in discussions, deliberations or votes related to the issue.
   D. Board members will not use their Board position to obtain staff employment for themselves, family members or close associates. Board members shall resign from the Board prior to applying for a staff position with the BGC.
   E. Except for expenses related to BGC-authorized travel, Board members will not purchase products or services on behalf of BGC for reimbursement without the written consent of the CEO.
   F. Board members may not be directly affiliated with a course, activity or material advertised or construed to be preparatory for certification by BGC during the Board Members’ BGC term of office. Promoting ways to prepare to be successful on the exam is acceptable.

4. Board members may not attempt to exercise individual authority over the organization.
   A. Board members’ interaction with the CEO or with staff must reflect the lack of authority vested in individuals, except when explicitly Board authorized.
   B. Board members’ interaction with any external entity, including public or media, must recognize the same limitation and that Board members are not to speak for the CEO or for the Board except to repeat explicitly stated Board decisions.
   C. Board members will not publicly express individual judgments of performance of employees or the CEO.
5. Board members will respect the confidentiality appropriate to issues of a sensitive nature.

6. A Board member aware of credible information that suggests that a Board policy has been violated, by either the Board, a Board member or the CEO, has an affirmative obligation to bring the concern to the Board’s agenda.

7. A Board member who is aware of credible information that another board member, a staff member, or an individual working on behalf of BGC has caused or allowed any practice, activity, decision or organizational circumstance that is unlawful, imprudent or in violation of commonly accepted business practices or professional ethics must report that information to the Board within five business days, and if unlawful activity is suspected, notify an appropriate civil authority. The board will investigate the alleged misconduct, and following the conclusion of the investigation, the board will notify the Board member of how it was addressed. (Please refer to the procedure on the following Policy 2.5.)

8. Board members will support the legitimacy and authority of the final determination of the Board on any matter, irrespective of the member’s personal position on the issue.
2.5 Board Members’ Code of Conduct, continued

Procedure for Reporting Allegations of Misconduct (See Policy 2.5.7)

Note: The following information is a procedure to clarify the implementation of Policy 2.5.7 on Reporting Allegations of misconduct. It is not a board policy.

A. A Board or Staff member who is aware of credible information that another board member, a staff member, or an individual working on behalf of BGC has engaged in misconduct as described in Policy 2.5.7 must report that it to the CEO within five business days, and if unlawful activity is suspected, notify an appropriate civil authority. If the CEO is the subject of the misconduct, the allegation must be reported to the Chair of the BGC board.

B. The CEO (or BGC Chair) will document the details of the allegation in writing and forward it an Ad Hoc Investigation Committee. The CEO will also send a copy of the allegation to the alleged perpetrator within 5 business days.

C. The Investigation Committee will normally be comprised of the 3 BGC Chairs (past, current and vice) and Public member. Should any of these individuals be the alleged perpetrator of the misconduct, or there is perceived conflict of interest, they should recuse themselves, and the remaining committee members must choose from among the former BGC past chairs or past public members to replace the individual. The CEO will support the work of the committee, and if necessary, legal counsel may be engaged to support the committee. The committee will notify the BGC board that a review is underway and will inform the board of a decision within one business day after it has been reached.

D. The alleged perpetrator will be given the opportunity to respond to the allegation in writing within 10 business days after which, the Investigation Committee will begin its review.

E. The Investigation Committee members will review the allegation of misconduct and any response provided within 10 business days. If the committee determines that the allegation is unsubstantiated, the complainant and alleged perpetrator will be notified within 5 business days of the review that no further action will be taken.

F. If Investigation Committee members determine that the allegation is valid, they will develop a plan to address the misconduct. If necessary, legal counsel may be engaged in the development of the plan.

F. The perpetrator of the misconduct will be notified of the decision and plan within 5 business days. Should the perpetrator disagree with the Investigation Committee's decision, he/she may request that the entire BGC board review the allegation, response, and develop a plan at a board meeting. The decision of the full board will be final, and the perpetrator of the misconduct will be notified in writing of the final decision and plan within 5 business days.

G. The complainant will be notified of the final decision and action in writing within 10 business days of the decision.
Board member engagement and participation is integral to the Board’s leadership success. Therefore, each Board member is expected to fulfill the following responsibilities:

1. **Commitment**: Board members are expected to, upon election to the Board, sign a Letter of Commitment indicating that they have reviewed and commit to abide by BGC’s Bylaws and Governing Policies, as may be amended from time to time.

2. **Attendance**: Board members are expected to attend all Board meetings. If a board member cannot travel to an in-person meeting, the Board may allow participation by electronic teleconferencing, instead.
   
   A. Total absences in a board planning year which meet any of three conditions, below, will constitute that member’s procedural resignation from the Board.
      
      I. missing more than one of the Board’s three regularly scheduled in-person meetings
      
      II. missing more than three of the Board’s nine regularly scheduled teleconference meetings
      
      III. missing one of the Board’s three regularly scheduled in-person meetings and more than two of the Board’s nine regularly scheduled teleconference meetings
   
   B. A Board member may request to be reinstated to the board following a procedural resignation in cases of extenuating circumstances. Reinstatement may be granted only by a vote of the Board.

3. **Preparation and Participation**: Board members are expected to review agenda materials in advance of Board and committee meetings and to participate productively in discussions, always within the performance standards/expectations of Board behavior as outlined in these policies.

4. **Members as Individuals**: The CEO is accountable to the Board as a whole and not to individual Board members. Therefore, the relationship between the CEO and individual members of the Board, including the Chair, is collegial and not hierarchical.

5. **Voluntarism**: Board members may choose to individually volunteer in operational capacities. In such situations, they are subject to the direct supervision of the CEO or responsible staff person.

6. **Participation in Organizational Activities**:
   
   A. In addition to Board meetings, Board members are expected to attend the following events/functions:
      
      i. Annual Board Retreat (if scheduled)
   
   B. Board members are also encouraged to attending the following events/functions:
      
      i. BGC Forum at AlHce
2.7 Board Committee Principles
Date of adoption / Last revision: March 16, 2013

Board committees may be established to help the Board be more efficient and/or effective in its work. Board committees are not to interfere with the Board’s delegation of authority to the CEO, or that of the CEO to other staff.

Accordingly:

1. A committee is a Board committee only if its existence and charge come from the Board, regardless as to whether Board members sit on the committee. When establishing a committee, the Board will carefully state its intended purpose, deliverables, estimated length of tenure or due date, its authorized resources (dollars and time), accountability and any communications expectations.

2. Board committees are to help the Board to do its job, not to help, advise or exercise authority over staff.

3. Board Committees ordinarily will undertake activities not delegated to the CEO, such as due diligence for and preparation of policy alternatives and implications for Board consideration, or performing specific monitoring functions.

4. Board committees may only speak or act for the Board when formally given such authority for specific and time-limited purposes. Expectations and authority will be carefully stated in order not to conflict with those delegated to the CEO.

5. As the CEO works for the full Board, he or she will not be required to seek approval of a Board committee before an executive action.

6. Board Committee members are expected to abide by the Board’s Code of Conduct.

7. This policy applies to any group that is formed by Board action, whether or not it is called a committee and regardless of whether the group includes Board members. It does not apply to committees formed under the authority of the CEO.

8. Board committee performance and membership will be reviewed annually, along with each Board Committee Summary.
2.8 Board Committee Structure
Date of adoption / Last revision: Anticipated Revision September 22, 2019

Board committees are those established by and with authority emanating directly from the Board or the CEO as directed by the board, regardless of whether composition includes non-Board members. Standing and Ad Hoc committees described in Bylaws and policies are those set forth below. Unless otherwise specified, the CEO, or his/her staff designee, will serve as a resource (non-voting member) for each committee. The Board will review its committee structure at least every 24 months. Committee composition will include Board members with staggered terms.

Standing Committees:

1. Scheme Committee
   A. Deliverable: Decisions pertaining to the exam process, per ANSI/ISO requirements.
   B. Composition: The entire BGC Board fulfills this role.

2. Nominations Committee
   A. Deliverable: Properly screened slate of potential Board members, recommended to the Board at its Fall meeting each year.
   B. Authority: See Budgeting for Board Functions policy.
   C. Composition: Six Board members, including the immediate Past Chair of the Board as Chairperson, appointed each year by the Board at the Fall Board meeting.
   D. Tenure: Standing Committee

3. Quality-Improvement Committee
   A. Deliverable: An annual audit report to the BOD identifying BGC Process compliance on one of the following BGC areas: 1) Examinations, 2) Applications, or 3) Certification Maintenance and Ethics, conducted on a 3-year cycle.
      i. Where non-compliance(s) are identified, corrective action and/or area of improvement and action plan will be provided (by CEO).
      ii. Final report due at the fall BOD meeting.
   B. Authority: See Budgeting for Board Functions policy.
   C. Composition: Four Board members, including a committee chairperson, appointed by the Board each year at the Fall Board meeting.
   D. Tenure: Standing Committee

4. Executive Compensation Committee
   A. Deliverables:
      #1: Recommendations for Board consideration regarding adjustments to the CEO compensation (and benefits). To be presented to the Board in a timely manner to allow final action to be taken by October each year.
      #2: Accompanying the recommendations, data as to comparable compensation for similarly qualified persons in comparable positions.
2.8 Board Committee Structure, continued

#3: Contemporaneous documentation and recordkeeping with respect to the deliberations and decisions regarding CEO compensation.

**B. Authority:** See *Budgeting for Board Functions* policy.

**C. Composition:** A chairperson, the public representative plus one additional Board member appointed by the Board each year at the Fall Board meeting.

**D. Tenure:** Standing Committee

5. Financial Oversight/Audit Committee

**A. Deliverable #1: Financial Policies Review:** Review financial policies and recommend changes, as appropriate, to ensure those policies provide adequate oversight of BGC finances and the implementation.

**Deliverable #2: Monitoring of Financial Performance:**

i. Review CEO’s monitoring reports on financial policies (Financial Planning/Budgeting, Financial Condition and Activities, Asset Protection and Compensation and Benefits) and advise the Board so it can make informed judgments on approval of those monitoring reports.

ii. Review investments and advise the Board on compliance with the Investment Standard Operating Procedures.

iii. Direct Inspection Monitoring: As scheduled by the Board per its Monitoring CEO Performance policy (3.4), Direct Inspection monitoring of CEO compliance with financial policies.

**Deliverable #3: Independent Audit of Finances:**

i. Develop criteria for choosing an independent auditor and screen potential auditors.

ii. Upon verification of auditor’s independence, recommend auditor choice to the Board by no later than November of each year.

   a. To ensure independence and a fresh perspective, the Board shall change independent auditors at least every three years.

   b. A new auditor may be from the same firm as previously used.

   c. After six years with one auditing firm, the Board shall issue a request for proposal from that and other firms to determine whether to change or retain the current auditing firm.

iii. Annual specification of audit scope, consistent with Board monitoring schedule (see policy 3.4), and approval of any permitted non-audit services to be provided by the independent auditor.

iv. Assurance that the auditor has unfettered access to organizational management and records.

v. Review with the independent auditor any problems encountered performing the audit, the audited financial statements, and any management letter provided by the auditor.

**B. Authority:** See *Budgeting for Board Functions* policy.

**C. Composition:** Four Board members, including a chairperson, appointed by the Board each year at the Fall Board meeting.

**D. Tenure:** Standing Committee
6. **Bylaws/Policies Committee**
   A. **Deliverable**: Biannual review of the Bylaws, Governance Process (GP) Policies and Board/Management Delegation (BMD) Policies. Any recommended changes will be brought to the Board for a vote.
   B. **Authority**: See *Budgeting for Board Functions* policy.
   C. **Composition**: Four Board members, one from each election cycle, appointed by the Board every other year at the Fall Board meeting.
   D. **Tenure**: Standing Committee

7. **Recognition Awards Committee**
   A. **Deliverable**: A properly screened slate of potential candidates to receive BGC recognition awards to be recommended to the Board once each year.
   B. **Authority**: See *Budgeting for Board Functions* policy.
   C. **Composition**: A minimum of three Board members, appointed on a rotating basis each year by the Board at the Fall Board meeting.
   D. **Tenure**: Standing Committee

Ad Hoc Committees:

1. **Ethics Review Committee (ERC)**
   A. **Deliverable**: To conduct an Ethics Complaint Hearing designed to collect and weigh all the available information and proof in order to determine whether violations of the Code of Ethics or Ethics Case Procedures have occurred.
   B. **Authority**: Ethics Case Procedures (Section A.2. and H.1)
   C. **Composition**: a Chair, a Vice-Chair, and, at least three (3) other members. A committee member may not be a current board member, nor serve where: she or he has had a substantial professional or personal relationship with a party, a conflict exists between the interests of a party and the Committee member, or, there would appear to be an impropriety by committee service.
   D. **Tenure**: Ad Hoc Committee appointed by the CEO for the purpose of rendering an ethics case decision. The committee will dissolve once the ethics case decision is rendered.

2. **Board Appeals Committee (BAC)**
   A. **Deliverable**: To resolve all appropriate appeals concerning decisions of the Ethics Review Committee (ERC).
   B. **Authority**: Ethics Case Procedures (Sections A.2. and K.1)
   C. **Composition**: A Chair, a Vice-Chair, and, at least one (1) other member. Committee members are current board members. A committee member may serve where: she or he has not had a substantial professional or personal relationship with a party, no conflict exists
between the interests of a party and the Committee member, or there would appear to be no impropriety by committee service.

D. **Tenure:** Ad Hoc Board Committee appointed by the Chair of the BGC. The committee will disband once the ethics case decision is rendered.

3. **Certification Appeals Committee (CAC)**

A. **Deliverable:** To conduct an Ethics Certification Appeals Hearing designed to collect and weigh all the available information and proof in order to resolve a certification appeal.

B. **Authority:** Certification Appeals Procedures (Section J)

C. **Composition:** A Chair and at least two (2) other members. Committee member may not be a current board member, and may not serve where: she or he has had a substantial professional or personal relationship with a party, a conflict exists between the interests of a party and the Committee member, or there would appear to be an impropriety by committee service.

D. **Tenure:** Ad Hoc Committee appointed by the Chair of the BGC and approved by the Board of Directors. The committee will disband once a certification appeals decision is rendered.

4. **Consumer Interest Panel**

A. **Deliverable:** To provide recommendations to the BGC Board as needed on the following:

  #1: how the value of Diplomates can be best demonstrated and conveyed to consumers of Diplomates’ services.
  
  #2: potential new areas of practice or employment for diplomates.
  
  #3: areas where the skills of diplomates are not meeting the needs of employers.

B. **Authority:** See *Budgeting for Board Functions* policy.

C. **Composition:** The Vice Chair of the Board as Chairperson, at least three individuals, appointed at the Fall Board meeting for two-year terms on a rotating basis. Members will be in occupational positions that employ or contract for the services of Diplomates or those with similar expertise.

D. **Tenure:** Ad Hoc Committee
Investigation Committee

A. **Deliverable**: To determine the validity of allegations of misconduct by board members, staff members or individuals working on behalf of BGC, and develop plans to address them if present.

B. **Authority**: See *Policy 2.5*.

C. **Composition**: Investigation Committee will normally be comprised of the 3 BGC Chairs (past, current and vice) and Public member. Should any of these individuals be the alleged perpetrator of the misconduct, or there is perceived conflict of interest, they should recuse themselves, and the remaining committee members must choose from among the former BGC past chairs or past public members to replace the individual.

D. **Tenure**: Ad Hoc Committee. The committee will disband if the allegation has been determined to be unsubstantiated or a plan has been developed to address a finding of misconduct.
2.9 Budgeting for Board Functions

Date of adoption / Last revision: December 16, 2013

Because poor governance costs more than learning to govern well, the Board will invest in its governance capacity.

Accordingly:

1. Board skills, methods, and supports will be sufficient to assure governing with excellence.
   A. Training and retraining will be used to orient new members, as well as to maintain and increase existing member skills and understandings.
   B. Outside monitoring assistance will be arranged, under the direction from the Board, so that the Board can exercise control over organizational performance. This includes, but is not limited to, audits, reviews or opinions on fiscal, legal or governance matters.
   C. Outreach mechanisms will be used as needed to ensure the Board’s ability to listen to beneficiary viewpoints and values.

2. Costs will be prudently incurred, though not at the expense of endangering the development and maintenance of effective capability. Line item considerations for Board prerogatives include but are not limited to:
   A. Board training, including publications
   B. Board member travel / reimbursements (attendance at board meetings, conferences, workshops, etc.)
   C. Third-party “external” monitoring of organizational performance (other than fiscal audit).
   D. Surveys, focus groups or other linkage activities with beneficiaries
   E. Board meeting costs
   F. Board committee functions
      a. Scheme
      b. Nominations
      c. Quality Improvement
      d. Executive Compensation
      e. Financial Oversight / Audit
      f. Bylaws/Policies
      g. Recognition Awards
      h. Ethics Review Committee (Ad Hoc)
      i. Board Appeals Committee (Ad Hoc)
      j. Certification Appeals Committee (Ad Hoc)
      k. Consumer Interest Panel (Ad Hoc)
      l. Investigation Committee (Ad Hoc)
3. The Board will establish its governance budget for the next fiscal year each year at its October meeting.
3.0 Global Board-Chief Executive Officer (CEO) Connection

Date of adoption / Last revision: March 16, 2013

The Board’s sole official connection to the operational organization, its achievements and conduct will be through a Chief Executive Officer, titled Chief Executive Officer (CEO).
3.1 Unity of Control
Date of adoption / Last revision: March 16, 2013

Only motions officially passed by the Board are binding on the CEO.

Accordingly:

1. No Board member, officer or committee has authority over the CEO or any member of the CEO’s staff, except in rare instances when the Board has specifically authorized a member, officer, or committee to direct or use staff resources for a specific issue.

2. Board members or committees may request information or assistance without Board authorization, but if such request, that, in the CEO’s judgment, requires a material amount of staff time or funds, or is disruptive, it may be declined. The committee or Board member may then refer the request to the full Board for consideration.
3.2 Accountability of the Chief Executive Officer

Date of adoption / Last revision: March 16, 2013

All Board authority delegated to management is delegated through the CEO. Therefore, the authority and accountability of staff, as far as the Board is concerned, is considered the authority and accountability of the CEO.

Accordingly:

1. The Board will not give instructions to persons who report directly or indirectly to the CEO.

2. The Board will not evaluate, either formally or informally, any staff other than the CEO.

3. The Board will consider and evaluate CEO performance as synonymous with organizational accomplishment of Board’s stated Ends and compliance with Executive Limitations. No performance measure established by the Board or by sub-sets of the Board shall conflict with or modify this measure of performance.

4. Consequently, the CEO’s accountability and evaluation are based on performance in two areas:

   A. Organizational accomplishment of Board-established Ends priorities, and

   B. Organizational operations within the parameters of legality, prudence and ethics established in the Board’s Executive Limitations policies.
3.3 Delegation to the Chief Executive Officer
Date of adoption / Last revision: March 16, 2013

The Board will direct the CEO through written policies setting forth the organizational Ends to be achieved and organizational situations and actions to be avoided, allowing the CEO to use any reasonable interpretation of these policies.

Accordingly:

1. Ends policies instruct the CEO to achieve specified results, for specified recipients at a specified worth or priority. These policies will be developed systematically from the broadest, most general level to more defined levels.

2. Executive Limitations policies define the boundaries of legality, prudence and ethics within which the CEO is expected to operate. These policies describe those practices, activities, decisions and circumstances that would be unacceptable to the Board, even if effective in producing the desired results. These policies will also be developed systematically from the broadest, most general level to more defined levels. The Board will not prescribe organizational means delegated to the CEO.

3. An Ends or Executive Limitations policy at a given level does not limit the scope of any preceding provisions of that same policy topic.

4. The CEO is authorized to establish further policies, procedures and practices, make decisions, take actions, and develop activities as long as they are consistent with any reasonable interpretation of the Board’s Ends and Executive Limitations policies.

5. The Board may change its Ends and Executive Limitations policies, thereby shifting the boundary between Board and CEO domains. By doing so, the Board changes the latitude of choice and authority given to the CEO. However, as long as any particular delegation is in place, the Board will respect and support CEO decisions that are compliant with those policies, as reasonably interpreted.
3.4 Monitoring Chief Executive Officer Performance

Date of adoption / Last revision: (December 17, 2018)

The Board will systematically and rigorously monitor CEO job performance, determining the extent to which Ends are being achieved and whether operational activities fall within the boundaries established Executive Limitations policies.

Accordingly:

1. Monitoring is simply to determine the degree to which Board policies are being met. Information that does not address accomplishment of Ends and compliance with Executive Limitations will not be considered in the Board’s evaluation of CEO performance.

2. Ends and Executive Limitations policies may be monitored by one or more of three methods:
   A. Internal Report: The CEO discloses, in writing, his/her policy interpretations, along with data supporting his/her assessment of accomplishment/compliance with the policy under review. As appropriate in a given context, the CEO may present information supporting the “reasonableness” of his/her interpretation.
   B. External Report: An external, disinterested third party selected by the Board assesses accomplishment of, or compliance with, Board policies as reasonably interpreted by the CEO.
   C. Direct Board Inspection: A designated board member(s) assesses accomplishment of, or compliance with, a given policy, as reasonably interpreted by the CEO. This includes quarterly review of financial reports.

3. In every case, the standard for conformance shall be any reasonable CEO interpretation of the Board policy being monitored. The Board is final judge of reasonableness, but will always judge with a reasonable person test (whether the CEO did what a reasonably prudent executive would do in that context), rather than with interpretations favored by Board members or by the Board as a whole.

4. Board action on monitoring reports received will be judgment as to whether (a) the CEO’s interpretation is reasonable, and (b) data demonstrate reasonable accomplishment of, or compliance with, the CEO’s interpretation.

5. Interpretations determined by the Board not to be reasonable or data determined not to demonstrate reasonable accomplishment of, or compliance with, a Board policy as interpreted, will be subject to a remedial process agreed to by the Board.

6. All policies instructing the CEO will be monitored at a frequency and by a method chosen by the Board. The Board can monitor any policy at any time by any method prescribed in Policy 3.4.2 above, but will ordinarily depend on the following routine schedule:
### Chief Executive Officer Monitoring Schedule

<table>
<thead>
<tr>
<th>Ends /Priority Results Policies</th>
<th>Method</th>
<th>Frequency</th>
<th>Meeting Agenda</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.0 BGC Certified practitioners will be abundant, effective, and globally competitive</td>
<td>Internal</td>
<td>In conjunction with CEO mid-year and end-of-year reviews</td>
<td>2-Summer &amp; 3-Fall</td>
</tr>
<tr>
<td>2.0 BGC (Board and Staff) will be strategic, innovative, and relevant to its community of interest</td>
<td>Internal</td>
<td>In conjunction with CEO mid-year and end-of-year reviews</td>
<td>2-Summer &amp; 3-Fall</td>
</tr>
</tbody>
</table>

### Executive Limitations Policies

<table>
<thead>
<tr>
<th>Executive Limitations Policies</th>
<th>Method</th>
<th>Frequency</th>
<th>Meeting Agenda</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.0 General Management Constraint</td>
<td>Internal</td>
<td>Annually</td>
<td>December</td>
</tr>
<tr>
<td>4.1 Interactions with Stakeholders</td>
<td>Internal</td>
<td>Annually</td>
<td>February</td>
</tr>
<tr>
<td>4.2 Treatment of Staff</td>
<td>Internal</td>
<td>Annually</td>
<td>April</td>
</tr>
<tr>
<td>4.3 Financial Planning/Budgeting</td>
<td>Internal</td>
<td>Annual (Forecast)</td>
<td>3-Fall (vote by December)</td>
</tr>
<tr>
<td></td>
<td>Internal</td>
<td>Mid-year forecast / update</td>
<td>2-Summer</td>
</tr>
<tr>
<td>4.4 Financial Condition and Activities</td>
<td>Internal</td>
<td>Biannually</td>
<td>May &amp; November</td>
</tr>
<tr>
<td></td>
<td>Direct Inspection</td>
<td>Quarterly Financials /Determined by BoD</td>
<td></td>
</tr>
<tr>
<td></td>
<td>External (Audit)</td>
<td>Annually</td>
<td>June</td>
</tr>
<tr>
<td>4.5 Asset Protection</td>
<td>Internal</td>
<td>Annually</td>
<td>January</td>
</tr>
<tr>
<td>4.6 Emergency Management Succession</td>
<td>Internal</td>
<td>Annually</td>
<td>3-Fall</td>
</tr>
<tr>
<td>4.7 Compensation and Benefits</td>
<td>Internal</td>
<td>Annually</td>
<td>July</td>
</tr>
<tr>
<td>4.8 Board Communication and Support</td>
<td>Internal</td>
<td>Annually</td>
<td>2-Summer</td>
</tr>
<tr>
<td>4.9 Candidate Qualifications</td>
<td>Internal</td>
<td>Annually</td>
<td>2-Summer</td>
</tr>
<tr>
<td>4.10 Certification Maintenance (CM)</td>
<td>Internal</td>
<td>Annually</td>
<td>1-Winter</td>
</tr>
<tr>
<td>4.11 Examination Policy</td>
<td>Internal</td>
<td>Annually</td>
<td>2-Summer</td>
</tr>
</tbody>
</table>

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a In-person meetings occur in 1-Winter, 2-Summer, and 3-Fall with conference calls in the 9 remaining months.
4.0 General Management Constraint
Date of adoption / Last revision: December 17, 2018

The CEO shall only engage in practices, activities, decisions and organizational circumstances that are lawful, prudent and consistent with commonly accepted business practices and professional ethics.
4.1 Interactions with Stakeholders

Date of adoption / Last revision: Anticipated Revision September 22, 2019

With respect to interactions with stakeholders, the CEO shall create conditions, procedures and decisions that are safe, timely, equitably applied, dignified, responsive and unobtrusive.

Accordingly, the CEO shall:

1. Elicit information for which there is only a clear necessity.
2. Protect against improper access to customer/constituent information that is collected, reviewed, transmitted or stored.
3. Clearly convey to individuals who use BGC services what they should expect from the service(s) offered.
4. Have a publicly available complaint/response process to address concerns raised by the public and stakeholders.
5. Summarize ethics enforcement decisions and actions for the public and stakeholders.
4.2 Treatment of Staff

Date of adoption / Last revision: (December 17, 2018)

With respect to the treatment of volunteers, contractors and employees, the CEO shall create conditions that are fair, safe and dignified.

Further, pertaining to employees, the CEO shall:

1. Retain the services of a Human Resources (HR) professional. The CEO will be responsible for determining the appropriate background, experience, credentials and use of that resource.
   
   A. Grievances involving the CEO shall be communicated by the HR professional to the Board.

2. Provide employees with written personnel policies, reviewed by qualified legal counsel, that:
   
   (a) clarify rules for staff, (b) provide for effective handling of grievances and (c) protect against wrongful conditions.

3. Conduct staff performance review process that includes performance metrics and the setting of goals.

4. Not retaliate or allow retaliation against an employee for non-disruptive, internal expression of dissent, or for reporting to management or to the Human Resources Representative (per the process for handling of grievances in the Whistleblower policies of the Employee Handbook) acts or omissions by BGC personnel, management or the Board of Directors that the employee believes, in good faith and based on credible information, constitutes a violation of state or federal law or a governing policy of the Board.
   
   A. Staff must be allowed to file a grievance with BGC’s Human Resources Representative when (a) the employee alleges that Board policy has been violated and (b) internal grievance procedures have been exhausted.

5. Provide staff with governing policies, including but not limited to this “Treatment of Staff” policy, along with the CEO’s interpretation of staff’s protections.

6. Prepare staff to deal with reasonably foreseeable emergency situations.
4.3 Financial Planning/Budgeting
Date of adoption / Last revision: (December 17, 2018)

Budgeting for any fiscal year or the remaining part of any fiscal year shall not deviate from the Board’s Ends priorities, risk fiscal jeopardy, or fail to consider multi-year commitments and needs.

Accordingly, the CEO’s organizational budgeting shall:

1. Avoid incurring liquidity situations or conditions described as unacceptable in the Board’s Financial Condition and Activities Policy (4.4).

2. Provide credible projection of revenues and expenses, separation of capital and operational items, cash flow projections and disclosure of planning assumptions.
   A. Planning assumptions should provide specificity as to how resources are allocated to reflect Ends priorities.
   B. Planning estimates for investment income should be based on the 5-year average return from previous years.

3. Provide sufficient resources for Board functions and prerogatives, as set forth in the Budgeting for Board Functions policy (2.9).

4. Only spend BGC reserves with the board’s explicit approval.

5. Maintain financial reserves of at least 80% of annual budgeted operating expenses.
With respect to financial conditions and activities, the CEO shall not deliberately place BGC into fiscal jeopardy, or materially deviate actual expenditures from the Board’s Ends priorities.

Accordingly, the CEO shall:

1. Manage finances with adherence to applicable Generally Accepted Accounting Principles (GAAP) as promulgated by the Financial Accounting Standards Board (FASB).
2. Not spend more funds than are projected to be received in the fiscal year.
3. Not use any Board-designated long-term reserves.
4. Not borrow funds (with exception of credit cards used for normal business purposes, and paid in full each month.)
5. Settle payroll and payables in a timely manner.
6. Pay taxes and other government-ordered payments or filings on time and accurately.
7. Not execute a check or purchase commitment of greater than $10,000, unless it was explicitly itemized in budget monitoring data previously disclosed to the Board.
8. Not create contractual obligations for longer than one year, with the exception of service contracts with total contractual commitments of under $10,000.
9. Not acquire, encumber, lease or dispose of real property without the Board’s prior approval.
10. Aggressively pursue material receivables after a reasonable grace period.
11. Not contribute money to individuals or organizations.
12. Only obtain revenues from sources that are, in fact and appearance, legal and consistent with the mission and values of the organization.
13. Operate with adequate internal controls over receipts and disbursements to avoid unauthorized payments or material dissipation of assets.
4.5 Asset Protection
Date of adoption / Last revision: (December 17, 2018)

The CEO shall protect, adequately maintain and minimize the risk to BGC’s assets.

Accordingly, the CEO shall:

1. Insure BGC:
   A. Against theft and casualty losses to at least replacement value
   B. Against liability losses to Board members, staff and the organization in an amount equal to or greater than the average for comparable organizations.
   C. Against employee theft and dishonesty
   D. Against workers compensation and employer’s liability
2. Provide sufficient maintenance and prevent undue wear and tear to facilities and equipment.
3. Operate with a risk management plan to minimize exposure of the organization, the Board, staff or their agents to claims of liability.
4. Reasonably protect against conflict of interest when making purchases
5. Compare the price and quality any material for purchase.
7. Protect BGC’s intellectual property (e.g., trademarks and question bank), information and files against loss, improper access, theft or significant damage, and adhere to a Records Retention Schedule, approved by competent legal counsel, for the maintenance of documents and records.
8. Receive, process and disburse funds under sufficient controls to meet the Board-appointed auditor’s standards (as set forth in the auditor’s Management Letter and/or other correspondence).
9. Not compromise the independence of the Board’s auditor or other external advisors. The CEO may not engage such parties without explicit Board authorization.
10. Protect the organization’s public image and credibility,
11. Not change the organization’s name, logo or substantially alter its identity in the community.
12. Not create or purchase any subsidiary corporation.
13. Maintain at least one external accreditation for certification programs.
4.6 Emergency Chief Executive Officer Succession
Date of adoption / Last revision: (December 17, 2018)

The CEO will operate with management succession planning processes to facilitate smooth operations and competent operation of the organization during key personnel transitions. Accordingly, the CEO shall:

1. Operate with at least one member of the management team sufficiently familiar with Board and CEO issues and processes to enable him/her to take over with reasonable proficiency as an interim successor.
4.7 Compensation and Benefits
Date of adoption / Last revision: (December 17, 2018)

With respect to employment, compensation and benefits to employees, consultants, and contract workers, the CEO shall not deliberately jeopardize the organization’s fiscal integrity or public image. Accordingly, the CEO shall:

1. Not change his or her own compensation.
2. Not change his or her own benefits, except as consistent with the package covering all other employees.
3. Not promise or imply anything other than “at-will” employment.
4. Not establish salaries and benefits that deviate materially from those in the geographic or professional market for the skills employed.
5. Not establish or change retirement benefits so as to create situations unpredictable for the organization or inequitable for employees.
The CEO shall inform the Board and support its work.

Accordingly, the CEO shall:

1. Submit monitoring reports, including the CEO’s policy interpretations and compliance data, as required by the Board (see policy on Monitoring CEO Performance) in a timely, accurate and understandable fashion.

2. Report, in a timely manner, any actual or anticipated noncompliance with any Ends or Executive Limitations policy, regardless of the monitoring schedule set forth by the Board.

3. Notify the Board of relevant trends, anticipated adverse media coverage, threatened or pending lawsuits and material external and internal changes. Notification of planned internal changes is to be provided in advance, when feasible.
   a. The CEO shall notify the Board of the intent to change application, examination or annual renewal fees at least 60 days in advance.

4. Notify the Board of any Board or Board member actions that are, in the CEO’s opinion, not consistent with the Board’s policies on Governance Process and Board-CEO Delegation, particularly in the case of Board or Board member behavior that is detrimental to the working relationship between the Board and the CEO.

5. Provide the board with objective background/decision information that it periodically requests and as the CEO believes it needs for fully informed Board decisions.

6. Present information clearly and concisely, identifying its purpose (e.g., monitoring, decision preparation, etc.).

7. Provide the Board with reasonable logistical and administrative support for official Board, officer or committee communications.

8. Not favor or privilege certain Board members over others except to: (a) fulfill individual requests for information or (b) respond to officers or committees duly charged by the Board.

9. Supply for the Board’s Consent Agenda all items delegated to the CEO yet required by law or third-party to be Board-approved, along with the applicable monitoring information.

The CEO shall notify the board within five business days of any credible information indicating that a board member, a staff member, or an individual working on behalf of BGC has caused or allowed any practice, activity, decision or organizational circumstance that is unlawful, imprudent or in violation of commonly accepted business practices or professional ethics. If unlawful activity is suspected, the CEO will also notify an appropriate civil authority. The board will investigate the alleged misconduct using the procedure described under Policy 2.5.
The CEO shall not jeopardize the integrity of the candidate qualifications requirements as set by the Board.

Accordingly, the CEO shall:

1. Adhere to written standard operating procedures to ensure that the system is applied fairly and equitably.
2. Disseminate and operate with a written grievance or appeals procedure for candidates.
3. Communicate the qualifications requirements to all candidates and incorporate their input, as appropriate, for continual improvement of the program.
4. Take the changing needs of Applicants into consideration.
5. Ensure the quality and integrity of the qualifications process through audit procedures.
6. Maintain a written record of all decisions and actions.
The CEO shall not jeopardize the integrity of the certification maintenance requirements as set by the Board.

Accordingly, the CEO shall:

1. Adhere to written standard operating procedures to ensure that the system is applied fairly and equitably.
2. Disseminate and operate with a written grievance or appeals procedure for Diplomates.
3. Communicate the CM requirements to all Diplomates and incorporate their input, as appropriate, for continual improvement of the program.
4. Take the changing needs of Diplomates into consideration.
5. Ensure the quality and integrity of the CM review process through audit procedures.
6. Maintain a written record of all decisions and actions.
The CEO shall not jeopardize BGC’s reputation for ensuring the highest professional examination standards.

Accordingly, the CEO shall:

1. Adhere to written standard operating procedures to ensure that the examination is administered defensibly, fairly and equitably.
2. Disseminate and operate with a written grievance or appeals procedure for examinees.
3. Communicate the examination requirements to all candidates and incorporate their input, as appropriate, for continual improvement of the program.
4. Take the changing needs of examinees into consideration.
5. Ensure the quality and integrity of the examination process through audit procedures.
6. Maintain a written record of all decisions and actions.
7. Operate with professional psychometric/testing consultation to ensure a defensible examination.
8. Ensure that examinations are based on current knowledge and skills within the Environmental, Health and Safety professions.
9. Not allow the security of the item bank and examination process to be breached.
Appendix
**Acronym** | **Meaning**
--- | ---
AAOHN | American Association of Occupational Health Nurses
ABET* | American Board for Engineering and Technology (Accreditation agency for engineering programs including IH)
ABIH* | American Board of Industrial Hygiene (Credentialing division of the BGC® for industrial hygiene practitioners)
ACGIH* | American Conference of Governmental Industrial Hygienists
ACOEM | American College of Occupational and Environmental Medicine
ACS | American Chemical Society
AHMP | Alliance of Hazardous Materials Professionals
AIHA* | American Industrial Hygiene Association
AIHce* | American Industrial Hygiene Conference and Expo (Annual IH conference co-sponsored by AIHA and ACGIH)
AIOH | Australian Institute of Occupational Hygienists
ANSI | American National Standards Institute
APHA | American Public Health Association
ASSP | American Society of Safety Professionals
A&WMA | Air & Waste Management Association
BCSP* | Board of Certified Safety Professionals (Credentialing body for safety practitioners/professionals)
BGC® | Board for Global EHS Credentialing®
BLS | Bureau of Labor Statistics
BOHS | British Occupational Hygiene Society
CAIH* | Certified Associate Industrial Hygienist (Discontinued ABIH credential)
CAPS | Computer Application and Portfolio System
CEPH | Council on Education for Public Health
CESB | The Council of Engineering & Scientific Specialty Boards (“Accrediting” body² for credentialing organizations)
CHMM | Certified Hazardous Materials Manager
CIH* | Certified Industrial Hygienist
CSP* | Certified Safety Professional
EHAC | National Environmental Health Science & Protection Accreditation Council
EHS* | Environmental Health and Safety

²CESB’s review process does not include a site visit. Therefore, it does not meet the definition of a true accreditation process.

Common acronyms are marked with an asterisk (*).
EPA  Environmental Protection Agency
EPI  Environmental Professional in-Training
FOC  (BGC) Financial Oversight/Audit Committee
GHS  Globally Harmonized System of Classification and Labeling of Chemicals
HMRR  Hazardous Materials Response and Remediation (Discontinued sub-specialty held by CIHs)
I.C.E.  Institute for Credentialing Excellence (Member association for credentialing organizations)
IAQ  Indoor Air Quality
IAQA  Indoor Air Quality Association
IEC  International Electrotechnical Commission
IEQ  Indoor Environmental Quality (Sub-specialty held by some CIHs)
IH*  Industrial Hygiene or Industrial Hygienist
IOHA*  International Occupational Hygiene Association
IPEP  Institute of Professional Environmental Practice (Credentialing division of the BGC® for environmental practitioners)
ISHM  Institute for Safety and Health Management Certifications (Credentialing body for safety practitioners/professionals)
ISO  International Standards Organization
ISO/IEC 17024  Standard for Personnel Certification Programmes
JIHEEC  Joint Industrial Hygiene Ethics Education Committee
MOU  Memorandum of Understanding
MR  Monitoring Report
NAEM  National Association for Environmental Management
NAR*  National Accreditation Recognition (Committee under IOHA that recognizes industrial/occupational hygiene certification schemes in various countries)
NCSE  National Council for Science and the Environment
NCCA  National Commission for Certifying Agencies ("Accrediting" body for credentialing organizations through ICE)
NCICS  National Center for International Cooperation in Work Safety (Affiliated administration of SAWS in the People’s Republic of China)
NIH  National Institutes of Health
NIOSH*  National Institute for Occupational Safety and Health
NSC  National Safety Council
OH  Occupational Hygiene
OHTA*  Occupational Hygiene Training Association
OSHA*  Occupational Safety and Health Administration
PE*  Professional Engineer (State License)

NCCA’s review process does not include a site visit. Therefore, it does not meet the definition of a true accreditation process.

Common acronyms are marked with an asterisk (*).
<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>PEL</td>
<td>Permissible Exposure Limit</td>
</tr>
<tr>
<td>PPE*</td>
<td>Personal Protective Equipment</td>
</tr>
<tr>
<td>PS*</td>
<td>Product Stewardship</td>
</tr>
<tr>
<td>PSS*</td>
<td>Product Stewardship Society</td>
</tr>
<tr>
<td>QEP</td>
<td>Qualified Environmental Professional</td>
</tr>
<tr>
<td>SAWS</td>
<td>State Administration of Work Safety (People’s Republic of China)</td>
</tr>
<tr>
<td>SCHC</td>
<td>Society for Chemical Hazard Communication</td>
</tr>
<tr>
<td>SDS</td>
<td>Safety Data Sheet (Newer terminology for Material Safety Data Sheet (MSDS))</td>
</tr>
<tr>
<td>SECP</td>
<td>Students and Early Career Professionals</td>
</tr>
<tr>
<td>SHE</td>
<td>Safety, Health and Environment</td>
</tr>
<tr>
<td>SOCMA</td>
<td>Society of Chemical Manufacturers &amp; Affiliates</td>
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<tr>
<td>SWANA</td>
<td>Solid Waste Association of North America</td>
</tr>
<tr>
<td>TAG</td>
<td>Technical Advisory Group</td>
</tr>
<tr>
<td>TLV</td>
<td>Threshold Limit Value</td>
</tr>
<tr>
<td>WEF</td>
<td>Water Environment Federation</td>
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