

**Office of the
Secretary**



Office of the Secretary

**Department of Social and Health
Services**

**Strategic Plan Metrics
2023-2025**

Emergency Management Services

[EMS1.4](#) Percent of completed annual residential program continuity plans submitted to Emergency Management Services

[EMS1.5](#) Percent of completed annual administration continuity plans submitted to Emergency Management Services

Enterprise Risk Management Office

OEX.4 OSHA Recordable Injury Rate [1.1](#)

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Technology Innovation Administration

ET1.2 Number of critical sites with installation of firewalls and implementation of a segmented DSHS network [16.1](#)

ET1.3 Percent of DSHS sites that have replaced legacy digital services with modernized VoIP communications/telephony systems at DSHS sites identified for conversion [16.2](#)

Information and Governance

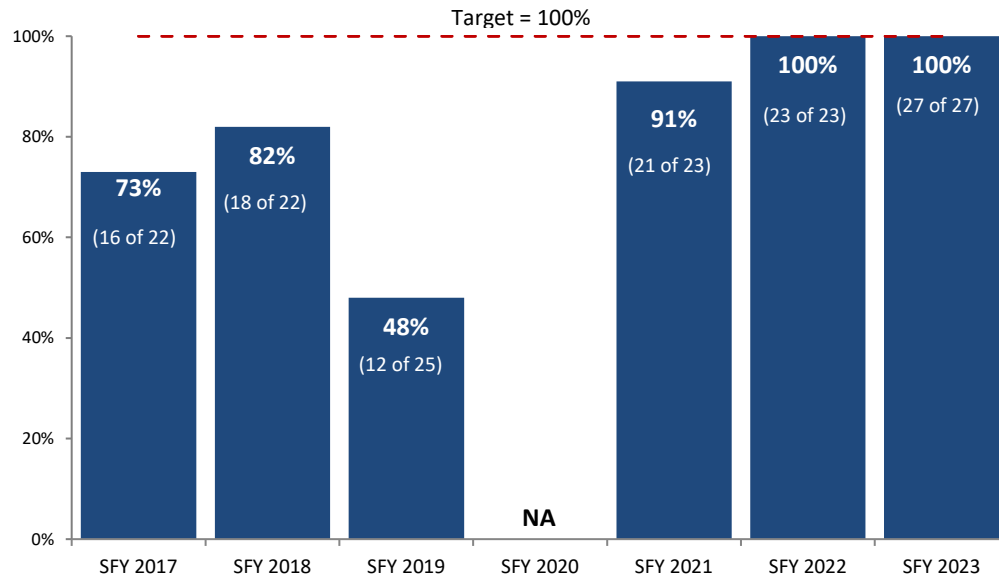
OPR1.1 Number of reportable confidential data breaches per year [4.1](#)

OOS | Emergency Management Services



Increase Organizational Efficiency, Performance and Effectiveness

Percent of completed annual residential program continuity plans submitted to Emergency Management Services



SUMMARY

- **Emergency Management Services Strategic Objective:** Increase the percentage of residential programs with complete and sufficient continuity plans approved by the responsible Assistant Secretaries and submitted to DSHS Emergency Management Services.
- **Continuity plans will ensure DSHS residential programs are able to continue mission essential functions during and following a disaster.**

DATA SOURCE: Emergency Management Services Yearly Reports to EMD; supplied by Beate Plesnarski, Continuity Planning Manager.

MEASURE DEFINITION: Agency-wide percentage of completed continuity plans as defined by the number of residential program plans submitted to EMS by June 30 of each calendar year divided by the total number of DSHS residential programs required to have continuity plans.

DATA NOTES: **1** In 2020 plans were not tracked due to ongoing response to the pandemic. **2** For 2017 residential programs required to submit continuity plans include: RA's 12 Community Facilities and schools; DDA's four schools; and BHA's two hospitals, treatment center, and competency restoration programs. *Click link below for additional data notes.*

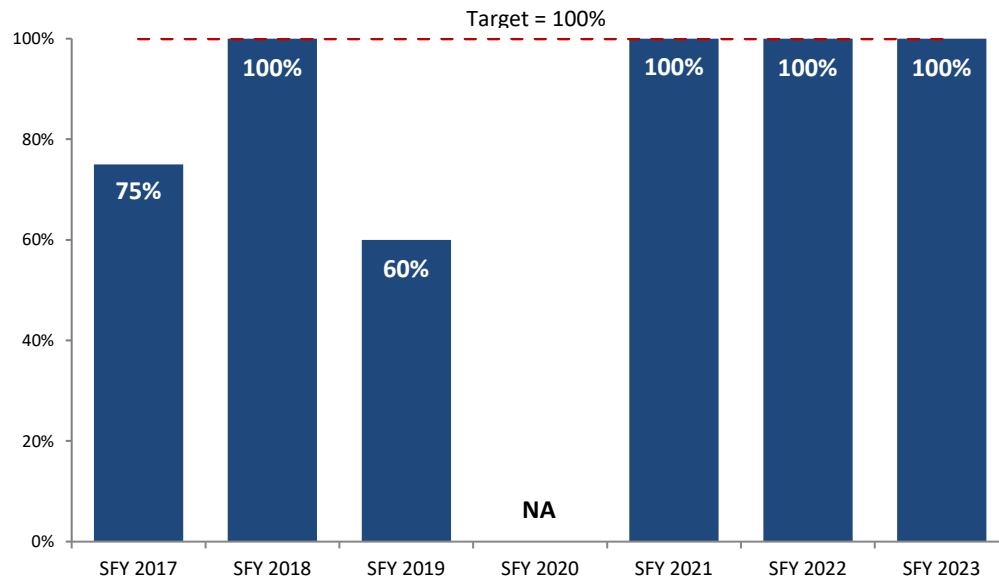
TO DATA: <https://www.dshs.wa.gov/data/metrics/EMS1.4.xlsx>

OOS | Emergency Management Services



Increase Organizational Efficiency, Performance and Effectiveness

Percent of completed annual administration continuity plans submitted to Emergency Management Services



SUMMARY

- **Emergency Management Services Strategic Objective: Increase the percentage of administrations with complete and sufficient continuity plans approved by the responsible Assistant Secretaries and submitted to DSHS Emergency Management Services.**
- **Continuity plans will ensure DSHS administrations are able to continue mission essential functions during and following a disaster.**
- **There are five administrations that require a continuity plan - ALTSA, BHA, DDA, ESA, and the Executive Administration which covers FFA, TIA and Office of the Secretary. All administrations conduct a yearly review of their executive plan and submit it to EMS no later than June 30 of each year.**

DATA SOURCE: Emergency Management Services Quarterly Reports to EMD; supplied by Beate Plesnarski, Continuity Planning Manager.

MEASURE DEFINITION: Agency-wide percentage of completed continuity plans as defined by the number of administration plans submitted to EMS by June 30 of each calendar year divided by the total number of DSHS administrations required to have continuity plans.

DATA NOTES: 1 Administrations required to submit continuity plans include: ALTSA, CA, ESA and EXEC for 2017; ALTSA, ESA and EXEC (SESA and FFA) for 2018; ALTSA, BHA, DDA, ESA and EXEC (FFA, TIA, and OOS) for 2019-2023. 2 Plans submission was not tracked in 2020 due to pandemic response.

TO DATA: <https://www.dshs.wa.gov/data/metrics/EMS1.5.xlsx>

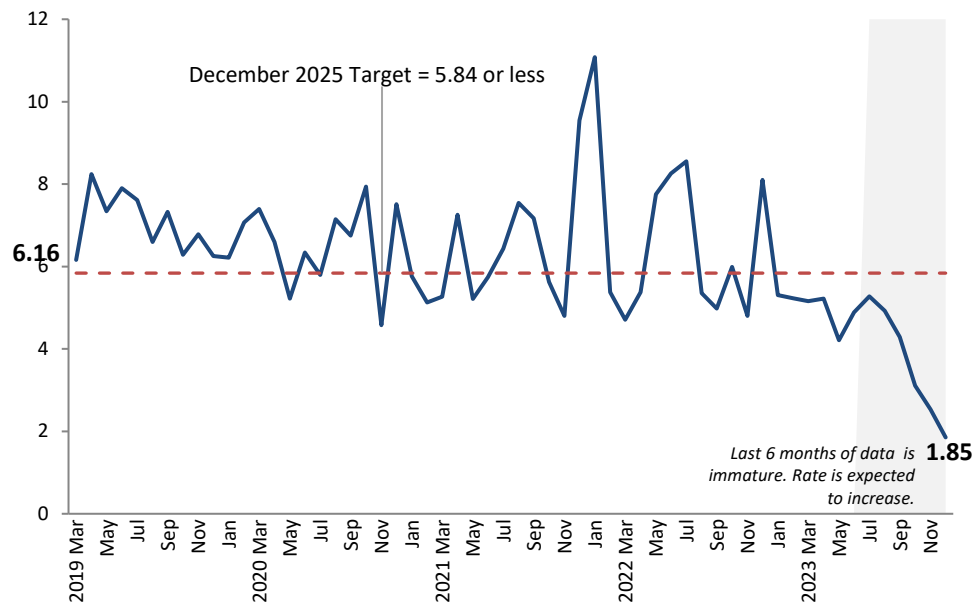
OOS | Enterprise Risk Management Office



Support People in our Care and Custody

OSHA Recordable Injury Rate

Rate of federal OSHA recordable injuries per 100 full time employees (agency-wide, annualized)



SUMMARY

- Updated discussion and Action Plans for this measure are located in the OOS Strategic Plan, Strategic Priority: Support People in our Care and Custody.
- ERMO Objective: Reduce workplace injuries.

DATA SOURCE: RiskMaster Database; supplied by Jason York.

MEASURE DEFINITION: The annualized rate of injuries or illnesses per 100 full time employees, requiring treatment beyond first aid.

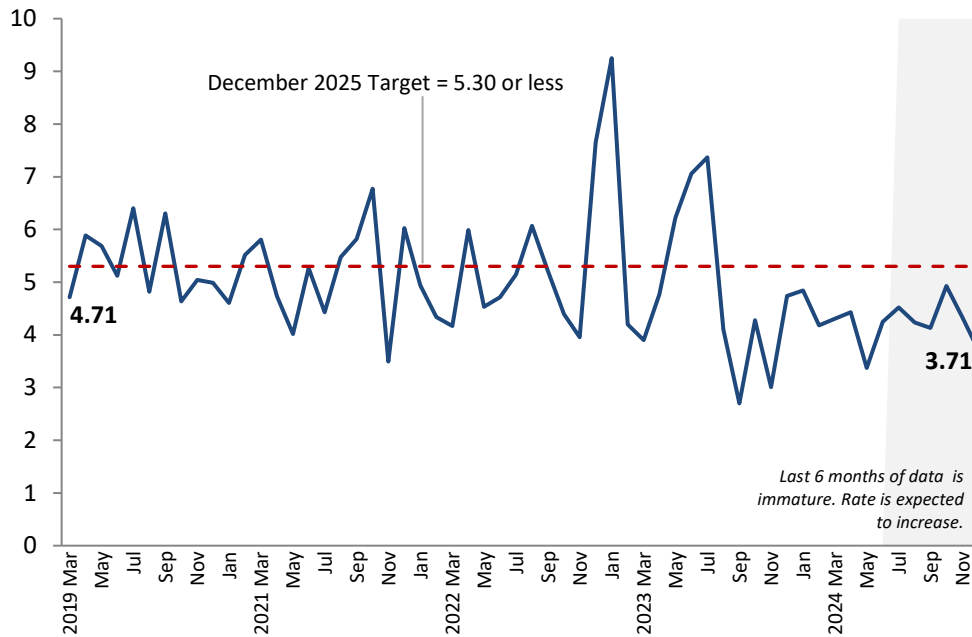
DATA NOTES: 1 The rates shown above are derived by multiplying the actual monthly incident rate by 12 to create an annualized rate. This is done in order to give results that are easy to compare to the annual TRIR goal. TRIR is an acronym for "Total Recordable Incident Rate," which is an OSHA (and nationally recognized/used) metric. An injury/illness is considered "OSHA Recordable" if it results in treatment beyond first aid (and OSHA provides strict definitions of first aid). These types of injuries are "recorded" on to an OSHA log of injuries/illnesses, and kept as a federally-mandated record. 2 Reporting may be delayed in some cases, so future updates may add to the rates in more recent months.

TO DATA: <https://www.dshs.wa.gov/data/metrics/OEX.4.xlsx>

Support People in our Care and Custody

Rate of injuries resulting in Days Away, Job Restrictions, or Job Transfer (OSHA DART Rate)

OSHA DART rate per 100 full time employees (agency-wide, annualized)



SUMMARY

- Updated discussion and Action Plans for this measure are located in the OOS Strategic Plan, Strategic Priority: Support People in our Care and Custody.
- ERMO Objective: Reduce workplace injuries.

DATA SOURCE: RiskMaster Database; supplied by Jason York.

MEASURE DEFINITION: The annualized rate for the number of incidents per 100 full time employees that resulted in lost or restricted days, or job transfer due to work-related injuries or illnesses.

DATA NOTES: 1 The latest 6 months of data are immature and the rate is expected to rise as more complete data is received. There is a lag in this data as more consequences of injuries are recorded. Even after 8 months, some additional incidents may be recorded. Data for past time periods continues to be updated. 2 The rates shown above are derived by multiplying the actual monthly incident rate by 12 to create an annualized rate. This is done in order to give results that are easy to compare to the annual DART goal. DART is an acronym for “Days Away, Restricted, or Transferred.” *Click on link below for additional data notes.*

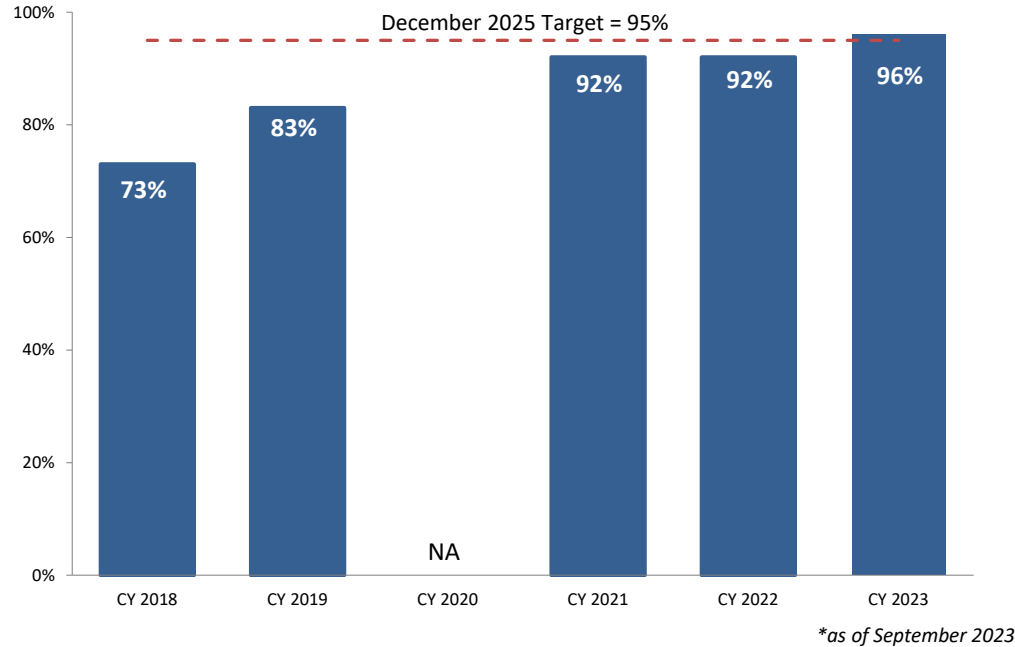
TO DATA: <https://www.dshs.wa.gov/data/metrics/OEX.6.xlsx>

OOS | Enterprise Risk Management Office



Increase Organizational Efficiency, Performance and Effectiveness

Average Annual Score of Safety & Health Performance Assessments



SUMMARY

- Updated discussion and Action Plans for this measure are located in the OOS Strategic Plan.
- ERMO Objective: Reduce workplace injuries.
- On February 29, 2020, Governor Inslee issued Proclamation 20-05, declaring a state of emergency for Washington State due to the COVID-19 outbreak. As a result of the Governor's direction for State agencies and departments to reduce in-person services whenever possible in order to minimize the spread of COVID-19, the ERMO Safety & Health Performance Assessments (SHPAs) were not conducted in calendar year 2020. SHPAs resumed in calendar year 2021.

DATA SOURCE: iAuditor inspection software; supplied by Jason York.

MEASURE DEFINITION: Combined average score of annual Safety & Health Performance Assessments conducted at DSHS offices and 24-hour facilities by the ERMO safety office.

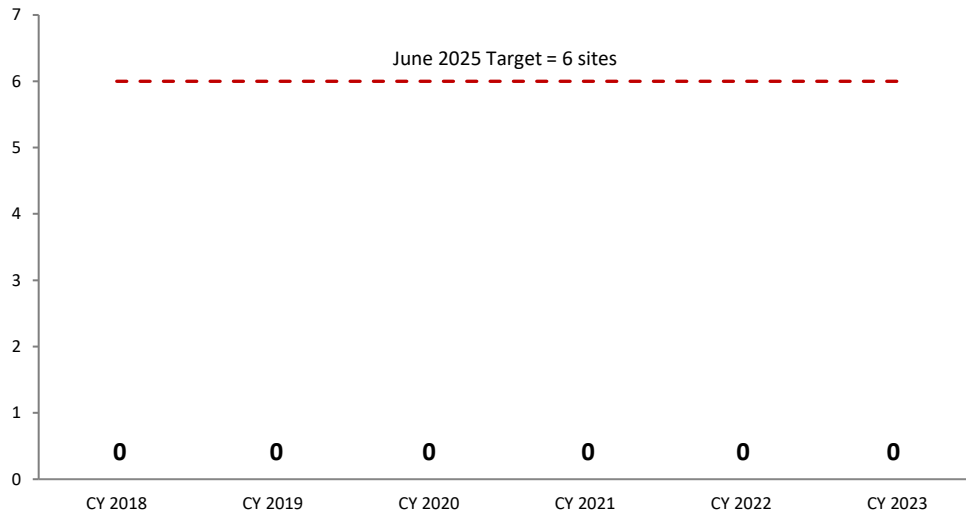
DATA NOTES: **1** The Safety & Health Performance Assessments are conducted using iAuditor inspection software that provides a measureable score of site safety program effectiveness and compliance. **2** On February 29, 2020, Governor Inslee issued Proclamation 20-05, declaring a state of emergency for Washington State due to the COVID-19 outbreak. As a result of the Governor's direction for State agencies and departments to reduce in-person services whenever possible in order to minimize the spread of COVID-19, the ERMO Safety & Health Performance Assessments (SHPAs) were not conducted in calendar year 2020. SHPAs resumed in calendar year 2021.

TO DATA: <https://www.dshs.wa.gov/data/metrics/OEX.7.xlsx>

Increase Organizational Efficiency, Performance and Effectiveness

Number of critical sites with installation of firewalls and implementation of a segmented DSHS network

Cumulative



SUMMARY

- This measure supports the DSHS Technology Innovation Administration strategic objective to invest in digital transformation to deliver more efficient and effective technology services that improve customer satisfaction, create value and support DSHS in transforming lives.
- DSHS manages many information technology systems that capture, store, and provide access to data including highly confidential and regulated information such as client and employee Social Security numbers and financial information, as well as medical and mental health information.
- DSHS must, by law, protect the confidentiality, integrity and availability of this data. Improving information security reduces risk to the agency and clients we serve, increases regulatory compliance, and supports the mission of transforming lives.

DATA SOURCE: DSHS Wide Area Network Operations Management; supplied by Jess Clayton and David Lye.

MEASURE DEFINITION: Number of critical sites with installation of firewalls and implementation of a segmented DSHS network.

DATA NOTES: **1** All equipment required to update the targeted six critical sites was purchased and received as part of Decision Package funding, which was spent as planned by June 30, 2019. **2** Equipment installations at these critical sites were scheduled to complete by the target date of June 2020; however these projects have been delayed due to resource constraints and COVID-19 impacts on construction and circuit installations. *Click on link below for additional data notes.*

TO DATA: <https://www.dshs.wa.gov/data/metrics/ET1.2.xlsx>

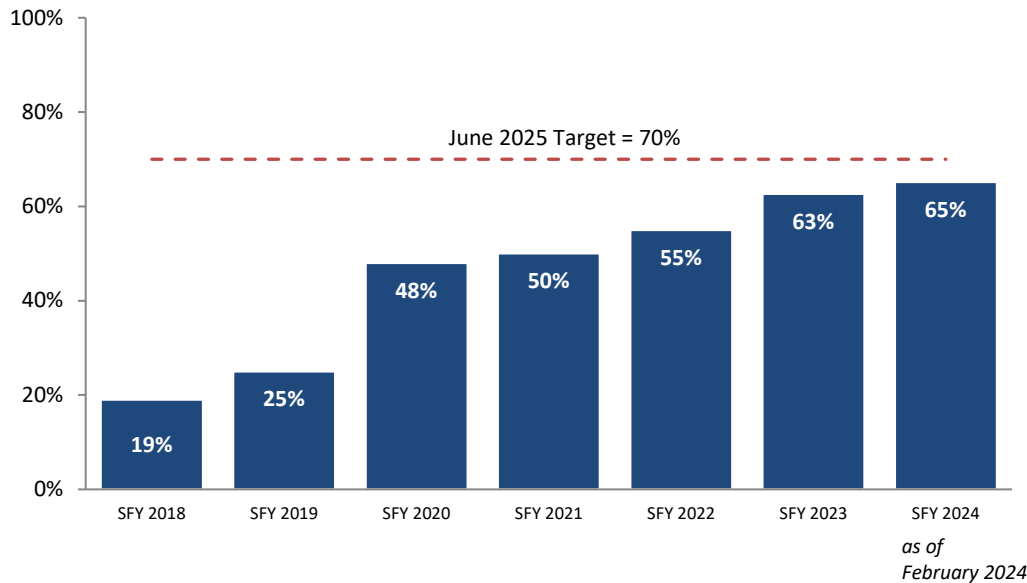
OOS | Technology Innovation Administration



Increase Organizational Efficiency, Performance and Effectiveness

Percent of DSHS sites that have replaced legacy digital services with modernized VoIP communications/telephony systems at DSHS sites identified for conversion

Cumulative



SUMMARY

- This measure supports the DSHS Technology Innovation Administration strategic objective to invest in digital transformation to deliver more efficient and effective technology services that improve customer satisfaction, create value and support DSHS in transforming lives.
- These services align IT strategy with business objectives to ensure work efforts and investments deliver value.
- Success Measure: Transform statewide DSHS communications/telephony platforms to use current, supported industry solutions and adopt unified communications by June 2025.

ACTION PLAN

- Implement DSHS Voice over Internet Protocol (VoIP) and/or unified communications business strategy.
- Convert at least 70% of legacy digital services to modernized VoIP communications/telephony systems at DSHS sites identified for conversion.

DATA SOURCE: DSHS Wide Area Network Operations Management; supplied by Jess Clayton and John Miller.

MEASURE DEFINITION: Percent of DSHS sites that have replaced legacy digital services with modernized telephony systems.

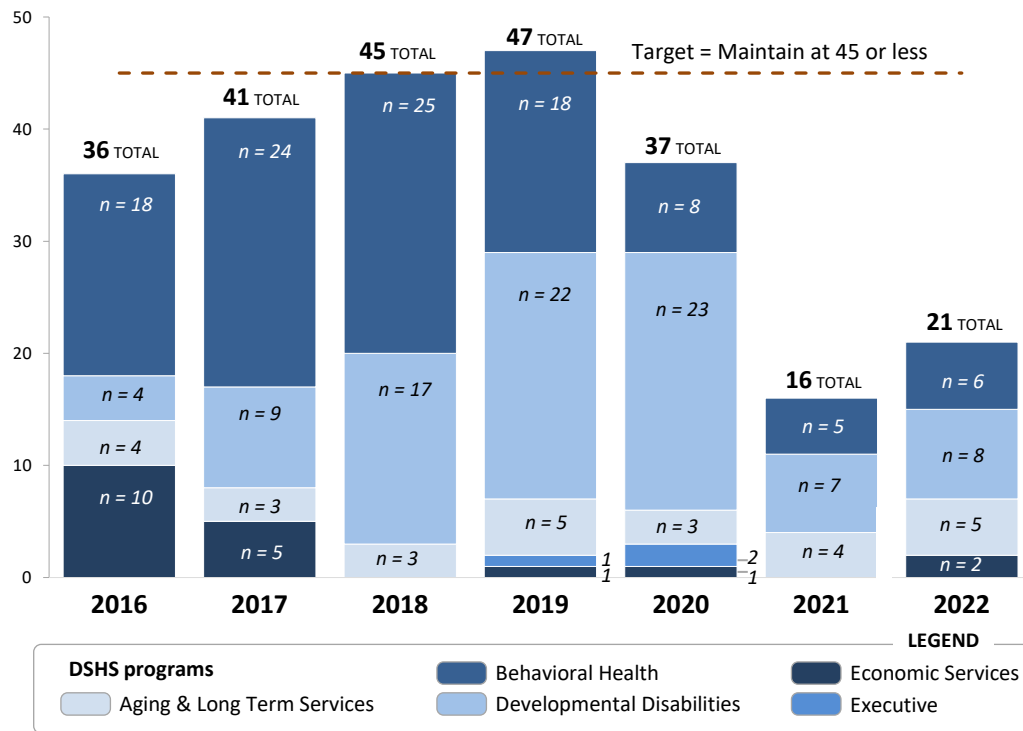
DATA NOTES: **1** As of February 2024, DSHS/TIA has converted legacy digital services to modern Voice over Internet Protocol (VoIP) systems at 71 of 109 DSHS sites for a 65% conversion to date. **2** The total of 133 sites listed in prior reports was revised in September 2021 and again in February 2022 due to new exclusions for DSHS site closures or for equipment DSHS does not own, and for some site transfers to the Department of Children, Youth, and Families. **3** In January 2024, sites were added for new facilities secured by DSHS. **4** Data for SFY 2024 is through February 2024.

TO DATA: <https://www.dshs.wa.gov/data/metrics/ET1.3.xlsx>

OOS | Information and Governance

Increase Organizational Efficiency, Performance and Effectiveness

Number of reportable confidential data breaches per year



SUMMARY

- DSHS holds large volumes of confidential client data, which must be protected from unauthorized release and breaches in confidentiality laws and rules. Any unauthorized release can place the welfare of clients in jeopardy.
- The total number of reportable confidential data breaches decreased from 78 in 2012 to 21 in 2022.

DATA SOURCE: Count of "Breaches of Unsecured Protected Health Information" reports submitted by DSHS Administrations at end of calendar year that are determined to be reportable and sent to the OCR by March 1; supplied by Brian Peyton, OOS/OIG.

MEASURE DEFINITION: The number of health information confidentiality breaches required to be reported to the Office for Civil Rights (OCR) in the U.S. Department of Health and Human Services.

DATA NOTES: **1** This measure only includes data breaches that are considered reportable under HIPAA. This is the number of breaches per year, not the number of client records released. **2** Counts of confidential data breaches for Eastern State Hospital (ESH) and Western State Hospital (WSH) are included in BHA. **3** From 2014 forward Children's Administration and Rehabilitation Administration are not part of the Hybrid Covered Entity.

TO DATA: <https://www.dshs.wa.gov/data/metrics/OPR1.1.xlsx>