Strategic Plan
2019-2021
January 2019
# Table of Contents

Introduction .................................................................................................................................................. 3  
Alignment ...................................................................................................................................................... 4  
Strategic Objectives ...................................................................................................................................... 5  
  DSHS STRATEGIC PRIORITY: CARING FOR THOSE IN OUR CARE ............................................................... 5  
  DSHS STRATEGIC PRIORITY: SERVE PEOPLE IN THEIR HOME COMMUNITY ............................................. 9  
  DSHS STRATEGIC PRIORITY: INCREASE ORGANIZATIONAL EFFICIENCY, PERFORMANCE AND EFFECTIVENESS ................................................................................................................................. 10
"When holistic, person-centered health support is provided, the aching stops, the emptiness fades, and those we serve find hope for recovery. It's truly when their character is welded to define their own powerful, personal resilience and transformation."

– Sean Murphy, Assistant Secretary
Behavioral Health Administration

The Department of Social and Health Services (DSHS), Behavioral Health Administration. The units within this administration include:

Child Study and Treatment Center (CSTC), Eastern State Hospital (ESH), Office of Forensic Mental Health Services (OFMHS), Special Commitment Center (SCC), and Western State Hospital (WSH). In addition to supporting these units, the BHA headquarters team focuses on community alternatives and services ensuring individuals receive the right array of services to meet their individual mental health care needs.

Child Study and Treatment Center (CSTC) is Washington’s state psychiatric hospital for children and youth up to the age of 18. The center provides individualized, interdisciplinary treatment for children and youth, utilizing evidence-based and trauma sensitive therapies successful in achieving outcomes.

Eastern State Hospital (ESH) and Western State Hospital (WSH) provide evaluations, competency restoration, and inpatient treatment for individuals with serious or long-term mental illness. The hospitals deliver evidence-based and effective inpatient treatment programs, interventions, and activities that promote patient resilience and recovery.

The Special Commitment Center (SCC) programs provide specialized mental health treatment for civilly committed sex offenders who have completed their prison sentences.

The Office of Forensic Mental Health Services (OFMHS) is responsible for the management of Washington’s adult forensic mental health care system providing competency evaluation and restoration services to individuals involved with the criminal justice system.

Behavioral Health Administration
Mission, Vision, Values

Mission
Behavioral Health Administration – to transform lives through dedication to the wellness of individuals, their families and the community through behavioral health intervention, treatment, and education.

Vision
People are healthy because we provide safe treatment and recovery resources,
Communities are safe because of the services we provide,
People in our care and custody are safe and supported,
Taxpayer Resources are guarded.

Values
Compassion and Hope
Safety and Concern for Others
Teamwork and Stewardship
Transparency, Integrity, and Respect
Quality and Innovation
AGENCYWIDE PRIORITIES AND GOALS

This Strategic Plan addresses the Secretary’s priorities for all of DSHS and sets measureable objectives and goals. We frequently monitor our progress to ensure DSHS serves our clients and Washington state to the best of our ability. Every DSHS employee contributes to addressing the priorities and accomplishing the objectives in this strategic plan.

The DSHS Secretary has chosen priorities for the agency based on discussions with staff, clients, stakeholders, the Governor’s Office, legislators and others. These priorities address current needs and anticipate the future. By working together across administrations DSHS will be able to deliver a range of quality of services to Washington residents, work efficiently and effectively, and be an employer of choice for our staff. The DSHS Secretary has five agency wide priorities:

- Prepare for aging Washingtonians.
- Support people in our care and custody.
- Serve people in their home community.
- Provide a pathway out of poverty and become healthier.
- Increase organizational efficiency, performance and effectiveness.

Each strategic objective in this agency wide plan supports the five broad goals for DSHS:

- Health: Each individual and each community will be healthy.
- Safety: Each individual and community will be safe.
- Protection: Each individual who is vulnerable will be protected.
- Quality of Life: Each individual in need will be supported to attain the highest possible quality of life.
- Public Trust: Strong management practices will ensure quality and efficiency.

Both the Secretary’s priorities and DSHS goals align with:

- Results Washington’s objective of better results for Washingtonians. (Results Washington measures are labeled with the following icon.
- The Governor’s goal of Healthy and Safe Communities.
- The Governor’s goal of Efficient, Effective and Accountable Government.
OBJECTIVES

Below are the details of the Strategic Objectives within the Secretary’s priorities. The narratives for each describe why the objective is important, what constitutes success and provide an action plan. Some objectives refer to decision packages. These are funding requests DSHS submits to the Office of Financial Management as part of the state budget process. You will see a decision package number for those objectives. DSHS monitors progress in meeting strategic objectives, reports on it quarterly on the DSHS website and updates objectives as needed.

DSHS STRATEGIC PRIORITY: SUPPORT PEOPLE IN OUR CARE AND CUSTODY

Importance: We must provide top-notch care and supports for the people in our care and custody, whether they reside in a community-based setting or in one of our 11 residential facilities. Equally important is the safety of our employees who provide the care. Well-maintained facilities that have adequate space and staffing are another important element of the care and comfort of their residents.

Based on this, DSHS has established the following strategic objectives to support how we will support those in our care.

Strategic Objective 1.1: Expand capacity to accommodate the treatment program that specifically addresses the security and clinical needs of highly aggressive youth.

Decision Package: 030 - PL - RD - CSTC New Cottage Operating Costs

Importance: Youth with violent, aggressive, and destructive behaviors require a facility and professional staffing that manages risk and maximizes treatment outcomes. The Child Study and Treatment Center (CSTC) serves youth with the most acute psychiatric problems in the state. It is the only state hospital for children and youth and one of four state-operated Children’s Long-Term Inpatient Programs (CLIP). The addition of a new, secure 18-bed facility on the CSTC campus will allow BHA to better serve this growing population. The new cottage increases state CLIP bed capacity by more than 38 percent.

Success Measure: Fully operationalize the newly constructed 18-bed Children’s Long term Inpatient Program by July 1, 2020 to serve more youth in the appropriate setting and treatment services.

Action Plan:

- Provide therapeutic treatment to patients identified as having a high risk of violence.
- Reduce risk of patient-to-patient injury and patient-to-staff injury utilizing evidence-based treatment and enhanced security features of the new building. Implement individualized psychiatric treatment plans that enable young patients to develop coping strategies and skills within a secure living environment that fosters safety, healing and growth.

Strategic Objective 1.2: Develop programing for patients with higher acuity.

Importance: BHA will develop and pilot programming to provide the best opportunity to support the needs of patients with severe mental illness who pose an extraordinary risk to themselves or others. Referrals to the program will be made with the goal of stabilizing aggressive behaviors or clarifying
previous mental illness diagnoses, which would be the only services available in the state of Washington for this population.

**Success Measure:** Fully design and pilot a program specifically for high-risk patients to have access to intensive evidence-based therapy within a program designed to increase safety and reduce violence.

**Action Plan:** These beds provide DSHS’ best opportunity to support the needs of patients with mental illness – both civil and forensic – who pose an extraordinary risk to themselves or others.

- Develop a patient-centered program utilizing best practices and evidence-based therapies.
- Implement a multi-pronged approach to reduce violence and maximize patient and staff safety at Western State Hospital. Two new units will be established to serve the highest-acuity patients through evidence-based best practices: a Specialized Treatment Assessment and Recovery (STAR) unit, will serve up to 10 patients at a time and a Step Up unit will serve up to 20 patients as a transition from the STAR unit to a standard ward.
- Fund eight psychiatric intensive care unit beds at Eastern State Hospital to serve high-acuity, assaultive patients. Psychiatric Intensive Care Unit (PICU) beds will house patients for short-term stays; patients will transition to a standard ward once stabilized. Providing this level of specialized care and treatment in the PICU will reduce violence and increase patient and staff safety across the hospital.
- Closely monitor the pilot program through data collection on safety and violence.

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**Strategic Objective 1.3: Forensic Mental Health patients will receive timely competency services.**

*Decision Package:* 030 - PL - CM - 1N3 - Direct Care and Support Staff, 030 - PL - CM - 3N3 - Direct Care and Support Staff, 030 - PL - CS - Trueblood Lawsuit, 030 - PL - CB - Building 27 - RFT Staffing

**Importance:** Delays in admissions for forensic patients impede the ability of individuals with mental illness to access mental health treatment and the criminal justice system’s ability to process in a timely manner those patients for whom a court orders an inpatient competency evaluation and restoration treatment. In the *Trueblood* class action lawsuit, a federal Court found defendants cannot wait in jail for inpatient competency evaluation and competency restoration services for longer than seven days.

**Success Measure:** The following success measures are dependent upon approval of referenced decision packages.

- Fully renovate and operate two new forensic wards at Eastern State Hospital.
- Fully renovate and operate Building 27 Competency and Restoration Facility Program on the campus of Western State Hospital.

**Action Plan:**

- Develop a bed allocation model based on referral type and corresponding average length of stay to prevent bottleneck in admission process.
- Update and refine the admission process ensuring timely admissions for patients.
- Effectively manage bed availability through admissions, and discharge patients when treatment is complete.
Strategic Objective 1.4: To better serve patients receiving care for mental health disorders with co-occurring substance abuse issues, the state hospitals seek to improve the Co-Occurring Disorder Treatment program currently operating at each facility.

Importance: Approximately 71 percent of patients at the state hospitals experience a co-occurring mental illness and substance use disorder. State law directs the hospitals to reduce recidivism through services targeted at substance use disorder.

Through effective co-occurring treatment, patients will improve their personal health and social functioning while reducing risks to public health and safety. Patients will be better prepared to return home and be successful in the community. Once discharged from the hospital, patients will have the knowledge and necessary coping skills to help avoid relapse and readmission.

Success Measure: Based upon projected bed capacity at the state hospitals, increase the current ratio of substance use disorder professionals from 1 to 100 to 1 to 40 by the end of Fiscal Year 2021.

Action Plan:
- Increase the number of co-occurring disorder clinicians on treatment teams to provide co-occurring treatment services including assessments, individualized treatment planning, individual and group counseling, psychoeducation and family support.
- Equip patients with skills and community resources to prevent relapse post-discharge.

Strategic Objective 1.5: Increase safety.

Importance: The safety of our employees is necessary to meet our mission and to provide quality services to our patients.

At BHA, we recognize that staff are our most valuable resource; safety is a top priority. It is vital that the state hospitals are safe workplaces and environments for treatment and recovery. Reducing patient-to-staff and patient-to-patient assaults indicates increased safety and well-being, reduces expenditures for workplace related injury claims, and increases the quality of care for patients.

BHA will continue to focus on efforts to reduce violence and use our data to determine the most effective interventions in keeping patients and staff safe while providing effective care and treatment that leads to successful discharge.

Success Measure: Decrease the number of patient-to-staff and patient-to-patient injuries at Eastern State Hospital, Western State Hospital and the Child Study and Treatment Center, and within the Office of Forensic Mental Health Services’ Residential Treatment Facilities by five percent by July 1, 2021 and by ten percent by July 1, 2022.

Action Plan:
- Improve patient-to-staff engagement and implement effective early intervention strategies in escalation of dangerous patient behavior.
- Shift the culture of safety to maximize preventive approaches to maintain a safe environment for patients and staff.
- Communicate regularly innovative, evidence-based safe practices to staff.
- Implement staff training on treatment interventions to help patients resolve situations that might otherwise lead to assaults.
- Enhance and expand training for new staff on safety practices and intervention.
• Analyze assault-related data at the ward level by days of the week and times of day within a safety committee structure to identify ways to decrease assault, and develop subsequent action plans.

Strategic Objective 1.6: Reduce the use of seclusion and restraints.

Importance: Seclusion and restraint is used only as a last resort when a patient’s behavior is an immediate threat to themselves or others. If restraint becomes necessary, it is applied using the least restrictive manner and removed as soon as possible. Safe techniques are used and patients are released when there is no longer a threat to safety.

The reduction of seclusion and restraint use has been given national priority by The Joint Commission, Centers of Medicaid and Medicare Services, and patient advocacy groups. These practices are associated with high rates of patient and staff injuries and can be utilized in a coercive and potentially traumatizing manner.

Success Measure 1.6.1: Monitor the rate of seclusion and restraints use at the state psychiatric hospitals, implement a root cause analysis system and develop appropriate action plans when the rate exceeds a three percent increase.

Action Plan:
• Embrace therapeutic communication and engagement to deescalate agitation and build rapport with the patient.
• Reduce patient agitation through use of low stimulation quiet areas.
• Analyze data to determine core causes of violence and adapt staff trainings to emphasize highest risk situations and times.

Success Measure 1.6.2: The Office of Forensic Mental Health Services’ Residential Treatment Facilities will monitor the rate of seclusion and restraints, implement a root cause analysis system and develop appropriate action plans to reduce seclusion and restrain if needed.

Strategic Objective 1.7: Increase public safety through coordinated rehabilitative services to residents at the Special Commitment Center (SCC).

Decision Package: 135 – PL – MZ - Quality of Care and Services

Importance: SCC residents are best prepared for successful community transition and reentry when engaged in comprehensive rehabilitative services. Connecting residents to treatment, habilitation and transition programs increases hope and a greater likelihood of achieving a successful transition to the community.

Success Measure: Increase the amount of hours per week treatment (core sex offender, habilitation and transition) offered at SCC from 30 hours in 2017 to 65 hours in 2019.

Action Plan:
• Offer core sex offender treatment groups, habilitation groups and transition groups to residents at the SCC.
• Track the number of sex offender, habilitation and transition hours offered to residents each week.

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**Strategic Objective 1.8: Provide a safe environment for staff and residents at the Special Commitment Center (SCC).**

*Decision Package: 135 - PL - M8 - Violence Prevention Training*

**Importance:** Residents and staff thrive in a safe, healthy environment. For staff to be fully functional and effective in their job, they need to feel safe at work. Treatment for residents is ineffective if residents do not feel safe in the facility. Research shows as the use of confinement and segregation increases, the number of assaults increase at nearly the same rate.

**Success Measure:** Increase the percentage of staff at the SCC who receive Psychiatric Emergency Response training (PERT) from 58 percent in 2018 to 90 percent by June 2019.

**Action Plan:**
- Provide Psychiatric Emergency Response Training (PERT) to new hires during new employee orientation (NEO).
- Continue scheduling existing staff into PERT during NEO until all staff are trained.

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**Strategic Objective 1.9: Implement a functional and integrated electronic health records system at Western State Hospital, Eastern State Hospital, Child Study and Treatment Center, and Building 27 Residential Treatment Facility.**

**Importance:** Electronic health record systems play an important role in the health and safety of consumers served at the state psychiatric hospitals by providing instant information required for consistent, high-quality patient care. This electronic information system will be used across the health care continuum to manage and document patient care and treatment services, extract quality measures and coordinate continuity of care with community providers.

**Success Measure:** Implement a fully integrated electronic health record system.

**Action Plan:**
- Create a standard infrastructure across the state hospitals to support the rollout and long-term success of the electronic health record system.
- Employ experienced medical informaticists to ensure that requirements unique to long-term psychiatric hospitals are met.
- Implement strategies for successful practice changes that include staff engagement, readiness, training, and developing rollout procedures.

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**DSHS STRATEGIC PRIORITY: SERVE PEOPLE IN THEIR HOME COMMUNITY**

**Importance:** Studies show that most people in rehabilitation and recovery do better when they live in their home communities. Our clients must be able to get the care and supports they need in the settings
they need and want. The Governor’s Office, DSHS and others are embarking on an ambitious Mental Health Transformation project to increase the availability of specialized supports in adult family homes and other facilities for individuals in recovery. We also are focused on developing more community living alternatives so people diagnosed with developmental disabilities can live, work and play closer to their families, friends and loved ones.

Based on this, DSHS has established the following strategic objectives to support how we will serve people in their home community.

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**Strategic Objective 2.1: Mental Health Transformation – provide new community based civil services and supports for individuals transitioning from state psychiatric hospitals.**

**Importance:** Washington has an identified gap in community options for individuals with behavioral challenges in need of mental health care, particularly for those civil patients in the state psychiatric hospitals who are ready to discharge. As part of the Governor-directed Mental Health Transformation, an announcement was made in May 2018 to increase community civil patient options while transforming the state psychiatric hospitals into Forensic Centers of Excellence focused on forensic and hard to place civil patients. BHA’s success in meeting this objective and ensuring individuals receive the appropriate services to meet their specific needs is a shared responsibility across DSHS administrations, including the Aging and Long-Term Support Administration (ALTSA). It will require close coordination and a new level of collaboration between the Governor’s Office, DSHS, BHA, ALTSA, Health Care Authority, Behavioral Health Organizations (BHOs), Managed Care Organizations (MCOs), Accountable Communities of Health (ACHs), and community providers.

**Success Measure:** By 2023, the adult state psychiatric hospitals will no longer admit civil patients; community-based civil capacity will need to be built for these patients by 2023.

**Action Plan:**

- Work with partner agencies to reduce state hospital civil admissions by removing barriers to and developing additional community-based options for civil patients through providers who have the expertise and sufficient staffing levels to serve this population.
- Coordinate across agencies to successfully transition individuals from state and community psychiatric hospitals into community settings that are able to address the unique and complex needs using an individualized and person-centered approach, which includes intensive care coordination.
- Create a regulatory structure that supports willing providers to deliver high-quality care to individuals with complex needs who are able to relocate out of institutional settings.
- Proactively provide the required technical assistance and education to help community providers achieve success in serving this population.

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**DSHS STRATEGIC PRIORITY: INCREASE ORGANIZATIONAL EFFICIENCY, PERFORMANCE AND EFFECTIVENESS**

**Importance:** At DSHS, we strive every day to get even better at what we do, no matter how each of us contributes to our agency mission. If we are to continue transforming lives, an important component is transforming ourselves. Our most important resource is our professional, caring, compassionate staff. We need to continue efforts to be an employer of choice – recruiting and retaining individuals committed to a career in public service. We will keep a sharp focus on equity, diversity and inclusion.
These values are foundational to every aspect of our work with clients and in our day-to-day interactions with each other. Data will be used to drive decisions that will ensure our work is effective, efficient and accurate.

Based on this, DSHS has established the following strategic objectives to support how we will increase organizational efficiency, performance and effectiveness.

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**Strategic Objective 3.1: Develop relevant and sustainable equity, diversity, and inclusion efforts within every unit of BHA.**

**Importance:** BHA strives to be an administration that attracts, develops and retains employees. Developing a culture that fosters sustainable equity, diversity, and inclusion (EDI) policies and programs is one way BHA achieves this goal. It’s important for BHA to engage with all employees, encouraging their participation in developing fair and relevant practices to enhance BHA’s workplace where each employee can develop and thrive.

**Success Measure:** Increase the rate of employees responding “Always” or “Usually” by two percent on the Bi-Annual Employee Survey to the question “My agency consistently demonstrates support for a diverse workforce.”

**Action Plan:**
- Expand employee participation in EDI initiatives and programs through employee and business resource groups.
- Provide job development and training opportunities for employees on EDI best practices.
- Recognize and celebrate EDI initiatives and programs that BHA has already implemented.
- Apply recruitment best practices to diversify applicant pools.

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**Strategic Objective 3.2: Strengthen and standardize behavioral health data collection and analysis to ensure consistent, reliable data reporting across the behavioral healthcare continuum.**

**Importance:** By developing an integrated Research Data and Analysis process, BHA will improve accountability and increase transparency of information, management decisions, and policy development. This effort will also strengthen the management of change, monitoring of service delivery quality and outcome analysis for the entire organization.

**Success Measure:** BHA will have standard and consistent processes for data collection and management across the organization by July 1, 2019.

**Action Plan:** In collaboration with DSHS’ Research Data and Analysis staff, BHA will:
- Develop an inventory of performance monitoring and reporting within the system.
- Working with primary stakeholders, identify system-wide performance and reporting requirements.
- Develop an overall accountability framework that outlines performance reporting requirements for key target audiences, including timing, indicators, and data collection responsibilities and creation of an action plan to implement the accountability framework and performance measurement system.
Strategic Objectives 3.3: Improve the behavioral health system through integration of health services and workforce development.

Importance: Behavioral Health Administration (BHA) faces a shortage of medical professionals to help ensure adequate and appropriate staffing, quality patient care, staff and patient safety and staff retention.

Through residency programs, internships, fellowships and workforce development, BHA will strive to increase the workforce by retaining trainees upon completion of these programs. Having had the opportunity to work on treatment units, new medical professionals will have a greater awareness of the work environment and the significance of the services they provide.

Success Measure: Develop new and improve existing medical professional development internship and residency programs by June 2021.

Action Plan:
- Retain the majority of graduates from a BHA internship or fellowship program that teach the practice of forensic psychology.
- Begin providing in-house preceptors for new and existing staff, creating an opportunity for education, career growth, and job success at Western State Hospital.