BEHAVIORAL HEALTH & SERVICE INTEGRATION ADMINISTRATION TJC and CMS Quality Assurance

Transforming Lives

2016 SUPPLEMENTAL BUDGET

| Request | FY16 | FY17 | 15-17 |
|----------|------|-----------|-----------|
| FTE | | 2.0 | 2.0 |
| GF-State | | \$302,000 | \$302,000 |
| Total | | \$302,000 | \$302,000 |

DECISION PACKAGE SUMMARY

The Behavioral Health and Service Integration Administration (BHSIA) requests funding for 2.0 FTEs to establish Washington Management Service (WMS) positions for a Performance Improvement Manager and an Accreditation and Standards Manager at Western State Hospital (WSH). The purpose of this request is to address service delivery quality issues and survey citations issued by regulatory agencies. Negative survey findings put federal and private health insurance funding for the hospital in jeopardy. By funding this request, BHSIA expects improved compliance with regulatory standards and improved patient care quality outcomes.

PROBLEM STATEMENT

As a result of budget reductions of WMS positions in previous years, the WSH Quality Management Department lacks sufficient resources to maintain, improve upon and verify standards of accreditation and performance improvement metrics to meet the minimum standards to operate a 900+ bed psychiatric hospital. The loss of these positions has become most obvious in a recent Centers for Medicare and Medicaid Services (CMS) Recertification Site Survey this past fiscal year, as well as from unannounced the Joint Commission (TJC) surveys. Additional resources are necessary to meet the ongoing challenges to meet state and federal regulatory requirements. If this request is not funded, CMS/TJC certification will be at higher risk, which could result in a loss of federal and local revenue. The hospital has worked to meet certification requirements within existing resources, but has experienced numerous site survey citations. Currently, the Director of Quality Management functions in the role of Accreditation and Standards Manager and Performance Improvement Manager, as well as a variety of other essential roles within the hospital. The Director of Quality Management functions in the roles; therefore, accreditation and quality assurance activities have suffered.

PROPOSED SOLUTION

The two requested FTE's will address survey and quality issues by:

<u>Accreditation & Standards Manager</u>: This position will have principal responsibility in the management and oversight of the hospital's compliance with national accreditation and CMS conditions of participation. This includes ensuring that the hospital meets all state and federal hospital licensing, accreditation and certification requirements, clinical standards and practices, and direct patient care and treatment standards. This position will work collaboratively across hospital



DSH5 VISION People are healthy • People are safe • People are supported • Taxpayer resources are guarded DSH5 MISSION To transform lives DSH5 VALUES Honesty and Integrity • Pursuit of Excellence • Open Communication • Diversity and Inclusion • Commitment to Service organizational units and foster collaboration among hospital managers, staff, the department, BHSIA, and WSH divisions and outside entities.

<u>Performance Improvement Manager</u>: This position will be responsible for all hospital-wide performance improvement related activities. It will manage and coordinate organization-wide efforts to ensure that performance improvement projects are developed and managed using a data-driven focus that sets priorities for improvements aligned to ongoing strategic initiatives. This position will design, direct and manage performance improvement projects (PIP) that utilize various means and methods of project management.

EXPECTED RESULTS

Funding this request will result in higher quality services to patients and improved accreditation survey outcomes. This will help to reduce patient and staff injury rates, reduce seclusion/restraint hours, staff turnover, and the potential negative publicity that would result from poor patient outcomes. Through quality assurance accreditation activities, WSH will be able to proactively identify areas of concern and address them before negative events occur. This will improve quality of care and enhance the lives of hospital patients. These positions will also help ensure the hospital receives the maximum federal and local funding possible.

STAKEHOLDER IMPACT

There are no stakeholders that would be opposed to this investment. Stakeholders that would benefit by this investment include the patients and staff of the hospital by improving the quality of services.