



DEVELOPMENTAL DISABILITIES ADMINISTRATION

# Strategic Plan 2021-2023

*March 2020*

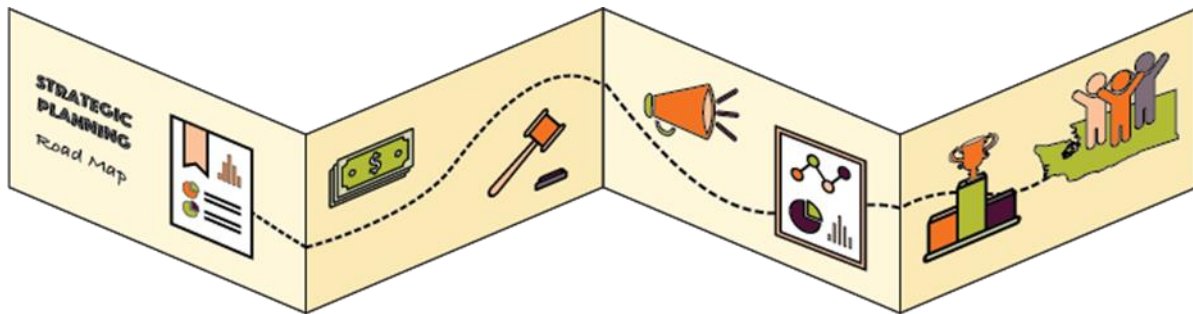
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## STRATEGIC PLANNING IN DSHS

DSHS' goal and commitment is to be a national leader in every aspect of client service. The DSHS strategic plans are a roadmap to the future. They identify where we currently are with our performance, where we want to be and how we're going to get there. The plans are used to guide our day-to-day efforts and focus our resources. They are integral to the work we do every day.



To that end, a strategic plan is crucial for making informed budget decisions. The Legislature requires each agency's budget recommendations be directly linked to the agency's strategic plan. Our plan articulates our mission, programs, goals and objectives. The strategic plan itself links budget requests to specific efforts in order to achieve statewide goals.

While the primary purpose of a strategic plan is to guide the agency's activities, it also provides a helpful means to communicate with clients, partners and stakeholders outside the agency. In addition, state law ([RCW 43.88.090](#)) directs each state agency to define its mission and to establish measurable goals to achieve desirable results for customers, and to develop clear strategies and time lines for achieving these goals.

Given the historic times we are living in with the COVID-19 pandemic, the 2021-2023 biennium will be a dramatically different strategic planning and budget season. DSHS doesn't know yet what our new normal will be. However, we will take this opportunity to think about the fundamental changes to how we serve people and focus on the strategic priorities that support our core mission of transforming lives.

For the 2021-23 Strategic Plan, DSHS has an overarching executive summary that encompasses the many services and administrations within DSHS. Additionally, each administration has a more specific strategic plan, with objectives and action plans related to their vast and diverse programs. Lastly, the plans have metrics that are monitored quarterly to ensure we are meeting our goals and objectives. The DSHS strategic plans are developed on a two-year cycle and are annually updated.

## DSHS PRIORITIES AND GOALS

This agency-wide strategic plan addresses the priorities for all of DSHS, and sets measureable objectives and goals. Using data, we monitor our progress in order to ensure DSHS serves our clients in a meaningful way and to the best of our ability within our funding. Every DSHS employee contributes to the mission of Transforming Lives by addressing the priorities and accomplishing the objectives within our agency-wide strategic plan.



DSHS has articulated broad over-arching priorities for the agency based on discussions with clients, stakeholders, the Governor's Office, legislators, staff and others. These priorities directly address current needs and anticipate future needs. By working together across administrations, stakeholders, vendors, community partners, agencies, and others, 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.

In addition, each strategic objective within the DSHS Strategic Plan supports the five broad goals for DSHS.



These DSHS goals align with the Governor's goals of:

- Healthy and Safe Communities.
- Efficient, Effective and Accountable Government.



## DEVELOPMENTAL DISABILITIES ADMINISTRATION EXECUTIVE SUMMARY



“Serving people in their home communities and caring for clients in our residential habilitation centers is at the core of our daily work. I commend DDA's ambitious goals in this plan, especially around improving health and wellness for clients and enhancing equity, diversity and inclusion efforts for staff.”

**Don Clinstman, Interim Secretary**

*Department of Social and Health Services*



“Every day the Developmental Disabilities Administration empowers people to live the lives they want. This plan is about the work and the expected outcomes to accomplish our mission.”

**Debbie Roberts, Assistant Secretary**

*Developmental Disabilities Administration*

[DDA organizational chart](#)

[Developmental Disabilities Administration](#) programs are designed to help individuals with developmental disabilities and their families get services and supports based on need and choice.

DDA offers a range of safe, high-quality community, employment and residential services and supports on a \$1.7 billion annual budget.

Within the Department of Social and Health Services, more than 4,000 DDA employees statewide offer:

- **Case management** that includes assessment, service and support planning. 49,297 individuals are DDA clients; 13,750 do not have paid services and 35,547 have a paid service with case management.
- **Community First Choice**, a Medicaid program that offers approximately 18,000 DDA clients in-home personal care supports for help with tasks such as eating, bathing, dressing, housekeeping, laundry and preparing meals to help increase independence or to substitute human help.
- **Community residential supports** such as state-operated living alternatives, supported living and adult family homes for more than 6,900 individuals to live in and take part in the community.
- **Employment, community inclusion and child development services** that offer increased financial independence and connection to the community for more than 16,884 individuals.
- **Home and community-based waivers**, which provide services in the community instead of an institutional setting. DDA offers services under five waivers to over 20,000 individuals.
- **Residential habilitation centers**, state-operated settings that provide 24-hour instruction and support with daily living skills for 647 residents.

### **Mission**

Transforming lives by providing support and fostering partnerships that empower people to live the lives they want.

### **Vision**

Support individuals by continually improving and individualizing supports, building support plans based on needs, and engaging individuals and families

### **Values**

Respect, Person-Centered Service Planning, Partnerships and Community Participation





## STRATEGIC OBJECTIVES

Below are the specific strategic objectives within the department's priorities. Some objectives refer to decision funding packages. Decision packages are funding requests DSHS submits to the Office of Financial Management as part of the state budget process.

### 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 9 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 care for those in our care.

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**Strategic Objective: 1.1: Ensure clients receiving supported living, group home, group training home services and adult family homes get regular medical and dental care and that health needs are identified and addressed.**

*Decision Packages: 000 - ML - 8 Lease Rate Adjustments, 000 – AW – ML – L7 – Personal Protective Equipment COVID-19, 150 - PL - GJ - Confidential Client Data Protection*

**Does this objective have an I.T. component?** ☒ Yes ☐ No

**Importance:** Regular medical and dental exams can help identify issues before they become more difficult to address. By getting the right health care services, preventative screenings and treatments, individuals who have regular medical exams have improved chances of living longer, healthier lives.

**Success Measure 1.1.1:** Increase the percentage of clients receiving certified residential services who see a doctor at least once a year from 92% (baseline) in July 2019 to 93% by June 2023.

*See Chart ADX.38: Percent of clients receiving certified residential services visiting a Primary Care Physician at least once a year.*

**Action Plan:**

- Provide case resource managers ongoing training and support to help them understand the value and importance of clients having regular scheduled medical exams.
- Provide the regional leadership team with monthly report of clients in certified residential services who do not have a doctor visit recorded in the preceding 12 months of their annual assessment.
- Review performance data quarterly with central office and regional executive management teams to ensure targets are being met and to note areas of concern.

**Success Measure 1.1.2:** Increase number of clients seeing a dentist from 76% (baseline) in July 2019 to 80% by June 2023.



See Chart ADX.39: Number of clients receiving certified residential services who visited their dentist in the last 12 months.

**Action Plan:**

- Provide case resource managers ongoing training and support to help them understand the value and importance of clients having regular dental exams.
- Provide the regional leadership team with monthly report of clients in certified residential services who do not have a dental visit recorded in the preceding 12 months of their annual assessment.
- Review performance data quarterly with central office and regional executive management teams to ensure targets are being met and to note areas of concern.

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

**Importance:** Studies show us that people in recovery do best when they live in their home communities, close to their support systems including services, family and friends. 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 for people with intellectual and developmental disabilities so they 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: Support individuals with developmental disabilities to be able to receive services that support them in living in their own communities rather than in facility-based settings.**

*Decision Packages:* 040 – ML – OU – Forecast Cost Utilization, 040 – ML – 93 – Mandatory Caseload Adjustment, 040 – ML – 94 – Mandatory Workload Adjustments, 040 – ML – DA – Utilization of Residential Services, 040 – ML – DE – Utilization of Respite Services, 000 – ML – WM – Technical Corrections, 000 – AW – ML – WD – Facility One-Time Costs, 040 – PL – 4X – Children's SOLA, 040 – PL – DN – High School Transition Students, 040 – ML – D3 – Financial Eligibility Staff, 040 – PL – L8 – COVID-19 Client Services and Facility Modification, 040 – PL – 4F – In-Home Provider PPE, 040 – PL – EP – Personal Needs Allowance, 040 – PL – D9 – Increase CIIBS Waiver Capacity, 040 – PL – D6 – PASRR Capacity Increase

**Does this objective have an I.T. component?** ☒ Yes ☐ No

**Importance:** Individuals with developmental disabilities should have access to services and resources that meet their needs and promote activities, routines and relationships. This includes being able to live in communities rather than in facility-based settings.

**Success Measure 2.1.1:** Increase the percentage of DDA clients served in home and community-based settings from 97.7% in July 2021 to 98% by June 2023.



See Chart AD1.2: Percent of clients with developmental disabilities served in home and community-based settings.

**Action Plan:**

- Ensure all clients requesting services receive an assessment to determine eligibility for community-based services.
- Provide Roads to Community Living funds to assist clients with their transition during the first 12 months after moving.
- Conduct quarterly performance data reviews at the executive level to ensure targets are met.

**Success Measure 2.1.2:** Transition 24 individuals who reside at Western and Eastern State Hospitals to State Operated Living Alternatives by June 2023.

See Chart ADX.37: Number of DDA State-Operated Living Alternative placements for DDA clients residing at Western and Eastern State Hospitals

**Action Plan:**

- Work with staff at Western and Eastern State Hospitals to determine the discharge readiness of clients.
- Obtain homes in the community and recruit and hire staff to support clients in the SOLA program as funding becomes available and when clients are ready for discharge from the hospital.
- Conduct quality assurance surveys on clients who have moved to ensure that service and support needs are being met.

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**Strategic Objective 2.2: Use available funding to provide the services and supports needed.**

*Decision Packages: 000 – ML – 9T – Transfers, 000 – ML – L2 – Overtime Rule Changes*

**Does this objective have an I.T. component?** ☒Yes ☐No

**Importance:** Waivers provide funding for services and supports necessary to serve over 20,000 individuals. DDA instills trust by ensuring that enrollment is at or near capacity in order to ensure that all available resources are used to meet the service needs of clients and their families.

**Success Measure 2.2.1:** Increase enrollment in the Basic Plus waiver from 9,118 to 9,571 by June 2023.

See Chart ADX.34: Enrollment in the Basic Plus waiver

**Action Plan:**

- The waiver committee will review the capacity tracking report to determine available capacity prior to reviewing requests for enrollment.
- The waiver committee will conduct weekly meetings to review enrollment requests and determine if they should be approved or not.
- The DDA executive leadership team will review caseload activity each quarter.

**Success Measure 2.2.2:** Increase enrollment in the Core waiver from 4,672 June 2021 to 4,871 by June 2023.

See Chart ADX.35: Enrollment in the Core Waiver





**Action Plan:**

- DDA will continue to monitor the waiver caseload to determine if there is capacity and funding available to support new enrollment requests for access to waiver funding and services.
- Provide a monthly report on capacity of the Core waiver and disposition of waiver enrollment requests to be reviewed by waiver committee.

**Success Measure 2.2.3:** Maintain an average quarterly caseload of at least 6,500 clients on the Individual and Family Services waiver.

See Chart ADX.36: Enrollment in the Individual and Family Services waiver

**Action Plan:**

- DDA routinely monitors the waiver caseload to determine if there is capacity and funding available to support new client enrollment requests for access to waiver funding and services.
- Provide a monthly report on capacity of DDA waivers and disposition of waiver enrollment requests to be reviewed by waiver committee.

**DSHS STRATEGIC PRIORITY: PROVIDE A PATHWAY OUT OF POVERTY AND BECOME HEALTHIER**

**Importance:** Whether people come to us for simple, short-term assistance or with more complex, long-term needs, we must be present to the whole person, offering the right benefits at the right time. Our participation in the Governor's Poverty Reduction Workgroup and our own efforts to work with families to understand the cycle of intergenerational poverty will give us the tools we need to help individuals and families achieve economic stability.

Based on this, DSHS has established the following strategic objectives to support how we will provide a pathway out of poverty and becoming healthier.

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**Strategic Objective 3.1: Increase the number of working-age adults with a developmental disability who are employed.**

**Does this objective have an I.T. component?** ☒ Yes ☐ No

**Importance:** DDA is committed to providing employment support to all working-aged adult clients. Having a job and earning a wage are powerful achievements. Increasing access and opportunities for employment allows individuals to fully participate in their communities.

**Success Measure 3.1.1:** Increase the percentage of working-age adults with developmental disabilities who are employed and receiving supported employment services from 66% in July 2018 to 67% by June 2023.

See Chart AD2.1: Percent of working-age adults with developmental disabilities receiving supported employment services who are earning a wage.



**Action Plan:**

- Provide regional management teams and counties with quarterly data showing supported employment caseload and activities.
- Use appropriated funding to expand capacity on the Basic Plus waiver for individuals who are age 21, graduating from high school, Medicaid-eligible and interested in pursuing supported employment services.
- Review technical assistance provided by the Centers for Medicare and Medicaid Services to evaluate the value-based purchasing model. This may provide valuable information and options for financial and non-financial incentives to increase employment of clients with high needs.

**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 of Transforming Lives. An important piece of that is transforming ourselves. Our most important resource is our professional, caring, compassionate staff. We need to continue our efforts to be an employer of choice – recruiting and retaining individuals committed to a career in public service. We will keep a laser focus on equity, diversity and inclusion. Those 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 4.1: Ensure that services and supports provided to clients in certified residential settings meet regulatory requirements and quality of care standards.**

*Decision Packages:* 000 – ML – WQ – Food and Medical Adjustments, 000 – ML – 8X – Facility Maintenance Costs, 040 – PL – D7 – RHC Digital Records Transformation

**Does this objective have an I.T. component?** ☒ Yes ☐ No

**Importance:** More than 4,200 individuals across the state receive community-based residential services from more than 135 contracted providers. Timely and consistent background checks for staff, routine community engagement for the individuals we support and quality support plans reflecting industry best practices are three key indicators of safe, integrated and quality service.

**Success Measure 4.1.1:** Certified residential providers will receive fewer than two background check-related citations each per quarter by June 2023.

See Chart ADX41: Number of background check-related citations for certified residential service providers

**Action Plan:**

- Provide certified residential service providers with training and technical assistance.
- Give residential service providers the option of a background check tracking tool.
- Review performance data quarterly with central office and regional executive management teams to ensure targets are met and to note any issues.



**Success Measure 4.1.2:** Certified residential service providers sampled will provide clients with at least three days of support in accessing community-based activities for three consecutive quarters during the 2021-23 biennium.

See Chart ADX 21: Average number of days in a seven-day period in which individuals in Supported Living programs accessed community-based activities

**Action Plan:**

- Share community activity data and promote residential providers' support of community activities at regional provider meetings.
  - Follow up, involve case management and provide technical assistance as appropriate for clients identified to have two or fewer community outings in sampled weeks.
  - Provide access to online training and encourage residential provider staff to support clients in accessing community-based activities.
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**Strategic Objective 4.2: Conduct timely assessments to ensure that services authorized are adequate in supporting identified health and welfare needs.**

*Decision Packages: 040 – PL – D8 – Paper to Electronic Workflows*

**Does this objective have an I.T. component?** ☒Yes ☐No

**Importance:** Assessments are used to identify a person's health and welfare needs as well as to determine financial and functional eligibility and the services a person is authorized to receive. Annual reassessments are required to review the effectiveness of authorized services and determine if support needs have changed. It is important to complete these assessments and reassessments in a timely manner because they affect a person's life and because this improves service delivery.

**Success Measure 4.2.1:** Maintain a 99% on-time completion rate of initial assessments by June 2023.

See Chart ADX.24: Percent of initial assessments completed on-time for clients with developmental disabilities requesting services

**Action Plan:**

- Provide a monthly assessment timeliness report to regional leadership teams.
- Review performance data quarterly with regional executive management teams.
- Provide case resource managers training and ongoing support to better equip them with knowledge and skills to administer an assessment.

**Success Measure 4.2.2:** Maintain a 99% on-time completion rate of annual reassessments by June 2023.

See chart ADX.1: Percent of assessments completed on time for CFC, Waiver, new or no-paid-services clients requesting services.

**Action Plan:**

- Provide a monthly assessment timeliness report to regional leadership teams.
- Review performance metric data quarterly with regional executive management teams.



- Provide case resource managers training and ongoing support to better equip them with knowledge and skills to administer an assessment.

**Success Measure 4.2.3:** Maintain on-time completion of annual individual habilitation plans of individuals residing at a residential habilitation center at 96% or greater each quarter by June 2023.

See Chart ADX.40: Percent of annual individual habilitation plans completed on time

**Action Plan:**

- Provide a monthly report regarding timeliness of completing individual habilitation plans.
- Quarterly review a sample of individual habilitation plans at each residential habilitation center to ensure they are updated within a year of the individual habilitation plans.
- Provide residential habilitation centers with a quarterly report showing the trend of timeliness in completing individual habilitation plans.

**Strategic Objective 4.3: Continue to support and promote equity, diversity and inclusion in the workplace by recruiting, hiring, training and retaining a diverse workforce through effective promotion, communication and training.**

**Does this objective have an I.T. component?** ☒ Yes ☐ No

**Importance:** DDA is committed to promoting equity, diversity and inclusion with the goal of creating a workplace environment of mutual respect and equal opportunity. Motivated and engaged staff will lead to better staff retention, organization health, identification of emerging leaders and improved customer outcomes. Equity, diversity and inclusion are core DDA values.

**Success Measure 4.3.1:** Increase the percentage of DDA employees who complete a DSHS equity, diversity and inclusion training from 72% to 90% by June 2023.

See Chart ADX.32: Percent of DDA employees who complete a DSHS equity, diversity and inclusion training.

**Action Plan:**

- DDA will provide online and instructor-led trainings for employees to take in the DSHS Learning Management System.
- DDA staff will provide quarterly reports to executive management team regarding progress achieved.
- DDA will add the requirement to complete at least one DSHS equity, diversity and inclusion training by June 2023 to DDA employee position description forms.

**Success Measure 4.3.2:** Increase the number of DDA employees certified as diversity and inclusion leaders from 10 to 18 by June 2023.

See Chart ADX.42: Number of DDA employees certified as diversity and inclusion leaders

**Action Plan:**

- Ensure certification for each diversity professional and diversity executive, and identify additional roles and responsibilities as essential for certification.
- Certified DDA employees will incorporate practices/principles of equity, diversity and inclusion in their respective facilities and offices.



- Report biannually the number of DDA employees identified as leaders in diversity and inclusion efforts.

**Success Measure 4.3.4:** Increase from 987 to 1137, the number of DDA employees who have completed 7.01, American Indian Policy or Government to Government by June 2023.

See Chart ADX.44: Number of staff trained on Indian Policy Affairs training.

**Action Plan:**

- Review 7.01 plans and training schedule with Office of Indian Policy.
- DDA works with OIP staff to provide instructor-led training for employees through the DSHS Learning Management System.
- DDA staff will provide quarterly reports to executive management team and the Indian Policy Advisory Committee subcommittee regarding progress achieved.

**Success Measure 4.3.5:** Ensure that 90% of DDA hiring managers complete a leadership course with an equity, diversity and inclusion focus by June 2023.

See Chart ADX.45: Number of supervisors completing qualifying equity, diversity and inclusion leadership class.

**Action Plan:**

- Identify hiring managers to attend training.
- Provide quarterly reports to management teams regarding progress toward achieving this success measure.
- Require that hiring managers complete cultural humility training as part of their annual performance plan.

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## **Strategic Objective 4.4: Train DDA employees to perform their duties in a manner that promotes safety in the workplace.**

*Decision Packages: 000 – ML – WQ – Food and Medical Adjustments*

**Does this objective have an I.T. component?** ☒ Yes ☐ No

**Importance:** Safety and continuity of work processes are critical components to ensure the health and safety of clients and staff.

**Success Measure 4.4.1:** Increase the percentage of DDA employees completing online DSHS Active Threat safety training course from 66% to 75% by June 2023.

See Chart ADX.29: Number and percent of DDA employees completing the online DSHS Active Threat training.

**Action Plan:**

- Offer an online training course for employees to take in the DSHS Learning Management System.
- Provide regional and residential habilitation center management teams with monthly reports regarding the number of employees who have completed the training.
- Review performance data with the executive management team each quarter.

**Success Measure 4.4.2:** Ensure all clients enrolled in the Enhanced Case Management Programs receive a visit from a DDA case resource manager at least once every four months. Maintain percentage of clients visited at



99.3% and evaluate the effectiveness of authorized services and assessed support needs from July 2021 to June 2023.

See Chart ADX.26: Percent of clients enrolled on the Enhanced Case Management Program who have required visits completed on time.

**Action Plan:**

- Ensure 99% of clients enrolled on the ECMP receive a visit at least once every four months.
- Case resource managers will document scheduled, unannounced and refused visits in clients' records.
- Review performance data with the executive management team each quarter.

**Success Measure 4.4.3:** Increase the percentage of residential habilitation center whose Therapeutic Options certification is current each quarter from 89% in July 2021 to 95% by June 2023.

See Chart ADX.30: Percent of RHC who required to be certified in Therapeutic Options.

**Action Plan:**

- Provide Therapeutic Options training to residential habilitation center direct support professionals.
- Residential habilitation center program managers will provide monthly reports regarding the number of employees whose Therapeutic Options certification is in good standing and the number of those who need to be certified/recertified.
- Review performance data with the executive management team each quarter.

**Success Measure 4.4.4:** 100% of RHC, SOLA and field services offices will have emergency and continuity plans by June 2023.

See Chart ADX.43: Percent all RHCs and SOLAs have emergency and continuity plans during emergency incidents and disasters.

**Action Plan:**

- DDA Emergency Management staff will develop a Continuity of Operations template for use by the SOLAs that is in compliance with requirements set forth in DSHS Administrative Policy 9.15.
- DDA Emergency Management staff will collaborate with the SOLA Operational Compliance Manager to ensure that each SOLA has a site-specific COOP by June 2023.
- DDA Emergency Management staff will collaborate with each of the four RHCs to review and update their respective COOP's to ensure that their plans meet the required annual update of June 2023.
- DDA Emergency Management staff will review and update the DDA HQ COOP to ensure that the plan meets the required annual update of June 2023.

