

FACILITIES, FINANCE AND ANALYTICS ADMINISTRATION

Strategic Plan 2021-2023

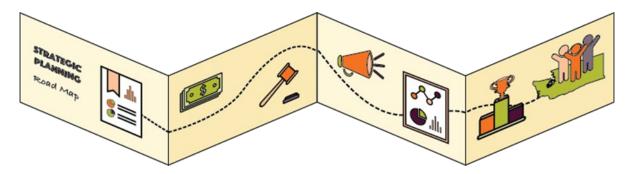


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STRATEGIC PLANNING IN DSHS

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.



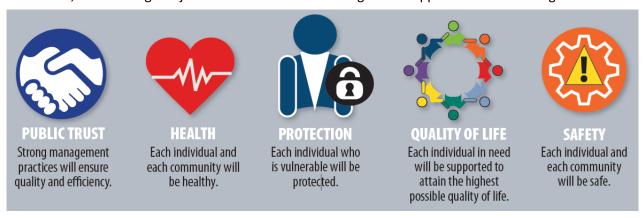
DSHS PRIORITIES AND GOALS

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.

FACILITIES, FINANCE & ANALYTICS ADMINISTRATION EXECUTIVE SUMMARY



"Our Facilities, Finance, and Analytics Administration really keeps our agency firing on all cylinders. By creatively and efficiently finding ways to maintain and improve our state's mothership of social services, FFA shows what it means to be great stewards of taxpayer resources."

Don Clintsman, Interim Secretary *Department of Social and Health Services*



"All Washingtonians deserve 21st century services, supports and facilities. The goal of our administration is to provide the necessary stewardship of the department's physical, financial and intellectual resources to ensure this happens for the people cared for by the department."

Judy Fitzgerald, Assistant Secretary

Facilities, Finance, and Analytics Administration

FFA Organizational Chart

DSHS' Facilities, Finance, and Analytics Administration has several units that provide services and support to the department, including:

- Deputy Assistant Secretary's Office
- Central Budget Office
- Maintenance and Operations Division
- > Finance Services Division
- Leased Facilities and Maintenance Operations
- Office of Capital Programs
- > Research and Data Analysis Division
- Office of Financial Recovery
- Office of Fraud and Accountability
- Emergency Management Services
- Management Services Office
- Contracts, Legal, and Background Checks
- Central Purchasing Unit
- Health Informatics Program

Mission

We transform lives by safeguarding the resources DSHS needs to care for and support our clients.

Vision

All actions taken are based on thoughtful planning and result in efficient and effective services.

Values

Teamwork
Collaboration
Planning
Advocacy
Respect



OBJECTIVES

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

DSHS STRATEGIC PRIORITY: PREPARE FOR AGING WASHINGTONIANS

Importance: DSHS must be ready for the explosive growth in the number of older adults who will need some type of assistance from us to stay in their home communities. Estimates from the state Office of Financial Management show the number of Washingtonians age 65 and older will increase by 7% by 2040 (from 1.2 million to nearly 2 million people) and many will want to live in community-based settings. We must prepare our own staff to provide excellent services to this influx of clients and prepare family members and other providers to safely care for and support these individuals.

Based on this, DSHS has established the following strategic objectives to support how we will prepare for aging Washingtonians.

Strategic Objective 1.1: Leased Facilities and Maintenance Operations will complete 100% of the fiscal year 2022-23 projects as funded in the six-year plan.

Does this objective have an I.T. component? \square Yes \boxtimes No

Importance: DSHS has 124 leased facilities that house 9,000 staff who provide services to 2.8 million DSHS clients statewide. Without office space, DSHS will not be able to accommodate the number of staff who will be needed to serve our clients statewide, including aging and disabled Washingtonians.

Success Measure 1.1.1: Complete 100% of the fiscal year 2022-23 projects as funded in the six-year plan by the end of the biennium unless delayed by elements outside of our control. This includes:

- Lease renewals
- Downsizes
- Relocations
- New spaces
- Reconfigurations

Action Plan: Work with DSHS program staff to design office spaces and develop the space planning data sheets.

- Distribute and analyze work pattern assessments surveys.
- Submit modified pre-design and SPDS forms in a timely manner and obtain approval for projects through the state Office of Financial Management.
- Work with the Department of Enterprise Services and DSHS staff to manage and deliver lease renewal and construction projects.

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.

Strategic Objective 2.1: The Office of Capital Programs will coordinate with the Behavioral Health Administration, Developmental Disabilities Administration and the Maintenance and Operations Division to identify short and long-term facility improvements to be included in the DSHS 10-Year Capital Plan.

Decision Package: 2021-2023 Capital Budget

Does this objective have an I.T. component? \boxtimes Yes \square No

Importance: DSHS must provide safe, secure and appropriate facilities for our hospitals, residential habilitation centers, and Special Commitment Center facilities occupied by our clients, staff, and visitors. Regular maintenance and capital investments support the ongoing viability of these essential facilities.

Success Measure 2.1.1: The Office of Capital Programs captures the future Behavioral Health Administration and Developmental Disabilities Administration facility requirements and represents those needs on time in the DSHS 10-Year Capital project plan that will be submitted during this biennium.

Action Plan:

- OCP staff meet with BHA and DDA program staff and MOD to identify future capital project requirements.
- OCP staff prepare decision packages including descriptive narratives, schedules and cost estimates for each proposed project.
- OCP staff; MOD staff; the Deputy Assistant Secretaries for BHA, DDA and FFA; and the Secretary prepare and/or approve a prioritized list of proposed capital projects.
- OCP staff prepare and submit the DSHS 2021-31 10-Year Capital Plan to OFM in September 2020.

Strategic Objective 2.2: The Office of Capital Programs will manage design and construction projects funded in the Capital Budget for the benefit of our hospitals, residential habilitation centers, and the SCC total confinement facility and community facilities. This includes the design and construction of a new nursing facility at Fircrest School, of a new forensic state hospital at Western State Hospital, and residential mental health treatment facilities with new capital appropriations.



Decision Package: 2021-2023 Capital Budget
Does this objective have an I.T. component? \boxtimes Yes \square No
Importance: DSHS must provide safe, secure, and appropriate facilities for our hospitals, patients, and staff. The existing hospital facilities at Western State Hospital and the existing nursing facilities at Fircrest School are inadequate to meet the needs of the residents and patients served within their walls. New facilities will provide an improved environment of care for many decades ahead. Additionally, the Governor's vision for additional behavioral health services in community settings for civilly committed patients requires DSHS to site, design, and construct new facilities.

Success Measure 2.2.1: The Office of Capital Programs completes predesign, design, and construction activities for these projects as funded by the Legislature.

Action Plan:

- OCP Chief assigns capital project managers to projects including those outlined in this strategic objective.
- OCP project managers work with the Department of Enterprise Services Assistant Program Manager and the DES Contracts Specialist to process the design agreement and construction contracts.
- OCP project managers will manage the design agreements and construction contracts mindful of scope, schedule and budget expectations.
- OCP project managers work with OCP staff, BHA and DDA program staff, and MOD staff to coordinate design and construction activities with MOD, the programs, the consultants and the contractors through final completion.
- OCP staff submit monthly status reports, predesign reports and major project reports to stakeholders through the duration of the projects.

Strategic Objective 2.3: The Maintenance and Operations Division will maintain a

preventative maintenance program at each DSHS facility to meet the requirem	ents of the
Centers for Medicare and Medicaid Services and Joint Commission.	
Decision Package: Maintenance Level 8X Facility Maintenance Costs	

Does this objective have an I.T. component? \square Yes \square No

Importance: Maintaining a preventative maintenance program that aligns with CMS regulations enables our larger facilities to provide safe living conditions for DSHS clients.

Success Measure 2.3.1: MOD will meet their goal of spending 60% of staff time on preventative maintenance by June 2023 as shown by data from the Advanced Maintenance Management System.

Action Plan:

Submit a decision package to request additional FTEs.

Strategic Objective 2.4: Make sure the Maintenance and Operations Division staffing levels are adequate to ensure safe and functional environments at all DSHS facilities.

Decision Package: Maintenance Level 8X Facility Maintenance Costs

Does this objective have an I.T. component? \square Yes \square No

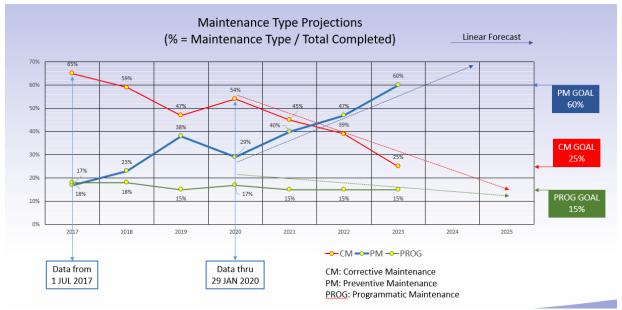
Importance: The Maintenance and Operations Division (MOD) does not have adequate staff to maintain DSHS facilities. Given the current levels of staffing, MOD is reactive and unable to adequately meet ongoing facility preventative maintenance requirements for life safety systems such as fire alarm and sprinkler systems; emergency power systems; fire rated doors and walls; heating, ventilation, and air conditioning systems; and elevators.

MOD staff recently assessed the number of staff hours needed to keep building equipment and infrastructure in proper working order and maintain safe living environments for clients. Based on this assessment and industry research, MOD's goal should be to spend 60% of staff time on preventative maintenance. Current MOD staffing levels are not adequate to achieve this goal.

Success Measure 2.4.1: Increase the percentage of staff time spent on preventative maintenance from 34% as of Nov. 30, 2019 to 60% by June 30, 2023.

Success Measure 2.4.2: Decrease the percentage of staff time spent on corrective maintenance from 50% as of Nov. 30, 2019 to 25% by June 30, 2023.

Success Measure 2.4.3: Decrease the percentage of staff time spent on programmatic maintenance from 16% as of Nov. 30, 2019 to 15% as of June 30, 2023.



Action Plan:

 Submit a decision package requesting additional staff to be phased in over the next three biennia to better focus on performing preventative maintenance tasks and ensure safe living conditions for DSHS clients.

- o For the 2019-21 Biennium, MOD requested 31 of the highest priority FTEs as part of the phased plan (biennial average is 23.0). MOD received funding for 20 FTEs.
- Assess productivity bi-annually to measure success and modify requests with accurate data.

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.

Strategic Objective 3.1: Prevent the loss of public benefits obtained fraudulently

Does this objective have an I.T. component? □Yes ⊠No

Importance: Identifying fraud allows public dollars to be spent on the truly needy and helps ensure public willingness to support those who are most in need.

Success Measure 3.1.1: Increase the average dollar amount of identified overpayments per quarter from \$900,000 in fiscal year 2021 to \$950,000 by fiscal year 2023 as shown by data from the Fraud Case Management System.

See Chart OAX.1: Overpayments issued based on Office of Fraud and Accountability investigations

Action Plan:

- Review and update process for creating refund batches to allow for quicker processing.
- Create process for reviewing the suspense account each month and documenting status of each item.
- Reconcile Agency Financial Reporting System suspense to identify outstanding items.
- Reconcile Collections and Accounts Receivable System suspense to AFRS suspense to make sure they are in balance.
- Check with IT on possibility of having credit balances go onto clients' accounts rather than into suspense.

Strategic Objective 3.2: Increase the number of refunds to Apple Health clients who have inadvertently overpaid.

Does this objective have an I.T. component? □Yes ⊠No

Importance: Develop a standard operating procedure for the Office of Financial Recovery medical premium clients to ensure timely action of suspense accounts including refunds and posting payments. A suspense

account is an account where payments are temporarily placed before allocation to the final account or destination.

Success Measure 3.2.1: Decrease backlog of premium suspense account in July 2021 by 50% by January 2022. Maintain accounts current within 30 days thereafter.

See Chart OFR1.1: Backlog of premium suspense account

Action Plan:

- Review and update process for creating refund batches to allow for quicker processing.
- Create process for reviewing the suspense account each month and documenting status of each item.
- Reconcile Agency Financial Reporting System suspense to identify outstanding items.
- Reconcile Collections and Accounts Receivable System suspense to AFRS suspense to make sure they are in balance.
- Check with IT on possibility of having credit balances go onto clients' accounts rather than into suspense.

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.

Strategic Objective 4.1: Increase the number of clients the Office of Financial Recovery is able to assist in paying their overpayments. Ensure clients who are needing phone assistance are helped in a timely and responsive manner.

Does this objective have an I.T. component? □Yes ⊠No

Importance: The Office of Financial Recovery collects more than \$300 million annually to decrease poverty, promote health and increase educational and employment opportunities to support people in our communities. This strategy is fundamental to ensure state-funded programs remain financially intact, and it's vital to ensure customers receive the best service from OFR, which represents DSHS as a whole.

Success Measure 4.1.1: Decrease the number of calls in which the caller hangs up before the call is answered or routed by 10% by January 2022.

See OFR 1.2 chart: Number of calls in which caller hangs up before call is answered or routed

Action Plan:

- Update and simplify the phone tree script for incoming client calls.
- Ensure automatic call distributor lines are used throughout the office.
- Deploy email options for clients or voicemail boxes during business hours.
- Offer a customer service survey option at the end of the call.
- Complete ongoing phone etiquette training with each unit.

Strategic Objective 4.2: Leased Facilities and Maintenance Operations will provide transparent lease and one-time project cost tracking to programs.

Does this objective have an I.T. component? \square Yes \square No

Importance: DSHS' leases over 2,500,000 square feet of space throughout Washington, costing over \$45 million/annually. The team delivered on time construction projects totaling over \$9 million in FY 2020 and FY 2021. Accurate tracking and reporting allows programs to make full use of the funds available.

Success Measure 4.2.1: Track and report one-time project costs, lease expenditure allotted versus budget and lessor-provided incentives. This includes:

- Twice per year, meet with program budget managers to review one-time project budget and expenditures and lease model.
- Quarterly, track and report free rent and tenant improvement fund incentives provided by lessors in new leases and lease renewals.

Action Plan:

- Provide ongoing training to Consolidated Business Services and program fiscal staff on how to code one-time project costs with accurate coding.
- Educate program budget managers on one-time project costs funding, lease incentive funds available, the funded lease model and accurate coding for expenditures.

Strategic Objective 4.3: Prevent the loss of public benefits due to fraud by performing more timely investigations.

Does this objective have an I.T. component? □Yes ⊠No

Importance: Ensuring public dollars are spent on those who truly need them helps ensure public willingness to support those most in need. Prosecuting fraud offenders not only holds them accountable but deters others from fraudulent misuse of the system.

Success Measure 4.3.1: Increase the quarterly number of cases referred to prosecution from 30 cases per quarter in fiscal year 2017 to 50 by end of fiscal year 2023 as shown by data from the Fraud Case Management System.

Action Plan:

- Streamline the Intentional Overpayment Investigations process to support workflow between multiple case outcomes using time study results.
- Prioritize criminal referrals starting with ones that are most likely to prevail at prosecution.

• Track criminal cases assigned and average case load per investigator.

Strategic Objective 4.4: FFA staff are empowered and engaged with the resources and support they need to produce their best work.

Decision Package: Policy Level L7 Personal Protective Equip COVID19

Does this objective have an I.T. component? \square Yes \square No

Importance: Employee engagement is a cornerstone to FFA's success and employee empowerment links FFA's philosophy to the behavior and skills of its staff as well its approach to customers. Comprehensive staff inclusion increases innovation and productivity in the workplace. In order to decrease turnover, retain talent and obtain high production it is imperative that FFA creates a culture that promotes professional development and personal fulfillment.

Success Measure 4.4.1: Increase the percentage of FFA employees that respond "always" or "usually" to the DSHS Employee Survey question "In general, I'm satisfied with my job" from 78% in 2019 to 81% in 2021. See FFA 1.1 chart: Percent of FFA employees satisfied with their job

Success Measure 4.4.2: Increase FFA employee retention from 76.08% in 2019 to 78% by June 2022 as shown by data from the DSHS Employee Survey.

Action Plan:

- Establish and maintain an Equity, Diversity and Inclusion Community of Practice in FFA.
- Continue to provide administration wide opportunities for staff to engage in professional and personal development such as the Leadership Development Program.
- Execute a standardized administration wide new employee onboarding program.
- Continue to recognize staff for the great work that they do each day to transform lives.

Strategic Objective 4.5: FFA will increase efforts to build an equitable, diverse and inclusive work environment. Using the DSHS Equity, Diversity and Inclusion Performance Map, FFA will execute several initiatives in the 2021-2023 Biennium to increase and maintain a diverse workforce.

Does this objective have an I.T. component? \square Yes \square No

Importance: FFA values equity, diversity and inclusion and is committed to developing programs that encourage and support a diverse workforce. This directly supports Governor Inslee's Results Washington goals for a prosperous economy and a state government that is efficient, effective and accountable. It is important to FFA that our workforce represents the people that DSHS serves.

Success Measure 4.5.1: Maintain an Equity, Diversity and Inclusion Community of Practice within FFA throughout the biennium.

Action Plan:

- Identify staff interest in participating in the Equity, Diversity and Inclusion Community of Practice.
- Draft a plan of action that identifies the initiatives that the participants in the Community of Practice will focus their efforts on throughout the biennium.
- Utilize the Community of Practice to embed equity, diversity and inclusion into FFA's organizational culture and to provide awareness training to FFA staff.

Success Measure 4.5.2: FFA will continue development of a talent acquisition program to increase diversity of applicants applying for jobs in the administration.

Action Plan:

• Continue to develop a network of contacts where potential employees are likely to be found, such as job fairs, trade schools, colleges and universities as well as community organizations.

Strategic Objective 4.6: Maintain average turnaround time for completion of background checks at three (3) business days or less.

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

Importance: The Background Check Central Unit uses a centralized database to conduct approximately 310,000 background checks annually, including approximately 140,000 fingerprint based background checks for the DSHS programs and authorized service providers who serve vulnerable adults, juveniles and children. Timely background check services are critical in maintaining adequate staffing levels for quality care and providing jobs to qualified applicants. BCCU customers are all DSHS administrations statewide as well as the Department of Children, Youth and Families.

Success Measure 4.6.1: BCCU will maintain background check turnaround times at three (3) business days or less throughout FY 2021 and FY 2022.

Action Plan:

- Develop and launch plan of action to address turnaround times when they reach four (4) business days
 to include adjusting workloads of staff and other steps designed to quickly address and remediate
 turnaround times.
- Reduce erroneously submitted duplicate background checks submitted by entities, which increase workload and turnaround times, by continuing to enhance the Background Check System.
- Maintain adequate staffing levels to handle background check workload and training needs during staff turnover, absences and transitions.
- Schedule and hold quarterly BCS stakeholder meetings to improve communication, share best practices and recommend future BCS modifications and enhancements.

Strategic Objective 4.7: Provide responsive, efficient and legally sound services in support of all DSHS contracting needs.

Does this objective have an I.T. component? □Yes ⊠No

Importance: The mission of Central Contracts and Legal Services is to provide expert advice, systems, policies and processes to manage contract risks so that DSHS can transform lives. DSHS enters into approximately 25,000 contracts each year. CCLS oversees the department's compliance with state laws, rules and policies on contracts, procurement and interlocal agreements.

CCLS customers are statewide department staff in all DSHS programs who initiate contracts to serve clients or obtain needed services for the department. CCLS also supports the Department of Children, Youth and Families in accessing and using the Agency Contracts Database for many of its contracts.

Success Measure 4.7.1: 90% of all new administration contracts staff have completed all required contracts trainings within six months of hire.

Action Plan:

• Ensure DSHS contracts professionals and managers are fully trained on relevant laws, rules, policies and best practices to support satisfactory performance of every contract.

Success Measure 4.7.2: Key Contract Coordinators are able to run, without additional assistance, 90% of reports needed by their respective administrations using the new ACD report builder.

Action Plan:

• Ensure ACD data and records are accurate, up to date, regularly maintained and able to provide relevant analytical data to support contracting functions and DSHS program initiatives.

Success Measure 4.7.3: A fully functioning tracking system for updating the CCLS SharePoint site is in place by January 2023 and all CCLS policies are updated prior to their next sunset review date.

Action Plan:

• Contract templates, policies and CCLS SharePoint resources are kept updated.

Success Measure 4.7.4: All individual provider contracts are successfully transitioned from DSHS to the Consumer Directed Employer(s) in alignment with the anticipated ALTSA and DDA timelines of early 2021 CCLS will adjust as needed to changes in ALTSA and DDA timelines.

Action Plan:

• Ensure readiness and support for the transition of DSHS joint-employer duties from ALTSA and DDA for individual providers of in-home personal care and respite to the contracted Consumer Directed Employer(s).

Strategic Objective 4.8: Provide continuous, responsive and compliant central purchasing and related support and consultation to all DSHS administrations.

Does this objective have an I.T. component? \square Yes \boxtimes No

Importance: The Central Purchasing Unit supports and manages six central services program areas for the department. They include the vehicle fleet program, the asset management program, the wireless devices program, the purchasing program, the "P-Card" program, and operational procurements and contracts. CPU

customers are staff in all DSHS administrations that rely on these programs to provide administrative and operational support statewide. CPU manages the TRACKS purchasing system, facilitates training for all DSHS purchasing staff and manages risk and compliance for approximately 33,000 purchase orders valued at over \$102 million annually.

Success Measure 4.8.1: All DSHS purchasing coordinators are trained in advance of go-live within the department of the One Washington solution's purchasing functions. All TRACKS purchasing functions are effectively transitioned into the One Washington solution upon DSHS implementation of the solution.

Action Plan:

- Participate in all One Washington initiatives, change management and planning activities for the new statewide enterprise financial and purchasing system.
- Ensure continuity of services throughout staff outages, turnover and during transition from TRACKS to One Washington.
- Finalize desk manual instructions for all CPU program areas.
- Increase outreach activity to new programs to train new purchasing staff.
- Offer monthly trainings and annual refresher trainings for all purchasing representatives.
- Maintain up-to-date, relevant and user-friendly resources on CPU SharePoint site.

Strategic Objective 4.9: Each administration and residential program's continuity of operations plans will support the continued performance of mission-essential functions during a wide range of emergencies or disasters.

Does this objective have an I.T. component? □Yes ⊠No

Importance: DSHS must improve its preparedness for any incident requiring the evacuation of any business office or residential program when transportation, relocation and continued staffing of mission-essential services is necessary. This is an especially challenging and high-risk undertaking for DSHS residential programs. Federal funding requirements and state laws stipulate the development and maintenance of continuity of operations plans and training and exercises. When the department is in full compliance with these authorities, we safeguard the well-being of clients and employees during emergencies and reduce the potential loss of federal funds, state audit findings and tort claims.

Success Measure 4.9.1: 100% of DSHS-operated residential programs that receive federal funding have current plans and procedures, approved by the responsible assistant secretaries, that comply with Medicaid requirements and those plans are submitted to DSHS Emergency Management Services by June 30 of each year.

Success Measure 4.9.2: 100% of administrations revise continuity plans, incorporating all required elements as stipulated in Governor's Directive 13-02, are approved by the responsible assistant secretaries and are submitted to DSHS Emergency Management Services by June 30 of each year.

See chart EMS 1.1 Percent of completed administration and residential program continuity plans submitted to Emergency Management Services.

Action Plan:

 Residential programs and administrations submit action plans addressing all of the above success measures to DSHS Emergency Management Services by June 30 of each year.



- Administrations submit quarterly reports to DSHS Emergency Management Services describing outcomes related to continuity planning, training and exercise in accordance with success measures 4.9.1 and 4.9.2.
- DSHS Emergency Management Services revises the continuity plan for the Office of the Secretary and the Facilities, Finance and Analytics Administration for approval by June 30 of each year by the Chief of Staff and Assistant Secretary, respectively.

Strategic Objective 4.10: FFA will replace Leave Tracker with SILAS across the department.

Decision Package: Policy Level KC SILAS Leave Attendance Scheduling

Does this objective have an I.T. component? \boxtimes Yes \square No

Importance: SILAS is an automated scheduling, time and leave system that will assist with leave processing for over 17,000 employees. Our existing systems for scheduling staff and tracking leave and hours worked are outdated, susceptible to errors and require a substantial amount of administrative time. SILAS will have greater capabilities to track, manage and report on labor costs as well.

Success Measure 4.10.1: Successful implementation of SILAS at targeted locations across the department. The department anticipates that future implementations of SILAS will take between 12-18 months at each location. *This success measure is dependent on funding from the Legislature.*

Action Plan:

 Submit decision package to implement SILAS throughout the rest of the department following implementation at Child Study and Treatment Center and Western State Hospital in June 2020 and October 2020, respectively.

Strategic Objective 4.11: Provide timely and accurate data and scientifically valid analyses to support DSHS programs and external partners.

Does this objective have an I.T. component? \square Yes \boxtimes No

Importance: The Research and Data Analysis Division integrates data from multiple DSHS and partner agency data systems. These data are linked and analyzed by RDA staff. Analyses are reported to executive leadership, the Legislature, the Governor's Office, the federal partners and agency program partners. It is essential that these data be accurate, timely and complete, and that analyses conducted using these data be accurate and scientifically valid. The work of the department relies on these data and analyses, including program evaluations, policy analyses and performance monitoring.

Success Measure 4.11.1: Analytic requests and contract report deliverables are completed within the expected timelines and meet required quality standards.

Success Measure 4.11.2: Required litigation-related reporting is completed accurately, within agreed timelines.

Action Plan:

- Work with each administration to maintain accurate and complete data transfers, linking and reporting for executive management and for case management tools.
- Work with Behavioral Health Administration and Health Care Authority to establish data collection and reporting tools/applications needed for the Trueblood Settlement. This will allow us to complete required monthly/quarterly/annual reporting to the court.
- Research project managers and supervisors will ensure contract report deliverables are completed within the expected timelines and meet required quality standards.

Strategic Objective 4.12: Ensure all confidential client data is kept from unauthorized disclosure.

Does this objective have an I.T. component? □Yes ⊠No

Importance: RDA integrates sensitive, identified client data from multiple DSHS and partner agency data systems. Federal and state laws and agency policies mandate protection of this data.

Success Measure 4.12.1: Ensure there are no breaches of client confidentiality in the operation of any RDA data system or application containing sensitive client data.

Action Plan:

- RDA Information Security unit staff and data/application management teams will follow agency and division policies and procedures that meet federal, state and agency data security and privacy requirements.
- High-priority security gaps will be prioritized and mitigated; timelines will be developed for addressing lower priority gaps.

Strategic Objective 4.13: The Central Budget Office will ensure financial sustainability of the agency and will use appropriate processes and procedures to meet the Legislative Appropriation requirements in place for the biennium.

Does this objective have an I.T. component? \square Yes \boxtimes No

Importance: Having adequate financial processes and procedures in place will help to:

- Determine whether current year revenues are sufficient to pay for current year services.
- Demonstrate that resources were obtained and used in accordance with the enacted budget.
- Provide information to assist programs in assessing service efforts, costs and accomplishments.
- Maximize services and benefits for clients.
- Provide appropriate funding for adequate agency staffing.
- Support the strong stewardship of public dollars.
- Close the fiscal year and biennium within appropriated levels.
- Sustain financial integrity.
- Provide staff the resources they need to do their job.

Success Measure 4.13.1: Each fiscal year there will be less variance in program budget projections in the six months prior to fiscal year close.

Action Plan:

- The Central Budget Office and programs will conduct monthly pre-Monthly Fiscal Status Reports meetings to establish a common understanding of the programs financial status. They will also discuss any potential risk that may have a fiscal impact and share with leadership as appropriate.
- CBO and Finance Services Division will meet monthly before the MFSR meetings to discuss the programs financial projections and at a minimum discuss the following items: Proviso expenditure status, overexpenditures, underexpenditures, Legislative Reports and grant spending.
- At the monthly MFSR meeting, CBO, programs and the Chief Financial Officer will discuss financial projections and escalate decision making if needed.
- CBO and programs will monitor fiscal notes for fiscal impact to the program/agency.
- CBO and programs will submit decision packages in support of the financial monitoring process.

Strategic Objective 4.14: Account for and safeguard taxpayer resources to ensure funding is being used to accomplish DSHS's statewide missions.

Decision Package: Policy Level JA Increase Payroll Capacity

Does this objective have an I.T. component? □Yes ⊠No

Importance: Without the trust of the Washington taxpayer, that the necessary effort to reduce waste and fraud is a serious one, it will continue to be difficult to secure further funding to help Washingtonians who need state provided assistance.

Success Measure 4.14.1: Management Services Office will have zero annual duplicate payments, zero audit findings, highly accurate and efficient accounting closes and zero findings of fraud each fiscal year.

Action Plan:

- Implement continuous improvement training.
- Continue Monthly Fiscal Status Reports meetings and utilize audits performed by Senior Financial Coordinators.
- Submit a decision package requesting additional fiscal staff.

Strategic Objective 4.15: Ensure key leaders in FFA have operational support to enable them to focus on big picture, long-term and high-priority issues.

Does this objective have an I.T. component? □Yes ⊠No

Importance: Senior administration leaders need to be able to focus on the larger, most strategic issues of the department. When bogged down with administrative minutia, this can't occur and those who the agency strives to better serve ultimately suffer.

Success Measure 4.15.1: Senior leaders in FFA are able to focus the majority of their time on the highest value-adding work, and the administrative operations of the organization are being executed with quality and precision as shown by survey data.

Action Plan:

- Review existing business processes and identify those that would benefit from process improvement tools such as value stream mapping.
- Identify manual processes that are candidates for automation.
- Work with Research and Data Analysis to develop a survey for senior leaders within FFA to measure their ability to work on the highest value adding work.

Strategic Objective 4.16: FFA will actively participate in the DSHS One Washington Advisory Committee and support the implementation of the One Washington project.

Does this objective have an I.T. component? □Yes ⊠No

Importance: One Washington is a project led by the state Office of Financial Management to modernize and improve aging administrative systems and related business processes that are common across state government, leading to eventual replacement of Washington's core financial system, the Agency Financial Reporting System. The affected business processes include procurement, budgeting and human resources/payroll.

Success Measure 4.16.1: DSHS is prepared for the implementation of One Washington.

Action Plan:

- FFA representatives on the DSHS One Washington Advisory Committee will actively participate in all of the meetings and fulfill the responsibilities outlined in the committee charter.
- Submit a decision package for FTEs to support the One Washington project. Currently, all of the FFA
 employees that are supporting the One Washington project are doing it in addition to their regularly
 assigned job duties.