



ADDRESSING YOUR CONCERNS....

HEALTH AND RECOVERY SERVICES ADMINISTRATION: 2006 Employee Survey Action Plan

Here's how HRSA will respond to the issues our staff raised in the 2006 Employee Survey....



Thank you for your input. We are interested. We are committed.

Health and Recovery Services Administration (HRSA) employees listed their concerns about job issues and their working conditions during an employee satisfaction survey earlier this year. The results are in – they have been posted on our Intranet (iHRSA) and we have opened a series of management discussions and staff feedback opportunities to deal with the concerns you have raised.

A number of feedback mechanisms helped inform these recommendations:

- **AUGUST 21-25:** A series of brown-bag staff lunches in August extended the discussions that provided valuable feedback at August 10's Open Communications Forum.
- **AUGUST 28:** The Extended Management Team met for the third time with EC to discuss action steps that would respond to the survey.
- **SEPTEMBER:** The HRSA self-assessment survey is described further inside – this year's unique approach will culminate in a report to EC on September 20.

But talking about the concerns is not enough. This document is an evolving draft of an overall action plan to help us react quickly and effectively. For example, it is clear looking at the survey results and even more clear after listening to staff discussions, that the term "senior leadership" means different things to different employees. When you are not sure who your leaders are, it's especially hard to know which direction we're being led – so that's obviously one of the first critical issues we need to resolve.

If we can stress one point here, it is this: We are listening. The survey has already helped us identify some of the paths to greater understanding of our administration's mission and core values. And in our minds, it has underscored the need to deal with these issues together. HRSA's era of change has lasted more than 18 months, but several things have not changed. That is our respect for one another and our pride in what we do and how we do it. If we can communicate those things effectively to each other, we will be a long first step toward resolving all the other concerns highlighted in the survey. Thank you for your help.

– Doug Porter, Assistant Secretary, HRSA

-- Heidi Robbins Brown, Deputy Assistant Secretary, HRSA

IF YOU HAVE QUESTIONS ABOUT THE SURVEY AND FEEDBACK OPPORTUNITIES:

Please contact **Jim Stevenson**, HRSA Communications Director, stevejh2@dshs.wa.gov,
or **Key Gedrose**, Workforce Advancement Manager, gedrok@dshs.wa.gov





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Focus Issue 1: Find new paths for staff feedback and communication

Summary of the Issue

- HRSA staff have weathered an era of change over the past year, with new mission partners, a new headquarters building, a new payer system in development – and the staff has not had a chance to develop the new relationships and communications paths that mesh with these other changes.
- Timing of the survey coincided with big move into Cherry Street Plaza and major shifts in working relationships and business reorganizations
- HRSA has a structure in place to ship information down; but it has a less effective structure to bring information back to the top.
- Electronic communication has too often replaced human contact between divisions inside Cherry Street Plaza and in other locations. It is not working.
- HRSA divisions need effective ways to trade information and inspiration laterally – too much division communication now hinges on the division directors at the top of the pyramid. We need to share information across divisions at many different levels.



What we're already doing

- The intranet iHRSA has been a big improvement for staff communications.
- This year's HRSA self-assessment survey will maximize staff involvement and feedback in a new process, one that includes a "diagonal slice" of the administration. Representative executives, managers, supervisors and line workers will prepare this year's survey, including a summary meeting with the Executive Committee on September 6 to discuss the team's findings and implementation of its recommendations.



Our plans for the coming year

- Expanded Open Communications Forums, focus groups and brown baggers with emphasis on management participation, timely events and topics, and more opportunity for divisions outside of Cherry Street Plaza to participate.
- iHRSA on-line surveys will periodically measure staff information needs
- Increased EC emphasis on sharing decisions before they are implemented



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Communications/Feedback Recommendations for EC:

1. Establish regular employee focus groups with EC participation on issues of concern to HRSA employees. Wherever possible, use these small group sessions to sample staff sentiment on upcoming EC deliberations.
2. Conduct regular surveys of staff via iHRSA and WebSurveyor to give employees a regular feedback mechanism that is safe and anonymous
3. Move “HRSA-sponsored” events to the remote divisions – branding them by making sure that Senior Leadership budgets the activity fairly – and participate in the events.
4. Highlight the different sections of HRSA on the Intranet so staff can zero in quickly on the news and information that applies to their division and their jobs.
5. Maintain a regular schedule of published EC Reports so staff is always kept abreast of EC decisions and deliberations.
6. Workforce Advancement to develop a curriculum on “meeting management” – how to solicit meaningful feedback, how to create “safety zones,” recognition techniques, etc.
7. Create a human Human Resources page – pix of HRCs, which units they serve, contact info, etc.

OVERALL: Quarterly measurement of progress on this action plan – a report card

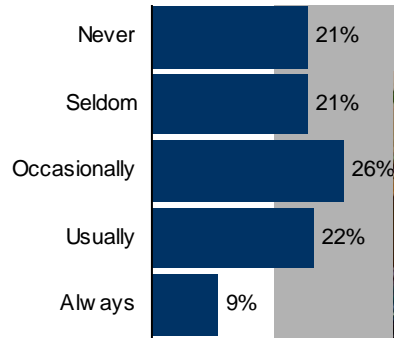


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Focus Issue 2: Building confidence in HRSA leadership

Question: *I have confidence in the decisions made by senior leaders in my program.*



Summary of the Issue

- Employees across the administration say they lack confidence in senior staff.
- It isn't necessarily clear who makes up HRSA's "senior staff" -- Directors and deputies? The Extended Management Team? Immediate supervisors?
- HRSA has undergone lots of change, and there has been a loss of personal security amid all the changes. This affected staff adversely in part because it roiled the traditional chain of command.

What we're already doing

- iHRSA has been generally successful in sharing news from the top – news gets posted, employees have immediate access to it.
- Cross-divisional teams are becoming much more common; these help communicate different priorities, functions
- Resumption of EC Reports on iHRSA helps staff know what leadership is doing
- The Assistant Secretary and Deputy Assistant Secretary currently attend all new employee orientations. This has been well received.

Our plan for the coming year

- EC and Extended Management Team need to adopt a "management-by-walking-around" approach. One goal: We want every HRSA employee to be able to identify top HRSA managers. (How many of those pictured here can you name?)
- Reorganization needs to be clarified so that employees across HRSA understand the changes, how the new divisions will work together and why the changes are being made.
- Keep Executive Committee reports current and reflect EC decisions.
- EC and Extended Management Team need to meet more frequently and discuss decisions in planning stages, not after the fact.
- Directors will be invited to future new employee orientation sessions.
- All supervisors need to be more interactive with staff.



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SENIOR LEADERSHIP-RELATED RECOMMENDATIONS FOR EC:

1. Rename Extended Management Team as “Senior Leadership”
2. Bonding activities to bring middle management, office chiefs and division directors together and share common goals
 1. Training – Crucial Conversations, Management Skills, Succession screening
 2. Regular bimonthly meetings of SL that include solid information sharing, inside news about the agency, administration, other divisions
 3. Across-Division representation at unit and section meetings
3. Cultivate “management by walking around”
 1. Apple cart breaks – “Troop time” meetings – “Ask Directors Anything” sessions
 2. Recognition of directors in EC who break through the “remote” aura”
 3. Seek visibility at HRSA events – i.e., serving *shishkabob* for people waiting in line at Bite of HRSA
4. All directors or their delegates participate in new employee briefing sessions
5. Add a Decision Log to EC Reports that can be shared with Senior Leadership group



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Focus Issue 3: Improve employee recognition programs

Summary of the Issue

- 38% of staff believe they do not get recognized for a job well done.
- Another question is what kind of recognition is at issue: Are HRSA employees dissatisfied with formal recognition or informal recognition? Are the Employee Appreciation Days – normally well received – perceived as an ER activity?
- A frequent feedback comment: The formal ER process is not open to everyone, and some employees feel it is a waste of time to nominate their peers.
- The ER process is complicated – There are different ways people can be recognized for good work, but the procedures are not well understood.



What we're already doing

- Cause for Applause template is now posted on iHRSA and available to all employees. Use is increasing.
- Planning is under way for an expanded Employee Appreciation Week this fall that will emphasize ER and inclusiveness -- involving the entire administration.

Our plan for the coming year

- The current ER team has held a retreat to discuss possible changes, including rotation of members so that the process will be perceived as an open one.
- EC has registered its interest in becoming more involved in the formal recognition process that is being redesigned by the agency.
- Annual reviews (PDPs) should include formal and informal recognition and cite achievements – managers should include cause for applause-type recognition in performance evaluations.
- Recognition needs to be focused on everyday achievements as well as the “walking-on-water” performances that draw praise. Many employees do not have the opportunity to save millions of dollars or redesign entire programs.
- Staff say every-day recognition is more valuable to them than formal awards.

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EMPLOYEE RECOGNITION-RELATED RECOMMENDATIONS FOR EC:

1. Replace the current DSHS-wide recognition system with an entirely new system for HRSA, one that recognizes local achievement with winners picked by colleagues and supervisors in similar units, offices and divisions
 1. Appoint a new staff-management workgroup to develop and implement a new system.
 2. De-centralize the new system so divisions control the nomination/award decisions; look for ways to replace the single formal recognition ceremony with other kinds of effective recognition
 3. Plan for the changeover in November – with several weeks before the new system would be launched (no later than January 1).
 4. Coordinate with current efforts by the agency to restructure the current system.
2. Retain other HRSA ER activities, such as the Employee Appreciation Days, which are rated highly by employees.
 1. The HRSA structure for coordinating ER activities would necessarily change. The single administration-wide ER coordinating team would likely be replaced by up to four or five other committees, and activities such as the Employee Appreciation Days may need their own coordinating committee.
3. Renew emphasis on Cause for Applause citations and everyday acknowledgements by supervisors when people perform well.
 1. Pressure from Directors – supervisors will respond if it is a requirement
 2. Training for supervisors in employee recognition techniques/skills
 3. Develop automated award that posts on iHRSA for instant recognition

Employee Recognition, continued

3. Establish a new *competitive* employee-of-the-month-type award that includes a monetary reward for good work that can be publicized on iHRSA. Require supervisors to nominate monthly or bimonthly names, and let EC select the winners.
4. New momentum on the PDPs – recognize supervisors who stay current –perhaps a standing agenda item in SL -- and make it a performance issue for supervisors who don't. Encourage supervisors to include Cause for Applause in PDPs

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HRSA's mission, vision and guiding principles....



HRSA's vision statement:

Promoting a healthier Washington

HRSA's mission statement:

HRSA provides access to quality health care for Washington's most vulnerable residents.

HRSA's core values:

- **HRSA strives to be a prudent purchaser:** HRSA pushes for higher quality, better outcomes and cost-efficiencies.
- **HRSA is accountable:** HRSA analyzes its decisions and outcomes in a meaningful way and takes responsibility for them.
- **HRSA manages its programs well:** HRSA provides expertise and is the best and fastest source of information about its own programs.
- **HRSA works to be more inclusive:** HRSA constantly seeks cross-divisional, cross-agency and external perspectives.
- **HRSA takes risks to improve:** HRSA is innovative and does not hesitate to challenge the status quo.
- **HRSA values good decisions:** HRSA strives for balanced, timely, informed and practical judgment.
- **HRSA is open and honest:** Good communication builds trust.
- **HRSA values and supports the staff:** Reward good work and provide opportunity.
- **HRSA strives for fairness and consistency:** HRSA policies are documented and apply to all.
- **HRSA takes pride in good customer service:** HRSA is committed to its clients' needs and to the providers who furnish health-care services.



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OTHER RECOMMENDATIONS:

OTHER IDEAS WORTH CONSIDERATION:

1. Put more muscle into “fun events” like Bite of HRSA:
 1. Chess tournaments
 2. Talent competitions (“HRSA Idol”)
 3. HRSA Day to Graze Thru Lakefair
2. Open up iHRSA to all employees, letting people respond to issues in a “chat room” format. ESA has had some success with this.
3. Establish a real wellness program, with ongoing activities, a home page on iHRSA and a coordinator who wants to do it. Include healthful activities, like stop-smoking incentives, etc., as well as competitive wellness events like the governor’s promotion of walking-jogging exercise.
4. Add an internal staff directory to iHRSA with photos – develop a computer e-mail signature block that employees can easily plug their photo into
5. Resume publication of an annual report, summarizing HRSA stats and successes.