

2007-2010 Strategic Plan

Health Systems Quality Assurance



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What We Do

Health Systems Quality Assurance helps prevent injuries, develops health systems and improves patient safety. Our number one priority is to protect and improve the health of people in Washington State.

We do this by working closely with communities and local health partners to build strong health systems and prevention programs across the state. This helps make sure communities have access to good health care and emergency medical services.

We also regulate and support more than 350,000 health professionals and 7,000 health facilities. Each year we review nearly 8,000 complaints and inspect thousands of facilities.

Program Activities and Services

- Promote injury and violence prevention
- Develop strong health systems in rural communities
- Oversee emergency medical and trauma care services statewide
- Make sure temporary housing such as hotels, motels and temporary worker housing are safe
- Inspect licensed facilities
- Develop requirements and rules for health professionals and the facilities where they work
- License health care provider applicants who meet standards to practice with skill and safety
- Investigate complaints against health care professionals and facilities, and take action when needed to protect patients
- Make sure new health facilities are needed and designed with patient safety in mind



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Goals

1. Improve people's health
2. Enhance patient safety
3. Make every resource count
4. Have an exemplary workforce
5. Deliver exceptional service

Mission:

HSQA works to protect and improve the health of people in Washington State.

Vision:

HSQA is the recognized leader in patient safety, prevention and health systems development.

Values:

- Integrity
- Accountability
- Effectiveness
- Responsiveness
- Cultural Competency
- Relentless commitment to serve the public

These values are guided by our desire to build the public's trust, strong relationships, employee satisfaction and integrated service delivery.

Goal 1:

Improve people's health

Objective 1.1:

Provide the information needed to prevent disease and injury and to make healthy decisions.

Objective 1.2:

All people have an equal opportunity to be healthy.

Strategy 1.1.1: Prevent disease and injury by targeting effective interventions.

Measure 1.1.1.1: Rate of unintentional poisonings.

Strategy 1.1.2: Use information to improve patient health outcomes.

Measure 1.1.2.1: Number of major trauma patients who survive.

Measure 1.1.2.2: Number of health care facilities reporting to the adverse events reporting system.

Strategy 1.2.1: Increase availability of health services in underserved communities.

Measure 1.2.1.1: Number of provider referrals that result in placements to sites serving Medicaid and other underserved populations.

Goal 2:

Enhance Patient Safety

Objective 2.1:

Improve patient safety through facilities and health care professional regulatory processes.

Strategy 2.1.1: Improve timeliness of responses.

Measure 2.1.1.1: Percent of complaints against health care professionals completed within set timelines.

Measure 2.1.1.2: Percent of contested complaint cases completed within 270 days.

Measure 2.1.1.3: Percent of complaint investigations initiated against health care facilities within set timelines.

Strategy 2.1.2: Apply appropriate sanctions for misconduct.

Measure 2.1.2.1: Percent of secretary final decisions that comply with the sanction schedule.

Measure 2.1.2.2: Percent of board and commission final decisions that comply with the sanction schedule.

Objective 2.2:

Improve the quality of health systems.

Strategy 2.2.1: Identify best practices associated with specific systems.

Measure 2.2.1.1: Number of new patient treatment guidelines developed for the emergency medical services and trauma system.

Measure 2.2.1.2: Number of regulatory best practices developed.

Goal 2: Continued Enhance Patient Safety

Objective 2.2: Cont.
Improve the quality of
health systems.

Strategy 2.2.2: Make improvements to the health system.

Measure 2.2.2.1: Percent of trauma patients who receive full trauma team activation in Level I and II trauma services.

Measure 2.2.2.2: Percent of trauma patients who receive full trauma team activation in Level III trauma services.

Measure 2.2.2.3: Improve Critical Access Hospital performance on four Heart Failure Protocol measures.

Measure 2.2.2.4: Percent of Certificate of Need regular applications completed within set timelines.

Measure 2.2.2.5: Percent of Certificate of Need reviews and decisions completed within set timelines.

Measure 2.2.2.6: Percent of Washington Health Professional Services cases in development that result in a contract.

Goal 3:

Make every resource count

Objective 3.1:

Focus resources on public health priorities.

Objective 3.2:

Improve the quality, availability and use of data to inform the public and design public health programs.

Objective 3.3:

Utilize technology to improve HSQA's service delivery.

Strategy 3.1.1: Be accountable.

Measure 3.1.1.1: Percent of hospital licensing and accreditation surveys completed on-time.

Measure 3.1.1.2: Percent of pending manual renewals that are within five days of receipt.

Measure 3.1.1.3: Percent of health care professional credentials issued within 14 days of receiving all documents.

Measure 3.1.1.4: Percent of facility surveys completed within set timelines.

Strategy 3.2.1: Utilize available, existing data systems to avoid duplicating data or functionality.

Measure 3.2.1.1: Identify, evaluate, document and approve office specific data systems.

Strategy 3.2.2: Encourage the public to find information and interact through the Internet.

Measure 3.2.2.1: Number of license types able to renew online.

Strategy 3.3.1: Establish common approach to accomplish common business functions.

Measure 3.3.1.1: Number of boards and commissions using existing imaging technology for complaint files.

Goal 4:

Have an exemplary workforce

Objective 4.1:

Increase employee satisfaction and treat employees fairly.

Strategy 4.1.1: Staff receives and provides effective and timely feedback.

Measure 4.1.1.1: Percent of evaluations completed on-time.

Strategy 4.1.2: Use employee feedback to improve the workplace.

Measure 4.1.2.1: Increase employee development and satisfaction survey score results.

Objective 4.2:

Maintain a talented workforce.

Strategy 4.2.1: Core competencies, skills and abilities are developed and kept current.

Measure 4.2.1.1: Percent of employees with a current training and development plan and expectations.

Objective 4.3:

Our workforce reflects the diversity of Washington State.

Strategy 4.3.1: Develop recruitment strategies to ensure a diverse workforce.

Measure 4.3.1.1: Increase the percentage of diversity for new hires and promotions.

Strategy 4.3.2: Increase interaction with communities of color and organizations representing diverse groups.

Measure 4.3.2.1: Percent of applicants for Governor and Secretary appointees to boards, commissions, steering or advisory committees that represent diversity.

Goal 5:

Deliver exceptional service

Objective 5.1:

Use feedback to improve internal and external service delivery.

Strategy 5.1.1: Increase the number of organized and systematic feedback opportunities to improve service delivery.

Measure 5.1.1.1: Number of programs and functions obtaining feedback.

Measure 5.1.1.2: Number of program improvements based upon feedback.

Objective 5.2:

Implement organizational changes.

Strategy 5.2.1: Continue the organizational review.

Measure 5.2.1.1: Number of offices with established goals, objectives, strategies and performance measures.

Measure 5.2.1.2: Develop and undertake a plan to broaden the understanding of division activities.

Strategy 5.2.2: Design common business practices that provide strong customer service.

Measure 5.2.2.1: Percent of Health Professions Quality Assurance procedures that are rescinded.

Objective 5.3:

Be responsive to customer requests.

Strategy 5.3.1: Provide timely customer service.

Measure 5.3.1.1: Percent of calls to the Customer Service Center answered within 60 seconds.

Measure 5.3.1.2: Percent of Public Disclosure Records Center requests processed in 30 days.