

or redistribution of resources and power; and recognizing, reconciling, and rectifying historical and contemporary injustices.” OHA’s 10-year goal is to eliminate health inequities.

Oregon State Hospital (OSH), a Joint Commission and CMS certified public psychiatric hospital, provides psychiatric hospital services and patient treatment services to persons committed by the Oregon courts as part of the state mental health system. The Oregon State Hospital is the largest division of OHA with over 2,700 positions across the hospital.

This position is a key part of Oregon State Hospital's strategic branch, reporting directly to the Deputy Superintendent. The Deputy Superintendent’s department is responsible for implementing the Superintendent’s strategic priorities by evaluating risks and developing systems-level, cross-department strategies for the effective and efficient management of hospital operations. The department is responsible for developing legislative strategies to improve systems of care delivery inside and outside of the hospital, managing the portfolio of projects and initiatives across all disciplines and operations, and maintaining effective systems of governance and oversight by the hospital’s statutorily-required Governing Body.

The department includes the director of Organizational Strategy and Development, which oversees the hospital’s portfolio of projects, initiatives and performance improvement activities; the Government and Legal Affairs team, responsible for legislative strategy, engagement with local government partners, and legal compliance; and the Design and Implementation team, which develops and deploys systems and tools to support knowledge management, and designs hospital projects and initiatives to manage and mitigate organization-wide risks.

b. Describe the primary purpose of this position, and how it functions within this program. Complete this statement. The primary purpose of this position is to:

The primary purpose of this position is to evaluate the effectiveness of the hospital’s internal governance systems, assess and make recommendations for improving hospital operations, develop policy change proposals for senior leadership, and develop plans to facilitate the implementation of hospital-wide projects, initiatives, and processes. This position will partner with the OSH Deputy Superintendent and work closely with the Portfolio Management Office to ensure recommendations are integrated into existing initiatives, and that project success metrics are designed and assessed to resolve the risks and issues identified through the initial analysis. This position provides policy analysis and operational support with direct impact on hospital-wide systems and priorities. This position provides oversight of hospital-wide initiatives that are managed by the hospital’s 60+ committees, and advises leadership on emerging risks and opportunities for improvement. This position exercises delegated authority from the Deputy Superintendent to represent the Superintendent’s priorities across departments and with external partners. This position ensures that complex policy and operational decisions are translated into actionable workplans, timelines, and deliverables that advance the strategic direction of the hospital and the Oregon Health Authority.

SECTION 3. DESCRIPTION OF DUTIES

List the major duties of the position. State the percentage of time for each duty. Mark “N” for new duties, “R” for revised duties or “NC” for no change in duties. Indicate whether the duty is an “Essential” (E) or “Non-Essential” (NE) function.

Note: If additional rows of the below table are needed, place cursor at end of a row (outside table) and hit “Enter”.

% of Time	N/R/NC	E/NE	DUTIES
40%		E	<p>Operational Research and Evaluation</p> <ul style="list-style-type: none"> • Analyze complex information about hospital performance, risk management, and knowledge management from multiple systems to develop solutions that don't currently exist. Analyze ambiguous and/or new information to recommend strategies to change hospital operations. • Analyze administrative systems to ensure effective forecasting and management of staffing across programs and clinical units to meet regulatory requirements and deliver care to patients within court-ordered timeframes. • Design, implement and optimize knowledge management systems to produce effective and timely reporting to senior leadership. • Design, implement and optimize systems for documenting and analyzing organizational risks identified by patients, staff, committees and project teams, and other systems and processes needed to support effective leadership of the hospital. • Facilitate cross-departmental collaboration to accurately scope complex issues and evaluate the root causes of risks impacting hospital operations, the delivery of appropriate care to patients, and the ability to maintain compliance with state and federal regulatory bodies. • Develop new systems and processes to collect data from multiple departments and teams that is needed to inform decisions by senior leadership. When data is unavailable develop alternative methods for analyzing and evaluating relevant information. • Provide consultative advice to senior leadership on current hospital policies and administrative processes related to complex systems and hospital operations and recommend improvements.
35%		E	<p>Project Design and Management</p> <ul style="list-style-type: none"> • Analyze and evaluate complex risks and issues, provide consultative advice to senior leadership on the scope and impact of identified issues, and design project proposals to resolve cross-department operational barriers to maintaining state and federal compliance, delivering quality patient care, performing effective oversight of hospital operations, and mitigating risks to hospital performance.

			<ul style="list-style-type: none"> Plan and execute operational improvement projects that have hospital-wide impact. Work with senior managers to formulate long- and short-term operational goals and implementation plans in alignment with the hospital's Quality Strategy and OHA strategic priorities. Manage projects from initiation to completion, ensuring scope, timelines, and deliverables are met. Develop and implement strategies for managing organizational change. Design and implement measures for evaluating the impact and success of projects, identify and collect appropriate data to support evaluation, and produce analytical reports for senior leadership.
25%		E	<p>Policy Analysis and Legislative Coordination</p> <ul style="list-style-type: none"> Analyze the impact of proposed legislation on hospital operations and provide consultative advice to senior leadership recommending hospital operations policy changes to proposed legislation. Interpret state legislation and develop implementation plans that meet legislative intent, align with state and federal regulatory requirements, and support effective coordination with external and internal partners. Monitor nationwide best practices in psychiatric hospitals and recommend strategies that could be adopted by OSH to improve coordination with external agencies, local government agencies, and private sector partners. Represent the Deputy Superintendent in selected meetings, ensuring leadership intent is carried forward and action items are tracked to completion.

SECTION 4. WORKING CONDITIONS

Describe any on-going working conditions. Include any physical, sensory, and environmental demands. State the frequency of exposure to these conditions.

This position is performed in a professional office environment within a state psychiatric hospital setting. Work involves prolonged periods at a computer, reviewing detailed documents, and participating in meetings requiring sustained concentration and attention to detail.

- Physical Demands: Extended screen time, frequent use of keyboard/mouse, and occasional lifting of files or meeting materials (up to 20 lbs).
- Sensory Demands: Requires active listening, synthesizing complex verbal and written information, and preparing clear communication for executive audiences.

- Environmental Demands: Work occurs primarily in an office setting with occasional presence on patient-care units to gather feedback or observe workflows. These visits may involve exposure to high-stress clinical environments, behavioral health crises, or other hospital operational challenges.
- Frequency: Office-based work daily; exposure to patient-care environments approximately weekly to monthly, depending on project needs.

SECTION 5. GUIDELINES

a. List any established guidelines used in this position, such as state or federal laws or regulations, policies, manuals, or desk procedures:

- State and federal laws, including Oregon Administrative Rules (OARs), HIPAA, CMS conditions of participation, and Joint Commission standards.
- Oregon Health Authority (OHA) and Oregon State Hospital (OSH) policies, administrative directives, and desk manuals.
- Strategic planning frameworks such as the OSH 30-Day Plan and Portfolio Management Office (PMO) protocols.
- State of Oregon procurement, contracting, and budgeting guidelines.
- Executive Team directives, meeting structures, and established reporting protocols.

b. How are these guidelines used?

The incumbent applies these guidelines to ensure compliance with regulatory requirements, align project deliverables with hospital policy, and maintain consistency across executive-level initiatives. Guidelines are interpreted to develop project scopes, create workflows, ensure lawful handling of sensitive information, and provide accurate reporting to the Deputy Superintendent and Senior Leadership Team. The employee exercises independent judgment when existing guidelines do not fully address emerging or complex issues, recommending updates or new procedures when necessary.

SECTION 6. WORK CONTACTS

With whom, outside of co-workers in this work unit, must the employee in this position regularly come in contact? When applicable, please identify contacts that might be virtual/ in-person, or both.

Note: If additional rows of the below table are needed, place cursor at end of a row (outside table) and hit "Enter".

Who Contacted	How	Purpose	How Often?
Deputy Superintendent	In-person, virtual meetings, email	Receive assignments, provide updates, seek guidance	Daily
Superintendent	In-person, virtual meetings, email	Provide project updates, coordinate alignment with organizational priorities	Weekly
Portfolio Management Office (PMO)	Virtual meetings, Teams, email	Coordinate project intake, reporting, and alignment with PMO standards	Weekly

Senior Leadership Team Members	Meetings (in-person/virtual), email	Gather input, present proposals, facilitate decision-making	Weekly to Monthly
Unit and Program Managers	In-person meetings, site visits, email	Collect operational data, validate workflows, ensure practical feasibility of projects	Weekly
Frontline Staff (nursing, DSA, therapists, social work, etc.)	Focus groups, listening sessions, surveys	Obtain feedback, identify barriers, improve communication loops	Monthly
State and OHA Policy/Finance Staff	Email, virtual meetings	Align with budget, policy, and reporting requirements	Monthly or as needed
External Auditors/Regulatory Agencies (CMS, Joint Commission)	Written communication, scheduled meetings	Provide documentation, support compliance reviews	Annually or as needed
Union Representatives	Meetings, email	Clarify impacts of initiatives, ensure labor considerations are addressed	As needed

SECTION 7. POSITION-RELATED DECISION MAKING

Describe the typical decisions of this position. Explain the direct effect of these decisions:

This position exercises independent judgment in evaluating policies and programs for efficacy, interpreting guidelines, and advising the Deputy Superintendent and other executives. Typical decisions include:

- Risk identification and escalation: Determining which issues require executive attention, which can be resolved at the operational level, and how to sequence work when there are competing priorities.
- Policy and regulatory interpretation: Deciding how existing regulations, hospital policies, or PMO standards apply to emerging issues, and recommending adjustments or new procedures when gaps are identified.
- Data analysis and synthesis of multiple sources of information that may be ambiguous: Selecting appropriate data based on validity, analyzing, and presenting data in a way that informs executive decision-making while reducing unnecessary complexity.
- Partner Engagement: Determining appropriate methods and frequency for gathering feedback from staff, managers, and external partners to ensure inclusive and accurate input into executive-level decisions.

Direct Effect of These Decisions:

The decisions made in this position directly influence how executive leadership prioritizes large-scale operational changes, sets strategic priorities, allocates resources, and manages strategic initiatives. Sound judgment by the incumbent ensures initiatives and projects remain compliant with state and federal regulations, aligned with strategic goals, and responsive to staff and patient needs.

SECTION 8. REVIEW OF WORK

Who reviews the work of the position?

Note: If additional rows of the below table are needed, place cursor at end of a row (outside table) and hit "Enter".

Classification Title	Position Number	How	How Often	Purpose of Review
Deputy Superintendent	[Position #]	In-person meetings, email, review of deliverables, and project updates	Weekly and as needed	Ensure alignment with hospital priorities, validate accuracy of data and recommendations, and provide strategic guidance

SECTION 9. OVERSIGHT FUNCTIONS

- a. How many employees are directly supervised by this position? 0
- How many employees are supervised through a subordinate supervisor? 0
- b. Which of the following activities does this position do?
- | | |
|--|---|
| <input type="checkbox"/> Plan work | <input type="checkbox"/> Coordinates schedules |
| <input type="checkbox"/> Assigns work | <input type="checkbox"/> Hires and discharges |
| <input type="checkbox"/> Approves work | <input type="checkbox"/> Recommends hiring |
| <input type="checkbox"/> Responds to grievances | <input type="checkbox"/> Gives input for performance evaluations |
| <input type="checkbox"/> Disciplines and rewards | <input type="checkbox"/> Prepares and signs performance evaluations |

SECTION 10. ADDITIONAL POSITION-RELATED INFORMATION

ADDITIONAL REQUIREMENTS: List any knowledge and skills needed at time of hire that are not already required in the classification specification.

All positions in OHA require a Criminal Background Check and an Abuse/Neglect Check. Fingerprints may be required.

- Strong knowledge of project management principles, including scoping, planning, and execution of cross-departmental initiatives.
- Understanding of state and federal regulatory frameworks relevant to psychiatric hospitals (CMS, Joint Commission, OARs, HIPAA).
- Advanced skill in synthesizing complex information into concise reports, visuals, and recommendations for executive decision-making.
- Ability to facilitate cross-functional meetings, focus groups, and listening sessions to capture diverse input.

