

# OREGON STATE HOSPITAL

## POLICY ATTACHMENT

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**ATTACHMENT A:** OSH Executive Team

**POLICY NUMBER:** 1.016

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**POINT PERSON:** Superintendent

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**APPROVED:** Superintendent

**DATE:** APRIL 13, 2023

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**SELECT ONE:**

<input type="radio"/> New policy attachment proposal	<input checked="" type="radio"/> Minor/technical revision of existing policy attachment
<input type="radio"/> Reaffirmation of existing policy attachment	<input type="radio"/> Major revision of existing policy attachment

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### I. OSH EXECUTIVE TEAM MEMBERSHIP AND RESPONSIBILITIES

A. The Oregon State Hospital (OSH) Executive Team membership includes:

1. OSH Superintendent
2. OSH Deputy Superintendent
3. Chief Financial Officer/Chief Operating Officer (CFO/COO)
4. Chief Medical Officer (CMO)
5. Chief Nursing Officer (CNO)
6. Junction City Campus Administrator
7. Director of Oregon Health Authority (OHA)

B. The OSH Executive Team:

1. Leads the work at both the Salem and Junction City OSH Campuses;
2. Plans and sets OSH strategy to achieve the hospital's top priorities and ensure effective cross-departmental decision-making and resource allocation;
3. Strategically factors the following considerations into its decisions: Zero Harm/Safety; Treatment Excellence; Engagement; and Business Rigor;
4. Determines organizational structure and roles;
5. Determines hospital resource (budget and positions) deployment;
6. Reviews high risk incidents/situations, root cause analysis (RCA) reports and completed systems investigations (previous Critical Incident Review Panel (CIRP) function) and determines corrective actions to be taken;

7. Addresses external pressures;
  8. Fosters external facing collaborations/nurtures business relationships;
  9. Maintains awareness and accountability to regulatory compliance (licensing, Centers for Medicaid and Medicare Services certification, The Joint Commission (TJC) accreditation, etc.);
  10. Addresses other duties/issues as escalated to the OSH Executive Team.
  11. Focuses on:
    - a. Primarily, the issues that are the most interdependent for OSH, meaning those issues involving multiple units or functions where cross-leader discussion is critical for effective decision making, sequencing, and management of resources and capabilities.
    - b. Issues that have the highest impact on the organization's strategic clarity and priorities, programmatic and organizational effectiveness, financial sustainability, building future leaders and external reputation.
- C. When necessary and helpful, the Executive Team obtains information from and collaborates with:
1. Partner Divisions of Oregon Health Authority - such as Tribal Affairs, Agency Operations, Fiscal and Operations, Equity and Inclusion, External Relations, Health Systems Division, Health Policy and Analytics, Public Health, etc.;
  2. Shared Services divisions – such as Office Information Services, Office of Financial Services, Contracts and Procurement, etc.
  3. Other agencies – such as Oregon Department of Human Services–Shared Services Departments, Department of Administrative Services, etc.;
  4. Vested departments and community partners – such as Oregon State Health Advisory Board (OSHAB), community care providers, regulatory bodies, legislature, families, law enforcement, courts, neighbors, etc.;
  5. OSH departments and staff – such as the Clinical Administration Team (CAT), Finance and Operations, Program Executive Teams (PET), Peer Recovery Services, Medical and Allied Health Professional Staff (MAHPS), performance management, etc.;
  6. Patients.
- D. OSH Executive Team members must:

1. Embed the mission, vision, and values of the organization into their work and decisions and model productive behaviors;
2. Establish, nurture, and structurally support the organizational culture;
3. Communicate and package decisions and direction-tie to strategic focus;
4. Respond to immediate threats and risks; and
5. Actively support OHA goals.