

**BOARD OF NURSING HOME ADMINISTRATORS**

**Annual Performance Progress Report (APPR) for Fiscal Year (2007-2008)**

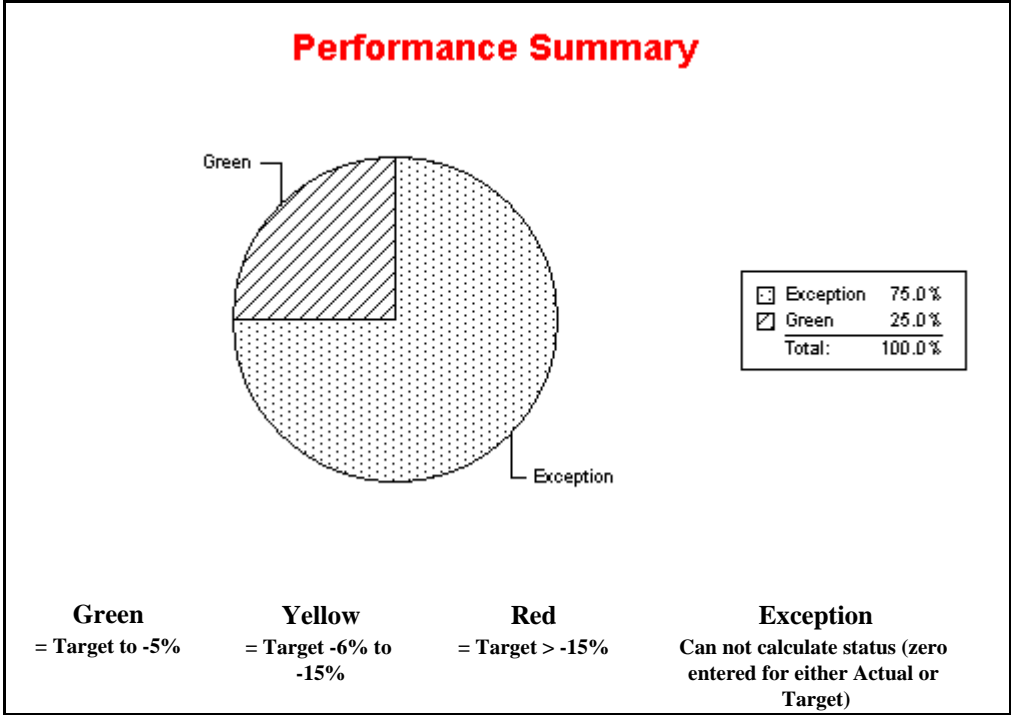
**Proposed KPM's for Biennium (2009-2011)**

Original Submission Date: 2008

2007-2008 KPM #	2007-2008 Approved Key Performance Measures (KPMs)
1	ADMINISTRATOR-IN-TRAINING EXPERIENCE - Percent of Administrators-In-Training (AIT) that report a satisfactory training experience/program.
2	COMPLAINT REVIEW AND RESPONSE - Average time to review and act on a complaint. (days)
3	CUSTOMER SATISFACTION - Percent of customers rating their satisfaction with the agency's customer service as "good" or "excellent": overall customer service, timeliness, accuracy, helpfulness, expertise and availability of information.
4	BEST PRACTICES - Percent of total best practices met by the Board.

<b>New</b> <b>Delete</b>	
	<b>Title:</b>  <b>Rationale:</b>

<b>BOARD OF NURSING HOME ADMINISTRATORS</b>		<b>I. EXECUTIVE SUMMARY</b>	
<b>Agency Mission:</b> To protect the public by developing, imposing and enforcing standards which shall be met by individuals in order to receive and retain a license as an Oregon nursing home administrator.			
<b>Contact:</b> Janet Bartel		<b>Contact Phone:</b> 971-673-0196	
<b>Alternate:</b> Anita Schacher, Board Chair		<b>Alternate Phone:</b> 503-325-0313	



**1. SCOPE OF REPORT**

The Board of Examiners of Nursing Home Administrators consists of one program that insures education, training, and examination requirements are satisfied prior to licensure and that continuing education requirements are completed prior to license renewal. Additionally, the Board reviews and investigates complaints against licensees that may result in disciplinary action ranging from a civil penalty to license revocation. The approved KPMs sufficiently represent the essential operations of the program and support the Board’s mission and goals.

## **2. THE OREGON CONTEXT**

A nursing home administrator is responsible for planning, organizing, directing, and controlling the operation of a nursing home. They are critical players in the fostering the environment in a nursing home. The Board was created in 1971 to carryout a federal mandate—established in 1967 via amendments to the Social Security Act—that required the licensing of nursing home administrators. The Board develops, imposes, and enforces licensing and professional standards which shall be met by individuals in order to receive and retain a license as a nursing home administrator. The Board works with the Department of Human Services and the Office of the Long-Term Care Ombudsman to protect residents of Oregon nursing homes.

## **3. PERFORMANCE SUMMARY**

### **1. KPMs TARGETS MAKING PROGRESS**

Customer Satisfaction  
Board Best Practices

### **2. KPMs NOT MAKING PROGRESS**

Administrator-in-Training Experience (remains consistent with 2007 results)  
Complaint Review and Response

## **4. CHALLENGES**

The Board continues to face a revenue deficit due to a declining license pool that is relative to the declining number of Oregon nursing homes. Given this, the Board's challenge is to maintain essential services within a limited budged and to identify opportunities for increased efficiency and delivery of services.

The Board employs one part-time FTE who is responsible for administrative support and program operations. Accordingly, a heavy workload and competing priorities present an ongoing challenge to board staff.

The Board is challenged with an ever-changing professional environment and in developing a training program that prepares entry-level administrators for the demands of a highly regulated environment and the needs of an increasingly diverse staff and residents.

With the increasing age of the baby-boom generation, the recruitment and retention of nursing home administrators remains a concern for the Board and nursing home owners and operators. Nursing home administrators experience a significantly high burnout and withdrawal rate from the profession that may be attributed to a harsh regulatory environment, compensation disproportionate with responsibility, long hours, staffing shortages, and negative media portrayal.

## **5. RESOURCES AND EFFICIENCY**

The most beneficial and cost savings partnership realized is the co-located Health-Related Licensing Boards' sharing of resources and costs. Without this sharing of expenses, the Board could not exist as efficiently as it does today.

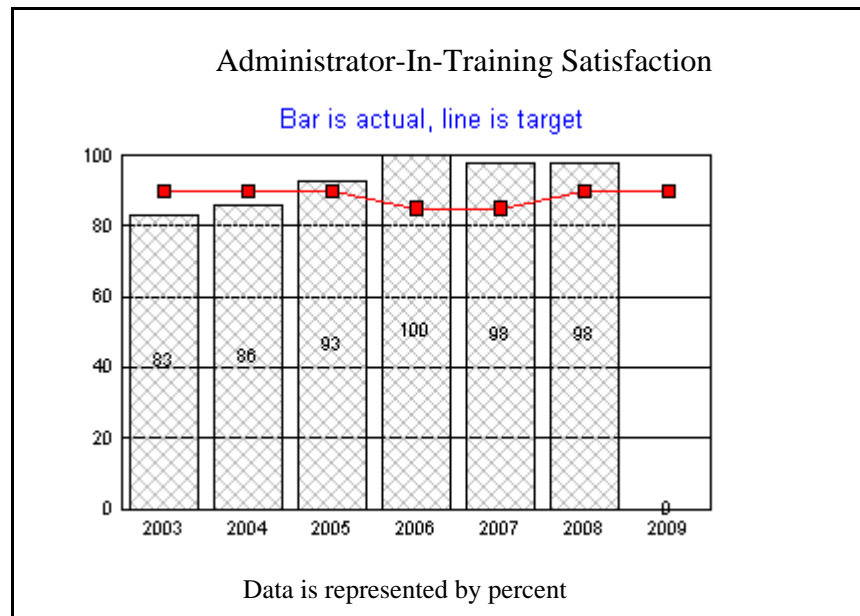
The Board's increased reliance on electronic correspondence over traditional mail service continues to provide additional savings with increased efficiency and response time.

The Board conducted a preliminary online renewal in 2007 by way of electronic notice to those administrators with a current email address and is exploring the next step in full online licensing and renewals. The Board continues to explore credit card and bank card payment options with a focus on cost versus benefit and the impact on Board revenue.

The Board's website remains a valuable resource for licensees and interested citizens providing readily available information, forms, and applications.

The Board's efficiency measure relates to Customer Satisfaction with customers consistently reporting a high level of satisfaction. The measure has met or exceeded targets since the first report period in 2003.

<b>KPM #1</b>	ADMINISTRATOR-IN-TRAINING EXPERIENCE - Percent of Administrators-In-Training (AIT) that report a satisfactory training experience/program.	2003
<b>Goal</b>	SERVE and PROTECT: Protect nursing home residents from unethical and/or incompetent nursing home practices.	
<b>Oregon Context</b>	Agency Mission	
<b>Data Source</b>	Midway and final AIT interviews and surveys collected from AIT participants	
<b>Owner</b>	Janet Bartel, Executive Director Ph: 971-673-0196	



**1. OUR STRATEGY**

Nursing home administrators plan and direct the operation of nursing homes and other long-term care facilities. The Board’s goal is to protect nursing home residents from unethical and/or incompetent nursing home practices. Our strategy is to develop competent, professional, entry-level nursing home administrators through established standards that include a 960-hour training requirement. The Board develops training program

guidelines, monitors the progress of trainees, provides training recommendations, and conducts midway and final interviews. The agency surveys trainees to identify training program strengths, weaknesses, and areas for improvement. Survey responses are considered by the Board and warranted changes are implemented.

## **2. ABOUT THE TARGETS**

The Board has established that training is a vital component in the development of competent, entry-level, nursing home administrators. The targets measure overall trainee satisfaction in three areas: 1) program; 2) preceptor (trainer); and 3) training packet. Measured results demonstrate the level of reported program satisfaction. In 2005, initial targets appeared high at 90 percent and were lowered to 85 percent during the 2006 and 2007 report periods. Subsequent program improvements led to increased satisfaction ratings. Accordingly, the 2008 and 2009 report periods were restored to the original 90 percent target. The higher target is desirable with this KPM.

## **3. HOW WE ARE DOING**

Trainee satisfaction remains high with a 98 percent overall program satisfaction rating for report year 2008. This result represents no change from report year 2007. Historically, results consistently increased in report years 2003 through 2006--where they peaked at 100 percent--and have leveled off at 98 percent for the past two report years. The survey ratings and comments are used to identify areas for training program improvement. For example, the Board recently developed the AIT Program Tool Kit that consists of training and reporting tools in response to trainee survey and interview comments.

## **4. HOW WE COMPARE**

An Internet search failed to provide a comparable measure in either the public or private sector.

## **5. FACTORS AFFECTING RESULTS**

Trainee satisfaction ratings are based on a limited number of survey responses, thus a few responses may significantly impact the overall rating. Additionally, the relationship between a preceptor (trainer of new administrators) and trainee has significant bearing on a trainee's satisfaction in their program. Other factors include trainees' expectations, self-discipline and motivation, and their suitability for the profession. Currently, trainees' participation in surveys is on a voluntary basis resulting in a limited number of responses. Incorporating the survey as a mandatory component of the training program would increase the number of survey responses.

## **6. WHAT NEEDS TO BE DONE**

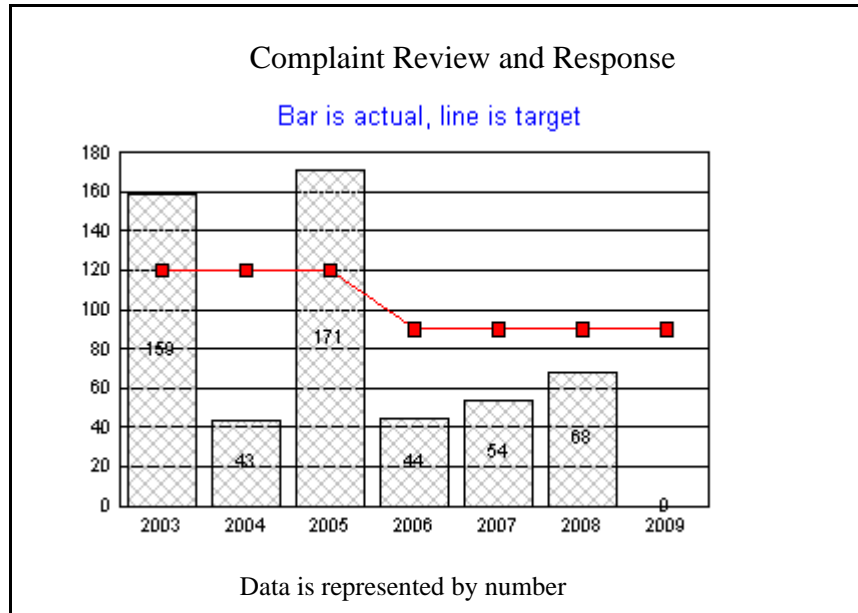
The Board will continue to consider survey responses from trainees and to closely monitor the training program. The Board will act accordingly when deficiencies are noted and changes are warranted. The Board will also continue its focus on and participation in the training workshops provided to preceptors—licensees who are responsible for the oversight and training of new administrators. The Board will consider incorporating the survey as a mandatory component of the training program.

#### **7. ABOUT THE DATA**

Reporting Cycle: Oregon fiscal year

The Board has changed its survey process since 2003, which has resulted in an increased number of survey responses. Nonetheless, survey responses remain low due to the limited number of AIT participants (30-50 per biennium). Program data is collected and entered by board staff and maintained within a database, thus the information is assumed reliable. Survey responses are available for review upon request at the board office located in the Portland State Office Building.

<b>KPM #2</b>	COMPLAINT REVIEW AND RESPONSE - Average time to review and act on a complaint. (days)	2003
<b>Goal</b>	SERVE and PROTECT: Protect nursing home residents from unethical and/or incompetent nursing home practices.	
<b>Oregon Context</b>	Agency Mission	
<b>Data Source</b>	Agency investigation files and investigation log	
<b>Owner</b>	Janet Bartel, Executive Director Ph: 971-673-0196	



**1. OUR STRATEGY**

The Board’s goal is to protect nursing home residents from unethical and/or incompetent nursing home practices. Most complaints received are outside the Board's jurisdiction and are referred to other agencies; however, the Board takes seriously all complaints filed by citizens and endeavors to efficiently and appropriately address their concerns. Complaints received command immediate review by staff to determine warranted action

and/or referral with an investigation and full Board review as needed. Complaints alleging immediate or potential harm are treated as a priority with appropriate referrals to local protective services. Complaints involving administrators are investigated and the appropriate action taken.

## **2. ABOUT THE TARGETS**

The initial targets were established at 120 days and based on the average time to complete an investigation from the receipt of a complaint. The measure's language was amended by the 2005 legislature and the focus realigned to consider the time to review and act on a complaint. Accordingly, the targets were adjusted down to 90 days, the average length of time between quarterly board meetings. The lower target is desirable with this KPM.

## **3. HOW WE ARE DOING**

In most report years, the Board has stayed below the target indicating that it is efficiently processing complaints received. The length of time for Board action increased from 54 days in 2007 to 68 days in 2008, although still below the 90-day target.

## **4. HOW WE COMPARE**

No public or private comparison has been performed. The board office responds to complaints in the most expedient manner allowable; however, the Board meets quarterly, which often delays the review and processing of complaints. Board investigations rely heavily on other agencies findings. Regardless, the Board continually strives to expedite its response and processing of citizens' complaints.

## **5. FACTORS AFFECTING RESULTS**

The Board investigates a relatively low number of nursing home administrator complaints due to the limited number of nursing homes in Oregon. The Department of Human Services (DHS) licenses the nursing facilities and establishes the regulations for these facilities. Complaints received often relate more directly to DHS regulations than this Board's laws. The Board operates with one part-time FTE and does not contract for the services of an investigator. Given this, the Board relies heavily on other agencies' investigative findings, which may take months to acquire.

## **6. WHAT NEEDS TO BE DONE**

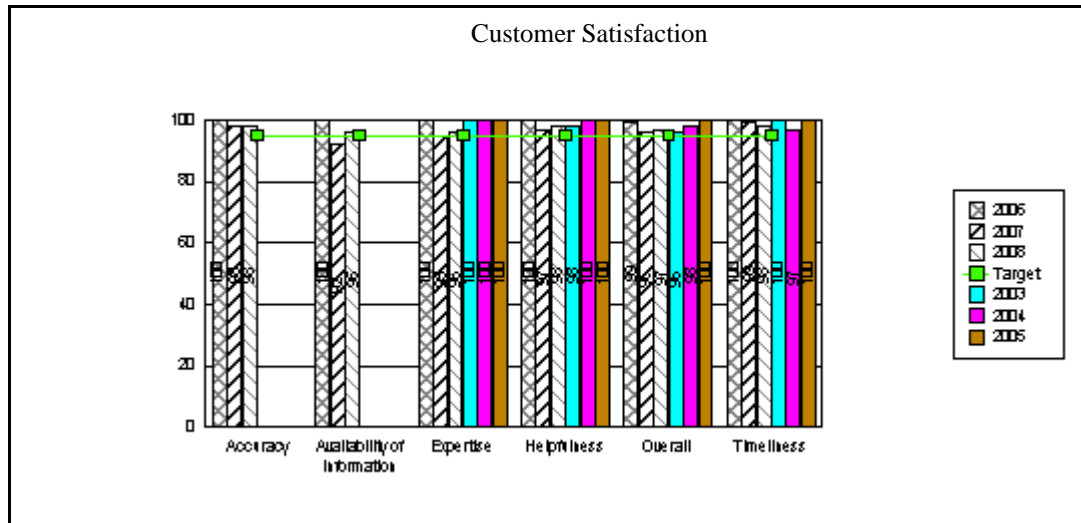
Customer service and citizen trust is essential to the Board's complaint process. Given this, the Board proposes to also measure response time to citizen complaints. Investigation time does not effectively capture the Board's response to complainants or referrals made, which is within our control and worth consideration.

**7. ABOUT THE DATA**

Reporting cycle: Oregon fiscal year

A relatively low number of qualifying complaints limit the data considered, and a single outlier may adversely impact the entire report year. Complaint and case data is collected and entered by board staff and maintained within a complaint/compliance log, thus the information is assumed reliable. Confidential complaint data is not made available for public inspection; however, non-protected data may be viewed upon request at the board office located in the Portland State Office Building.

<b>KPM #3</b>	CUSTOMER SATISFACTION - Percent of customers rating their satisfaction with the agency's customer service as "good" or "excellent": overall customer service, timeliness, accuracy, helpfulness, expertise and availability of information.	2006
<b>Goal</b>	SERVE and PROTECT: Protect nursing home residents from unethical and/or incompetent nursing home practices.	
<b>Oregon Context</b>	Agency Mission; EO 03-01 and EO 03-02	
<b>Data Source</b>	Random and targeted surveys completed by applicants, licensees, and other agency customers	
<b>Owner</b>	Janet Bartel, Executive Director Ph: 971-673-0196	



**1. OUR STRATEGY**

The Board endeavors to provide excellent customer service to citizens, licensees, and stakeholders. The Board’s primary mission is to protect the public. A positive interaction with customers is essential to the Board’s work in promoting citizen involvement and trust. The Board’s interaction with licensees and stakeholders is equally important in fostering compliance, collaboration, and positive working relationships. The Board measures its customer service rating through customer service surveys that are reviewed annually. Areas for improvement are identified and reasonable changes implemented.

## 2. ABOUT THE TARGETS

The targets establish a level of customer service rating the Board aspires to achieve. The ratings are used to determine whether the Board is meeting its targeted performance goal in the areas measured. Ancillary comments are also considered to identify specific areas for improvement. The Board achieved an overall satisfaction rating of 97 percent for report year 2008. This represents a one percent increase from report year 2007. The overall satisfaction target was established at 80 percent for initial report year 2002 and increased to 100 percent in report years 2003-05. The Board achieved the 100 percent target in only one of the first four reported years indicating this to be an improbable target. The targets were adjusted to the more attainable goal of 95 percent for report years 2007-09. The Board proposes to continue the 95 percent target into report years 2009-11. The higher target is desirable with this KPM.

## 3. HOW WE ARE DOING

Survey results demonstrate a consistently high overall rating in the area of customer satisfaction. The Board exceeded its customer satisfaction targets for report year 2008 in all areas measured, with a one percent decline in the area of Timeliness (98%), a one percent increase in the areas of Helpfulness (98%) and Expertise (96%), and a four percent increase in the area of Information Availability (96%). The trend for overall customer satisfaction remains consistently above 95 percent in report years 2003 through 2008.

## 4. HOW WE COMPARE

Historically, the program has received high customer service ratings with a 98 percent overall rating in report year 2008. In comparison, the American Customer Satisfaction Index reports customer satisfaction ratings at 72.9 percent for federal agencies during the third quarter of 2008 and 75.2 nationally in the first quarter of 2008. The Board recognizes that customer satisfaction is paramount to the success of any organization whether it is public or private. The various areas measured demonstrate the Board's commitment to providing an overall positive customer experience.

## 5. FACTORS AFFECTING RESULTS

The Board's customer base is relatively small in comparison to similar licensing boards, thus survey data is somewhat limited. The Board employs one part-time FTE who is responsible for all administrative and executive support and the overall operation of the program. At times, agency workload and program priorities directly compete with a customer's needs. In most cases, however, the level of service far exceeds customer expectations. The program's limited funds may restrict or prevent the implementation of some efficiency related improvements.

## 6. WHAT NEEDS TO BE DONE

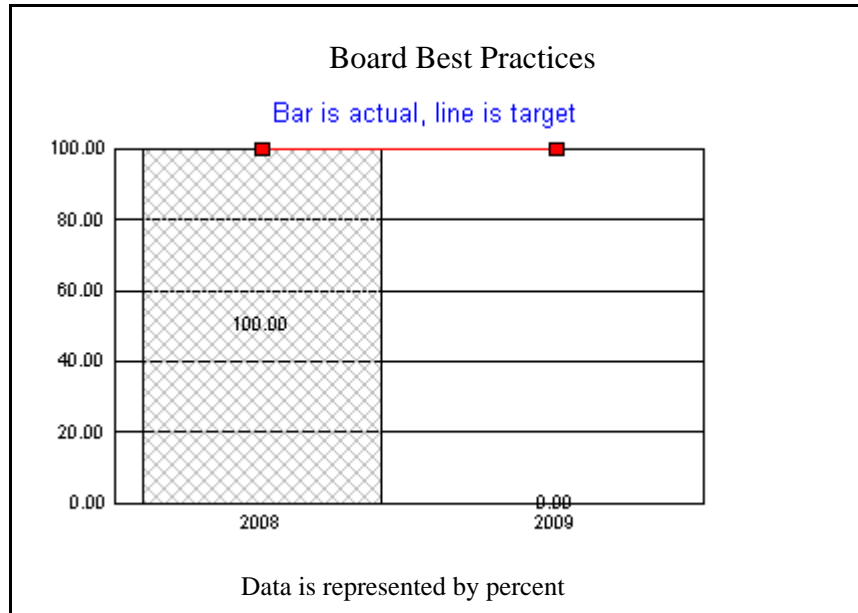
The Board will continue to review survey responses to identify areas for improvement with consideration to cost versus benefit. The Board will implement reasonable changes and explore alternatives for improvements that are beyond budgetary limitation. The Board will continue to consider the needs of customers and explore ways to increase efficiencies and the availability of information posted on its website. The Board will continue to solicit survey responses from outside customers and program licensees and stakeholders who are directly impacted by the program (e.g., professional associations, nursing home owners/operators, etc.).

**7. ABOUT THE DATA**

Reporting cycle: Oregon fiscal year

Program data is collected electronically via an online survey and by board staff. The Board's online survey feature offers convenience and anonymity to participants while increasing the efficiency and integrity of data collected. Every email transmittal by the board office includes a link to the online customer service survey providing equal and ample opportunity for customers to share their opinion on the level of service received. Online survey and hardcopy data are entered by board staff and maintained within a customer service database, thus the information is assumed reliable. Customer service data may be viewed upon request at the board office located in the Portland State Office Building.

<b>KPM #4</b>	BEST PRACTICES - Percent of total best practices met by the Board.	2008
<b>Goal</b>	SERVE and PROTECT: Protect nursing home residents from unethical and/or incompetent nursing home practices.	
<b>Oregon Context</b>	Agency Mission	
<b>Data Source</b>	Annual Board self-assessment	
<b>Owner</b>	Janet Bartel, Executive Director Ph: 971-673-0196	



**1. OUR STRATEGY**

The Board is committed to 100 percent compliance with the Best Practices performance measure. The Board’s primary mission is to protect the public. Maintaining public protection requires the agency institute best practices to promote effective governance and accountability for agency operations and to insure effective and efficient utilization of agency funds. The best practices areas considered include executive director selection,

expectations, and feedback; strategic management; strategic policy development; fiscal oversight; and board management.

## **2. ABOUT THE TARGETS**

This performance measure is based on a Board self-assessment survey and was established by the 2007 legislature without a set target, thus there is little history to report on. The Board completed a baseline self-assessment survey in October 2007 that demonstrated 98.52 percent compliance. The areas of weakness were identified and addressed. The following July 2008 survey demonstrated 100 percent compliance with the Best Practices areas measured. The higher target is desirable with this KPM.

## **3. HOW WE ARE DOING**

Survey results demonstrate compliance with Board Best Practices. A baseline compliance measurement was established in October 2007 with compliance to be measured annually in July. The initial areas of weakness were identified and addressed. The Board met its goal of 100 percent compliance in July 2008 with a 2.48 percent increase over the baseline survey conducted in October 2007.

## **4. HOW WE COMPARE**

An Internet search did not yield any similar measure with reported results for comparison purposes; however, it was noted the vast number of online resources specific to organizational best practices. Given this, there is considerable evidence that best practices play an increasingly important role in organizational decision making.

## **5. FACTORS AFFECTING RESULTS**

The Board meets quarterly with a full meeting schedule. Over the past year, significant meeting time has been dedicated to trainee interviews leaving little time for other Board business. The Board employs one part-time FTE who is responsible for all administrative and executive support and the overall operation of the program. Limited financial resources curtail strategic policy development and the Board's ability to effectively accomplish its mission and goals.

## **6. WHAT NEEDS TO BE DONE**

Continue to conduct annual self-assessments to evaluate compliance and identify areas for improvement. Continue increased board member participation in mission and goal review, strategic planning and policy development, and performance evaluation. Consider consolidation with a similar agency to offset board expenses and to provide opportunities for shared resources and increased efficiencies.

**7. ABOUT THE DATA**

Reporting cycle: Oregon fiscal year

Program data is collected and entered by board staff and maintained within a data file, thus the information is assumed reliable. Survey responses are available for review upon request at the board office located in the Portland State Office Building.

**BOARD OF NURSING HOME ADMINISTRATORS****III. USING PERFORMANCE DATA**

**Agency Mission:** To protect the public by developing, imposing and enforcing standards which shall be met by individuals in order to receive and retain a license as an Oregon nursing home administrator.

**Contact:** Janet Bartel

**Contact Phone:** 971-673-0196

**Alternate:** Anita Schacher, Board Chair

**Alternate Phone:** 503-325-0313

**The following questions indicate how performance measures and data are used for management and accountability purposes.**

**1. INCLUSIVITY**

\* **Staff :** The agency’s Executive Director and the nine members comprising the Board considered the agency’s mission and goals during the development of its performance measures. Emphasis was placed on public protection, agency efficiency, and customer satisfaction.

\* **Elected Officials:** Agency KPMs are reviewed and approved by the Oregon Legislative Assembly.

\* **Stakeholders:** The agency conducts an annual review of KPMs during its quarterly meeting which is open to the public. Stakeholders and Citizens are welcome to attend and invited to express their views and opinions as time allows. Additionally, the agency considers Stakeholders’ survey responses when developing agency performance measures.

\* **Citizens:** The agency places high priority on Citizens’ survey responses when developing agency performance measures.

**2 MANAGING FOR RESULTS**

## Performance Management

Agency KPMs demonstrate program accomplishments, identify areas for increased efficiencies, and confirm that results are being achieved and expectations met, both within and without. KPMs are utilized with other relevant factors to determine distribution of agency funds and resources, to identify areas for improvement, and to evaluate program effectiveness.

## Past Year Changes

The Board continues to focus on the administrator training program with significant changes during report year 2008. This focus extends to the preparation of incoming Preceptors--the trainers of new administrators--with an emphasis on imparting information related to program guidelines and Board expectations.

The Board continues to review trainee survey responses and comments. Additionally during their interviews, the Board invites trainees to provide feedback and suggestions for improvements to the training program. During the report year and in response to trainees' input, the Board changed its trainee interview process to a more subjective format and developed an AIT Tool Kit to assist trainees in program development, monitoring, and reporting.

The Board granted the two professional associations--Oregon Health Care Association and Oregon Alliance of Senior and Health Services--continuing education approval authority. This has reduced the amount of staff time dedicated to review and approval of the professional associations' continuing education activities.

The Board continues to take an active part as a presenter for the Oregon Health Care Association's Preceptor Training workshop, a six-hour course that covers program guidelines and requirements and affords a practical approach to the development and oversight of an administrator training program.

The Board successfully implemented a preliminary online renewal in April 2007 and continues to progress toward a credit card payment option.

Due to the impact of a declining license pool and given the Board's financial instability, it has considered short- and long-term options for increased solvency. During the report year, the Board explored the feasibility of expanding its license base and consolidation with a similar agency. Ultimately, the Board agreed the most practical alternative to be consolidation and supports a proposed transition to the Health Licensing Agency.

The Board continues to promote its online customer service survey ensuring customers' anonymity and increasing the efficiency and integrity of data collected. Every email transmittal includes a link to the online customer service survey providing equal and ample opportunity for customers to share their opinion on the level of service received. Board staff reviews survey comments as they are received with the full Board reviewing the results annually. Program changes are considered and implemented when feasible and within the Board's approved budget limitation.

The Board continues to improve the availability of information posted on its website. The Board has utilized the

	<p>trainee and customer service survey responses to identify specific information requests and has posted the information online whenever feasible.</p>
<p><b>3 STAFF TRAINING</b></p>	<p>Agency staff reviews the performance measurement information, recommendations, and guidelines developed by the Oregon Progress Board. Additional information is gathered through Internet research and performance measurement Webinar offerings.</p>
<p><b>4 COMMUNICATING RESULTS</b></p>	<ul style="list-style-type: none"> <li>* <b>Staff :</b> The agency’s budget authorizes employment of one part-time FTE, the Executive Director who is responsible for the dissemination of KPM surveys and the collection, compilation, and reporting of survey results. The Executive Director assists the Board with the development and review of agency KPMs.</li> <li>* <b>Elected Officials:</b> The agency prepares and submits annual KPM progress reports to Oregon Progress Board and includes the most recent progress report is included in its biennial budget request document.</li> <li>* <b>Stakeholders:</b> The agency announces within its website and newsletter the posting of KPM progress reports on its website. Individual KPM results may be discussed in various newsletter articles and in emailed notices to licensees.</li> <li>* <b>Citizens:</b> The agency posts a link to past and current KPM progress reports on the home page of its website.</li> </ul>