

# ANNUAL PERFORMANCE PROGRESS REPORT - EXECUTIVE SUMMARY

TIME PERIOD: FISCAL YEAR 2003 – 2004

The Board of Examiners of Nursing Home Administrator’s performance measures are linked to its 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. The individual measures are linked to the following goals:

1. Provide excellent customer service.
2. Protect nursing home residents from unethical and/or incompetent nursing home practices.
3. Regulate in a manner that supports a positive industry change.

Performance Target Achievement	PM No.
<b>Total Number of Key Performance Measures (KPMs)</b>	<b>Six</b>
During this report period, two of six measures achieved their targets. It should be noted that although the Board achieved its target with measure 833419-4, the measure’s target is technically flawed as it should be decreasing rather than increasing.	833419-4 833419-5
Three of the six measures did not achieve their targets. Measure 833419-6 did not apply during this report period, because it relates to the rule review process, which only occurs every three years.. Further, it should be noted that in comparison with public and private industry, the target for measure 833419-1 appears unrealistically high at 100%.	833419-1 833419-2 833419-3 833419-6: N/A

## Degree and Type of Agency Influence on Performance Measures

The Board has identified three primary goals addressing customer service, public protection and regulation and developed corresponding measures. The Board utilizes data collected from the measures to evaluate its success in the aforementioned areas and to develop laws, policies and procedures to improve existing services and increase public protection.

The Administrator-In-Training (AIT) program is an essential part of the professional development of nursing home administrators. Two related measures, however, fail to address the protection of nursing home residents by focusing on the preceptor/mentor, rather than the overall AIT program. The Board proposes modifying measure 833149-2 and replacing measure 833419-3 with a measure that focuses on AIT hours completed in excess of the required minimum of 960 hours. The resulting data can be utilized to compare the level of AIT program satisfaction/success with the number of training hours completed thereby providing a method to evaluate the program’s training requirements.

The Board proposes modifying measure 833419-4 for the 2005-07 report period. The existing measure focuses on Oregon-trained administrators receiving a substandard survey letter and does not provide consideration to out-of-state trained administrators. The Board proposes modifying the measure to include all nursing home administrators to provide a complete and comparative result. The

collected data can be utilized to compare the percentage of Oregon-trained administrators to out-of-state trained administrators receiving substandard letters.

The Board reviews and acts promptly on 100% of complaints received; however, the majority of complaints received fall outside of the Board's jurisdiction and are referred to the responsible agency rather than moving to investigation. Given this, the Board proposes to modify the language of measure 833419-5 to focus on its review and response time rather than the length of investigations.

The language of measure 833419-6 severely restricts the collection of data. The existing measure focuses on the rule review process, which only occurs every three years. The Board proposes to modify the language to include all rule changes implemented for the report period.

### **Successes and Barriers**

Since her arrival in November 2003, the Board's Executive Officer has revised a number of forms and updated the database in an effort to streamline the processing of licenses and increase efficiency. Additionally, she requested and was granted the authority to approve AIT registrations and provisional licenses thereby further reducing the processing time.

The Board is continually seeking opportunities to improve efficiency while reducing costs. The Board's Executive Officer has increased the amount of facsimile and email communications, resulting in reduced postage costs, more timely responses and less reliance on the traditional postal system. The Board has increased the size of its quarterly newsletter in order to provide more industry related information and to match employers with available administrators through employment and recruitment advertisements. Further, the Board has incorporated an individualized continuing education report that is distributed quarterly with the newsletter thereby reducing communication costs and keeping licensees informed of their recorded continuing education hours.

In support of its mission to protect the public, the Board implemented an administrative rule change incorporating a limited CNA training requirement into the AIT program (OAR 853-010-0060, Registration of Trainees and Supervising Administrators). The rule's purpose is to provide the necessary knowledge, skills and understanding for an administrator to fully appreciate the importance of staffing in order to sufficiently meet the needs of nursing home residents. Additionally, it provides an awareness of CNAs' training and their ability to perform assigned tasks.

### **Future Challenges**

The customer service performance measure provides measurable results through customer service surveys. While the Board has primarily focused on the general public, it will also begin to develop customer service surveys that specifically address the level of service provided to applicants and licensees.

The Board has and will continue to strive to provide excellent customer service to all its customers. Increasing customer satisfaction is not a simple task, however, it requires careful consideration of existing laws, policies, procedures and Board practices to identify and implement appropriate changes that will result in improved customer satisfaction. Further, there is the element of cost; some changes cannot be implemented without a cost, which has delayed implementation of several efficiency related improvements. Regardless, the Board will continue to work within its limitation to provide a high-level of customer service.

The Board realized a high percentage of satisfaction for AIT's evaluating the program, however, the surveys are voluntary resulting in few responses. Given this, the board proposes to make exit surveys a required component of the AIT program. This will provide the data needed for adequate review of the AIT program.

The Board's performance measures provide measurable results that are utilized to evaluate its responsiveness and effectiveness, improve processes and procedures and to promote regulation that supports positive industry change. Unfortunately, however, the existing measures do not adequately assess the Board's performance in achieving its goals for reasons cited within this report. The Board has and will continue to work toward developing performance measures that will more accurately demonstrate the progress toward its mission and goals.

# ANNUAL PERFORMANCE PROGRESS REPORT - PART I, MANAGING FOR RESULTS

TIME PERIOD: FISCAL YEAR 2003 – 2004

Agency: Board of Examiners of Nursing Home Administrators	Date Submitted: 9/30/04	Version No.1
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Board of Examiners of Nursing Home Administrators	Agency No.: 833419
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**The following questions shed light on how well performance measures and performance data are leveraged within your agency for process improvement and results-based management.**

1 How were staff and stakeholders involved in the development of the agency's performance measures?	The agency's former Executive Officer (EO) 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.
• How are performance measures used for management of the agency?	Agency's performance measures are used to measure the following: <ul style="list-style-type: none"> <li>• Customer satisfaction in the areas of knowledge, assistance, courtesy and response</li> <li>• The effectiveness of the Administrator-in-Training (AIT) program, which incorporates hands-on training and mentoring to effectively prepare individuals entering the profession, and the percentage of AIT's expressing satisfaction with their training program</li> <li>• The number of stakeholders (licensees &amp; associations) providing input and recommendations during the agency's rule revision process occurring every three years</li> <li>• The average amount of time taken to complete an investigation on a complaint</li> </ul>
• What training has staff had in the use of performance measurement?	The EO has some experience and knowledge in the use of performance measurement. Since her arrival in November 2003, she has actively participated in a number of performance measure training opportunities in order to increase her knowledge and understanding of performance measurement. As a result, she has proposed modifications to five of the six existing performance measures.

**The following questions shed light on how well performance measures and performance data are leveraged within your agency for process improvement and results-based management.**

<ul style="list-style-type: none"> <li>• How does the agency communicate performance results and for what purpose?</li> </ul>	<p>At this point, the agency has not reported performance results publicly, other than on its Website located at <a href="http://www.nhabd.state.or.us">www.nhabd.state.or.us</a>. Future performance measure results will be reported on the agency's Website and in its quarterly newsletter.</p>
<ul style="list-style-type: none"> <li>• What important performance management changes have occurred in the past year?</li> </ul>	<p>A) The agency revised <b>OAR 853-010-0060(6) – Registration of Trainees and Supervising Administrators</b> to incorporate a limited Certified Nursing Assistant (CNA) training requirement into the existing Administrator-In-Training (AIT) program. The CNA training requirement is an integral component to the AIT's training in that it provides the necessary knowledge, skills and understanding for an administrator to fully appreciate the importance of staffing and to adequately meet the needs of residents. In addition, it provides an awareness of CNAs' training and their ability to perform assigned tasks.</p> <p>B) The agency hired a new Executive Officer in November 2003 who has worked to update existing performance measure surveys, processes and data collection and reporting methods.</p> <p>C) The agency is working to incorporate a mandatory exit survey requirement into the AIT program. The resulting data will allow the agency to more effectively evaluate the training program.</p>

## ANNUAL PERFORMANCE REPORT- PART II, KEY MEASURE ANALYSIS

TIME PERIOD: FISCAL YEAR 2003 – 2004

Agency Name: Board of Examiners of Nursing Home Administrators		Agency No.: 833419								
Key Performance Measure (KPM)		1999	2000	2001	2002	2003	2004	2005	2006	2007
KPM 1: Provide Excellent Customer Service	Target	N/A	N/A	N/A	80%	100%	100%	100%	95%	95%
	Data	N/A	N/A	N/A	N/A	96%	98%			

Data Source: Customer Service Surveys

### Key Performance Measure Analysis

#### To what goal(s) is this performance measure linked?

This measure is linked to the agency's mission and goal to provide excellent customer service.

#### What do benchmark (or other high-level outcome) data say about Oregon relative to the goal(s)? What is the impact of your agency?

Benchmarks and other high-level outcomes provide a method to measure the agency's success in completing its goals. Further, it identifies areas for improvement thereby allowing the agency to make appropriate program adjustments. The agency's impact on this particular performance measure is considerable to those citizens who are residents of nursing homes and their families. While the agency's jurisdiction is limited to the practice of nursing home administration, it provides considerable information and referrals to inquiring citizens.

#### How does the performance measure demonstrate agency progress toward the goal?

This performance measure indicates a relatively high level of customer satisfaction for the past two report periods; however, the agency did not realize its target of 100% customer satisfaction, which seems to indicate that the target is set too high. Given this, the agency is proposing that the target be lowered to a more realistic goal of 95% for the 2005-07 report period.

#### Compare actual performance to target and explain any variance.

The agency achieved a 98% customer satisfaction rating compared to its 100% target. A single customer service survey lowered the rating by 2%. The customer indicated dissatisfaction with the response time to provide a video, which was not available because it was previously loaned to someone else.

#### Summarize how actual performance compares to any relevant public or private industry standards.

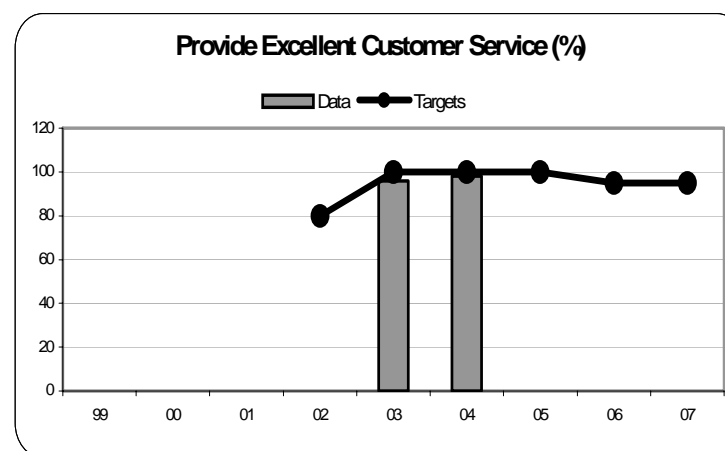
Without the benefit of an actual comparison, it is estimated that the agency's customer service ratings are quite high in comparison to public and private industry standards. Technically, there should be no difference between public or private standards when it comes to customer service. While the agency does not conduct its business in the same manner and with the same outcomes as private industry, it recognizes the benefits of superior customer service in improving customer relations.

#### What is an example of a department activity related to the measure?

Essentially, all services provided relate to this measure. For example, the agency routinely receives calls that are intended for the Board of Nursing. The appropriate contact information is provided to callers who are then transferred to the receiving agency. This example demonstrates a benefit to both the caller and Board of Nursing.

#### What needs to be done as a result of this analysis?

The agency will continue to expedite information requests and will communicate the availability of information requested and the anticipated response time.



Agency Name: Board of Examiners of Nursing Home Administrators		Agency No.: 833419								
Key Performance Measure (KPM)		1999	2000	2001	2002	2003	2004	2005	2006	2007
KPM 2: Percentage of preceptors (trainers of Administrators-In-Training (AIT), receiving satisfactory ratings from their AIT	Target	N/A	N/A	N/A	90%	90%	90%	90%	85%	85%
	Data	N/A	N/A	N/A	N/A	83%	86%			

Data Source: Administrator-in-Training Surveys

### Key Performance Measure Analysis

#### To what goal(s) is this performance measure linked?

This measure is linked to the agency's mission and goal to protect nursing home residents from unethical and/or incompetent nursing home practices.

#### What do benchmark (or other high-level outcome) data say about Oregon relative to the goal(s)? What is the impact of your agency?

Benchmarks and other high-level outcomes provide a method to measure the agency's success in completing its goals. Further, it identifies areas for improvement thereby allowing the agency to make appropriate program adjustments. The AIT program is essential to the professional development of the nursing home administrator. The program consists of 960 training hours completed under the direction of a certified preceptor. The agency's impact on this particular performance measure is to set preceptor-training standards and identify preceptors that may benefit from additional training.

#### How does the performance measure demonstrate agency progress toward the goal?

The agency realized a high percentage of satisfaction for AIT's evaluating their program, however, the surveys are voluntary resulting in few responses, which can easily skew the results.

#### Compare actual performance to target and explain any variance.

This measure achieved an 86% rating compared to its 90% target. A single AIT survey lowered the rating by 14% resulting in a 4% target deficit. The AIT indicated dissatisfaction with the preceptor relocating to another facility, which resulted in the need to locate a new preceptor and delayed completion of the AIT program.

#### Summarize how actual performance compares to any relevant public or private industry standards.

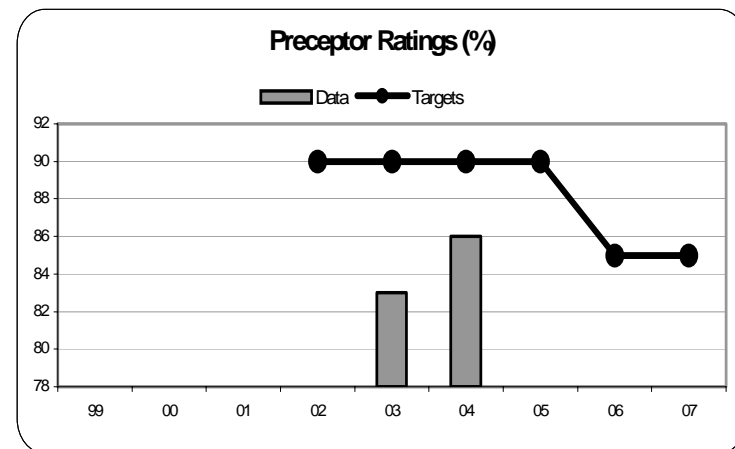
This measure is specific to the AIT program and it is unlikely that a comparable program exists in private industry. While the agency is not aware of any comparable measure in public or private industry, it is possible that other states with AIT programs may have similar measures.

#### What is an example of a department activity related to the measure?

The agency provides preceptor-training materials and participates in administering the preceptor-training workshops.

#### What needs to be done as a result of this analysis?

Given the limited survey responses, the agency will work toward making the exit survey mandatory for the AIT program. Increased surveys will provide more information to better evaluate preceptors' performance.



Agency Name: Board of Examiners of Nursing Home Administrators		Agency No.: 833419								
Key Performance Measure (KPM)		1999	2000	2001	2002	2003	2004	2005	2006	2007
KPM 3: Percentage of preceptors with unsatisfactory survey ratings by AIT's that are retrained	Target	N/A	N/A	N/A	N/A	0%	25%	25%		
	Data	N/A	N/A	N/A	N/A	0	0			

Data Source: AIT Surveys

### Key Performance Measure Analysis

#### To what goal(s) is this performance measure linked?

This measure is linked to the agency's mission and goal to protect nursing home residents from unethical and/or incompetent nursing home practices.

#### What do benchmark (or other high-level outcome) data say about Oregon relative to the goal(s)? What is the impact of your agency?

Benchmarks and other high-level outcomes provide a method to measure the agency's success in completing its goals. Further, it identifies areas for improvement thereby allowing the agency to make appropriate program adjustments. The AIT program is essential to the professional development of the nursing home administrator. The program consists of 960 training hours completed under the direction of a certified preceptor, with an emphasis on ethical and competent practices. The agency's impact on this particular performance measure is to require preceptors receiving an unsatisfactory rating to complete additional training.

#### How does the performance measure demonstrate agency progress toward the goal?

Clearly, it appears that the agency has not progressed toward its goal with this measure; however, the measure is essentially flawed in its logic. Preceptors volunteer their time and effort to the AIT program—a responsibility that few licensees assume. After careful consideration, the agency believes that the measure should focus on the overall AIT program rather than just the preceptor component. Given this, the agency is proposing to replace this measure with one that will more appropriately evaluate the program's progress.

#### Compare actual performance to target and explain any variance.

The agency did not elect to retrain the preceptor who received the unsatisfactory rating, because his relocation to another geographic area was beyond his control. The punitive nature of this measure is counterproductive and exercising it will likely decrease the number of preceptors thereby limiting AIT training opportunities.

#### Summarize how actual performance compares to any relevant public or private industry standards.

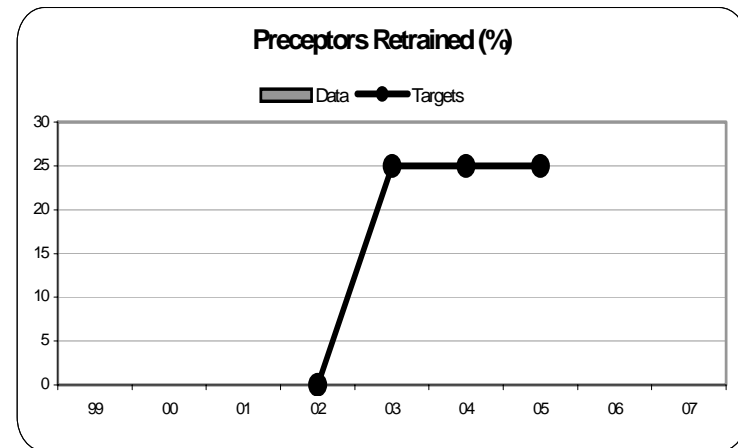
This measure is specific to the AIT program and it is unlikely that a comparable program exists in private industry. While the agency is not aware of any comparable measure in public or private industry, it is possible that other states with AIT programs may have similar measures.

#### What is an example of a department activity related to the measure?

The agency facilitates the AIT program and establishes preceptor training and certification requirements.

#### What needs to be done as a result of this analysis?

The agency is requesting removal of this measure and will replace it with a more appropriate measure.



Agency Name: Board of Examiners of Nursing Home Administrators		Agency No.: 833419								
Key Performance Measure (KPM)		1999	2000	2001	2002	2003	2004	2005	2006	2007
KPM 4: Percentage of surveyed nursing homes with Oregon-trained administrators on the job for at least two years that received substandard letters from DHS/Services to People and Disabilities	Target	N/A	N/A	N/A	N/A	3%	4%	5%	4%	3%
	Data	N/A	2%	2%	2%	1.42%	.78%			

Data Source: Department of Human Services Nursing Home Survey Records

### Key Performance Measure Analysis

#### To what goal(s) is this performance measure linked?

This measure is linked to the agency's mission and goal to protect nursing home residents from unethical and/or incompetent nursing home practices.

#### What do benchmark (or other high-level outcome) data say about Oregon relative to the goal(s)? What is the impact of your agency?

Benchmarks and other high-level outcomes provide a method to measure the agency's success in completing its goals. Further, it identifies areas for improvement thereby allowing the agency to make appropriate program adjustments. The agency establishes the education, training and professional standards for nursing home administrators.

#### How does the performance measure demonstrate agency progress toward the goal?

The agency has exceeded its target for this measure in the last two report periods. It should be noted, however, the targets are flawed in that ideally the percentage of substandard letters should decrease rather than increase.

#### Compare actual performance to target and explain any variance.

The agency exceeded its target by more than 3% for this report period. Given the few substandard letters issued, the focus on Oregon-trained administrators severely restricts any truly relevant data. It is illogical to target Oregon-trained administrators without giving due consideration to administrators trained in other states. This measure would best serve the agency's goal if it considered all administrators and utilized the data for comparison purposes.

#### Summarize how actual performance compares to any relevant public or private industry standards.

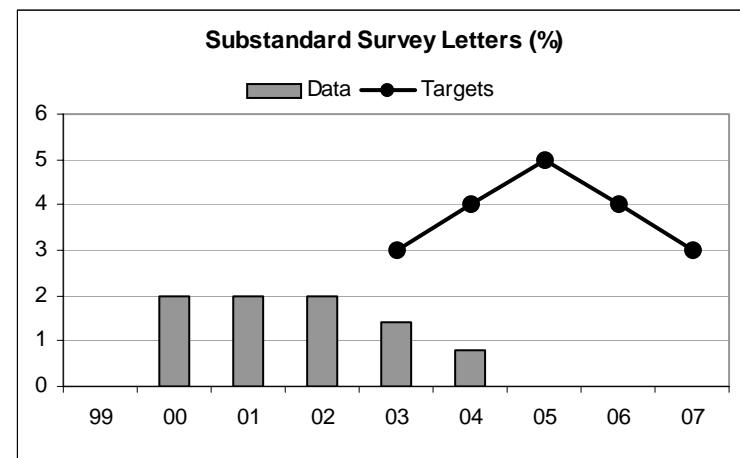
The result of this measure appears to indicate a high level of administrator competency and facility compliance. However, it may not prove practical to compare this measure to other states because of the differing guidelines that warrant substandard letters. Additionally, the majority of Oregon's substandard letters relate to direct patient care, which is not typically provided by the administrator. Probably the best use of this measure is to compare and evaluate whether the training and education requirements for administrators are sufficient to provide them the skills to hire and verify the credentials for competent and caring staff.

#### What is an example of a department activity related to the measure?

The board evaluates and establishes the training requirements for nursing home administrators.

#### What needs to be done as a result of this analysis?

The agency is proposing a modification to this measure to include all administrators and to revise the targets appropriately.



Agency Name: Board of Examiners of Nursing Home Administrators		Agency No.: 833419								
Key Performance Measure (KPM)		1999	2000	2001	2002	2003	2004	2005	2006	2007
KPM 5: Average time to complete an investigation from the receipt of a complaint.	Target	N/A	120 days	120 days	120 days	120 days	120 days	120 days	90 days	90 days
	Data	60-150 days	14 mo.	90 days	N/A	159 days	43 days			

Data Source: Investigation log and agency records.

### Key Performance Measure Analysis

#### To what goal(s) is this performance measure linked?

This measure is linked to the agency's mission and goal to protect nursing home residents from unethical and/or incompetent nursing home practices.

#### What do benchmark (or other high-level outcome) data say about Oregon relative to the goal(s)? What is the impact of your agency?

Benchmarks and other high-level outcomes provide a method to measure the agency's success in completing its goals. Further, it identifies areas for improvement thereby allowing the agency to make the appropriate program adjustments. The agency exercises limited control in investigations. The length of an investigation is typically indeterminate. Further, most complaints fall outside the Board's jurisdiction and result in referrals to the appropriate agency. Given this, the agency proposes to base its performance on response rather than results in the 2005-07 report period,

#### How does the performance measure demonstrate agency progress toward the goal?

The agency has exceeded its target for this report period by 77 days. Regardless, the proposed modified performance measure will continue to demonstrate the agency's response time to be well above its target, demonstrating the agency's efficiency in both service and response.

#### Summarize how actual performance compares to any relevant public or private industry standards.

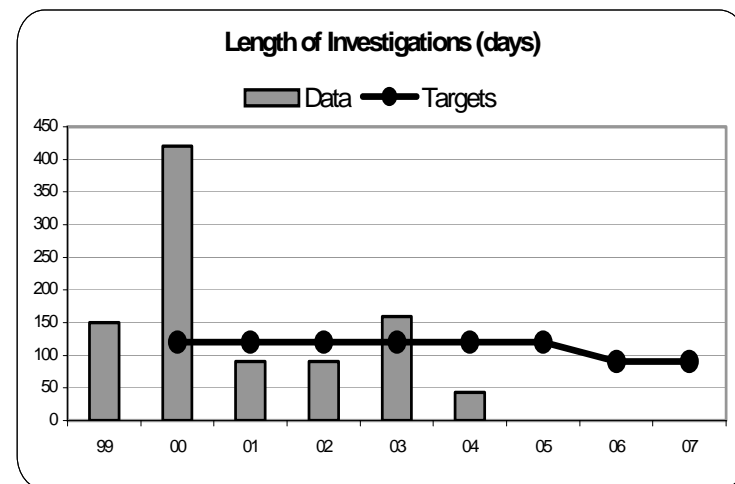
No public or private comparison has been performed. The agency responds to complaints in the most expedient manner allowable; however, the agency meets quarterly, which often delays the review and processing of complaints. Regardless, the agency continually strives to expedite its response and processing of citizens' complaints.

#### What is an example of a department activity related to the measure?

The agency reviews and responds to 100% of complaints received.

#### What needs to be done as a result of this analysis?

The agency is proposing modifying the language of the measure to more accurately reflect the practices of the agency.



Agency Name: Board of Examiners of Nursing Home Administrators		Agency No.: 833419								
Key Performance Measure (KPM)		1999	2000	2001	2002	2003	2004	2005	2006	2007
KPM 6: Number of stakeholders providing input to rule changes every three years: a. Licensees b. Associations.	Target	0	0	0	0	0	0	5	5	5
	Data	0	N/A	N/A	N/A	0	N/A	N/A		

Data Source: Agency minutes, correspondence and rule amendment files.

### Key Performance Measure Analysis

#### To what goal(s) is this performance measure linked?

This measure is linked to the agency's mission and goal to regulate in a manner that supports a positive industry change.

#### What do benchmark (or other high-level outcome) data say about Oregon relative to the goal(s)? What is the impact of your agency?

Benchmarks and other high-level outcomes provide a method to measure the agency's success in completing its goals. Further, it identifies areas for improvement thereby allowing the agency to make appropriate program adjustments. While this measure did not apply during this report period, it addresses the process of rulemaking and its impact on stakeholders. The rulemaking process provides stakeholders the opportunity to express support or concern for proposed rules. The agency's impact is that it establishes the laws and rules governing the practice of licensed nursing home administrators.

#### How does the performance measure demonstrate agency progress toward the goal?

This measure focuses on the rule review process and therefore does not apply to this report period. Given this, the agency proposes modifying this measure to apply to all rule changes rather than limiting it to the rule review process, which only occurs every three years. Regardless, failure to achieve the target does not necessarily demonstrate failure but rather may indicate the agency's success in promulgating rules that are supported by stakeholders.

#### Compare actual performance to target and explain any variance.

There is no comparison required for this report period.

#### Summarize how actual performance compares to any relevant public or private industry standards.

Not applicable for this report period.

#### What is an example of a department activity related to the measure?

The board promulgates laws and rules relating to the licensure of nursing home administrators.

#### What needs to be done as a result of this analysis?

The agency is proposing a modification to this measure for the 2005-07 report period to include all administrative rule changes. Additionally, future rule change notices may be revised to include a request that stakeholders respond either in support or opposition of proposed rule changes. In this event, the measure may need to be adjusted for future report periods to reflect and compare support or opposition to proposed rule changes.

