

## *ANNUAL PERFORMANCE PROGRESS REPORT - EXECUTIVE SUMMARY*

### *STATE BOARD OF CLINICAL SOCIAL WORKERS*

*TIME PERIOD: FISCAL YEAR 2007 – 2008*

<b>Performance Measure Target Achievement</b>	
<b>Total Number of Key Performance Measures</b>	<b>5</b>
<b>Number of Performance Measures at target for this reporting period</b>	<b>2</b>
<b>Number of Performance Measures not at target for this reporting period</b>	<b>2</b>

#### *Degree and type of Agency influence on Benchmarks and High-level Outcomes.*

The Oregon State Board of Clinical Social Workers was created by the Legislature as a public protection agency. The primary mission of the Board is to protect the citizens of Oregon by setting a strong standard of practice and ethics through the regulation of clinical social workers. The Board seeks to provide excellent customer service while effectively accomplishing its mission. The pursuit of its mission of public protection and quality customer service does not contribute to any specific Oregon Benchmark. Nevertheless, the Board currently tracks its performance through four Performance Measures. A fifth performance measure was added during the 2007-09 legislative budget consideration and is currently in the implementation stage.

#### *Summarize the year's successes and barriers to achieving Performance Measure Targets.*

In Fiscal Year 2008, this agency exceeded the target for one performance measure, met the target for another, and did not meet the target for two performance measures.

With respect to Performance Measure #1 that tracks the percent of complaints upon which the Board makes a decision within six months of when the complaint is received in the Board office, the agency again did not meet target. The Board has not been able to meet this target since FY 2002. Even more worrisome is that this measure is experiencing a steady downward trend since FY 2005, and preliminary data for FY 2009 leads us to project a dramatic further drop in actual performance. In Fiscal Year 2008, our target was 85% of complaints resolved within 6 months, and actual achievement was 73.5%. For the first half of FY 2009, the data is below the 50% mark. Basically, the data shows that in the context of a dramatic increase in complexity and quantity of complaints, the volunteer Board's ability to timely handle cases without a dedicated staff position has reached its physical limits, notwithstanding the tremendous efforts and extraordinary commitment of board members. The Board wants to process complaints thoroughly and fairly, as well as

expeditiously. The Board received 51 consumer protection complaints in 03-05 biennium; and 57 such complaints in the 05-07 biennium. As of January 31, 2009, the Board has received 70 consumer protection complaints in the 2007-09 biennium. The Board has responded by working with stakeholders and the Legislature to increase fees to fund the first compliance position for this agency to move investigation of complaints to the staff level.

For the past five years the Board has been able to settle all public disciplinary actions through final stipulated agreements, a type of voluntary agreement that permits the resolution of a consumer protection case without a contested case hearing. While resolving a complaint through stipulation is significantly quicker than the contested case process, typically more than 6 months time expires from the date that a complaint is received in the office to the date that public action is taken. Usually the negotiations involved in reaching a settlement also contribute to a delay in formal resolution – and thus impact this performance measure. In a given fiscal year settling anywhere from 2-5 cases is typical. In calendar year 2008 alone though, the Board issued a record 9 Final Orders – another key data indicator that the Board is serious about public protection and is doing its job while faced with serious cases, notwithstanding the drop in the timeliness indicator.

This directly translates into why, in Performance Measure #3 the Board exceeded its target of .1% of licenses against which the Board takes public action. The dramatic increase in severity and complexity of complaints means that the Board must take action accordingly. Notwithstanding the serious struggle with having a volunteer Board with no investigator on staff deal with a dramatic rise in complaints, the Board finalized and took disciplinary action against 6 licenses in fiscal year 2008. Set against our average size of the active licensee base for that fiscal year, 3024 active licensees, the Board's rate of disciplinary action calculates to .2% of the licensee base. Viewing Performance Measures # 1 and #3 together, they paint a picture of a Board focused on ensuring that the serious offenders are being dealt with even while the Board faces a significant performance problem with respect to overall timeliness in resolving complaints.

However, it does not seem appropriate from several vantage points to have a specific target for a level of disciplinary actions as a performance measure. The most important one of those simply is that discipline should be issued only when a particular standard of evidence is met that a licensee has violated Board rules or statute. That can and must be the only consideration from a due process stand point, and that is also what Board practice reflects. Although the Board has not had time to make a formal request for elimination for this measure as a performance measure, it would seem a more prudent approach that the level of disciplinary actions be monitored and reported to the Board, DAS, LFO, and other stakeholders, but without the context of a specific target level and thus outside the key performance measure context.

For performance measure #2, covering Continuing Education (CE) audits, the Board met its 99% performance target. 10% of renewals subject to CE reporting requirements are audited on a random basis every month. During Fiscal Year 2008, 99% of those audited had in fact taken the required number of accredited coursework to maintain licensure. Those under licensure by this Board obviously take their responsibility for continuing education very seriously. The Board is committed to maintaining this strong tradition of continuing education

excellence as one important component of providing the citizens of Oregon with properly educated therapists. This commitment is further reflected by the revisions made in 2008 to the rules governing Continuing Education, by which each Licensed Clinical Social Worker (“Licensee” or “LCSW”) will be required to show completion of six hours of ethics training every two-year reporting cycle, starting January 2009. It is possible that the introduction of this new measure may impact the ability of the Board to meet its very high 99% target in the current fiscal year.

For our customer service performance measure, Performance Measure # 4, the agency did not meet target, although this was a very close miss. Our target goal of a 98% customer satisfaction response of “above average” or “excellent” was missed by .6 tenth of a percent, with 97.4% reporting overall satisfaction with agency services. The Board is committed to having staff that provides effective and efficient service to the public and the licensee base who contact the agency for any reason. Given this agency’s turn-over in the Executive Director position at the beginning of the current fiscal year, resulting in an outside manager coming in as interim Director, and a second transition starting late September to a new permanent Director, in such a small agency this is likely to have some impact on performance in this measure for FY 09.

The Board is working to implement the new “best practices” performance measure added during the 05-07 biennium, our fifth performance measure. The contents of this measure have been reviewed with the Board, and on the substantive issues involved the agency is in compliance already with most of the practices tracked by that measure. Due to the change-over in the agency Director position, the Board is however behind in formal implementation and reporting of that performance measure. The goal for this measure will be 100% compliance with best practices.

### ***Looking Ahead***

The Board is considering eliminating Performance Measure #3, and is working to implement the new “best practices” performance measure added during the 05-07 biennium. Overall the Board of Clinical Social Workers has made good progress in developing Performance Measures to help gauge if the Board is effectively meeting its mission of protecting the public while providing excellent customer service. The Board will continue to analyze the data from these Measures as one way of assessing its ability to achieve its mission and program objectives in the coming years.

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

*TIME PERIOD: FISCAL YEAR 2007 – 2008*

Agency: State Board of Clinical Social Workers	Date Submitted: February 4, 2009	Version No.: 1
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Agency Name: State Board of Clinical Social Workers		Agency No.: 12400
<b>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.</b>		
1	How were staff and stakeholders involved in the development of the agency's performance measures?	The two primary groups of stakeholders, the public and the licensees under the Board's jurisdiction, are effectively represented through the three public members and the four licensees appointed by the Governor to serve on the Board. Input in the modification of the performance measures is solicited from licensees through newsletter articles and through the Board's contact with the National Association of Social Workers/Oregon Chapter, the professional organization that represents many social workers across the state. The staff is involved at every stage of the performance measure process: development, implementation, modification, tracking, and reporting data.
2	How are performance measures used for management of the agency?	The Performance Measures are used to gauge progress toward targeted goals. Having the Performance Measures in place helps the Board stay focused on its primary mission of public protection and the resolving of consumer complaints in a timely, fair, and thorough manner even while providing excellent customer service to those who contact the Board.
3	What training has staff had in the use performance measurement?	The Agency Administrator participated in the Oregon Progress Board training to ensure that Measures were developed and tracked according to the state-wide protocols. After the Agency's Measures were approved by the Legislature, the staff was trained on compiling and reporting the appropriate data.
4	How does the agency communicate performance results and for what purpose?	The Agency staff periodically share the latest performance data with the Board. This information is also distributed to licensees through Board publications. Performance Measure data is posted on the Agency website, URL <a href="http://www.oregon.gov/bcsw">http://www.oregon.gov/bcsw</a> . This shared information allows the public to determine if the Board is accomplishing its mission of public protection while the Board's staff seeks to provide excellent customer service.
5	What important performance management changes have occurred in the past year?	The Board has begun implementation of the new Performance Measure 5, Best Practices. Full implementation of this new performance measure is scheduled for the April 2009 Board Planning Meeting.

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

*TIME PERIOD: FISCAL YEAR 2007 – 2008*

Agency Name: State Board of Clinical Social Workers		Agency No.: 12400									
Key Performance Measure (KPM)		2000	2001	2002	2003	2004	2005	2006	2007	2008	2009
# 01 - Percent of complaints upon which the Board makes a decision within six months of when the complaint is received in the Board office.	Target			80%	82%	84%	85%	85%	85%	85%	85%
	Data	91.3%	81.5%	77.1%	77.1%	75%	79.3%	76.9%	74.2%	73.5%	

*Data Source:* Agency Consumer Protection Complaint Log

**Note: It is impossible to have a true “outcome” measure of an agency’s performance in the area of consumer protection. It is appropriate to have an “output” measure which is what the agency has done with this performance measure.**

**Key Performance Measure Analysis**

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

The goal of public protection by measuring the timeliness of complaint resolution.

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

N/A

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

The measure reveals the rate at which the agency is processing and resolving complaints in a timely manner.

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

The Board’s primary mission of public protection requires a thorough and fair process of investigating and resolving complaints. They seek to process complaints as expeditiously as possible but also must be thorough to exercise thoroughness over speed. As the complexity and seriousness of the complaints has increased, and the number of complaints has shot up sharply, the Board has not

been able to meet the goal for this Measure. In fact, the Board has not been able to meet this target since FY 2002. Even more worrisome is that this measure is experiencing a steady downward trend since FY 2005, and preliminary data for FY 2009 leads us to project a dramatic further drop in actual performance. In Fiscal Year 2008, our target was 85% of complaints resolved within 6 months, and actual achievement was 73.5%. For the first half of FY 2009, the data is below the 50% mark.

Basically, the data shows that in the context of a dramatic increase in complexity and quantity of complaints, the volunteer Board's ability to timely handle cases without a dedicated staff position has reached its physical limits, notwithstanding the tremendous efforts and extraordinary commitment of board members. The Board wants to process complaints thoroughly and fairly, as well as expeditiously. The Board received 51 consumer protection complaints in 03-05 biennium; and 57 such complaints in the 05-07 biennium. As of January 31, 2009, the Board has received 70 consumer protection complaints in the 2007-09 biennium. The Board has responded by working with stakeholders and the Legislature to increase fees to fund the first compliance position for this agency to move investigation of complaints to the staff level.

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

There is no comparable data from other jurisdictional Boards that license Clinical Social Workers.

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

The Board has sought and obtained from the June 2008 Emergency Board approval to raise fees and employ a limited duration position for a Compliance Specialist whose primary responsibility it will be to initiate, monitor, investigate and facilitate a fair and expeditious resolution of consumer protection complaints. The new Executive Director, hired in late September, acted immediately to hire a Compliance Specialist, who began work in late October 2008. The Compliance Specialist is now in training and taking over day-to-day investigative and compliance related functions, under the supervision of the Board's Executive Director and the guidance of the Board's Consumer Protection Committee.

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

The Board has implemented its response by proceeding with the Compliance Specialist position, and seeks continued authority from the Legislature to continue the fee raises and maintain the new compliance position. This initiative is critical to enable the Board to meet its primary mission of consumer protection. The Board will also need to continue to monitor the data on this performance measure very carefully.

Agency Name: State Board of Clinical Social Workers		Agency No.: 12400									
Key Performance Measure (KPM)		2000	2001	2002	2003	2004	2005	2006	2007	2008	2009
# 02 - Percent of license renewal CE audits that meet the requirement for accredited coursework.	Target	90%	90.5%	90.7%	91.1%	91.5%	92%	99%	99%	99%	99%
	Data	100%	100%	100%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%	

Data Source: Agency random audit of 10% of Continuing Education Reports in annual renewal process.

**Note: It is impossible to have a true “outcome” measure of an agency’s performance in the area of competency. It is appropriate to have an “output” measure which is what the agency has done with this performance measure.**

**Key Performance Measure Analysis**

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

The goal of public protection by requiring licensees to take coursework that keeps them aware of the most current information in their therapeutic specialties.

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

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

The measure reveals the extent of licensee compliance with the Board’s policy of taking 40 hours of appropriately credentialed Continuing Education Units (CEUs) each 2-year CEU cycle.

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

The targets for the percent of licensees who meet the Board’s requirement for continuing education were exceeded in each year since the Board started tracking this information. While the Board has established a high rate of compliance for this measure, and has met it for several of the preceding years, the Board continues to report on this Measure as a constant reminder to licensees and the public that continuing education is very important in maintaining professional ability in order to provide effective and safe therapeutic support to Oregonians.

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

There is no comparable data from other jurisdictional Boards that license Clinical Social Workers.

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

The Board continues to audit 10% of the continuing education reports sent in with renewals each month to ensure that licensees are taking at least 20 hours of credentialed coursework each year. The agency frequently highlights some aspect of the continuing education requirements in its newsletter. The Board is committed to maintaining this strong tradition of continuing education excellence as one important component of providing the citizens of Oregon with properly educated therapists. This commitment is further reflected by the revisions made in 2008 to the rules governing Continuing Education, by which each Licensed Clinical Social Worker (“Licensee” or “LCSW”) will be required to show completion of six hours of ethics training every two-year reporting cycle, starting January 2009. It is possible that the introduction of this new measure may impact the ability of the Board to meet its very high 99% target in the current fiscal year.

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

The agency’s current processes are working well.

Agency Name: State Board of Clinical Social Workers		Agency No.: 12400									
Key Performance Measure (KPM)		2000	2001	2002	2003	2004	2005	2006	2006	2008	2009
# 03 - Percent of licensee base against whom the Board takes public action.	Target					.1%	.1%	.1%	.1%	.1%	.1%
	Data	.04%	.2%	.1%	.03%	.1%	.16%	.16%	.12%	.2%	

Data Source: Public Disciplinary Orders issued by the Board

**Note: It is impossible to have a true “outcome” measure of an agency’s performance in the area of consumer protection. It is appropriate to have an “output” measure which is what the agency has done with this performance measure.**

**Key Performance Measure Analysis**

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

The goal is a measure of public protection tracked by monitoring the percentage of the overall licensure base against which the Board takes public action in a given fiscal year. The Board has set a goal of taking public action against .1% of its licensee base in any given fiscal year. Given the size of the board’s active licensee base (about 3000 ending June 30, 2008), this would translate into a minimum of 3 disciplinary actions per fiscal year. However, ultimately the board has to meet an appropriate evidentiary standard for any disciplinary action it chooses to pursue, and as such the data here reflects simply the number of cases concluded in a fiscal year where that standard was met. In the context of a rise in quantity and complexity of cases, it was expected the Board would likely see a rise in disciplinary actions taken. In fiscal year 2008, the Board concluded six cases which resulted in disciplinary action. This is a reflection of the increase in number and severity of the complaints. For calendar year 2008, the comparable number stands at 9 Final Orders issued by the Board.

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

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

The measure reveals that the Board is actively disciplining unethical conduct of its licensees.

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

Notwithstanding the serious struggle with having a volunteer Board deal with a dramatic rise in complaints, the Board finalized and took disciplinary action against 6 licenses in fiscal year 2008. Set against our average size of the active licensee base for that fiscal year, 3024 active licensees, the Board's rate of disciplinary action calculates to .2% of the licensee base. Viewing Performance Measures # 1 and #3 together, they paint a picture of a Board focused on ensuring that the serious offenders are being dealt with even while the Board faces a significant performance problem with respect to overall timeliness in resolving complaints.

However, it does not seem appropriate from several vantage points to have a specific target for a level of disciplinary actions as a performance measure. The most important one of those simply is that discipline should be issued only when a particular standard of evidence is met that a licensee has violated Board rules or statute. That can and must be the only consideration from a due process stand point, and that is also what Board practice reflects. Although the Board has not had time to make a formal request for elimination for this measure as a performance measure, it would seem a more prudent approach that the level of disciplinary actions be monitored and reported to the Board, DAS, LFO, and other stakeholders, but without the context of a specific target level and thus outside the key performance measure context.

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

There is no comparable data accessible from other jurisdictional Boards that license Clinical Social Workers.

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

The Board has sought and obtained from the June 2008 Emergency Board approval to raise fees and employ a limited duration position for a Compliance Specialist whose primary responsibility it will be to initiate, monitor, investigate and facilitate a fair and expeditious resolution of consumer protection complaints. The new Executive Director, hired in late September, acted immediately to hire a Compliance Specialist, who began work in late October 2008. The Compliance Specialist is now in training and taking over day-to-day investigative and compliance related functions, under the supervision of the Board's Executive Director and the guidance of the Board's Consumer Protection Committee.

In addition, the Board revised its rules effective July 1, 2008, governing Continuing Education, by which each Licensed Clinical Social Worker ("Licensee" or "LCSW") will be required to show completion of six hours of ethics training every two-year reporting cycle, starting for those licensees renewing on or after January 1, 2009. The great majority of consumer complaints received by the Board involve allegations of LCSW violations of ethics rules. The requirement for Licensees to complete six hours of ethics training each License renewal cycle is anticipated to result in heightened awareness of applicable ethics standards and a concomitant reduction in the number of ethics violations requiring public discipline. The Board's goal is that this action will help reduce the flow of incoming complaints and help ensure licensees are more fully compliant with Board rules and statutes.

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

The Board is committed to encouraging “best practice” among its licensees and will work both proactively and disciplinarily to achieve that goal. Key to maintaining timely and appropriate disciplinary outcomes is legislative approval to maintain the current fee structure that funds the first professional compliance position for the Board.

<b># 4 CUSTOMER SERVICE – 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.</b>											<b>Rates to 2005-07 KPMs</b>
<b>Goal(s):</b> Provide Effective Customer Service											<b>Measure since: 2006</b>
<b>HLO(s):</b> Agency Mission											<b>“X” any changes:</b>
<b>Strategy:</b> Conduct customer service survey with every renewal packet											New wording
<b>Source:</b> Agency Data Base											New data
<b>Owner:</b> Board Executive Director (503) 378-5735, ext. 4											New measure
#4 Overall	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	Data Cycle:
Actual							97.4%	97.3%	97.4%		FFY
Target							95%	98%	98%	98%	
<b>#4a Timeliness</b>											
Actual							97.5%	96.9%	96.8%		FFY
Target							95%	98%	98%	98%	
<b>#4b Accuracy</b>											
Actual							98.0%	97.3%	97.3%		FFY
Target							95%	98%	98%	98%	
<b>#4c Helpfulness</b>											
Actual							97.2%	97.8%	97.8%		FFY
Target							95%	98%	98%	98%	
<b>#4d Expertise</b>											
Actual							95.9%	97%	96.9%		FFY
Target							95%	98%	98%	98%	
<b>#4e Availability of Information</b>											
Actual							97.3%	95.8%	95.9%		FFY
Target							95%	98%	98%	98%	

Data Source: Agency question included in annual renewal packet.

**Key Performance Measure Analysis**

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

The goal of providing excellent customer service to the public and the agency's licensee base.

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

N/A

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

The measure reveals the extent to which the Board and its staff are appropriately responding to requests from the public and licensee base.

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

The target was missed in fiscal year 07-08, but it was a close call. Given the continued growth in our license base, the size of our staff relative to our licensee base size, and the rising tide in complaints, it is impressive that performance indicators did not decline further. Preliminary data for FY 09 indicate a small drop in performance in the first six months in the knowledge indicator, inside of a percentage point, and should not be surprising given the multiple transitions at the agency. The Board and its staff are committed to continuing to provide excellent service to the public and the licensee base.

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

There is no comparable data from other jurisdictional Boards that license Clinical Social Workers.

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

The Board and staff continually review forms and processes so that they are more "user friendly" and provide greater office efficiency.

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

The agency's current processes are working well. However the Board and its Director will need to closely monitor how long existing administrative staff levels can serve a continually growing licensee base with the continued level of excellence, and analyze

its processes to find any additional efficiencies that would allow it to absorb further growth without a drop in customer service performance.

Agency Name: State Board of Clinical Social Workers		Agency No.: 12400								
Key Performance Measure (KPM)		2006	2007	2008	2009	2010	2011	2012	2013	2014
# 04A - Percent of customers rating satisfaction with agency services above average or excellent for Timeliness.	Target	95%	98%	98%	98%	98%	98%	98%	98%	98%
	Data	97.5%	96.9%	96.8%						

Data Source: Agency question included in annual renewal packet.

**Key Performance Measure Analysis**

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

The goal of providing timely customer service to the public and the agency’s licensee base.

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

N/A

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

The measure reveals the extent to which the Board and its staff respond timely to requests from the public and licensee base.

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

The target was not quite met in fiscal year 07-08, missing by 1.2%. The Board and its staff are committed to providing timely response to public and licensee base requests for service or action.

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

There is no comparable data from other jurisdictional Boards that license Clinical Social Workers.

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

The Board and staff continually review processes for greatest office efficiency which results in timely response to public and licensee requests for service or action.

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

The agency needs to closely monitor this indicator for any further deterioration in performance, especially given the continual growth in the licensee base. This includes also the need to identify further efficiencies in operations to allow existing administrative staff

Agency Name: State Board of Clinical Social Workers		Agency No.: 12400								
Key Performance Measure (KPM)		2006	2007	2008	2009	2010	2011	2012	2013	2014
# 04B - Percent of customers rating satisfaction with agency services above average or excellent for Accuracy.	Target	95%	98%	98%	98%	98%	98%	98%	98%	98%
	Data	98.0%	97.3%	97.3%						

*Data Source:* Agency question included in annual renewal packet.

**Key Performance Measure Analysis**

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

The goal of providing accurate customer service to the public and the agency’s licensee base.

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

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

The measure reveals the extent to which the Board and its staff process and provide information accurately.

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

The target was not met in fiscal year 07-08, although by a scant .7%. The Board and its staff are committed to accurately processing Board information.

*Summarize how actual performance compares to any relevant public or private industry standards.*  
 There is no comparable data from other jurisdictional Boards that license Clinical Social Workers.

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

The Administrator frequently consults with the Board Chair, the Chairs of the relevant Board Committee, or the Assistant Attorney General to ensure that the staff's response to an inquiry or concern accurately interprets and relays the statutes, rules and policies which govern Board activity.

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

The agency needs to closely monitor this indicator for any further deterioration in performance, especially given the continual growth in the licensee base. This includes also the need to identify further efficiencies in operations to allow existing administrative staff to continue to provide excellent customer service.

Agency Name: State Board of Clinical Social Workers		Agency No.: 12400								
Key Performance Measure (KPM)		2006	2007	2008	2009	2010	2011	2012	2013	2014
# 04C - Percent of customers rating satisfaction with agency services above average or excellent for Helpfulness.	Target	95%	98%	98%	98%	98%	98%	98%	98%	98%
	Data	97.2%	97.8%	97.8%						

*Data Source:* Agency question included in annual renewal packet.

**Key Performance Measure Analysis**

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

The goal of providing helpful customer service to the public and the agency's licensee base.

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

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

The measure reveals the extent to which the Board and its staff respond in a helpful manner to requests from the public and licensee base.

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

The target was almost at target fiscal year 07-08, with 97.8% actual versus 98% target. The Board and its staff are committed to providing helpful support to public and licensee base requests for service or action.

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

There is no comparable data from other jurisdictional Boards that license Clinical Social Workers.

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

The Board and staff continually review processes to ensure that they respond as helpfully as possible to public and licensee requests for service or action.

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

The agency's current processes are working well.

Agency Name: State Board of Clinical Social Workers		Agency No.: 12400								
Key Performance Measure (KPM)		2006	2007	2008	2009	2010	2011	2012	2013	2014
# 04D - Percent of customers rating satisfaction with agency services above average or excellent for Expertise.	Target	95%	98%	98%	98%	98%	98%	98%	98%	98%
	Data	95.9%	97%	96.9%						

Data Source: Agency question included in annual licensure renewal packet.

**Key Performance Measure Analysis**

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

The goal of providing expert response to questions or concerns from the public and the agency’s licensee base.

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

N/A

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

The measure reveals the extent to which the Board and its staff are perceived to convey expert information to questions and concerns from the public and licensee base.

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

The target was not met for FY 2008, missing the 98% target by 1.1%. The Board and its staff are committed to responding expertly to public and licensee base requests for service or action.

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

There is no comparable data from other jurisdictional Boards that license Clinical Social Workers.

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

The staff meets weekly, and more frequently when necessary, to ensure that policies and procedures are being uniformly applied. The Administrator frequently consults with the Board Chair, the Chairs of the relevant Board Committee, or the Assistant Attorney

General to ensure that the staff's response to an inquiry or concern expertly interprets and relays the statutes and rules which govern Board activity.

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

The agency needs to closely monitor this indicator for any further deterioration in performance, especially given the continual growth in the licensee base. This includes also the need to identify further efficiencies in operations to allow existing administrative staff to continue to provide excellent customer service.

Agency Name: State Board of Clinical Social Workers		Agency No.: 12400								
Key Performance Measure (KPM)		2006	2007	2008	2009	2010	2011	2012	2013	2014
# 04E - Percent of customers rating satisfaction with agency services above average or excellent for Information Availability.	Target	95%	98%	98%	98%	98%	98%	98%	98%	98%
	Data	97.3%	95.8%	95.9%						

*Data Source:* Agency question included in annual renewal packet.

**Key Performance Measure Analysis**

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

The goal of having information readily available to the public and the agency's licensee base.

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

N/A

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

The measure reveals the extent to which the Board and its staff have Board forms and other Board information readily available and accessible to the public and licensee base.

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

The target was missed in fiscal year 07-08 by 2.1%. The Board and its staff are committed to having Board forms and other Board information readily available and accessible to the public and licensee base.

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

There is no comparable data from other jurisdictional Boards that license Clinical Social Workers.

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

This measure reflects on availability of staff to answer incoming calls, return calls that go to voicemail timely, as well as information available on the Board's web site. Board rules and statutes, minutes and agendas for the Board, complainant information, disciplinary information, forms for applications, all this information is placed on the Board's website and continually updated. Currently about half of the licensee base receives the newsletter and other Board mailings through the internet.

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

The agency needs to closely monitor this indicator for any further deterioration in performance, especially given the continual growth in the licensee base. This includes also the need to identify further efficiencies in operations to allow existing administrative staff to continue to provide excellent customer service.

Agency Name: State Board of Clinical Social Workers		Agency No.: 12400						
Key Performance Measure (KPM)		2008	2009	2010	2011	2012	2013	2014
# 5 - Percent of Best Practices Criteria met by the Board	Target	(NEW)	100%	100%	100%	100%	100%	100%
	Data	(NEW)						

Data Source: Agency Board Self-Assessment against proscribed set of 15 best-practices criteria.

**Key Performance Measure Analysis**

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

The goal of ensuring the agency meets clear standards for strategic management, policy development, fiscal management and board management in its operations.

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

N/A

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

The measure reveals the extent to which the Board and its staff adhere to best practices criteria for strategic management, policy development, fiscal management and board management.

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

N/A – new measure

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

There is no comparable data from other jurisdictional Boards that license Clinical Social Workers.

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

The board holds planning meetings twice a year to ensure Board focus on key planning and strategy decisions.

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

N/A – new measure. This measure is in the implementation stage, and is scheduled to be fully implemented by April 30, 2009.