

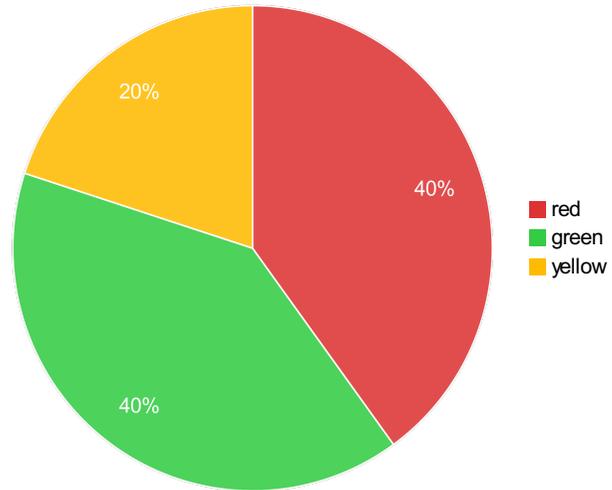
# **Accountancy, Board of**

Annual Performance Progress Report

Reporting Year 2016

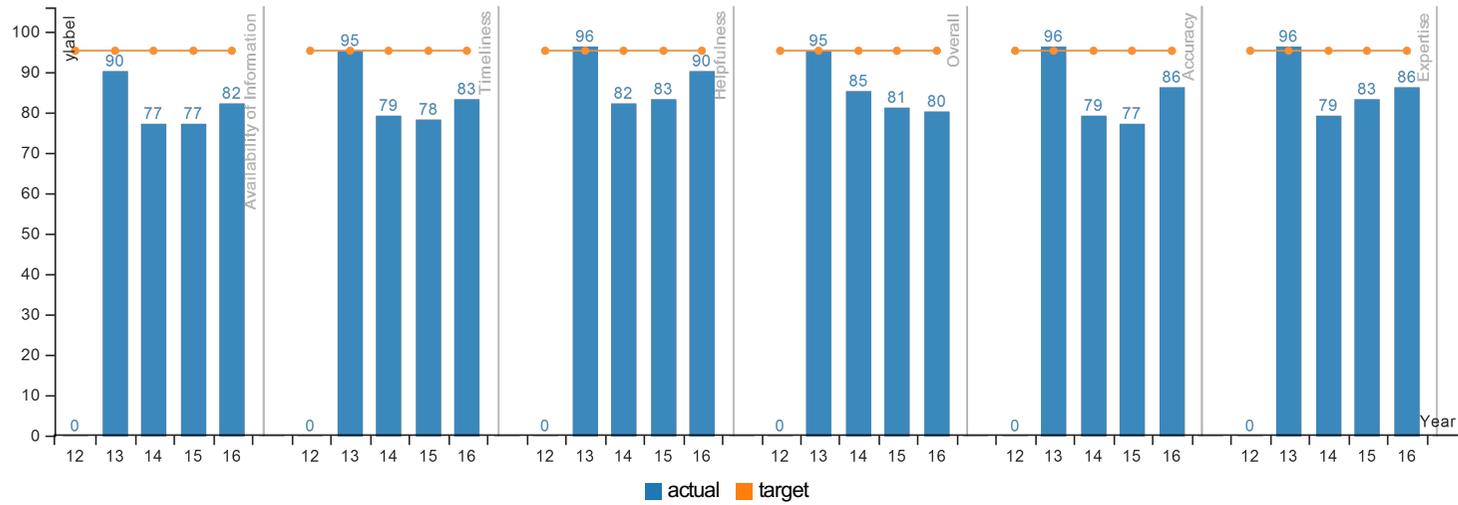
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KPM #	Approved Key Performance Measures (KPMs)
1	CUSTOMER SATISFACTION - Percent of customers rating satisfaction with agency services as "good" or "excellent": overall customer service, timeliness, accuracy, helpfulness, expertise and availability of information.
2	Number of days from date of Complaints Committee recommendation to date of preliminary Board determination -
3	Number of days from date of letter advising parties that an investigation has begun to completion of investigative report -
5	Percentage of complaints wherein letters advising the parties of whether or not an investigation will be initiated are mailed within five business days of the receipt of the complaint -
7	BEST PRACTICES - Percent of total best practices met by the Board.



	Green	Yellow	Red
	= Target to -5%	= Target -6% to -15%	= Target > -15%
<b>Summary Stats:</b>	40%	20%	40%

KPM #1	CUSTOMER SATISFACTION - Percent of customers rating satisfaction with agency services as "good" or "excellent": overall customer service, timeliness, accuracy, helpfulness, expertise and availability of information.
	Data Collection Period: Jul 01 - Jun 30



Report Year	2012	2013	2014	2015	2016
<b>Availability of Information</b>					
Actual	0%	90%	77%	77%	82%
Target	95%	95%	95%	95%	95%
<b>Timeliness</b>					
Actual	0%	95%	79%	78%	83%
Target	95%	95%	95%	95%	95%
<b>Helpfulness</b>					
Actual	0%	96%	82%	83%	90%
Target	95%	95%	95%	95%	95%
<b>Overall</b>					
Actual	0%	95%	85%	81%	80%
Target	95%	95%	95%	95%	95%
<b>Accuracy</b>					
Actual	0%	96%	79%	77%	86%
Target	95%	95%	95%	95%	95%
<b>Expertise</b>					
Actual	0%	96%	79%	83%	86%
Target	95%	95%	95%	95%	95%

**How Are We Doing**

Since initiation of this measure in 2003, the Board of Accountancy (Board) saw a steady increase in "good" and "excellent" responses through 2011. During that period, the Board mostly exceeded targets set at 90%, with some under performance relative to availability of information. Data was not collected for FY 2012 during an Executive Director change. The data collected from FY 2013 onward reflects a far broader scope of agency performance and is limited in cross-comparability to prior fiscal years.

Specifically, prior to FY 2013, the data source for this customer satisfaction KPM only was generated during the annual licensure renewal process by survey and did not reach across all agency services, and effectively was only collected once a year. From FY 2014 onward, the data is based on continual survey access attached to all e-mail communications from the Board to all external customers and stakeholders. This now includes all communications for information from the Board, applicants to sit for the CPA exam, applicants for initial licensure, renewals, communications with external agency partners in government and private industry.

Significantly, the new method of data collection also includes all communications on the compliance portion of the Board operations – not exactly an area where the public protection mission of the Board will necessarily generate happy outcomes. In the judgment of the Board it is necessary and appropriate to include all operational aspects in this measure.

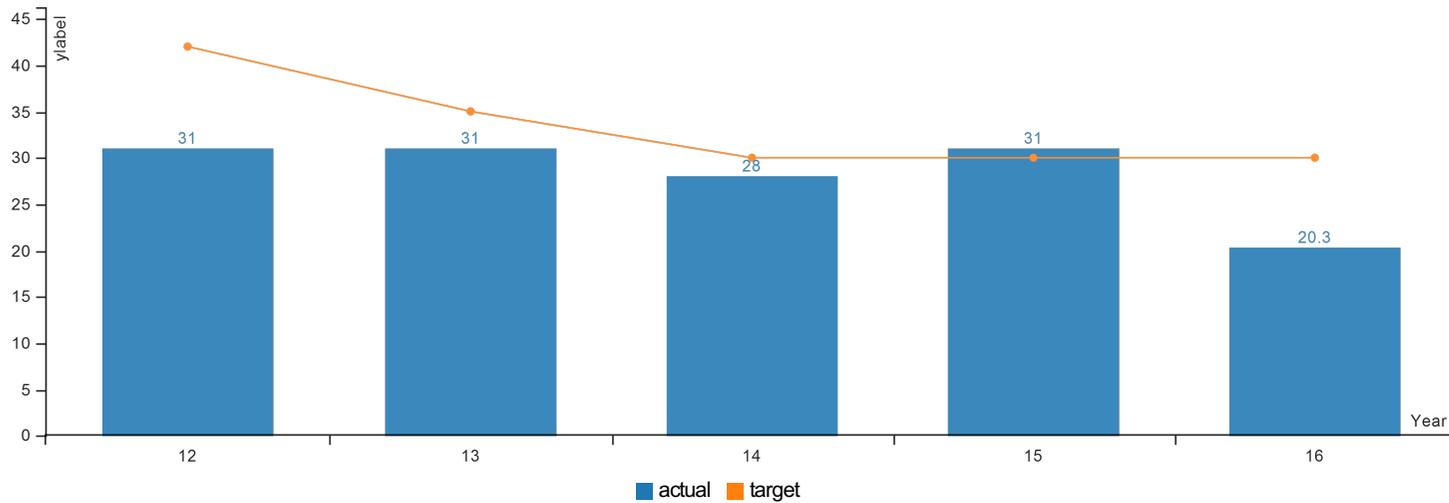
The demographics from which this data is drawn since FY 2014 has therefore shifted. Only about 60% of respondents are current licensees (the previous method involved only current licensees), and about 25% are applicants for exam or licensure. The remainder are complainants or defense counsel interacting with the agency, or other agency partners.

This shift to this much broader assessment of customer service in FY 2014 and change in data collection method caused an initial and significant in overall drop performance in FY 2014. Except for overall satisfaction, all specific performance sub measures have been on a steady rise since FY 2014. The weakest specific area comparatively is availability of information, expertise and accuracy have seen steady improvement.

#### **Factors Affecting Results**

The change in data collection method from FY 2014 forward is impacting results. On the positive side, staffing and cultural changes over time are likely the reason in increased performance in accuracy and expertise. On the negative side, both before and after the changes in data collection method, availability of information remains the lowest scoring area of performance. It appears that the efforts such as better web site maintenance, addition of basic social media communication infrastructure and introduction of a much more transparent rulemaking process may have begun to yield a rise in improvement there. The Board still needs to add a much more comprehensive communication plan and strategy, including but not limited to re-starting a newsletter process. It appears likely that until a comprehensive communication strategy is in place and executed, this area will continue to be weaker than others.

KPM #2	Number of days from date of Complaints Committee recommendation to date of preliminary Board determination -
	Data Collection Period: Jul 01 - Jun 30



Report Year	2012	2013	2014	2015	2016
<b>Number of days from Complaints Committee recommendation to determination by Board</b>					
Actual	31	31	28	31	20.30
Target	42	35	30	30	30

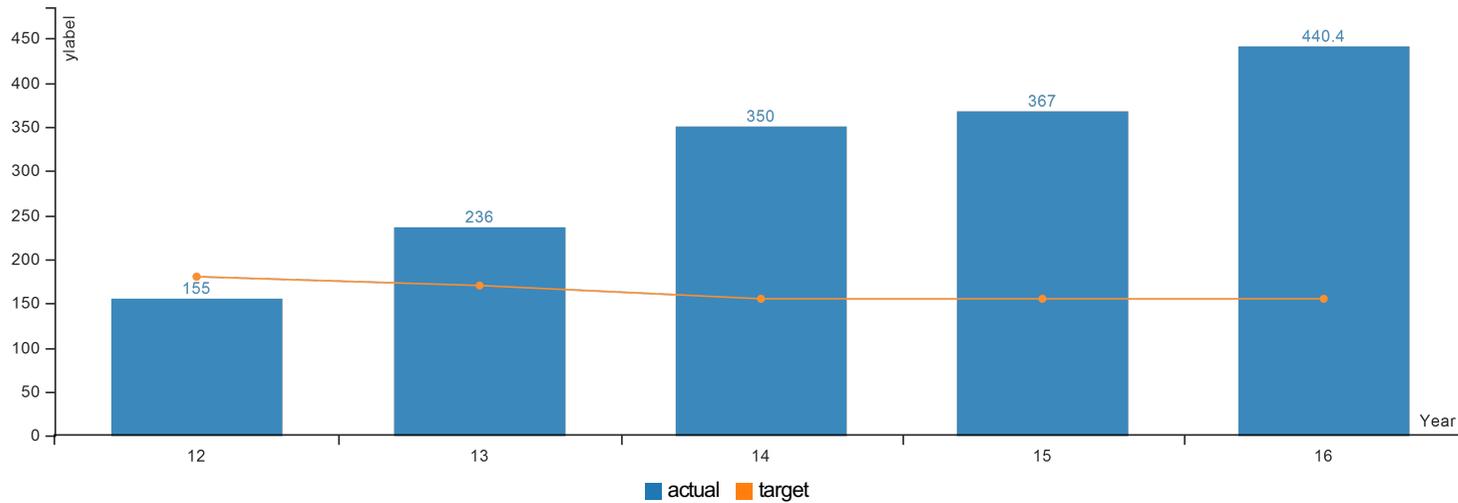
#### How Are We Doing

The Board has significantly improved on this measure due to introduction of new process efficiencies that eliminate in some cases any delays from the complaints committee process and allow the Board to resolve some cases directly. Since this KPM was at its core designed to reflect one aspect influencing speed of Board resolution of a case, the streamlining of the Board's process by eliminating complaints committee consideration of some cases is appropriately reflected in this measure.

#### Factors Affecting Results

The process improvement that focuses complaints committee resources only on cases needing specific subject area expertise is allowing cases not in that category to be resolved faster.

KPM #3	Number of days from date of letter advising parties that an investigation has begun to completion of investigative report -
	Data Collection Period: Jul 01 - Jun 30



Report Year	2012	2013	2014	2015	2016
<b>Number of days taken to complete investigative report</b>					
Actual	155	236	350	367	440.40
Target	180	170	155	155	155

#### How Are We Doing

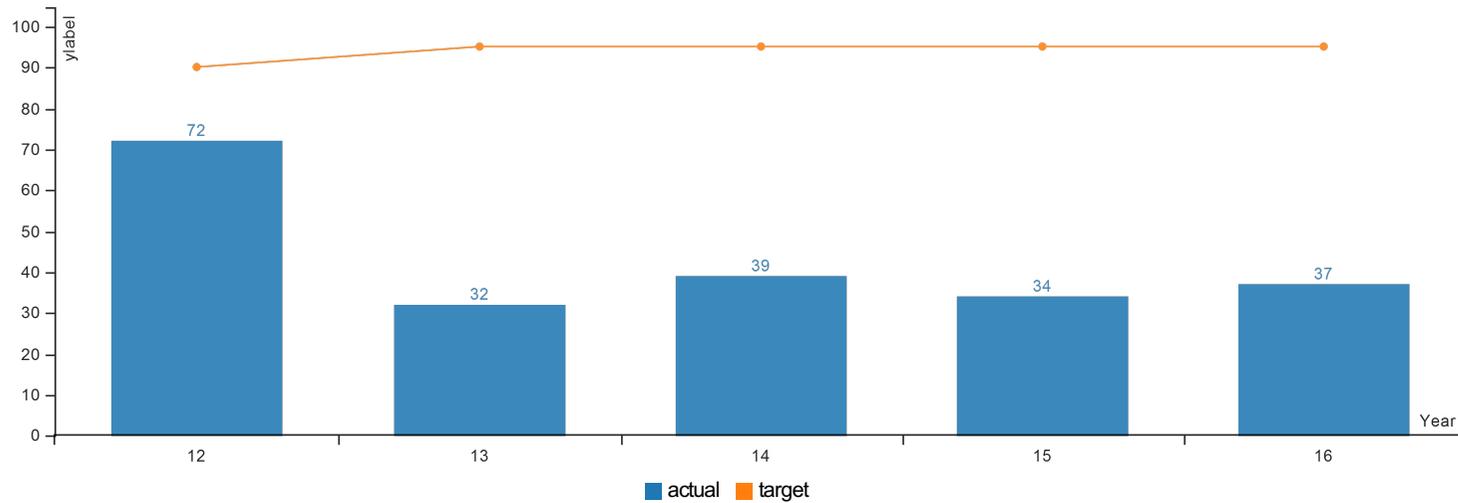
Numeric performance on this measure has dropped significantly. That said – this actually is a (temporary) outcome of a positive development. Specifically, this numeric outcome reflects the Board finally being able to resolve some of its oldest cases, some of which were on hold due to litigation and other reasons for years. When these old cases are resolved (which is a good thing), that triggers a downward trend in the numeric outcomes for this measure.

#### Factors Affecting Results

The downward trend in this measure reflects the Board finally being able to resolve some of its oldest cases, some of which were on hold due to litigation and other reasons for years. When these old cases are resolved (which is a good thing), that triggers a downward trend in the numeric outcomes for this measure.

KPM #5 Percentage of complaints wherein letters advising the parties of whether or not an investigation will be initiated are mailed within five business days of the receipt of the complaint -

Data Collection Period: Jul 01 - Jun 30



Report Year	2012	2013	2014	2015	2016
<b>Percentage of cases wherein parties are notified within 5 days of receipt of complaint</b>					
Actual	72%	32%	39%	34%	37%
Target	90%	95%	95%	95%	95%

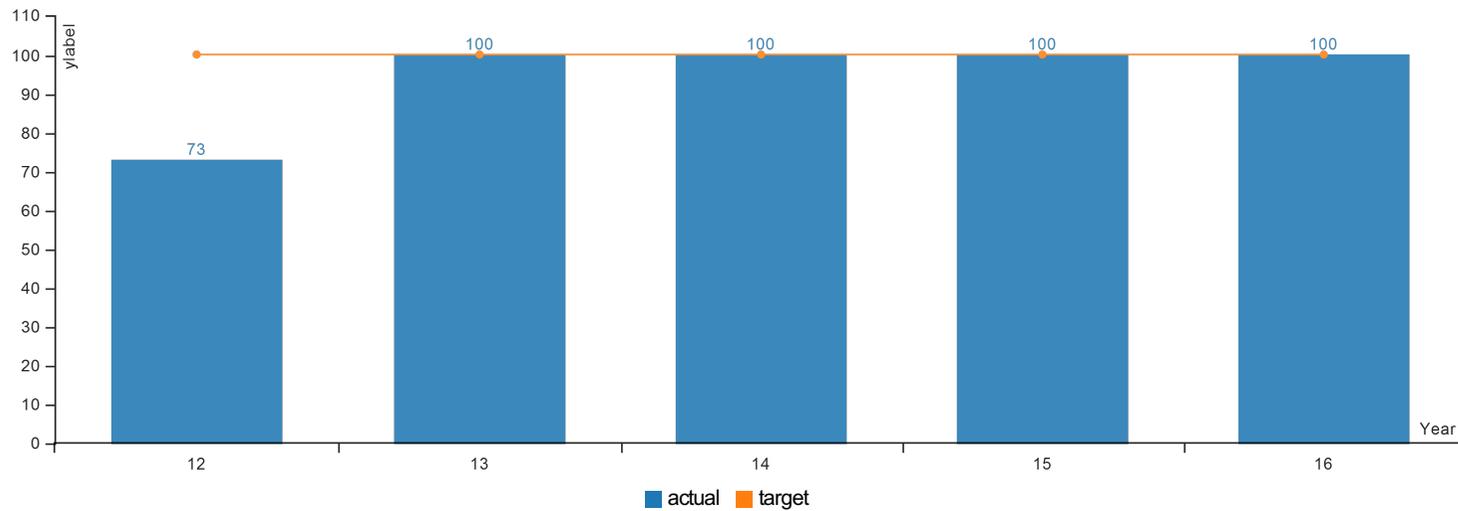
**How Are We Doing**

Overall the performance on this measure has begun to improve slightly, and is largely reflective of the case backlog still facing the agency. Performance remains well below target.

**Factors Affecting Results**

With the agency focus on overall case backlog reduction, improvements in this particular measure have not been the main focus of the agency. That is expected to change in FY 2017.

KPM #7	BEST PRACTICES - Percent of total best practices met by the Board.
	Data Collection Period: Jul 01 - Jun 30



Report Year	2012	2013	2014	2015	2016
<b>Metric Value</b>					
Actual	73	100	100	100	100
Target	100	100	100	100	100

#### How Are We Doing

The Board is meeting all targets on this standardized measure for boards and commissions since FY 2013, after practices that prevented full compliance in prior fiscal years were changed.

#### Factors Affecting Results

The Board is committed to best practices and the Executive Director monitors this measure for full compliance.