

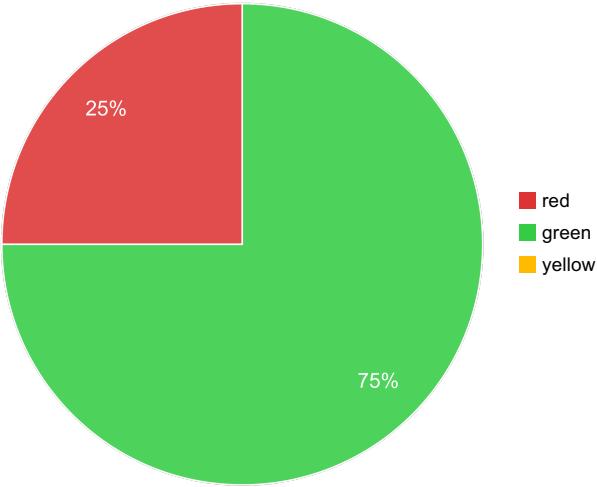
Board of Psychology

Annual Performance Progress Report

Reporting Year 2026

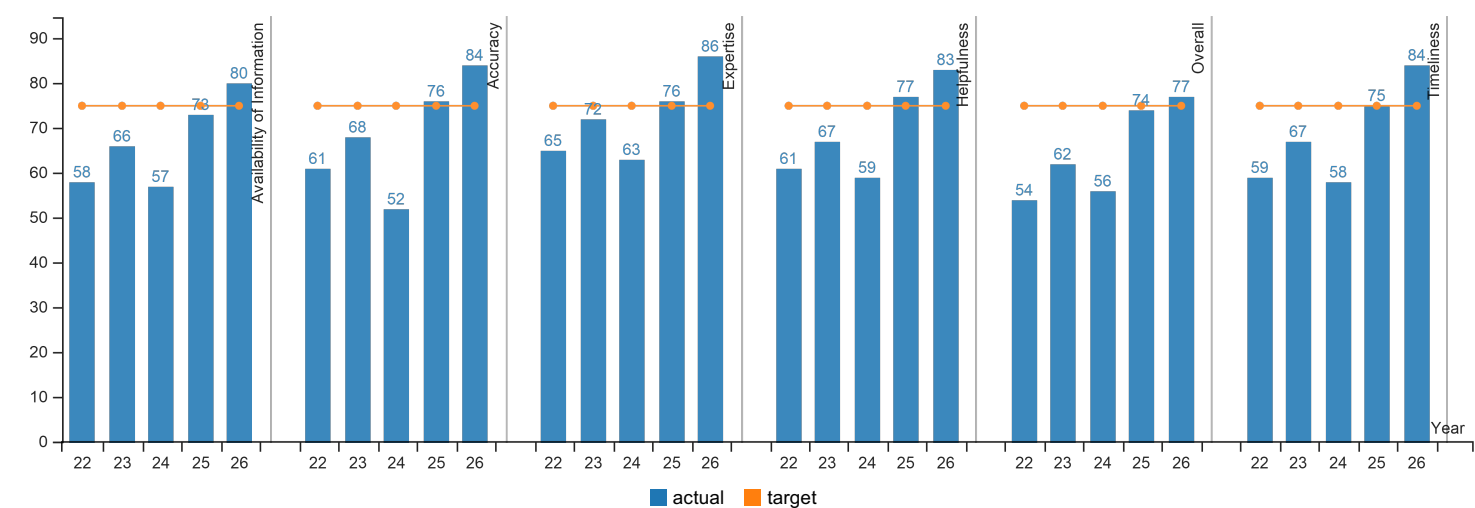
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KPM #	Approved Key Performance Measures (KPMs)
1	CUSTOMER SERVICE - Percent of customers rating their satisfaction with the agency's customer service as "good" or "excellent": Overall, Timeliness, Accuracy, Helpfulness, Expertise, Availability of Information.
2	BOARD BEST PRACTICES - Percent of total best practices met by the Board.
3	Timely Investigations - Percent of complaints presented to the Board within 180 days of receipt.
4	Efficient Application Processing - Average number of calendar days from completed license application file to application approval.



Performance Summary	Green	Yellow	Red
	= Target to -5%	= Target -5% to -15%	= Target > -15%
Summary Stats:	75%	0%	25%

KPM #1	CUSTOMER SERVICE - Percent of customers rating their satisfaction with the agency's customer service as "good" or "excellent": Overall, Timeliness, Accuracy, Helpfulness, Expertise, Availability of Information.
	Data Collection Period: Jan 01 - Dec 31



Report Year	2022	2023	2024	2025	2026
Availability of Information					
Actual	58%	66%	57%	73%	80%
Target	75%	75%	75%	75%	75%
Accuracy					
Actual	61%	68%	52%	76%	84%
Target	75%	75%	75%	75%	75%
Expertise					
Actual	65%	72%	63%	76%	86%
Target	75%	75%	75%	75%	75%
Helpfulness					
Actual	61%	67%	59%	77%	83%
Target	75%	75%	75%	75%	75%
Overall					
Actual	54%	62%	56%	74%	77%
Target	75%	75%	75%	75%	75%
Timeliness					
Actual	59%	67%	58%	75%	84%
Target	75%	75%	75%	75%	75%

Customer service ratings have increased considerably over the past two years, and in the current year met or exceeded all target areas. **Overall Customer Satisfaction** increased by 3 points, from 74% to 77%, now the lowest ranked area but still sitting at 3 points above target. From 2025 to 2026, **Accuracy** increased by 8 points, from 76% to 84%, 9 points above target. **Availability of Information** increased by 7 points, from 73% to 80%, now 5 points above target. **Expertise** increased the most significantly by 10 points, from 76% to 86%, representing highest ranked area. **Helpfulness** increased by 6 points, from 77% to 83%, 8 points above target. Finally, **Timeliness** increased by 9 points, from 75% to 84%.

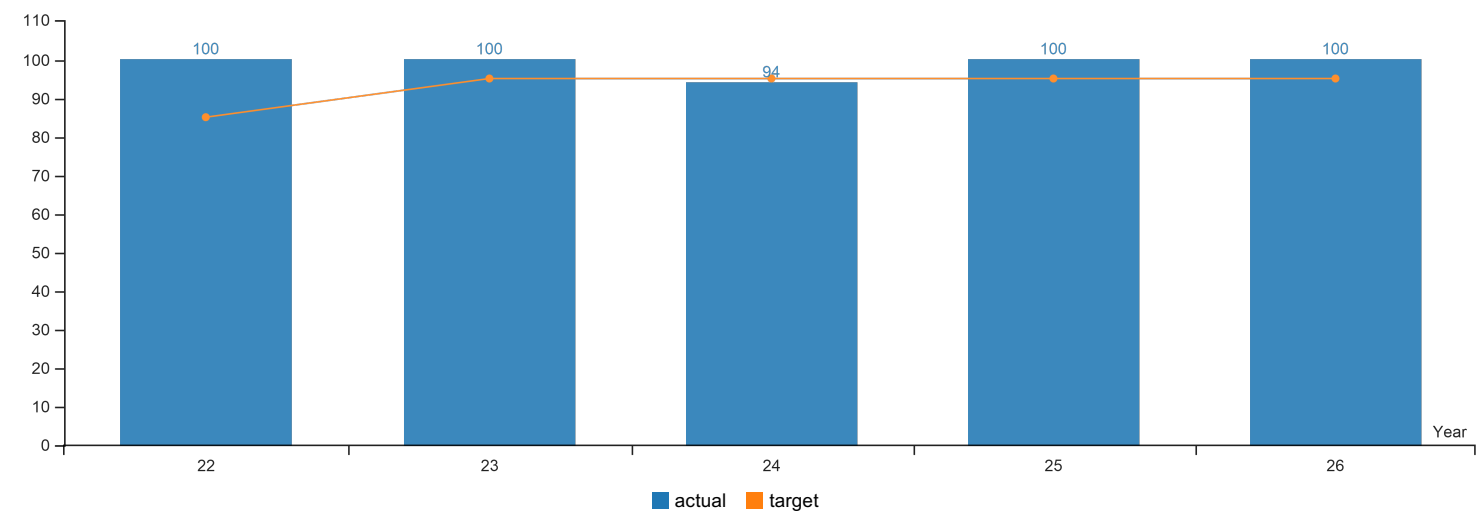
Factors Affecting Results

The main factors affecting the improvements seen in 2026 survey results (which reflect customer satisfaction in the year 2025) are restored staff retention, ongoing and enhanced training, and improved morale under the leadership of the MHRA Executive Director since he assumed his role in July 2024. In the 2024 report (reflecting 2023 survey results), customer service rankings reached an all-time low as a result of poor former management of the Agency Licensing Section. Simple positive changes and the corresponding shift in Agency culture have resulted in a remarkable 149-point overall improvement in customer service ratings over the past two years. In June 2025, the Agency implemented a new Customer Service Policy that included a one-day response timeline for incoming emails and voicemails along with other standards for equitable and quality service. Additionally, the new investigator and administrative specialist positions (2.0 FTE, effective 7/1/25) have improved service levels and supported staff capacity to manage the increasing volume of licenses and complaints.

Generally, survey results reflect some stakeholders who have experienced an adverse enforcement action, do not agree with laws or rules that the Board is charged with enforcing, or are unsatisfied with the policy direction of the Board or State Government in general. These individuals will often respond "poor" to each satisfaction area, regardless of their experience with Board staff. One factor limiting improvement in recent survey results is the ongoing pressure to keep pace with the continued growth in licensure applications, renewals, and compliance investigations. From 2024 to 2025, the number of new applications received- which represents the most significant workload burden for front-line staff- increased by 24%. During this time the number of new investigations increased by 28%. A new licensing system and additional staffing resources requested for the 2027-29 biennium are expected to allow the Agency to sustain the continued growth while maintaining good customer service and survey results that meet or exceed target in future survey years. Board leadership and staff members will continue to work diligently to recover from prior setbacks and challenges, centering excellent customer service in everything we do.

KPM #2	BOARD BEST PRACTICES - Percent of total best practices met by the Board.
	Data Collection Period: Jan 01 - Dec 31

* Upward Trend = positive result



Report Year	2022	2023	2024	2025	2026
GOVERNANCE - Percent of best administrative practices achieved.					
Actual	100%	100%	94%	100%	100%
Target	85%	95%	95%	95%	95%

How Are We Doing

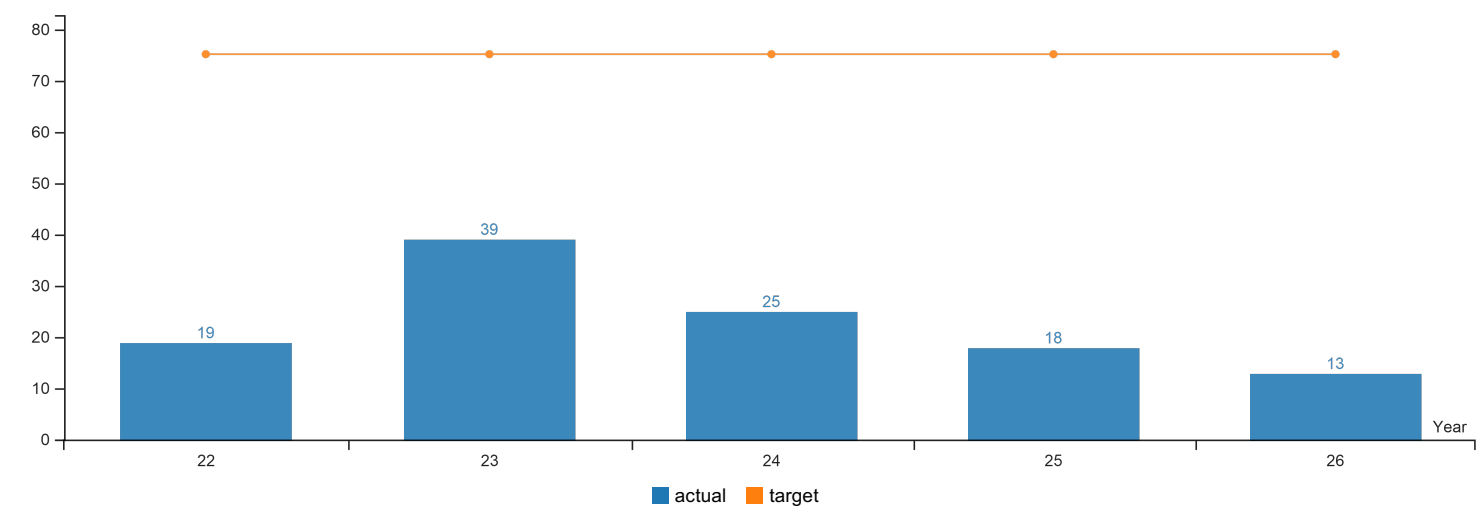
In 4 out of 5 years, including the current 2026 result, the Board has exceeded the target in Board best practices at 100%. There is no change from 2025 to 2026.

Factors Affecting Results

Agency leadership continues to look for opportunities for improved performance and increased transparency, regardless of the Board members' reports of success. When sending this survey to Board members, staff will send additional information to help clarify the survey questions and explain how they directly relate to agency operations. However, members report on their perceptions of best practices which could reflect aspirational rather than actual performance levels. The survey will fall below 100% if just one of the nine Board members indicates that any one of the 15 best practice measures are not being met.

KPM #3	Timely Investigations - Percent of complaints presented to the Board within 180 days of receipt.
	Data Collection Period: Jan 01 - Dec 31

* Upward Trend = positive result



Report Year	2022	2023	2024	2025	2026
Timely Investigations					
Actual	19%	39%	25%	18%	13%
Target	75%	75%	75%	75%	75%

How Are We Doing

In the 2026 reporting year, 13% of complaints were presented to the Board within 180 days of receipt, which falls significantly below the target of 75%, and represents a five-point decline from the prior year.

Factors Affecting Results

The Agency has set an ambitious goal to present most complaint investigations to the Board within 180 days of receipt; however, there are many factors affecting our ability to expediently resolve a complaint. These include the varying complexity of cases, increasing volume of complaints received, arranging witness interviews, travel time, coordinating respondent, attorney, and witness schedules for interviews, and waiting for necessary records to be submitted (including issuing and enforcing subpoenas). Sometimes the Board receives emergency high-priority cases involving serious public protection concerns that take staff resources away from other cases.

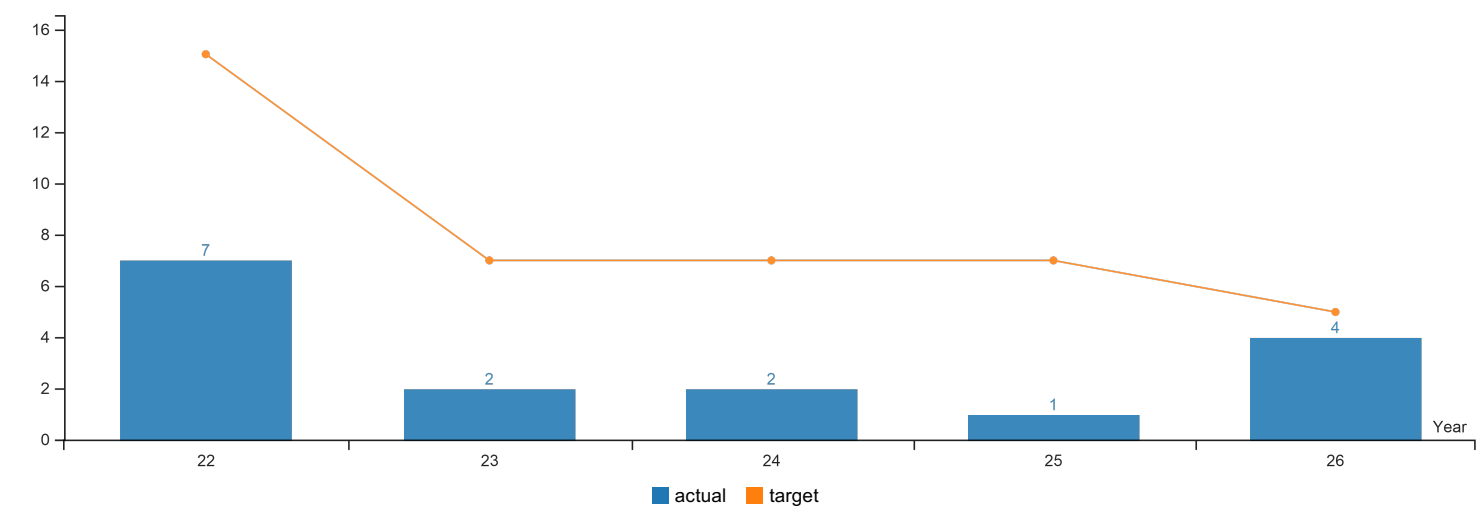
The goal is to present a thorough and complete investigation report to the Board the first time, which often is not possible to achieve within the required 180 days. The Board meets bimonthly, so timing is a major factor as well. Compliance staff continue to receive pressure from respondents, their attorneys, and the local professional association to allow respondents more and more time to respond to allegations and produce records, which reduces the Board's ability to achieve timeliness goals. In the prior reporting period, significant unexpected periods of investigative staff absences were the most significant factor affecting the performance results. This created a backlog that has compounded into the current period, exacerbated by a 28% increase in the volume of new investigations from 2024 to 2025. These pressures have greatly added to the Compliance Section workload and thwarted recovery efforts.

A new licensing system and additional staffing resources- including one new 1.0 FTE investigator- requested for the 2027-29 biennium are expected to better position the Agency to sustain the

continued growth. Agency leadership will continue to monitor for additional staffing needs and review caseloads and compliance workflow to identify any streamlining opportunities. We will continue to work diligently to hire and train new staff members and improve complaint-processing speeds- without compromising the integrity of the investigation process- and remain dedicated to addressing the backlog despite extraordinary complaint volume.

KPM #4	Efficient Application Processing - Average number of calendar days from completed license application file to application approval.
	Data Collection Period: Jan 01 - Dec 31

* Upward Trend = negative result



Report Year	2022	2023	2024	2025	2026
Efficient Application Processing					
Actual	7	2	2	1	4
Target	15	7	7	7	5

How Are We Doing

The Board has surpassed its goal to take an average of no more than seven calendar days to approve a completed licensure application. The 2026 report, which reflects applications processed during the 2025 calendar year, shows an average of four days. This represents a three-day increase from the prior year.

Factors Affecting Results

Efficient application processing has been highly prioritized by the Board, as it is a crucial step in ensuring licensed behavioral health providers can quickly provide necessary services to Oregonians. Agency leadership has continued to implement streamlined processes and best practice sharing between the two regulated boards that has enabled more efficient application processing. While applications are typically processed within a day or less, outlier cases (e.g., those requiring more detailed review due to character and fitness or other concerns) take longer to process and can significantly inflate the average processing time. Despite the current good results, the Agency is still continuously looking for ways to improve, including staff retention, cross-training to help cover absences and vacancies, improvements in the licensing system and website, and continuous feedback. While speed of service is important, so too is the quality of customer service we provide along the way, which as described in KPM #1 continues to represent a major focus area for improvement.