

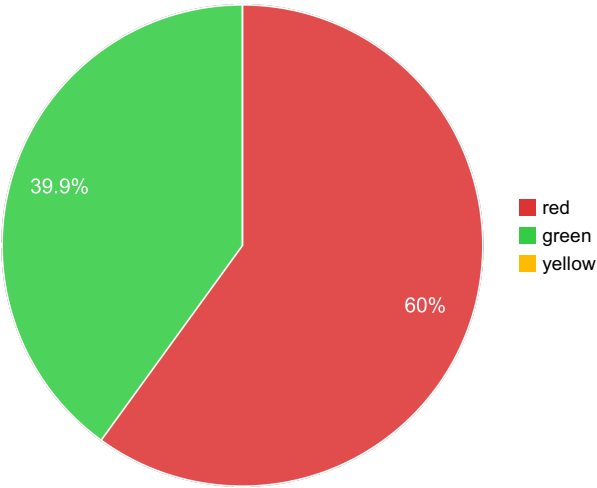
Psychiatric Security Review Board

Annual Performance Progress Report

Reporting Year 2025

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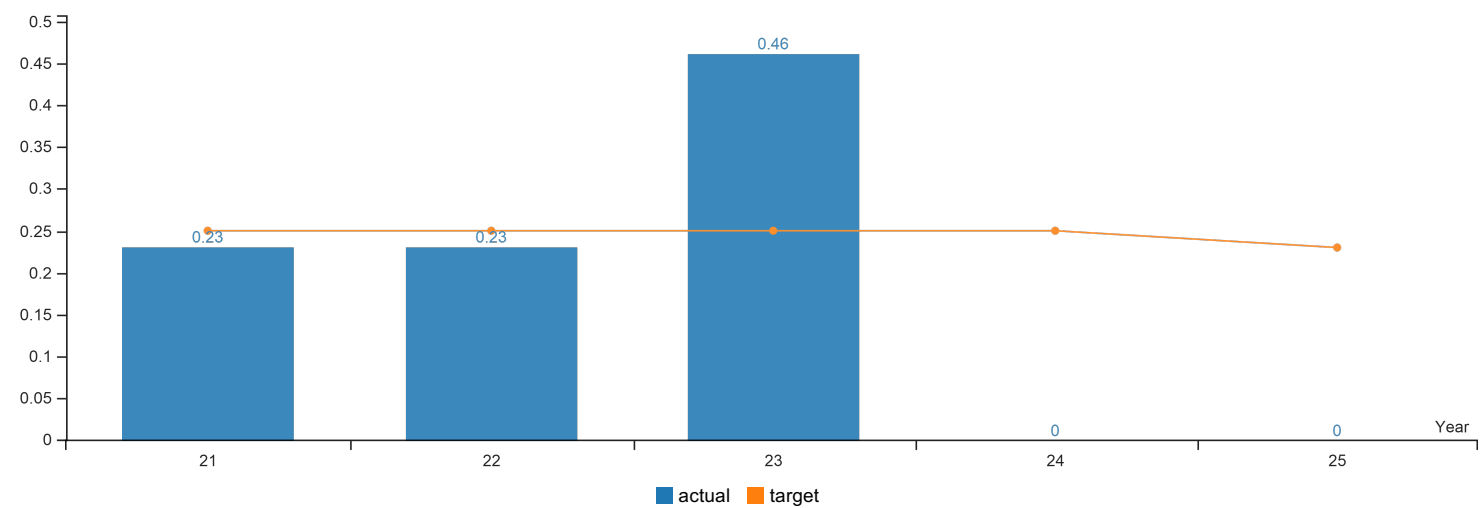
KPM #	Approved Key Performance Measures (KPMs)
1	RECIDIVISM RATE - Percentage of clients on conditional release per year convicted of a new felony or misdemeanor.
2	TIMELINESS OF HEARINGS - Percentage of hearings scheduled within statutory timeframes.
3	MAINTENANCE OF RELEASED CLIENTS - Percentage of conditional releases maintained in community per month.
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.
5	BEST PRACTICES - Percent of total best practices met by the Board.



Performance Summary	Green	Yellow	Red
	= Target to -5%	= Target -5% to -15%	= Target > -15%
Summary Stats:	40%	0%	60%

KPM #1	RECIDIVISM RATE - Percentage of clients on conditional release per year convicted of a new felony or misdemeanor.
	Data Collection Period: Jan 01 - Jun 30

* Upward Trend = positive result



Report Year	2021	2022	2023	2024	2025
Adults					
Actual	0.23%	0.23%	0.46%	0%	0%
Target	0.25%	0.25%	0.25%	0.25%	0.23%

How Are We Doing

The PSRB measures recidivism on an annual basis, using data collected and analyzed in partnership with the methodology of the Oregon Criminal Justice Commission (CJC). As of June 30, 2025, no clients on conditional release have been arrested for a new felony or misdemeanor committed in 2025, highlighting the Board’s effective management of individuals under its supervision. Also, while PSRB can currently report a recidivism rate of zero for 2024, there are two cases pending for that year and another for a crime committed in 2022, which may eventually affect the rate for both of those years.

To ensure accurate measurement, the PSRB relies on both arrest data and the final disposition of cases and therefore tracks individuals arrested for crimes committed while on conditional release until the case is resolved. Because factors outside the PSRB’s control can delay resolution, a case may not reach conviction or GEI adjudication for several years. However, the year in which a case is finally decided is not relevant to PSRB’s oversight process. For reporting purposes, cases are therefore attributed to the year in which the crime occurred, which more accurately reflects the supervision practices and conditions in place at that time. This approach may result in some fluctuation in previously reported annual percentages as older cases are resolved.

The PSRB has been tracking recidivism since 1992, adopting a revised definition in 2019 to enhance accuracy. This updated definition was retroactively applied to data from 2011 to 2019 and annually since, allowing for a comprehensive understanding of recidivism trends. The Board’s recidivism rate represents the percentage of individuals under its supervision who are convicted or found Guilty Except for Insanity (GEI) of a new felony or misdemeanor committed within the calendar year. Lower recidivism rates demonstrate the success of the PSRB’s conditional release program in maintaining public safety.

The PSRB uses two main metrics for reporting recidivism: an annual rate and a cumulative average.

Annual Recidivism Rate: The legislature set a target of 0.25% for recidivism in 2016, following the PSRB's achievement of a 0.22% rate that year. The Board met this target in 2016, 2021, 2022, and 2024. While our goal remains ambitious, aiming for zero recidivism, even a new offense by more than one individual in a given year can result in the legislative target goal not being met. For example, in 2023, there were only 2 convictions of the 434 individuals on conditional release, resulting in a 0.46% recidivism rate. Despite this outcome, the PSRB's annual recidivism rates remain significantly lower than the typical 20-30% rates reported by the state's Department of Corrections.

Cumulative Recidivism Rate: The cumulative recidivism rate, averaging data from 2011 to 2024, stands at 0.62%. This figure reflects the Board's long-term effectiveness and commitment to safely managing individuals within the community. The cumulative rate, which was confirmed using arrest records provided by CJC, demonstrates the PSRB's consistent and exemplary safety record over more than a decade.

Factors Affecting Results

The Psychiatric Security Review Board's (PSRB) recidivism rate is deeply influenced by its robust partnerships and the effectiveness of its treatment and supervision strategies. Key factors impacting recidivism include:

Collaborative Partnerships and System Integration: The PSRB's success in managing recidivism is significantly shaped by its collaborative relationships with the broader forensic mental health system. This includes close coordination with the Oregon Health Authority (OHA), Department of Human Services (DHS), the Oregon State Hospital (OSH), county and community behavioral health providers, and statewide law enforcement agencies. These partnerships are essential for effective information sharing, coordinated care, and resource allocation, all of which contribute to reducing recidivism.

Effective Treatment and Support: A critical factor in lowering recidivism is the delivery of targeted, evidence-based treatment. While short-term measures like restricted environments and mandated treatments can be effective, the long-term success of managing recidivism hinges on providing evidence-based support that targets criminogenic risk factors and equips clients with essential coping skills necessary to manage their mental health condition(s). This support is vital for individuals transitioning to more independent living situations after their time under PSRB supervision. The PSRB's strategic plan emphasizes improving conditional release programs to ensure they support long-term recovery and reduce recidivism. This includes refining practices to avoid inadvertently reinforcing risk factors and enhancing trauma-informed care that fosters recovery and community integration.

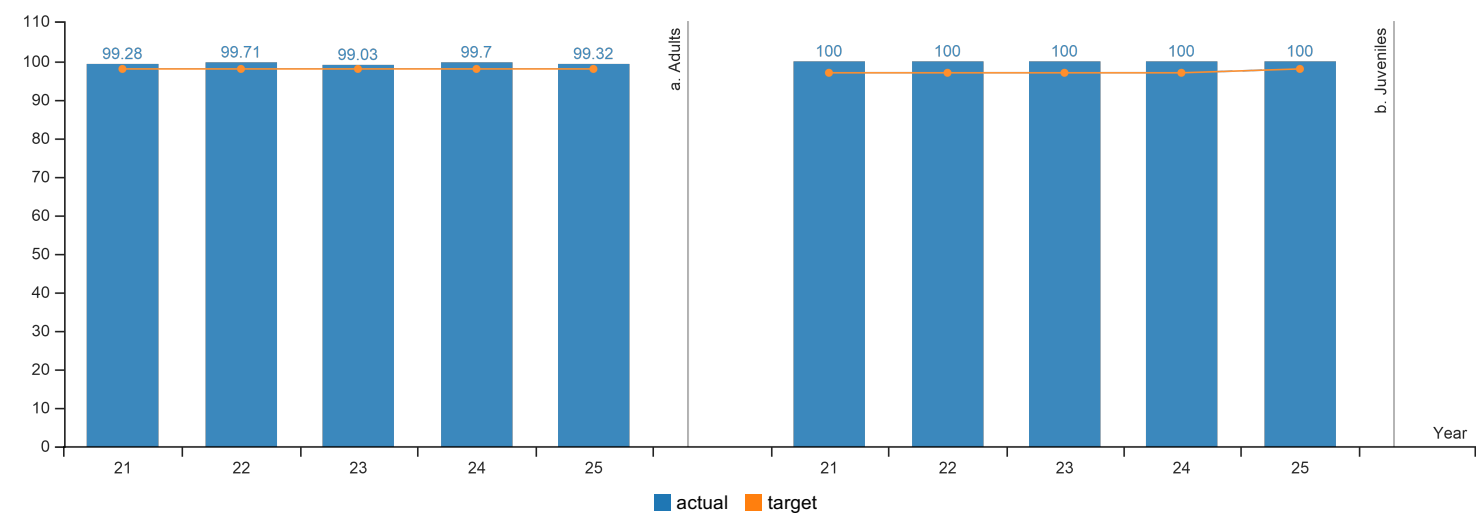
Development and Compliance with Conditional Release Orders: Conditional release plans are central to managing recidivism. The PSRB can only approve community release if a client can be adequately controlled and provided with necessary care and resources. Effective release plans, developed with input from treatment teams and based on comprehensive assessments and client data, play a crucial role in mitigating recidivism risk. The PSRB collaborates with OHA, DHS, and other stakeholders to train providers and ensure these plans are well-crafted and targeted.

However, the effectiveness of these plans is contingent upon the availability and capability of the workforce responsible for implementing them. Workforce shortages and high turnover among community providers can pose significant barriers. Even the most well-developed conditional release plan may fall short if there are insufficient or inadequately trained staff to execute it. Inadequate staffing can lead to lapses in monitoring, supervision, and the delivery of necessary services, which may undermine the intended outcomes of the release plan.

Ongoing training and support are essential for maintaining the quality and effectiveness of conditional release plans. The PSRB's strategic partnerships are crucial in addressing these workforce challenges by ensuring that providers receive the necessary resources and training to manage their caseloads effectively. Addressing workforce shortages and turnover is therefore integral to the PSRB's efforts to uphold the integrity of conditional release plans and achieve its goal of reducing recidivism while safeguarding public safety.

Proactive and Timely Communication: Each client on conditional release is assigned a case manager responsible for overseeing their adherence to the release plan. Regular progress reports and proactive communication about any safety or compliance issues are essential for timely interventions. The PSRB requires case managers to report monthly and to alert the Board immediately about any significant issues. This proactive approach allows for swift responses, such as increasing services or revoking release, to mitigate recidivism and safeguard public and client safety. The PSRB also leverages the Oregon State Police Department's Law Enforcement Data System for real-time updates on client interactions with law enforcement, further enhancing its ability to respond effectively.

KPM #2	TIMELINESS OF HEARINGS - Percentage of hearings scheduled within statutory timeframes.
	Data Collection Period: Jan 01 - Jun 30



Report Year	2021	2022	2023	2024	2025
a. Adults					
Actual	99.28%	99.71%	99.03%	99.70%	99.32%
Target	98%	98%	98%	98%	98%
b. Juveniles					
Actual	100%	100%	100%	100%	100%
Target	97%	97%	97%	97%	98%

How Are We Doing

The PSRB evaluates the timeliness of its hearings on an annual basis to ensure clients receive decisions within required statutory timeframes. While our performance measures are directly tied to hearings with statutory timelines, this narrative also reflects the volume of administrative matters that result in Board orders for GEI and REI clients but are not governed by statutory deadlines. Including these matters provides a more complete picture of the Board’s overall workload.

This section does not currently include hearings for individuals under the Board’s jurisdiction pursuant to ORS 426.701, nor does it include petitions for Gun Relief, Sex Offender Classification, Reclassification, or Relief. As the Board’s caseload under ORS 426.701 continues to grow, these figures are anticipated to be incorporated into future reporting. However, it should be noted that most hearings under that statute do not have statutory timeliness requirements.

Juvenile Panel Hearings

As of June 30, 2025, the Board successfully scheduled 100% of its five juvenile full hearings for GEI clients within statutory timelines. During this same period, the Board reviewed no juvenile administrative matters, and the Executive Director reviewed no matters. With the passage of HB 2804, which sunsets the juvenile panel and consolidates all functions under a single Board, future reporting will reflect this structural change. Accordingly, the Board will begin integrating juvenile hearing statistics into its overall performance measures to provide a unified and accurate picture of the agency’s work going forward.

Adult Panel Hearings

As of June 30, 2025, the Board successfully scheduled 99.32% of its 147 adult full hearings for GEI clients within statutory timelines, with only one late hearing. In addition to these full hearings, the Board reviewed 99 matters through administrative hearings, and the Executive Director reviewed 54 matters, resulting in orders, reflecting the breadth of orders issued by the agency.

Within this broader caseload, hospital requests for conditional release represent a particularly critical subset of hearings. As of June 30, 2025, the Board held 100% of its 40 hospital requests for conditional release within statutory timelines. Although the law permits up to 60 days to schedule these hearings, the Board's average turnaround time was just 37.9 days from the date of application to the hearing.

This level of performance underscores the Board's unwavering commitment to timely decision-making that directly impacts both patient recovery and statewide hospital capacity. By prioritizing and expediting conditional release hearings, the Board ensures patients transition into less restrictive community settings as soon as they are clinically ready and placement is secured. At the same time, these timely releases free up much-needed hospital beds for new admissions, helping the Oregon State Hospital serve individuals in acute need. In this way, the Board not only fulfills its statutory obligations but also plays a collaborative role in advancing recovery, continuity of care, and systemwide efficiency.

Factors Affecting Results

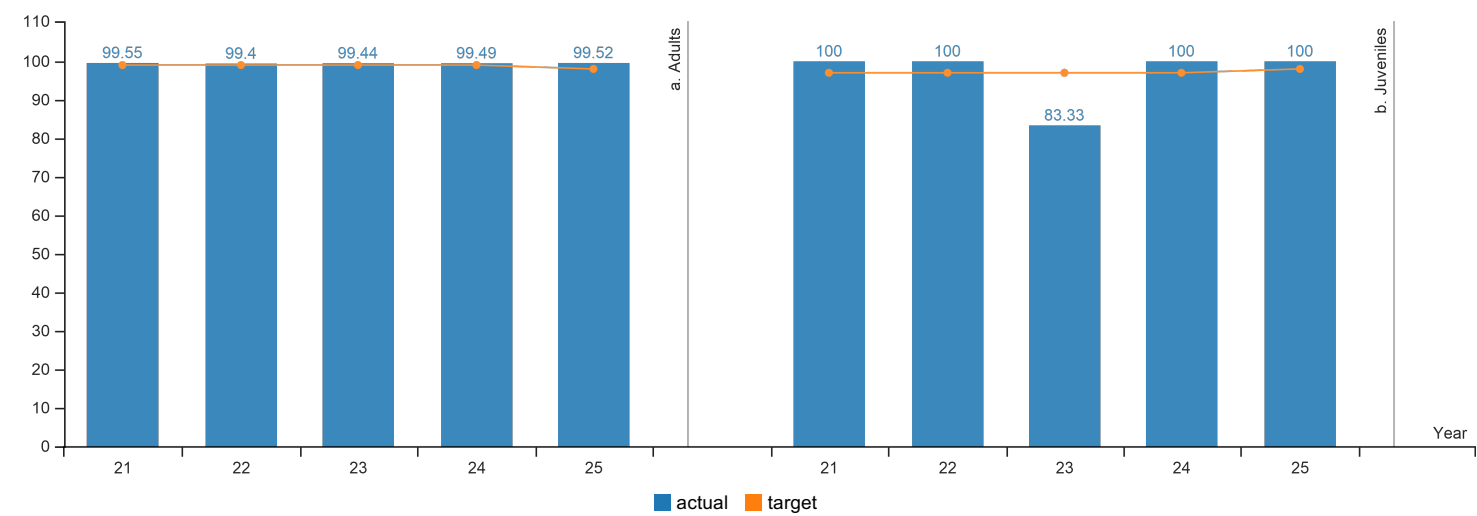
The timing of PSRB hearings is closely linked to the number of individuals under the Board's jurisdiction. While the PSRB can accurately determine the minimum number of two-year and five-year hearings required annually based on its current caseload, additional hearings are necessary in response to provider or client requests (up to every six months), new adjudications (within 90 days), and revoked conditional releases (within 20 days). The Board uses good faith continuances strategically to manage its docket and prioritize hearings mandated by statute.

Funding and technological resources are crucial to maintaining timely hearings. With a team of only 13 full-time employees, each staff member plays a vital role in ensuring hearings are scheduled promptly. The PSRB anticipates the replacement of its current case management system will result in automated scheduling, enhanced communication, and generation of dashboards that will streamline several processes, enhancing efficiency. Conversely, reductions in staff without corresponding technological upgrades could severely impact the Board's ability to conduct hearings on schedule.

Witness and attorney availability also influence hearing timeliness. The PSRB coordinates witness schedules, a task typically managed by attorneys in other court settings, using a process that involves numerous phone calls and emails. The absence of dedicated docketing software further complicates this coordination. Consequently, any reduction in staffing could significantly hinder the Board's ability to maintain timely hearings.

Access to required documentation and the timely completion of evaluations or assessments also affect hearing timeliness. The agency is responsible for collecting and processing all materials necessary for the Board to make informed decisions. Over the past two years, the Board has improved this process by investing in a secure file-sharing system that makes document submission significantly easier for providers. Despite these improvements, the agency remains dependent on the timely completion and submission of these documents in order to schedule and hold hearings as required.

KPM #3	MAINTENANCE OF RELEASED CLIENTS - Percentage of conditional releases maintained in community per month.
	Data Collection Period: Jan 01 - Jun 30



Report Year	2021	2022	2023	2024	2025
a. Adults					
Actual	99.55%	99.40%	99.44%	99.49%	99.52%
Target	99%	99%	99%	99%	98%
b. Juveniles					
Actual	100%	100%	83.33%	100%	100%
Target	97%	97%	97%	97%	98%

How Are We Doing

The PSRB has consistently excelled in maintaining clients on conditional release, achieving a minimum maintenance rate of 99% every year since at least 2010. The Board is on track to meet or exceed this benchmark again in 2025. As of June 30, 2025, the Board oversaw an average of **[X] adult clients on conditional release each month**, with a 99.52% maintenance rate so far this year.

Juvenile clients have shown similarly strong outcomes. In January 2025, the Board supervised three juveniles on conditional release; by May, this number dropped to two after the Board determined that one youth should be discharged from its jurisdiction. With no revocations of juvenile clients, the maintenance rate for youth remains 100% in 2025.

These outcomes represent the collective efforts of the PSRB, the Oregon Health Authority, and community providers to respond quickly and collaboratively when challenges arise for individuals under PSRB jurisdiction who are living with serious and persistent mental illness and elevated risk. Through coordinated interventions, partners are able to address issues before they escalate to the point of requiring revocation. By sustaining such high rates of success on conditional release, the system helps clients remain in the community with appropriate supports while avoiding unnecessary returns to the Oregon State Hospital, preserving those scarce and valuable hospital beds for individuals in acute crisis who most need them.

Although revocations are sometimes required to protect public safety, they remain rare and are pursued only after careful deliberation. The PSRB and its partners proactively intervene when challenges arise, working to stabilize clients in the least restrictive setting possible. This collaborative approach not only safeguards the community, but also demonstrates Oregon’s commitment to helping clients thrive outside the hospital and build lives rooted in treatment, accountability, and recovery.

Factors Affecting Results

The PSRB's ability to safely and effectively maintain clients on conditional release is influenced by factors closely related to those affecting recidivism: robust partnerships and the availability of community resources.

Partnerships and Collaboration: Effective conditional release management relies heavily on the collaborative efforts between the PSRB, Oregon State Hospital (OSH), and community providers. The PSRB approves conditional release only when it is confident that the client can be safely managed within the community. This confidence is built through a comprehensive review process, including full hearings where OSH and community treatment providers present evidence about the client's conditional release plan. This plan is developed through a rigorous five-layer review process involving OSH's assessment of each client's risk for recidivism, relapse, and psychiatric decompensation. Access to adequate training and resources is critical for OSH to accurately evaluate these risks and recommend appropriate levels of monitoring, supervision, and treatment, which community providers then implement. Any reduction in the PSRB's ability to obtain accurate information from partners or a decline in the training and resources available to these partners could undermine the effectiveness of conditional release plans and hinder the detection of early signs of decompensation, thereby negatively impacting the maintenance of clients on conditional release.

Community Resources: The availability and adequacy of community resources play a crucial role in maintaining the safety and effectiveness of conditional releases. For example, when a client experiences a significant change in psychiatric stability, access to local hospitals, crisis stabilization centers, and other respite placements is essential for managing these changes without resorting to revocation to OSH. Similarly, early detection of decompensation by providers allows for timely intervention, such as stepping up to a higher level of care like a residential treatment home, rather than revocation. The availability of specific treatment modalities and supports, such as substance abuse treatment or medical care, is also critical. When community mental health and housing resources are fully funded and accessible, the PSRB can effectively use these options to avoid unnecessary revocations and preserve state hospital resources for those in acute need. Conversely, a reduction in these community resources would limit the options available for managing clients, potentially leading to an increased number of revocations due to a lack of suitable alternatives. More robust community resources could have mitigated some past revocations by providing timely and appropriate support to clients in need.

Workforce Capacity: Workforce shortages are a significant challenge in maintaining clients on conditional release. The PSRB's ability to oversee and manage conditional release plans effectively depends on having a sufficient number of skilled, internal staff members. When staff levels are inadequate, it becomes more challenging to conduct thorough reviews, ensure compliance with treatment protocols, and respond promptly to emerging issues. Moreover, the effectiveness of conditional release management hinges on the availability of qualified community providers to deliver monitoring, supervision, and treatment services in accordance with the conditional release plan. High turnover among community providers can undermine the consistency and quality of these services. The PSRB collaborates with the Oregon Health Authority (OHA) and the Department of Human Services (DHS) to provide ongoing training and support for providers, but workforce shortages and gaps in training can impact the efficacy of conditional release plans. Reductions in staff or insufficient training resources may compromise the ability to enforce release conditions and address emerging issues promptly.

OHA Prioritization Rule: The Oregon Health Authority's prioritization rule, while intended to ensure timely admissions to the Oregon State Hospital, has created unintended consequences for the PSRB's ability to maintain clients safely in the community.

Loss of Flexibility for Step-Ups: Under the current rule, all residential placements are required to maintain waitlists that prioritize individuals discharging from OSH. As a result, clients in lower-priority, more independent community placements cannot be stepped up to residential treatment facilities, even when doing so would prevent decompensation, and even when revocation to OSH is not clinically necessary. Prior to the adoption of this rule, the PSRB was able to use residential placements proactively to support clients in crisis or at elevated risk, reducing the likelihood of revocations. The inflexibility of the current prioritization rule has removed that option, and inadvertently creates a zero-sum scenario: although the rule's goal is to free hospital beds by prioritizing discharges, it paradoxically forces some clients into the hospital who never clinically needed to be there in the first place. Similarly, individuals who may be eligible for conditional release at the outset of their GEI commitment face a choice between living in settings that are too independent, thereby increasing the risk of revocation, or being committed directly to OSH.

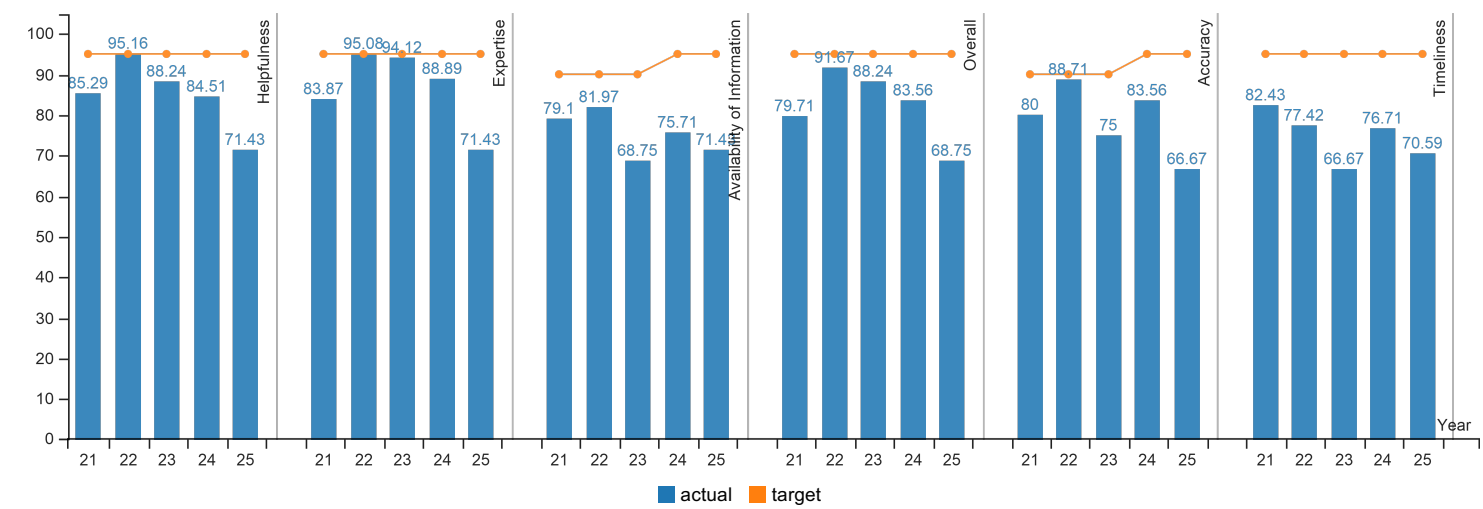
Loss of Specialized Residential Placements: The implementation of the OHA prioritization rule has also effectively eliminated the PSRB's ability to use specialized residential placements, creating new challenges for maintaining clients safely in the community. Historically, many residential programs specialized in either PSRB clients or non-PSRB populations (e.g., Aid and Assist), allowing treatment approaches to be tailored to each group's unique clinical and legal needs. Removing providers' ability to decline admissions based on supervisory entity, forces programs to accept both PSRB and non-PSRB clients. This risks eroding treatment integrity, increasing confusion around supervision roles, and destabilizing both populations. PSRB clients, due to adjudicated risk of dangerousness, require intensive public safety oversight and structured treatment approaches that not all programs are equipped to provide. Research grounded in the Risk-Need-Responsivity (RNR) model consistently warns against mixing high-risk individuals with lower-risk populations; such practices can increase behavioral issues, weaken therapeutic alliances, and worsen clinical outcomes. In practice, placing PSRB clients in settings that cannot meet their specialized needs increases the likelihood of conditional release violations or revocations, driving unnecessary returns to the Oregon State Hospital and compounding system pressures.

System Capacity and Operational Impacts:

Expanding the pool of providers required to accept PSRB clients also increases the Board's workload related to training, coordination, and oversight. Currently, PSRB has just two paralegals covering all programs statewide; implementation of this rule would likely necessitate at least one additional FTE to ensure adequate support and communication across a broader set of residential programs. Importantly, while ensuring availability of placements is not PSRB's statutory responsibility, the practical burden of this change will fall largely on the PSRB, requiring increased staffing and budgetary resources to maintain safety and performance on conditional release.

Should this rule remain in effect, the Board anticipates that this new constraint will impact its ability to maintain high conditional release success rates, posing a risk to performance on this measure in the near term.

KPM #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.
	Data Collection Period: Jan 01 - Jun 30



Report Year	2021	2022	2023	2024	2025
Helpfulness					
Actual	85.29%	95.16%	88.24%	84.51%	71.43%
Target	95%	95%	95%	95%	95%
Expertise					
Actual	83.87%	95.08%	94.12%	88.89%	71.43%
Target	95%	95%	95%	95%	95%
Availability of Information					
Actual	79.10%	81.97%	68.75%	75.71%	71.43%
Target	90%	90%	90%	95%	95%
Overall					
Actual	79.71%	91.67%	88.24%	83.56%	68.75%
Target	95%	95%	95%	95%	95%
Accuracy					
Actual	80%	88.71%	75%	83.56%	66.67%
Target	90%	90%	90%	95%	95%
Timeliness					
Actual	82.43%	77.42%	66.67%	76.71%	70.59%
Target	95%	95%	95%	95%	95%

How Are We Doing

The PSRB has used the standardized customer service survey developed in 2004 for State agencies. While overall scores have generally been positive over the years, two persistent challenges have been identified over time: low response rates and the relevance of survey questions to the Board's services.

Around 2018, the Board recognized that survey response rates, particularly from clients and victims, were low. To address this, in 2019 the PSRB revised its approach, distributing a survey with every Board order rather than limiting dissemination to twice per year. This expanded distribution was intended to give all respondents, including clients and victims, the opportunity to provide feedback after each hearing.

Prior to 2019, most survey responses came from direct service providers, who interact regularly with the Board and generally report higher satisfaction. While these higher scores suggested positive performance, they did not necessarily reflect the experiences of clients and victims. The limited feedback from these groups effectively masked issues or concerns unique to their experiences.

With broader dissemination, response rates from clients and victims have only somewhat increased. However, this increase has been sufficient to reveal a downward trend in overall customer service scores compared to past years. This decline does not necessarily indicate reduced service quality; rather, it reflects the fact that the responses now include feedback from individuals who have limited direct interaction with the Board. For these respondents, survey questions are not well-aligned with the Board's services, and feedback often reflects dissatisfaction with hearing outcomes rather than the quality of service itself, contributing to lower satisfaction scores.

Recognizing this pattern, in 2023 the PSRB formally acknowledged that the standardized survey questions were not fully reflective of the Board's role or services. For clients and victims, who have little or no interaction with Board staff outside of hearings, responses tend to measure satisfaction with hearing *results* rather than staff performance or service quality. To address this, the PSRB began reporting survey results separately by respondent type:

- **Frequent Contacts:** Attorneys, case managers, and OSH staff
- **Infrequent Contacts:** Clients and victims

This distinction provides a more accurate interpretation of survey results, highlighting disparities between groups and emphasizing the need for more targeted survey tools that capture meaningful feedback for those with infrequent interactions.

2025 Results (through June 2025)

Applying this approach to the first six months of 2025 highlights the continued low response rates and the disparity in survey results between frequent and infrequent contacts:

- **Frequent Contacts (n=2):** 11 of 12 possible responses were positive, including a 100% Overall positive rating.
- **Infrequent Contacts (n=13):** Overall positive rating was only 58.33%, with all other measures below 65%:
 - Helpfulness of Employees: 60.0%
 - Knowledge and Expertise of Employees: 60.0%
 - Availability of Information: 60.0%
 - Provide Services Correctly the First Time (Accuracy): 63.64%
 - Timeliness of Services: 61.54%

These results confirm that, while the PSRB has made some progress in increasing survey participation among clients and victims, response rates remain relatively low, and scores for infrequent contacts continue to lag. This disparity reflects both the limited interaction between the Board and these respondents and the survey's focus on hearing outcomes rather than customer service, which continues to limit the tool's ability to capture meaningful feedback, particularly for infrequent contacts.

Additionally, the Board has only received two responses from frequent contacts to date. This low number is typical for this time of year, as most feedback from this group has historically been collected during the annual Forensic Conference, held in the fall. With the 2025 conference canceled due to OHA budget constraints, this primary feedback channel is unavailable. To address this gap, the Board launched a new training series in 2025 specifically for case monitors. Survey data from this series will be reported in the final 2025 APPR.

Looking forward, the PSRB remains committed to refining its survey tools and methodology, with the goal of capturing more accurate and actionable feedback across all respondent groups, supporting continuous improvement in customer service delivery.

Factors Affecting Results

Nature of PSRB Services: For victims and clients, interactions with the PSRB primarily occur through contested hearings. Dissatisfaction with the decisions from these hearings can skew satisfaction

scores, as feedback may be more reflective of the outcome than the quality of service provided. Moreover, victims and clients' connection with PSRB is often indirect and involves intermediaries, such as legal representatives, treatment providers, and advocates, who directly interact with victims and clients. As a result, PSRB satisfaction levels may be influenced more by the quality of service provided by these intermediaries than by the PSRB itself. This dynamic complicates the PSRB's ability to gauge satisfaction with its direct service, as issues experienced with intermediaries might skew perceptions of the PSRB's overall service quality.

Survey Timing: Surveys are distributed immediately after contested hearings and Board decisions, potentially leading to feedback focused on the outcome of the hearing rather than PSRB services. This timing issue may skew results towards dissatisfaction with decisions rather than the overall quality of the service provided.

Survey Tool Limitations and Future Directions: As previously reported, a single survey tool to gauge satisfaction across a variety of customer group, such as service providers, victims, and clients, has proven challenging. To address these issues, the PSRB is committed to refining its survey methodology that align with State guidelines, and as outlined in its Strategic Plan. In June 2024, a customer service improvement project was initiated and integrated into the agency's strategic plan. This project aims to develop a more targeted survey approach, specifically for clients that is better tailored to their specific needs and services. The goal is modified survey questions that will better inform the PSRB and provide more actionable insights for improving our services. To the extent that the decline in satisfaction scores may reflect actual decreases in service quality, influenced by recent staff changes, ongoing efforts will focus on enhancing service delivery and ensuring that new staff are fully integrated to restore and improve overall service quality.

Although this project is underway, a continuing factor in this measure is the PSRB's limited capacity to create survey tools that are accurate and relevant for the different groups we serve. Our Strategic Plan and DEI Progress Report show we have begun addressing this through a Customer Service Improvement Project launched in 2024 to redesign surveys and tailor questions by group served (e.g., clients, victims, attorneys, providers). Through our recent succession planning work, we have also identified gaps in staffing that limit our ability to carry this project forward. In 2025, we took an important step by hiring an Operations and Policy Analyst, with the goal of advancing survey redesign at the end of 2025 and into early 2026. Until this work is complete, surveys remain misaligned and less informative, particularly for clients and victims, who rarely interact with PSRB staff outside of hearings. With the right staffing in place, we anticipate being able to create more accurate tools that generate meaningful, actionable feedback.

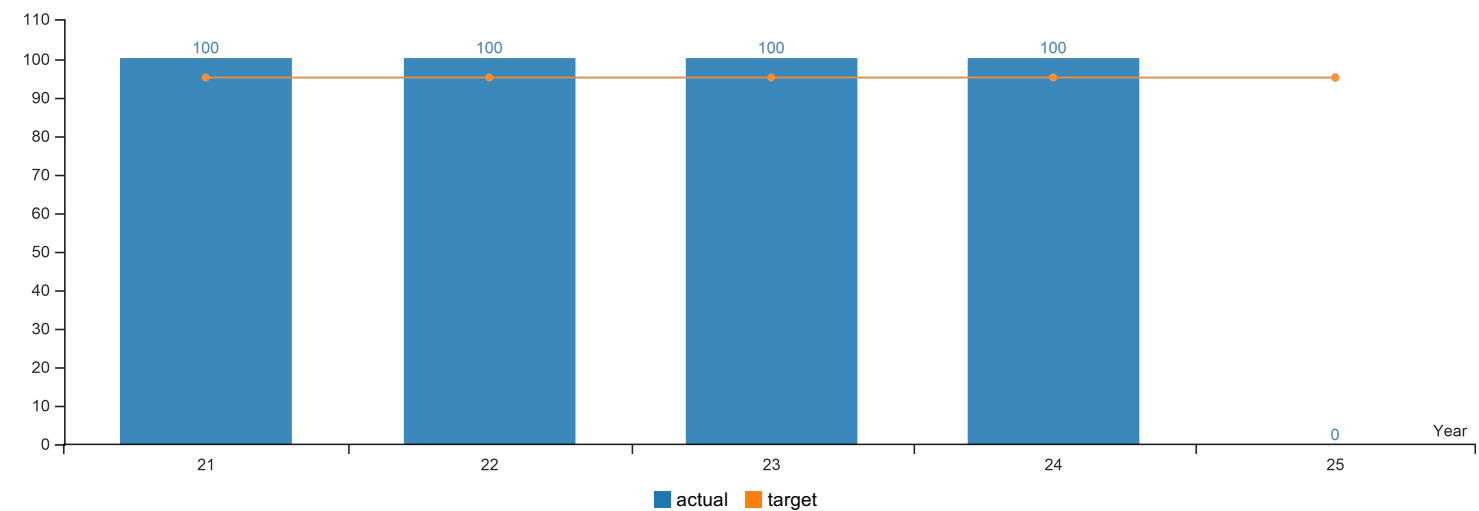
Alternative Feedback Channels

Historically, the PSRB collected the majority of its customer service surveys through the annual Forensic Conference, which convened direct service providers responsible for monitoring and supervising clients in the community. With the cancellation of the 2025 conference due to OHA budget constraints, this primary feedback channel was lost. To help fill the anticipated loss of opportunity to get provider feedback, the PSRB launched a new training series in 2025 specifically for case monitors. These sessions are designed to strengthen oversight practices while also providing an opportunity to gather structured feedback. While more limited in scope than the conference, this series ensures that provider perspectives continue to inform the Board's understanding of service effectiveness and system needs. The PSRB plans to include preliminary survey data from this training series in its 2025 APPR, creating a new mechanism to track and report on provider experiences.

Looking ahead, the PSRB's ultimate goal is to build on this progress by incorporating surveys from this and other professional trainings the agency provides. The agency will continue to assess whether to propose new/modify its reported Key Performance Measures as progress is made with this project.

KPM #5	BEST PRACTICES - Percent of total best practices met by the Board.
	Data Collection Period: Jan 01 - Dec 31

* Upward Trend = positive result



Report Year	2021	2022	2023	2024	2025
Percentage of Best Practices Met					
Actual	100%	100%	100%	100%	
Target	95%	95%	95%	95%	95%

How Are We Doing

The Psychiatric Security Review Board (PSRB) consistently evaluates its adherence to best practices during the first quarter of each calendar year, reviewing performance from the previous year. The Board will not have data on this measure for 2025 until January of 2026. For 2024, the Board confirmed that it met all 15 surveyed categories 100% of the time, reflecting strong operational, financial, and governance performance. This includes maintaining current performance expectations for the Executive Director, providing annual performance feedback, and updating and adhering to a comprehensive Strategic Plan with high-level goals. The Board actively participates in policy-making, reviews budgets and financial information, ensures compliance with accounting rules and internal controls, and coordinates with relevant stakeholders and partner agencies to advance agency objectives. Board members consistently fulfill their roles as public representatives, complete required training, and review management practices to promote efficiency, transparency, and accountability. In addition, the agency successfully implemented hybrid-remote work arrangements, maintained zero staff turnover, and ensured productivity and service continuity. Overall, these results demonstrate that the PSRB not only meets statutory and procedural expectations but also embodies best practices across governance, financial stewardship, staff management, and service delivery. A detailed companion memo further describing the PSRB’s adherence to each of the 15 best practice categories is available upon request.

Historically, the PSRB reported this performance measure on a biennial basis, surveying Board members in the fall of even-numbered years. However, starting in 2021, the Board began annual reporting. The PSRB achieved its target on this measure in 2016, 2018, 2020, 2021, 2022, 2023, and 2024 with performance exceeding the target goal of 95% and reaching 100%. It is anticipated that a similarly strong performance will continue for 2025.

Factors Affecting Results

The PSRB consistently meets its best practice standards, supported by clear communication, strong internal processes, and ongoing engagement between agency leadership and the Board

members. While the agency does not anticipate any challenges in meeting these standards, several contextual or operational factors could theoretically influence performance.

Potential factors include leadership transitions or delays in scheduling Executive Director performance reviews, which could temporarily impact oversight or alignment with best practices. Changes in statutory mandates, state policy priorities, or the scope of agency programs could require rapid adjustments to the Strategic Plan or policy guidance. Similarly, limitations in staff capacity, extended absences, or competing obligations for part-time Board members could affect the timeliness of reporting, review of budgets or policy proposals, and participation in required training sessions. Financial oversight could theoretically be impacted by delays in accounting services or unanticipated audit findings, though strong internal controls mitigate this risk.

The PSRB actively manages these potential factors through open communication and a commitment to transparency. The executive director keeps Board members informed about significant agency matters, including adherence to best practices, through quarterly administrative meetings, monthly consultations with the Board chair, and targeted trainings for new members. Board members rely on these updates to stay current on staff accomplishments, policy developments, budgetary issues, and best practice methods despite the part-time nature of their roles and limited daily contact with agency operations. Targeted orientation and ongoing training ensure that both new and returning members are well-prepared to evaluate agency performance. Regular reporting, structured review processes, and clear delegation of management responsibilities further reinforce adherence to best practices, providing confidence that potential factors affecting results are effectively mitigated.